



Darwen Health Link, Darwen Health Centre

Enter and View Report

7th February 2025

healthwatch

Blackburn with Darwen

DISCLAIMER

This report relates to the service viewed at the time of the visit and is only representative of the views of the staff, visitors and residents who met members of the Enter and View team on that date.

Contact Details:

Darwen Health Link, Darwen Health Centre
Darwen
BB3 1PY

Staff met during our visit:

Frances Procter, Practice Manager and
members of the team

Date and time of our visit:

Friday 7th February 2025

Healthwatch Blackburn with Darwen
Representatives

Sarah Johns, Lead Staff

Katie Merry, Staff

Liam Kershaw-Calvert, Staff



Introduction

This was an unannounced Enter and View visit undertaken by authorised representatives from Healthwatch Blackburn with Darwen who have the authority to enter health and social care premises, announced or unannounced, to observe and assess the nature and quality of services and obtain the view of those people using the services. The representatives observe and speak to respondents in communal areas only.

This visit was arranged as part of Healthwatch Blackburn with Darwen's Enter and View programme to review Accessibility, Approachability and Responsiveness. The team of trained Enter and View authorised representatives record their observations along with feedback from patients, staff and where possible, carers or family.

A report is sent to the practice manager of the facility for validation of the facts. Any response from the practice manager is included with the final version of the report which is published on the Healthwatch Blackburn with Darwen website at www.healthwatchblackburnwithdarwen.co.uk

Acknowledgements

Healthwatch Blackburn with Darwen would like to thank Frances Procter, Practice Manager together with patients and staff for making us feel welcome and taking part in the visit.

General Information

The practice has 4 GP partners and has approximately 15,000 patients.

The current CQC rating of the practice is Good and was last inspected on 5th April 2018.

Methodology

The Enter and View representatives made an announced visit on Friday 7th February 2025.

We spoke to 19 patients and 7 staff where possible within the constraints of the GP surgery routine, people's willingness, and ability to engage and access to people in public areas.

Discussion was structured around 3 themes

- Accessibility
- Approachability
- Responsiveness

The team also recorded their own observations of the environment and facilities.

Our role at Healthwatch Blackburn with Darwen is to gather the views of service users, especially those that are hard to reach and seldom heard, to give them the opportunity to express how they feel about a service regardless of their perceived ability to be able to do so.

We use templates to assess the environment of a facility and gather information from respondents, to ensure that reports are compiled in a fair and comparative manner.

Summary:

Darwen Health Link is located within Darwen Health Centre just up from Darwen town centre. Patients we spoke with found access to the practice easy generally but harder for patients with mobility issues due to its location on a hill. Patients also find parking to be an issue on site with few buses going to the health centre from the town centre.

The practice is bright, clean and hygienic and there is up to date patient information displayed well on noticeboards throughout the practice.

The website is informative and we noted that it has accessibility functions built into it including a choice of languages. The Winter newsletter on the website was informative and an easy read. It was also easy to find how to make a compliment or complaint about the practice and the Practice has 'simple text' letters available for patients.

Access to the Health Centre was raised as an issue, particularly by those travelling by car due to limited parking availability and also for more elderly patients or people with mobility issues who access the centre on public transport which is infrequent from the town centre up the hill to the health centre.

Patients we spoke with were generally able to get an appointment within a reasonable time although some had to wait for a while on the telephone. However, this has been recognised as an issue by the practice and it is apparent that measures have been taking to reduce the waiting time for appointments. Patients also generally found that they had enough time with the doctor and that staff were courteous and friendly.

"Did Not Attends" are an issue for the practice but the statistics are published on the practice's social media and newsletter to highlight the impact to patients and the new phone option to cancel an appointment seems to be helping to reduce the DNAs.

Staff we spoke with felt supported in their roles and could speak with management if they had any concerns.

Concerns were raised by patients about not getting their prescriptions when they expected them to be ready. We spoke with a member of the prescriptions team who explained that there can be issues if the 'GP line' goes down and electronic requests do not show up on the day. They also highlighted that any prescription requests made over a weekend would only show up on the Monday therefore would take 48 hours to process from the Monday and they sometimes have to contact local pharmacies to check on prescription progress.



Enter and View observations

ACCESSIBILITY OBSERVED

Pre-visit and location

Representatives firstly looked at the practice website. This a newly refreshed website which has the options to translate the website into different languages and with an accessibility tools dropdown making it fully accessible for patients.

The website hosts details about the services available within the practice and links to useful external services. The Practice's Winter Newsletter which is an accessible document on the Homepage provides useful self-care and other clinical advice as well as updates from the Patient Participation Group.

There is good information on the website about the practice staff and their roles. Patients are able to raise suggestions or complaints within the Practice Policies section of the website using simple online forms. However, there is no guidance for patients who are unable to use the online forms.

The Facebook page has 1.4k followers and shares useful practice and local health information and patients are able to comment on the posts as necessary.

We did a test call to the practice at 9am on Friday 7th February 2025 and were number 3 in the queue. We noted that there is a dedicated phone option to cancel your appointment and another option to sign up to the text messaging service as an alternative to staying in the queue.

The external environment



The practice is located within Darwen Health Centre. The practice is situated in a multi-use building with another GP practice (Health Care), a Cohens dispensing pharmacy and other NHS resources. It is situated in a prominent position in the centre of Darwen with transport links close by.

The building is well signposted and easy to access by those on foot. However, those with limited mobility or pushing a pram or wheelchair may find the sloping approach less so and there are limited buses to the Centre from Darwen town centre.

The building presented as clean, modern, bright, spacious, and well lit.

However, car parking was not easy to find, despite there being dedicated spaces and disabled bays close to the entrance of the building. Our team had to park offsite and walk to the Centre.

Large automatic doors lead to a busy general reception area where a “Community Reception” desk is placed in a prominent position to guide people further. We were directed to the dedicated Darwen Health Link reception on the first floor which can be accessed via a lift with a visual floor indicator and audible announcer and Braille markings.



The internal environment/reception

Reception/Waiting Room



We were welcomed by reception staff asking us to sign in. We were shown around by the Practice Manager who introduced the team to the available members of staff.

The reception desk has wooden dividers between desks to allow for greater privacy of patients and one of the desks is at a lower height, thus catering for wheelchair users. We noted that there is a hearing loop available for patients with hearing impairments. There is a lot of information on the desks which might be confusing for patients and be better displayed on the noticeboards within the practice itself.

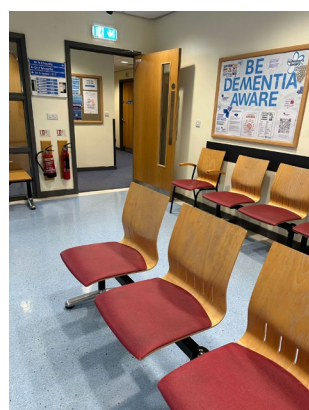
The reception staff were observed by our team to be friendly and efficient, working quickly to manage the queue and ensure patients were seen promptly.

The self-check-in screen is located at the top of the steps as you approach the reception desk and may not be immediately visible to patients because it is located in front of information about local voluntary sector support and next to a weighing machine. We observed reception staff members informing patients in the queue that they can sign in using the machine if they were simply coming for their appointment.

There is a helpful “Meet the Team” noticeboard opposite the reception desk which is useful for patients to identify who their appointment is with and makes the team appear very approachable.



The waiting room is brightly lit and with a mixture of seating available for patients and the seating is well spread out, allowing easy wheelchair access.



There is a lot of patient information available in the waiting room which is helpful and it is all up to date and displayed on noticeboards clearly and in an appealing manner.

We noted that patients are called for their appointments via a visual banner, a TV with audio and staff also often came into the waiting room to meet their patient.

Observation of corridors and public bathroom

The corridors to the consulting rooms were well signposted, brightly lit and further patient information was on display on the walls. The corridors were noted to be adequately wide for wheelchair access as were the doors to each of the consultation rooms.



There was a toilet available for patients which was bright, clean and hygienic however this is not fully dementia friendly with the suite being the same colour as the walls and the toilet seat was not in a contrasting colour, however we noted that the grab rails were appropriate and the floor was in a distinct contrasting colour. We noted that there is a nappy change facility on the ground floor of the Health Centre.





ACCESSIBILITY AND APPROACHABILITY DISCUSSED

During our visit, we observed that the patients had short waiting times for their appointments during our visit and there were pleasant and respectful interactions between reception staff and the patients at the reception desk.

We spoke with Frances Procter, the Practice Manager, about accessibility and approachability of the practice for patients.



How easy/difficult do you think is it to get an appointment with the GP?

“The practice has 15,000 patients. We know from patient feedback that getting an appointment has been an issue so we’ve been working to address that and have reduced the wait time from a high of 4 weeks to 1-2 weeks and we do have emergency on the day appointments and book Extended Access Clinics which are available across BwD at different GP sites. One of the sites is based at Darwen Health Centre.

We are taking on a new GP and a GP ARRS role which will provide 10 extra sessions. The practice has done a push on promoting online access using Iplato link on the website and they have a high up take of the NHS app. We have a dedicated member of staff who has oversight of the balance between routine and urgent appointments. The GPs send ‘tasks’ to the team to book follow up appointments into the calendar ensuring that patients are seen by the same doctor and then we fit in routine appointments around these.”

Do people generally get to see the GP on time?

“It has improved lately. Some of the GP’s do run behind due to appointments taking longer. We have discussed the negative feedback from patients with the clinical team and are working on reducing the waiting times. We got 96% positive feedback on our last Friends and Family Test. The only reason for delays really is if we have an emergency and have to move routine appointments slightly but reception team now always go out into the waiting room to inform patients if there is any delay.”

Do you have a social prescriber attached to the practice and do you refer to them? Do you have any other additional roles as part of the practice staff team?

“Yes we had previously been making referrals out to the social prescribing team but we have recently started having inhouse social prescribing team which has made a difference. There are 4 bookable appointments of 45 minutes each which can be booked by either reception or the GP. We now also have Spark offering drug and alcohol support on a Friday and BwD Carers Service visit on a Friday. We have clinical pharmacists and a mental health practitioner as part of the Practice team.

How do you identify and support more vulnerable patients?

“Carers details are taken at registration, and alerts are placed on patient records with the carer's information. We offer home visits for housebound, end of life and elderly patients. In house, we provided double appointments for those who are attending with mental health concerns and made need that little bit longer. We are registered as veteran friendly practice. We have an LD register and ensure that annual health checks take place. We now have a simple text version of patient letters which we use and have accessibility tools built into the website. All of the rooms are adapted and have wide doors, there is a hearing loop in place and we have a practice wheelchair if needed. The health centre has a lift so the rooms are all accessible.”



RESPONSIVENESS DISCUSSED

We noted a significant amount of patient information available about local health campaigns, including women's health and mental health in the practice waiting room. The practice also offers clinics for long term condition management.

We asked the following questions of the Practice Manager.



How do you manage DNA GP appointments?

“We recently published our DNA statistics in the Winter Newsletter so that patients can see the impact on staff time. We decided not to talk about the cost in the newsletter but rather show that there could be additional GP and nurse clinics every day if the DNAs did not take place. We do have a higher “Fail to Attend” on Nurse appointment but are impacted by the GP Fail To Attends too. We have introduced a new option on the phone line for people to cancel appointments and they can just leave a message rather than speaking to a member of the team. We do have a FTA policy where we send out 3 letters to patients before removing them and we do try to contact patients when they have missed an appointment to see the reason why. We offer flexibility on this policy if the patient is known to have mental health concerns or is under the safeguarding team.”

Why do you think that some people seem to access A and E rather than primary care?

“Patients do not tend to go up to A and E but it will be where they are having to wait for an appointment. We do monitor patients who appear to be attending A and E often and refer into the Integrated Neighbourhood team.”





Feedback from Patients

We spoke with 19 patients, however not all were able to complete the survey because they were called for their appointment.

ACCESSIBILITY

Are the opening hours sufficient for your needs?

16 patients reported that the opening hours were sufficient for their needs. One person stated that they seemed ok but that they did not visit the practice often and two people felt that longer opening hours would be beneficial.

“I would appreciate it opening later as I am at work and can’t always leave for an appointment”

“Although we are retired and can attend during the day, longer opening hours and evening/weekends would allow more flexibility and availability.”

Is it easy to park or travel to?

Generally patients we spoke with felt that it was easy to travel to the practice. However, access was difficult for those who needed to catch a bus to the Health Centre due to mobility issues.

“The bus isn’t reliable, it only comes up here twice a day at odd times so it doesn’t always align with my appointment times, I have to rely on family members”

“I can’t get the bus because it doesn’t come very often”

However, parking was raised as an issue by all patients who travelled by car to the Health Centre.

“Parking is a nightmare, I have to come 10min earlier than my appointment as it takes so long to get a parking space”

“Came by car, it’s not easy to park. The disabled bays are taken by taxis. But the practice said they can’t monitor it.”

“The car parking is a nightmare but I think it’s BwD Leisure staff parking on there when they shouldn’t.”

How did you get your appointment today?

Most patients rang to book their appointment with varying experiences. However, some booked their appointment in person.

“I rang about 3 weeks ago for my appointment today”

“I rang this morning and got the appointment for today”

“I’ve got an appointment for today for my little boy”

“I came this morning to drop something off and asked if I could make an appointment, they said they could fit me in 15mins which is really good”

“It’s a routine appointment today, its every 12 weeks. One thing which is annoying is I have to ring up a week before to get a time for my appointment, they only give me a date and I have to organise the time”

“I came this morning at 8am as I know if rang I would have got an appointment for next Thursday and my problem might have gone by then”

“It’s a follow up appointment”

“I phoned a week ago and got an appointment for today”

“I rang to make an appointment 2 weeks ago”

“I called on the phone for my appointment. I was waiting quite a while.”

“I phoned this morning for an emergency appointment and have received a same day appointment.”

“I called on the phone and got through fine.”

“I called on the phone and got through ok. I’ve used the call back service before and got a same day appointment which was good.”

“It can take a while to get through on the phone especially on a Monday.”

“The text message service works well for me.”

“By phone, young man on reception as very kind.”

“Routine appointment. Got a text message and rang. Getting an appointment is difficult - struggle to prebook in advance and it’s very difficult to get the same the GP. Have to call at 8am to get an appointment that day.”

“Reception staff usually say things like “ unless it’s a medical emergency” we have no availability for several days. This is confusing. What is a medical emergency? It usually takes a certain amount of personal knowledge regarding the condition to persuade them.”



APPROACHABILITY

- **Are staff courteous and polite?**

16 patients stated that the staff were courteous and polite, with some expanding on their responses:-

“No problem at all with staff, all very nice. Dr Choudry is wonderful”

“Yes they are and it’s a good surgery, the waiting room is clean and spacious.

“Yes they are always nice”

However three patients shared mixed feelings about the staff.

““Most of the time, admin staff could be better. GPs always brilliant”

“Doctors and nursing staff are all very Kind and pleasant. Reception staff vary. Some try very hard to help in any way they can while some are quite abrupt and not interested.”

“Majority of GPs are good and listen. There are a couple that are not so good. Staff are friendly.”

Would you recommend this GP surgery?

9 patients stated yes with some expanding on their answer stating:-

“Yes I’ve been here for years. They’re all good but I do miss Dr Ahmed!”

“Yep definitely - if they can get appointments.”

“I would but I would tell them they will never see their own doctor”

However, 3 shared mixed feelings and 1 stated that they would not recommend the surgery.

“Yes and No, the wait time for a non-urgent appointment is too long”

“That’s a difficult one. There are parts that are good, staff are all good. But getting appointments is hard.”

“Not at present due to administration/systems.”



RESPONSIVENESS

Do you get enough time with the doctor?

12 patients stated that they had enough time with the doctor, with one patient stating, “Yes, some GPs deal with things even if it runs over time. The problem is if you have multiple problems, you can only discuss one. You have to book another appointment.”

However 5 patients shared mixed views.

“I don’t know, I don’t come that often so I don’t really know how long I should have”

“Sometimes I feel a bit rushed, I know you only get 10mins but sometimes I don’t think you get 10mins”

“Sometimes yes, sometimes no. A 10 minute appointment doesn’t always apply to everyone.”

“It sometimes feels a bit rushed.”

“Yes, but sometimes probably not enough. 10 minutes you can’t go into specifics, 20 minutes perhaps is better. I have been waiting for 15 minutes, sometimes they overrun, but that’s okay.”

- **Do you have any understanding/experience of social prescribing?**

Only one patient we spoke with knew about social prescribing because of her job.

- **Has there been an occasion when you have felt you had to attend A and E rather than get a GP appointment?**

Only 3 out of 17 respondents stated that they had attended Emergency Department.

““Once, I rang for an appointment for my child and offered an appointment for a week’s time so I had to go A&E”

“Yes, the doctors was shut so I went to A&E it was for my little boy”

“only once because I’d broken my finger”.

Other Comments

“I always struggle getting my repeat prescription, when I go to the pharmacy downstairs it's not ready, I have to go up to the doctors to chase, then I have to come back again to pick the prescription up. Then sometimes you get your prescription and it will have the date on it when you thought it would be ready which makes you wonder what happened with it?! It happens nearly twice a month with my husband's prescription, it's very annoying. The prescription line is always busy and only open for a short amount of time”

“I've once been sent to the pharmacist because I couldn't get an appointment and he gave me antibiotics”

“Everything is lovely” It's clean, spacious and comfortable. The Doctors have all changed since I worked here. Only thing off putting is the cancer noticeboard in the waiting room, it's very in your face and would be better elsewhere. A news board would be good in that space.

“Keep away from the hospital”

“Should be able to book an appointment a week in advance - frustrating”

“One thing they need to keep in mind is all the new housing developments in the area, is there a plan to open up another surgery to keep up with the demand? The need for the practice will only go up, and it will add to the stress and the strain on this practice. Something needs to be looked into about this. Another surgery may relieve pressure.”

“When they moved up to this centre, they moved the practice to the top of a hill which is very difficult for elderly people. They either have to get somebody to drive them or pay for a taxi. There used to be a shuttle bus that came up the hill, the bus stop is still standing outside.”

“It could be a very good practice, but there are little things they could improve on. Look into the future, plan, as it's only going to get worse. Also, could you change the hold music, I find I am turning my phone down or moving my phone away from my ear. Couldn't you put the radio as hold music instead?”

“Getting through on the telephone is a constant issue.”

“Certain lines are open for short specific times. E.g prescription line 10 till 12 and reception 12 to 2 pm. These are very frustrating when sometimes the issue can include the need for both.”





Feedback from Staff Members

ACCESSIBILITY

- **How easy/difficult do you think it is to get an appointment with the GP?**

“Don’t think it’s too bad.”

“If you try on a Monday it’s hectic, but usually you get an on the day appointment. Queue time is usually around 15 minutes on average. There are three phones.”

“We’re all right at the moment. Can wait up to two weeks if they want a specific GP, but most people get appointments on the same day if urgent.”

“Most of the appointments on Mondays, 20 for each GP. Usually have around 50 appointments a day. But have out of hours too.”

“Quite easy. Most if urgent get an appointment on the same day. Routine is usually in 2 weeks. We have majority of people having in person appointments again now but they get a choice. People who choose phone will be given a time frame for when the GP will ring. Usually it’s later, but some patients complain if Doctor doesn’t ring at an exact time.”

“Usually, we get around 500 calls a day. 800 on a Monday.”

Do people generally get to see the GP on time?

“We do our best.”

“We do a follow up - continuity of care. Make sure follow ups are done with same GP. We’ve had positive feedback. Ring to book routine.”

“Depends on the GP. Average is waiting 10 minutes in the waiting room. If you’ve been waiting more than 20 minutes, we have a sign that says go to the desk and check up on it.”

“Yeah. Some will wait for a specific GP though if that GP is on annual leave.”

“I would think so. Sometimes waiting a bit longer for some GPs, as they’re sometimes overrun.”

APPROACHABILITY

- **How do you identify and support more vulnerable patients(for example those with learning difficulties.)**

“It varies - but we do home visits. Vulnerable and elderly we support with signposting them to INT and social prescribing.”

“We give double appointments for those who need it so they have longer to speak with the GP.”

“We have priority EMIS numbers for vulnerable patients, and they get appointments on the day. Cancer patients, disabilities etc. They get same day appointments too.”

“We have a lift and wheelchair. Chaperones if needed. We have language line for language barriers, as well as GPs who are fluent in other languages. And we have co-sign for deaf patients. The screen in the waiting room announces the patient’s name, but the patient is also collected by whoever they’re seeing too.”

“Elderly will get priority appointments. We have alerts on our records for vulnerable patients. We make sure to get them an appointment on the same day, even if fully booked, we will squeeze them in.”

“Usually vulnerable patients will come with their carer. But we have notes on the system to identify them.”

RESPONSIVENESS

- **Do you have a Social Prescriber attached to the practice and do you refer to them?**

“Yes”

“Social prescribing is used. Also started using SPARK.”

“One’s just started in the practice, they’re in every Tuesday and people have been booked in for them. Also have someone come in from SPARK.”

“Yes, frequently. They’re in weekly. We do use them.”

- **How do you manage DNA appointments?**

“DNAs get sent a letter - some are excluded if they are vulnerable.”

“You get three warnings in a year for missing three consecutive appointments. You get a letter sent about being removed from the practice. If there is a valid reason for the DNA, it is wiped off. We tend to let off people with mental health issues etc.”

“There is a daily check for DNAs and then a weekly DNA number is posted on our social media. We have a 3 strike policy, 3rd policy practice is to remove. We do take considerations and will send letters and ring about the DNA. We offer another appointment if needed.”

“Since adding the cancellation option 6 on the phones there has been a reduction in DNAs.”

“We post the DNAs on social media each week, and have a voicemail or email to cancel.”

- **Why do you think that some people seem to access A and E rather than primary care?**

“None come to mind of going to A and E, but some will ring 111 for medication to try to get more.”

“It’s a problem here with inappropriate attendance to A and E, it’s getting higher and higher.”

“We use INT if a patient is flagged up 6 times going to A and E, we highlight that and offer to help where we can.”

“You get the odd one. You can’t stop them but can advise or signpost in other directions.”

“I never really hear of people going to A and E first.”

“Not aware of that happening much.”

Any Other Comments?

“I enjoy working here, been here over 5 years. I enjoy what I do. I’m supported by the management; they are accommodating and flexible with childcare. Some get the option to work from home.”

“I think we give an excellent service, we have a brilliant diverse team. It works.”

“We sadly get harsh comments but they’re not appropriate. The positive never gets published.”

“I’m proud to work here.”

“I feel supported by the management. We all support each other”

“We have a lot of good systems in place, hopefully getting more GPs which should speed things up. I enjoy working here, but we do need some more GPs.”

“I feel supported, if we have a problem. We can talk.”

Response from provider

Thank you, Sarah, to you and your team for your feedback from your recent visit.

We have read through your report and detailed findings and overall, we are very pleased with the outcome of the visit and the positive comments received.

The practice has worked hard on updating our website to provide patients with an informative yet easy to negotiate format. We have also appointed a dedicated member of staff who oversees this for us, so it is nice for this to be recognised. We do however acknowledge that there needs to be guidance around how patients can access hard copies of the forms and this information has now been added.

The building is not practice owned but leased and therefore we are restricted around what changes we can make. Parking has always been a recognised issue from the opening of the building and although we do occasionally have patrols from traffic wardens to address illegal parking, patients may find that at peak times of the day, it can be busy.

I have contacted the Buildings Operational and Relationship Manager to see if there is any improvement we can make to the colour of the walls and toilets seats to make the area more Demetria friendly but as previously mentioned, we are limited to changes we can make without approval.

We try to display as much information as possible in the waiting areas and reception to inform patients who cannot access the digital platforms available such as the website and Facebook site. This information is reviewed and updated regularly, and I am pleased that you found this information displayed both relevant and useful. However, I take on board your comments around the amount of information displayed at the reception desk but due to the location of the reception, we are restricted to one noticeboard due to wall space, so the information is more difficult to display. We will look to try to remove some of this to make it less confusing for patients.

We are also restricted to where both the check in machine and the weighing machine can be placed but I have taken on board your comments about trying to make it more visible to patients where possible.

Our reception staff work extremely hard to support our patients and ensure they receive the most appropriate care. They are trained care navigators, and they may ask questions about the nature of the problem to direct patients to the most appropriate healthcare professional. These questions are asked with professionalism and the patient can always decline this if they feel it is too personal and do not want to discuss. At times this can prove challenging for the reception staff as most patients recognise that this is to try to assist them, they do get a lot of unnecessary abuse from some. However, if a patient is at all dissatisfied with the care that they get from the reception team the practice operates a complaints procedure and this is available both online and at the reception desk allowing us to address the concern raised in the most appropriate manner.

We provide a mix of appointments such as routine, follow up and emergency appointments. The GP may request to see a patient in a few weeks and these patients are added to a follow up system which enables patients to be contacted when this is due without the need to ring back. If a patient contacts the surgery for a follow up appointment, they are added to this list if one is not available at the time. Routine appointments are between 1 – 2 weeks and we have just recruited 2 additional GPs to assist with this. These appointments are bookable in advance where available. Emergency appointments

are available on the day, and we have an on-call GP who triages the urgent requests once all the practice appointments are at full capacity. We also have an extended access service that we can book into which offers patients an appointment with a GP that works in the Blackburn with Darwen area. These are located at numerous GP sites across the borough with one being located in Darwen Health Centre.

The reception phonenumber is open from 08:00am to 18:30pm daily. Certain telephone lines are only operational within specific times frames to ensure that our staff have the time to process all the administrative work that accumulates throughout the day. An example of this is the prescription line, but we do offer multiple alternative methods to contact the practice when these phone lines are closed. Prescriptions can be ordered via the NHS or MyGP App, via email or in person at the front desk. There is also the facility to leave a voicemail when these phonelines are closed. This is the same for the secretarial line. We try to make the practice accessible to all by operating both manned and digital services.

The practice is always striving to improve our services and we welcome patient feedback to allow us to identify areas that may require improvement.

If you require any additional information, then please feel free to contact me directly.

Thank you.

Frances

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