



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

MENDIP VALE MEDICAL GROUP PATIENT PARTICIPATION GROUP MEETING
Wednesday 16th October 2024, 1.30pm

PPG Attendees	Geoff Matthews John Gowar Maureen Hutchinson Heather Pitch Andrea Levett Roger Daniels Linda Brimecome Janet Beckett Sheila Williams Clive Harper Barry Blakley	Chair Stand-in Chair and PPG Member (PPL) 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 Leigh Vowles Dr Richard Reed	Managing Partner GP Partner Comms and Engagement Manager North Somerset Divisional Director GP Partner and Research Lead
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Apologies	John Ledbury Georgie Bigg Sandra Dunkley Joe Norman David Miller Mary Adams Leonie Allday Alan Hunt Jane Clarke Diane Haynes	PPG Member (PPL) PPG Member (PPL) PPG Member (Riverbank/St Georges) 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) 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	
	AD	Telephone monthly updates to be circulated	
	DC	Updates on Congresbury	
	LR	Simple eConsult instructions	Completed
	LV	Review of the eConsult text templates	
	LR	Virtual meeting on next agenda	

Minutes:

Item	Description	Action
1	<p>Apologies Diane Haynes, John Ledbury, David Miller, Alan Hunt, Tim Evans and Georgie Bigg</p> <p>The group welcomed Clive Harper to his first in-person meeting.</p>	
2	<p>Minutes of Previous Meeting Minutes of previous meeting were approved as an accurate reflection of the discussion which took place. Nothing to note from previous meeting.</p>	
3	<p>Research Presentation with Dr Richard Reed Dr. Richard Reed provided an overview of the Mendip Vale Research Team. He shared that his involvement began in 2013, when the team was handling just 1-2 projects per year—considered a low level of research activity. However, thanks to strong recruitment outcomes, the team gained momentum and secured additional funding. This funding allowed them to hire research nurses and reinvest in practice services for patients. With continued success, the team expanded its capacity, taking on larger and more complex projects. By 2016, the research team had reached a top tier ranking and has consistently placed among the top five in the Bristol, North Somerset and South Gloucestershire area each year since.</p> <p>The current Research Team consist of:</p> <ul style="list-style-type: none">- Dr Reed, GP Partner and Research Lead,- Tracey Worland, Research Nurse- Katherine White, Research Nurse- Hannah Cooke, Research Co-Ordinator <p>One of the team’s successful past research projects was the Atlantis Study. Dr Reed explained that this study focused on how patients with irritable bowel syndrome (IBS) could manage their symptoms using a specific type of antidepressant medication, targeted at a particular age group. The results indicated that this approach was effective, allowing GP clinicians to offer this option to patients. The research team successfully recruited 33 patients, representing 7% of the research study patient population.</p> <p>Current Research Studies includes:</p> <ul style="list-style-type: none">- Athena Shingles Study: This study aims to determine whether taking a low dose of amitriptyline soon after a shingles diagnosis can help prevent the associated pain. Currently, 18 patients have been recruited.- COAT: This study, which has recruited 11 patients with cellulitis of the leg, assesses the effectiveness and safety of a 5-day course of Flucloxacillin compared to the standard 7-day treatment.- lid3: Focused on understanding the prevalence of infectious diarrhoea, this study has successfully recruited 180 patients so far.- Safer: This study aims to identify previously undiagnosed atrial fibrillation (AF) in patients, a condition characterized by an irregular heartbeat that significantly increases stroke risk. To date, 1,809 patients have been recruited, with 18 confirmed cases of AF. <p>Dr Reed explained that the Patient Participation Group (PPG) can support Mendip Vale’s research efforts by helping to promote ongoing studies. The team assures that patient</p>	

identities are never shared with third parties, and all data is fully anonymised, with patient consent.

All research studies and information about the team can be found on the website: <https://mendipvale.nhs.uk/group-information/research>

The group had several questions for Dr Reed including:

1. Does the team collaborate with other practices?

In the past, the team collaborated directly with other practices, though this hasn't occurred recently. However, they continue to network annually with neighbouring practices to exchange best practices for patient recruitment and research promotion. The research itself is directed by research entities, including commercial companies and universities, which compile results from Mendip Vale and other participating practices in the area.

2. How can patients trust links sent via text messages for research studies?

Patients can trust links sent via text messages for research studies when they come directly from Mendip Vale or an affiliated, verified sender. All study-related messages will clearly identify Mendip Vale and may include additional information to confirm their legitimacy, such as links to official practice or NHS websites. Patients are encouraged to contact the practice directly if they have any concerns or want to verify the authenticity of a message before clicking any links.

The group provided feedback suggesting that the practice should include research projects in the patient newsletter. This would help raise awareness of the studies being conducted and inform patients about potential invitations to participate.

3. Do you get involved with new medication research?

Yes, the team participates in studies that involve new medications. These studies are typically run in partnership with research institutions, pharmaceutical companies such as Synexus and Sanofi.

4 **Update on actions from the July 2023 Survey**

a. Medical team photos in the surgeries.

Lois Reed explained that during the last meeting, it was confirmed that the action regarding the display of Surgery management and GP partners' photos on the waiting room screens had been resolved. However, recent feedback indicated that the screens are not consistently turned on by the Surgery teams. Lois confirmed that she will be meeting with the Digital Manager over the next few weeks to discuss new software for the screens. This software will simplify content updates and allow for monitoring of screen usage. This initiative will also provide an opportunity to share communications digitally, helping to reduce paper consumption and promote environmental sustainability.

b. Step by Step instructions on how to use eConsult.

Lois Reed explained that over the past year, efforts have been made to improve this through various channels, including step-by-step videos and website instructions. Recently, during her work with Bristol Tea and Tech, Lois created a new booklet and would appreciate any feedback. The goal is to provide instructions in multiple formats for patient accessibility.

Since the meeting, Heather Pitch has assisted Lois in reviewing and refining the booklet, which is attached for your reference.

c. Any issues to raise on the new MV website

The website pilot team has reached out to see if any PPG members would be interested in joining the development and progression group. Heather Pitch asked whether this group is separate from an existing group or part of the same initiative. Lois confirmed that she would follow up to clarify.

After the meeting, Lois checked and confirmed that the PPG is no longer needed for the websites therefore they are no longer active on this project. However, this is help is referring to the Primary Care Lab: [Primary Care Laboratory\(s\) to NHS England South West \[Notice\]](#)

Mendip Vale has already made several improvements to the website, including the addition of an eConsult button on the home screen. They are also working on restructuring the prescriptions page to simplify the process for requesting repeat prescriptions. If members have suggestions for further improvements or notice any issues, they are encouraged to reach out to Lois Reed.

d. eConsult – update on usage and achievement of the 3 working day target, and any feedback from patients

Leigh Vowles confirmed that the September figures show that 5,302 were submitted for North Somerset. Patients who were contacted within 3 working days was 99.89%.

Leigh Vowles explained that if the initial contact attempt fails, a second attempt will be made using an alternative method. If that also fails, the patient will be asked to contact the practice for further instructions. The practice will use the patient's preferred contact method as stated in their eConsult.

Within the 2025 actions list from the patient satisfaction survey, there is to monitor the difference between the patient successful contact and Mendip Vale. Lois Reed confirmed that she hopes to get the first draft of the report to the subgroup within the next week.

David Clark explained that, given the discrepancy between Mendip Vale's reports and patient feedback, it would be beneficial to assess whether communication from the practice is clear enough for patients to understand the actions taken on their eConsult and the expected timeline for next steps. This is especially important in cases where the patient's preferred clinician is on holiday, which could result in longer wait times for non-urgent issues to be addressed by them.

Leigh Vowles agreed and noted that she would review the text templates currently in use to ensure they are clear.

For the purpose of these minutes, "three working days" refers to the timeframe within which the eConsult is triaged and the patient is contacted with instructions for the next steps.

Leigh Vowles

Regarding appointment capacity, David Clark confirmed that there is still significant availability, particularly in Saturday clinics, where some patients are being rescheduled to attend earlier appointments. However, there is some concern that this could change quickly due to winter pressures. Overall, appointment capacity remains strong, with patients generally being booked within a few days of eConsult submission.

5 Telephone Call Statistics

Leigh Vowles outlined the call data for September which showed that we had approximately 1,590 more calls this month compared to August. Due to increase volume of calls, other notable stats include:

- Answered from queue 14, 697, high compared to 13,171 in August
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- 1109 called in September were missed from the queue
 - Despite the increased volume of calls, we are still maintaining the target average queue time of 3 minutes.
 - A total of 565 callbacks were requested, with 9 callback requests missed. This is slightly higher than the number missed last year.

6 Patient Feedback from online meeting and items raised

Lois Reed outlined the list of actions and questions raised at the last Virtual PPG Meeting on Wednesday 25th September at 7pm, including:

- **Prescription Process Enquiries:** Questions were raised regarding how best to contact the practice for enquiries and requesting repeat prescriptions. It was suggested that more publicity and communication on the prescription process is needed. Lois Reed confirmed she is working with the Prescriptions teams and Clinical Pharmacist to improve this.

- **Practice Contact Methods:** Patients were informed of the three main ways to contact the practice: online via eConsult, paper form, and by telephone.

- **Car Parking at St George's:** A query was raised about limited parking spaces at St George's car park, with non-patients occupying many spaces. Suggestions were made to improve signage in the car park.

- **Smartphone Usage:** A question was raised about whether Mendip Vale records whether a patient has a smartphone. While patients may have a phone number, some lack devices to access attachments sent via text. Dr King confirmed that, unfortunately, our systems cannot detect whether a patient has a smartphone, so this information would need to be noted in the patient's record within preferred method of contact. However, this detail will not carry over when sending batch messages to large patient groups for campaign purposes.

- **Staff Break Information:** There was a request to add information about staff breaks on the website or in letters for COVID/RSV vaccine clinics.

- **Dedicated Parking for COVID Clinics:** A question was raised about the possibility of reserving dedicated parking spaces at COVID clinics for patients with mobility issues. If implemented, appropriate communications and signage were requested.

There was a discussion on how to increase attendance at virtual meetings after only 5 members joined in the last meeting out of the 22 invited from the face-to-face group and 17 from the reserve/ virtual list. We have now had 4 meetings, with many regulars, however the numbers of participants have dwindled at each meeting. It's important to note that we did receive several apologies for the last meeting, however, feel that this hasn't been as successful despite the request to have one. The hope was to encourage patients who work during the day, have families and house bounds.

It was agreed that the virtual meetings should continue, and that further discussion on their format, organisation and content should take place at the next face-to-face meeting in December. Lois Reed

7 Mendip Vale rebranding

Lois Reed explained that, since the last meeting, she has reached out to marketing agencies to explore how they might support the transition and assess the associated

costs. The decision to proceed with an agency is still under consideration and remains an option we are actively exploring.

8 **RSV, Covid and Flu Clinic Updates**

Clive Harper and Barry Blakley expressed their appreciation for the clinics, noting how impressed they were with the speed and efficiency of the services provided. This sentiment was shared by the rest of the group.

John Gowar raised a question regarding the upper age restrictions on certain vaccines. Dr King explained that some vaccines have clinical limitations, especially for respiratory function, which may not be compatible with older individuals, making an upper age cap necessary for safety. Many public health campaigns, there are often budget constraints, making it necessary to prioritize resources for those who are most vulnerable. This prioritization often includes younger populations who might be at higher risk of severe outcomes or those who may benefit most from immunization in terms of long-term health impacts.

9 **PPG Chair**

Following Geoff Matthews' recent email to the PPG group announcing his decision to step down as chair, John Gowar stepped into the role during this meeting. Geoff's email to the PPG can be found below.

Any members interested in becoming the PPG chair are encouraged to contact Geoff Matthews for more information. A review of member roles and a discussion on the new chair will be included in the December agenda.

The meeting wished to express its sincere gratitude to Geoff Matthews for his dedicated contributions and invaluable support as PPG chair over the past few years. Despite significant changes within the practice, Geoff's guidance and commitment have been instrumental, and we thank him wholeheartedly for his service.

"Dear PPG members,

Some while ago I decided that at the membership review in December, I would sadly step aside from the Chair and pass this on to the next person who you may wish to appoint. It is not a step that I have taken lightly, since the aspects of patient care that we have worked on over the years have been very satisfying to be a part of. The support and contributions from all members have been excellent - for which I thank you very much. It has made my job a lot easier, as has the open and supportive relationship that we have had with all of the Mendip Vale team. Many issues have been raised, and many answers agreed through joint discussion and investigation. It makes the PPG a very worthwhile organisation.

But my reason for standing down has as much to do with anno domini as anything else. I have been in the Chair for a long period, and it is time for someone else to take on the reins. Having taken the decision some months ago, I have also had over the past three weeks a health problem which amongst other things is having an effect on my ability to speak without coughing and wheezing after a few minutes! This has meant that I have had to bring in additional help at least for the meeting on next Wednesday at PPL, and John Gowar has kindly agreed to step in for this meeting. I do not know how long it will take to clear up my problems, but the message has to be that we also should now start to consider a permanent replacement.

I will work on this with all of you, and with the MV team, and hopefully find my replacement which you will fully support.”

10 **Any Other Business:**

A. N.A.A.P Award Application

Geoff Matthews has recently submitted the PPG application for a NAPP award in recognition of the work the group has achieved over the last year. There is an opportunity to win £400. The winner will be announced on Saturday 16th November, and details for attending the virtual ceremony can be found in the attachments.

B. A meeting with eConsult

Leigh Vowles explained that an invitation has been extended to a representative from eConsult to join the PPG meetings. While this meeting will be virtual, it presents an opportunity for the PPG to provide feedback on the service. This engagement is part of a project eConsult is running to enhance the patient experience with their online forms. More information will be provided soon.

11 **Date of next meeting:** Wednesday 4th December at 1.30pm

Date of next virtual meeting: TBC at 7pm on Teams
