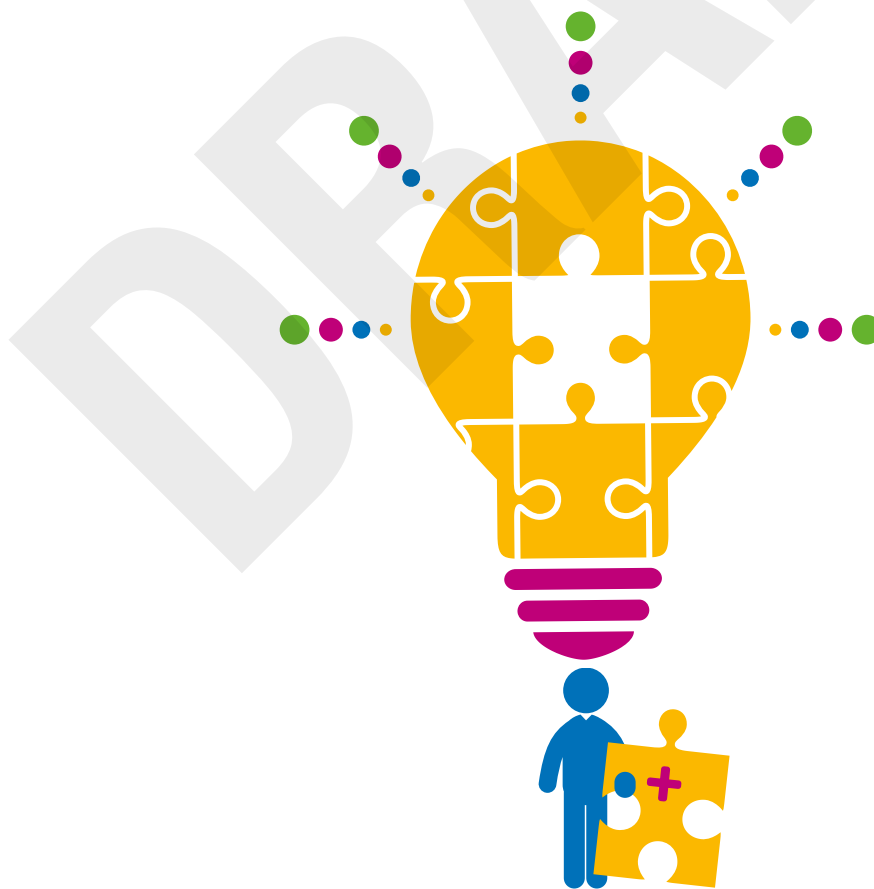




Improving  
Healthcare  
Together  
2020 to 2030

# Talk to us

about our proposal to invest in both Epsom and St Helier hospitals and build a new specialist emergency care hospital which could be located at Epsom, St Helier or Sutton hospital.



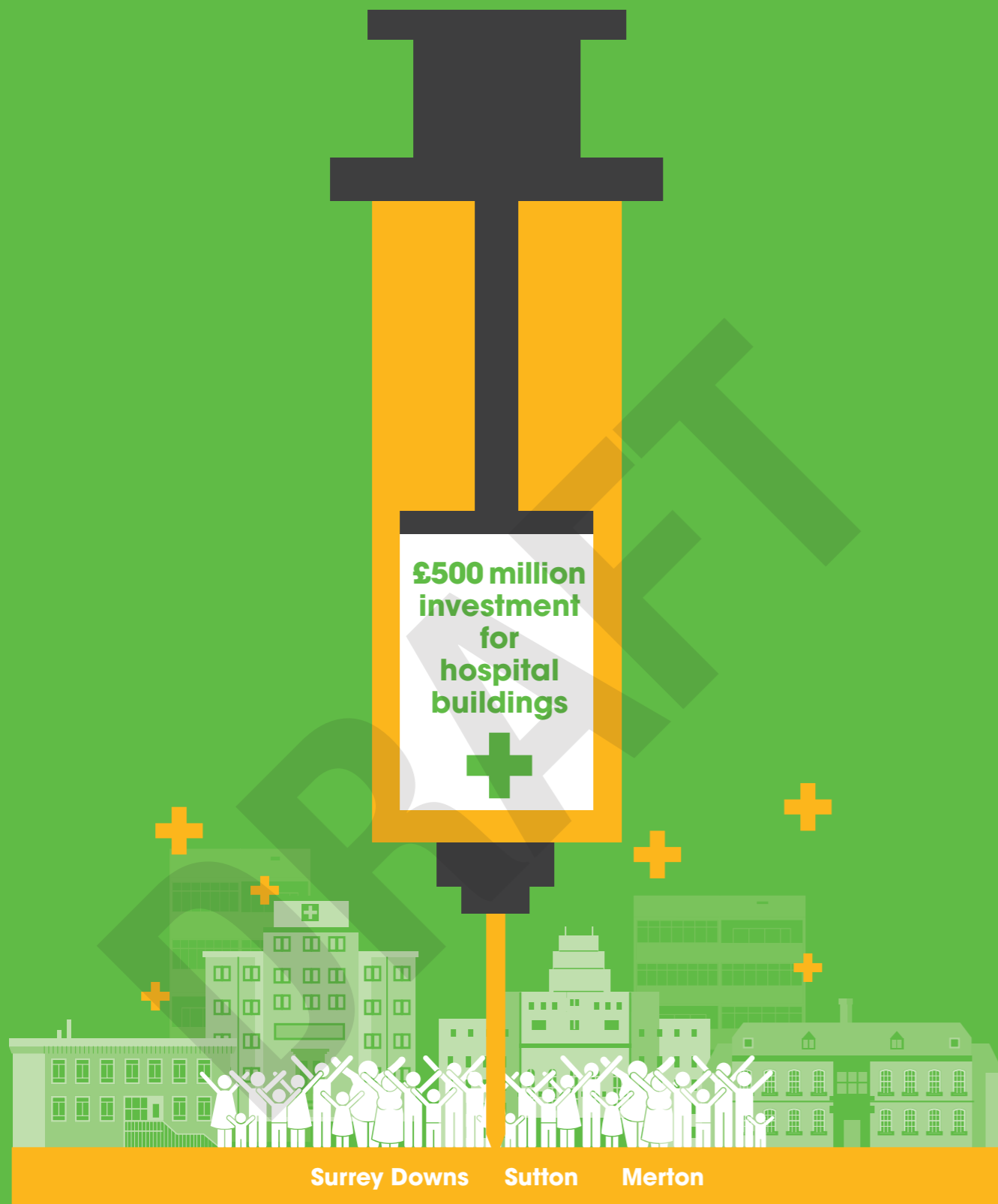
This is a formal public consultation being led by NHS Surrey Downs Clinical Commissioning Group, NHS Sutton Clinical Commissioning Group and NHS Merton Clinical Commissioning Group. It takes place from 8 January to 1 April 2020.

In September 2019, we were allocated £500 million to improve the current buildings at Epsom and St Helier hospitals as well as build a new specialist emergency care hospital on one of the three sites – Epsom, St Helier or Sutton.

Under the proposals:

- the majority of services would stay at Epsom and St Helier hospitals in refurbished buildings, with both hospitals running 24 hours a day, 365 days a year, with urgent treatment centres at each hospital, and
- we would bring together six core (main) services for the most unwell patients, those who need more specialist care, and births in hospital, onto one site in new state-of-the-art buildings. This would mean that specialist doctors, nurses and clinical staff would be able to work together to provide round-the-clock specialist care. These services could be located at Epsom Hospital, St Helier Hospital or Sutton Hospital, but our preferred option is Sutton Hospital.

**Talk to us and tell us what you think of these proposals. We are listening.**



# Improving Healthcare Together – consultation questions

We have six questions to ask local people and staff as part of the public consultation on the future of Epsom and St Helier hospitals. This consultation is called 'Improving Healthcare Together 2020 to 2030'.

To make sure you know all the facts before you answer the questions please read our short consultation document. You can find the consultation summary document on our website (visit [www.improvinghealthcaretogether.org.uk](http://www.improvinghealthcaretogether.org.uk) and type 'summary public consultation document' in the search box to get to the document) or, if you would like us to send you a copy, email us at [hello@improvinghealthcaretogether.org.uk](mailto:hello@improvinghealthcaretogether.org.uk), call us on 02038 800 271 or send a text message to 07500 063191.

Below is a summary of that document.

## Why NHS services need to change

Epsom and St Helier hospitals are facing significant challenges that we need to take action on if we are to keep hospital services within the Surrey Downs, Sutton and Merton area for generations to come. In January 2018, the three NHS Clinical Commissioning Groups in Surrey Downs, Sutton and Merton set up 'Improving Healthcare Together 2020 to 2030' to find the best solution for the long-term challenges at Epsom and St Helier hospitals.

There are three main reasons why we have to change the way we deliver local NHS services.

**Quality** – Epsom and St Helier hospitals do not have enough specialist doctors, nurses and clinical staff for some of the most important emergency services. We spend a huge amount of money on temporary clinical staff to keep our hospital services safe, but despite this we are unable to meet key national and Royal College of Emergency Medicine standards for some clinical care.

**Buildings** – many of the hospital buildings are older than the NHS, and over half of the hospital space has been assessed as not suitable for treating patients to modern healthcare standards.

**Finances** – the quality and buildings issues we are facing contribute to a worsening financial position for the local NHS. We have to pay more and more for temporary staff to make up for shortages in our specialist workforce, and more for emergency repairs to buildings.

This is why local services have to change.



# Our proposal for how we change the way we work across our hospitals

We want to invest £500 million in the best way to make our hospitals safe for local people, attract expert specialist staff, and care for our patients in modern, state-of-the-art buildings. We have listened to people who use our services, and worked with our doctors, nurses and clinical staff to develop a new way of working. We have also taken advice from senior clinicians, both locally and nationally in different parts of the country, where this way of working has been tried and tested. The way clinicians work together across hospital sites is called a 'model of care'.

**For all of the options, our model of care proposes the following.**

The **majority of services would stay** at both Epsom and St Helier hospitals in refurbished buildings, with both hospitals running 24 hours a day, 365 days a year, and urgent treatment centres at each.

We would bring together **six core (main) services** for the most unwell patients, those who need more specialist care and births in hospital, onto

one site in new state-of-the-art buildings. This would mean that specialist doctors, nurses and clinical staff would be able to work together to provide round-the-clock specialist care. This could be located at Epsom Hospital, St Helier Hospital or Sutton Hospital.

**In all of the options, Epsom and St Helier hospitals would still continue to provide the following.**

- **Urgent treatment centres** open 24 hours a day, 365 days a year for those people with non-life-threatening conditions who can make their own way to hospital (which is around two thirds of the patients who currently use A&E).
- **Outpatient services** for follow-up or first appointments with hospital doctors, including antenatal and postnatal care, and kidney dialysis at St Helier Hospital.
- **Diagnostic services**, including X-ray, endoscopy, pathology, ultrasound, radiology and MRI scans.

- **Planned care procedures**, for example, day case operations, minor surgery, injections, radiotherapy and chemotherapy. The South West London Elective Orthopaedic Centre would remain at Epsom Hospital.
- **Hospital rehabilitation beds**, particularly for older people who are recovering from illness or to prevent them from becoming more ill.

**We want to bring together six core services onto one site in a new state-of-the-art specialist emergency care hospital.**

- **A major emergency department** – for the sickest patients with life-threatening conditions, including major emergencies, resuscitation and a dedicated specialist children's A&E.
- **Acute medicine** – for patients with the most urgent medical needs, for example, severe pneumonia, inpatient renal services, and specialist and emergency treatment for patients who have a stroke or cancer.
- **Critical care** – for the specialist care of patients whose conditions are

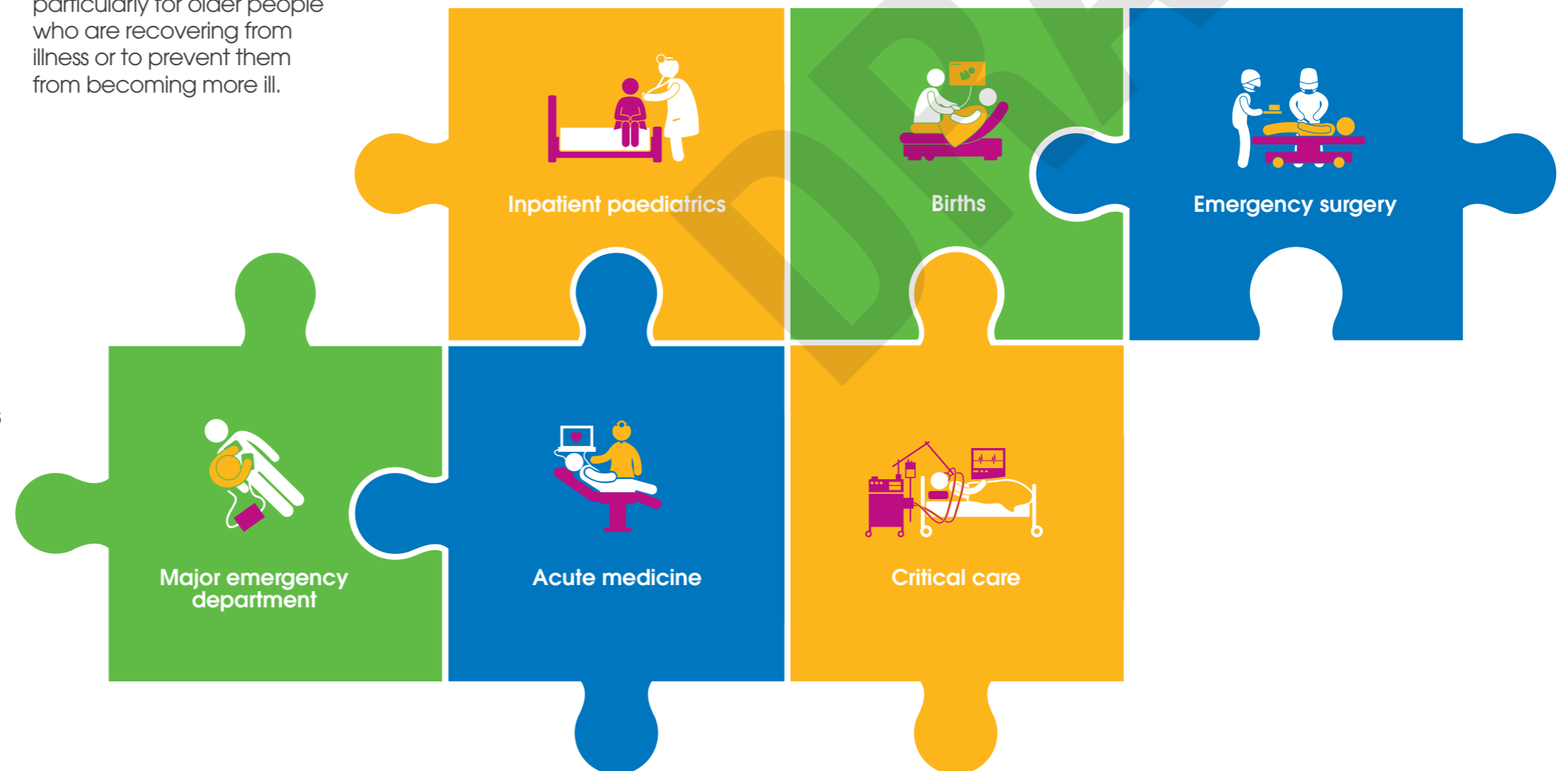
life-threatening and need constant monitoring – usually in an intensive care unit.

- **Emergency surgery** – for patients who need emergency surgical assessment, treatment and operations for conditions such as severe appendicitis. These are among the most unwell patients in the NHS, and this service is already centralised at St Helier Hospital.
- **Births** – bringing together current birth services in one place creating a midwife-led unit and a consultant delivered unit for more complicated births, and also supporting women giving birth at home if they choose to do so. (Women

would continue to have the care they need before and after their baby is born as they do now in the community or from both Epsom and St Helier hospitals).

- **Inpatient paediatrics** – for children who need to stay overnight in hospital for treatment or observation.

The new specialist emergency care hospital could be located at Epsom, St Helier or Sutton hospital. Whichever site is chosen, the six services would not be brought together until the new hospital is built. Each of the different options would take between four and seven years to build once work begins.



# Comparing the options for the site of a new specialist emergency care hospital

We have used what we heard from residents, patients and carers at each stage of developing our proposals, to help us assess, score and rank the final proposals as part of an evaluation to make sure they meet local needs. There is more information in our consultation summary document, which is available on our website ([www.improvinghealthcaretogether.org.uk](http://www.improvinghealthcaretogether.org.uk)).

The table shows how we compared the three hospital sites when choosing our preferred location for the new specialist emergency care hospital and the criteria we used. We agreed that Sutton Hospital is our preferred option.

For all of the options, the time it would take the majority of people to get to the specialist emergency care hospital, by car or blue light ambulance, would not change. Over 99% of people travelling by car or blue light ambulance would get there within 30 minutes.

Criteria		Sutton	St Helier	Epsom
	<b>Quality of care</b> Would it improve safety and quality of clinical care, improve patient experience, provide the number of beds needed and solve the issues surrounding workforce, recruitment and keeping staff?	The proposed changes would deliver improved quality of care in all options. In all options, how we deliver care would be the same. There would be the same number of beds (a slight increase on what is available now) and the workforce issues would be solved.		
	<b>Long-term clinical sustainability</b> Does it improve access to urgent and emergency care and are there other clinical benefits for patients?	Three urgent treatment centres that would be open 24 hours a day, 365 days of the year. Located with Royal Marsden, it would improve care for Epsom and St Helier cancer patients.	Two urgent treatment centres that would be open 24 hours a day, 365 days of the year.	Two urgent treatment centres that would be open 24 hours a day, 365 days of the year.
	<b>Meeting the health needs of local people</b> What would the effect be on older people and people from deprived communities?	Least overall effect on travel for older people and people from deprived communities.	Greatest effect on travel for older people and least effect on travel for people from deprived communities.	Least effect on travel for older people and greatest effect on travel for people from deprived communities.
	<b>Fit with the NHS Long Term Plan</b> Would it fit with the NHS Long Term Plan and support bringing health and care services together?	All options would be similar to how the NHS Long Term Plan sees healthcare delivered in the future.		
	<b>Access, including travel</b> What would the effect be on travel and accessibility?	Smallest increase in average travel times. Fewer local people would have to travel further, as Sutton is the most central to where people live in the areas of Surrey Downs, Sutton and Merton.	Second greatest increase in average travel times. More local people would have to travel further, with more complicated journeys.	Greatest increase in average travel times. A larger number of local people would have to travel further, with more complicated journeys.
	<b>How easy it is to deliver?</b> How complex would it be to build and how long would it take? What would be the effect on neighbouring hospitals?	<b>Easiest to build.</b> Would take four years to build. Least effect on neighbouring hospitals – 50 beds move to other local hospitals.	<b>More complicated to build.</b> Would take seven years to build. Bigger effect on neighbouring hospitals – 81 beds move to other local hospitals.	<b>More complicated to build.</b> Would take six years to build. Greatest effect on neighbouring hospitals – 205 beds move to other local hospitals.
	<b>Finance</b> What is the cost to build and the long-term financial benefit to the NHS over 50 years, which is the planned lifetime of hospital buildings?	<b>Most cost to build: £511 million.</b> It has the most new buildings but because it keeps the most patients in the area it is the best value for the taxpayer. There are extra benefits of being located with the Royal Marsden.	<b>Least cost to build: £430 million.</b> It has the most refurbished buildings and keeps the majority of patients in the area, making it medium value for the taxpayer.	<b>Medium cost to build: £466 million.</b> The build size is smaller as it keeps the least number of patients in the area. It also has the largest investment needed at other hospitals and so is the least value for the taxpayer.



We want to provide high quality safe care, attract and keep the best staff and provide great care to you and your loved ones for generations to come.

It is clear that if we do not change how hospital services are provided in our area, quality and safety will get worse.

**Please talk to us and tell us what you think of these proposals.**

**We are listening.**

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**There are many different ways to have your say.**

**Fill in** the questionnaire at the end of this document or on our website ([www.improvinghealthcaretogether.org.uk](http://www.improvinghealthcaretogether.org.uk)).

**Come to** any of our local listening events to tell us your views.

**Email us** at [hello@improvinghealthcaretogether.org.uk](mailto:hello@improvinghealthcaretogether.org.uk).

**Message us** on Twitter (@IHTogether) or visit our Facebook page (@ImprovingHealthcareTogether).

**Write to us** at Opinion Research Services, FREEPOST SS1018, PO Box 530, Swansea, SA1 1ZL.

**Call us** on 02038 800 271.

**Send us** a text message to 07500 063191.

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We have appointed Opinion Research Services (ORS), an independent research company, to manage consultation feedback. ORS will provide an independent consultation report which will make sure that the feedback we receive from individuals is anonymous. Views provided by organisations

or people acting in an official capacity may be published in full. ORS will process any information you provide in response to this consultation in line with the latest data protection regulations. ORS will only use your information for this consultation. They will not keep any personal

information that could identify you for more than one year after any decisions have been finalised. For more information, go to [www.improvinghealthcaretogether.org.uk](http://www.improvinghealthcaretogether.org.uk) and type 'consultation privacy notice' in the search box or [www.ors.org.uk/privacy](http://www.ors.org.uk/privacy).



Improving  
Healthcare  
Together  
2020 to 2030

Talk to us – we are listening

# Consultation questionnaire

Our proposal to invest in both Epsom and St Helier hospitals and build a new specialist emergency care hospital which could be located at Epsom, St Helier or Sutton hospital.



This is a formal public consultation being led by NHS Surrey Downs Clinical Commissioning Group, NHS Sutton Clinical Commissioning Group and NHS Merton Clinical Commissioning Group. It takes place from 8 January to 1 April 2020.

# Consultation questions

We have appointed Opinion Research Services (ORS), an independent research company, to manage the consultation questionnaire responses and other consultation feedback. ORS will provide an independent consultation report which will make sure that the feedback we receive from individuals is anonymous. Views provided

by organisations or people acting in an official capacity may be published in full.

All of the questions in the questionnaire are optional. ORS will process any information you provide in response to this consultation in line with the latest data protection regulations. ORS will only use your information for

this consultation. They will not keep any personal information that could identify you for more than one year after any decisions have been finalised.

For more information, go to [www.improvinghealthcaretogether.org.uk](http://www.improvinghealthcaretogether.org.uk) and type 'consultation privacy notice' in the search box or [www.ors.org.uk/privacy](http://www.ors.org.uk/privacy).

## Q1

### Our model of care (or new way of working)

Our proposal is to keep most services at their present hospitals in refurbished buildings, and bring together six core (main) services for the most unwell patients, those who need more specialist care, and births in hospital, onto one site in a state-of-the-art new specialist emergency care hospital.

In the table below, please tick a box to tell us how good or poor you think this proposal would be for people living in the Surrey Downs, Sutton and Merton area.

It is a very poor solution	It is a poor solution	It is neither a poor nor a good solution	It is a good solution	It is a very good solution
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please give the reasons for your answer in the space below.



## Q2 The location of the specialist emergency care hospital

### Q2a Sutton Hospital as our preferred location

In the table below, please tick a box to tell us how good or poor you think building the new specialist emergency care hospital on the Sutton Hospital site would be for people living in the Surrey Downs, Sutton and Merton area.

It is a very poor solution	It is a poor solution	It is neither a poor nor a good solution	It is a good solution	It is a very good solution
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please give the reasons for your answer in the space below.

## Q2b St Helier Hospital as the location of the new specialist emergency care hospital

In the table below, please tick a box to tell us how good or poor you think building the new specialist emergency care hospital on the St Helier Hospital site would be for people living in the Surrey Downs, Sutton and Merton area.

It is a very poor solution	It is a poor solution	It is neither a poor nor a good solution	It is a good solution	It is a very good solution
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please give the reasons for your answer in the space below.

## Q2c Epsom Hospital as the location of the new specialist emergency care hospital

In the table below, please tick a box to tell us how good or poor you think building the new specialist emergency care hospital on the Epsom Hospital site would be for people living in the Surrey Downs, Sutton and Merton area.

It is a very poor solution	It is a poor solution	It is neither a poor nor a good solution	It is a good solution	It is a very good solution

Please give the reasons for your answer in the space below.

DRAFT

## Q3 What would help improve transport and travel?

What would improve public transport and travel to the new specialist emergency care hospital for any of the three options?

If the location was **Epsom Hospital**?

DRAFT

If the location was **St Helier Hospital**?

DRAFT

If the location was **Sutton Hospital**?

## Q4

### How would our proposals affect you and your family?

If you think any of our proposals would affect you, your family or other people you know, either positively or negatively, please tell us why you think this using the space below.

DRAFT

## Q5

### What else should we consider?

Please use the space below to tell us about anything else you think we should consider when deciding the best option for specialist emergency care hospital for people living in the Surrey Downs, Sutton and Merton area.

DRAFT

**Q6****Do you have any other solutions that we should consider?**

DRAFT

**Thank you**

Thank you for taking the time to give us your views. The consultation runs from 8 January 2020 to 1 April 2020. Your views will be collected by Opinion Research Services (ORS), an independent research company, and presented to an NHS committee, who will make a final decision.

For more information about this process or to sign up to updates about this programme, please email us at [hello@improvinghealthcaretogether.org.uk](mailto:hello@improvinghealthcaretogether.org.uk), call us on 02038 800 271 or send us a text message on 07500 063191.

**Some more about you**

We recognise and promote the benefits of diversity and we are committed to treating everyone with dignity and respect, whatever their age, disability, sex, gender, marriage and civil partnership status, pregnancy and maternity, race, religion or belief or sexuality. To make sure that our services are designed for the people we serve, we would like you to

fill in the short monitoring section below. We and ORS will only use your information for this consultation. We will not keep any personal information that could identify you for more than one year after any decisions have been finalised. We keep to all data protection laws that apply within the UK, which includes the European General Data Protection Regulation (GDPR) and the UK's own laws.

**1 Which of the following are you responding as**

Please tick any that apply.

- An individual resident
- A carer
- A parent or guardian of a child under the age of 16
- A member of NHS staff
- A representative of an organisation – please provide the name of your organisation
- and then go to question 12 .....
- Other – please specify .....

**2 Which area do you live in?**

Please choose one of the following options.

- Surrey Downs
- Sutton
- Merton
- Some other area
- Prefer not to say

**3 How old are you?**

- under 18    18-24    25-34    35-44    45-54
- 55-64    65-74    75 or older    Prefer not to say

**4 What is your gender?**

- Male    Female    Other    Prefer not to say

**5 Is your gender shown above the same as when you were born?**

- Yes    No    Prefer not to say

**6 Are you currently pregnant or have you given birth within the last year?**

- Yes  No  Does not apply  Prefer not to say

**7 Do you have a disability, long-term illness or health condition?**

- Yes  No  Prefer not to say

**8 If you answered yes to question 7, please tell us what your disability, long-term illness or health condition relates to.**

- A long-standing illness or health condition (for example, cancer, HIV, diabetes, chronic heart disease or epilepsy)
- A mental health difficulty (for example, depression, schizophrenia or anxiety disorder)
- A physical difficulty or mobility issue (for example, difficulty using your arms or needing a wheelchair or crutches)
- A social or communication difficulty (for example, a speech and language issue, or Asperger's syndrome or other autistic spectrum disorder)
- A specific learning difficulty (for example, dyslexia, dyspraxia or ADHD)
- Being blind or partially sighted
- Being deaf or partially deaf
- A disability, health condition, learning disability or learning difference that is not listed above
- Prefer not to say

**9 Which race or ethnic background best describes you?**

- Arab
- Asian/British Asian: Bangladeshi  Asian/British Asian: Chinese  Asian/British Asian: Indian
- Asian/British Asian: Pakistani  Asian/British Asian: other
- Black/British black: African  Black/British black: Caribbean
- Black/ British black: other
- Mixed race: black and white  Mixed race: Asian and white
- Mixed race: black and Asian  Mixed race: other
- Traveller: Gypsy or Roma  Traveller: Irish
- White: British  White: Irish  White: European
- Another race or ethnic background, please state .....  Prefer not to say

**10 Which of the following terms best describes your sexuality?**

- Asexual  Bisexual  Gay or lesbian  Heterosexual or straight
- Other  Prefer not to say

**11 What do you consider your religion to be?**

- Buddhist  Christian  Hindu  Jewish  Muslim
- Sikh  Other religion  No religion  Prefer not to say

**12 What is your full postcode?**


You do not have to give us your postcode but if you do it will help us to make sure we reach people throughout Surrey Downs, Sutton and Merton. It will also help us understand any geographical differences of responses to this questionnaire.

**There are many different ways to have your say.**

**Return this paper questionnaire** to Opinion Research Services, FREEPOST SS1018, PO Box 530, Swansea, SA1 1ZL.

**Come to** any of our local listening events to tell us your views.

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**If you or someone you know cannot read this document, please contact us by email at [hello@improvinghealthcaretogether.org.uk](mailto:hello@improvinghealthcaretogether.org.uk) or phone 02038 800 271 and we will do our best to provide the information in a suitable format or language.**

**Jeśli Ty lub Twój znajomy nie jest w stanie przeczytać tego dokumentu, prosimy o kontakt z nami pod adresem e-mail: [hello@improvinghealthcaretogether.org.uk](mailto:hello@improvinghealthcaretogether.org.uk) lub telefonicznie pod numerem 02038 800 271. Dołożymy wszelkich starań, by przekazać informacje w odpowiednim formacie lub języku.**

நீங்களோ அல்லது உங்களுக்கு தெரிந்த மற்றொருவரோ இந்த ஆவணத்தைப் படித்தறிய இயலில்லை எனில், தயவுசெய்து [hello@improvinghealthcaretogether.org.uk](mailto:hello@improvinghealthcaretogether.org.uk) என்ற மின்னஞ்சல் அல்லது தொலைபேசி எண் 02038 800 271 மூலமாக தொடர்புகொண்டு எமக்கு தெரிவித்தால், தகுந்த மொழியிலோ அல்லது வடிவத்திலோ தகவலை உங்களுக்கு அறிவிக்க எம்மால் இயன்றவரையிலும் முயற்சி எடுப்போம்.

اگر آپ یا آپ کے کوئی جاننے والے اس دستاویز کو پڑھ نہیں سکتے ہیں تو براۓ مہربانی اس ای میل پتہ کے ذریعہ ہم سے رابطہ کریں [hello@improvinghealthcaretogether.org.uk](mailto:hello@improvinghealthcaretogether.org.uk) یا اس نمبر پر فون کریں: 02038 800 271 اور ہم ان معلومات کو مناسب صورت یا زبان میں فراہم کرنے کی پوری کوشش کریں گے۔



Improving  
Healthcare  
Together  
2020 to 2030

Please send your questionnaire to:

**Opinion Research Services, FREEPOST SS1018,  
PO Box 530, Swansea, SA1 1ZL.**

The closing date for the consultation is  
Wednesday 1 April 2020.

