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

MENDIP VALE MEDICAL GROUP PATIENT PARTICIPATION GROUP MEETING
Wednesday 19th August, 1:30pm

PPG Attendees	Geoff Matthews	Interim Chair/ PPG Member (PPL)
	Janet Beckett	PPG Member (Riverbank/St Georges)
	Linda Brimecome	PPG Member (Riverbank/St Georges)
	Sheila Williams	PPG Member (Riverbank/St Georges)
	Tim Evans	PPG Member (Riverbank/St Georges)
	Georgie Bigg	PPG Member (PPL)
	Ruth Crick	PPG Member (PPL)
	Geoff Richardson	PPG Member (PPL)
	John Gowar	PPG Member (PPL)
	Maureen Hutchinson	PPG Member (PPL)
	Barry Blakley	PPG Member (PPL)
	Richard Hamilton-James	PPG Member (Sunnyside)
	Sally Burrell	PPG Member (Sunnyside)
	Diane Haynes	PPG Member (Yatton and Congresbury)
MVMG Attendees	Dr Joanne King	GP Partner
	David Clark	Managing Partner
	Lois Reed	Assoc. Divisional Director/ Comms & Engagement Ld
	Dr Laura Layzell	GP Partner
Apologies	Clive Harper	PPG Member (Yatton and Congresbury)
	Sandra Dunkley	PPG Member (Riverbank/St Georges)
	David Gent	PPG Member (PPL)
	Alan Hunt	PPG Member (PPL)

Action Points Summary

Item	Action Taken By	Action Description	Completion Note
	LR/MA	eConsult to remain on future agendas	
	AD	Telephone monthly updates to be circulated	
	DC	Updates on Congresbury	Complete
	LR	Virtual meeting on next agenda	
	SP	eConsult Feedback	
	LR/ DG	Review text sent to patients	
	LR/MA	Add the processing of Death Certificates to agenda (on pause)	
	LR	The new NHS Contract to be added to the next Agenda	
3E	LR	Invite Dr M Jenkins to the next meeting to discuss triage eConsult	
6B	LR	Review the latest Complaints report and to add to the next agenda	Complete

Minutes:

Item	Description	Action
1	**Welcome and Minutes of Previous Meeting** • Apologies from Alan Hunt, David Gent and Sandra Dunkley	LR

- Unfortunately, minutes of previous meeting were not circulated successfully as such have not been approved. Action for these to be recirculated for review at the next meeting.

2 Matters Arising

PPG Chair

- John Gowar expressed his sincere thanks to Geoff Matthews, on behalf of the Group, for his commitment, time and support as Interim Chair. He acknowledged Geoff's efforts in helping to bring the Group back on track and appreciated the leadership he had provided during the interim period.
- Members unanimously endorsed Geoff continuing as Interim Chair for the remainder of the year.
- Geoff advised that this would be his final year as Chair and that he intends to step down in January.
- Members interested in taking on the Chair role were invited to put themselves forward or submit nominations between now and December.
- Members were asked to contact Geoff ahead of the December meeting to allow time to discuss succession arrangements for both the in-person and virtual meetings.

Fromal Approval of the 2025 Survey Working Group Report

- It was agreed that the work undertaken by the Survey Sub-Group be endorsed, with the five key indicators accepted as the framework for reviewing service areas and identifying opportunities for improvement through PPG meetings and agenda items.

3 Presentation on Continuity of Care at Mendip Vale

- Laura Layzell, GP Partner, presented the practice's commitment to improving continuity of care and the work being undertaken to enhance patients' experience.
- The practice is working to realign GP patient lists so that patients are matched, where possible, with a GP at their nearest MVMG surgery, based on their postcode. For patients, this is referred to as having a 'Named GP'.
- A Named GP is the doctor with overall responsibility for coordinating a patient's care within the practice, helping to improve accountability for follow-up care.
- Having a Named GP does not restrict patients to seeing that GP only.
- Wherever possible, non-urgent appointments will be booked with the patient's Named GP to provide greater consistency and personalised care.
- This approach will be particularly beneficial for patients with complex health needs and those requiring palliative care.
- Current recruitment gaps have presented challenges in implementing this approach; however, these are expected to be resolved by September.
- The initial focus is on non-urgent appointments, with an ambition to extend continuity of care to urgent appointments in the future.
- Further information is available on the practice website under Continuity of Care
- Should 'patients feel that they are not with the right
- Questions were raised about the difficulties some patients experience in accessing transport to the surgeries.
- Laura Layzell explained that the changes to improve continuity of care should help address some of these issues by increasing the likelihood of patients being seen at their nearest surgery.
- Lois Reed reminded the group of the internal transport option for urgent appointments and the community transport options available to patients.
- Communication to patients regarding continuity of care and who their named GP is, will be done through text messages/ email. Those who do not have digital access will receive a letter.
- A code will be placed on the patient record when they have been informed of their named GP.
- Patients are able to telephone the surgery or ask at reception if they would like to be informed who their named GP is.
- A request was made to have the clinical team photos displayed within the surgery. It was agreed that this would be put on the TV screens. LR
- It was agreed the term 'buddy' should be replaced to 'deputy' when referencing the medical team support in their absence as this is more patient friendly. This will be amended in patient communications. LR

LR

- It was requested a board of staff pictures and names to be displayed in the surgery. It was agreed that this could be displayed on the TV screens. LR
- It was agreed to change the communications to patents to 'Deputy' instead of 'Buddy' GP/ Clinician.

4 Review of 2025 Survey

- Following the meeting between the PPG and MVMG Management, a document was created to break down the key drivers for change into practical actions for PPG members to review. The meeting included a review of these actions with the PPG to identify any specific amendments, additions, or further considerations.
  The key drivers for change and additional actions for consideration were grouped into the following five areas:
  1. Getting in touch with MV
  2. The initial triage is confusing
  3. Lack of Continuity of care
  4. Problems with eConsult and digital use
  5. Results and follow-up communication problems
- Ruth Crick highlighted that the overarching themes emerging from the findings were trust, communication, and mutual respect between patients and the practice.
- A detailed summary on each of the five areas will be submitted at the October PPG meeting.

4a **Getting in touch with MV**

- Actions confirmed and/or implemented
  - Promotion of the three methods of contacting the practice: telephone, eConsult and paper form available at Reception – continuous
  - Review and amend of the wording used to distinguish routine as non-urgent requests – confirmed in PPG meeting August 2026
  - Publication of telephone waiting times on the practice website – complete

- Actions being considered
  - Further reduction of the eConsult response period from two days to one day, subject to review.

- David Clark outlined that, in addition to the PPG survey, the national survey showed an improvement in the % of patients' who described their experience of contacting their GP practice as good, increasing from 58% to 71%. There were 15 of the 20 areas from the survey which improved on the previous year, 61% of patients said they found it easy to get through to this GP practice by phone, up from 51% in the previous year and higher than the 55% average for the c70 practices across Bristol, South Gloucester and North Somerset.

4b **The initial triage is confusing**

- Actions confirmed and/or implemented
  - Dedicated article explaining the triage process in the patient newsletter.

- Actions being considered
  - No additional actions are currently being considered currently

- Feedback from the group highlighted the importance of communicating to patients that Patient Co-Ordinators do not make clinical decisions, and they ask questions to help the GP Partner to review and triage the patient.
- Dr King confirmed that one duty doctor per locality is responsible for triaging eConsults. However, urgent appointments are available at each surgery in the afternoons
- It was agreed that the term 'routine' should be changed to 'non-urgent' to make the language more patient-friendly. Unfortunately, due to contractual restrictions, this change cannot currently be implemented. The PPG discussed providing feedback to NHS Digital to recommend this improvement. PPG

4c **Lack of Continuity of care**

- Actions confirmed and/or implemented

- Review of GP patient lists to ensure that each patient's named GP is appropriate for their clinical needs and locality within Mendip Vale Surgery – complete
- Communication of the project and progress through the patient newsletter and practice website -complete

- Actions being considered
  - The continuity of care project is currently in progress, with ongoing monitoring and review. Further actions will be identified and considered as the project progresses.
  - Change of language from 'buddy' GP to 'deputy'
- It was recommended by Geoff Richardson to review MVMG participation in PACT, an educational group concentrated on continuity of care in primary care. LR/LL

4d **Problems with eConsult and digital use**

- Actions confirmed and/or implemented
  - Review of Patches and Medicus is currently underway, with a business case submitted to the ICB regarding potential system changes.
  - Information on how to request an appointment and how to use eConsult included in the patient newsletter – complete
  - Introduction of iPads as Patient Information Points in all surgery waiting rooms to support digital inclusion -complete

- Actions being considered
  - Review of telephone line messaging with support and input from the PPG
  - Introduce 1 to 1 digital support sessions at each surgery
- Members expressed an interest in visiting other practices that use different triage and clinical systems to gain insight into their experiences and assess the usability of these systems. Surgeries discussed visiting is Frome and Tynsfield.

4e **Results and follow-up communication problems**

- Actions confirmed and/or implemented
  - Information regarding follow-up communication for test results included in the patient newsletter – Complete

- Actions being considered
  - No further actions to be considered at this time. This will be reviewed in response to patient feedback and survey results.
- The group highlighted the importance of clinicians clearly communicating how and when they will contact patients following a test request, including whether further contact from the practice should be expected and how the test results would be received, such as NHS App. This would help manage patient expectations and provide greater clarity on the next steps.
- Patients should be advised to contact the practice if they require further clarification regarding their test results, even if the results are normal, or if they continue to feel unwell.

5 Performance updates –Telephone and eConsults

- Lois Reed provided an update on eConsult and telephone activity, highlighting that overall volumes have decreased. This is standard trend for the summer periods where they are typically lower
- It was noted that a technical issue had affected the telephone data for June, particularly the estimated call-back waiting times. The Digital Team is investigating the issue.
- It was requested that the dashboard be updated to include the number of patients contacted within two working days following an eConsult submission, as well as the number of patients who obtain an appointment within two weeks. LR

7 Complaints Report

- Lois Reed explained that all complaints and compliments are recorded on the practice's internal system, Practice Index. Quarterly reports are generated to review the number of complaints that have been upheld, partially upheld or not upheld, alongside identifying areas of concern, key learning points and any actions required.

- It was highlighted that learning points arising from complaints are discussed and followed up during team meetings to ensure that appropriate actions are taken, improvements are implemented, and lessons learned are shared across the team.

6 Any Other Business:

a) How to complete a follow up appointment if a condition needs to be reviewed?

Dr King advised that patients should submit an eConsult to request a follow-up appointment. However, where a clinician has an existing plan to follow up with a patient following test results or a previous consultation, the clinician will initiate contact as appropriate. Patients requiring urgent assistance should contact the practice by telephone.

b) If a patient has been requested to follow up with the clinician after 4 months, how should a patient manage this?

Dr King confirmed that it is the patient's responsibility to contact the practice, unless they are particularly vulnerable.

c) Who can add information to the NHS App?

Dr King confirmed that information recorded in a patient's medical record is made available through the NHS App. Patients who do not have access to the app, are unable to access certain features, or would like their medical record reviewed should contact the practice for assistance.

d) Permanent closure of the working survey subgroup

Ruth Crick confirmed the closure of the Survey Working Group and expressed her sincere gratitude on behalf of the PPG and practice to Heather Pitch, Mary Adams, Julian Simcox and John Haslett for their time, dedication and valuable contributions throughout the group's work. Their commitment and support were greatly appreciated.

e) Sunnyside Surgery

Feedback highlighted a perceived lack of communication and connection between the surgery and the neighbouring pharmacy. This was further compounded by the blocked corridor, which creates a physical separation between the two premises. Although the pharmacy operates as a separate business, the group expressed a preference for it to be owned by MVMG to help strengthen the connection and improve integration between the services.

7 **Date of next meeting:**

- Next In-person Meeting: Wednesday 21st October at 1:30pm

Appendix 1: Dashboard

Thursday 02 Jan 2025 - Friday 31 Jul 2026

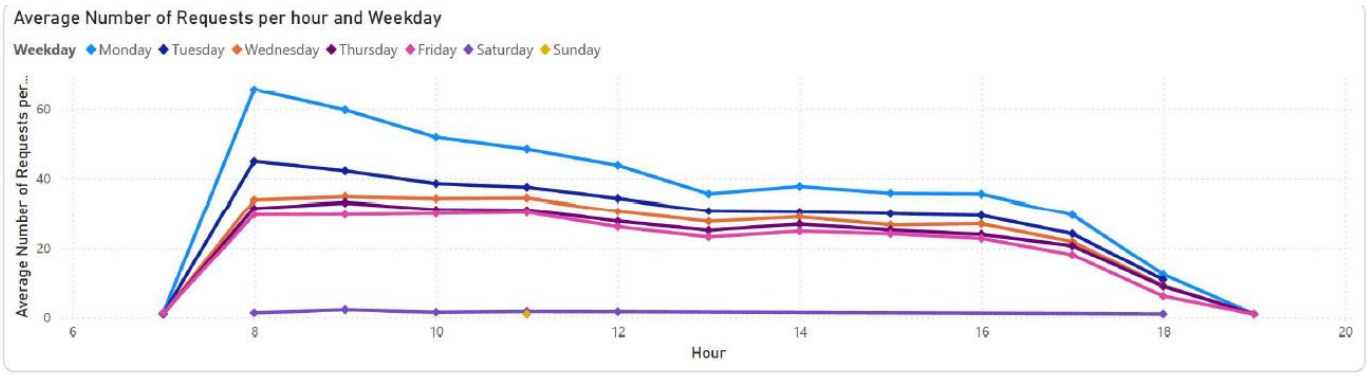
Phone Calls

Start of Month	Queued for Group	Missed from Queue	Answered from Queue	Missed from Queue <10 secs	Average Queue Duration Answered	Estimated Call backs Requested	Call backs Made
01 July 2026	14,340	1,501	11,015	309	00:04:12	1,824	2,720
01 June 2026	14,962	2,190	9,636	396	00:05:54	3,136	3,919
01 May 2026	12,239	1,452	9,146	364	00:04:36	1,641	1,640
01 April 2026	13,314	1,560	10,390	424	00:04:09	1,364	1,363
01 March 2026	15,314	1,193	12,984	320	00:02:32	1,137	1,135
01 February 2026	13,284	1,033	11,178	282	00:02:53	1,073	1,071
01 January 2026	14,123	1,297	11,654	353	00:03:21	1,172	1,172
01 December 2025	12,621	1,041	10,546	262	00:03:02	1,034	1,034
01 November 2025	13,259	1,176	10,849	287	00:03:19	1,234	1,231
01 October 2025	15,213	1,848	11,990	502	00:04:05	1,375	1,374
01 September 2025	14,035	1,140	12,109	287	00:02:43	786	786
01 August 2025	12,308	869	10,937	250	00:02:28	502	502
01 July 2025	14,102	787	12,921	268	00:01:51	394	394
Total	**264,345**	**24,227**	**216,935**	**6195**	**00:03:11**	**23,183**	**24,841**



eConsult

Start of Month	Visits	Self-help visits	Pharmacy self-help visits	Callback provider visits	Local service visits	eConsults submitted	eConsults diverted	Requests submitted by Patients	Requests submitted on Patients behalf	Average weekly requests
01 July 2026	6523	215	36	64	22	6789	372	4618	2171	1358
01 June 2026	6943	247	39	79	38	6671	382	4577	2094	1334
01 May 2026	6400	214	49	75	53	5763	355	3941	1822	1153
01 April 2026	7273	293	151	56	48	6258	379	4299	1959	1252
01 March 2026	8548	238	141	106	88	7129	396	4880	2249	1426
01 February 2026	8194	263	40	80	80	6384	378	4401	1983	1596
01 January 2026	8838	384	166	175	79	6874	449	4769	2105	1375
01 December 2025	6793	218	133	115	73	5092	322	3648	1444	1018
01 November 2025	8412	223	85	69	85	5965	356	4274	1691	1193
01 October 2025	9180	307	25	158	158	6890	391	5214	1676	1378
01 September 2025	8004	223	56	51	72	6456	369	4946	1510	1291
01 August 2025	7762	199	86	78	76	5965	337	4573	1392	1193
01 July 2025	8342	182	101	70	86	6524	309	5080	1444	1305
Total	**159684**	**4709**	**1842**	**1565**	**1303**	**119269**	**6963**	**87595**	**31674**	**1437**



Appointments

Start of Month	Total DNA'd Appointments	Total Telephone Appointments	Total Face to Face Appointments	Total Duty Appointments
01 July 2026	581	1,515	26,957	942
01 June 2026	680	1,739	26,892	1,102
01 May 2026	773	1,538	22,888	994
01 April 2026	482	1,619	24,588	998
01 March 2026	689	1,783	28,427	1,091
01 February 2026	628	1,634	25,915	895
01 January 2026	612	1,881	27,420	928
01 December 2025	708	1,657	24,541	905
01 November 2025	719	1,511	25,875	787
01 October 2025	676	1,730	28,405	1,013
01 September 2025	765	1,660	26,614	968
Total	**7,313**	**18,267**	**288,522**	**10,623**