

**Minutes of a Meeting of the Cross Party Group on Food held in Committee**  
**Room 5 of the Scottish Parliament on 27 January 2016**

Present

Rob Gibson	MSP (Chair)
John Scott	MSP
Christian Allard	MSP
Maureen Watt	Public Health Minister
Michelle McCrindle	Food Train
Peter Fassen de Heer	Scot Government (Health)
Mary Lawton	CPG Secretariat
David Thomson	SFDF
Cat Hay	SFDF
Bill Gray	Community Food & Health Scotland
Denise Walton	Peelham Farm
Wendy Wrieden	Newcastle Uni/ Robert Gordon Uni
Fiona Bayne	NHS Health Scotland
Tara Hargreaves	NHS Lothian
Ian Shankland	Glasgow Food Policy Partnership
Jackie McCabe	REHIS
Natalia Popova	Real Junk Food Project
Rob Ralston	Edinburgh University
Geoff Ogle	Food Standards Scotland
Peter Midgley	Food Standards Scotland
Heather Peace	Food Standards Scotland
Pat Abel	Transition Edinburgh
Anna Strachan	Obesity Action Scotland
Uel Morton	Quality Meat Scotland
Stephen Hutt	Royal Highland Society
Anita Aggrawal	Pilton Community Health Project
Memes Molina	Pilton Community Health Project
Rose Munenura	Scot Gov
Angelica Lorenzo	Scot Gov
Antonia Ineson	Scottish Organic Forum
Stuart Young	Taste Communications
Christine Fraser	Food Training Scotland
Ian Stewart	Edinburgh Community Food Initiative
Flora Douglas	Aberdeen University
Jacklyn Jones	Queen Margaret University
Lynne Stevenson	Nutrica Advanced Medical Nutrition
Karen Barton	Abertay University
Pete Ritchie	Nourish
Thomas Quinn	RSPB Scotland

Tony McElroy	Tesco
Chris Hunt	City of Edinburgh Council
Mary Anne Macleod	Poverty Alliance
Ceri Ritchie	SRUC
Wendy Barrie	Scottish Food Guide
Bosse Dahlgren	Scottish Food Guide
John Cooke	Slow Food Scotland
Paul Birkin	Glasgow City Council
Christine Graham	Kettle Produce
Jane Miller	Children in Scotland
David Martin	Scottish Retail Consortium

#### 1. Apologies for Absence

These were received from Graham Findlay, Douglas Scott, Dave Simmers, Kirsty Ritchie, Martin Hunt, Lesley Stanley, Derek Oliver, Martin Meteyard, Fiona Bird, Helen Pratt, Neel Radia, Lee Sheppard, Lorraine Tulloch, Robbie Beattie, Frank Strang, Claudia Beamish and Eve Keepax.

#### 2. Minutes of the last Meeting

The minutes of the meeting held on 7 October 2015 were approved with the change of Christopher Trotter being listed as his business and not as a Fife Food Commissioner.

#### 3. Matters Arising

There were no matters arising.

#### 4. **Addressing Malnutrition in Scotland**

Introduction by the Public Health Minister Maureen Watt (MW).

MW opened with the following statistics;

- Around 1 in 10 people over 65 living in the community are malnourished or at risk of malnutrition
- Malnutrition affected over 24% of patients admitted to Scottish hospitals, with proportion underweight rising steeply for the over 70s
- Malnourished older people see their GP twice as often as those well-nourished, are three times more likely to be admitted to hospital and will stay longer
- Direct costs of malnutrition in Scotland are estimated to range from £5bn for healthcare services to £13 bn for associated health and social care services.

Scottish Government (SG) had organized a Malnutrition Summit in May and a report was available on the [Community Food and Health Scotland \(CFHS\) website](#). MW said that the SG was finalising the next steps to take following the report and thought key areas were likely to relate to identification of the vulnerable, treatment and monitoring the condition.

Two of the main recommendations were regarding local activity and collaboration across services and she had already agreed funding for community food networks to help strengthen their core work of providing support and co-ordination to local services. SG was also looking at learnings so regions without networks could develop similar models. This “bottom up” approach was vital and she noted the importance of food in dealing with social isolation.

SG saw encouraging healthy eating as essential and had spent over £10 million over the last 4 years.

With the election in May, MW did not see there being an initiative before then but would continue to information gather to see how work could be tailored to the diverse needs of Scotland using a limited budget.

#### Michelle McCrindle Food Train CEO and Chair of Malnutrition Summit

Michelle McCrindle (MM) outlined the work of the [Food Train](#) which was set up 20 years ago and now has 900 volunteers supporting over 2000 older people across 8 local Council areas providing 40,000 deliveries annually of fresh food and grocery supplies. Volunteers help make up shopping lists, unpack and put away shopping whilst keeping a watchful eye to ensure food is eaten.

A new neighbourhood meal sharing initiative [Meal Makers](#) was launched 18 months ago and so far 1,500 free home cooked meals have been served to older people.

MM noted the vital role of nutrition in health and wellbeing and that malnutrition covered “bad” nutrition such as a lack of vitamins and minerals that body functions need. Whilst she agreed that obesity was a big issue, it was important with an ageing population living longer but not healthier lives that malnutrition was also addressed.

MM agreed with the Minister that malnutrition was costly and stressed that it was preventable. Recent figures from England estimated between £172-£229 million/annum could be saved through full implementation of nutritional care pathways. Crudely translated this could mean a potential saving of £21.5 million in Scotland.

International Centre for Longevity research in 2013 found 1 in 10 older people over 65 suffer from malnutrition and dehydration with 93% living at home which

equated to 83,000 in Scotland. The main causes found were access to food and loneliness around eating.

[Consumer Focus Scotland/CFHS research](#) looking at community food provision found significant inconsistency in local authority on what was provided, criteria to get a food service, information and cost. There was little understanding of who got what to eat, when and how often provision relied on volunteers.

In England a [UK Malnutrition Task Force](#) funded by the Department of Health as a collaboration of the public, private and third sector was set up in 2012. They funded 5 test sites during 2014/5 in England to test a variety of projects aimed at reducing malnutrition and the full evaluation will shortly be available. Some of the early barriers have been identified as partnership working, complex NHS structures and information sharing.

MM said that here in Scotland we have no Task Force, no such focus on malnutrition and a growing costly problem. However in her view, Scotland was better placed to tackle these issues including;

- Food and drink policy aiming at accessible and affordable food for all
- Formal public partnership working
- Integrated Health and Social care
- Less complicated local NHS structures
- Good track record of working with third sector
- Range of outcome focussed tools and resources
- Updated Food, Fluid and Nutritional Care standards applicable to community health care.

MM thought a co-ordinated, managed focus is now needed to tackle malnutrition in Scotland.

The May Malnutrition summit had brought together 60 people from a broad spectrum of backgrounds and 13 actions were identified that should be taken forward.

MM said this work also had synergies with the recent Parliamentary enquiry into loneliness and both malnutrition and loneliness could be tackled together by focussing resources on people living at home.

### Open Debate

**Lynne Stevenson Nutrica (LS)** asked about the new Food and Nutritional Care Standards and how these could be utilized in the community. **Peter Fassen de Heer SG** said work was at the early stages and they were only looking at hospitals currently. **LS** questioned that since 93% of those

malnourished were at home, whether these should be a priority. **MW** said more practitioners in the community were needed.

**Pete Ritchie Nourish (PR)** asked about the measurement of the malnourished and how it related to income/age /gender. **MM** said that the research in 2013 had been the first attempt to capture data in the community. It was UK based and there had to be crude extrapolation for Scottish figures. However it was clear that there were older people living to a frail age and it was necessary to target them and stimulate early intervention.

**PR** asked about food insecurity being looked at systematically across Scotland and **MW** indicated SG was waiting for the recommendations of the Food Poverty Group.

**Ian Shankland Glasgow Food Policy Partnership** asked about experience of working with food hubs and expanding these partnerships. **MM** said currently the Food Train was not active where there were community hubs but could see this partnership in the future. They worked with whoever they could where they were operating. She noted that another important point was the malnutrition of volunteers.

**Denise Walton Peelham Farm** asked if consideration was given to sourcing of food, how it was grown and its nutritional value. **MM** answered that the Food Train worked with as many retailers of all different sizes as possible to create choice for their customers. The Food train's role was about supply of food there was no capacity and resources for dieticians. **MW** responded that the Mealmakers programme often prompted people to think about the food they cooked and where it came from and its nutritional value.

**Flora Douglas Aberdeen University (FD)** said that obesity had been dominating food and diet discussions and was pleased to see that micronutrient deficiency had been emphasised. She asked if there was any research on malnourishment of pregnant women and younger people. **MM** replied that all the UK test sites were for over 65s. She agreed there was an issue but thought it important to find a starting point in addressing malnutrition and not start with too wide an agenda. **MM** thought it was important not to "recreate the wheel" but take learnings from elsewhere and put them into the Scottish context. **MW** noted their work on breakfast clubs and free school meals.

**Geoff Ogle FSS** thought that obesity and malnutrition were two sides of the same coin with similar answers. A healthy, affordable, available diet giving enough fibre, vitamins, minerals, fruit and vegetables for all was needed. Our

relationship with food was important and there was a need to change habits which was difficult.

**Christian Allard MSP** said that on the [Equal Opportunities Committee](#) study on social isolation, they had found that there were issues not just with older people but younger people whose parents worked. Eating together was an important social concept. **MM** said that 1 in 10 said they were lonely and that food could be used as a theme to tackle this. She was disappointed that in the 32 reshaping care plans by Councils, none had mentioned nutrition.

**John Cooke Slow Food** agreed food was about pleasure, culture and connecting people in a community and should not be seen as “medicine”.

**Wendy Barrie Scottish Food Guide** thought hospital food should lead by example. **MW** mentioned work in Grampian where she thought the hospital food was good.

**Christine Fraser Food Training Scotland** thought those leaving hospitals should be given nutritional advice with their medicines for example combatting iron deficiency.

**Bill Gray CFHS** said that none of this could be done without volunteers. **MM** agreed. The Food Train had been set up by older people for older people when the social work department had declined to help. Their services were advertised in hospitals and some of their customers only used their service for a short time after coming home until they were on their feet again

**Mary Lawton CPG Food (ML)** asked about the use of infrastructure such as museums, school and workplace cafes that could be used to provide food. **MM** agreed and said that there was a huge potential there and also sourcing supplies from different places such as Fareshare. Manpower and co-ordination was needed.

**ML** asked given the UK Task Force work and her knowledge of the Scottish context, what Michelle thought were the quick wins that could be made to move the issue on. **MM** suggested:

- Train social care staff, community food staff and volunteers working with older people at risk to carry out [MUST](#) (Malnutrition Universal Screening Tool) screening
- Use [BAPEN nutritional care kit](#)
- Implement Food Fluid and Nut Care standards in Community settings
- Use cost benefit research already out there

- Create nutritional hospital discharge packs using existing resources from Food Standards Scotland and Age Scotland
- REHIS are developing an Elementary Introduction to detecting, preventing and treating Malnutrition for social care and community workers and volunteers and if funded could roll out across the country
- Set up a Scottish Task Force to look at learnings from the UK for Scotland

**LS** agreed that MUST was a valuable resource and in particular would be useful and empowering for carers.

**FD** had qualms with a Task Force if it focussed on older people, was modelled on the NHS UK and was concerned whether outcomes delivered from the UK Task Force were from the interventions made. **MM** thought that early indications showed they did. **ML** agreed to circulate links to the report when it was published.

ACTION: ML

**MW** said that she thought a Task Force was not needed in a formal sense but that everyone needs to pull together and share good practice.

**Rob Gibson** thanked the speakers and everyone for their contributions to the debate. He thought it was evident that malnutrition was an increasing but preventable problem with strong links to the loneliness agenda. It was agreed that minutes would be sent to both the Minister for Public Health and the Minister for Inequalities with letters from the CPG Food suggesting next steps.

ACTION: ML/MM/RG

#### 5. Food Standards Scotland -Situation Report / Jan 20th Board meeting

The [Situation report](#) “The Scottish Diet. It needs to Change” had been circulated with the Agenda.

GO reported that the recent [FSS report Monitoring foods and drinks purchased into home in Scotland](#), using retail data from Kantar World Panel showed that despite reductions in the purchase of soft drinks containing sugar, down by 21% since 2010, total sugar purchasing has not changed. FSS figures show that over the period 2010-2015, total calories purchased have not reduced at a population level in Scotland.

The report also provides evidence on food and drink shopping trends in Scotland over the past five years which confirms the large quantities of discretionary foods such as sweets, chocolate, crisps, savoury snacks, biscuits, cakes, pastries and sugary drinks being consumed by consumers in Scotland. **GO** said one of the

concerns of these figures was the potential for Type 2 diabetes which was preventable through diet.

The Board had discussed the paper [Diet and Nutrition: Proposals for Setting the Direction for the Scottish Diet](#) at their meeting on January 20<sup>th</sup>.

He stressed that the Board saw that the issue needed to be approached on many fronts, for example sugar was not the only factor. It was about behaviour change and changing long standing habits. Research was ongoing as to how best to make this change. Collaboration was needed and **GO** had just been at the third meeting of FSS with NHS Health Scotland and SG and was encouraged by the willingness for a coherent joined up way forward. Ross Finnie as Board Chair was keen to stress that this work was non-political and all should work together.

**RG** noted the similarities to discussions on climate change and how to change behaviours and get people to accept responsibility for their actions and play their part.

#### 6. Disbanding of the Group

**ML** said that the CPG Food would now be disbanded and reformed after the Scottish election on 7 May. She would hold conversations after that with MSPs regarding membership of the Group and hoped to reconvene in early September. **Rob Gibson** was not standing in the election and she thanked him for all his work on the CPG.

**ML** also thanked the other Co-Conveners for their help.

**John Scott** and **RG** thanked **ML** for acting as Secretary.

#### 7. AOB

**Antonia Ineson** Scottish Organic Forum referred to the new Action Plan for organic food and farming in Scotland from 2016 to 2020 had been launched that day. The [Organic Ambitions: Scotland's Organic Action Plan 2016 – 2020](#) aims to help organic food and farming build a more sustainable future, regenerate the rural economy and conserve biodiversity and natural resources.