

Epsom Health Liaison Panel update

21 January 2026

Presented by:

Alex Shaw

Interim Managing Director

Epsom and St Helier University Hospitals NHS Trust

Content

1. Performance update
2. Winter – pressures on services
3. Industrial action – impact
4. Financial update
5. Maternity investment
6. Maternity – experience survey
7. Investing in our estate
8. New Hospitals Programme
9. Key challenges across gesh
10. Moving forward

Performance update

- **Emergency care:** Around 13,511 people visited any of our A&E departments (including the Urgent Treatment Centre) in December 2025, an average of 435 patients a day. ESTH delivered 70.8% performance against the 4-hour A&E standard compared to 71.8% in November 2024. There is a large scale Urgent and Emergency Care Transformation programme in place, supporting improvements across the emergency pathways from attendance to our hospitals, through to discharge from the wards.
- **Elective Waiting times:** The number of patients waiting 52-weeks reduced to 1,054 (1.8%) in November 2025, compared to 1,307 (2.3%) in October. The overall patient waiting list reduced for the second consecutive month. There are recovery plans in place to reduce our long waiters and improve performance between now and the end of March.
- **Diagnostics:** In November, 1,773 patients were waiting more than 6 weeks for their diagnostic tests or procedures, compared to 1,827 in October and plans are in place to continue reducing the number of patients over 6 weeks.
- **Cancer:** Performance remains below target at both ESTH and SGUH, with neither meeting the 28-Day Faster Diagnosis Standard (FDS) or the 62-day treatment standard. At ESTH the challenge has been largely down to Dermatology and capacity has been put in place to reduce waiting times and improve performance. It is expected that the performance standards are met again by March 2026.

Winter – pressures on services



Winter is always the busiest time of year for our hospitals, a significant number of local people using our services this year



Our operational teams across the Group always start preparations for winter early, working with other local hospitals, local authorities and wider stakeholders including VCSE organisations, to join-up care



We are delivering communications campaigns to ensure local people know where they can seek the right help for them should they need it. This includes signposting to NHS 111 online, GP hubs and pharmacies, with 999 and Emergency Departments to be used for life-threatening injuries and illness



Help us encourage people to stay well with winter vaccines. our communities to stay well this winter. In line with national campaigns, we have been helping people to stay out of hospital by encouraging those eligible to get their flu and COVID-19 vaccinations and offering advice from our clinicians on staying well in the cold weather. As of 4 January we had 22 beds occupied by flu patients (21 general and acute, one critical care).

Industrial action – update

During the last round of strikes in December, 20 elective procedures and 254 outpatient appointments were rescheduled at Epsom and St Helier. Whilst the November strikes meant that 9 elective procedures were rescheduled and 185 outpatient appointments

- There were 79 medical colleagues absent from ESTH, which was 9% of our medical staff. The national average was 13%
- An early flu season and industrial action by resident doctors in December impacted on NHS services. This was no different at ESTH and will be reflected in our performance data, but overall we were able to minimise the impact and sustained around 98% of planned activity
- The November and December activity rates were both above the rate achieved during strike action in July (93%)
- During the strikes in July, 44 elective procedures and 553 outpatient appointments were rescheduled at Epsom and St Helier.

Financial update

ESTH has submitted a deficit financial plan of £5.7m for 2025/26. This is predicated on a significant Cost Improvement Programme of £67.7m and deficit support funding of £41.6m. Like all trusts, achieving this plan will be very challenging.

- The NHS is spending more than its budget, and all trusts will need to make challenging decisions to live within our means.
- Our priority remains the same – delivering the best possible care for our patients, while ensuring value for every NHS pound we spend.
- We are focused on improving our productivity and reducing waste
- Every cost saving measure must be rigorously quality checked by our most senior clinicians to maximise our resources for patient care.
- More than £3.7m has been saved so far by merging corporate services across the group to cut duplication.
- We will continue to be open and honest when difficult choices need to be made and will involve people in decisions.

Maternity – investment at Epsom

- **Second theatre opening** – This theatre is expected to open in February 2026 increasing capacity in the unit, and providing support for high-risk pregnancies
- **New Maternity Assessment Unit (MAU)** - a new MAU is being built next to labour ward, to ensure a swift transfer onto the ward if needed. The current MAU is located in the antenatal clinic
- **Labour Ward** – works are being undertaken to:
 - Improve the space for triage so that there is increased privacy for women with individual assessment areas rather than a shared space with curtains, and a separate dedicated waiting area
 - Move our birthing room to provide families more privacy with improved sound proofing and a kitchenette so that they don't need to come into the main labour ward
- At St Helier Hospital, we are close to completing the refurbishment of the midwifery led birthing rooms with brand new birthing pools.

Maternity – experience survey

The annual national CQC maternity services survey has been published with Epsom and St Helier receiving results in line with national averages, with several standout strengths highlighted

- The annual survey captures the experiences of women who gave birth in February 2025, asking them to rate the quality of their care from pregnancy through to the postnatal period
- At Epsom and St Helier, women reported higher than average levels of kindness and understanding after birth, strong mental health support during pregnancy, and good involvement of partners during labour and birth
- The Trust also scored much better than others for the support provided at the start of labour
- Despite these positive results, we continue to work on what more we can do to improve and provide the highest quality possible care for our patients and the best experience for hardworking staff.

Investing in our estate

We welcomed the Government's announcement last year, pledging £12 million and £9 million investment in our estate at Epsom and St Helier, and St George's respectively

- This allocation needs to be spent in this financial year (2025/26), and we identified key schemes in which the capital will be spent
- At Epsom and St Helier, our focus is on urgent remedial works related to our fire and water systems, urgent structural repairs and upgrades to lifts
- The remaining funds will be used to upgrade the ventilation plants at both Epsom and St Helier and the generator facility at St Helier
- The approximate split across the sites is £7.6m to St Helier and £4.5m to Epsom
- While £12m is a significant investment, our current backlog maintenance is running at £150m, which is expected to rise to £180m over the next five years.
- Separately, we are also undertaking work on the water system in the Women's Health Block at St Helier

New Hospitals Programme

The new Sutton Emergency Care Hospital build has been delayed until at least 2037

- The St Helier estate is deteriorating faster than the Trust can repair it, despite £60million being spent in the past five years
- We are now bidding for around £50m of capital funds allocated to the NHS in London, with the aim of extending the Emergency Department at St Helier Hospital, as well as ongoing conversations with the New Hospitals Programme regarding the St George's Hospital renal unit plans
- We will continue to invest in our hospitals and plan how we keep these running for the next decade – while we wait for the next phase of the New Hospital Programme
- The rationale behind the decision and criteria used, as well as an implementation plan, can be found on the [gov.uk website](https://www.gov.uk). We await further details.

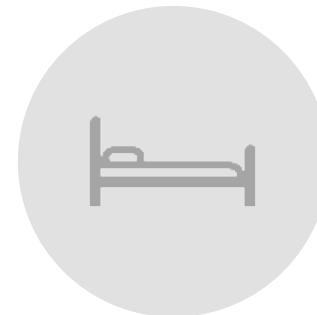
Key challenges across gesh



The NHS in England remains in an incredibly challenged position, and St George's, Epsom and St Helier are all seeing more and more people who need our care



Our aging hospitals are deteriorating faster than we can fix them – there are multiple estates issues across all our sites



There are around 300 people in beds who could be cared for in community settings – the equivalent of 10 wards – and one in five people who come to our Emergency Departments do not need emergency care



Financially, as a Group, we are overspending by £700,000 every single day to care for our patients

Moving forward

- We are not alone in these challenges – all NHS organisations are looking carefully at how to meet the needs of our communities, balance the books and achieve the expectations laid out in the NHS 10 Year Plan.
- Our current focus is making our hospitals as efficient as possible while prioritising quality of care, and we are working closely with our partners across south west London and Surrey.
- We must live within our means, so we are reviewing all services to ensure we are providing the best possible care and responding to the needs of our local communities.
- We remain committed to involving our staff, patients, and communities in shaping the services we provide and will keep people informed.