



Better
healthcare
closer
to home

Have your say
on the future of local health services in
Sutton, Merton, East Elmbridge
and Mid-Surrey

Message from the medical directors of the local NHS



Dr Heather Patel, GP in Claygate, East Elmbridge and Mid-Surrey Primary Care Trust

“ As doctors, we talk to patients every day. They tell us they want better healthcare closer to home and that is what our new plans for providing health services are all about.

We urge everyone to get involved in the public debate that is now taking place. This debate is too important to be dramatised and sensationalised. Patients' needs must come first. We have to look at the facts and the evidence in order to form our views. We understand that some local people may be wary of any changes to the NHS that we all grew up with. However, we believe the current way we provide health services was designed in a time when medical care was much more limited. It is time to seize the moment and move the local NHS into the 21st Century.

New technology – improved techniques

We live in a time of great change and few areas are changing more rapidly than the NHS. Better drugs, more effective therapies, new technology and improved surgical techniques are all helping to improve people's quality of life and extend life expectancy. These changes are also reducing the amount of time people spend in hospital for routine treatments. The number of people being treated as day case patients is growing as techniques improve. For example, twenty years ago, if you had an operation to remove your gall bladder you would have been in hospital for around two weeks. Today, the same operation can be done with keyhole surgery in the morning and you can go home the same day.

Changing needs – working hours

Alongside these changes in technology, drugs and surgery, there are the changing health needs of local people. For example, in most parts of Britain, the number of people with smoking-related lung cancer is falling but the number of people who have asthma is rising. Advances in medicine and better standards of living are allowing many people to live longer.



Dr Martyn Wake, GP in Merton Park, Sutton and Merton Primary Care Trust



In addition, the European Working Time Directive now states the maximum number of hours that people can work in a week. This affects certain groups of staff within the NHS who have traditionally worked longer hours, including junior doctors. This means we need to change the way we work.

So how should we develop health services in light of these many changes?

By talking to the people who use health services, and the health professionals who see and treat patients every day.

Throughout 2003 and 2004, we have been working with our colleagues, GPs, hospital doctors, nurses and other health professionals in Merton, Sutton, East Elmbridge and Mid-Surrey, to develop a new model of healthcare, a new way of delivering the health services that local people need.

We want to see modern health services that are tailor made for the 21st Century, and give patients the best possible results for their health. We have developed a new way of working, or 'model of care', designed to achieve this, and we have called this new model.... *Better Healthcare Closer to Home*.

This summary document outlines some of the thinking behind *Better Healthcare Closer to Home*. //

Sutton and Merton Primary Care Trust and East Elmbridge and Mid-Surrey Primary Care Trust are consulting local people and would like your views on a new way forward.

Please take a few minutes to read this document and tell us what you think. It's your NHS. It's time to have your say.



Dr Lindy Steven, consultant anaesthetist, Epsom and St Helier University Hospitals NHS Trust

A new model of care

1. Whenever significant changes are proposed for health services, the NHS is required to carry out a public consultation exercise to seek the views of local people. The proposals contained in this summary document would alter the pattern of local health services in Sutton, Merton, East Elmbridge and Mid-Surrey by providing more, and better healthcare closer to where people live. They are subject to public consultation between September and November of 2004.



2. The proposals would involve:
 - more and better healthcare services in community settings, such as GP surgeries, clinics or direct into people's homes
 - a network of first-class local care hospitals providing many of the services that are currently delivered in St Helier Hospital and Epsom General Hospital
 - a new, purpose-built, state-of-the-art critical care hospital with specialist staff and specialist, hi-tech equipment for people who are seriously ill, for those who need emergency admission and for patients who need round-the-clock specialist care
3. This new model of care is all about:
 - promoting good health, rather than just treating illnesses
 - getting patients better more quickly
 - keeping patients fitter for longer
 - avoiding unnecessary hospital admissions
 - making sure, wherever possible, that people, especially older people, are able to live independently in their own homes

4. **How would it work?**

Bert has chronic bronchitis...

Bert is a 71-year-old smoker with chronic bronchitis. Every winter he is admitted to hospital several times with chest infections. Bert dislikes going in to hospital. He finds the experience frightening and very isolating. He has real problems getting anyone to look after his dog and worries about him not being cared for properly when he is in hospital.

Under the new plans, *Better Healthcare Closer to Home*, more healthcare would be delivered by health professionals direct to people's homes, avoiding the need for admission into hospitals like Epsom General or St Helier Hospital.

Bert would have frequent visits from a primary care nurse who he knows, trusts and takes advice from. The nurse would be able to spot the early signs of Bert's chest infections and prescribe him antibiotics before his condition worsened. This would mean Bert would not have to be admitted to hospital every winter.



5. The vision for *Better Healthcare Closer to Home* was published for comment in November 2002 as a paper entitled 'A Better Future for Your Local Health Service'. This was warmly received, and as a result, the new model of care was tested against three other options. The options compared were:
 - option one:** care would continue to be provided in much the same way as it is now, with the minimum amount done to develop services further
 - option two:** services would be provided in primary care settings supported by two district general hospitals
 - option three:** services would be provided in primary care settings with a general hospital on one site and an elective (planned) care centre on another
 - option four:** more healthcare in community settings such as GP surgeries and direct into people's homes, plus a network of local care hospitals supported by a single critical care hospital (This is the model now proposed - *Better Healthcare Closer to Home*)
6. In June 2003, a panel of local people assessed these various options. The panel consisted of members of the public and their advocates, local authority representatives, doctors and healthcare professionals.
7. The panel assessed the various options against a number of criteria including:
 - which option offered the highest quality patient services
 - which delivered care close to home
 - which offered the shortest possible waiting time for diagnosis and treatment
 - which had the flexibility to adapt to changes in healthcare
8. The panel decided that options one and two were clearly the weakest in every respect, scoring lower than options three and four against every criterion. It was also felt that options one and two carried the risk of escalating costs without real benefits for patients.
9. Option three offers the kind of approach that some other trusts have adopted around the country, but the panel felt that option four, the *Better Healthcare Closer to Home* option, was preferable because it brought more care closer to where people live.

Local care hospitals

Key services

10. The proposed model of care involves a network of local care hospitals supported by a new, purpose-built critical care hospital. So what sort of care would typically be delivered in a local care hospital?
11. People with long-term illnesses, such as diabetes or heart disease – who need to make frequent trips to see different health professionals at Epsom General Hospital or St Helier Hospital – would be able to attend a one-stop clinic at their local care hospital for all their tests and treatment.
12. In local care hospitals, there would typically be screening services, outpatient clinics and diagnostic services such as x-ray facilities. 80% of patients who currently attend Epsom General Hospital or St Helier Hospital for an outpatient appointment to see a specialist doctor, would be seen in such clinics in local care hospitals.
13. Some local care hospitals would also carry out day surgery, have NHS dentistry, district nursing and an urgent treatment centre for relatively minor injuries and illnesses. About 80% of day surgery patients, those who have surgery or other treatment that does not require an overnight stay in hospital, would be treated in local care hospitals. In addition, about 45% of minor cases currently seen in A&E would be seen in urgent treatment centres at local care hospitals. These urgent treatment centres would have a seven-days-a-week minor injuries/illness service open all day and evenings with links to NHS Direct.
14. In Sutton and Merton we propose to provide 90 beds for intermediate care – 60 at Carshalton War Memorial Hospital and 30 beds at a local care hospital in the Mitcham area. Up to 70 patients would be intensively supported in their own homes by teams of nurses and therapists. In East Elmbridge and Mid-Surrey we propose to provide 120 beds for intermediate care in the five proposed local care hospitals, as well as some provision from the independent sector.



15. **How would it work?****Johnny has hurt his ankle...**

It's 6pm on a Tuesday evening. Kate's 12-year-old son Johnny has hurt his ankle by tripping up in the school playground. He has gone home in pain and his ankle is red and swollen. Kate phones her local GP surgery to ask for advice and is told that, although they would like to help her son, they do not have an x-ray machine, crutches or a specialist nurse to see him.

So Kate, who has two younger children as well, takes the whole family to the A&E department of either Epsom General or St Helier Hospital. She waits with Johnny for three hours until he can be assessed and x-rayed. He has sprained his ankle and needs to have it bandaged and use crutches. By the time, they all get home it is nearly 11pm and the children are tired and irritable.

Under the new plans, *Better Healthcare Closer to Home*, Johnny would be able to go to the urgent treatment centre at a local care hospital, be seen by a health professional, be x-rayed, bandaged and given crutches more quickly. He would not have to travel to a large hospital's A&E department. He would be seen more quickly, get the best medical care and be home in time for bed.

Location of local care hospitals in Sutton and Merton

16. The proposal is to build five brand new local care hospitals in Sutton and Merton – two in Merton and three in Sutton. Much work has already been done to identify the best locations for the local care hospitals based on centres of population, access issues, and patients' needs. However, a full benefits appraisal exercise would need to be carried out (following the current consultation exercise and bearing in mind the outcome of that exercise) before any final decisions are made.
17. Possible sites include:

Borough	Geographical area chosen	Possible sites
Merton	Mitcham town centre	Wilson Hospital site
	Wimbledon town centre	Nelson Hospital site
Sutton	St Helier	St Helier Hospital site
	Belmont/South Sutton	No site yet identified
	Wallington town centre	No site yet identified

Location of local care hospitals in East Elmbridge and Mid-Surrey

18. East Elmbridge and Mid-Surrey has a rich inheritance of much loved community hospitals. We plan to increase the use of four of these hospitals and to develop them into local care hospitals:

Local care hospital	Main area served
Leatherhead	northern part of Mole Valley District Council
Cobham	eastern part of Borough of Elmbridge
Dorking	southern part of Mole Valley District Council
Molesey	eastern part of Borough of Elmbridge
Epsom/Ewell	Epsom and Ewell

19. The fifth local care hospital would need to serve the Epsom/Ewell area. Its location will be determined after public consultation, depending on the location of the critical care hospital.

The Emberbrook Care Centre

20. East Elmbridge and Mid-Surrey PCT has a contract for four beds at a private nursing home called the Emberbrook Care Centre in Thames Ditton. The cost of maintaining these beds is high, at over £120,000 each year. We believe that better quality care could be provided more economically by using spare capacity in our community hospitals. We have given notice on this contract and it is proposed that local people needing inpatient rehabilitation, instead go to Molesey Community Hospital or one of our other four community hospitals. The Overview and Scrutiny Committee of Surrey County Council has suggested that this issue be included as part of the wider consultation around *Better Healthcare Closer to Home*. If you are a Surrey resident wishing to comment on these proposals, East Elmbridge and Mid-Surrey PCT would be interested in your views.



Critical care hospital

Key services

21. The new critical care hospital would be a purpose-built, brand new hospital staffed with healthcare specialists and equipped with the latest technology. It would treat people who are seriously ill, patients who need emergency admission and those who need round-the-clock specialist care.
22. The critical care hospital would have a 24-hour A&E, intensive care facilities, maternity services, renal dialysis, children's services and advanced diagnostic imaging. It would carry out emergency work, complex surgery that could not be carried out on a day case basis and it would deal with the most complex outpatient clinics.
23. This would be better for patients, who would have these critical care services provided in modern, well-maintained facilities, designed for 21st Century healthcare. All our specialist health professionals and new high-tech equipment would be concentrated on one site, so patients would have access to the very best treatment and advice. This would mean better treatment, quicker recovery and reduced waiting times. And because we would have many more single rooms in the critical care hospital, it would mean more privacy and dignity for patients and better control of infections. The critical care hospital would gain a reputation as a centre of excellence and this would help us recruit the best staff.
24. The critical care hospital would also provide both midwifery-led and obstetrician-led maternity services in facilities located side by side. Mothers who choose a midwife-led delivery would be able to transfer immediately to the obstetrician-led facility if their labour developed unforeseen complications requiring obstetric intervention.
25. One option that we would welcome comments on, is whether or not to establish in addition, an independent birthing centre for mothers who prefer to have their baby in a non-hospital setting. This could be located at one of the local care hospitals or it could be a separate stand-alone facility. Services would be midwifery-led, working to a model similar to that provided in a home delivery.



26. How would the critical care hospital work?

Peter has had a heart attack...

Peter comes home from work late one night and falls to the floor in the kitchen with severe chest pain. His wife calls 999 and the ambulance takes him to A&E at either Epsom General or St Helier Hospital. He has some tests and an ECG.

The doctor tells Peter he has had a heart attack and he needs a test called an angiogram, a special type of x-ray to examine the blood vessels in his heart to find out if there is a blockage. If he has a blockage, Peter will need a procedure called angioplasty, where a small balloon is put into the artery to clear the blockage. Neither Epsom General nor St Helier Hospital has the technology to carry out this procedure so Peter is stabilised with clot-busting drugs, admitted to a ward and then transferred to another hospital that does have this specialist technology, in the next day or so.

Under the new plans, *Better Healthcare Closer to Home*, Peter would be taken directly to the new critical care hospital. Here, he would be seen and treated in much the same way, but the critical care hospital would have a range of hi-tech specialist equipment, including that required to give Peter his angiogram test and angioplasty procedure on the same night, and avoid the need for Peter to be transferred to another hospital.

Location of the critical care hospital

27. The Trust Boards of Sutton and Merton Primary Care Trust and East Elmbridge and Mid-Surrey Primary Care Trust will make the decision on where the critical care hospital should be located early in 2005.
28. There are five main sites being considered for the location of the critical care hospital:

Option	Site
1	Epsom Hospital site plus the nearby playing fields
2	West Park Hospital site, Epsom
3	Sutton Hospital site plus land from the Royal Marsden Hospital
4	The open land opposite St Helier Hospital
5	Priest Hill, Ewell

29. A panel of patients' representatives and NHS professionals – including local doctors – has assessed the five options against a number of criteria. Members of the Joint Overview and Scrutiny Committee of local councils observed the panel meeting to ensure fairness and balance.
30. The panel explored which site would be best for delivering 21st Century healthcare and looked at key questions including:
- how easy would it be for ambulances, patients and visitors to get to the site?
 - how easy would it be to get planning permission?
 - how long it would take to build?
 - what disruption would there be in the surrounding area?
 - which site would be best for recruiting staff?
31. The panel assessed the various sites as follows:

Option	Site	Score (total out of a possible 10)
1	Epsom Hospital site plus the nearby playing fields	4.44
2	West Park Hospital site	5.68
3	Sutton Hospital site plus land from the Royal Marsden Hospital	5.80
4	The open land opposite St Helier Hospital	6.22
5	Priest Hill	6.11

32. The scores of four of these options are close. They are based on our current view of issues such as planning permission and disruption, and could change if we get new information. We are not putting forward a preferred option, and we are interested in your views.
33. If you would like more information on how the panel scored each of the various options, please visit our website (www.betterhealthcare.org.uk) to read the full consultation document or access the relevant working papers. Please see the page opposite for details of how to get a printed version of the full consultation document.

Expressing your views

34. The consultation programme provides an opportunity to find out more about the *Better Healthcare Closer to Home* proposals. It is also your opportunity to debate the issues and express your views. Your opinion will help us make decisions, in early 2005, about the future of local health services.
35. The programme of consultation will run from early September until the end of November 2004, and will include a number of public events. These events have been designed to give all groups in the local community the opportunity to put their views forward and to allow consultation activities to take place in your neighbourhood.
36. No decisions will be taken until the views expressed during the consultation period have been fully considered.
37. We will be using a wide range of methods to make information available and to gather the views of local people, including questionnaires, public 'Question Time' events, public meetings, videos, public 'drop-in' events and town centre roadshows.
38. We will also be using focus groups, full-day citizens' panel meetings and we are inviting members of the public to join our online, virtual health panel. You can become a member of the virtual health panel by registering through the Better Healthcare Closer to Home website at www.betterhealthcare.org.uk
39. We hope that having read this summary, you will wish to comment on its contents. There are many ways in which you can express your views. You can:
- complete the questionnaire and return it to **Better Healthcare Closer to Home, FREEPOST NAT21094, Sutton SM2 5BR** (no stamp is required).
 - telephone us on **020 8296 4729**
 - email your views to **yourviews@betterhealthcare.org.uk**
 - write to us at **Better Healthcare Closer to Home, FREEPOST NAT21094, Sutton SM2 5BR** (no stamp is required).
- Your views must reach us by 30 November 2004**
- For more information**
40. More information is available on our interactive website (www.betterhealthcare.org.uk) and in the full consultation document available from Better Healthcare Closer to Home, FREEPOST NAT21094, Sutton SM2 5BR (no stamp is required), or call 020 8296 4729 and we will send you a copy.
41. Because this is a summary document, it does not contain the detail that is in the full consultation document. The full consultation document and this summary document, are also available in Braille, on audio-cassette, in large print or in other languages by request, please contact us by phone, letter or email as shown above.

Public meetings and events

Come and talk to us at any of the public meetings where this programme will be discussed:

Organisation	Event	Time	Date	Venue
Sutton and Merton PCT	Public drop-in	10am–2pm	6 September 2004	St Marks Family Centre, Mitcham
Sutton and Merton PCT	Public drop-in	3pm–7pm	6 September 2004	Mitcham Library
East Elmbridge and Mid-Surrey PCT	Public drop-in	10am–5pm	7 September 2004	Denbies Wine Centre, London Rd Dorking
Sutton and Merton PCT	Public drop-in	10am–2pm	9 September 2004	Pollards Hill Residents Shop, Pollards Hill
Sutton and Merton PCT	Public drop-in	3pm–7pm	9 September 2004	South Mitcham Community Centre, Mitcham
East Elmbridge and Mid-Surrey PCT	Public drop-in	10am–5pm	10 September 2004	The Banstead Centre, The Horseshoe, Banstead
East Elmbridge and Mid-Surrey PCT	Public drop-in	10am–6pm	14 September 2004	Dorking Halls, Dorking
Sutton and Merton PCT	Public drop-in	10am–2pm	15 September 2004	Bedzed, Hackbridge
Sutton and Merton PCT	Public drop-in	3pm–7pm	15 September 2004	The Conference Room (Pink Room), St Helier Hospital
Sutton and Merton PCT	Public drop-in	11.30am – 1.30pm	16 September 2004	Sutton Mental Health Drop-in Centre, Belmont
East Elmbridge and Mid-Surrey PCT	Public drop-in	10am–5pm	17 September 2004	Elmbridge Civic Centre
Sutton and Merton PCT	Public drop-in	10am–2pm	20 September 2004	Merton Civic Centre
East Elmbridge and Mid-Surrey PCT	Public drop-in	10am–6pm	21 September 2004	Kings Christian Centre, Coppard Gardens, Chessington
East Elmbridge and Mid-Surrey PCT	Public drop in	10am–5pm	24 September 2004	Ebbisham Centre, Derby Square, Epsom
Sutton and Merton PCT	Town Centre road show	11am–4pm	25 September 2004	Central Wimbledon (next to Safeway)
Sutton and Merton PCT	Public drop-in	10am–2pm	27 September 2004	Mobility Centre, Orchard Hill
Sutton and Merton PCT	Public drop-in	3pm–7pm	27 September 2004	Trinity Church Centre, Wallington
East Elmbridge and Mid-Surrey PCT	Public drop-in	10am–5.30pm	28 September 2004	Worcester Park Library, Windsor Road, Worcester Park
Sutton and Merton PCT	Public drop-in	10am–2pm	29 September 2004	Cheam Baptist Church, North Cheam
Sutton and Merton PCT	Town Centre road show	11am–4pm	2 October 2004	The Town Square (next to Waterstones), Sutton
East Elmbridge and Mid-Surrey PCT	Town Centre road show	3pm–5.30pm	9 October 2004	The Ashley Centre, Epsom
Sutton and Merton PCT	Question Time	7.30pm	5 November 2004	Drake House, Wimbledon
East Elmbridge and Mid-Surrey PCT	Question Time	7.30pm	11 November 2004	St Joseph's Church Hall, St Margaret's Drive, Epsom
Sutton and Merton PCT	Question Time	7.30pm	16 November 2004	Wallington Hall, Stafford Road Wallington

For details of other public consultation events, please visit our website www.betterhealthcare.org.uk or call 020 8251 0532.

Public consultation questionnaire

On completion please remove this questionnaire from this summary document and post it to the address below **by 30 November 2004**

Better Healthcare Closer to Home, FREEPOST NAT21094, Sutton SM2 5BR (no stamp is required).

QUESTION 1

This summary describes a number of different 'models of care' and explains why the NHS locally considers that the model involving a network of local care hospitals supported by a single critical care hospital is the most appropriate model for Sutton, Merton and Mid-Surrey. Do you agree that the model of care being proposed is the right one for this area?
Yes No Don't know

If no, what model of care would you prefer?
Please explain below:

QUESTION 2

This summary explains about proposals for a network of local care hospitals:

a) For Sutton and Merton:

Do you agree with the range of services we propose to provide from local care hospitals in Sutton and Merton?
Yes No Don't know

Please put any additional comments below:

b) For East Elmbridge and Mid-Surrey:

Do you agree with the range of services we propose to provide from local care hospitals in East Elmbridge and Mid-Surrey?
Yes No Don't know

Please put any additional comments below:

QUESTION 3

This summary also explains about proposals for the locations of the local care hospitals:

a) For Sutton and Merton:

Do you agree with the proposed locations for the local care hospitals in Sutton and Merton?
Yes No Don't know

Please put any additional comments below:

b) For East Elmbridge and Mid-Surrey:

Do you agree with the proposed locations for the local care hospitals in East Elmbridge and Mid-Surrey?
Yes No Don't know

Please put any additional comments below:

QUESTION 4

For East Elmbridge and Mid-Surrey:

Do you agree with the proposal that the East Elmbridge and Mid-Surrey PCT should cease to maintain beds in Emberbrook Care Centre and should deliver intermediate care services from community hospitals?
Yes No Don't know

Please put any additional comments below:

QUESTION 5

This summary raises the issue of a Birthing Centre. What is your view on whether or not there should be a Birthing Centre?

QUESTION 6

This summary explains details about the proposed services to be included in the critical care hospital. Do you agree with the services we are planning to provide in the critical care hospital?

Yes No Don't know

Please put any additional comments below:

QUESTION 7

This summary proposes five site locations for the critical care hospital. What do you think are the important considerations when choosing the site for the critical care hospital?

QUESTION 8

And with those in mind, where do you think is the best site for the critical care hospital?

- Epsom General Hospital site
- Priest Hill site
- Open Land opposite St Helier
- Sutton Hospital site
- West Park Hospital site
- Don't know

Another site? Please explain below:

QUESTION 9

Do you have any other views on the options and proposals contained in this summary consultation document?

Thank you for taking the time to complete this questionnaire.

So we can analyse the responses, please tick to show whether you are

- A resident of London Borough of Merton
- A resident of London Borough of Sutton
- A resident of Surrey

Please can you also provide your name and address

Are you a member of staff?

Yes No

If staff, where are you based?

Please note: We promise to read all responses. A summary of all responses received up to the end of November 2004 will be published; and the full set of responses will be filed and available for public inspection. We do not however, plan to acknowledge receipt of these slips individually.

If you would like to go on our mailing list for regular updates on *Better Healthcare Closer to Home*, please tick the box.

If you would prefer to receive this electronically, please provide your email address:

Are you content with the consultation process?

If you have a complaint about the conduct of the consultation process, you should write to the complaints manager of either Sutton and Merton PCT or East Elmbridge and Mid-Surrey PCT as appropriate.