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Minutes of Meeting on 10th March 2025

**Venue:** The Usher Institute, Edinburgh

**Time:** 10:30 am – 04:00 pm

**Type:** Panel Meeting



Attendees

**Panel:** Matt Cole, Kirsten Jenkins and Alister Steele

**Apologies:** Margaret Corrigan and Fraser Stewart

**Secretariat:** Philippa Brosnan and Roanna Simpson

Fuel Poverty through a health lens - contributors**:**

**Public Health Scotland:** Donna Burnett, Organisational Lead, Poverty and Income Maximisation, Fairer and Healthier Economy

**Wellcome and NHS Lothian:** Dr Oliva Swann, Wellcome Early Career Fellow and Honorary Consultant in Paediatric Infectious Disease

The **University of Edinburgh, Usher Institute and Scottish Government Office of the Chief Social Policy Adviser:** Professor Linda Bauld, The Bruce and John Usher Chair of Public Health at The Usher Institute and Chief Social Policy Advisor to the Scottish Government.

**Energy System Catapult:** Rebecca Sweeney, Business Leader – Homes and Dr Rebecca Lovell, Senior Business Model Consultant

Agenda item 1: Welcome and Panel business [10:30-12:00]

Matt opened the meeting and welcomed everyone, noting Fraser and Maggie’s apologies and Trisha’s absence too. He ran through the agenda and the running order of the meeting, outlining the intention to discuss the following before the Panel is joined by the health contributors at midday: consider capacity to respond to the relevant consultations which are currently open, the developing risk approach and a forward look to the April ’25-March ’26 workplan.

Matt also noted that there has been 1 online meeting since the Panel last met in-person on the 21st of January. This was on the 17th of February. The agenda for this meeting included:

* Discussion of the Panel’s Heat Networks’ Roundtable note and accompanying materials prior to its publication on the Panel’s website in March.
* Update from the Secretariat and discussion by the Panel of their work on rural and remote fuel poverty, including Matt’s upcoming interview with Kirsty MacLeod, Energy Advice Manager at Tighean Innse Gall and the final draft of the Rural and Remote Literature Review.
* An update from Matt on the Ministerial Social Tariff Working Group, on which he represents the Panel, and which concludes in March.
* A consideration of progress on delivering the April 24 – March ’25 workplan, current budgetary expenditure and the budget forecast for April ’25-March ’26.
* A forward look to the meeting on the 10th March where an early exploration of a health approach to fuel poverty is to be discussed – along with those with expertise in this area.

The Panel then discussed their capacity to respond to current open consultations, the developing risk approach and a forward look to the April ’25-March ’26 workplan, offering the following points and conclusions:

The Panel agreed their response to the RTS electricity supply licence changes’ consultation and Roanna will finalise and submit. Another two consultations, highly relevant to outcomes for those in fuel poverty, are open at the moment: the UK Government’s Expanding the Warm Home Discount (WHD) Scheme, 2025 to 2026 (closing on the 26th March) and the ENZ Committee – [call for evidence](https://committees.parliament.uk/work/8940/the-cost-of-energy/) on how consumer energy bills can be reduced (closing on the 8th of April). [Ofgem are also consulting on a Zero Standing Charge but the deadline makes a response from the Panel unrealistic]. The Panel agreed that it was imperative to respond on the WHD consultation and, following the Panel reflections on this, Roanna will now take the drafting forward. The multiple demands on the Panel’s time as they work to finalise their April 2024 – March 2025 workplan, focus on next year’s workplan and annual report makes responding to consultations challenging. It was agreed that building capacity into the workplan for consultation responses is tricky when generally there’s little, if any, notice of their publication. The Panel agreed to come back to the question of the ENZ call for evidence at their next online meeting – to be scheduled for later this month.

The Panel welcomed the invite to a session with the Scottish Government Fuel Poverty Team and Better Homes’ senior managers, agreeing that May would be a good time to hold this.

The Panel briefly considered the developing risk approach, observing it should reference the following risks: fraud, IT/cyber, FOI requests, and, capacity, key relationships, succession planning and credibility.

The Panel briefly touched on next year’s Workplan and Annual Report. The Panel view is that these would need to be completed before responding to the Scottish Government’s Periodic Report. The deadline for the latter is the end of September, and time would be needed in the second quarter (July 2025 -September 2025) to finalise the Panel’s response.

Agenda item 2: Fuel poverty through a Health Lens [12:00-03:45 pm]

Matt welcomed everyone to the meeting, ran through housekeeping arrangements, and outlined the background to the Panel and its role in advising Scottish Ministers on fuel poverty matters and scrutinising Scottish Government’s progress towards meeting the 2040 fuel poverty targets. Introductions were done round the table.

Matt explained that the Panel are very interested in exploring a public health approach to fuel poverty and during evidence sessions, has heard a lot about the physical, mental and wellbeing impacts of living in cold homes and the systemic impact it has on people’s lives. The Panel’s all about advocating for policies and approaches which will end the blight of cold homes and is really looking forward to this session. He also touched on one of the Panel’s [workplan](https://fuelpovertypanel.scot/our-publications/the-scottish-fuel-poverty-advisory-panel-workplan-2024-2025/) themes for the year – to consider fuel poverty through a health lens – and that this session provides the opportunity to explore this theme. .

Matt then invited the contributors to present:

Donna Burnett, Organisational Lead, Poverty and Income Maximisation, Fairer and Healthier Economy, **Public Health Scotland** (PHS) presented on a public health perspective on health and fuel poverty, drawing out:

* The linkages between poverty and poor health outcomes, how poverty damages the “building blocks of health” even pre-birth right through to old age, with increased morbidity and shortened life expectancy for those living in the poorest areas in Scotland.
* The [Marmot Review](https://www.instituteofhealthequity.org/resources-reports/the-health-impacts-of-cold-homes-and-fuel-poverty), which examined the impact of cold homes and fuel poverty, the update to this review in 2020, and the recent [announcement](https://publichealthscotland.scot/news/2025/february/bold-new-collaboration-to-tackle-health-inequalities-launches-in-three-local-areas-in-scotland/) of a collaboration between PHS, Professor Sir Michael Marmot, Director of University College London’s Institute of Health Equity (IHE) and three councils and health boards in Aberdeen City, North Ayrshire and South Lanarkshire to reduce health inequalities and improve wellbeing in their communities. The objective is to support local partners understand the most impactful actions for health inequalities locally and to overcome the implementation barriers
* The imperative of shifting to preventative health approaches was referenced in the context of the statistic that the future burden of disease is [predicted](https://www.gov.scot/publications/realistic-medicine-taking-care-chief-medical-officer-scotland-annual-report-2023-2024/pages/7/) to increase by 21% by 2043.
* PHS plays a role in reviewing Scotland’s local child poverty plans jointly produced by Local Authorities and Health Boards. The income and cost of living connections between the drivers of child poverty [income from social security, income from employment and the cost of living] and the drivers of fuel poverty [poor home energy efficiency, high energy costs, low household income and how energy is used in the home] were noted. The cost of energy is a major factor in the rise in the cost of living.
* The potential for the drive to net zero – and the improvement in the energy efficiency of housing stock to mitigate fuel poverty but also noted was the needs for a just transition to avoid detriment for those in, or on the brink, of fuel poverty.

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In discussion, the following points and reflections were made:

* *There may well be the opportunity to use Scottish House Condition Survey data to strengthen the health and social care dashboard.*
* *The Panel queried why the excess deaths’ figure linked to fuel poverty in England and Wales is extant but not the Scottish data.*
* *The child poverty plans are demonstrating how having a focus can be helpful in addressing the structural inequality of child poverty.*

Dr Oliva Swann, **Wellcome Early Career Fellow** and Honorary Consultant in Paediatric Infectious Disease with **NHS Lothian,** presented on the research project she’s leading on Homes, Heat and Heathy Kids Study - the best way to make homes warmer and make children healthier, covering all children under 5 years old in Scotland from 2008-2025. She drew out:

* The clear evidence which exists between cold homes and the developmental and physical, including respiratory diseases. As well as how these then flow through into adult health. The cost as well as the health implications were drawn out with Illnesses linked directly to cold, damp homes [estimated](https://www.instituteofhealthequity.org/resources-reports/fuel-poverty-cold-homes-and-health-inequalities-in-the-uk/read-the-report.pdf) to cost the NHS £2.5 billion / year in the UK.
* How this study will link healthcare and housing data for the first time across Scotland.
* How the study will consider the efficacy of different types of energy efficiency measures on child health with a view to supporting a just transition through assessing how different retrofit approaches affect children’s respiratory health to provide evidence for policymakers and funders.
* Producing data to show how many preschool respiratory infections could be avoided if every home was properly heated
* The study has a robust participative approach to engaging families with lived experience of the impact of cold homes and a wide networks of health, academic, data, policy and regulatory stakeholders.

In discussion, the following point was made:

* *Again, the potential for the Scottish House Condition Survey to provide a useful data source was highlighted. .*

Professor Linda Bauld, **The Bruce and John Usher Chair of Public Health at The Usher Institute and Chief Social Policy Advisor to the Scottish Government**, offered some reflections from her career in behavioural research, noting that you cannot work in and around public health without thinking about housing and energy. She talked through how:

* The importance of behavioural change interventions as an enabler in improving public health.
* How a framework like COM-B [Capability, Opportunity, Motivation - Behaviour] can help to analyse the desired change and support its implementation.
* And, walked through the Scottish Government’s behavioural science toolkit – a useful introductory tool.

The Panel commented that:

* *This is useful in supporting thinking around the fuel poverty driver – how energy is used in the home – which is essentially behavioural and where it can be difficult to assess not only what it means but also what supports change, for example, preventing fuel rationing*.

Rebecca Sweeney, Business Leader – Homes and Dr Rebecca Lovell, Senior Business Model Consultant at **Energy System Catapult** updated the Panel on the findings of the first Warm Homes Prescription (an innovative service designed for people who struggle to afford energy and have severe health conditions made worse by the cold by enabling them to stay warm and well while reducing the energy consumption and carbon emissions of their home) and the second iteration of WHP:

* The WHP approach is innovative in finding people with health conditions made worse by the cold and giving them immediate, effective support by providing what they need to keep their home at a warm, healthy temperature. The first iteration of WHP ran across Scotland and England reaching over 800 homes and working with 4 NHS partners.
* WHP uses a 4-stage process: identifying people, offering them the service & assessing their needs, enabling them to heat their homes to the right temperature and, finally, offering energy efficiency measures. It is delivered in partnership with other organisations such as health boards, primary care providers and energy advice services
* The findings of the first WHP trial were that:
* the service was successfully delivered and built trust with vulnerable households. Staff found it quick and easy to deliver
* Recipients’ physical and mental health and wellbeing improved since receiving the prescription
* Factors that contribute to people’s wellbeing improved how they were able to live
* Findings suggest a decrease in use of primary healthcare
* Catapult are now considering different models for funding (the first WHP trial was funded by the NHS, Energy Companies and government agencies). There are different options such as Social Outcomes Contracts, Community ESCo model. The current trial is being funded in collaboration with ScottishPower, testing the integration of ECO4 into WHP service.
* This has enabled Catapult to think about the limitations of some of the energy funding streams - such as ECO4 - as well as the strengths, and inform their views on how ECO5 should be designed.
* A more pared down version of WHP has seen Catapult test a WHP service funded by the Vulnerability and Carbon Monoxide Allowance, with SGN, with an energy credit of (up to £150), energy advice and signposting to grants, as well as widening the referral path and expanding eligibility
* Catapult are advocating for WHP service to be rolled out nationally to avoid cold home-related deaths. Wellbeing social value [analysis](https://www.shu.ac.uk/centre-regional-economic-social-research/publications/warm-homes-prescription-impact-and-vfm) findings show that there is a £5.10 return on investment to society for every £1 spent.

The Panel noted that:

* *Catapult’s findings on funding mechanism such as ECO4 resonate with the Panel’s* [*Funding Principles and Recommendations*](https://fuelpovertypanel.scot/wp-content/uploads/2024/11/Scottish-Fuel-Poverty-Advisory-Panel-principles-and-recommendations-on-the-fuel-poverty-funding-landscape-in-Scotland-.pdf)*.*
* *The social value analysis is compelling and makes a very strong case for WHP as a mechanism for mitigating, and potentially, lifting people out of fuel poverty.*

Matt thanked all the presenters for attending and sharing their knowledge and understanding with the Panel.

Agenda item 3: Panel Reflections [03:45-04:00 pm]

The Panel reflected that they had heard a really interesting and thought provoking set of presentations and see the fuel poverty connections to health as a key area for their work in the future.

**Next meeting** - to be confirmed