Health, Social Care and Sport Committee 3rd Meeting, 2021 (Session 6), Tuesday, 7 September 2021

Session 6 priorities

Introduction

1. At its meeting today the Health, Social Care and Sport Committee will take evidence from the Cabinet Secretary for Health and Social Care on his priorities for Session 6.

Background

- 2. At its first meeting on 22 June 2021, the Committee discussed its future work programme and how this would be developed. In order to inform its work programme discussions, the Committee agreed to write to the Cabinet Secretary inviting him to set out his priorities for the new parliamentary session, including information about the initiatives and legislation that the Scottish Government plans to introduce, along with expected timescales.
- 3. The Cabinet Secretary's response can be found in the **Annexe**.
- 4. The Committee also agreed to take evidence from the Cabinet Secretary.

Clerks to the Committee 2 September 2021

Annexe

Cabinet Secretary for Health and Social Care

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Gillian Martin MSP Convener, Health, Social Care and Sport Committee The Scottish Parliament Edinburgh EH99 1SP

22 July 2021

Dear Gillian,

Thank you for your kind words of welcome and for the opportunity to update the Health, Social Care and Sport Committee on my priorities for the coming session. You will be aware that the Scottish Government is due to publish a Programme for Government (PfG) early in the next Parliamentary year and that will formalise some of the areas I outline below. You will also be aware that we have made a number of commitments for the first 100 days of this new Government and I am focused on ensuring that those areas relating to my Portfolio are taken forward in the timescales set out.

Ongoing response to the pandemic

Leading Scotland safely through and out of the pandemic is clearly central to all we are doing as a Government at this time, and as Cabinet Secretary for Health and Social Care, I see the ongoing response to the pandemic as my most immediate priority. This includes ensuring that the vaccination programme is delivered effectively and at pace, making it as easy as possible for people to be vaccinated. The vaccination programme is working – weakening the link between case numbers and severe acute illness – and I am determined that our ongoing approach remains robust, including planning for a booster programme later in the year, taking on board the advice and guidance from the Joint Committee on Vaccination (JCVI).

In addition to this, continuing to use our local and national public health resource to build and adapt the testing, surveillance and public health measures needed to respond to COVID-19 remains crucial. I am clear that we must support our test and protect teams and implement appropriate enhanced public health measures, when outbreaks do arise.

It is crucial of course that we learn from the experiences of the current pandemic and to help ensure this happens, a Standing Committee on Pandemics will be set up, bringing together scientists and clinicians to advise on future risks. I am also acutely aware of the impact post COVID-19 syndrome (commonly referred to as Long Covid) is having on many lives and, as we move forward, it is vital that those affected are supported through our primary, community and secondary care services.

Recovery and remobilisation of NHS

The Scottish Government is working closely with Health Boards to remobilise services and I will shortly be publishing an NHS Recovery Plan – which will set out detail on how we will achieve a 10% increase in key services. The plan will focus on ensuring that patients who have been impacted by the pause in services receive access to the care they require, as well as demonstrating how we will improve patient pathways from primary through to secondary care. To support this remobilisation, the completion of the new National Treatment Centres by 2025/26 is a key priority. Work is underway to recruit at least 1,500 additional frontline staff required for these Centres.

I am committed to ensuring that we drive forward the delivery of the already established National Cancer Plan, which includes the implementation of Early Cancer Diagnostic Centres and delivery of optimal pathways for cancer patients. Work also importantly continues with Health Boards to deliver on the 4-hour Emergency Access Target, ensuring that its delivery is manageable and sustainable. A collaborative programme team of national performance and improvement advisors and clinical leads has been established to ensure care is delivered in the right place at the right time and as close to home as possible.

Mental Health Services

It is crucial that there is parity between mental health and physical health services and we will continue to deliver on our Mental Health Transition and Recovery Plan, which sets out over 100 actions to address and respond to the mental health effects of the Covid-19 pandemic. The plan is supported by the Recovery and Renewal Fund (which stands at £120 million in 2021-22), with a renewed focus on prevention and early intervention. As part of this work, we will provide ongoing support to Health Boards to recover and improve NHS mental health services. £52 million has already been committed for CAMHS improvement and clearing waiting list backlogs and £2.5 million committed to the Children and Young People's summer programme.

While the Mental Health Workforce has continued to expand over time, NHS Boards still face challenges in recruitment and retention, particularly in psychiatry and mental health nurses. This is especially magnified in rural areas. I will ensure that, every GP practice has access to dedicated mental wellbeing support services, and we plan to recruit 1,000 additional staff to improve advice, assessment and treatment for people who require support.

Social Care sustainability and establishment of National Care Service

Implementing the recommendations of the Independent Review of Adult Social Care is also firmly in my sights. As part of this, formal consultation will begin soon, with a view to bringing forward legislation to establish a National Care Service within the first year of the Parliament. We are liaising with the Minister for Parliamentary Business about a final timetable, however both the Minister for Mental Wellbeing and Social Care and I are keen that the Stage 1 will be laid towards the end of the first year of this Parliament. It is my expectation that this service – perhaps the most important public sector innovation since the establishment of our National Health Service - will be operational by the end of the parliament.

Consideration is also being given to ways of legislating to support the intent of Anne's Law, to ensure that residents of care homes have contact with their loved ones. In order to facilitate timely action, this is likely to be through secondary legislation and work is underway to identify the most sensible route. Ahead of this however the Scottish Government will work closely with partner organisations to improve local implementation of the Carers Act, in line with the recommendations of the Independent Review of Adult Social Care. This is backed by an additional £28.5 million in the Local Government settlement for Carers Act implementation this financial year.

Tackling drugs death emergency

A further priority is to support the National Mission to reduce drug deaths and harms, ensuring the additional funding of £250 million over the next five years is used to best effect, taking immediate action to save lives and help more people into treatment and recovery. This will be supported by the implementation of the Medically Assisted Treatment (MAT) standards, widening treatment options, including long-acting buprenorphine treatment, and increasing capacity and improving access to residential rehabilitation.

Key to the success of this work is fully understanding the environment and circumstances which lead to drug use and I know a priority for the Minister for Drugs Policy is to work closely with people with lived and living experience, as well as their families, to develop firm treatment targets and to develop a better understanding of how we can tackle this blight.

Women's Health

I am very clear that women's health must be a particular focus in the coming term, driven by our commitment to implement all of the actions set out in the Women's Health Plan, with the aim of improving health outcomes and health services for all women and girls. I also specifically want to ensure support and help for those affected by mesh complications. As part of this, the Transvaginal Mesh Removal (Cost Reimbursement) (Scotland) Bill was introduced on 23 June and it is my hope, given the difficult circumstances that people who have paid for private surgery may find themselves in, that this Bill will receive Royal Assent as quickly as possible.

Through the roll out of our Best Start programme, the Scottish Government is progressing the introduction of Continuity of Carer for all pregnant women. The next phase focuses on carer support for vulnerable women, including those with drug and alcohol addictions; and further work is also underway to ensure the legislation behind the Forensic Medical Services (Victims of Sexual Offences) (Scotland) Act 2021 is in place and helps us to improve healthcare services for victims of sexual offences. The Chief Medical Officer's Rape and Sexual Assault Taskforce will continue to provide the leadership and drive behind this activity.

Health inequalities

I recognise that reducing health inequalities is critical to achieving the Scottish Government's aim of making Scotland a more successful country with opportunities for all to flourish. To this end, I am focused on improving population health though our strategies in relation to smoking; diet and healthy weight; and alcohol. I'm also determined the NHS plays its part working alongside other public services and

communities to tackle the social determinants of ill health. That includes using its power as a very significant employer and contractor for social good and ensuring it's services are framed innovatively to ensure we care for those in most need. Specific priorities include the expansion of access to weight management services and making progress on plans to halve childhood obesity by 2030. I want to sharpen our focus on improving equity in policy and delivery for specific groups experiencing consistently poorer health outcomes. The Health Inequalities in Primary Care Short Life Working Group will be making recommendations to tackle health inequalities that present in primary care settings and wider communities - I fully acknowledge the importance of acting on these recommendations.

Supporting the wellbeing of the workforce

I have been fortunate, even in the short time that I have been in this role, to see something of the incredible work and dedication of our health and social care staff. Supporting our staff now and into the future is a non-negotiable, recognising that the recovery of our services will not be possible without the recovery of our workforce. I recently announced funding of £8 million - an increase of £3 million on last year - to provide ongoing support for the wellbeing of health and social care staff across Scotland. As well as supporting a range of immediate recovery actions, this will also offer practical and emotional support, alongside more specialised mental health services where required.

Innovation and Investment

To support the priorities set out above, there needs to be both an appropriate level of investment and a focus on harnessing new innovations and technology to support our services. With this in mind, I will work with Cabinet colleagues to ensure frontline spending increases by at least 20% over the course of this Parliament, and ensure that our facilities are fit and appropriate for the future, by investing £10 billion in our NHS estate over the next decade.

I see huge potential in the work to develop digital services, including in our prescribing processes and the "Digital Front Door", a flexible platform where our citizens can access joined up digital products and services. Giving people greater access and control over their data is hugely important, but we must do this in a way that is inclusive for all.

In addition to the all points I have set out above, I would also want to note that I expect a Common Framework on Public Health Protection and Health Security, Blood Safety and Quality, and Organs, Tissues and Cells Safety and Quality will come to the Committee for scrutiny next year.

To deliver these priorities and reforms, my officials have undertaken work on an overarching strategy to give both connectivity and coherence to our approach. The strategy comprises four strategic reform programmes – Place and Wellbeing; Integrated Unscheduled Care; Preventative and Proactive Care; and Integrated Planned Care. I would be happy to set out more on these programmes in due course.

I would like to conclude by highlighting that I see putting people – the citizens of Scotland - at the heart of all decisions relating to health and social care as absolutely

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vital, and is in many ways my most important priority, underpinning all that I have set out above. I look forward to the opportunity to give the Health, Social Care and Sport Committee more details about these priorities in due course.

Yours sincerely

HUMZA YOUSAF