Oakenhurst Medical Practice

Barbara Castle Way Health Centre, Blackburn, BB2 1AX

Enter and View Report

8th July 2026

9.30am

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:

Oakenhurst Medical Practice

Barbara Castle Way Health Centre,
Blackburn, BB2 1AX

Staff met during our visit:

Joanne Dean (Practice Manager)

Dr Amar Ali (GP)

And the supporting team

Date and time of our visit:

Wednesday 8th July 2026 9.30am

Healthwatch Blackburn with Darwen Representatives

Sarah Johns (Lead Staff)
Liam Kershaw-Calvert (Staff)

Lucy Collier (Staff)

Introduction

This was an announced 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 Joanne Dean together with patients and staff for making us feel welcome and taking part in the visit.

General Information

Number of GPs /patients

6 Partner GPs/10,500 patients

CQC rating

Good - November 2016

Methodology

The Enter and View representatives made an announced visit on Wednesday 8th July 2026.

We spoke to fifteen patients and eleven 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 three 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:

Oakenhurst Medical Practice is located within Barbara Castle Way Health Centre which is easily accessible for patients on foot or travelling on local transport and car. However, it was noted that some patients found the car park spaces difficult to park in and the car park was busy.

The practice is bright, clean and hygienic and there is good signage within the Centre to direct patients to the practice. There is ample seating available in the waiting room with a mix of seating to support patients with mobility issues as well as quiet spaces for patients who would prefer these or for breastfeeding.

The website is informative but could be more patient friendly with photos of staff and additional details about them. The "Who Do I See?" page could be better promoted by the Practice to address the concerns that staff have about patients not knowing what constitutes an 'emergency' and what conditions can be managed through self-care.

Feedback about staff was generally very positive and patients felt that they had enough time with the doctor. The majority of patients stated that they would recommend this practice and from discussions, it was evident that some of the patients we spoke with on the day had recommended the practice to family members.

The Practice has a wide skillset amongst the team to be able to meet the needs of patients, and they also link with the Integrated Neighbourhood Team and the hospital's Intensive Home Support Service to support vulnerable patients.

Enter and View Observations

ACCESSIBILITY OBSERVED

Pre Visit

Representatives firstly looked at the practice website to establish contact and found the website to be informative with details about appointments, prescriptions, online services and wider health information. There is one phone line covering both Oakenhurst Medical Practice and Mellor Surgery. There are no images of staff which may be helpful for new patients and there are six GP partners named on the website. The opening hours are clear on the website there is information on what to do when the practice is closed and availability of home visits. However, having met with the Practice Manager, the website may need updating to include Wednesday hours available at the Mellor clinic.

Representatives noted the website to be mobile friendly. There is an option for translation, however there is no facility to change the font size to make the page more accessible, although the accessibility statement states that this is possible.

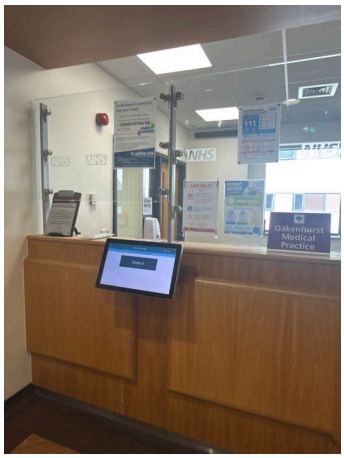
We called the practice at 9.10am on Friday 10th July 2026 and were number 3 in the queue.

External environment

The surgery is located in Barbara Castle Way Health Centre in the centre of town. The centre is easily accessible by public transport to the town centre although there is no on-site bus stop. There is a carpark for the Health Centre, with dedicated disabled parking spaces, which is free for up to 3 hours. The entrance to the building both from the main entrance and carpark is wheelchair accessible. There is also a drop off zone outside the Centre.

Internal Environment

The practice has two waiting rooms, a small space by the reception desk which acts as a quiet space for patients who prefer this and the main waiting room. The reception desk currently is very open, although there is glass around the desk, but given that most patients sit in the large waiting room, privacy does not appear to be an issue. Patients check in on the screen by the desk. There is also another room available as a quiet space for patients or for breastfeeding because the only breastfeeding space is on the ground floor of the health centre.



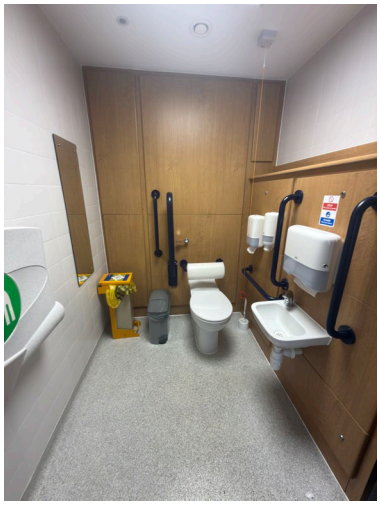
The main waiting room is bright with sufficient seating, and an accessible toilet is available. There is a good mix of seating with arms for patients with mobility issues. There were however no chair raisers available in the waiting rooms.

The rolling screen beeped and presented patients' names and the relevant clinic room when appointments were announced. We also observed doctors collecting patients from the waiting room, with friendly interactions between staff and patients.

There were calming natural imagery windows and pictures in the waiting room which made a pleasant atmosphere. However, the practice may wish to review the number of posters they have up in the waiting room because some of these obscure the images and there are a lot of posters which patients do not necessarily read.

There is a hand sanitiser station as you enter the main waiting room which is empty so could be replenished or put in storage. The TV in the waiting room was not working, and we understand from discussion with the practice manager that they are currently reviewing the licence contract. There was a radio on providing relaxing music in the background.

A board sharing details of the staff in the waiting room is helpful particularly for new patients.



There is baby changing available and although the toilet did not have a contrasting colour seat, recommended for patients living with dementia, there were contrasting coloured handrails.

The clinic rooms were clearly marked and the flooring throughout is matt and non-slip therefore suitable for patients with mobility issues and with dementia.

Approachability/Flexibility of the Practice

Discussion with the Practice Manager, Joanne Dean

"The practice has a patient base of just over 10,500. Clinics are held in Mellor on a Monday, Wednesday and Friday – this is not a branch surgery and everyone is registered at the practice in Barbara Castle Way but provides appointments which are more accessible for patients in that area. One GP and one nurse attend those clinics.

There are six partner GPs at the practice with 2-3 on each day alongside 2-3 locum GPs. One partner is currently on sabbatical. There are two physician associates, one who works 4 days a week and the other works 2 days a week. A GP from the Local Primary Care Federation (LPC) supports the team one day a week. There is a mental health practitioner associated with the practice but is currently off sick. The pharmacy team at the practice, employed by LPC, comprises of two prescribing pharmacists and a pharmacy technician.

The practice nurse and nurse associate are responsible for chronic disease management (e.g. COPD and diabetes reviews, vaccinations etc) and the two health care associates support patients with cardiovascular disease conditions.

The team work alongside the Learning Disability nurses and the Council's LD team to ensure patients are supported to attend the practice and their annual health checks. The practice uses Language Line for patients whose first language is not English, and they use BSL interpreters for deaf patients. There are some refugee and asylum seeker families registered at the practice, but these have been in the borough for a while. Double appointments are available for these patients and for more complex patients.

One of the partners leads on women's health clinics including sexual health. The practice does well in terms of uptake of screening and targets set by the ICB but finds it harder to encourage uptake of baby vaccinations.

The reception manager is responsible for managing appointments and following up with the team on any 'Did Not Attends' (DNAs). If a child does not attend, their named GP will follow up with the parents/carers and link in with health visitors. Letters are sent out to patients who DNA. Each week the practice holds a focused meeting on Children and Adults to discuss any concerns including safeguarding.

The team are good at signposting to Pharmacy First and to extended hours GP provision and there are a suitable number of appointments available across the day so there is little reason for patients to feel that they need to go to Emergency Department instead of the practice. There are pre-bookable appointments available online and the practice holds same day appointments each day for emergencies which are reviewed by the duty doctor. The phone lines are now open from 8am for everyone whereas it used to be only open between 8am and 8.30am for emergencies only which patients were not happy with so this has made it easier for patients and staff."

Discussion with GP, Dr Amar Ali

"I feel that the practice runs very smoothly but we can always do more. There has been a shift in patient demand and since Covid it feels that everyone needs to be seen "now", which has led to increased pressure on the whole system, and it is definitely getting busier within the practice. Our nurses in the practice support patients with chronic diseases which frees up the GPs to see other patients and I do believe that access to the practice is good.

We have a high number of GPs which is what patients want. We have tried different models, but patients want the reassurance from a GP. We are proud to have built our work on good service, so we probably earn less, but our focus is on quality.

One positive is that we predominantly see patients face to face and only use video calls where people want it. I don't like carrying out work over the telephone.

Our pharmacists do a fantastic job too.

We work well with the Integrated Neighbourhood team and Intensive Home Support Service. Working with them helps address the social issues patients face. I'm not sure that the mental health provision is quite as strong through this offer though.

We have a number of homeless patients via Bramwell House but also patients with no fixed abode. We work closely with the homeless nurse, but it can sometimes be hard to track down these patients to sort out medication etc.

I do feel that patients get to see their GP on time generally. We don't have many DNASs- there are some but not many. It's mainly for pre-bookable appointments where people have been seen and then forget to cancel their pre-booked appointment.

I did a review a while ago of our patients attending A and E and it was mainly for injuries and illnesses that would have required them to be there. Sometimes patients can be seen by either a GP on a home visit or by a district nurse, but when patients call 111 the algorithm automatically sends them up to A and E."

Feedback from Patients

ACCESSIBILITY

- Are the opening hours sufficient?

The majority of patients felt that the practice opening hours were sufficient, with only one patient feeling that they could be open later for working people. One patient mentioned that they struggled with the new phone line.

Is it easy to park outside/travel to the practice?

- "Yes, I've not had any issues it's convenient and the free parking is a big improvement."
- "Yes, I drive here and was fine."
- "It's a 20-minute drive, Mellor was useful when there was a nurse on every day up there. It needs more hours up in Mellor."
- "I drive it's a very busy car park, bumper to bumper. It's free at least."
- "I was dropped off and walked in from there."
- "I drove here. The carpark was busy today but it's handy."
- "I walked here."
- "I get the bus or walk but my wife drove me today. We've got a blue badge but even then, struggled to get parked today."
- "I walk here so yes."
- "We're just down the road so it's fine."
- "Sometimes it's ok but can be really difficult for parking."
- "Usually, bus or walk. It's easy for me because my husband is a bus driver!"
- "Yes, I drove."
- "I travel by car. Today parking is a nightmare, my blue badge helps and usually it's ok. I prefer to go to Mellor, it's easier for me."
- "Travelling here is ok, but parking is horrendous."

How did you book your appointment today? Did you wait long?

- "I phoned up for my appointment."
- "I rang up today."
- "I called and was number 25 in the queue."
- "I rang up today."
- "I called up on Monday and following a phone appointment was invited in for a face-to-face appointment."
- "They asked me to book an appointment for my baby's 8-week check-up and vaccinations."
- "It was a pre-booked appointment."
- "It was pre-booked."
- "I had a blood test last week and was booked in for an iron injection today."

- "I rang for my baby's 8-week check-up."
- "Pre-booked from when I came for my last appointment."
- "The doctor rang me to book an appointment about my diabetes testing kit."
- "I'd booked in for my baby's 8-week check-up."
- "Over the phone, it's a pre-booked appointment."
- "I called up at 8am and was number 26 in the queue but got this appointment this morning."

APPROACHABILITY

- ### Are staff courteous and polite?

- "They are friendly and accommodating."
- "Yes mostly. Sometimes the receptionists are rude and push you to go to A and E rather than dealing with you here."
- "They're very nice."
- "Lovely staff. Christine is very helpful."
- "Yes"
- "Yes. Dr Smith was so nice today."
- "They're fine."
- "They're really helpful."
- "Yes, they're fine I've had no issues."
- "They're really nice and friendly."
- "Yes."
- "They're good. I've been here a long time. Dr Ali is really good. They ring me every 2 weeks to check how I'm doing with my blood sugar levels. I've managed to come off insulin."
- "They're lovely."
- "They're alright, they're efficient enough. I don't really have many dealings with them."
- "They're lovely. The reception team are firm but good!"

- ### Would you recommend this GP surgery?

The majority of patients stated that they would with only one patient stating that they were not sure because "the sign says they're running 37 minutes late". (Patient was seen 5 minutes after arrival). Two patients told us that they were getting family members to move to this practice. Other feedback included: -

"I definitely would. Everyone is really helpful both face to face and on the phone."

"They've been very good with the medical problems I've had."

"Yes, all the time!"

"Probably it's just hard to get an appointment but they are accommodating where necessary."

"Yes, the doctors and nurses care. Dr Butterworth has been great, and Dr Ali was brilliant with my mum at end of life. He came and visited her."

RESPONSIVENESS

- Do you get enough time with the doctor?

The majority of patients stated that they did have enough time with the doctor, with only patient stating "Not always. Some GPs are significantly better than others. Sometimes you feel like you aren't heard." One other patient stated, "Yes but there's no continuity with doctors which makes it less personal."

- Have you been referred other services that may be able to help you? (e.g. Social Prescribing)

- "Yes."
- "Yes."
- "Yes, they're good."
- "Yes."
- "Yes."
- "No."
- "Yes, to mental health services."
- "Yes, both me and my wife have been."
- "Only up to the hospital for cancer treatment."
- "Yes, they've told me to self-refer for physio."
- "No."
- "Yes, Dr Ali referred me for diabetes support."
- "Yes, I was referred to other services whilst I was pregnant."
- "Yes, in the past."
- "Yes, with all my medical needs. They need a GP referral."

- Has there been an occasion when you have felt you had to attend A and E rather than get a GP appointment? Can you tell me about that?

- "No unless it's really serious like when I had a torn Achilles."
- "Yes, my mum was pushed to A and E. In some instances, it's better to be safe for example with a blood clot."
- "Absolutely not."
- "No – A and E is too overrun."
- "No."
- "No."

- “Yes, I rang 999 because I couldn’t breathe properly and the ambulance put it down to anxiety. That’s why I’m here to get things checked out.”
- “Only to the out of hours GP when I felt I needed antibiotics.”
- “No, I haven’t.”
- “No.”
- “No.”
- “I went to hospital last year when my blood pressure was high and had chest pains on the advice of a lady doctor.”
- “No.”
- “Yes, I went to urgent care and was booked in for a follow up appointment here.”
- “No.”

- ## Any Other Comments

“We’re really happy with the practice.”

“Recently the practice has been much better.”

Staff views

ACCESSIBILITY

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

"Not too difficult."

"8am on the day bookings, emergency appointments, OOH appointments – all very circumstantial. If no available appointments, we always squeeze patients into practice if appropriately triaged."

"I think availability is very generous. Calls queued compared to appointments available on the day are mostly in sync."

"Lots of on the day appointments. Pre-books available but soon get booked up."

"We have a number of pre-bookable appointments available. Appointments are released on a daily basis from 8am any day. Emergency appointments always available on the day."

"I would say it is easy, as long as you call at 8am there should be no issue getting an appointment. If no appointments are available if they call later in the day, we will always try to get an out of hours or if not available and urgent we will open a slot."

"Fairly easy. We have a number of GPs so there's always something to offer, even if it's not the same day."

"It can sometimes be difficult to book in advance, but we have plenty of book on the day appointments."

"We offer a lot of appointments."

Do people get to see the GP on time?

"Most times."

"Yes, unless emergency or other patients arriving late."

"Yes, only delayed if GP is running behind with complicated patient health concerns. Most of our patients get seen if up to 5-8 minutes late."

"Yes."

"We try our very best to accommodate – can always discuss with clinician and admin re pre-book. Generally, do get to see GP on time."

"Yes."

"Yes, but not always. Can run behind due to emergencies, patients with complex problems. Not being given enough time for a double appointment patient."

"Yes."

"Yes, subject to availability."

APPROACHABILITY

"Yes."

"Take more time listening to concerns, offer language line and co-sign. Offer LD reviews and health assessments."

"Pop up alerts on patient files that require longer appointments due to learning difficulties. Book BSL interpreter for our deaf patients. Identify by using our training on safeguarding and vulnerable patients."

"We help them check in and offer them to book appointments at the desk."

"We have a number of patients registered as deaf – we have access to a sign language interpreter to help with appointment consultations. We also have alerts on patient notes that 'pop up' on entering their details. Regular learning disability reviews. Language line for language barriers."

"Learning difficulties reviews, co-sign for BSL interpretation, language line, social prescribing."

"They have double appointments to give them more time. LD is coded on their records for staff to identify."

"Can either be pre-identified by outside service (i.e. we get notified by carers) or identified in practice by a clinician. Codes/pop ups added to notes. Double appointments to give them extra time. Often assigned to a particular GP to ensure care is consistent."

"With care and respect. Double appointments if required to give more time."

RESPONSIVENESS

Do you have a social prescriber attached to the practice and do you refer to them?

"Yes."

"Yes – health and wellbeing service."

"Yes – we refer onwards."

"Yes, we refer."

"No but we do refer to social prescribing."

"Yes."

"Yes."

"Yes, we can refer to health and wellbeing service."

"Yes, there's a team that patients can ring. Health and wellbeing service."

How do you manage DNA appointments and why do you think some people access A and E rather than primary care?

"After 3 DNA they are removed. They think it might be quicker to be seen at A and E."

"3 strikes enforced via letters. After 3 strikes patients are removed. Uneducated – to the general public we don't typically have a list of issues appropriate or not for A and E. People don't understand "Emergency"."

"Mark as DNA – admin keep an eye on repeat DNAs. Rebook where required if a child or vulnerable patient. Send letters to alert of repeated DNAs. They might think they getter a quick diagnosis at A and E."

"3 x DNA and they are de-registered. 3 letters sent. Overthinking their problems or miss practice working hours could be why people go up to A and E."

"DNA are managed by sending awareness letters to patients following 3 DNAs. Babies/children parents are contacted about why not attended. Think they can jump the queue. More education needed re emergency. "

"3 DNAs and patients will receive a letter saying they will be removed in 28 days and need to find a new practice. If it's a baby, we do call to chase why not attended. Lack of education regarding what is urgent and non-urgent."

"Follow our DNA policy. 2 result in first letter with 1 year period. A further DNA results in 2nd letter. Any further after second letter results in removal. Urgency, convenience, lack of awareness."

"We send warning letters if patients DNA multiple times in the space of a year. They can be removed from the practice. Maybe they think it's faster."

"Doctors and nurses will code as DNA. Patients will get a letter re failure to attend appointments. If the patient fails to attend an appointment that is pre-booked and on occasions within a 1-year period, a letter is sent informing the patient. If patients fail to attend a further appointment after receiving their 1st letter a 2nd letter is sent. Any further missed appointments after 2nd letter will result in the patient being removed from the practice. Might think it's quicker? Although we do have a lot of appointments to offer."

Response from provider

Oakenhurst Medical Practice would like to thank Healthwatch Blackburn with Darwen for undertaking the Enter and View visit and for providing such a comprehensive and balanced report. We are extremely pleased that the overall findings reflect the high standard of care, professionalism and commitment demonstrated by our team on a daily basis.

We are particularly encouraged by the positive feedback received from patients regarding the welcoming and supportive nature of our staff. It is especially rewarding to note that patients consistently reported feeling listened to, valued and given sufficient time during consultations. The fact that many patients stated they would recommend the practice to their family and friends is a testament to the dedication of our entire multidisciplinary team and reinforces our commitment to delivering safe, effective and compassionate care.

We are also pleased that the report recognises the accessibility of the practice within Barbara Castle Way Health Centre, the cleanliness and welcoming environment of the premises, and the range of seating available to accommodate patients with differing needs, including those with reduced mobility, those requiring a quieter waiting area and breastfeeding mothers. Providing an inclusive environment where all patients feel comfortable and supported remains a key priority for the practice.

The recognition of the breadth of skills within our workforce is particularly welcomed. We have invested significantly in developing a multidisciplinary team capable of meeting the diverse healthcare needs of our patient population. Alongside our GPs, patients have access to a wide range of healthcare professionals, and we continue to work collaboratively with our Integrated Neighbourhood Team and the hospital's Intensive Home Support Service to provide coordinated, patient-centred care, particularly for our most vulnerable patients and those with complex health needs.

We appreciate the constructive observations made within the report and view these as valuable opportunities for further improvement. We acknowledge the comments regarding the practice website and agree that there is scope to make it more engaging and informative for patients. Work is already underway to review and enhance the website, including the addition of staff photographs and biographies to help patients become more familiar with the team and better understand the different professional roles within the practice.

We also welcome the recommendation regarding the promotion of the "Who Do I See?" resource. Educating patients about the most appropriate healthcare professional or service for their needs is an important aspect of improving access and ensuring appointments are used effectively. We will therefore explore

additional ways of promoting this information, both digitally and within the practice, to support patients in making informed choices about accessing care and to improve understanding of self-care options and what constitutes an urgent medical need.

The comments regarding the car park are recognised. Whilst the practice does not have direct responsibility for the management or design of the shared car park, we understand the concerns expressed by some patients regarding parking availability and manoeuvrability during busy periods. We will share this feedback with the building management team so that patient experiences can be considered as part of any future reviews of the site.

At Oakenhurst Medical Practice, we are committed to continuous quality improvement and welcome patient feedback as an essential part of shaping and developing our services. The findings from this report provide reassurance that many aspects of our service are valued by patients, whilst also identifying practical areas where we can further enhance the patient experience.

Once again, we would like to thank Healthwatch Blackburn with Darwen for their visit, their professionalism throughout the process, and for recognising the hard work and dedication of our staff. We look forward to continuing to work collaboratively with Healthwatch and our patients to ensure we provide high-quality, accessible and person-centred healthcare for our local community.

Healthwatch Blackburn with Darwen

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