



Programme update



The challenges



Epsom and St Helier hospitals have faced significant challenges for many years. Surrey Downs, Sutton and Merton CCGs are looking in detail at these and developing some solutions so the hospitals can deliver high quality care for local people in the future. The challenges are:

Page Clinical

Epsom and St Helier does not have the workforce to meet the clinical standards for six major acute services to deliver high quality care 24/7 on two hospital sites.

Estates

Many of the Trust's buildings were built before the NHS was founded and are rapidly aging. They are not designed for modern healthcare, an issue repeatedly highlighted by the CQC, including in its latest report in May 2018.

Financial

The Trust has an underlying financial deficit which is getting worse each year. In 2017/18 it has increased to £37million. The financial position will worsen unless changes are made.

A clinical vision for the future



In 2018 three CCGs came together and formed a **Clinical Advisory Group** to think of solutions to some of these challenges. The group membership includes clinicians from across the Sutton, Merton and Surrey Downs area. All CCGs:

- Have a clear vision to prevent illness, join up health and social care and make sure the sickest patients have access to the best possible care
- Are clear that all hospitals in the local area are needed

The Clinical Advisory Group is developing a model for the whole area based on clinical standards, evidence and best practice.

Task and finish groups worked on more detailed areas of the clinical model during August and September.

The clinical model has been taken through the approval process of the **Joint London and South East Clinical Senates.** Independent clinicians will review the model and provide feedback.

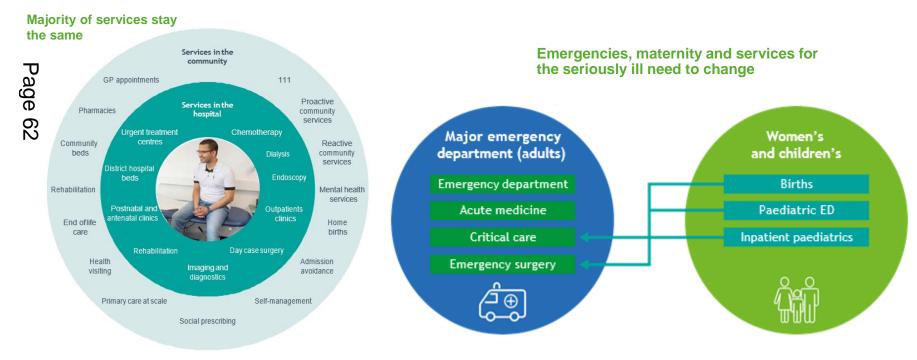
The options have been tested with local GPs in the three areas through **GP locality meetings**.

Most health services in the local area will not change



The majority of services, 85 per cent, will be unaffected and will continue to be delivered from both Epsom and St Helier hospitals, regardless of any changes to other services.

The small number of services that do need to change, are known as major acute services.



Our potential solutions



In June 2018 the Committees in Common of the three CCGs approved the <u>Issues Paper</u> and **began an early engagement period**, which ran until the end of October 2018.

The potential solutions put forward, proposed bringing treatment for emergencies, maternity and the seriously ill into one new acute facility in the area.

There are no proposals to close any existing hospitals, and both Epsom and St Helier hospitals would still provide 85 per cent of services including urgent treatment centres.

mas proposed that the new acute facility could be built on either Epsom, St Helier or Sutton hospital site:

- Locating major acute services at Epsom Hospital, and continuing to provide all other services at both Epsom and St Helier
- Locating major acute services at St Helier Hospital, and continuing to provide all other services at both Epsom and St Helier
- Locating major acute services at Sutton Hospital, and continuing to provide all other services at both Epsom and St Helier

Early engagement activity



A wide variety of people were engaged through different activities including targeted work with protected groups and deprived communities.

The range of activities included:

- 12 public discussion events
- Page 64 6 high street and mobile engagement events
 - 6 focus groups with people who use the following services: maternity, paediatrics and A&E
 - 15 independently facilitated workshops and focus groups with protected characteristic, seldom heard and deprived communities
- Community outreach with 18 equalities groups flagged by the initial equalities analysis
- Emails, letters, telephone calls and via a dedicated website, as well as Twitter and Facebook

The programme works with its **Stakeholder Reference Group** as part of its core governance arrangements. This group scrutinises plans and ideas and makes recommendations to enhance the proposals.

Early engagement feedback themes



Over 1,000 people and organisations have taken part to date.

The feedback is helping to shape proposals providing challenge as well as ideas.

The feedback also provides a list of things that are important to local people – including travel, parking and safety. These will be used to test options.

All information gathered from the engagement activities has been collated and analysed independently by The Campaign Company and published on a dedicated website here.

Il reports have been published including the equalities reports here.

Rey themes include:

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- Clear consensus things must change to continue to provide high quality care for our communities, not just now but in the future
- No agreement about the type of change needed, with people both in favour of consolidating services and in keeping things the same
- Very clear that people value their local services and while many responses highlighted that people are willing to go further for better care, there is a natural sentiment to favour keeping services closer to home
- People raised concerns about travel and access to hospitals, especially for those who are more isolated and less mobile
- Public have suggested a 'status quo' option, for consideration as part of the options for consultation

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What are we doing now?



- Work has been commissioned to provide evidence to inform any decisions:
 - An Integrated Impact Assessment phase one is completed and published <u>here</u>
 - A Deprivation analysis published on the website <u>here</u>
 - A Travel Time analysis phase 1 is completed and a summary is on the website <u>here</u>
- The second phase of the **Integrated Impact Assessment** is underway, this looks at the positive and negative impacts of any potential changes to services, as well as mitigation the CCGs could take, such as transport solutions.

Since July, work has been ongoing with local NHS providers (Kingston, Croydon, St George's, Ashford St Peter's, Royal Surrey, Surrey and Sussex, London Ambulance Service and South East Coast Ambulance Service) to understand any impact of potential changes. Providers are developing a detailed impact assessment in four areas; capacity, estates and capital, income and expenditure and workforce.

All of the above work will go through an assurance and assessment process during 2019 with NHS England, NHS Improvement, London and South East Clinical Senates and the Joint Health Overview and Scrutiny Committees.

Later in 2019, the three CCGs will consider any outputs from the assurance process and all of the above information, as well as the financial assessment, before determining whether they wish to proceed to public consultation on any proposals.