This joint letter is signed by officers of many of Epsom & Ewell and neighbouring Residents’ Associations and others with a deep understanding of our local hospitals and communities.

Wouldn’t you like a new hospital? This is the question we are being asked by Epsom and St Helier University Hospitals NHS Trust. “We have some of the most committed staff in the NHS and they have to work (and care for patients) in probably the worst acute hospital buildings in London.”

Who could look at the state of the buildings without saying ‘Yes please’ to long-delayed investment of £300-400 million, one of the biggest NHS investment projects in the next decade? The Trust has issued a campaigning ‘Involvement document’ which they are carefully not calling ‘Consultation’. They urge us to say ‘Whether’ we need a new hospital but not ‘Where’?

What do we need?

The populations of Epsom and Ewell are growing and ageing. At some times we may need treatment in specialist hospitals further away but we can reasonably expect 95% of our health needs to be met properly, locally and in 21st century facilities. Although there are advances in tele-medicine and care at home, child birth and second tier rehabilitation treatment should also be accessible to us, to visits from our relatives and local to our home communities.

Whether we live on the borders of Sutton, Kingston, Ashtead or Banstead, Residents of Epsom & Ewell want to live no further than 30 minutes away from an ambulance reaching us and getting us to appropriate emergency treatment.

Successive generations of politicians and managers have delayed decisions so that the buildings are no longer ‘Fit for purpose’ in the ways being described in the press and in that document.

2,596 new houses in the past ten years exceed the Government’s targets of 1,810 but we don’t see the necessary investment in the essential infrastructure in communications, education and healthcare.

We do not believe that the best interests of our residents are being protected by the Trust, by the ‘Keep Our St Helier Hospital’ campaign, nor the ‘Cross-party’ group. Since the merger of the two hospitals, maintenance has been neglected, Epsom has been allowed to seriously deteriorate. Assets and services have been transferred to St Helier

Where do we need it?

Living outside London but inside the M25, we know transport and accessibility are key difficulties for many residents. The Trust has said it can invest in addressing these
problems but has so far failed to do so. Its document only mentions transport once: “Patients needing these [emergency surgery and trauma] services who come to Epsom A&E are transferred, generally by ambulance, to St Helier.”

Communications around the edge of London are complex and often slow and difficult. For example for some of us, St Georges Tooting or St Thomas’s Lambeth are quicker to reach than St Helier. For others of our Borough’s Residents St Helier is more accessible than Epsom Hospital.

Epsom should continue and be further developed and updated as a centre of excellence in a number of areas including A&E, maternity and orthopaedics. It has excellent connections as a transport hub for bus and rail services and has three nearby M25 junctions. Already central to the catchment of 500,000 residents and with large new housing projects and Crossrail 2 on the horizon, the Epsom site is well placed to serve the needs of the local community, North East Surrey and parts of South London.

The Trust is responsible for services being moved from Epsom to St Helier. Plans to sell land and assets from Epsom towards £80m to repair St Helier, were kept secret “How did you get that document ?”. The ‘Cross-party’ action group sometimes appears to favour delay and opposition rather than supporting positive proposals. Successive governments must be part of the problem, explaining in part why the hospital buildings we rely on are in such poor condition. In many ways the NHS is now self-determining leaving politicians free of responsibility.

We now feel the need to speak out impartially, addressing residents’ concerns. Without our diligence and energy, odds appear stacked in favour of facilities deteriorating further, of St Helier surviving and Epsom being sacrificed.

Signed 23rd August 2017

Brian Angus Chair Ewell Village RA; Andrew Ballard Chair Epsom Town RA; Jenny Coleman Chair Association of Ewell Downs Residents; Nigel Collin MA FCA, College Ward RA – responsible for planning appeals; Bess Harding MBE Fund raiser for Epsom Medical Equipment Fund; Lisa & Richard Harris, Colin Keane Chair Nonsuch RA, Joseph Lambert Chair Stamford Ward RA, Rozz Langendoen, Linda Lau Secretary Nonsuch RA former NHS nurse for 30 years, Chris Long Chair College Ward RA; Bob Mackison, Clarice Pell Committee Member West Ewell & Ruxley RA, Glynis Peterkin Chair Ashtead RA; Hugh Ricketts Chair Standing Committee of RAs, Ruth Sharma Secretary College Ward RA; Gill Smitheram Chair West Ewell & Ruxley RA; Sir Adrian E White CBE, DL, C.Sci. D.Univ.

Please send your comments or questions via Brian Angus to bangus@tiscali.co.uk or via the website www.ewellresidents.org.uk or the EVRA Facebook page

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