



OFFICER REPORT TO LOCAL COMMITTEE (EPSOM & EWELL)

LOCAL NHS HOSPITAL AND OTHER HEALTH SERVICES

15 September 2008

KEY ISSUE

The key issue is the arrangements for local NHS services. This covers the impact of any changes arising out of Surrey Primary Care Trust's *'Fit for the Future'* Programme as well as other change programmes currently being implemented by the acute hospital trust.

SUMMARY

This report summarises the position relating to local NHS hospital-based service changes, along with other topical issues linked to health care locally.

OFFICER RECOMMENDATIONS

The Local Committee (Epsom & Ewell) is asked to agree that:

- (i) it notes the current position concerning services at Epsom General Hospital and,
- (ii) it monitors developments in the future, seeking to secure the best outcome possible for services to the residents of Epsom & Ewell.

1 INTRODUCTION AND BACKGROUND

- 1.1 Epsom and St Helier University Hospitals NHS Trust is a large acute Trust serving South West London and Surrey. The Trust is responsible for two district general hospitals, Epsom General Hospital and St Helier Hospital, both offering a range of acute services, including 24-hour A&E.
- 1.2 The acute Trust provides services to the whole of the London Borough of Sutton and part of the London Borough of Merton, along with Surrey residents in the Boroughs/Districts of Epsom and Ewell, Reigate and Banstead, Elmbridge and Mole Valley.
- 1.3 Surrey Primary Care Trust (PCT) was formed on 1st October 2006, bringing together the five former PCTs within Surrey namely; North Surrey, East Elmbridge and Mid-Surrey, East Surrey, Surrey Heath and Woking and Guildford & Waverley PCTs. It serves a population of 1.2 million people and has around £1.3 billion to spend on local healthcare each year.
- 1.4 The functions of the PCT are:
 - Engaging with the local population to improve health and well-being
 - Commissioning a comprehensive and equitable range of high quality responsive and efficient services, within allocated resources
 - Directly providing high quality responsive and efficient services where this gives best value
- 1.5 In summary, Surrey PCT commissions acute services from the Epsom and St Helier University Hospitals NHS Trust, delivered predominantly to residents in this Borough on the Epsom General Hospital site.
- 1.6 The PCT commissions a range of other health services, including other specialist providers, community nursing and therapy services (from Central Surrey Health) and learning disability and mental health services (from Surrey & Borders Partnership NHS Foundation Trust). It also manages the primary care provision in the Borough delivered through GP surgeries and it operates the community hospitals.

2 ANALYSIS

- 2.1 The provision of services by the Epsom & St Helier University Hospitals NHS Trust (ESHUT) are routinely reviewed in order to reflect national policy drivers and local pressures concerning quality and safety, staffing and finance.
- 2.2 In the recent past there has been a change in the location of the delivery of some surgery. This was part of a *Safety and Sustainability Review*

and resulted all emergency surgery being provided on the St Helier site, whilst all planned surgery has been now been moved to Epsom.

- 2.3 The *Creating an NHS Fit for the Future (First steps for improving services in Surrey and Sussex)* programme was originally being driven by the NHS's perceived financial situation at the time, but this now shifted to provide a key aspect of the Primary Care Trust's strategic commissioning planning process.
- 2.4 There was some confusion of the manner in which the planning and public engagement on future services provided by the Epsom & St Helier Trust to Surrey residents would be handled. Whilst initially this was intended to be incorporated into the Darzi Review of London's acute hospital provision, this has now been incorporated into the *Fit for the Future* work under the *Assuring Access for Epsom and the Surrounding Area* programme.
- 2.5 Attached as an annexe is a summary of the current issues affecting both the acute trust and the PCT. This document is taken from a forthcoming report to the Borough Council's Health Liaison Panel, which meets on 17th September. It also includes some of the broader policy matters, included for general information.
- 2.6 The following issues will be of particular interest to the Members of this Committee:
 - 2.6.1 The future scope and configuration of services on the Epsom General Hospital site and the arrangements for public consultation and engagement on any proposed changes
 - 2.6.2 Arrangements for maternity and paediatric services in particular and any future threat to the current level of accident and emergency provision
 - 2.6.3 The operation of the Surrey LINKs to enable public input into the decision-making process (overseen by the County Council and including social care as well as health)
 - 2.6.4 In the future, the contract for the provision of community nursing and therapy services (currently held by Central Surrey Health)
- 2.7 A further annexe sets out the various NHS organisations that influence and have an interest in local health issues and the relationship between them.

3 HEALTH SCRUTINY ARRANGEMENTS

- 3.1 The overall statutory responsibility for scrutinising issues within the local NHS structures is given to Surrey County Council. The powers of overview and scrutiny of the NHS under the Local Government Act 2000 enable committees to review any matter relating to the planning,

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provision and operation of health services in the area of its local authority.

- 3.2 Surrey County Council discharges this function through its own Health Scrutiny Committee and via a number of joint health scrutiny arrangements where there are implications across administrative boundaries.
- 3.3 Each local NHS body has a duty to consult the local overview and scrutiny committee on any proposals it may have under consideration for any substantial development of the health service or on any proposal to make any substantial variation in the provision of service.
- 3.4 One particular aspect that will be examined by the scrutiny committee in relation to any proposed changes will be the duty conferred on NHS organisations to 'consult and involve' patients and the public.
- 3.5 Where an overview and scrutiny committee is not satisfied:
 - a) with the content of the consultation or that sufficient time has been allowed; or
 - b) that the reasons given for not carrying out consultation are inadequate;
 it may report the issue to the Secretary of State in writing.

4 CONSULTATIONS

- 4.1 The Borough Council's Health Liaison Panel receives updates at its formal meetings on local health topics from Surrey Primary Care Trust and other local NHS bodies or relevant organisations. This is in order to facilitate a better understanding of proposals and any decisions that have been made. It also enables the views of local residents to be expressed to the NHS and others in a public meeting.

5 FINANCIAL AND VALUE FOR MONEY IMPLICATIONS

- 5.1 Epsom & Ewell Borough Council have no financial involvement in regard to the Local NHS hospital and other health needs.

6 EQUALITIES AND DIVERSITY IMPLICATIONS

- 6.1 The involvement of public engagement ensures that the process is fair, and everyone has the same opportunity to engage.

7 CRIME AND DISORDER IMPLICATIONS

- 7.1 There are no crime and disorder implications to consider as part of this report.

8 CONCLUSION AND RECOMMENDATIONS

- 8.1 That the Local Committee notes the report, and monitors developments in the future.

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