



## Darwen Healthcare Patient Participation Group Meeting Minutes Tuesday 29<sup>th</sup> April 2025 5:30 at Darwen Health Centre

Name	Position	Int	Attended
Barry Ashbolt	Chair	BA	y
Anne Crook	Vice Chair	AC	y
Alan Pickup	Secretary	AP	y
Karen Narramore	Member	KN	y
Christine Sharples	Member	CS	Apologies
Carol Guy	Member	CG	y
Brian Taylor	Member	BT	apologies
Anne Watson	Member	AW	y
Janet Bowker-Bull	Member	JB	n

Name	Position	Int	Attended
Ann Neville	Practice Manager	AN	y
Nicola Wright	Quality Lead	NW	
Kim Cunningham	Operations Lead	KC	
Susan Taylor	Patient Engagement	ST	y

No	Item	Content	Action	Deadline
	<b>Welcome - Chair</b>	Barry welcomed everyone to the meeting and Alan advised there was no set Agenda		
	<b>Apologies - Sec</b>	As noted above		
3.	<b>Minutes of the last meeting - Chair</b>	Minutes of the meeting on the 24 <sup>th</sup> Feb 2025 were agreed as a true record and outstanding actions not on this agenda had been completed. Othe outstanding items are on the Agenda	AP to add to website	<b>31/5/25</b>
4.	<b>Newsletter</b>	Practice Newsletter – AP advised that there had been around 1700 views of the Spring Newsletter, AC asked if they were unique views, AP advised that it could not distinguish from repeat visits to first visits. AN said that she would like to do 4 newsletters a year, with the theme Spring March, Summer July, Autumn September & Winter December which could emphasise events like Flu Vacs etc. AP advised we needed to sort the content now for summer. He would circulate previous Summer newsletters for ideas. AW added it may be helpful to have some information around things like capped water rates for single occupant households, AP advised that we	<b>AP to send samples</b>	<b>07/06/25</b>

		usually included links to Age UK, Care Network and other support services who may be able to provide this kind of advice and support.		
5.	<b>Practice Update - Ann Neville – including report on Telephone system &amp; Triage request</b>	<p>AN advised the ring back facility was now becoming more frequently used (47%) and the online enquiry system was also increasing. Members advised they had used this and it was good to be able to note the reason for the request in the notes, rather than trying to explain on the telephone.</p> <p>AN advised that the practice list size now exceeded 14k and would likely continue to increase with the new housing being built.</p> <p>Dr Naweb who had previously trained at the surgery was now an extra GP under a funding scheme called ARRS (Additional Roles Reimbursement Scheme).</p> <p>Dr Meridith is undertaking more Steroid injections clinics which meant that patients could be seen earlier than if referred to MSK.</p> <p>New mothers were being sent a screening letter using the Edinburgh Scale Check to identify any post-natal problems.</p> <p>Failed to Attend is still high and a stronger approach for forwarding patients a link to the FTA Policy. Patients failing to attend 3 or more appointments are at risk of being removed from the practice list.</p> <p>The practice is averaging 6000 appointments per month.</p> <p>AN asked if the PPG would process the PPG Patient Satisfaction Survey and it was suggested that it may be worth asking what patients felt would improve the service other than more appointments. BA said it would be wise to keep the questions standard each year so variations can be measured historically.</p> <p>AN advised that the practice would be undertaking patients Phlebotomy and ECGs soon as part of new Local Enhanced schemes.</p>	<b>AP to circulate last years questions to the group for comment,</b>	
6.	<b>Website &amp; Social media</b>	AN advised that they had been in talks with a couple of companies to run social media campaigns and were looking at ways to improve the practice social media	<b>AN to update plans</b>	

		engagement. This would also include the review of the website. AP advised that it was important that the use of images was restricted inline with NHS England recommendations as the figures show that over 60% of website views are on mobile devices and images increase the time taken to find the relevant information. He also advised that the NHS are recommending a simpler menu bar with drop downs rather than large lists of pages.		
	<b>Hospital Discharge and handover to GP Services</b>	BA said there was a lot of confusion about follow ups on discharge from hospital and resulted in complications with his suture removal. AP advised that when his wife was discharged via Albion Mill the handover procedure was quite good with followup from the physio team based at Albion Mill. He advised with the number of discharge letters and other allied reports he had a folder full of information, which could be confusing for many people. Group to look at a discharge leaflet listing actions separate from the full discharge letters would be helpful, this may need input from hospital services.	<b>To be reviewed</b>	
	<b>Any Other Business</b>	AN advised the group of the passing of Peter Labbett who had been a member of the group prior to Covid, but found virtual meetings difficult. AN advised he had been helpful with practice items having worked for the local medical committee		
	<b>Date and Time of Next Meeting</b>	Following a canvas of members meetings have now be changed to a Tuesday from this meeting to help with pressures to prepare information and members who had fixed commitments on Monday evenings		

Dates updated	Meeting
Tues 24 <sup>rd</sup> June 2025	PPG Meeting
Tues 16th Sept 2025	PPG Meeting
Tues 25 <sup>th</sup> Nov 2025	PPG Meeting & AGM