## Minutes of the Meeting of the HEALTH LIAISON PANEL held at the Council Chamber, Epsom Town Hall on 4 March 2025

PRESENT -

# Councillor Christine Cleveland (Chair); Councillor Liz Frost, Councillor Bernice Froud,

Councillor Bernie Muir, Councillor Kim Spickett and Councillor Darren Talbot.

In Attendance: Councillor Paula Keay (Mole Valley District Council) (as nominated substitute for External Representative Councillor Claire Malcomson), James Blythe (Managing Director, Epsom and St. Helier, University Hospitals NHS Trust), and Sumit Wadhia (Group Head of Public Affairs and Building Your Future Hospitals, St George's, Epsom and St Helier University Hospitals and Health Group)

Officers present: Rachel Epton (Community Development Manager) and Victoria Sandri-Healy (Community Development Officer)

### 10 **DECLARATIONS OF INTEREST**

### **Epsom and St Helier Hospitals Update**

Councillor Bernie Muir, Other Interest: Councillor Bernie Muir declared she is a Governor of Surrey and Border's Partnership and is a Patron of Mary Frances Trust.

Councillor Kim Spickett, Other Interest: Councillor Kim Spickett declared that she is part of the Malnutrition Pathway.

#### 11 MINUTES OF THE PREVIOUS MEETING

The minutes of the meeting of the Health Liaison Panel held on 21st November 2024 were reviewed by the Panel. The Panel agreed that they were a true record and authorised the Chair to sign them.

#### HEALTH AND WELLBEING (DRAFT) STRATEGY - UPDATE AND OVERVIEW 12

The Panel received and considered an update presentation from the Community Development Manager on the Draft Health and Wellbeing Strategy 2025/28.

The following matters were considered by the Panel:

- a) A question was put to the speaker requesting the data on which parts of the borough were experiencing more loneliness than others. The speaker stated they the loneliest areas were Town, Ruxley and Court wards, and were happy to work with the PCN to get a synopsis of this. It was also mentioned that the Joint Strategic Needs Assessment had a chapter on loneliness that can be filtered by division and ward which also includes that data.
- b) It was queried how the new 2025-28 strategy will manifest and what engagement will look like. It was stated that the strategy is still in its draft form, with 2 more cycles left before final publication. That will then be followed by an action plan and delivery plan. Specific details cannot be given at the time, but it was stated there would be considerable effort on the partnerships working to deliver something achievable and holistic for residents.
- c) With respect to loneliness in the Borough, it was stated that Epsom and Ewell had recently been voted the 4<sup>th</sup> best place to live in Surrey, though there were statistics indicating that there were ongoing issues. It was stated that there was a continued focus on mental health, and that while focussing on children and young people is imperative, it was important to remember that older generations also struggle with loneliness and mental health too.

### 13 EPSOM AND ST HELIER HOSPITALS UPDATE

The Panel received and considered an Epsom and St Helier Hospital update paper from St George's, Epsom and St Helier University Hospitals and Health Group.

The following matters were considered by the Panel:

- a) The speaker disclosed further updates from the hospital that were not mentioned in the report:
  - a. It was noted that in terms of planned care, Epsom performs relatively well and has nearly eliminated all 65-week waiting lists within the organisation. Prior to Covid it was extremely rare to wait that long. Currently they are down to around 20 to 30 patients in the whole trust who are waiting more than 65 weeks. They are working to get that down to zero as soon as possible. The Trust have also seen 52 week waits for patients also come down significantly.
  - b. The speaker also noted that children awaiting diagnoses of Autism or ADHD has been a challenge across NHS for some time. Working towards lowering wait times for this has also been a focus of the Trust. They have put in significant extra resource and employed more consultants in this area to support children waiting for diagnosis to help them get the care they need. It was noted that

- the Trust are also performing well in terms of Cancer waits. The most important one is that patients are diagnosed within 28 days and treatment commences within 60 days. The partnership with St. Georges and the Royal Marsden hospitals has been pivotal for this.
- c. The speaker also mentioned that the Trust's emergency care is under significant pressure. To combat this, they have received extra funding to have additional beds at Epsom hospital. They are under significant pressure due to more people attending the emergency department who then need admitting. It is becoming harder to get people out of hospital, particularly those who need residential or nursing home care. There is a much higher demand for elderly people needing respite care, but they cannot be placed in these establishments due to lack of room. This results in an extra 2 to 3 weeks stay in hospital if a place cannot be found. This is seen across both Epsom and St. Helier. This will be the Trust's focus over the next year, as well as improving their therapy services to prevent re-admission.
- d. In terms of finances, the speaker noted that the Trust is where it's expected to be for 2024/25. The challenge now is that the NHS received significant additional funding from Government, but it has been entirely consumed by inflation costs and mandatory wage rises. The Trust are working with colleague hospitals to come up with a plan next year where we are looking to take 1-2% out of the local health care system through efficiency, such as ordering less tests and buying equipment and medication as economically as possible.
- b) A Councillor asked what the issues were from the point of view of the hospital with diagnosing children with Autism/ADHD and whose responsibility would it be within the Trust. It was stated that the challenges surround the huge increase in referrals or requests for diagnoses in the UK. The impact on the NHS is that 20-25 years ago when training Doctors, there wasn't the need to train so many in this particular field. Therefore, there is now a shortfall of resource in this area, which is slowly starting to change as more Doctors are being trained and hired to combat wait times and demand. It was also mentioned that in order to diagnose children with Autism/ADHD, it takes multiple visits to healthcare settings which in turn extends patient wait times. The speaker mentioned that said wait times are now getting shorter, but it is taking time.
- c) Feedback was given to the speaker regarding the lack of consistency with patient notes and medication they are given or taking. It was stated that it's not always picked up on or linked properly, causing adverse reactions with patients who mix medication accidentally. The speaker mentioned that this is useful feedback, as it's not something they hear often. The Trust are also in the process of implementing a new electronic patient system in May, making patient notes solely online. This in turn will help with continuity of treatment with patients and making sure notes are all

together and up to date for medication purposes. The speaker then urged Councillors to please signpost people into the formal complaints process as it is the most important way the Trust learn and helps to know what is going on in the hospital.

- A Councillor noted that the report states 9 'must do' actions with regards d) to maternity services. A question was posed around whether these had been actioned. The speaker responded that 6 of 9 'must do' actions are fully complete, the rest are 80% complete. The outstanding actions are getting safeguarding training numbers up where they need to be, some of the transitional and neonatal care staffing and finally the premises issues, relating to St. Helier. It may not be fixable as the women's health block is difficult to get up to a modern standard. It is also to note that the major premises change happening at maternity at Epsom hospital is due to be completed in the next couple of months - another c-section theatre. It was then suggested by a Councillor that delays in the new hospital being built has meant making adaptations to the current hospital to meet demands. The speaker responded that c-section rates are going up rapidly. The local population has a higher maternal age which is associated more with c-section, hence the demand.
- e) A question was posed to the speaker regarding the car park and whether the plan is to still use a lot of the land at the back. The speaker stated that the land is no longer theirs and can be taken off them at short notice. The aim is to try and get the work done before the developer wants to take the land back.
- f) It was mentioned by a Councillor that there seems to be an issue with the barriers to the carpark to the hospital, that the carpark was listed as 'full' despite there being spaces visible. The speaker stated that they would take this query back to the Trust and will provide an update on this at a future meeting.

The meeting began at 7.00 pm and ended at 7.57 pm

COUNCILLOR CHRISTINE CLEVELAND (CHAIR)