

Dear Stakeholder Reference Group member,

Today, Wednesday, 26<sup>th</sup> of June 2019, the Improving Healthcare Together programme team has published two reports on its website, the [draft interim Integrated Impact Assessment](#) and the [Clinical Senate reports](#). Both reports including our statements and summaries can be found on the Improving Healthcare Together website.

### **Integrated Impact Assessment (IIA)**

The IIA is a continuous process which is not completed until the feedback from a formal public consultation has been received.

The IIA highlights that patients can expect to see better outcomes for their health with the new clinical model, and a better patient experience, with clearer more joined up services working more effectively. The new model will improve service delivery and mean the Epsom and St Helier Trust can provide better, more efficient services for future generations to come. The work also shows that the district hospital model can play an important role in addressing health inequalities with a proactive focus on well-being and prevention. For example, by providing virtual outpatient clinics which support people with long term conditions by improving their access to healthcare. The delivery of major acute services on a single site will have an impact on access to acute services for visitors and patients, depending on the mode of transport taken. The extent of this impact will vary.

This interim report will be further updated in light of the feedback from any additional relevant information and after a public consultation. The third and final phase of the IIA is completed after a public consultation and is published prior to any decision making by the CCGs.

### **Clinical Senates Report**

We are grateful to the independent Clinical Senates of London and the South East which have reviewed our clinical model. They have provided a report which our Clinical Advisory Group is using to help to further develop our thinking and shape our clinical model going forward.

The three key challenges facing Epsom and St Helier hospitals are workforce, estate and financial sustainability. We want to reiterate that the clinical model we are proposing will mean we keep as much care locally as possible at both St Helier and Epsom Hospitals. For the acutely ill or those people at risk of being acutely unwell the Senates stated clearly that there are significant benefits to bringing together the six acute hospital services into a new purpose built facility located on one of the three hospital sites. As any new proposed acute facility will not open its doors until at least 2025 we will continue to develop our clinical model between now and then.

The programme team are continuing to seek views as this work develops and the ambition remains to hold a public consultation on any proposed changes later this year. We cannot hold any public consultation until we have funding agreed in principle by our regulators. We would be happy to discuss these reports at one of our meetings this year, so please get in touch if you have any questions.

Kind regards,

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