

Healthwatch Sutton

Prior to its meeting on the 5 September 2017, Healthwatch Sutton carried out a short survey to capture some of the key concerns and potential benefits of the new plans. The output of this was:

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**Concerns - Travel - Emergency**

- That people have further to travel at the very times that they need help fast
- I have diabetes and should be able to receive emergency treatment locally (St Helier) and not at St Georges.
- Increased travel time in an emergency or when in labour
- More people will die because the ambulances will take longer to get to the hospital

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**Concerns - Travel - General**

- Visitors face greater distances to travel at higher cost to see loved ones
- Elderly having to travel miles and miles on public transport. Not all old folk are up to the task
- Transport links to the site (Sutton Hospital) are not suitable for an acute hospital
- The size and location of the Sutton Hospital site means congestion and parking problems

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**Concerns - Long term**

- We will lose one of the hospitals in the Trusts. Both hospitals will be downgraded
- This is the beginning of the end for Epsom and St Helier. Everything will eventually be moved to the Sutton Hospital site
- You spend £400m and get something that is not fit for purpose (i.e. we suffer in the future)
- We've been here before several times. Why should the change happen this time when it hasn't before?

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**Concerns - Financial**

- Worried that the finance for this project will more than likely come from private sources
- What will the total costs eventually be?
- This is just a money saving exercise that will not give any benefits to patients
- Where is the money going to be found for the new hospital at a time of cut backs?

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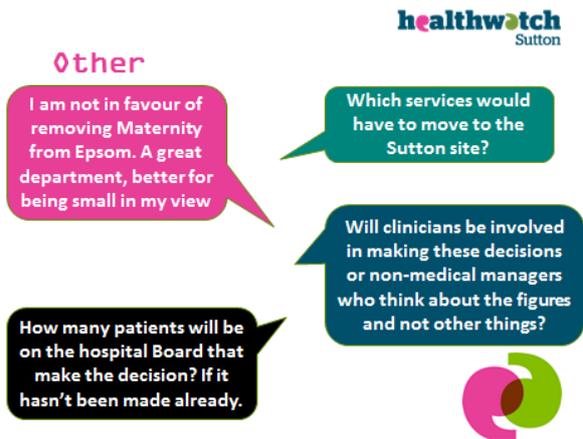
**Benefits**

- Moving services to old Sutton site good. We have the opportunity to work with the Royal Marsden and share costs
- Buses, rail and parking can be planned and factored in.
- If all services are retained, the benefits would be a new modern hospital on the Sutton site
- Keeping sites open as clinical centres and not turning them in to another housing estate
- Medical research could happen

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**Other**

- I am not in favour of removing Maternity from Epsom. A great department, better for being small in my view
- Which services would have to move to the Sutton site?
- Will clinicians be involved in making these decisions or non-medical managers who think about the figures and not other things?
- How many patients will be on the hospital Board that make the decision? If it hasn't been made already.



Meeting was held on 5<sup>th</sup> September and was attended by 50 local people. The following is an overview of the responses:

- 1. Do you agree with our aim to provide as much care as possible from our existing hospital sites?**
  - Yes. From St Helier & Epsom
  - Yes. No – I want all current services to continue to be available at both sites. Yes but in proportion to the greatest concentration of population.  
Number of sites = 6. Yes, as so much money has already been spent e.g. in St Helier as for example Eye Unit that provides Support care.
  - Our aim should be to maintain acute services at both of our current major Acute hospitals.
  - Yes – Does that mean Sutton hospital site?  
No – Should have all services at existing sites.  
Yes – Sutton Hospital has good transportation but school could cause congestion. Only 2 bus routes.
  - Yes – but we fully support establishing an acute medical unit / specialist acute block. Both Epsom & St Helier to remain. The acute service would be best placed where the best access is.
  - It is not fit for purpose, it can't get enough staff.
- 2. Do you think we have made the case for a new specialist acute facility on one site?**
  - Yes / no
  - Some facilities are more updated – if you do this updating would the sites be more equal?
  - I am concerned that people will need to travel to Epsom.
  - No – Excellent services are currently provided at two sites, therefore the 'Not fit for purpose' basis at the case is invalid.

- Yes – Concentration of expertise is well worth the loss of slightly more local services. The Sutton site would be best only if the transport infrastructure were to be vastly improved.
- Yes – As long as it stays as specialist acute facility and is not diluted by using specialist staff and facilities for other uses and is fully staffed.
- Yes – probably on the Sutton site. Walkway between St Helier & Epsom.
- I think it should be maintained on both sites, I believe for one site with easy access from Sutton & Epsom, Specialist care is important.
- Yes – Clinical care priority, infrastructure / transport etc. can follow. It seems as sensible financial decision to focus on the provision of 1 specialist care unit providing the upgrading of facilities at St Helier / Epsom continues alongside.

**3. Do you think we should consider any other scenarios?**

- We prefer the acute facility to be based at St Helier.
- We wish to retain some of Epsom e.g. A&E, Urology.
- Properly fund Epsom & St Helier in respect of building maintenance, equipment, staffing and optimal placing of services within both hospitals.
- Invest in both hospitals and improve and repair them to make them fit for purpose. a cheaper option.
- Yes. What are the options / timescales to propose alternatives?
- Imaginative funding sources.
- Keep the hospitals working full strength improve as you go.
- Naturally it's the communities' lives we're concerned with.
- Care and care packages not covered. Lump sums to care homes.
- Surgeon asks to go to GP to find out care. GP says care package gone.
- Back to social care and back to hospitals.

**4. How would you like to be involved in these discussions in the future? 5. Is there anything else you would like to tell us?**

- We need to be kept up to date with proposals so we can influence the ideas.
- Need engage a wider group of people e.g. working people, young people.
- Publish the outcomes of these meetings so that a wider group of people can engage
- I will attend every meeting I can and seek to organise successful opposition to these life –threatening proposals. I want to be kept informed through public events and given the chance of input.
- Issue of transport.
- Updates on Epsom & St Helier website
- Clearer info on website.
- Stage by stage, options for joining Healthwatch. Involvement in care home. Option to present other proposals or scenarios to the board and other decision makers and consult other proposal with public s well.
- More information and proposals so we can follow up.

- Can we talk to the consultants (240 who wrote / co-signed the letter).
- How can we get to know about future info / discussions?
- Updates on progress.
- Encourage general public to attend / contribute.
- Could more information and engagement be done through GP surgeries and reach more patients, a diversity rather than the same old complaints.
- Queries if it were at St Helier where the specialist unit would be sited? If it were at Sutton can access be improved?