



**University Hospitals and Health Group** 

Report Title	Update report to the Epsom and Ewell Health Liaison Panel
Meeting date	23 November 2023

This report provides an update on:

- 1. Building Your Future Hospitals programme
  - 1.1 Programme update
  - 1.2 Current estates developments
  - 1.3 Epsom Hospital multi-storey car park development
  - 1.4 Plans for renal care
- Winter planning
- 3. Industrial action
- 4. Proposed changes to children's cancer services
- 1. Building Your Future Hospitals Programme

## 1.1 Programme update

In our last update to the Health Liaison Panel in July, we shared that the Government has announced the next steps for the national New Hospital Programme, including that in his address to parliament, the then Secretary of State for Health and Social Care Steve Barclay promised:

- Our Building Your Future Hospitals programme will "now proceed and be fully funded"
- It will be **delivered by 2030** using a Hospital 2.0 approach
- We can now proceed with our enabling works we have already started relocating services so we can clear the site for building works.

We are working closely with the New Hospital Programme on our plans for the new hospital, including updating our Outline Business Case (OBC) and timetable for the build.

Planning for enabling schemes, such as junction improvements, access road improvements on the campus, relocating the Malvern Centre, and working with the Royal Marsden on preparing the site for the build, continue to be a focus for the programme team. We hope to make significant progress with these in the coming year.

### 1.2 Current estates developments

We continue to invest in our current estate and make much need improvements.

This year, we have made significant progress with our Langley Wing redevelopment, which is now in the final stages. In August, we relocated the New Epsom and Ewell Community Hospital (NEECH) and Alex Frailty Unit from the West Park site and Wells Wing at Epsom Hospital respectively, into a new purpose built unit in the Langley Wing called the Mary

Seacole Unit. Both of these services are part of our integrated community partnership Surrey Downs Health and Care.

### 1.3 Epsom Hospital multi-storey car park development

Our teams continue to plan for the development of a multi-storey car park at Epsom Hospital, including arrangements for staff, patient and visitor parking during the works, as well as plans for traffic management. We do not have a current planned start date for this work, but will keep the council updated of our plans.

#### 1.4 Plans for renal care

We are pleased to update you on our plans to bring renal inpatient services, currently provided at St Helier and St George's, together under one roof and build a state-of-the-art renal unit at St George's in Tooting.

We have received approval from the NHS England and Department of Health and Social Care Joint Investment Committee to go ahead to develop more detailed plans (known as a full business case) and submit a planning application for the new building to Wandsworth Council. These are key steps on the road to delivering this development.

This exciting programme will help to transform the quality of renal care across south west London, Surrey and its borders by allowing us to locate specialist inpatient care in one place while strengthening outpatient services in local hospitals, clinics and at home, where 95% of patients will continue to receive care and treatment.

The new unit, which will be located next to the Atkinson Morley wing, will deliver high-quality inpatient, outpatient, and acute dialysis facilities. This will include inpatient services for people on long-term dialysis, and more complex care for individuals needing specialist surgery such as a kidney transplant.

We have appointed BDP Architects to design the new building, and our proposals have been developed following pre-application meetings with Council planning officers. This follows extensive engagement on our proposals with kidney patients and staff in 2021. 74% of all respondents and 79% of kidney patients who responded thought the proposals were either good or very good. The Kidney Patient Associations of St George's and St Helier also supported the proposals.

During October and in to November 2023, we actively engaged with the local community, staff and stakeholders on our plans for the new building, to seek feedback in advance of submitting a planning application to Wandsworth Council.

# 2. Winter planning

As the winter draws in, we are already experiencing heightened operational pressures across Epsom, St Helier and St George's hospitals, signalling what will be a challenging few months ahead.

Our system has been under significant strain, with acute demands at our front door on a daily basis.

Managing flow through our hospitals and improving hospital discharges remain a priority to enable us to release vital capacity to deal with this demand. We have discharge wards to free up bed space, and employ people in dedicated roles that focus on discharging patients and improving patient flow earlier on in the day.

We also work closely with our community partners, Sutton Health and Care (SHC) and Surrey Downs Health and Care (SDHC), as well as mental health and social care providers, to ensure people are being cared for in the most appropriate setting. This includes identifying patients for the virtual wards run by SHC and SDHC, which allow patients to get the care they need at home safely and conveniently, rather than being in hospital.

Our Surrey Downs two-hour Urgent Care Response (UCR), provided by Surrey Downs Health and Care, received 3,100 referrals between April to October 2023. This has contributed to four percent reduction in Emergency Department attendances and six percent reduction in non-elective admissions in Epsom Hospital for Surrey Downs patients when compared to same time last year.

We would like to put on record our thanks to our hard-working teams in our Emergency Departments, and throughout our organisation, who continue to work tirelessly to care for our patients during this challenging time.

#### 3. Industrial action

One of the challenges we have dealt with has been sustained disruption from industrial action. We welcome the talks now taking place between the government and the unions, but there remains a possibility of further strikes to prepare for, as a new ballot has been issued by the British Medical Association (BMA).

Our priority has been to work with staff and unions to maintain urgent and emergency care during the strikes, and to minimise as far as possible the impact on planned appointments, operations and procedures.

We have continued to provide key emergency and urgent services on strike days and have worked with the Royal College of Nursing (RCN) and British Medical Association (BMA) and other representative staff bodies to agree locally derogated services (areas exempt from strike action), to ensure patient care and safety has been maintained.

We have hoped to mitigate the effect on services, but some planned care – appointments, procedures and operations, for example – had to be postponed to help us safely manage the impact of the strikes and provide emergency care. During the industrial action at the beginning of October, we had to reschedule 715 outpatient appointments and 36 planned procedures. All affected patients were contacted directly to reschedule care. As the industrial action continues over a sustained period, it is becoming harder each time to recover from the impact on our elective activity.

# 4. Proposed changes to children's cancer services

The future of children's cancer services is changing as NHS England–London is consulting on where a Principal Treatment Centre (PTC) for children's cancer services should be located.

St George's has provided the current Principal Treatment Centre, alongside The Royal Marsden Hospital, for more than 25 years. Together providing high-quality care to children with cancer from across South London, Kent, Surrey and Sussex. However, this arrangement must now change, because of a new national requirement for children's cancer centres to be on the same site as a children's intensive care unit – which is available at St George's but not the Royal Marsden.

The Trust already provide most of the specialist paediatric services that really matter for children with cancer, including paediatric intensive care, and neurosurgery. One in four

children with cancer have a neuro-oncological cancer, and sometimes children with cancer need neurosurgical input in an emergency.

The Trust also offers what families want - parents who have a child with cancer, potentially on immunosuppressants, take them to hospital by car not on public transport. St George's offers a children's cancer centre outside of central London, with dedicated parking spaces directly outside the entrance of the proposed new, state-of-the-art Children's Cancer Centre.

The clinical staff who care for children with cancer also care for other children. If the PTC moves it will impact other children's services at St George's. Keeping the PTC in South West London avoids this.

With much of the care already provided at St George's, the proposal involves disruption for fewer services and fewer staff. Of the options available, the proposal involves the lowest capital cost, a better revenue impact, and was assessed by NHS England as better value for money.

You can read more about why <u>Kids Deserve St Georges on the St George's website</u> and more from NHS England on why there is a need for change and complete the consultation here.