



Story and response listing

About this report

This report lists a selection of stories and responses published on Care Opinion.

It was created on **22 September 2025**.

Which postings are included?

This report shows stories in the **Care Opinion** subscription, which includes all stories.

The report is also filtered to show only all stories about Southern Health & Social Care Trust published on or after 01/01/2025 with a response indicating 'has a change made'

Frequently asked questions

How do I find the original story online?

If you are viewing the report on a computer, you may be able to click the reference number to the right of the story. This will take you to the story online. If you are viewing the report on paper, you can find story number X online at: <https://www.careopinion.org.uk/X>

Why might a story appear more than once in the list?

Some stories are about more than one service. If so, the story will be listed under each service it is about.

What do the story counts mean?

To the right of an organisation/service you will see a count. This tells you the number of stories listed in the report about that organisation or service (including any services run by that organisation/service).

What do the view counts mean?

The view count to the right of a story tells you the number of times the story has been viewed on Parameters!SiteName.Value by public users (excluding subscribers and the PO team).

Why might unexpected services appear in my report?

The services listed in the report depend on the stories that are included, and that depends on how you have filtered the report. So, for example, if you have filtered only according to where authors live, you may find they have used services some distance away.

Sharing and reuse

Contributors to Care Opinion want their stories to get to those who can use them to make a difference, so we encourage you to share these stories and responses with others.

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About Care Opinion

Care Opinion is a not-for-profit social enterprise which enables people to share the story of their care, and perhaps help care services make changes.

For more information, contact us via: <https://www.careopinion.org.uk>

Show/hide responses

This report lists **17** stories

2 West Maternity

1 story

Type 1 diabetes and pregnancy

1331331

Usekg68 the patient 07/03/2025

184 views

I had my baby in December and have been a type 1 diabetic for as long as I can remember. I understand that managing diabetes during pregnancy is challenging. However, I felt unprepared due to the lack of a comprehensive birth plan.

At my 36-week appointment, I was 36 weeks and 5 days along. During this visit, both my diabetic specialist and consultant examined me. The consultant performed an ultrasound and noted that my baby was measuring large—a common occurrence in type 1 diabetes pregnancies. He immediately recommended a cesarean section (C-section), which I was hesitant about and expressed my concerns. Despite this, I felt pressured and as though I had no alternative.

Previously, at my 32-week appointment, a doctor had also observed the baby's large size but mentioned the possibility of induction at 37 weeks to facilitate a natural birth. In contrast, during the 36-week appointment, the other doctor dismissed induction as an option. They emphasized potential complications of a vaginal delivery, such as shoulder dystocia, which could necessitate pushing the baby back into the birth canal or even fracturing the baby's bones. These doctors' explanations were overwhelmingly negative, instilling fear rather than providing balanced information.

When I inquired about induction at 37 weeks, I felt this same doctor asserted their medical authority, insisting that a C-section was the superior choice. I became emotional, feeling stripped of any real choice. I found the response I received was dismissive; they went on to question why I was upset about a C-section, noting that many women prefer them nowadays.

This lack of empathy was disheartening. As a first-time mother, I had hoped to experience natural childbirth, including labour contractions. I was open to a C-section if complications arose during labor, but I wanted the opportunity to try for a natural birth. The prospect of a planned C-section made me feel disconnected from the birthing experience, and even now, I sometimes struggle with feelings of inadequacy as a mother.

During this consultation, while I was visibly upset, I feel the doctor pressured me for a decision regarding the C-section. I was given only an hour to decide, leaving me feeling cornered. Reluctantly, I agreed to the C-section but requested it be scheduled at 37 or 38 weeks due to breathing difficulties and previous episodes of reduced fetal movements, which had caused me significant anxiety. Yet again the doctor dismissed my concerns, stating that delivering before 39 weeks via C-section was unsafe and refused to consider an earlier date.

I couldn't help but wonder if the consultant's insistence on a C-section was influenced by personal biases, especially since the other doctors had been more supportive of induction and natural birth options. It seemed as though the doctor had made the decision for me, disregarding the fact that many women successfully deliver large babies naturally. Once the C-section was scheduled, there was little discussion about my preferences for the procedure. Unlike others I've heard of, I wasn't offered options like having my partner cut the umbilical cord or choosing music during the surgery. In my overwhelmed state, I forgot to ask about these details.

Despite these challenges, I am grateful to the nurses and surgical team who performed the delivery; they exceeded my expectations and provided excellent care. However, the consultant's refusal to consider a natural birth still weighs heavily on my mind.

Post-surgery, my experience was less than ideal. Being bedridden for the first day, my partner took on all

newborn care tasks, including feeding, burping, and diaper changes, as I was immobile. When he left for the night, I realized I hadn't been taught how to burp the baby or how tight to fasten a diaper. Feeling in my legs returned around 9 or 10 p.m., but my partner had to leave by 10:30 p.m., leaving little time for him to guide me. Having never held a newborn before, I was in significant pain and lacked basic caregiving knowledge. Throughout the night, my baby was unsettled for about five hours. Despite ringing the call bell for assistance, the midwife who responded dismissed my concerns, stating the baby would settle eventually, and left without offering help. Later, when I needed to use the bathroom, I took my crying baby with me and asked the staff to hold her briefly. They burped her during this time, realizing she had been uncomfortable, which finally allowed me to rest around 6 a.m.

Additionally, during my recovery, the doctor who had insisted on the C-section visited me and remarked that they had told me I would have a big baby? These comments felt smug and insensitive, especially considering my baby weighed 9.10 lbs at 39 weeks.

Throughout my pregnancy, I found it challenging not having a consistent consultant or midwife. Despite fortnightly visits, I often saw different professionals, each offering varying advice. Initially, I was assigned different diabetic specialists, requiring me to repeatedly explain my medical history. I requested continuity of care with a specific doctor to build rapport and ensure they understood my case. However, even towards the end of my pregnancy, I sometimes had to see other doctors who made minimal adjustments to my insulin regimen, necessitating follow-up appointments with my preferred specialist.

This lack of continuity and the feeling of being unheard added significant stress to my pregnancy journey.

Maria Garvey *Lead Midwife COMC / Antenatal clinic CAH Southern Health and Social Care Trust 10/03/2025*

Good morning Usekg68

I am very sorry to read of your experience whilst attending the antenatal clinic and would be very keen to speak to you regarding this.

Could you please send your name and contact number to my work email maria.garvey@southerntrust.hscni.net and I will make contact with you.

Kind regards

Maria Garvey

Maria Garvey *Lead Midwife COMC / Antenatal clinic CAH Southern Health and Social Care Trust 20/03/2025*

Good evening Usekg68

Further to my previous response to you I would like to update with the actions I have taken.

I have directly shared your story with both the Obstetric and Midwifery teams for reflection and learning and they have been reminded of the principles of shared decision making ensuring that women are involved in all aspects of their care.

We recognize how frustrating it is to have to repeatedly discuss your medical history with the many disciplines you encountered during your pregnancy journey. However with Encompass (new computerized system) being introduced in Southern Health and Social Care Trust in May 2025, we hope this will reduce the need for repeat duplication of medical history in future.

I would still be keen for you to make contact with me so we can discuss further your personal experience.

My contact details are maria.garvey@southerntrust.hscni.net or telephone 02837561562

Again I would like to take this opportunity to apologize to you for how you felt during your first pregnancy journey and hope both you and your baby are keeping well.

Kind regards

Maria Garvey

We have made
a change

Adult Community Services

2 stories

Residential Care

2 stories

All the staff were excellent

1314050

Cloughreagh a staff member posting for a patient/service user 22/01/2025

97 views

I went to Cloughreagh House for rehabilitation following a stay in hospital for pneumonia and reduced mobility. I found Cloughreagh to be a brilliant place, all the staff were excellent from the physio's that came to work with me to the care staff, kitchen staff and domestic staff keeping the place clean and tidy.

They have a very good rehabilitation gym which helped me to improve my mobility.

The care staff in Cloughreagh house put on activities every day to keep us entertained - I even won a prize in an activity.

If I had one comment to make which is not a reflection on the staff they could do with more wheelchairs to bring people to and from the dining room when needed

Stephanie Campbell Senior Support worker Cloughreagh House Southern Health and Social Care Trust 30/01/2025

Thank you for taking the time to tell us about your experience of Cloughreagh House. We always welcome feedback and it both reassures us here that we are providing care with a person centred approach and also gives suggestions for improvement to our service. The idea for the gym came from feedback from service users and it is proving to be a great addition to our service providing a designated area and equipment for the rehabilitation and exercise programs ongoing daily with the physiotherapy and occupational therapy teams.

We are
preparing to
make a change

The Cloughreagh House team realise the positive benefits of providing activities and encouraging our service users to become involved in them. The staff have a varied program of organised group activities and tailor them to the service users participating in them. The staff also carry out one to one individual activities with the service users.

Thank you for the comment regarding wheelchairs, the number of service users requiring to use a wheelchair varies from day to day and the time you were here was particularly busy for wheelchairs. We will review our supply and purchase more if necessary.

Once again thank you for your positive feedback, I will share this with our staff team here and on behalf of Cloughreagh I would like to wish you well on your onward journey to recovery.

Regards

Stephanie Campbell

Senior Residential Worker

Cloughreagh House

Stephanie Campbell Senior Support worker Cloughreagh House Southern Health and Social Care Trust 05/06/2025

I just want to give an update on the previous response to your care opinion. We have purchased some new wheelchairs and we are satisfied that at present we have an adequate supply for daily use by our service users.

We have made
a change

Regards

Stephanie Campbell

Senior Residential Worker

Cloughreagh House

An ideal step from hospital to home

1318321

Cloughreagh a staff member posting for a patient/service user 30/01/2025

93 views

Cloughreagh House is an ideal step from hospital to home. I think older people really need as service like this, it's very hard for them just to step out of a hospital bed and go home, Cloughreagh is a good preparation for going home.

The staff supported me by encouraging me to be independent and do what I was able to do for myself and if I wasn't able to manage I was able to get help. I found the staff very very helpful.

I didn't actually realise what Cloughreagh Home offered, I came here years ago to visit when it was an old peoples home. I was asked in hospital to come and my family encouraged me because I knew I wasn't fit to be going home. The staff have advised me there are leaflets available in the hospital about Cloughreagh but I wasn't given one, I think that would be a great help to people.

I was amazed at the Gym, that is great, it made me feel that I was progressing well. The physio and OT know what you need to do to improve and they show you the exercises however if you are going to improve you need to follow their advice and help yourself., no one can do it for you.

I really felt safe and I was very well looked after. I was given lots of reassurance. The senior staff at Cloughreagh have impressed me and they come across very confident in their role, I honestly thought they were all nurses and I commend them for their professionalism.

All the staff were lovely , the food was excellent and I really feel better and ready for home after my time here.

Kate McBeth *Residential Care* Southern Health and Social Care Trust 30/01/2025

Thank you so much for taking the time to share your story on Care Opinion. I am so pleased to hear that you had such a positive experience and that you really benefited from your time in Cloughreagh House.. The gym was an initiative introduced following feedback from other Service Users and to date it appears to play a key role in improving and enhancing rehabilitation outcomes.

We are
preparing to
make a change

I am disappointed to hear that you did not receive any information about the Service in Cloughreagh House. We had developed an information leaflet for patients and for staff in acute which we hoped would be shared with patients who was recommended for the rehab service. I will follow this up with the relevant professionals involved with the service so that the information leaflets can be made widely available.

Thank you also for your comments regarding the competency of the staff. Staff employed in Cloughreagh House are all social care staff who are all highly skilled, all staff are required to undertake all the relevant training so they can provide safe and effective care. for Service Users under our care. Staff are registered with the the professional body NISCC and are required to uphold the Code of Conduct,, staff have a strong value base of respect, dignity and equality.

I would like to take this opportunity to thank you again for sharing your experience, and I truly hope your recovery journey continues while you are at home. I will pass on your lovely feedback to team.

Take care

Kind Regards

Kate Mc Beth

Manager

Christine Armstrong *Care Opinion Facilitator* Southern Health and Social Care Trust 01/08/2025

Thank you so much again for providing this feedback about your experience in Cloughreagh House. As a result of your feedback the staff have advised us that they have published a new leaflet giving information about the Cloughreagh Rehabilitation Service. Hopefully this will help to inform prospective service users so that they will know what to expect and receive from the service in advance of their admission.

We have made a change

Many thanks again for your valuable feedback

With best wishes

Christine Armstrong

Care Opinion Facilitator

![Image](https://www.careopinion.org.uk/resources/posting-images/responses/3b9da9c7c7e04a9395805196c523ec94.png)

[Leaflet 1](https://www.careopinion.org.uk/resources/posting-images/responses/3b9da9c7c7e04a9395805196c523ec94.png)

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[Leaflet 2](https://www.careopinion.org.uk/resources/posting-images/responses/abd6db847d8045388bc2ac47f40e3156.png)

Children and Young People Services	1 story
Specialist Child Health & Disability	1 story
Children's continence service	1 story

Suggest information collected in advance

1305027

authenticjq69 a carer 06/01/2025

264 views

We took our foster child for his first continence appointment. The child has a learning disability, ASD and ADHD. Julie the nurse was excellent in gathering the relevant information from us and giving us good instructions and handouts to seek child friendly online resources. Julie was particularly kind to our foster child who became less interested as we neared the end of the appointment.

There were a lot of questions we were not able to answer given the nature of our role as foster carers. May I suggest the fact finding information be collected prior to visit. I didn't like discussing the details of our foster child's history in front of him.

Jean McCracken *Manager* Southern Health and Social Care Trust 13/01/2025

Thank you so much for your feedback after attending the children's continence clinic for your foster child's first appointment. I am delighted to hear of Julie's kindness displayed and have no doubt this has contributed to a positive experience. I trust the information provided will indeed be very useful as you support this young child on their journey to gaining healthy bladder and bowel activity.

We have made a change

We have taken on board your suggestion in regards to history taking and will be able to apply to individual cases, as required, going forward.

I was delighted to share your care opinion story with Julie and it has provided her with a real boost to her practice and is very much appreciated.

I wish you well as you support this special young child through our service.

Kind regards

Jean

Delivery suite	1 story
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Type 1 diabetes and pregnancy

1331331

Usekg68 the patient 07/03/2025

184 views

I had my baby in December and have been a type 1 diabetic for as long as I can remember. I understand that managing diabetes during pregnancy is challenging. However, I felt unprepared due to the lack of a comprehensive birth plan.

At my 36-week appointment, I was 36 weeks and 5 days along. During this visit, both my diabetic specialist and consultant examined me. The consultant performed an ultrasound and noted that my baby was measuring large—a common occurrence in type 1 diabetes pregnancies. He immediately recommended a cesarean section (C-section), which I was hesitant about and expressed my concerns. Despite this, I felt pressured and as though I had no alternative.

Previously, at my 32-week appointment, a doctor had also observed the baby's large size but mentioned the possibility of induction at 37 weeks to facilitate a natural birth. In contrast, during the 36-week appointment, the other doctor dismissed induction as an option. They emphasized potential complications of a vaginal delivery, such as shoulder dystocia, which could necessitate pushing the baby back into the birth canal or even fracturing the baby's bones. These doctors' explanations were overwhelmingly negative, instilling fear rather than providing balanced information.

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This lack of empathy was disheartening. As a first-time mother, I had hoped to experience natural childbirth, including labour contractions. I was open to a C-section if complications arose during labor, but I wanted the opportunity to try for a natural birth. The prospect of a planned C-section made me feel disconnected from the birthing experience, and even now, I sometimes struggle with feelings of inadequacy as a mother.

During this consultation, while I was visibly upset, I feel the doctor pressured me for a decision regarding the C-section. I was given only an hour to decide, leaving me feeling cornered. Reluctantly, I agreed to the C-section but requested it be scheduled at 37 or 38 weeks due to breathing difficulties and previous episodes of reduced fetal movements, which had caused me significant anxiety. Yet again the doctor dismissed my concerns, stating that delivering before 39 weeks via C-section was unsafe and refused to consider an earlier date.

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Despite these challenges, I am grateful to the nurses and surgical team who performed the delivery; they exceeded my expectations and provided excellent care. However, the consultant's refusal to consider a natural birth still weighs heavily on my mind.

Post-surgery, my experience was less than ideal. Being bedridden for the first day, my partner took on all newborn care tasks, including feeding, burping, and diaper changes, as I was immobile. When he left for the night, I realized I hadn't been taught how to burp the baby or how tight to fasten a diaper. Feeling in my legs returned around 9 or 10 p.m., but my partner had to leave by 10:30 p.m., leaving little time for him to guide me. Having never held a newborn before, I was in significant pain and lacked basic caregiving knowledge. Throughout the night, my baby was unsettled for about five hours. Despite ringing the call bell for assistance, the midwife who responded dismissed my concerns, stating the baby would settle eventually, and left without offering help. Later, when I needed to use the bathroom, I took my crying baby with me and asked the staff to hold her briefly. They burped her during this time, realizing she had been uncomfortable, which finally allowed me to rest around 6 a.m.

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that they had told me i would have a big baby? These comments felt smug and insensitive, especially considering my baby weighed 9.10 lbs at 39 weeks.

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This lack of continuity and the feeling of being unheard added significant stress to my pregnancy journey.

Would recommend? (Friends and family test): Neither likely nor unlikely

Maria Garvey *Lead Midwife COMC / Antenatal clinic CAH Southern Health and Social Care Trust 10/03/2025*

Good morning Usekg68

I am very sorry to read of your experience whilst attending the antenatal clinic and would be very keen to speak to you regarding this.

Could you please send your name and contact number to my work email maria.garvey@southerntrust.hscni.net and I will make contact with you.

Kind regards

Maria Garvey

Maria Garvey *Lead Midwife COMC / Antenatal clinic CAH Southern Health and Social Care Trust 20/03/2025*

Good evening Usekg68

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We recognize how frustrating it is to have to repeatedly discuss your medical history with the many disciplines you encountered during your pregnancy journey. However with Encompass (new computerized system) being introduced in Southern Health and Social Care Trust in May 2025, we hope this will reduce the need for repeat duplication of medical history in future.

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My contact details are maria.garvey@southerntrust.hscni.net or telephone 02837561562

Again I would like to take this opportunity to apologize to you for how you felt during your first pregnancy journey and hope both you and your baby are keeping well.

Kind regards

Maria Garvey

We have made
a change

Maternity Unit Staffed by Angels

1369042*errandgh98 a service user 16/06/2025*

156 views

My son was born in Daisy Hill at the beginning of April 2025 and I was blessed to have the most incredible midwives guide me through my first labour. I had a long labour that resulted in an emergency c-section but I still had the best experience thanks to my incredible midwives

Nicole and Izzy.

The two loveliest, kindest and professional ladies took amazing care of me, my husband and my son.

I always felt they put me and my baby first and ensured my birth plan was closely followed as much as possible. When things weren't going to plan they always talked me through my options, gave me time to make decisions and I always felt listened to.

Nicole welcomed me into the assessment unit when I was in so much pain and instantly put me at ease, I was delighted she was going to be my midwife, she really is phenomenal at what she does. Nicole then passed me over to Izzy for the day shift. Izzy also took fantastic care of me when my labour kept changing as I wasn't dilating, my son went back to back so I was in a lot of pain and my infection markers were increasing Izzy always kept the mood in the room light and happy.

Izzy then handed me back to Nicole for my second evening of labour and I was genuinely delighted to be back in Nicole's care and to have the continuity in my care. Nicole particularly paid attention to my birth plan notes which I am forever grateful for.

I have no regrets or upset from the birth of my son thanks to Nicole, Izzy and the amazing staff in the delivery suite. My anaesthetist Sue was also fantastic at keeping me calm throughout the csection.

When I was moved to the ward it was extremely busy and short staffed but everyone tried their absolute best to deliver top class care.

I really wanted to breastfeed and with thanks to the amazing midwives and maternity support staff I am successfully breastfeeding my son. Any time a staff member was around they would check on how feeding was going and offer their expert advice.

Judith came to visit which was also a great help and I had a follow up session with the lactation consultant Michelle (I was having a few issues with feeding and wanting to stop due to pain but after 1 appointment with Michelle and we were back on track!)

I was on the ward for 4 nights and for 2 of them i was blessed to have a health care assistant Claire on the ward, she is a true angel and helped me so much when I was having a difficult time, not just with medical help but Claire took the time to talk to me and teach me how to care for my son. Claire treated me and my son like we were her family for which I will be forever grateful.

I also received fantastic care from Hannah, Catherine, Suzanne and Karen to name a few.

While the ward was extremely busy and I struggled at times with noise, food being taken away on two separate occasions before I even had a chance to eat it and lack of privacy (admin staff don't announce themselves before coming into your cubicle) overall I still had a great experience in Daisy Hill and I have absolutely no faults with the delivery suite. The care I received was top class and the staff have no idea how much I appreciate them all.

I can't say thank you enough to all the fantastic staff who took care of me, my husband and my son. You're all angels!

Emma Creagh *Ward Sister, Maternity Daisy Hill Hospital Southern Health and Social Care Trust 17/06/2025*

Thank you so much for taking the time to tell us about your experiences here in Daisy Hill Maternity.

We have made
a change

Firstly can I congratulate you on the latest edition to your family and hope you are all settling in well. I was delighted to read that you had such a positive experience with us and I will ensure that every member of staff that you mentioned is aware of your kind words. We appreciate that although your days, I am sure, are now busy navigating life with a newborn, you were able to leave us such a lovely positive care opinion. The staff do appreciate real time feed back and it is lovely to hear that they treated you like family.

As the Ward Manager I am however disheartened to hear that although on the whole your experience was positive there were some areas where we let you down.

I apologize for the level of noise on the ward - at times our ward can be extremely busy and therefore noise levels can fluctuate. Staff where possible do try to keep it to an acceptable level.

With regards to your meals being removed before you had a chance to eat - I have highlighted this to the staff and have asked that patients are always asked before having trays removed regardless of whether it looks finished or not.

You had also mentioned about admin staff not announcing themselves before coming into your cubicle. I am unsure to which admin staff you are referring, however staff have always been aware that a closed curtain means they should be asking permission to enter - so again I will reiterate this to the staff.

Thank you again for your post and should you wish to discuss any further - please do not hesitate to contact me on 02837562750

Early Problem Pregnancy Clinic

1 story

Booking in scan

1332585

Goldfish2025 the patient 07/03/2025

I recently had a miscarriage and received a booking in letter for my 12-week scan that had been typed 3 days earlier - my miscarriage took place ten days before.

169 views

I've read previous accounts of this happening before, and obviously nothing has been learnt, and no attempts have been made for Early Pregnancy Problem Clinic and the booking centre to communicate with each other to avoid this happening.

It might not sound like a big deal to some but receiving that letter and subsequently having to call the receptionist to cancel said appointment and tell them why has really set me back emotionally.

Margarita Caraher *Ward Sister EPPC/Gynae Rapid Access Southern Health & Social Care Trust* 10/03/2025

Dear Goldfish2025,

I apologies for your experience of receiving an appointment letter after you had attended Early pregnancy clinic. I will relook at our process for cancelling appointment and address with all staff.

kind regards

Margarita

We are
preparing to
make a change

Margarita Caraher *Ward Sister EPPC/Gynae Rapid Access Southern Health & Social Care Trust* 16/04/2025

Dear Goldfish2025, I do apologise again to you for the distress that this experience caused you and I thank you for highlighting it to us. I can appreciate that was very difficult for you and how this would have set you back emotionally.

We have made
a change

By way of update, I have now spoken to all staff regarding the importance of completing the cancellation proforma and ensuring that it is logged in by the admin staff.

With best wishes

Margarita

Type 1 diabetes and pregnancy

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I couldn't help but wonder if the consultant's insistence on a C-section was influenced by personal biases, especially since the other doctors had been more supportive of induction and natural birth options. It seemed as though the doctor had made the decision for me, disregarding the fact that many women successfully deliver large babies naturally. Once the C-section was scheduled, there was little discussion about my preferences for the procedure. Unlike others I've heard of, I wasn't offered options like having my partner cut the umbilical cord or choosing music during the surgery. In my overwhelmed state, I forgot to ask about these details.

Despite these challenges, I am grateful to the nurses and surgical team who performed the delivery; they exceeded my expectations and provided excellent care. However, the consultant's refusal to consider a natural birth still weighs heavily on my mind.

Post-surgery, my experience was less than ideal. Being bedridden for the first day, my partner took on all newborn care tasks, including feeding, burping, and diaper changes, as I was immobile. When he left for the night, I realized I hadn't been taught how to burp the baby or how tight to fasten a diaper. Feeling in my legs returned around 9 or 10 p.m., but my partner had to leave by 10:30 p.m., leaving little time for him to guide me. Having never held a newborn before, I was in significant pain and lacked basic caregiving knowledge. Throughout the night, my baby was unsettled for about five hours. Despite ringing the call bell for assistance, the midwife who responded dismissed my concerns, stating the baby would settle eventually, and left without offering help. Later, when I needed to use the bathroom, I took my crying baby with me and asked the staff to hold her briefly. They burped her during this time, realizing she had been uncomfortable, which finally allowed me to rest around 6 a.m.

Additionally, during my recovery, the doctor who had insisted on the C-section visited me and remarked that they had told me i would have a big baby? These comments felt smug and insensitive, especially considering my baby weighed 9.10 lbs at 39 weeks.

Throughout my pregnancy, I found it challenging not having a consistent consultant or midwife. Despite fortnightly visits, I often saw different professionals, each offering varying advice. Initially, I was assigned different diabetic specialists, requiring me to repeatedly explain my medical history. I requested continuity of care with a specific doctor to build rapport and ensure they understood my case. However, even towards the end of my pregnancy, I sometimes had to see other doctors who made minimal adjustments to my insulin regimen, necessitating follow-up appointments with my preferred specialist.

This lack of continuity and the feeling of being unheard added significant stress to my pregnancy journey.

Maria Garvey *Lead Midwife COMC / Antenatal clinic CAH Southern Health and Social Care Trust 10/03/2025*

Good morning Usekg68

I am very sorry to read of your experience whilst attending the antenatal clinic and would be very keen to speak to you regarding this.

Could you please send your name and contact number to my work email maria.garvey@southerntrust.hscni.net and I will make contact with you.

Kind regards

Maria Garvey

Maria Garvey *Lead Midwife COMC / Antenatal clinic CAH Southern Health and Social Care Trust 20/03/2025*

Good evening Usekg68

Further to my previous response to you I would like to update with the actions I have taken.

I have directly shared your story with both the Obstetric and Midwifery teams for reflection and learning and they have been reminded of the principles of shared decision making ensuring that women are involved in all aspects of their care.

We recognize how frustrating it is to have to repeatedly discuss your medical history with the many disciplines you encountered during your pregnancy journey. However with Encompass (new computerized system) being introduced in Southern Health and Social Care Trust in May 2025, we hope this will reduce the need for repeat duplication of medical history in future.

I would still be keen for you to make contact with me so we can discuss further your personal experience.

My contact details are maria.garvey@southerntrust.hscni.net or telephone 02837561562

Again I would like to take this opportunity to apologize to you for how you felt during your first pregnancy journey and hope both you and your baby are keeping well.

Kind regards

Maria Garvey

We have made
a change

Maternity Unit Staffed by Angels

1369042*errandgh98 a service user 16/06/2025*

156 views

My son was born in Daisy Hill at the beginning of April 2025 and I was blessed to have the most incredible midwives guide me through my first labour. I had a long labour that resulted in an emergency c-section but I still had the best experience thanks to my incredible midwives

Nicole and Izzy.

The two loveliest, kindest and professional ladies took amazing care of me, my husband and my son.

I always felt they put me and my baby first and ensured my birth plan was closely followed as much as possible. When things weren't going to plan they always talked me through my options, gave me time to make decisions and I always felt listened to.

Nicole welcomed me into the assessment unit when I was in so much pain and instantly put me at ease, I was delighted she was going to be my midwife, she really is phenomenal at what she does. Nicole then passed me over to Izzy for the day shift. Izzy also took fantastic care of me when my labour kept changing as I wasn't dilating, my son went back to back so I was in a lot of pain and my infection markers were increasing Izzy always kept the mood in the room light and happy.

Izzy then handed me back to Nicole for my second evening of labour and I was genuinely delighted to be back in Nicole's care and to have the continuity in my care. Nicole particularly paid attention to my birth plan notes which I am forever grateful for.

I have no regrets or upset from the birth of my son thanks to Nicole, Izzy and the amazing staff in the delivery suite. My anaesthetist Sue was also fantastic at keeping me calm throughout the csection.

When I was moved to the ward it was extremely busy and short staffed but everyone tried their absolute best to deliver top class care.

I really wanted to breastfeed and with thanks to the amazing midwives and maternity support staff I am successfully breastfeeding my son. Any time a staff member was around they would check on how feeding was going and offer their expert advice.

Judith came to visit which was also a great help and I had a follow up session with the lactation consultant Michelle (I was having a few issues with feeding and wanting to stop due to pain but after 1 appointment with Michelle and we were back on track!)

I was on the ward for 4 nights and for 2 of them i was blessed to have a health care assistant Claire on the ward, she is a true angel and helped me so much when I was having a difficult time, not just with medical help but Claire took the time to talk to me and teach me how to care for my son. Claire treated me and my son like we were her family for which I will be forever grateful.

I also received fantastic care from Hannah, Catherine, Suzanne and Karen to name a few.

While the ward was extremely busy and I struggled at times with noise, food being taken away on two separate occasions before I even had a chance to eat it and lack of privacy (admin staff don't announce themselves before coming into your cubicle) overall I still had a great experience in Daisy Hill and I have absolutely no faults with the delivery suite. The care I received was top class and the staff have no idea how much I appreciate them all.

I can't say thank you enough to all the fantastic staff who took care of me, my husband and my son. You're all angels!

Emma Creagh *Ward Sister, Maternity Daisy Hill Hospital Southern Health and Social Care Trust 17/06/2025*

Thank you so much for taking the time to tell us about your experiences here in Daisy Hill Maternity.

We have made
a change

Firstly can I congratulate you on the latest edition to your family and hope you are all settling in well. I was delighted to read that you had such a positive experience with us and I will ensure that every member of staff that you mentioned is aware of your kind words. We appreciate that although your days, I am sure, are now busy navigating life with a newborn, you were able to leave us such a lovely positive care opinion. The staff do appreciate real time feed back and it is lovely to hear that they treated you like family.

As the Ward Manager I am however disheartened to hear that although on the whole your experience was positive there were some areas where we let you down.

I apologize for the level of noise on the ward - at times our ward can be extremely busy and therefore noise levels can fluctuate. Staff where possible do try to keep it to an acceptable level.

With regards to your meals being removed before you had a chance to eat - I have highlighted this to the staff and have asked that patients are always asked before having trays removed regardless of whether it looks finished or not.

You had also mentioned about admin staff not announcing themselves before coming into your cubicle. I am unsure to which admin staff you are referring, however staff have always been aware that a closed curtain means they should be asking permission to enter - so again I will reiterate this to the staff.

Thank you again for your post and should you wish to discuss any further - please do not hesitate to contact me on 02837562750

Southern Health & Social Care Trust

13 stories

Craigavon Area Hospital

8 stories

Lack of interpreter

1347241

indusqd69 the patient 15/04/2025

480 views

I was in hospital in January. I had been taken in by ambulance due to rectal bleeding and I know the A & E and emergency system. I understand that they cannot always provide a sign language interpreter because it is last minute. So I was aware of this. I was put into 3 South Ward, it was a shared ward, I didn't mind that but with three other hearing patients I couldn't communicate with them as a deaf person. Also clinical staff were trying to communicate with me without an interpreter which was also very difficult.

Then my sister came to visit me, they seemed to have a very long chat with her, they gave her all the information but wouldn't book an interpreter to explain this information to me.

The nurses in the other wards also made no effort to communicate with me, it looked like they waited for a family member to arrive instead, the communication should have been directly with me.

On the Sunday I was still in the ward and even less staff came to my bed, there was a few but again none tried to communicate with me directly.

On Monday we had ward round, there was doctors and students but I don't know who was who exactly as this was not explained so I am not sure. The doctor did try to communicate with me and went and fetched something to write on. I couldn't communicate this way, I needed an interpreter to allow a much more detailed discussion rather than the writing back and forth.

After that, I did leave the hospital feeling very unhappy with the system and it was very stressful.

This is not the first time I have attended and each time the same situation, either the translator request has not been put through or simply not provided. Either way this is not explained to me.

After going home I just feel very frustrated at the way I was treated. The doctor on the Monday did try to write back and forth but I needed a translator to have been booked to attend the ward round as the conversation would have been far too complicated to just simply write back and forth and I would not have understood.

****Video of story in BSL ****

This is a translation by a BSL translator

<https://vimeo.com/1093014882>

****Video of story in ISL ****

This is a translation by an ISL translator

<https://vimeo.com/1093015606>

Chloe Emerson Deputy Sister Ward 3 South Southern Health and Social Care Trust 16/04/2025

Thank you for taking the time to leave feedback regarding your experience.

I am so sorry your stay on 3 south was unpleasant - it is never our intention for anyone to feel misunderstood.

If you would like to send me an email - chloe.turner@southerntrust.hscni.net and we could discuss this further?

Thank you

Chloe

****Video of response in BSL****

This is a translation by a BSL translator

<https://vimeo.com/1093015134>

****Video of response in ISL****

This is a translation by an ISL translator

<https://vimeo.com/1093015841>

Ashlene Kelly *Ward Manager 3 South CAH* Southern Health and Social Care Trust 17/04/2025

Hi

My name is Ashlene Kelly, Ward manager in 3 south.

Firstly can I thank you for taking the time to leave this feed back regarding a very poor experience. I want to apologise to you sincerely on behalf of all staff on ward, that we failed to give you the level of communication regarding your care and discharge planning, I am sure this was an extremely upsetting and anxious experience.

In 3 south we try to promote and overcome boundaries to ensure excellent communication skills and advocate for all patients to ensure safe, high quality patient care. I am so sorry this was not the experience you had. As you have stated above a sign language interrupter can be difficult to get especially over weekend. But staff should have attempted to obtain one on the Monday or the day of discharge. We did try to communicate with you using white boards and your family- but I am sorry this was not good enough scenario and we should have ensured an interrupter was available on day of discharge.

I will discuss this issue with all staff at our weekly communication meeting to ensure to over come any barriers of communication and ensure interpreters are booked or attempted to book on a daily basis if needed.

If you want to get in touch with me my email is ashlene.kelly@southerntrust.hscni.net.

I can only apologise you had this extremely poor experience, but going forward I will ensure nurse in charge always attempts to book interpreters, in all cases but especially sign language interrupters,.

I will also post on our group WhatsApp page the flow chart of booking sign language interpreter and put a poster up in office. I will attach same below. To try and improve this experience for another patient in a similar situation.

![Image](https://www.careopinion.org.uk/resources/posting-images/responses/e0121cbbae1244199e3df1057857faf4.png)

Thanks again

Ashlene Kelly

3 south

61669

****Video of response in BSL****

This is a translation by a BSL translator

https://vimeo.com/1093015203

****Video of response in ISL****

This is a translation by an ISL translator

https://vimeo.com/1093015912

Thelma Swann Project Lead – Online User Feedback Public Health Agency 10/07/2025

Thank you for sharing your story in sign language through Sign Video. The PHA has translated the above written response into British Sign Language and Irish Sign Language.

Diagnosis of Facial Palsy

1342563*etain82 a service user 03/04/2025*

130 views

I was recently referred by my GP to ENT Rapid Access in CAH due to reduced hearing, fluid in middle ear and facial weakness on one side. I was seen on the same morning by a registrar within ENT Rapid Access and diagnosed with facial palsy, most likely caused by acute otitis media. I was prescribed steroids, advised that recovery can take 3-6 weeks or up to 6 months.

I received a follow-up appointment 6 weeks from initial presentation, and was seen by a specialist registrar (within Dr Reddy's Clinic). Whilst my hearing and middle ear issues had resolved, my facial palsy had no improvement. As a result, the registrar referred me for an MRI, and I received a cancellation appointment 3 weeks later. I was attending a Facial Palsy event and spoke with Mr Leonard (ENT Consultant, BHSCT) who has moved me to his Clinic and shared MRI Results.

As I have now transferred to BHSCT, I wanted to share my reflections of my involvement with ENT in CAH. I am very happy with the medical care provided from initial diagnosis, treatment, timely review and taking steps for further investigation when slow recovery was identified. I hope this early intervention assists my long term recovery.

I have heard many stories of people in Northern Ireland and across the UK who have had a bad experiences due to misdiagnosis, slow medical intervention and lack of investigations, and I feel my experience has been mainly positive. However, I also wanted to share some things that would have made my experience better.

Only a little explanation of facial palsy was shared at my initial visit, it would have been helpful to have been provided with further information (e.g. leaflets, eye care advice) and/or directed to resources (e.g. Facial Palsy UK). The initial presentation of facial palsy can be stressful and it can be difficult to take on board information shared at initial appointment and being directed to other resources to access at home would help alleviate some of the stress. There is important information with regards to not undertaking exercises on the face in the early stages as well as lots of instructional videos for massage, eye taping, etc. Facial Palsy UK also provides a lot of support for patients as the physical effects of facial palsy can be emotionally challenging and sharing these resources with patients on first diagnosis can make a positive impact.

I feel that ENT Rapid Access (and other departments where a facial palsy patient may receive their diagnosis) should ensure information and support resources for facial palsy are shared with the patient.

Josie Matthews *Lead Nurse Southern Health and Social Care Trust 16/04/2025*

Dear etain82,

Thank you for taking the time to provide your feedback via Care Opinion and to share your personal story with us. We greatly value all feedback, and we are both thankful for your positive feedback on the initial medical treatment you received and for being honest in where we should have performed better—primarily around communication. We acknowledge the need to improve our approach to patients presenting with facial palsy. We will provide clearer explanations initially, along with information and access to resources for support. The ENT department—both nursing and medical staff—will be taking your concerns and suggestions into account. As part of our response, we will be setting up a special notice board in our ENT departments to display information and support materials for facial palsy. Thank you again for your feedback.

We wish you every success with your continued recovery.

We have made
a change

Poor communication regarding my babys care

1346913

cubewm68 a parent/guardian 15/04/2025

161 views

My son (12 months old) was referred to ED by GP earlier this month, it was communicated to me by the doctor on for paediatric ED that my son was likely to be admitted, will require blood test and a cannula to be inserted for IV antibiotics and possibly fluids as he was dehydrated. My son was already in a lot of pain and this was very distressing for myself as a parent, I had to contact my partner at this stage to come out of work as it had been communicated to me that this was required as delegated via telephone by the paediatric registrar on for referrals to this doctor.

The doctor and nurse proceeded to obtain blood samples by cannulating my son, i had to help both members of staff to hold my son down to have this done, both of us were very distressed and a very difficult thing to have to do as a parent. The doctor was unsuccessful at doing so, following two attempts and advised a more senior member of staff would attempt same at a later time. Following this, the registrar reviewed my son and proceeded to tell me that his sceniario was 'not that bad' and could go home with oral antibiotics and ointments. I explained how confused i was as previously had to hold my son for bloods and a cannula, explained that he was very unwell and required to stay for antibiotics and my partner and I where both distressed regarding what had occured, and my son who was already in alot of pain and that this was then unnecessary. We recieved no apology from this doctor who had delegated for this to be undertaken, the nurse came in with his prescription and we explained our anger and we would be complaining about the lack of effective communication between staff and this shouldnt have taken place if not absolutely required to a baby.

The ED doctor then returned and apologised for what had occurred, explaining that she was informed to undertake this, but understood our anger.

When setting a plan of care especially for young children and babys, whereby bloods and cannulation is a distressing and painful thing for them to experience, review from a senior doctor should take place prior to this to avoid this happening to further families.

Would recommend? (Friends and family test): Unlikely

Stacey Hardy *Lead Nurse CAH Emergency Department, DHH Emergency Department and STH Minors Injuries Unit Southern Health and Social Services Trust 17/04/2025*

Thank you for sharing your recent experience at the Emergency department at Craigavon. I am very sorry to hear how distressing this intervention was for both you and your son. I will be sharing your feedback with the nursing and medical staff to ensure that if there is any doubt about the need for bloods and a cannula to discuss this with a senior doctor before making an attempt and then deciding this intervention was not required. I am also very sorry to hear that the communication to you from the staff was poor. I will discuss this also with the team. Communication is a vital element in a busy department for both staff and patients/ relatives. I hope your son is recovering from his recent illness.

Stacey

We have made a change

I feel quite let down by the system

1363717

craterrg96 a service user 30/05/2025

282 views

I feel quite let down by the system. I acknowledge it is no one that is working in the clinics that are at fault, but I can't help but feel so let down.

The women's hub was created in my opinion to stop women having to lose their babies sitting in A&E within a very clinical cold environment. I rang Craigavon for an appointment when I was experiencing my second miscarriage as Daisy Hill Women's hub doesn't open on a Thursday. I was very distressed bleeding and in quite some pain.

I was given an appointment for a week later. This was very distressing and agonising but I understand with encompass, appointments had been reduced and it is not the fault of the over worked staff coming in and working on the ground every day. The opening times on Daisy Hills Hub gives incorrect information regarding opening times which led to more distress.

After ringing multiple times the next day I could not get through. More distress and ended up in A&E. The compassion of the staff member I spoke to with the phone first service was amazing and I finally felt heard and not dealing with this alone. While in A&E I got quite an abrupt phone back from Daisy Hill Women's hub when explained I was in A&E, they washed their hands of me. I feel if they could have been more sympathetic or compassionate, but appreciate the stress staff are under.

I know the government have pushed the staff to this as they are overworked and underpaid but my experience unfortunately has not been a positive one.

If I could suggest one thing it would be to change the voicemail that is on the Daisy Hill hub to the correct opening times.

Margarita Caraher *Ward Sister EPPC/Gynae Rapid Access Southern Health & Social Care Trust 02/06/2025*

Good Morning Craterrg96,

I am sorry to hear you lost your baby, I understand this can be a very distressing emotional time for you. I apologies for the experience you had when contacting our service.

I will speak to our staff regarding the return phone call we make to ensure no lady is left feeling like you did.

Thank you for highlighting the answer machine message, I have reviewed this, it was not updated when staff change, I will get this updated.

If you wish please phone me in the women's health hub on 02837562754 so we can discuss this further.

Regards

Margarita

Margarita Caraher *Ward Sister EPPC/Gynae Rapid Access Southern Health & Social Care Trust 01/07/2025*

Hello craterrq96

Following on from your story on care opinion I wanted to let you know that the phone voicemail has been updated within the women's health hub.

Thanks for your feedback

We are
preparing to
make a change

We have made
a change

Delays in Emergency Department

1389466

CAH63 the patient 09/09/2025

97 views

I was sent to ED Craigavon by my GP who recommended an x-ray. I arrived at 5.30pm and receptionist was unable to give me an estimated waiting time. After about 1 hour I was called to triage and then sent back to waiting room to be called for bloods.

After a few hours wait I had bloods done and again back to waiting room and then triaged every 3-4 hours after that. What I witnessed while waiting was unbelievable. Patients being sick, diabetic patients with low sugar levels and dementia patients wandering about aimlessly in a state of confusion around the long waits etc. One relative actually took ill while waiting and then ended up a patient. During this time there was absolutely no communication regarding the delay or the estimated waiting times.

After a 16 Hour wait I was called to the Green Area. When in this area the waiting continued. Eventually a doctor appeared, although only for a few minutes before they were called to another patient and we were left again. At this stage I was in agony, hungry, exhausted and frustrated. My husband had to eventually go and ask again for help and then a doctor arrived. They were amazing. I was sent for an x-ray and then the doctor returned to give me my diagnosis etc. They went over and above to make me comfortable and even went and made us tea and toast after hearing that we had been waiting 22 Hours.

I appreciate that this is the situation throughout all the Trusts and problem being with delays in having patients admitted to wards in the Hospital. I would suggest if this is the new normal then communication would need to improve. Patients in the waiting room should be advised of estimated waiting times etc. I do appreciate that when emergencies come in that this estimated time will change but at least some communication is better than the way it is at the moment and would relieve some of the frustration felt by patients in waiting rooms.

Also facilities in the ED could be improved. After the shop / coffee bar closes in the evening there are just 2 vending machines and one for hot drinks and one for cold. The nearest vending machine for snacks is beside dining room and patients are afraid to go there in case they miss their name being called.

I realize the system is not working but something must be done to make the patients more comfortable and also relieve some of the work pressure for the receptionists, nurses and doctors.

I personally felt that after my 22 Hour visit, sitting on uncomfortable chairs, no food etc I was feeling a lot worse than when I was admitted.

I feel I must speak out for all involved in my experience in ED Department. The vulnerable patients and the hard working staff working under horrific circumstances.

Jill Robinson Admin Support Southern Health and Social Care Trust 15/09/2025

Hello CAH63

I am so sorry that you were unable to use the vending machine during your recent visit to ED.

Unfortunately the machine was out of order due to a mechanical fault that couldn't be repaired at the time. However, we're pleased to inform you that we have installed another vending machine in the ED waiting area which offers a range of snacks and sandwiches.

We hope this will be more convenient for patients and visitors.

Thank you for taking the time to post about your experience.

Jill Robinson

Jill Green Ward Manager, Emergency Department, Craigavon Area Hospital Southern Health and Social Care Trust 22/09/2025

We have made
a change

Good morning CAH63,

We have made
a change

Thank you for taking the time to highlight your concerns in relation to your experience in ED. I would like to apologise that you have had a negative experience and also for the delay in my response.

I am really sorry that you had to endure such a long waiting time. Unfortunately our ED is consistently overcrowded and there are a large number of patients waiting on a bed in the inpatient wards. This leaves us with little capacity for cubicles to see new patients. In order to ensure our patients are observed in the waiting room we implemented the waiting room nurse. This is the purpose of being called back in for observations and any analgesia that is needed. The nurses are able to give a rough estimate of a waiting time, and the purpose of being brought back in for observations every few hours whilst you are waiting is also so that the nurse can provide an update to each patient. I will add this to the nursing safety brief to ensure they are doing this.

I am aware that there are gaps in communication for those patients in the waiting room, and I acknowledge that this can be a frustrating and anxious time for people when they are not aware of the waiting time or what the next steps in their journey might be. I would like to assure you that I am in the process of planning a change that will hopefully resolve these issues. I have a meeting arranged with the communications team to implement a live system that will display the average waiting time on the screen in the waiting area. I also plan to display a visual that provides information on the ED patient pathway, this will provide lots of information on what happens at each step of the patients journey in the department.

You have mentioned about the facilities in ED. As you can see on the response above, this is something we have been working on. A new vending machine has been installed that contains sandwiches and snacks. Recently we have also brought in a night time trolley for water and biscuits. This is put in to the waiting room and replenished twice a night.

We hope that making these changes will improve the experience that patients have when waiting in the ED.

I want to thank you again for highlighting your concerns, we take all feedback seriously and aim to make any possible changes in response.

Best wishes

Sister Green.

Absolutely no precautionary measures taken

1389688

violetse36 a relative 11/09/2025

86 views

My husband's job puts him at high risk of coming into contact with Leptospirosis. He carries a card to provide to medical professionals explaining his high risk, and is trained to seek medical attention if an infection is suspected. Having had all of the initial, non-severe symptoms for a week, he presented at Craigavon A&E to rule out or be treated for infection. Early diagnosis is important with this disease as, if left untreated, it can lead to complications such as renal failure, liver damage or pulmonary pulmonary hemorrhage.

The doctor who saw him told him essentially that he was being a hypochondriac, that they were not going to test for the infection because his electrolytes were normal (indicating only that his kidneys were not damaged at that time, but in no way ensuring that they could not become damaged if infected), and most bafflingly, that he could only have contracted leptospirosis by drinking rat urine!

Despite being a worker at high risk of exposure to this infection, who is advised to seek medical attention if showing symptoms of this infection, my husband was sent home with absolutely no precautionary measures taken and no assurances that he has not been infected with a life threatening bacteria. The attitude seemed to be: come back when you're jaundice and some damage has already been done. I think this is a disgraceful excuse for medical practice and this doctor should be ashamed of their own ignorance and arrogance.

Jill Green Ward Manager, Emergency Department, Craigavon Area Hospital Southern Health and Social Care Trust
16/09/2025

Good evening violetse36,

Thank you for taking the time to tell your story about your husbands experience in ED. I sincerely apologise that the standards of care and communication were not as you expected.

I discussed this post with one of our ED consultants. We agreed that it is difficult to comment on what procedures should have taken place given we do not have specific details about your husbands attendance. However, no patient should ever be made feel to be a hypochondriac and your concerns should be listened you and validated at all times. I am sorry that this was not the case.

I will share this post with the senior Doctors in ED and we will ensure that awareness around the management of potential Leptosperosis is shared with the medical team.

Thank you for again for highlighting this and I hope your husband is doing ok.

Best wishes

Sister Green

We have made a change

Maternity care

1 story

Antenatal Diabetic Clinic

1 story

Type 1 diabetes and pregnancy

1331331

Usekg68 the patient 07/03/2025

184 views

I had my baby in December and have been a type 1 diabetic for as long as I can remember. I understand that managing diabetes during pregnancy is challenging. However, I felt unprepared due to the lack of a comprehensive birth plan.

At my 36-week appointment, I was 36 weeks and 5 days along. During this visit, both my diabetic specialist and consultant examined me. The consultant performed an ultrasound and noted that my baby was measuring large—a common occurrence in type 1 diabetes pregnancies. He immediately recommended a cesarean section (C-section), which I was hesitant about and expressed my concerns. Despite this, I felt pressured and as though I had no alternative.

Previously, at my 32-week appointment, a doctor had also observed the baby's large size but mentioned the possibility of induction at 37 weeks to facilitate a natural birth. In contrast, during the 36-week appointment, he other doctor dismissed induction as an option. They emphasized potential complications of a vaginal delivery, such as shoulder dystocia, which could necessitate pushing the baby back into the birth canal or even fracturing the baby's bones. This doctors explanations were overwhelmingly negative, instilling fear rather than providing balanced information.

When I inquired about induction at 37 weeks, I felt this same doctor asserted their medical authority, insisting that a C-section was the superior choice. I became emotional, feeling stripped of any real choice. I found the response I received was dismissive; they went on to question why I was upset about a C-section, noting that many women prefer them nowadays.

This lack of empathy was disheartening. As a first-time mother, I had hoped to experience natural childbirth, including labour contractions. I was open to a C-section if complications arose during labor, but I wanted the opportunity to try for a natural birth. The prospect of a planned C-section made me feel disconnected from the birthing experience, and even now, I sometimes struggle with feelings of inadequacy as a mother.

During this consultation, while I was visibly upset, I feel he doctor pressured me for a decision regarding the C-section. I was given only an n hour to decide, leaving me feeling cornered. Reluctantly, I agreed to the C-section but requested it be scheduled at 37 or 38 weeks due to breathing difficulties and previous episodes of reduced fetal movements, which had caused me significant anxiety. Yet again the doctor dismissed my concerns, stating that delivering before 39 weeks via C-section was unsafe and refused to consider an earlier date.

I couldn't help but wonder if the consultant's insistence on a C-section was influenced by personal biases, especially since the other doctors had been more supportive of induction and natural birth options. It

seemed as though the doctor had made the decision for me, disregarding the fact that many women successfully deliver large babies naturally. Once the C-section was scheduled, there was little discussion about my preferences for the procedure. Unlike others I've heard of, I wasn't offered options like having my partner cut the umbilical cord or choosing music during the surgery. In my overwhelmed state, I forgot to ask about these details.

Despite these challenges, I am grateful to the nurses and surgical team who performed the delivery; they exceeded my expectations and provided excellent care. However, the consultant's refusal to consider a natural birth still weighs heavily on my mind.

Post-surgery, my experience was less than ideal. Being bedridden for the first day, my partner took on all newborn care tasks, including feeding, burping, and diaper changes, as I was immobile. When he left for the night, I realized I hadn't been taught how to burp the baby or how tight to fasten a diaper. Feeling in my legs returned around 9 or 10 p.m., but my partner had to leave by 10:30 p.m., leaving little time for him to guide me. Having never held a newborn before, I was in significant pain and lacked basic caregiving knowledge. Throughout the night, my baby was unsettled for about five hours. Despite ringing the call bell for assistance, the midwife who responded dismissed my concerns, stating the baby would settle eventually, and left without offering help. Later, when I needed to use the bathroom, I took my crying baby with me and asked the staff to hold her briefly. They burped her during this time, realizing she had been uncomfortable, which finally allowed me to rest around 6 a.m.

Additionally, during my recovery, the doctor who had insisted on the C-section visited me and remarked that they had told me I would have a big baby? These comments felt smug and insensitive, especially considering my baby weighed 9.10 lbs at 39 weeks.

Throughout my pregnancy, I found it challenging not having a consistent consultant or midwife. Despite fortnightly visits, I often saw different professionals, each offering varying advice. Initially, I was assigned different diabetic specialists, requiring me to repeatedly explain my medical history. I requested continuity of care with a specific doctor to build rapport and ensure they understood my case. However, even towards the end of my pregnancy, I sometimes had to see other doctors who made minimal adjustments to my insulin regimen, necessitating follow-up appointments with my preferred specialist.

This lack of continuity and the feeling of being unheard added significant stress to my pregnancy journey.

Maria Garvey *Lead Midwife COMC / Antenatal clinic CAH Southern Health and Social Care Trust 10/03/2025*

Good morning Usekg68

I am very sorry to read of your experience whilst attending the antenatal clinic and would be very keen to speak to you regarding this.

Could you please send your name and contact number to my work email maria.garvey@southerntrust.hscni.net and I will make contact with you.

Kind regards

Maria Garvey

Maria Garvey *Lead Midwife COMC / Antenatal clinic CAH Southern Health and Social Care Trust 20/03/2025*

Good evening Usekg68

We have made
a change

Further to my previous response to you I would like to update with the actions I have taken.

I have directly shared your story with both the Obstetric and Midwifery teams for reflection and learning and they have been reminded of the principles of shared decision making ensuring that women are involved in all aspects of their care.

We recognize how frustrating it is to have to repeatedly discuss your medical history with the many disciplines you encountered during your pregnancy journey. However with Encompass (new computerized system) being introduced in Southern Health and Social Care Trust in May 2025, we hope this will reduce the need for repeat duplication of medical history in future.

I would still be keen for you to make contact with me so we can discuss further your personal experience.

My contact details are maria.garvey@southerntrust.hscni.net or telephone 02837561562

Again I would like to take this opportunity to apologize to you for how you felt during your first pregnancy journey and hope both you and your baby are keeping well.

Kind regards

Maria Garvey

Stone treatment Centre: Northern Ireland Extracorporeal shockwave lithotripsy (ESWL)

1 story

stone treatment centre

1391117

Domingo1960 the patient 16/09/2025

Positives: Hospital signposting was great. Very easy to navigate where I was going. Stone Treatment Staff exceptional. Very helpful and informative and Seanin put me at ease and talked me through all that was going to happen. All staff I dealt with explained everything as they were doing it. Even played music to relax me while I was receiving my treatment.

45 views

Negative: car parking was a nightmare. Had to travel from Belfast and had never been to Craigavon Hospital before so was not familiar with parking areas. Spent a lot of time driving around the hospital car parks without success and ended up literally parking up against a hedge as time was running against me for my appointment. This was before 9.00am so those patients coming after me had no chance of finding a space.

Major changes need to be made to create more parking spaces.

Would recommend? (Friends and family test): Extremely likely

Laura McAuley Urology Specialist Southern Health and Social Care Trust 18/09/2025

Thankyou for taking the time to give feedback on the ESWL service. Your opinion matters to us and we are glad that your experience of the staff and the stone treatment centre was a positive one.

We have made
a change

We are aware that car parking can be a challenge, and we are sorry to hear that this added a stressor to your experience.

Based on your feedback we have added to our pre ESWL information about leaving time to find parking, and a dedicated car parking map to signpost patients to where they can find both paid and free parking.

We hope this improves the experience for future service users.

Again, thankyou for taking the time to give constructive feedback.

Daisy Hill Hospital

4 stories

Told nothing could be done**1361194***importerfp37 a relative* 23/05/2025

206 views

Called in to give blood still haven't received blood results from previous time. My partner keeps having reoccurring miscarriages. Last appointment the two nurses/midwife's stated that if we were in England there's a few things that they could do but not here in Northern Ireland. They stated we should go private in the south of Ireland. When arriving for bloods today we were put us in a small room with an ultrasound machine with a scan of a baby! As I stated before my partner has been suffering from reoccurrence miscarriages. This is not ok and as a health care professional I find this shocking!

Natalie Matthews *Ward Manager, Elective Overnight Stay Centre & Gynaecology Ward, Daisy Hill Hospital Southern Health & Social Care Trust* 23/05/2025

Dear importerfp37,

We have made
a change

I am the ward sister for gynae ward where your partner attended for her bloods. I wish to apologise for any distress caused by this incident. Please know we have raised this with our colleagues in the medical team who compete ultra-sound scans for urgent action in order to prevent this situation recurring. Ensuring the screen is clear has not been part of our checklist for preparing the room previously but we will add this as an action going forward.

I have forwarded your concerns raised regarding your previous appointments to the lead nurse of this service and assistant director, for their review and action.

Please accept my apology for the distress this oversight has caused you and your partner. If you wish to discuss this further, or if there is anything I can assist with, please feel free to contact me via the ward telephone on 028 375 62639.

Kind regards,

Natalie Matthews

Abby McConnell *Lead Nurse for Gynae/Elective Performance Southern Health and Social Care Trust* 23/05/2025

Good Afternoon importerfp37,

Thank you for taking the time to feedback your recent experience in DHH and I am sorry to hear it has not been positive.

In terms of the previous blood sample you have not received the results of, would you be able to contact the Women's Health Hub in DHH to discuss and we can find a resolution for your partner?

The number is 02837562754.

Many thanks,

Abby McConnell

Lead Nurse for Gynaecological Services

SHSCT

Maternity Unit Staffed by Angels

1369042*errandgh98 a service user 16/06/2025*

156 views

My son was born in Daisy Hill at the beginning of April 2025 and I was blessed to have the most incredible midwives guide me through my first labour. I had a long labour that resulted in an emergency c-section but I still had the best experience thanks to my incredible midwives

Nicole and Izzy.

The two loveliest, kindest and professional ladies took amazing care of me, my husband and my son.

I always felt they put me and my baby first and ensured my birth plan was closely followed as much as possible. When things weren't going to plan they always talked me through my options, gave me time to make decisions and I always felt listened to.

Nicole welcomed me into the assessment unit when I was in so much pain and instantly put me at ease, I was delighted she was going to be my midwife, she really is phenomenal at what she does. Nicole then passed me over to Izzy for the day shift. Izzy also took fantastic care of me when my labour kept changing as I wasn't dilating, my son went back to back so I was in a lot of pain and my infection markers were increasing Izzy always kept the mood in the room light and happy.

Izzy then handed me back to Nicole for my second evening of labour and I was genuinely delighted to be back in Nicole's care and to have the continuity in my care. Nicole particularly paid attention to my birth plan notes which I am forever grateful for.

I have no regrets or upset from the birth of my son thanks to Nicole, Izzy and the amazing staff in the delivery suite. My anaesthetist Sue was also fantastic at keeping me calm throughout the csection.

When I was moved to the ward it was extremely busy and short staffed but everyone tried their absolute best to deliver top class care.

I really wanted to breastfeed and with thanks to the amazing midwives and maternity support staff I am successfully breastfeeding my son. Any time a staff member was around they would check on how feeding was going and offer their expert advice.

Judith came to visit which was also a great help and I had a follow up session with the lactation consultant Michelle (I was having a few issues with feeding and wanting to stop due to pain but after 1 appointment with Michelle and we were back on track!)

I was on the ward for 4 nights and for 2 of them i was blessed to have a health care assistant Claire on the ward, she is a true angel and helped me so much when I was having a difficult time, not just with medical help but Claire took the time to talk to me and teach me how to care for my son. Claire treated me and my son like we were her family for which I will be forever grateful.

I also received fantastic care from Hannah, Catherine, Suzanne and Karen to name a few.

While the ward was extremely busy and I struggled at times with noise, food being taken away on two separate occasions before I even had a chance to eat it and lack of privacy (admin staff don't announce themselves before coming into your cubicle) overall I still had a great experience in Daisy Hill and I have absolutely no faults with the delivery suite. The care I received was top class and the staff have no idea how much I appreciate them all.

I can't say thank you enough to all the fantastic staff who took care of me, my husband and my son. You're all angels!

Would recommend? (Friends and family test): Extremely likely

Emma Creagh *Ward Sister, Maternity Daisy Hill Hospital Southern Health and Social Care Trust 17/06/2025*

Thank you so much for taking the time to tell us about your experiences here in Daisy Hill Maternity.

We have made
a change

Firstly can I congratulate you on the latest edition to your family and hope you are all settling in well. I was delighted to read that you had such a positive experience with us and I will ensure that every member of staff that you mentioned is aware of your kind words. We appreciate that although your days, I am sure, are now busy navigating life with a newborn, you were able to leave us such a lovely positive care opinion. The staff do appreciate real time feed back and it is lovely to hear that they treated you like family.

As the Ward Manager I am however disheartened to hear that although on the whole your experience was positive there were some areas where we let you down.

I apologize for the level of noise on the ward - at times our ward can be extremely busy and therefore noise levels can fluctuate. Staff where possible do try to keep it to an acceptable level.

With regards to your meals being removed before you had a chance to eat - I have highlighted this to the staff and have asked that patients are always asked before having trays removed regardless of whether it looks finished or not.

You had also mentioned about admin staff not announcing themselves before coming into your cubicle. I am unsure to which admin staff you are referring, however staff have always been aware that a closed curtain means they should be asking permission to enter - so again I will reiterate this to the staff.

Thank you again for your post and should you wish to discuss any further - please do not hesitate to contact me on 02837562750

Maternity Unit Staffed by Angels

1369042*errandgh98 a service user 16/06/2025*

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Emma Creagh *Ward Sister, Maternity Daisy Hill Hospital Southern Health and Social Care Trust 17/06/2025*

Thank you so much for taking the time to tell us about your experiences here in Daisy Hill Maternity.

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Thank you again for your post and should you wish to discuss any further - please do not hesitate to contact me on 02837562750

Maternity/Gynae Outpatients

2 stories

Waiting room issues

1337815

antliaed63 a service user 21/03/2025

443 views

There's really needs to be signs up in the maternity outpatients waiting room about how seats should be reserved for pregnant women and patients. This also needs to be monitored and enforced by staff. You hope that people have the common decency to give up their seats to pregnant women but unfortunately I've seen it too many times now where male partners, friends and multiple children all have seats and pregnant women are left to stand around the perimeter of the room, especially on busy clinic days.

I've been to other hospitals where there's signs and announcements for this reason so unfortunately it's needed.

Amy McVeigh Midwifery Sister, Antenatal Clinic, Craigavon Area Hospital Southern Health and Social Care Trust
21/03/2025

Good afternoon antliaed63,

We have made a change

I apologize that this has occurred in the Maternity outpatients waiting room in Craigavon.

I will create some signs and ensure they are put up in the waiting room as soon as possible. I will ask staff to monitor this situation on a regular basis at clinics.

Many thanks,

Amy McVeigh

antliaed63

Thank you for your response Amy. However, my experiences have been of Daisy Hill. I'm sure this will make a positive impact in Craigavon Hospital too.

Amy McVeigh Midwifery Sister, Antenatal Clinic, Craigavon Area Hospital Southern Health and Social Care Trust
26/03/2025

We are going to make this change in the waiting rooms across both sites.

We have made
a change

Thank you for your reply.

Amy

Maternity Unit Staffed by Angels

1369042

errandgh98 a service user 16/06/2025

156 views

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Emma Creagh *Ward Sister, Maternity Daisy Hill Hospital* Southern Health and Social Care Trust 17/06/2025

Thank you so much for taking the time to tell us about your experiences here in Daisy Hill Maternity.

We have made a change

Firstly can I congratulate you on the latest edition to your family and hope you are all settling in well. I was delighted to read that you had such a positive experience with us and I will ensure that every member of staff that you mentioned is aware of your kind words. We appreciate that although your days, I am sure, are now busy navigating life with a newborn, you were able to leave us such a lovely positive care opinion. The staff do appreciate real time feed back and it is lovely to hear that they treated you like family.

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Thank you again for your post and should you wish to discuss any further - please do not hesitate to contact me on 02837562750

Women's Health Women Hub

1 story

Gynae Rapid Access Clinic

1 story

I feel quite let down by the system

1363717

craterrg96 a service user 30/05/2025

282 views

I feel quite let down by the system. I acknowledge it is no one that is working in the clinics that are at fault, but I can't help but feel so let down.

The women's hub was created in my opinion to stop women having to lose their babies sitting in A&E within a very clinical cold environment. I rang Craigavon for an appointment when I was experiencing my second miscarriage as Daisy Hill Women's hub doesn't open on a Thursday. I was very distressed bleeding and in quite some pain.

I was given an appointment for a week later. This was very distressing and agonising but I understand with encompass, appointments had been reduced and it is not the fault of the over worked staff coming in and working on the ground every day. The opening times on Daisy Hills Hub gives incorrect information regarding opening times which led to more distress.

After ringing multiple times the next day I could not get through. More distress and ended up in A&E. The compassion of the staff member I spoke to with the phone first service was amazing and I finally felt heard and not dealing with this alone. While in A&E I got quite an abrupt phone back from Daisy Hill Women's hub when explained I was in A&E, they washed their hands of me. I feel if they could have been more sympathetic or compassionate, but appreciate the stress staff are under.

I know the government have pushed the staff to this as they are overworked and underpaid but my experience unfortunately has not been a positive one.

If I could suggest one thing it would be to change the voicemail that is on the Daisy Hill hub to the correct opening times.

Would recommend? (Friends and family test): Unlikely

Margarita Caraher Ward Sister EPPC/Gynae Rapid Access Southern Health & Social Care Trust 02/06/2025

Good Morning Craterrg96,

I am sorry to hear you lost your baby, I understand this can be a very distressing emotional time for you. I apologise for the experience you had when contacting our service.

I will speak to our staff regarding the return phone call we make to ensure no lady is left feeling like you did.

Thank you for highlighting the answer machine message, I have reviewed this, it was not updated when staff change, I will get this updated.

If you wish please phone me in the women's health hub on 02837562754 so we can discuss this further.

Regards

Margarita

Margarita Caraher Ward Sister EPPC/Gynae Rapid Access Southern Health & Social Care Trust 01/07/2025

Hello craterrq96

Following on from your story on care opinion I wanted to let you know that the phone voicemail has been updated within the women's health hub.

Thanks for your feedback

We are
preparing to
make a change

We have made
a change

Lurgan Hospital

2 stories

my Husband's admission

1385472

deploymenttrt85 a relative 20/08/2025

The care has been excellent, everyone is very kind.

72 views

The only issue as a family we have had, would be communication, there have been times when people have thought we have known things, but having been a family that has never been through this before, we didn't.

Overall we have been very pleased with everyone and always met with smiling staff.

Would recommend? (Friends and family test): Neither likely nor unlikely

Sinead Morrow Lead Nurse - Lurgan and South Tyrone Hospital Southern Health and Social Care Trust 27/08/2025

Thank you for taking the time to leave this very valuable feedback.

I am so happy to hear that the care has been excellent and that everyone is kind.

I am sorry to hear that communication could have been better.

I would appreciate some more detail to help improve your experience and make changes to help improve your and other patients experience.

I would be very grateful if you could contact me to discuss further.

Many Thanks

Sinead Morrow

Nurse Manager

07795271624

Julie Walker Ward Manager Ward 1 Lurgan Stroke Unit Southern Health and Social Care Trust 10/09/2025

Thank you for your positive feedback regarding your husband's care in Lurgan Stroke Unit.

We have made
a change

Our aim is to give as much valuable Rehab time to the patient as possible and updates to families. Unfortunately sometimes due to staffing levels we are not able to provide the level of updates, we would like to. We are continually thriving to improve our communication. We are at present working on a GOAL setting folder for patients and families. The patient would set out their own personal goals and staff will provide a timetable and acknowledge what has been achieved, for both patients and family to view.

Thank you for your feedback and we wish your husband well on his Rehab journey.

Julie B Walker

Ward Manager Lurgan Stroke Rehab Unit

Ward 1 (Stroke care)

1 story

Patient updates for relatives

1384790

hekamg78 a relative 18/08/2025

Nothing happened but everyday we were asking the staff if mum ate her meals If she appeared sleepy at visiting time it was important for us to understand why

93 views

Had she been up sitting for a lengthy period and was just tired or had she just got up to sit and maybe something was working on her.

Also it would have been helpful to know if the physios OT or S< had been working with her at any stage each day again to help us understand her tiredness.

Discharge planning to date has been good although we don't fully understand why comm therapists have to reassess seating when their colleagues measured and assessed patient for that particular seating in the hospital know where patient was discharging to. There is a potential then if there is a delay in patient being assessed in community it could undo all progress achieved to date.

The care in ward 1 Lurgan hospital has been fabulous and the staff exceptionally attentive and knowledgeable about stroke conditions they are a credit to the Trust.

Sinead Morrow *Lead Nurse - Lurgan and South Tyrone Hospital* Southern Health and Social Care Trust 18/08/2025

Good morning, thank you very much for leaving this very valuable feedback. I am delighted to hear that the care in ward 1 Lurgan hospital has been fabulous and the staff exceptionally attentive and knowledgeable about stroke conditions.

To help improve communication it would be really beneficial if you could give the ward sister or I a call to help address some of your concerns and give the team a chance to explain the process in community.

My number is 07795271624

Ward managers number 07586494665

I will share this feedback with the team and discuss the importance of updating families.

Thank you.

Sinead Morrow

Julie Walker *Ward Manager Ward 1 Lurgan Stroke Unit* Southern Health and Social Care Trust 20/08/2025

Thank you so much for your positive feedback and praise of the stroke staff in Lurgan.

As discussed with you whilst your Mum was an inpatient, we valued your suggestion to have an activity sheet or diary at the patients bedside to update families on patients daily activities - we had this in place prior to COVID. We are discussing the return of this as a team. As you are aware staff were happy to give you a verbal update at your request.

With regards to the re-assessment of OT chairs in the community I have fed this back to the OT Lead and they have been working on a smoother transition to the community setting.

The Stroke Team wish your Mum all the best on her ongoing Stroke Journey.

Ward Manager of Lurgan Stroke Rehab

Julie B Walker

Julie Walker *Ward Manager Ward 1 Lurgan Stroke Unit Southern Health and Social Care Trust 10/09/2025*

Just wanted to update you with regards to communicating with families. We are presently working on a GOAL setting folder for patients and their families. The patient can set their own personal goals, then staff will provide and timetable and acknowledge what has been achieved for both patients and families to view.

We have made
a change

Thank you once again for you feedback

Julie B Walker

Ward Manager of Lurgan Stroke Rehab Unit