Councillor Ruth Dombey

London Borough of Sutton
Leader of the Council
Liberal Democrat Councillor for Sutton North Ward

Daniel Elkeles
Chief Executive
Epsom & St Helier University Hospitals NHS Trust

2 October 2017

Dear Daniel

Providing high-quality healthcare services 2020 to 2030

Thank you for the opportunity to comment on the above document. I am responding on behalf of the council from a policy perspective and this is in addition to the comments that you have received from the Council's Scrutiny Committee exercising their statutory role.

In relation to the five questions that you have set out in the document, I have the following comments to make. These comments should be read in the context of the Council's policy position which is contained in the Sutton Health Prospectus 2016 (https://www.sutton.gov.uk/healthprospectus).

Question 1

The Council generally agrees with the aim of retaining as much care as possible at the existing hospital sites. However, this should be seen in the context of our overall policy objective of keeping people as healthy as possible within the community (hence reducing the need for unnecessary hospital admissions) and intervening as early as possible. We believe that all health and care providers working closely together can have a positive impact on the health and wellbeing of our communities which will enable people to live fulfilling and happy lives and save the public purse significant money.

Working with our partners (including ESHT), we have been developing the Sutton Plan that aims to improve outcomes for residents by working together. We are also working together on Sutton Health and Care and it is pleasing that ESHT is proactively participating in delivering community based services that are better for residents.

Hence, it is essential that the services that are retained are right-sized in order to achieve further integration in community services that meet these objectives.
Question 2

The Council accepts that there is a strong clinical and financial case for the concentration of services for those people who are most ill. As indicated in the Sutton Health Prospectus, our policy position is that as much health and care services as possible must be delivered within the community and that good quality services provided by the NHS in partnership with the Council will enable the delivery of the proposed clinical strategy. This of course means that the clinical acute services that have to be provided in hospital must be the very highest quality and safety.

It should be noted that we expect the delivery of community health and care services before the implementation of any change to acute services as outlined in the engagement document and sufficient resources will need to be made available to enable this to happen. In addition, our expectation is that the proposed acute services must be delivered locally (i.e., within the borough boundary) and that hospital services will continue to be delivered from the St Helier site in Carshalton, whichever option is decided upon.

Question 3

The scenarios that have been provided are appropriate and cover all of the configurations that are possible if the clinical strategy is to be delivered. Options 2 and 6 would be totally unacceptable to the Council in failing to deliver the policy objectives of the council as outlined in the Sutton Health Prospectus.

Question 4

It is essential that the Council is involved at all stages of the progress of this work. It is imperative that the Council is involved and engaged in helping and assisting ESHT in developing future options for acute and community services. It is recognised that in the last eighteen months that there has been a closer working relationship between the Council and NHS colleagues, through the Sutton Plan and through reform of the Health and Wellbeing Board. The establishment of the Local Transformation Board, co-chaired by the Council is also very welcome in enabling us to work better together.

It should be noted that the Council fully understands and appreciates that public services are under enormous financial and demand pressures. This clearly needs to be addressed together, therefore by working together in an open and collaborative manner, we believe that we can attempt to both minimise the impacts of these pressures and work together to make the case for any necessary investment in the future. Therefore, Sutton Council would urge ESHT to engage and involve residents in the decisions about the future of their local health services as early as possible and we stand ready to assist in this. This is complementary to our statutory role through the Scrutiny Committee in relation to statutory engagement in health service changes.

Question 5

The Council and our partners, the Institute of Cancer Research and the Royal Marsden NHS Foundation Trust are working together on the development of the London Cancer Hub. This project is also supported by the Mayor of London. This will create a globally
significant centre for cancer research, diagnosis, treatment and care with the potential of creating 13,000 new jobs and £1.1Bn GVA to the UK economy.

We would welcome the continued close working of the ESHT in this project in order that together we create modern, world-class facilities for Sutton, London and beyond.

We would expect any proposals that emerge in due course to fully take these proposals into consideration in evaluating the best clinical option for the future.

If you have any queries, please do not hesitate to contact me or Niall Bolger, Chief Executive.

Yours sincerely

Cllr Ruth Dombey
Leader of the Council
Chair, Health and Wellbeing Board