



Darwin Medical Practice Patient Engagement Group (PEG)

Minutes of Meeting held at 11am – 15 September 2026

Attendees:

Roy Ellwood

Jim Bowen – Vice Chairman

Bill Harrison – Vice Chairman (apologies)

Ken Sheppard

Margaret Wakelin

Jacqueline Downs

Beth Fryer

Sarah Bradbury

Janet Foord (Apologies)

Sheila Nicholas

Dr James Ward – GP - Partner

Karen Cooper-Sollom – Patient Liaison Officer

Guest:

Paul Taylor – Virtual PEG Member

Welcome

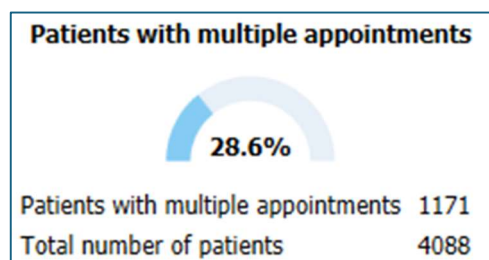
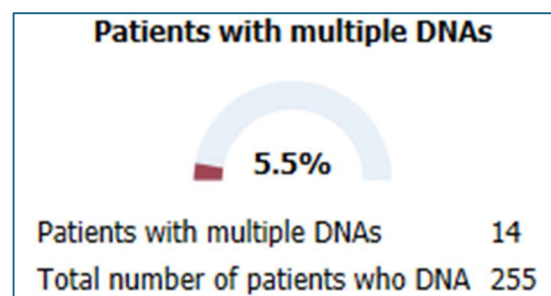
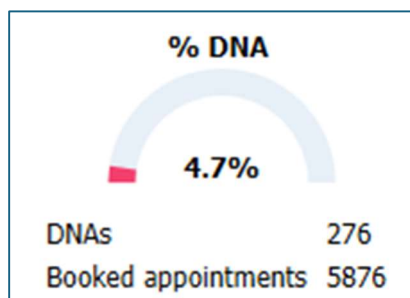
Roy welcomed everyone to the meeting and asked for the members to review the minutes from the July PEG Meeting.

Apologies

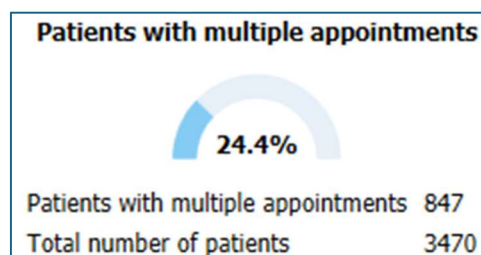
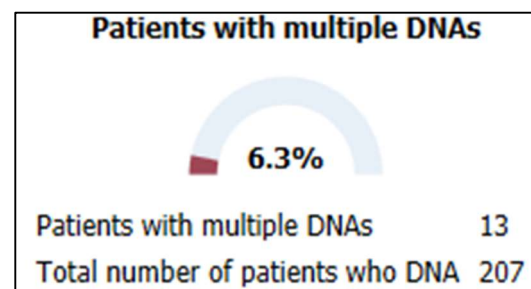
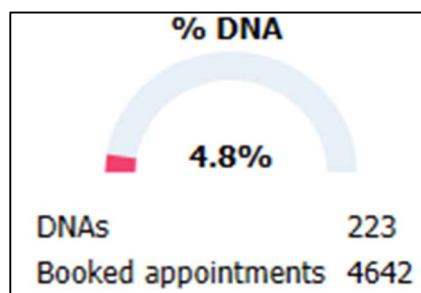
Janet Foord

Bill Harrison

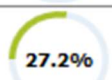
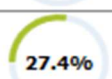
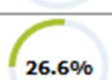
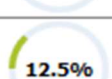
DNA (Did not attend) data 1 July – 31 July 2026



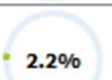
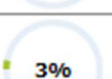
DNA (Did not attend) data 1 August – 31 August 2026



DNA Age range data – July 2026

Less than 1 year		Total	Booked DNA DNA Rate	60 3 5%
1 - 5 year		Total	Booked DNA DNA Rate	134 7 5.2%
6 - 15 year		Total	Booked DNA DNA Rate	175 12 6.9%
16 - 45 year		Total	Booked DNA DNA Rate	1594 116 7.3%
46 - 64 year		Total	Booked DNA DNA Rate	1602 71 4.4%
65 - 80 year		Total	Booked DNA DNA Rate	1556 47 3%
81+ year		Total	Booked DNA DNA Rate	729 17 2.3%

DNA Age range data – August 2026

Less than 1 year		Total	Booked DNA DNA Rate	46 3 6.5%
1 - 5 year		Total	Booked DNA DNA Rate	103 4 3.9%
6 - 15 year		Total	Booked DNA DNA Rate	137 11 8%
16 - 45 year		Total	Booked DNA DNA Rate	1297 126 9.7%
46 - 64 year		Total	Booked DNA DNA Rate	1265 40 3.2%
65 - 80 year		Total	Booked DNA DNA Rate	1188 27 2.3%
81+ year		Total	Booked DNA DNA Rate	591 10 1.7%

Friends & Family July 2026 Response Rates

1054 responses received – 18.8% response rate against the number of appointments attended.

995 patients – 94.4% of patients recorded a Very Good/Good Score

38 patients – 2.7% of patients recorded a Very Poor/Poor

31 patients – 2.9% of patients recorded a Neither Good nor Poor/Don't Know Score

Friends & Family August 2026 Response Rates

978 responses received – 21.1% response rate against the number of appointments attended.

910 patients – 93.1% of patients recorded a Very Good/Good Score

32 patients – 3.7% of patients recorded a Poor/Very Poor Score

32 patients – 3.2% of patients recorded a Neither/Don't Know Score

Comparing the 2026 response rate with the first half of 2025 (January to June), we have seen the average response rate reduce from 24.9% to 20.7%, despite the number of appointments available increasing in 2026 compared with the same period in 2025.

There was a discussion about the response rate for the Friends and Family Test. The general view was that patients receive a large number of surveys from different services, including GP and hospital appointments, which may result in requests for feedback becoming lost or overlooked.

Review of July 2026 minutes

No other points arose from July's minutes.

Business Update

At the end of August NHS England sent out information to everyone eligible for RSV vaccinations. We did not know that this was going to happen until patients made us aware at the time of booking appointments. This has put significant extra pressure on our nursing appointment capacity, but we have ordered extra vaccine and are managing to keep up with requests for appointments.

On top of this we have flu and covid clinics throughout October. We have tried to do these in addition to normal clinics. W/C 7 September we started to invite patients to book their vaccination appointments. We are sending messages inviting 500 patients a day. Approx 9k of our patients are eligible for the vaccination.

Q. A member of PEG said they'd received their invitation but that the booking link wasn't working.

R. We have recently started using a new system called Abtrace and we quickly realised that it had been set up with a time limit initially affecting the booking links. This has now been resolved. We are continuing to learn how to use Abtrace more effectively.

Q. Will both Flu & Covid vaccinations be given together?

R. Yes, patients will receive both even though the invitation only mentions Flu.

We are working hard to fix the appt capacity:

- Staff are doing extra hours to help us catch up
- We have a new Practice Nurse who is currently doing their induction but should start running sessions soon. This is Adam who they may know as he used to be an HCA with us but has now completed his nursing training and qualified as a nurse this year.
- We have a new bank HCA who has recently completed her induction and has started doing blood test clinics.
- We have another new HCA who will work 5 mornings/week. She is an experienced HCA and is doing her induction but should be able to quickly start offering appointments once her induction is completed.

The disruption has caused a backlog in patients that need appointments and we will therefore keep adding in extra capacity where we can until we feel that we have caught up.

Practice Staff Updates

6 Resident GPs joined the practice at the start of August 2026 to take us up to 9.

Following successfully completing his degree Adam Dibble has moved from his role as HCA to Practice Nurse.

Practice Nurse Sam Hennah, who was on a fixed term contract covering for Megan Taylor left the practice at the end of August, giving 1 weeks' notice. Sam had 6 weeks of appointments prebooked these have had to be re arranged. Megan is expected to return from maternity leave towards the end of October 2026.

Our new Mental Health Nurse joins us in October and is currently on induction. The last couple of months we have had a gap in our mental health appointments, due to the Mental Health Nurse being on long term sick, that the GP's have been bridging the gap.

Dr Jaya Kuzhively will join the practice the second week in October. She will hold 6 sessions per week. In addition, GP's have remained stable throughout the summer.

The two new HCAs joined the team w/c 31 August and are now holding clinics.

Urgent Care Team – 2 people have been off long-term sick, 1 has returned this week and the 2nd is due to return in October 2026. As an interim we have been employing Locum's.

Reception/Administration has some absence, and we are continuing to recruit into the team.

Management team remains stable.

Short term impact of the absence and leaver is becoming more stable.

Other Business

PEG members discussed visibility and asked if Leanne Steven's from the PCN who is doing some work with practices around the NHS App could be contacted for an update on when she is planning to visit Darwin Medical Practice. It was agreed that this item would be added to the October agenda.

Could the Community Events page on the Darwin website be better utilised with information from the local councils.

AOB

1. Is there anything being done to address the 6 weeks wait for routine appointments?

Yes/No – Yes, we're reviewing and improving capacity through improvements to website and recall process to improve efficiency.

Investment has been relatively low over the last 2 years and with the increases to minimum wage and National Insurance it hasn't left much to invest to increase capacity.

The wait times have remained similar in the last 2 years.

To reduce the appointment, wait time to 4 weeks we have calculated would need 50 more GP appointments, that would require a significant amount of investment compared to our new budget. The share of NHS funding going to general practice is the lowest its been for 15 years.

Please see attached graphs that show the type of appointments. It shows the Rapid Health daily bookings.

Other local practices now have a total triage system in place, which means their patients have to go online and complete a form that is then triaged by a clinician to determine the best course of action. There is an efficiency gain to working this way, but we have chosen not to do that as yet because we like to offer a different type of service. One of the consequences are that patients can wait longer for appointments to see a GP. We would encourage people to use the website to get the best set of options.

We are seeing an increase in demand during September following the summer holidays. The graphs do show that we are seeing a decrease in waiting time for the phone to be answered and we think this is because more people are using our website and the booking links being sent out with our new system.

We have always aimed to have same-day appointments available throughout the day so that there are few occasions where people get a message to say all the appointments are gone. However, we are seeing more patients using the online appointment service and choosing routine appointments (Green), which allows them to plan their time more effectively.

As a result of this shift in how patients are choosing to access appointments, we are reviewing how we manage demand and looking at how we can better match demand to the most appropriate available capacity i.e. we want to try and increase availability of more "routine" appointments.

Q. When selecting 'Ask the GP' through Rapid Health do these sometimes turn into appointments?

R. We are processing Ask the GP messages within a few hours of them being received, if sent through the working hours. Where appropriate, remote assessments are being used to manage patient requests; however, some patients may still be asked to attend a face-to-face appointment where this is clinically necessary to ensure patient safety.

It's important that this isn't used by patients to access urgent appointments. Urgent appointments can still be accessed through the website.

Q. Have we promoted the new method of booking appointments outside of the website?

R. We have deliberately decided to incrementally develop this service, actively encouraging patients to use the website when they contact reception but not promoting it more broadly.

We are cautious about actively advertising the service to ensure that we do not become overwhelmed and are able to manage the level of interest appropriately.

Since the website was updated in July/August, we have started to see further incremental changes in how patients are accessing and booking appointments.

2. Can a blood test appointment for annual review be booked online?

These appointments are not currently available to book online. If we make blood test appointments available, they might get misused, we like blood tests to only be ordered after contact with a clinician. For annual review blood tests, the invite to come in will contain a booking link so that you don't have to ring through to reception.

3. What is the eligibility for Flu/Covid vaccines?

Flu vaccination eligibility:

- Adults aged 65 and over
- Pregnant women
- People aged 6 months to under 65 with certain long-term health conditions
- Residents of long-stay care homes
- Carers
- Close contacts of immunocompromised individuals
- Eligible frontline health and social care workers
- Children aged 2 and 3 years (in practice)
- All primary and secondary school pupils (Reception to Year 11, delivered through the school vaccination programme).

Covid vaccination eligibility:

- Adults aged 75 and over
- Residents of older adult care homes
- People aged 6 months and over who are immunosuppressed

4. When are the Flu/Covid Boosters scheduled to start?

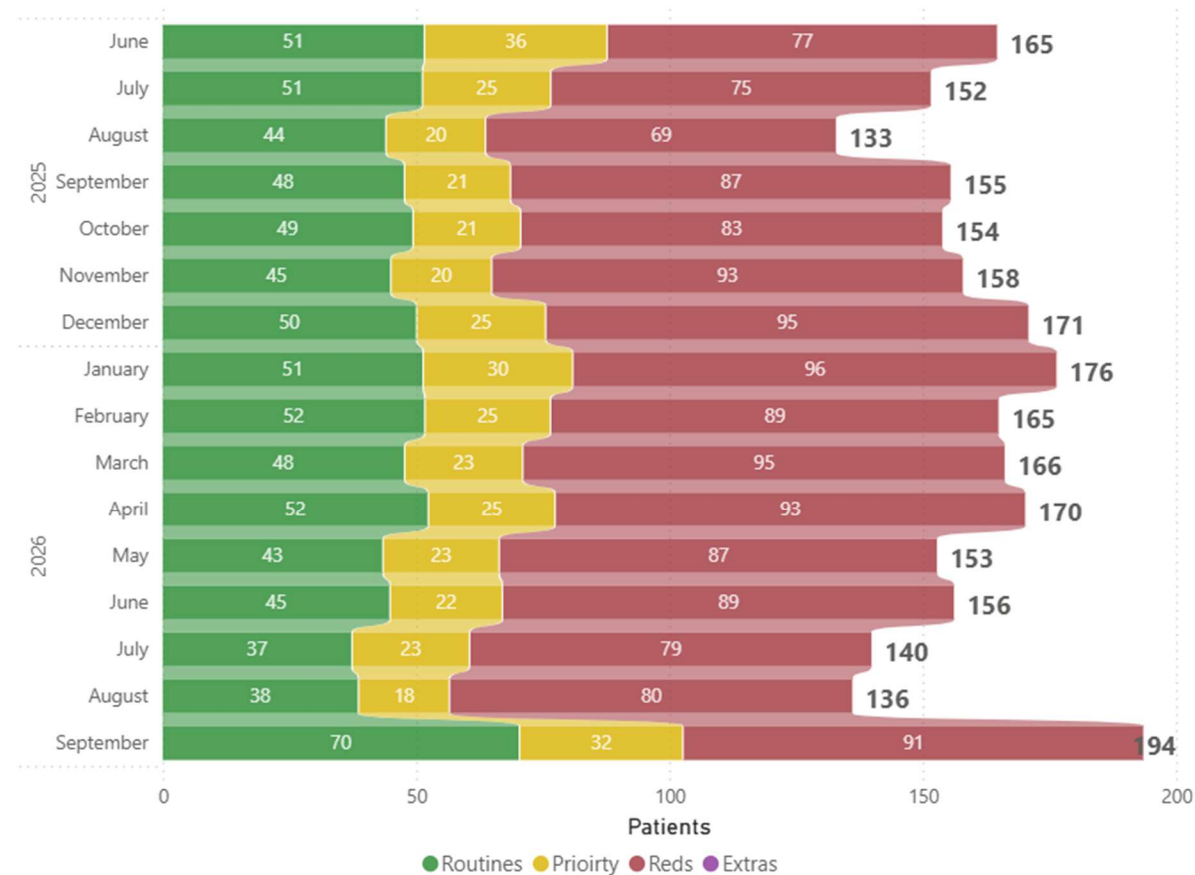
We will start administering vaccinations to pregnant women and children from September, with the remaining eligible cohorts commencing on the 1 October. As last year we are aiming to 'blitz' a large number of vaccinations within a concentrated week.

5. What are the stats this month on the take up of the online appointments as opposed to ringing for an appointment?

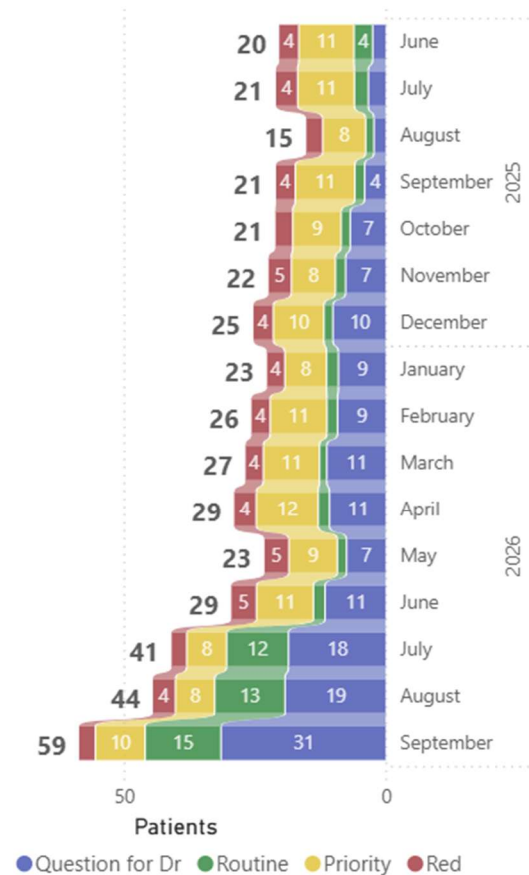
Please see Appendix 1

Appointment data, updated 11.9.26

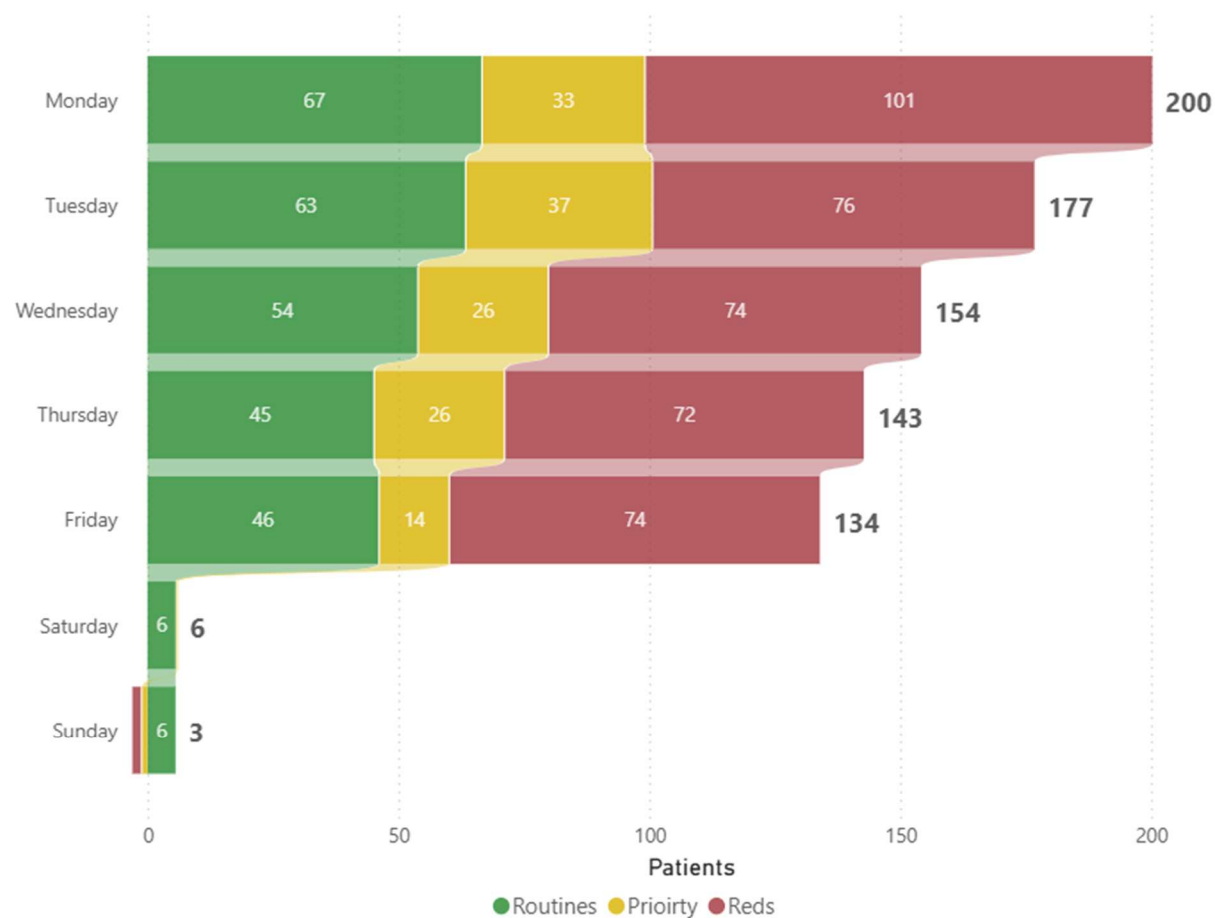
Average daily bookings by Care Navigators



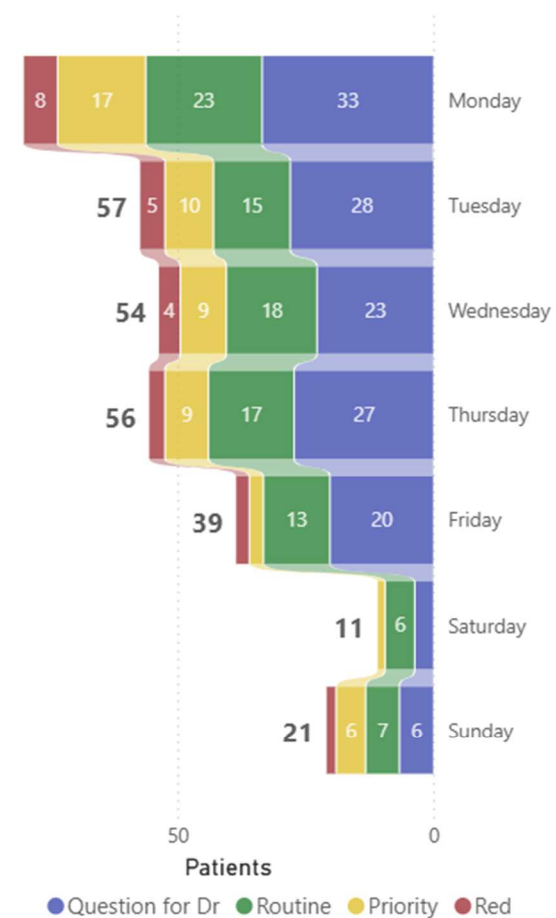
Average daily bookings by RH



Average daily bookings by Care Navigators

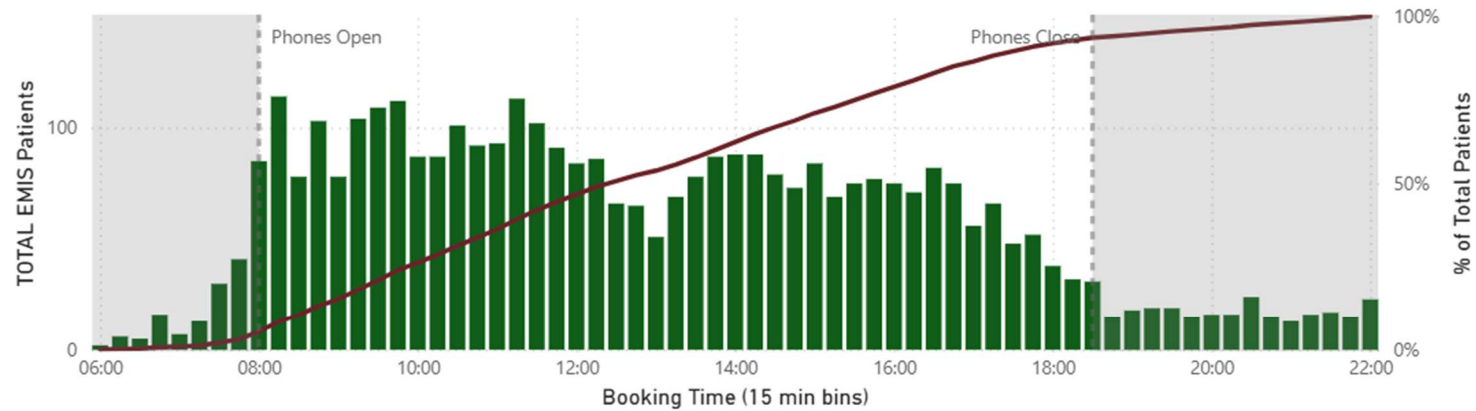


Average daily bookings by RH



Practice Bookings

Basic Urgency ● Routine ● % of Total Patients

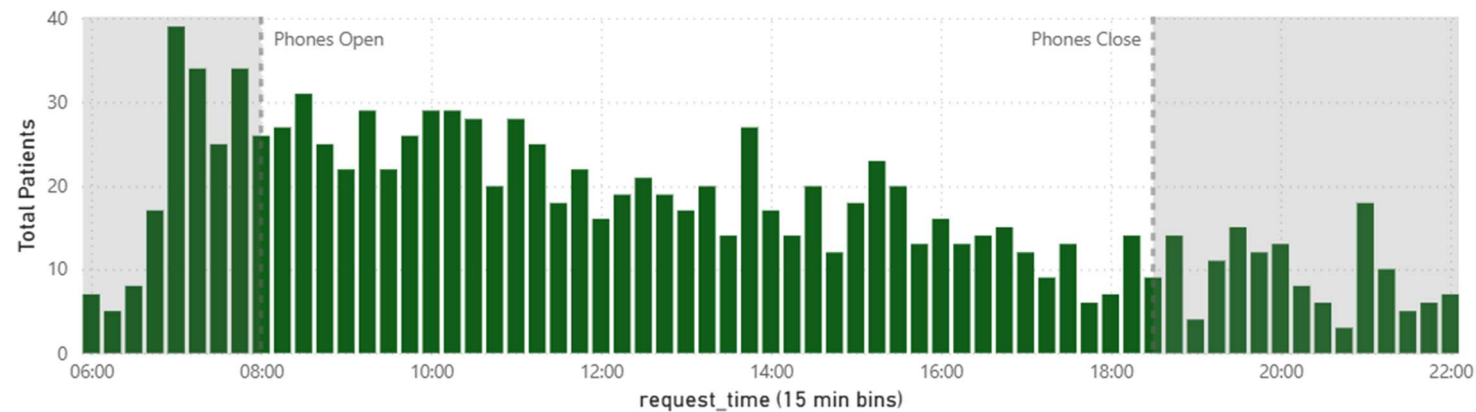


Basic Urgency

- ☐ Extra
- ☐ Extra FU
- ☐ Follow Up
- ☒ Routine
- ☐ Urgent

Rapid Health Bookings

Basic Urgency ● Routine



Booking date

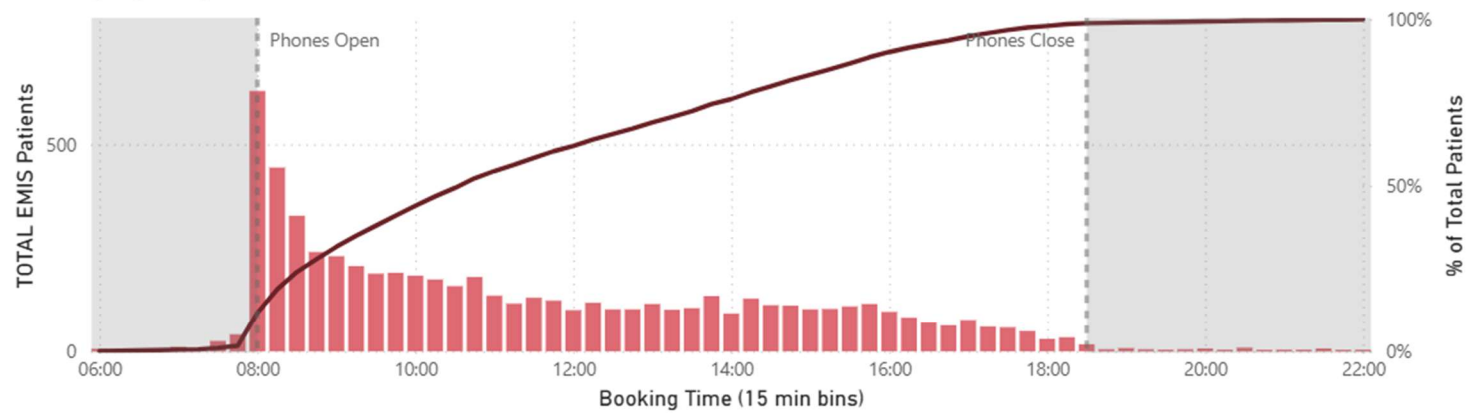
01/07/2026

11/09/2026



Practice Bookings

Basic Urgency ● Urgent ● % of Total Patients

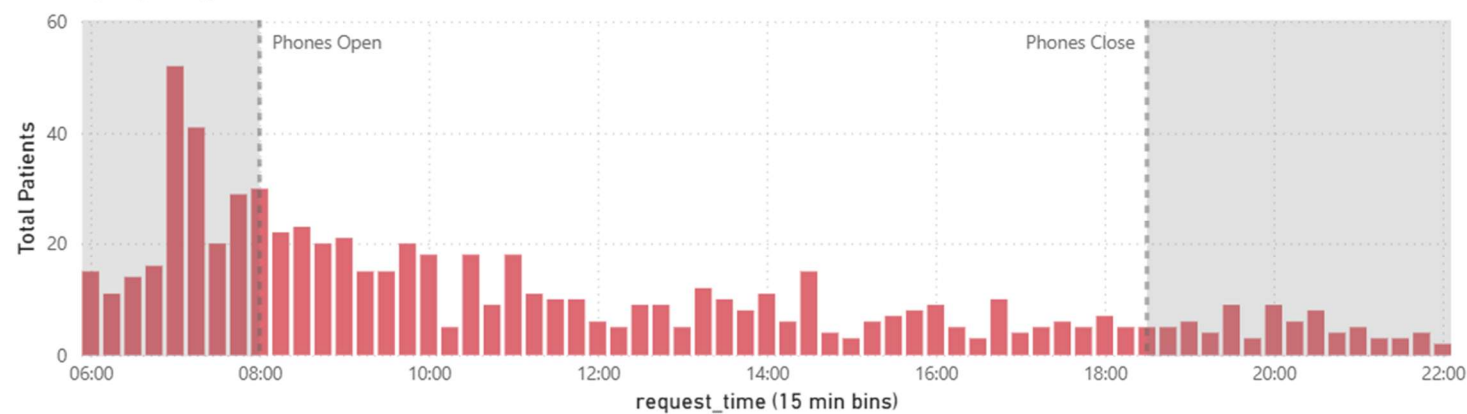


Basic Urgency

- ☐ Extra
- ☐ Extra FU
- ☐ Follow Up
- ☐ Routine
- ☒ Urgent

Rapid Health Bookings

Basic Urgency ● Urgent



Booking date

01/07/2026

11/09/2026



Phone use May 2025-Sept 2026

Unanswered includes those who get an engaged tone plus those who don't wait in the queue. Some people choose to redial multiple times rather than wait in a queue which makes the unanswered numbers seem very high.

