



Mendip Vale Medical Group
Your Health, Your Care, Your Medical Group

MENDIP VALE MEDICAL GROUP PATIENT PARTICIPATION GROUP MEETING
Wednesday 26th June 2024 at 1:30pm

PPG Attendees	Geoff Matthews Georgie Bigg John Ledbury Heather Pitch Andrea Levett Janet Beckett Sheila Williams Sandra Dunkley Alan Hunt Diane Haynes	Chair PPG Member (PPL) PPG Member (PPL) PPG Member (PPL) PPG Member (PPL) PPG Member (Riverbank/St Georges) PPG Member (Riverbank/St Georges) PPG Member (Riverbank/St Georges) PPG Member (Yatton and Congresbury) PPG Member (Yatton and Congresbury)
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MVMG Attendees	David Clark Dr Joanna King Lois Reed Alice Dance James Sanders	Managing Partner GP Partner Comms and Engagement Manager Assistant Business Support Manager North Somerset Divisional Director
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Apologies	John Gowar Maureen Hutchinson Roger Daniels Sarah-Jane Vowles Linda Brimecome David Miller Bev Cockerill Joe Norman Leonie Allday Barry Blakley Jane Clarke Mary Adams	PPG Member (PPL) PPG Member (PPL) PPG Member (PPL) PPG Member (Riverbank/St Georges) PPG Member (Riverbank/St Georges) PPG Member (Sunnyside) PPG Member (Sunnyside) PPG Member (Sunnyside) PPG Member (Yatton and Congresbury) PPG Member (Yatton and Congresbury) PPG Member (Yatton and Congresbury) PPG Member (Yatton and Congresbury)
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Action Points Summary

Item	Action Taken By	Action Description	Completion Note
	LR/GM	eConsult to remain on future agendas	
	KR	Telephone monthly updates to be circulated	
	DC	Updates on Congresbury	
	LR	Display of GP partners and Management in Surgeries	
	LR	Econsult clear on the website	
	KR	New telephone report	Completed
	LR	Simple eConsult instructions	

Minutes:

Item	Description	Action
1	Apologies Linda Brimecome	
2	Minutes of Previous Meeting on 17th of April Minutes of previous meeting were approved as an accurate reflection of the discussion which took place. Nothing to note from previous meeting.	
3	Update on Action List items from 2023 Survey. a. Conclusions on Medical Team photos in surgeries Geoff Matthews explained that patients had requested photos of the clinical team to be displayed during the surgeries. In April's meeting, it was decided that images of GP partners and Surgery Management would be displayed as they are on the website. There was a question about whether the entire clinical team would eventually be included. David Clark noted that managing and updating photos of such a large team working across multiple sites would be extremely difficult. Lois Reed concurred and suggested that during the waiting room revamp, they would explore how to use the TV screens to display the GP partners and Surgery managers within the surgery. The waiting room revamp includes reviewing how communications are shown such as posters, leaflets, and signage. Geoff Matthews suggested that photos could be displayed on the Patient Check-In screens. David Clark agreed that this is a good option to explore but noted that since the screens belong to Emis, there may be limitations on adaptations, and they are quite temperamental. b. Views on the new website Geoff Matthews asked the group for comments and feedback on the new website's functionality and whether any improvements were still needed. The group consensus was that it looks and functions well. Continuous work will be done on the website. If members experience or see areas of improvement to please inform Lois Reed. c. eConsult Geoff Mathews explained that amongst the 15 actions were three areas of concern regarding eConsult.	

1. The percentage of patients going online to book an appointment:

David Clark confirmed that 70% of patients are using eConsult online to book an appointment, with 30% of eConsults being completed on a patient's behalf, either via paper or over the phone. This is either due to limited access to the internet/technology or because they prefer a member of staff to complete it for them.

2. The percentage of those who were contacted within 3 working days:

David Clark confirmed that in May, 5,018 eConsults were submitted, and out of those, thirteen were not completed within the three-working-day period. This was due to several reasons, including:

- The practice couldn't contact the patient after two attempts.
- Patients wanting to see a GP instead of the clinician they were triaged to.
- Their chosen clinician is on annual leave.

3. Clarification on 2-week appointment period.

David Clark confirmed that patients are given an appointment within two weeks from the date they submitted Their eConsult; this includes the three working days for Mendip Vale to contact the patient.

4 **Plans for the follow-up Survey in July**

Lois Reed explained that in collaboration with the PPG, last July Mendip Vale produced a patient satisfaction survey to understand patients' perceptions of the service, and to identify areas of improvement. It was very successful receiving over 1,000 responses and producing a list of 15 practical actions. To assess whether the changes over the last year have been successful, we will be running the survey again from 1st of July until 1st August.

Over the last year a significant amount of change has happened, including the introduction of eConsult for all of Mendip Vale, a new telephone system, and the website. As such, working with the PPG subgroup, a few amendments have been made to the survey, to ask specific questions on the new telephone system and website. Additionally, Mendip Vale has merged with another surgery over the last year, Sea Mills. It will be interesting to understand their perspectives as newly introduced patients.

Patients will be able to complete the form online:
<https://www.smartsurvey.co.uk/s/whatdoyouthink2024/>

Or they can collect a paper copy for surgery receptions.

As we did last year, PPG members have the chance to visit the surgeries to distribute surveys. This is an excellent strategy for collecting numerous responses and allows patients to meet their Surgery PPG representatives. This is optional and if you would like to participate, please inform Lois Reed of the days you plan to visit so she can notify the Surgery Manager. A folder has been left behind at each

reception with copies of the survey, a poster, pens, labels for badges (if you don't have a badge) and an instructions list for support.

5 Telephone Call Statistics

Geoff Matthews introduced Alice Dance, Assistant Business Support Manager who is covering Kim whilst she is away on maternity leave.

Alice Dance advised that following the last meeting, Kim has provided a new table to be reflective on the new telephone system report. This includes new sections with definitions, to be clearer. This includes:

- Queued for Group: The total Number of calls that queued for that group.
- Answered from Queue: The number of calls in the queue that were answered.
- Average Queue Duration Answered: Average wait time in the queue before it was answered.

May telephone data showed an overall reduction and steady improvements in all elements of the report including:

- 15,719 calls queued for group has reduced from 16,709.
- 1,042 calls missed from queue has reduced from 1,595 in March.
- Calls are being answered on average within 2 minutes 51 seconds, within the 3-minute goal, down from 4 minutes 57 seconds in March.
- The number of people requesting a call back (748), very nearly all patients got a call back (743)

The term "group" refers to the number of staff available to answer calls.

When asked why a callback might be unsuccessful, Dr King explained that the system automatically calls the patient back. However, callbacks can fail if patients have a private number or simply, do not answer the call.

6 Patient Feedback from first online PPG meeting and items raised.

Following a successful first virtual meeting on the 28th of May, a list of questions and concerns were raised, including:

a. More information requested on eConsult red flags.

Dr. King explained that the red flag on eConsult is a safety feature designed to identify potentially life-threatening symptoms and direct patients to the most appropriate care. However, as a piece of technology, it cannot differentiate symptoms with the nuance of a doctor. For instance, what might be a symptom of a heart attack could also be simple heartburn; therefore, it may direct patients to call 999 as a safety precaution.

Andrea Levett shared her experience with the red flags on eConsult, mentioning that she received advice from the Patient Coordinator over

the phone to use the admin eConsult form to bypass the system. She then asked what training Patient Coordinators receive to advise patients on how to circumvent the red flags.

Dr King explained that Patient Coordinators have different pathways for different symptoms to navigate patients. They can put patients on the duty doctor list for the doctor to review on the day to triage or treat accordingly Patient Coordinators undergo extensive training. Initially, they listen to calls, followed by answering calls with their trainer monitoring them, and eventually progress to handling calls independently.

b. Some posters in surgeries too high for reading and request for simple instructions on eConsult.

Lois Reed explained that as part of the waiting room revamp, posters will be lowered to allow those in wheelchairs to read the communications. As part of a broader review, we will also aim to provide more accessible communications that are easy to read and follow. Regarding eConsult instructions, there is currently a step-by-step video and document for patients to follow, but we will review how to simplify this further.

Lois Reed

c. More information on NHS services and how to contact.

There was a request for more information regarding other NHS services in North Somerset. Lois Reed informed that since the meeting, she has contacted Healthwatch to create a leaflet listing all NHS services and their locations in North Somerset and contact details for patients as a tool to know which service to use, for when, and the facility locations. The next phase of this project will involve conducting a survey in the August issue of the newsletter to gather feedback on patients' understanding of NHS service for this initiative.

d. Where to complain over problem with 111 service

If patients wish to make an official complaint or feedback regarding the 111 service, this can be done through the local ICB by contacting:

- Call: 0117 900 2655 or 0800 073 0907 (freephone)
- Email: bnssg.customerservice@nhs.net
- Online form: <https://bnssg.icb.nhs.uk/contact-us/#module-2>

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Mendip Vale rebranding update.

Lois Reed explained that we are currently looking at concepts for names, ensuring that the new brand is something that all patients can say and spell, has meaning, and isn't already used. Once those concepts have been considered they will be fed to the PPG for their opinions. Additionally, if the group has any ideas on new names, please let Lois know. The cost will be very minimal due to many elements being digital.

8 **Chairs of PPG meeting feedback**

The latest meeting was to further understand the ICS (integrated Care Service) and provided the group with a document explaining the organisation model; how it works, who it coordinated with, and its targets. Dr Shruti Patel has agreed to meet with Mendip Vale member of the group to talk it through as they felt it was complicated.

9 **Items raised by patients through the PPG email.**

a. Question on confidentiality of patient information.

David Clark explained that all patient data is stored in EMIS, a nationwide clinical system provider. As an organisation, we share patient data with other healthcare providers such as Sirona for community services, provided patients have given consent. We do not disclose patient details to any third-party providers.

As a team, we are diligent and mindful of the limitations on handling patient data. Staff members undergo mandatory annual training on data protection and are required to sign a non-disclosure agreement, preventing them from discussing patient information outside of Mendip Vale. Any failure to adhere to these standards could lead to immediate suspension pending investigation.

b. Blood test results timing in the event of GP absence

Dr. King explained that each clinician has a designated buddy. This arrangement ensures that when a GP is on annual leave, their buddy takes over their tasks. Regarding blood test results during this period, the buddy reviews the results to check for any urgent issues. If the results are not urgent, they will mark them as read but not completed, allowing the GP to manage them upon their return.

c. Request for privacy option at Reception desk.

Lois Reed explained that if patients do not feel comfortable discussing their problems in an open reception, they do have the opportunity to request to speak to someone in a private room. When a patient makes this request, another Patient Coordinator will take over reception duties to ensure continuous service for our patients. Posters should be displayed in all surgery waiting/ receptions. This can be publicised in the patient newsletter for promotion.

Lois Reed

d. Current situation on MV help with transport.

David Clark explained that if a patient is unable to attend their urgent appointment due to transportation issues, Mendip Vale will arrange for transportation to and from the surgery. Lois Reed added that she has meetings with Trevor Smallwood, a PPG alumni, and Tim Evans, a Virtual PPG member within the next week to discuss patient transportation options.

d. Locations where physio support is available.

Doctor King explained that the physio team is based at Langford Surgery only for North Somerset Sites. It's important to note that the physios are most musculoskeletal (MSK) specialists who can diagnose, arrange scans, and prescribe for MSK conditions. They may provide physio-based exercises for you to get better but if a patient requires physiotherapy they will refer them to another service.

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Any Other Business:

a. Information on Accure Health

Accure Health which works under the NHS guidance have set up a cardiovascular clinic in local town across North Somerset, providing free mini health check-ups to promote the awareness of cardiovascular health. Results are forwarded to the patient's surgery for them to follow up if anything raised which is concerning. The next clinic will be held at The Old School Rooms, Congresbury, BS49 5DX between 10am -2pm. No advanced booking is needed.

For more details and information, please find the leaflet in appendix 1.

b. Good Grief Festival 2024

Organised by Super Culture, the good grief western festival is back on the 10th to the 13th of October 2024. This is an engaging programme of events to bring people together for those who are going through grief working and supporting people who are going through grief. The festival consists of:

- *Granny Jackson's Dead* - Immersive Irish Wake
- Julia Samuel MBE
- 'We need to talk about death' – film made with people with learning disabilities.
- Grief's Alphabet book reading
- Youth Theatre presentations

Although this initiative started in Weston super mare this is now a national incentive with the aim to shine a light on what support is already in place for those experiencing grief by presenting artworks that engage with the subject of grief and bereavement; prompt in scaffold conversations and connections that alleviate isolation; pilot new provisions that responds to need and supporting for all ages.

More information can be found: goodgrieffest.com

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Date of next face-to -face meeting: Wednesday 21st August at 1.30pm

Date of next Virtual Meeting: Tuesday 23rd July at 7pm -8pm
