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Ms Gillian Martin MSP Convener Health, Social Care and Sport Committee

By email: <u>HSCS.committee@parliament.scot</u>

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Dear Convener

I am writing to inform you and Committee Members about the publication of the "Report of the Primary Care Health Inequalities Short-Life Working Group" and the "Chance to Change Scotland" report. The reports are available at: https://www.gov.scot/isbn/9781804351642 and https://www.gov.scot/isbn/9781804351338

As I am sure you will agree, our shared commitment to tackling and mitigating Health Inequalities in Scotland has become ever more pressing as a result of the Covid-19 pandemic. A Short Life Working Group (SLWG) was established in October 2020 in recognition of the key role of Primary Care in relation to inequalities and to consider how we can maximise its contribution. The purpose of the group was not to conduct an academic or systematic review of the literature but to draw on the expertise of a wide range of stakeholders with extensive experience in this field. The group has also worked closely with an expert reference group of people who have lived experience of suffering the impact of health inequality first hand. I would encourage Committee Members to read this report, which offers frank and valuable insights to guide us all.

The SLWG's remit was to identify service improvements and actions specifically for Primary Care to help reduce health inequalities and improve health equity. The recommendations and clear actions identified by the group have the potential to be truly transformative and will maximise primary care's unique potential in the patient journey to deliver meaningful improvements in health outcomes. The recommendations include actions to improve equalities data in general practice, strengthening the focus of inequalities through the GP contract and a new Enhanced Service for the first time focussed on activating practices' full potential to proactively support vulnerable people at risk of poor health outcomes.

Many of the recommendations support the Scottish Government's existing approach to supporting our citizens, for example the roll out of Community Links Workers and Financial Inclusion Advisers within general practice. Others will offer ambitious new approaches which could have meaningful impact on reducing health inequalities, tackling child poverty and supporting our most vulnerable citizens. As a whole, the recommendations of the SLWG will support patients experiencing multiple and intersecting socio-economic inequalities through clinical and psychosocial measures to directly improve their health and wellbeing outcomes which is worst affected in areas of deprivation. We will strive to improve equity of access, patient experience, health literacy, and ability to work. Effective implementation of the recommendations will provide appropriate support and continuity of care in the right setting and tackle upstream issues, reducing the later burden on other parts of healthcare system. These approaches will build additional capacity for multi-agency care planning, inter-

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disciplinary team working, and co-production of health with individuals and at a community level to support wellbeing and employability.

I will now undertake detailed consideration of the recommendations and implementation options, and will be happy to write to you again with an update on this work, if you would find that helpful.

I understand the Health and Sport Committee are undertaking an inquiry into health inequalities in Scotland. I look forward to learning more about the Committee's approach to the inquiry in due course and consider next to the SLWG's outcomes.

I am grateful for your interest in, and broad support for, the Scottish Government's work to date on Health Inequalities.

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