

Minutes of the Meeting of the HEALTH LIAISON PANEL held at the Council Chamber, Epsom Town Hall on 7 March 2023

PRESENT -

Councillor Christine Cleveland (Chair); Councillors Liz Frost, Bernice Froud, Graham Jones and Peter Webb

In Attendance: Councillor Rachel Turner (Health Champion) (Reigate and Banstead Borough Council)

Absent: Councillor Debbie Monksfield and Councillor Chris Webb

Officers present: Rod Brown (Head of Housing and Community), Rachel Kundasamy (Health and Wellbeing Officer), Gayle Osbourne (Community Development Officer) and Serena Powis (Community and Voluntary Sector Liaison Officer)

8 DECLARATIONS OF INTEREST

No declarations of interest were made by Members in respect of any items of business to be discussed at the meeting.

9 MINUTES OF THE PREVIOUS MEETING

The Minutes of the meeting of the Health Liaison Panel held on 8 November 2022 were reviewed by the Panel. The Panel agreed that they were a true record and authorised the Chair to sign them.

10 EPSOM & ST. HELIER HOSPITAL

The Panel received a presentation (published as a supplement to the agenda) from James Blythe (Epsom and St Helier Hospital Managing Director) and Alex Shaw (Epsom and St Helier Hospital Chief Operating Officer).

The following matters were considered by the Panel:

- a) In response to the presentation's comment that 13,400 patients attended accident and emergency in December 2022, it was acknowledged that this is an inevitable consequence of a lack of GP appointments, although it was stressed that it is common and not unique for patients to attend A&E in lieu of being signposted elsewhere.

- b) James Blythe reaffirmed that, because Epsom & St Helier are one of the 8 hospitals on the preliminary 'pathfinder scheme' (please see presentation for further explanation), the hospital's completion deadlines are for 2027, rather than the national aim of completing 40 hospitals by 2030.
- c) With regard to the currently unbuilt second multi-storey car park at Epsom Hospital, James Blythe explained that planning permission had been received and options were currently being investigated for offsite parking, including park-and-ride and town centre parking. He stated that it was estimated to be completed in 9 months' time.
- d) Beyond 2023, the hospital confirmed that there is a 5 year back up maintenance plan for work to complete, within a budget of £130mil. The hospital shall risk assess every piece of required maintenance, which is then used to assess the work's priority order.
- e) The hospital's contingency plan for the upcoming junior doctor's strike was discussed. The relevant staff have checked all rotas that may be impacted and how best to cover them, notably by recruiting consultants, bank workers and other services into support roles, where possible. This includes positioning staff into pharmacies, taking, ward duties, and administrative roles, amongst others. It was also acknowledged that there is a conscious aim to keep elective surgeries in place, but may need to reduce these in the future.
- f) In response to the impact of the rising cost of building materials, the hospital reinforced the importance of a single approach towards design and procurement across the 'pathfinder scheme' as a solution to mitigating rising costs, as although funds have increased, streamlining development will offset these costs. Although, it was noted that the longer these conversations take, it may hinder progress as inflation continues to increase.
- g) It was confirmed that Epsom & St Helier is still in the top 8 priority hospitals, although below those with structural failings that require urgent restoration.
- h) In response to the impact of the impact of ULEZ costs on travel, the hospital acknowledged the need to increase public transport provisions. Solutions included utilising the £40million levelling up fund, working with the Marsden and Cancer Research UK to improve site transport, however it was also noted that as these plans are for 2027, it is difficult to accurately assess the future situation and need at this point in time.
- i) In response to staff uptake of flu and covid-19 vaccines, the hospital confirmed that they are encouraging staff to receive both and confirmed that approximately 60% had done so.
- j) The hospital provided insight into their recruitment strategy and commented that staff recruitment and retention vary widely across departments. They acknowledged that some areas, notably nursing and

dental, are harder to recruit in and they hope to offer training and development incentives as a solution. However, they also recognised and accepted the overall, long-term benefit the NHS receives by the hospital training staff so they can successfully move on into higher positions and, so, view offering training and progression as an aim for the hospital, rather than a hinderance.

- k) In response to enquiries on the refurbishment's impact on GP surgeries and what extra support is available for them, the hospital acknowledged that this development is a pressing need that is regrettably outside the hospital's control, as they do not oversee the GP surgeries.
- l) The hospital reaffirmed that, in terms of their position in the planning process, they are currently awaiting feedback on how the redevelopments shall proceed. This feedback shall hopefully be received by summer 2023 and should inform the details of the planning, such as funding allocation and priorities on spend. Once planning is finalised, the hospital can confidently proceed with publishing final dates and details to the public.

11 EXCLUSION OF PRESS AND PUBLIC

The Panel resolved to exclude the Press and Public from the meeting in accordance with Section 100A (4) of the Local Government Act 1972 on the grounds that the business would involve the likely disclosure of exempt information as defined in paragraph 3 of Part 1 of Schedule 12A to the Act (as amended) and that pursuant to paragraph 10 of Part 2 of the said Schedule 12A the public interest in maintaining the exemption would outweigh the public interest in disclosing the information.

12 SURREY COUNTY COUNCIL SUICIDE PREVENTION STRATEGY

The summary for this item is recorded in a separate (not for publication) restricted Minute.

The meeting began at 7.00 pm and ended at 8.10 pm

COUNCILLOR CHRISTINE CLEVELAND (CHAIR)

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