

Health Overview & Scrutiny Recommendation Response Pro Forma

Where a joint health overview and scrutiny committee makes a report or recommendation to a responsible person (a relevant NHS body or a relevant health service provider [this can include the County Council]), the Health and Social Care Act 2012 and the Local Authority (Public Health, Health and Wellbeing Boards and Health Scrutiny) Regulations 2013 provide that the committee may require a response from the responsible person to whom it has made the report or recommendation and that person must respond in writing within 28 days of the request.

This template provides a structure which respondents are encouraged to use. However, respondents are welcome to depart from the suggested structure provided the same information is included in a response. The usual way to publish a response is to include it in the agenda of a meeting of the body to which the report or recommendations were addressed.

Issue: Primary Care (Communications)

Lead Cabinet Member(s) or Responsible Person: Cabinet Member for Public Health & Equality: Cllr Mark Lygo

Deadline for response: 14 February 2023

Response to report:

Please see overleaf

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Response to recommendations:

Recommendation	Accepted, rejected or partially accepted	Proposed action (if different to that recommended) and indicative timescale (unless rejected)
<p><i>That the Council explores ways in which it can support the ICB, from a communications angle, to better inform the public narrative around primary care.</i></p>	<p>Accepted</p>	<p>We have incorporated key self care messages and about the appropriate and timely use of primary care to the public in an opportunistic way when we have done general health related media briefings. These messages also highlighted the need to utilise highly skilled allied health care professionals such as pharmacist as well as self help models such as community hubs and networks. We will continue to do this. There is a degree sensitivity to be aware of to continue with such messages given the public sector and health care staff strikes.</p> <p>We do however, need to do more in this space. As the place based partnership develops, as part of the ICB, we will be looking at the primary care provision as a whole. As we do this we will be looking at appropriate use of primary care including the more upstream wellbeing provisions such as those delivered as part of the community by the community utilizing the voluntary sector as much as the GP provision. As we form this model we will need to develop a public narrative and communicate this message to the public.</p>