



Sutton & Cheam Constituency Labour Party

Harold Wilson Hall, 111c Stayton Road, Sutton, SM1 2PS

Secretary: Bonnie Craven

Chair: Charlie Mansell

Treasurer: Kathy Allen

Daniel Elkeles
Chief Executive
Epsom and St Helier Hospital Trust
St Helier Hospital
Wrythe Lane
Carshalton
Surrey, SM5 1AA

19 March 2018

Dear Daniel,

An Open Letter urgently requesting an explanation from the Epsom and St Helier Trust as to why your estate agent Savill's made a request to the Planning Inspector to re-designate part of St Helier Hospital for housing

I am writing as Chair of Sutton and Cheam Labour Party to express the deepest concern that in a letter dated 11 August 2017 (see pdf of letter attached) to the Planning Inspector about the Sutton Local Plan from the estate Agent Savills, acting "On behalf of Epsom and St Helier University Hospitals NHS Trust" requested a change to the Plan. In the letter your Trust seeks re-designation of part of the St Helier site in the Local Plan for housing. It says:

"As set out in our representation the plan covers a long period up until 2031 and it is possible that some of the buildings on this site may become surplus to requirements over this time and become vacant. In the event of this and if there are no other viable health uses for the relevant building(s), other uses such as residential should not be precluded. The policy wording should make reference to the consideration of residential and other uses should any parts of the site become surplus to requirements over the plan period. This will ensure that the plan remains flexible and able to adapt to changing circumstances and that it is therefore justified and effective over the plan period, in accordance with the NPPF."

My Constituency Labour Party had, as part of the Local Plan consultation, in early 2017 put in a supporting statement in favour of the existing long-standing Council Local Plan policy of keeping the whole St Helier site for health purposes and we note that Council Officers had in their explanation to the Planning Inspector sceptically said the following which you quote in your letter:

"The council considers that the need for flexibility could be said of any hospital. Unfortunately, the health authorities have no strategic plans for hospitals and when they do, these plans seem to change with considerable frequency. The council considers the most prudent approach is to allocate the site for health and, if circumstances arise where a change of use is required, this is considered at the time and not on some vague forecasting of the future, which experience has taught us, is always likely to change."



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In quoting the section above I should add it is also worrying that the Council implies a future change of site designation options which is not immediately rejected out of hand and imply a future amendment to the Local Plan could be considered. However, since the Inspector has agreed this time to keep the current health designation, holding the Council to account for being rather too flexible here is probably the second stage of addressing this issue after your Trust has been fully held to account for your own recent actions set out in your August letter.

However, more importantly at this stage, in the attached letter from Savill's on 11 August 2017 you further stated in response to the Council's position:

"We disagree with this and remain of the view that it is appropriate for the Local Plan to address this point now. If parts of the site become available over the plan period residential and other uses, as appropriate, should be considered. This will ensure that the plan is effective and flexible to adapt to changing circumstances. Otherwise a situation could arise where there is no clarity about the situation and the Trust may be unable to respond to changing circumstances."

Furthermore, your letter makes it clear you have a good idea what you want to see in response to the understandable scepticism of Council Officers, saying:

"For the record, it is also worth highlighting that contrary to the Council's comments the NHS does take a strategic views of healthcare. The SW Sustainability and Transformational Partnership (STP) is in place to do exactly that. As part of this plans for future healthcare delivery are being prepared throughout the Country by all STPs, and through these there will inevitably be changes. These changes will mean that some healthcare sites will have to implement changes to deliver the planned outcomes"

This latter point is very important as it means you clearly believe you know exactly what you are doing. As result you really do need to tell us the full, currently secret, long-term agenda you have for our local hospital, which seems to involve land disposal?

Notwithstanding the eventual rejection to your request by the Inspector recently, your Trust's actions raise extremely serious issues about the judgment of you and your Trust Board for the following reasons:

- a) You have made it clear that whatever the outcome of your Strategic Outline Case St Helier is "safe" as a hospital, yet you envisage the possibility of parts of the site becoming vacant and being made available for housing, yet have never, ever told the public or local media this.
- b) You have got some MP's locally (specifically Paul Scully and Tom Brake) to sign up to your direction of travel to change and even hold meetings to consult for you, but do you think they would still be supporting your plan if, at the same time that they were putting supportive things in their political leaflets and



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asking for public views, your Trust was clearly undermining their supposedly reassuring message that there was nothing to worry about the St Helier site, with your declared wish for a land disposal option. You therefore need to explain whether they were told about this part of your plan and no doubt they will also both wish to tell us all how much they knew of this?

- c) As you know full well, the NHS, unlike many hospitals, does not own the freehold of the St Helier site, which belongs to the London Borough of Sutton. The freehold arrangement makes it specifically clear the hospital has been leased since the 1930's for the specific purpose of providing a hospital for local people. Thus a request for planning re-designation does not just stand on its own. It would further require you to seek either a change to the terms of the lease or a proposal to purchase the freehold, so in view of your claim of a strategy, your employment of an estate agent and Savill's letter is clearly indicative of some thought being put into a disposal programme for part of the site.

I therefore must ask you to respond to the following questions, put forward in the public interest so the general public, patients, your staff, health campaigners, Healthwatch, the local media, Councillors and MP's are all fully aware of your real plans for St Helier Hospital.

1. Will you put all the letters your Trust has had with the Planning Inspectorate in to the public domain so we can see your entire case for reducing health provision at St Helier Hospital?
2. Since you have a long-term strategy above that you have not told us all about, can you tell us how much of St Helier Hospital site you actually wish to dispose, and set out on the plan of the site which geographical areas will be sold?
3. What sort of contractual arrangement do you have with estate agents' Savill's and how much have they been paid for this work on your behalf?
4. How long has Savill's been working on this project for you and what are they being employed to do for you?
5. Has the Trust Board been consulted with and discussed:
 - a) The use of Savill's for this project engaging with the Planning Inspector?
 - b) How much land it is prepared to dispose of at St Helier?
6. When, if ever, did you brief the two Sutton local MP's, who were recently promoting your public acute services proposals, on this additional 'land disposal' element to your plans and, if so, when and, if not, why not?
7. What type of housing would you envisage for the St Helier site? Would it include homes for sale, thus making this a very clear privatisation of public NHS land?
8. In view of your confidence that you have a detailed strategy for the long-term future of the site, is your intention to ask Sutton Council to sell the freehold or amend the terms of the lease?



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9. In view of the more complex freehold and leasehold relationship with the Council you have on top of a simple planning relationship compared to most NHS Trusts, do you envisage this land disposal being a partnership proposal with the Council where a share of the capital receipt is split between the Council and the Trust? Will you set out the detail of any initial negotiations you are having with the Council over this sort of approach?
10. In view of what you have requested for St Helier above can you set out whether you have similar re-designation to housing plans for part of the Epsom Hospital site and have you made similar requests to Planning Staff at Surrey County Council and Epsom Borough Council or to any Planning Inspectors covering Local Plans there and will you also put such documentation in the public domain too? In addition, if you have any future plans to do so, will you detail this too?

I look forward to your detailed response. However, what the above questions also seriously signify is there is now a complete breakdown of trust between your Hospital Trust telling us all that “existing sites are safe” and your actual behaviour as set out in the attached letter from Savill’s. What makes this a deceit to the public of the highest level is that whilst you were engaging with the local community in many public meetings last year and getting some local MP’s to strongly promote your plans, you were at exactly the same time seeking to put in place a strategy to seek to dispose part of the St Helier site for housing that based on everyone’s knowledge of the London housing market almost certainly would have meant houses for sale.

I would imagine not only the public, who took part in your engagement, will feel very betrayed but a number of elected representatives who spent months promoting your plan may also now tell us they feel betrayed too. In view of this I believe that as well as now finally setting out honestly what you really want to do with the St Helier site you should further be taking this issue, which is a massive breach of trust, to your Trust Board at a session open to the public so they can consider whether all of you have behaved as openly and honestly as you have claimed during your engagement programme.

Because the public were clearly not fully informed of these extra plans of yours, this also calls into question the accuracy of your public engagement. No doubt others will wish to follow this point up in various places, but in view of this new information my experience of the advice of the Consultation Institute – who are the official body often used to certify the veracity of any ‘pre-consultation’ process - would be you should really fully consult with the public again so that the public can respond in the light of this new information about your real plans for the St Helier site.



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Whilst the Planning Inspector rejected your future proposal at present (despite the Council indicating it too was keeping its options open for the future), the fundamental trust issue here is not 'what can you actually do at present', but 'what do you really want to do in future'. In an increasingly low-trust world the fact your Trust has been conducting a twin-track strategy of "hospital is safe" plus "please can we dispose of some land for housing" is quite simply going to lead to massive distrust of anything you or your Board ever say in future. In addition the fact you employed Savill's the estate agent (presumably for a fee) to write the letter will give the public the strong impression you are already 'measuring up' the St Helier site for which bits you can sell off for no doubt expensive flats in tall blocks on a site with 'amazing penthouse views of South London' that the old London Planning Advisory Committee identified in the 1990's as one of the top 20 most visible landmarks in London!

In view of the fact that your Trust claims it is very clearly thinking through its plans and has made it clear to the Council in the letter it has a long-term plan means it is now incumbent on you to set out not just what your real detailed preferred option (ie the exact outcome you and your Trust Board really wants to see at this point in time recognising national political changes might change that, but you nevertheless admit you have such a plan already) and how this will develop right up until 2031. It is clear that if it is envisaged you would be prepared to sell part of St Helier, then the public is likely to see that the A&E, Maternity and Children's Services would be areas that would certainly be going to a small site next to the Royal Marsden or perhaps even worse are absorbed into St George's Hospital.

Because this is a very serious issue and very clearly in the public interest, I have copied this open letter to the local media, local health campaigners, Healthwatch, local MP's and senior Councillors in Sutton, Epsom and Merton. I am sure they, like me, will be very interested in a detailed public response by your Trust to this letter answering my questions and setting out what actions you and your Trust Board must do to urgently restore public trust in your organisation.

Yours sincerely,

Charlie Mansell

Chair of Sutton and Cheam Labour Party

Former Councillor for St Helier South and St Helier electoral wards covering the St Helier Hospital site - 1986-2006