Fuel poverty exists in both urban and rural areas. The Scottish Government recognises that, no matter where the location, living in cold, damp homes may impact on both physical and mental wellbeing, as well as the occupant’s quality of life. We have allocated over **half a billion pounds since 2009** on a raft of Fuel Poverty and Energy Efficiency programmes and this year a **record budget of £119m** is being made available for fuel poverty and energy efficiency. Our funding has delivered a range of domestic energy efficiency programmes and improved the quality of hundreds of thousands of homes across Scotland resulting in them being warmer and more cost effective to heat. However, the Scottish Government recognises the need to increase our efforts to further understand the links between fuel poverty and poor health.

In taking this forward

- We are currently working with NHS Health Scotland and other national partners within the advice and fuel poverty sectors to develop new partnerships to improve collaborative working. This includes working on the development of an improved model of advice and support for the NHS to access for patients.
- The Scottish Fuel Poverty Forum has two health representatives who are helping to drive forward action in this area.
- This Task Force also has a health representative member to feed into the group’s discussions and outcomes on the health related issues facing fuel poor householders in rural and remote rural locations across Scotland.
- We are working with marketing colleagues to refocus elements in our messaging around energy efficiency to promote the health benefits

The Chief Medical Officer for Scotland, who has responsibility for advising the Scottish Government on how best to protect and enhance the health of the population, wrote to NHS Scotland Chief Executives in October. She set out a vision for a Health Promoting Health Service and asked that all NHS Boards plan and deliver hospital services that ensure routine enquiry for vulnerability is built into person-centred care and, therefore, those at risk of poverty or inequality attain the best possible health outcomes. Boards are asked to focus efforts on priority. This might include:

- Asking patients if they have money worries and offering a direct referral to advice services;
- Support for patients who are, or are at risk of, homelessness;
- Support in access to services for vulnerable groups

This is a very positive development and we will build upon this with NHS Health Scotland colleagues to ensure that we join up the advice and support provided.

The Scottish Government has also provided sponsorship and funding to innovative projects that recognise the links between fuel poverty and health. Some examples are set out below.
Link Worker Programme

The Scottish Government has sponsored and engaged with the Link Workers project delivered in the Deep End practices. GP’s at the Deep End work in general practices serving the 100 most socio-economically deprived populations in Scotland, based on the proportion of patients on the practice list with postcodes in the most deprived 15% of Scottish data zones.

The project was designed to learn more and implement social prescribing, this is also known as community referral and signposting and is a mechanism for linking patients with non-medical sources of support and advice within the community.

As a result of the engagement with Links workers we have

- Joined our messaging up;
- Facilitated an advocacy service for Home Energy Scotland (HES) which resulted in 20% of the clients to the Link project being referred to HES in its first 6 months; and
- Funded specific and tailored fuel poverty/home energy awareness training for Links workers and ensured that fuel poverty is included in all Links workers learning and development plans.

ALISS Project (A Local Information System for Scotland)

The Scottish Government funds the ALISS project. This is a search and collaboration tool for health and wellbeing resource in Scotland. It has been designed by and developed with people with long terms conditions and professionals from multiple sectors involved in signposting people to support. The main focus of the ALISS project is to make information about local sources of support more findable, it does not intend to replace organisations websites or online material or reinvent anything. A key part of the project is the ALISS search engine which will link up currently available online local information and support services. We have engaged with the ALISS project to ensure fuel poverty support messaging is fed into this service.

GoWell Project

The Scottish Government provides sponsorship for the GoWell project. GoWell is a research and learning programme, investigating the impacts of investment in housing and neighbourhood regeneration in Glasgow on the health and wellbeing of individual, families and communities. Established in 2005, and planned as a 10 year programme, the study design allowed the project team to examine a range of neighbourhood; housing and health related factors before, during and after intervention changes take place.

The Scottish Government is engaging with GoWell on how the next wave of research may be able to provide more insight into links between the upgrade of homes, changes in the difficulty in paying energy bills and how this might achieve better health outcomes.
A link to the GoWell progress report 2014/15 is below.


In addition to these innovative projects, we are also currently undertaking work in a number of other areas.

We are working with NHS Health Scotland colleagues to build the message on fuel poverty into their literature. This includes exploring the use of Patient Information Centres to convey HES literature/messaging. These are referred to as Health Information Centres (HICS) in Glasgow. We are also exploring how we can increase availability of HES literature to ensure every GP surgery and hospital in Scotland can make this available to patients and visitors. This may initially take the form of a “prescription bag” pilot scheme and work on this is on-going with HES and other partners.

Home Energy Scotland

The Scottish Government provides a substantial amount of funding for advice and support. Part of this funding goes to the Home Energy Scotland support service and we have redirected some of the Community Liaison Officer (CLO) work to focus on health partners. This includes working with food banks and NHS sessions to ensure that the availability of advice and support services is widely publicised in the health and support sector. HES are also engaging with Credit Unions at both a national and a local level to raise awareness among Credit Union customers of the help and advice they can give to improve and reduce bills, as it is recognised that financial health can have an impact on mental health and general well-being.

Home Energy Scotland CLOs in the Strathclyde and Central have also started to work with MacMillan Cancer Support to deliver fuel poverty/HES awareness training to frontline MacMillan staff and partners who engage with those on and are involved in the cancer journey to help raise awareness of fuel poverty amongst staff, help staff recognise the signs of fuel poverty, and to make staff aware of the range of services HES offers, to encourage referrals to HES and Scottish Government energy efficiency schemes and grants.

Energy Action Scotland

The Scottish Government funding provided to Energy Action Scotland (EAS) has helped EAS to develop projects and establish partnerships with organisations across Scotland and representatives from NHS Learning and Development to build on the success of the Stay Warm, Stay Well project.

Stay Warm, Stay Well Project

EAS identified the need to raise awareness of fuel poverty and related issues for front line staff with a responsibility for the health, well-being and social welfare of vulnerable people.
EAS was successful in securing funding from SSE to deliver a Stay Warm, Stay Well project. The project was completed in 2014.

The Stay Warm, Stay Well training is intended to equip front line staff with the knowledge necessary to support their vulnerable clients on energy related issues. EAS has also supported the Stay Warm, Stay Well blog and has included information and contact details for HES for the website of the Health and Social Care Alliance of Scotland. EAS continues to build on the success of Stay Warm, Stay Well and is developing projects and establishing partnerships with organisations across Scotland to ensure the promotion of and access to Stay Warm, Stay Well and consumer redress training is available.

I hope that this paper reassures the Task Force that the linkages between fuel poverty and health have been both recognized by the Scottish Government and are being addressed proactively.

Ann McKenzie

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