

# EAT WELL, BE WELL POLICY

2025 - 2030



**LIVE  
LEARN  
WORK  
INVEST  
VISIT**

### Document Control

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# Foreword

## North Lanarkshire Council (NLC)

The Plan for North Lanarkshire is a shared ambition for inclusive growth and prosperity for all, where people choose North Lanarkshire as a place to live, learn, work, invest and visit. One of the five priorities set to achieve our shared ambition is to improve the health and wellbeing of our communities and a key aspect to achieve this is through empowering people to make healthier choices for their diet and nutrition. I am delighted to present the reviewed Eat Well Be Well Policy for North Lanarkshire.

The Public Health Priorities for Scotland sets as one of the main priorities a Scotland where we eat well, have a healthy weight and are physically active. To achieve this, we will focus on reducing inequalities, empowering people and communities but also through prevention and early intervention, fairness, equity and equality, collaboration and engagement, intelligence, evidence and innovation. The 2018-19 Programme for Government committed the Scottish Government to halve the level of childhood obesity by 2030 meaning that approximately 56,000 fewer children will be at risk of being obese.

The Good Food Nation Bill sets out our aspiration that Scotland's second nature will be to serve, sell and eat fresh, healthy food. The national agenda to improve health and wellbeing places local authorities at the heart of health improvement. The Diet and Nutrition Policy continues to feature a wider-ranging approach to health improvement, ensuring that the importance of improving diet and nutrition is raised across all council services. The policy will be reviewed on an ongoing basis to reflect any further directives, and a four-year action plan will be developed to support the additional recommendations.

Food insecurity is a dimension of poverty that has specific consequences for diet, health and wellbeing and a range of negative health outcomes across the life cycle. Household food insecurity is linked to inadequate intakes of certain nutrients and fruits and vegetables. Studies have shown poorer mental health and poorer health in adults living in food insecure households are more likely to suffer from chronic conditions such as diabetes, hypertension and mood and anxiety disorders. There are a variety of measurements that we will be taking to tackle poverty and food insecurity, and these include providing free meals to all P1-P5 primary school children and free breakfast for pupils who are from low-income families.



**Councillor Jim Logue, Leader of the Council,  
North Lanarkshire Council**

North Lanarkshire Council will continue to work with partners such as NHS Lanarkshire as well as the voluntary, community and private sectors which is the key to achieve any changes.

## National Health Service (NHS)

As the Director of Public Health and Health Policy for NHS Lanarkshire, I very much welcome the Eat Well, Be Well Policy for 2025-2030. Having good physical and mental health ensures people can live longer, healthier and more fulfilling lives.

Enabling healthier lives is a key priority for all partners within the newly published **National Population Health Framework**. Supporting access to good food is key to that.

A high proportion of the Lanarkshire population are living with overweight or obesity, which can lead to poorer health. The costs to individuals, our communities, the NHS, Social Care, employers and wider society is significant.

By working together as a whole system to improve nutrition and the food environment, we can support healthier diets and promote healthy weight to prevent cardiovascular disease, cancer, Type 2 diabetes and other chronic conditions.

The policy aligns with work that we are taking forward with partners through the Healthy Weight Public Health Action Team (PHAcT) and will contribute to our local plans to become a Good Food Nation.

As a partnership, we acknowledge the challenges. However, we are also very committed and hopeful that we can turn the tide and create the environment for healthier choices, particularly focussing on our most disadvantaged communities.



**Professor S. Josephine Pravinkumar,  
Director of Public Health and Health Policy,  
NHS Lanarkshire**

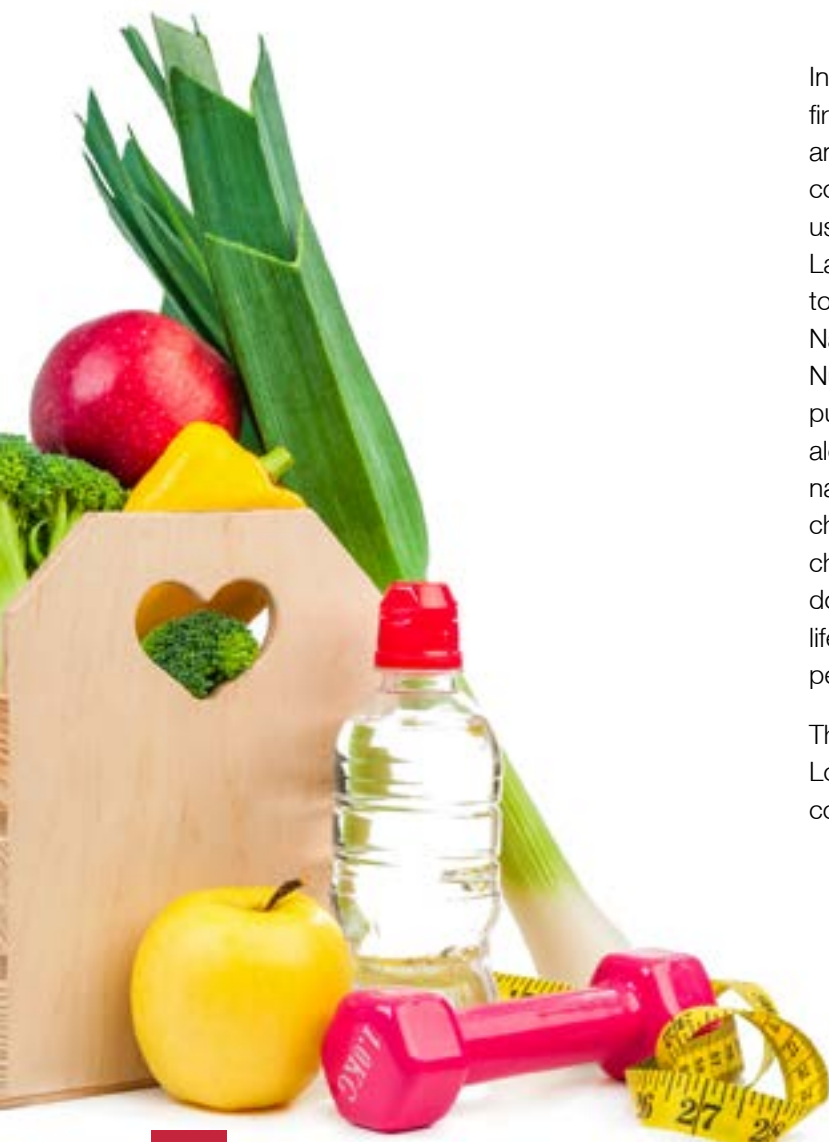


# Introduction

North Lanarkshire Council is Scotland's fourth largest local authority area with a rising resident population of 339,390 and is ideally situated in the heart of Scotland. The Plan for North Lanarkshire is a shared ambition for inclusive growth and prosperity for all, where people choose North Lanarkshire as a place to live, learn, work, invest and visit. Improving the health and wellbeing of communities is one of the five key priorities set to realise this ambition through empowering people to make healthier choices.

In 2000, North Lanarkshire Council was one of the first local authorities in Scotland to develop a diet and nutrition policy demonstrating the council's commitment to improving diet and nutrition for service users, residents and staff. During 2024/25, North Lanarkshire Council have been developing local plans to contribute to Scotland becoming a Good Food Nation and the review of the 2019-2014 Diet and Nutrition Policy, ensures that this better reflects current public health priorities and tackling poverty issues along with including a significant number of new national and local developments. Considering these changes, it was considered by the Working Group to change the policy to 'Eat Well, Be Well' Policy. This document is tailored to reflect food themes at each life stage throughout the life cycle, from birth to older people.

The next few sections will layout both the National and Local context in a multiagency approach to helping communities achieve a healthier future.



# National context - Legislative and Policy Landscape

The importance of diet and nutrition and frameworks / plans to support an improved approach to this, is a focus at both local and national level. There are several key areas which must be taken into consideration in the development of the Eat Well, Be Well Policy.

## Good Food Nation

The Scottish Government have set out a vision for Scotland to be “a Good Food Nation, where people from every walk of life take pride and pleasure in, and benefit from, the food they produce, buy, cook, serve, and eat each day.” **A Good Food Nation Bill to transform Scotland’s food system**

### **The Good Food Nation (Scotland) Act 2022**

provides the legislative framework enabling Scotland to take steps towards realising our vision. The Act underpins in law the work that is already being done across the Scottish Government to make Scotland a Good Food Nation.

### **Good Food Nation plans (Scottish Government, 2024)**

*“The Act places duties on Scottish Ministers, local authorities and health boards to produce Good Food Nation Plans. These Plans will set out the main outcomes to be achieved in relation to food-related issues, the policies needed to do this and the measures that will be used to assess progress”*

These Plans will help deliver the following outcomes:

- Our nation’s social and economic wellbeing
- The environment
- People’s health and physical and mental wellbeing
- Economic development
- Animal welfare
- Education
- Child poverty

## Scotland Public Health Priorities

The public health priorities represent important milestones underpinning the agreement between the Scottish Government and Local Government about the importance of focusing our efforts to improve the health of the population. The priorities connect strongly to and will help accelerate wider work including local strategic planning and partnership activity; the refreshed National Performance Framework and related National Outcomes

[Scotland's public health priorities - gov.scot](https://www.gov.scot/publications/scotland-public-health-priorities/summary/pages/10_to_12.aspx)

The priorities are:

**Priority 1** – A Scotland where we live in vibrant, healthy and safe places and communities

**Priority 2** – A Scotland where we flourish in our early years

**Priority 3** – A Scotland where we have good mental wellbeing

**Priority 4** – A Scotland where we reduce the use of and harm from alcohol, tobacco and other drugs

**Priority 5** – A Scotland where we have a sustainable, inclusive economy with equality of outcomes for all

**Priority 6** – A Scotland where we eat well, have a healthy weight and are physically active.

Priority 6 is of key importance in the context of this policy. To achieve this priority, an evidence based, and collaborative approach will be taken. Focus will be given to reducing inequalities and empowering people and communities but also in prevention and early intervention.

It should be noted that a Population Health Framework was published in June 2025. This is a Joint publication between Scottish Government and COSLA and a review of this will be required, in line with the policy as this framework may supersede the public health priorities. [Scotland's Population Health Framework - gov.scot](https://www.gov.scot/publications/population-health-framework/summary/pages/1_to_3.aspx)

## A Healthier Future - Scotland's Diet and Healthy Weight Plan (Scottish Government)

There is a vision for a Scotland where everyone eats well and has a healthy weight and aim to significantly reduce health inequalities, focussing on the following five key outcomes:

- Children have the best start in life - they eat well and have a healthy weight
- The food environment supports healthier choices
- People have access to effective weight management services
- Leaders across all sectors promote healthy weight and diet and finally
- Diet-related health inequalities are reduced

For further information on the plan, please visit A healthier future: [Scotland's diet and healthy weight delivery plan - gov.scot](https://www.gov.scot/publications/scotland-diet-and-weight-plan/summary/pages/1_to_3.aspx)

## The Scottish Dietary Goals (Scottish Government)

The Scottish Dietary Goals aim to improve the health of people in Scotland by reducing the incidence of diet related illness such as heart disease, strokes, type 2 diabetes and some cancers. Since they were set in 1996, there has been little or no progress towards achieving the goals as the Scottish diet remains too high in calories, fats, sugar and salt and too low in fruits, vegetables, oil rich fish and fibre.

The above national policies combined with local priorities and goals provide a comprehensive, robust and integrated framework from which to direct local policies and actions aimed at improving the diet, health, wellbeing and longevity of everyone in North Lanarkshire.

## Scottish Index of Multiple Deprivation (SIMD)

North Lanarkshire has areas with significant levels of deprivation and therefore is affected disproportionately by high levels of health inequalities. The Scottish Index of Multiple Deprivation (SIMD) is a relative measure of deprivation across 6,976 small areas (called data zones). The data zones relate to income, employment, health, education, skills and training, geographic access to services, housing, and crime. If an area is identified as 'deprived', this can relate to some people having a low income, but it can also mean fewer resources or opportunities for the people who live there. It is important to be mindful that not everyone living in the most deprived areas (data zones 1 and 2) is experiencing adversity and/or poverty ([Scottish Index of Multiple Deprivation 2020 - gov.scot](https://www.gov.scot/publications/scottish-index-of-multiple-deprivation-2020/pages/1-introduction-to-simd.aspx)).

SIMD ranks data zones from most deprived (ranked 1) to least deprived (ranked 6,976). Agencies using SIMD will tend to focus on the data zones below a certain rank, for example, the 5%, 10%, 15% or 20% most deprived data zones in Scotland.

North Lanarkshire is currently the 6th most deprived area and is followed by Glasgow, Inverclyde, North Ayrshire, West Dunbartonshire and Dundee in terms of the local share of data-zones in this 20% most deprived category.

North Lanarkshire has 447 named data zones which cover the council area, including 78 intermediate data zones.

The SIMD is made up of:

- An overall SIMD rank, where 1 = most deprived and 6,976 is least deprived
- 144 (35%) data zones in North Lanarkshire are within the 20% most deprived communities in Scotland. This share has increased since the 2016 SIMD.



# Local Context - North Lanarkshire Priorities

Improving the diet and nutrition of our communities will assist in closing the gap between the health of those living in our more deprived and affluent communities. Food provision must not only be healthy, but affordable, readily available and easily accessible to the population.

Improving diet and health in North Lanarkshire will be challenging, therefore partnership working is key to the implementation of this Eat Well, Be Well Policy. The Policy, and the actions within, are being considered in conjunction with the actions of key partners including NHS Lanarkshire, the voluntary and private sectors, as well as the communities we serve. These will be reviewed and considered through the Eat Well, Be Well Working Group.

North Lanarkshire Council is committed to the ongoing efforts to achieve the dietary goals outlined by the Scottish Government and becoming a Good Food Nation and intend on making the use of nutritious food easily achievable by ensuring that the healthier choice can be the easy choice.

The authority is also committed to providing healthy balanced school meals and adapted menus for special diet requirements, as this can impact on a child's health, growth, mood and academic achievement. The whole school approach to health and wellbeing ensures that our children and young people are given the right facts and information on the importance of making positive food and drink choices as they develop and grow.

Furthermore, the council recognise the short and long-term advantages of breastfeeding for both mother and baby and support breastfeeding as the optimal infant feeding choice. With significantly improved employer support through the introduction of the new Breastfeeding Policy. This provides appropriate support for mums to continue to breastfeed on their return to work.

NHS Lanarkshire and North Lanarkshire Council have worked in collaboration with the Scottish Government Maternal and Infant Nutrition Policy Team to pilot new Breastfeeding Friendly Scotland schemes. Breastfeeding Friendly Scotland Early Learning is a scheme for Early Learning and Childcare establishments. Establishments require to meet specified criteria such as having a breastfeeding champion, completing training, having a breastfeeding and return to work policy and take opportunities to talk to learners about breastfeeding. All Early Learning Settings have this award. The Breastfeeding Friendly Schools Award has also been piloted in over 80% of North Lanarkshire schools meeting the same criteria and includes breastfeeding within curriculum learning throughout the school years.

In addition to this, North Lanarkshire Council have worked to be a Breastfeeding Friendly Scotland Local Authority. This is a whole systems approach whereby a framework, including each department throughout the council, meets criteria and can evidence a Breastfeeding Friendly approach with a bronze, silver and gold criteria. This includes supporting babies to be breastfed wherever they may be, staff breastfeeding and returning to work policy, staff training and communications. North Lanarkshire have been awarded “Gold” in February 2024.

North Lanarkshire Council and NHS Lanarkshire are committed to meeting the diet and nutritional needs of the community through all stages of life from:

- Pregnancy & Parenthood
- Nursery & School
- Training & Adulthood
- Work life & Employment
- Retirement & Care



## A Trauma Informed Approach

Developing a trauma informed organisation and trauma informed service delivery is identified as a theme within North Lanarkshire Council’s programme of work. This embeds Trauma Informed Practice (TIP) within the council’s operating model. This policy addresses the importance of delivering diet and nutrition approaches in a manner consistent with the principles of Trauma Informed Practice.

Being ‘Trauma Informed’ means being able to recognise when someone may be affected by trauma, collaboratively adjusting how we work to take this into account and responding in a way that supports recovery, does no harm and recognises and supports people’s resilience.

Many people experience trauma, and it is not always known to services who may be affected by trauma in any given set of circumstances. It must be recognised that food can play a part in the experience of traumatisation and its ongoing effects.

The delivery of this policy to the people who use council services must therefore be carried out in a way that is consistent with the principles of TIP. These are:

- Choice
- Collaboration
- Empowerment
- Trust
- Safety

People using council services must be approached and worked with in a way that promotes trust and a feeling of safety, this applies to all aspects of the way we interact with people, including the provision of food. This policy encourages healthy relationships with food and drink. All staff should work collaboratively with service users to promote choice and should always be aware of the possibility of the experience of trauma impacting on people’s reactions to certain foods or circumstances around the serving of food. Services across the council are working towards being ‘Trauma Informed’.

# Food and Health – Eatwell Guide

There are strong links between food and health, and how diet can affect risk of developing conditions such as type 2 diabetes, heart disease, stroke and some cancers. According to The Health Foundation, 2023, Scotland has some of the worst health inequalities in Western Europe.

Life expectancy for females in the most deprived areas of Scotland is 10.5 years less than females in the least deprived, with a difference of 13.2 years for males. This disparity is even more apparent when looking at National Records of Scotland, healthy life expectancy, with a difference of 25 years for females and 26 years for males ([Life Expectancy in Scotland 2021-2023 - National Records of Scotland \(NRS\)](#)). It is therefore important to support individuals and communities in making healthier informed diet choices, and to consider the factors influencing individual food choice, such as social and economic factors, location and access to food, and individual knowledge and beliefs.

## The Importance of Eating Well

[The Eatwell Guide - NHS](#) gives a visual representation of the types and proportions of foods and drinks that should be consumed for a healthy and well-balanced diet. Following these recommendations can assist in the prevention of diet related conditions. It applies to most people over 2 years old; those under 2 require different amounts of energy, protein and fat to support their growth and development, and those aged 2-5 years will move towards following the Eatwell Guide as they adopt the diet of their caregivers.

The Eatwell guide is based on the five food groups:

- Fruit and vegetables: eat at least 5 portions of a variety of fruit and vegetables every day
- Potatoes, bread, rice, pasta and other starchy carbohydrates: choose wholegrain or higher fibre versions with less added fat, salt and sugar
- Beans, pulses, fish, eggs, meat and other proteins: eat more beans and pulses, 2 portions of sustainably sourced fish per week, one of which is oily. Eat less red and processed meat
- Dairy and alternatives: choose lower fat and lower sugar options
- Oil and spreads: choose unsaturated oils and use in small amounts.



# General – Ages and Stage of our Lifetime

North Lanarkshire Council aims to support an Eat Well, Be Well community through five groups of Ages and Stages.

1. Pregnancy and Parenthood
2. Nursery and School
3. Training and Adulthood
4. Work Life and Employment
5. Retirement and Care

The following sections will outline areas of general information, achievements and future plans for each of the ages and stages of this policy.

The last updated policy was for the time period 2019 – 2024. The new policy will be from 2025/26 – 2029/30 therefore the information contained within this report will detail achievements over the previous policy period.

## Public Health Priorities Scotland

- A Scotland where we flourish in our early years.
- A Scotland where we will eat well, have a healthy weight and are physically active.

Due to the volume of data being gathered for each of the different categories within this policy, there is a timelapse in the most accurate up to date information. This work is collated as a partnership between NHS, Lanarkshire Community Food and Health Partnership and North Lanarkshire Council services and the benchmarking data for this report and the latest data for this current version of the policy is based on outcomes for 2022/23.



This data going forward will be collected as part of the Eat Well Be Well working group and will be updated in the policy on an annual basis. The policy will be kept online as a live document.

# 1. Pregnancy & Parenthood

## Inclusive Statement

*"This document uses the words pregnant women, mother or mum to describe those pregnant and/or parent who is breastfeeding. We acknowledge that there are pregnant parents and parents who are breastfeeding who may have a gender identity other than female and may use terms other than 'mother' to describe themselves. We also know that some parents may prefer 'chest feeding' to 'breastfeeding'. We are clear that all parents should be treated with dignity and respect when accessing support. When we are asked to use pronouns, terms, and descriptors other than those in this document we will use the preferred words as part of individualised care"* (NHS, 2024)

## Infant and Maternal Nutrition

Nutrition is important at every stage of life, however, pregnancy and the months after can create unique dietary needs for both women and infants (Koletzko et. al 2019). During preconception and pregnancy stages, a healthy balanced diet with supplements is key to optimal nutritional status. It is recommended that women increase their intake of foods high in iron (red meat, green vegetables, fortified bread and cereals) to meet the demands on iron stores in pregnancy and to reduce the risk of anaemia. Increasing the consumption of folate, is equally as important (for instance, bread, fortified cereals, green leafy vegetables and pulses) (British Nutrition Foundation, 2024).

In addition, a healthy weight can improve chances of becoming pregnant and reduce risks of any pregnancy complications. It is important that women enter pregnancy within a healthy weight range. Maternal obesity (defined as a BMI 30kg/m<sup>2</sup> at the first booking appointment) poses a significant risk to the health of both mother and baby. NHS Lanarkshire support women by providing a Healthy Lifestyle in Pregnancy Service which provides evidence-based multidisciplinary support and person-centred care, for further information please see contact details below.

The NHS Healthy Lifestyle in Pregnancy Service provides additional lifestyle support. Women can either self-refer via 07770 698955 or ask their midwife for more information.

NHS Healthy Lifestyle in Pregnancy Service <https://www.nhslanarkshire.scot.nhs.uk/services/healthy-lifestyles-in-pregnancy-service/>

NHS Inform: <https://www.nhsinform.scot/healthy-living/womens-health/middle-years-around-25-to-50-years/pregnancy-and-maternity/planning-for-pregnancy/>

## Important Vitamins and Supplements

Summary of Achievements: 2019-20 / 2020-21 / 2021-22 / 2022-23 / 2023-24 NHS (Public Health Nutritionist / Specialist Dietitian) / NLC (Community Learning & Development)

- Universal maternal and postnatal vitamin scheme for all pregnant, postnatal (up to 1 year) and breastfeeding women. All those eligible receive free Healthy Start vitamins with distribution mainly via community midwives but also approx. 100 community venues and groups across Lanarkshire.
- CLD Family Learning Team support the Vitamin Distribution Scheme.



NHS Lanarkshire provides free Healthy Start vitamins for pregnant women throughout their pregnancy and for the first year after their child's birth. Healthy Start vitamins are available free to all pregnant women who live in Lanarkshire and contain the recommended dosage of folic acid, vitamin D and vitamin C. Women should obtain these from their midwife. In the first year after birth, women can obtain their free vitamins from their Health Visitor, family nurse or numerous health centres and community venues. Their health visitor or family nurse can provide an up-to-date list of where to obtain them.

For further information on nutrition during pregnancy and vitamins and supplements, please refer to

**APPENDIX 1: PREGNANCY AND PARENTHOOD.**

## Breastfeeding

Breastfeeding is one of the most effective ways to ensure child health and survival. The World Health Organisation (WHO) recommends that breastfeeding mothers exclusively breastfeed their babies up to six months of age (Breastfeeding). Thereafter, breastfeeding should continue alongside the introduction of appropriate solid foods, for up to two years of age or for as long as the mother chooses (Complementary feeding).



**Summary of Achievements: 2019-20 / 2020-21 / 2021-22 / 2022-23 / 2023-24**

NHS (Public Health Nutritionist / Specialist Dietitian)

**PHS Annual National Infant Feeding Statistics**

**2022/23 Infant Feeding Statistics Scotland**

**Breastfeeding Initiation** has increased to 66% in 2022/23, a rise of 1 percentage point from last year.

- North Lanarkshire has increased to 48.8%, a rise of 2.8 percentage points from last year.
- NHS Lanarkshire has increased to 52.9% in 2022/23, a rise of 2.2 percentage points from last year.

**Breastfeeding Rates at First Visit (10-14 days)**

increased to 57% in 22/23, a 2-point increase since last year.

- NHS Lanarkshire rates have increased to 43.3% in 2022/23 a rise of 2.4 percentage points since last year.
- North Lanarkshire has increased to 39%, a rise of 2.5 points since last year.

**Breastfeeding Rates at 6-8 weeks** - increased to

47% in 2022/23, a rise of 1 percentage point from last year.

- NHS Lanarkshire Breastfeeding rates have increased to 34.4% a rise of 4.1 percentage points from last year.
- North Lanarkshire rates have increased to 30.4% a 3.8-point increase since last year.

**Sustained rate of Exclusive breastfeeding at 6-8 weeks** 32% in 22/23 (2-point increase since 16/17).

- NHS Lanarkshire Exclusive Breastfeeding 23% in 22/23, a 1.5-point increase since last year.
- North Lanarkshire Exclusive Breastfeeding 20.2% in 22/23, a 1.5-point increase since last year.
- **NHS Lanarkshire maternity unit** together with North and South Health and Social Care partnerships were delighted to be awarded the “Baby Friendly Achieving Sustainability Gold award” the assessors praised the work going on in Lanarkshire to improve experiences for families and stated it was the most comprehensive application they had ever received.
- 8 Community Learning & Development (CLD) Family Learning Team members are Breastfeeding Champions.
- CLD Homelink Workers attend Locality Breastfeeding Improvement Groups to ensure ongoing development.

NHS Lanarkshire has invested in a permanent Breastfeeding Support Service. This, alongside the Breastfeeding Friendly Scotland Local Authority Scheme, creates a community where breastfeeding is supported and enabled is making a difference. Lanarkshire has historically had one of the lowest breastfeeding rates in Scotland, however local breastfeeding support services has resulted in a gradual but sustained rise in rates. In 2017/18, 26.6% of babies were breastfed at 6-8 weeks compared to 2022/23 where 34.4% of babies were being breastfed at 6-8 weeks.

The Breastfeeding (Scotland) Act 2005 now makes it an offence to prevent or stop a person in charge of a child under the age of 2 years, who is otherwise permitted to be in a public place, from feeding milk to that child. In 2004, North Lanarkshire Council signed up to NHS Lanarkshire's Breastfeeding Friendly Scotland Campaign. This ensures all Council establishments will welcome and support any mother who wishes to breastfeed her baby, making certain they are undisturbed by both staff and other service users whilst doing so.

## Breastfeeding Friendly Scotland

The Breastfeeding Friendly Scotland scheme is a Scottish Government supported national scheme, implemented locally by NHS Boards which aims to:

- Provide mothers with positive experiences of breastfeeding when out and about, enabling mothers to feel confident and supported.
- Raise awareness of the Breastfeeding etc. (Scotland) Act 2005 and the Equality Act 2010.
- Ensure that organisations are aware of their responsibilities under this legislation.



### Summary of Achievements: 2019-20 / 2020-21 / 2021-22 / 2022-23 / 2023-24

NHS (Public Health Nutritionist / Specialist Dietitian) / NLC Community Learning & Development

- NHS Lanarkshire and North Lanarkshire Council have worked in collaboration with the Scottish Government Maternal and Infant Nutrition Policy Team to pilot and test 3 new Breastfeeding Friendly Scotland schemes. Breastfeeding Friendly Scotland Early Learning - a scheme for Early Learning and Childcare establishments (including childminders) where settings have met a criterion to have a breastfeeding champion, completed training, have a breastfeeding and return to work policy and take opportunities to talk to learners about breastfeeding - 100% of NLC Early Learning Settings have the award.
- Breastfeeding Friendly Scotland Schools - a scheme for Primary and Secondary Schools (including ASN) 80% of NLC schools have the award - as above criteria with different resources to support age and stage throughout the curriculum.
- Breastfeeding Friendly Scotland Local Authority - a whole systems approach whereby a framework including each department throughout the LA meets criteria and can evidence a Breastfeeding Friendly approach with a bronze, silver and gold criteria - this includes supporting babies to be breastfed wherever they may be, staff breastfeeding and returning to work policy, staff training and communications. NLC were awarded "Gold" in February 2024.
- North Lanarkshire Council has signed up all premises and arm's length external organisations (ALEOs) to the Breastfeeding Friendly Scotland Scheme so that wherever breastfeeding families may be, they will receive a warm welcome.
- CLD Homelink Workers attended Introduction to Solids Training to ensure delivery is up to date and relevant when discussing weaning.

Healthy Schools resource has key messages around breastfeeding embedded across every stage with appropriate links to quality teaching resources and current Health Improvement messages contained in the suggested activities. This means that messaging is introduced to the learners throughout their school journey before any negative attitudes are formed.

Specifically, the council has implemented several changes including:

- Improved employer support through the introduction of a corporate breastfeeding policy with workplaces. This is set up to enable women to continue breastfeeding/expressing in a private room if required, with refrigeration facilities when returning to work.
- Established nine community breastfeeding champions of mixed gender, who work with health colleagues in communities to promote and support breastfeeding.
- All early year's establishments achieved Breastfeeding Friendly Scotland Early Learning and Childcare award and 80% of all school establishments achieved Breastfeeding Friendly Schools award. This includes NHS breastfeeding awareness training, embedding breastfeeding in the curriculum and play environments in nurseries. Early years have also been redesigned to promote an environment where breastfeeding is seen as the biological norm for feeding infants and young children.
- All new-build facilities including community hubs will have breastfeeding facilities designed in at the planning stage.
- Foster carers completed NHS training on responsive feeding, financial support and social work staff trained on infant nutrition and benefits of breastfeeding.
- Libraries, leisure and sport facilities provide a warm welcome space and facilities for breastfeeding on site.
- Road signage, public buildings and fleet vehicles will have BFS signage in place.

Notably, North Lanarkshire has seen a rise in initiation of breastfeeding since the implementation of this work and has increased 7% since 2016/2017 to 50.7% in 2023/2024, meaning for the first time, more than half of all babies in North Lanarkshire have had some breastmilk after birth. (PHS, 2024).

For more information on Breastfeeding diet, see **APPENDIX 1: PREGNANCY AND PARENTHOOD.**

## Best Start Foods

**Summary of Achievements: 2019-20 / 2020-21 / 2021-22 / 2022-23 / 2023-24** NHS (Public Health Nutritionist / Specialist Dietitian)

Promotion of this benefit where relevant which is also included in all local Health Improvement and Community partner work. No national data currently available on local uptake and eligibility which continues to be requested from the national team.

**Best Start Foods** is a payment for pregnant women and families with children under 3 to help towards the costs of healthy foods such as fresh milk, fresh, plain frozen and tinned fruit and vegetables, eggs, pulses and first infant formula milk. It is for those in receipt of certain benefits, no access to public funds or those under 20 years' old. Best Start Foods is paid every 4 weeks onto a prepaid card. To find out more and/or how to apply visit [here](#), or go to <https://www.mygov.scot/best-start-grant-best-start-foods>.



## 2. Nursery and School

### Early Years and Young Children

During the early years, young children require a well-balanced diet, and from 2 years onwards can follow the Eat Well Guide. Children require nutritious meals to support growth and development, that aids learning and social skills, and can encourage continuation of healthy habits later in life (Schwarzenberg et al. 2018).

Food and drinks provide young children with the energy they require to grow and be physically active. It is important that there is a balance between energy intake from food, and expenditure through growth, activity, and play. This will help children reach and maintain a healthy weight. The amount of energy a child needs can vary and is dependent on age, gender, growth rate, and activity levels (NHS 2023).

Children who eat fruit and vegetables, some wholegrain / wholemeal foods, and pulses (peas, beans, and lentils) are likely to be consuming an adequate level of vitamins, minerals and dietary fibre. High- fibre foods, such as wholemeal bread, wholemeal pasta and brown rice tend to be bulky and can fill young children up too quickly. Therefore, care should be taken to ensure young children are not given excessive amounts of high-fibre foods before the age of 2 years (NHS 2023).

Consumption of added sugar, also known as free sugars, now (historically this was referred to as non-milk extrinsic sugar), should be restricted. These sugars are harmful to teeth, can contribute to unnecessary weight gain, increase the risk of other health conditions. Free sugars are found in confectionery, biscuits, cakes, table sugar, soft drinks, fruit juice, yogurts, and some breakfast cereals. Plain milk, natural yogurt, fruit, and vegetables in their natural form contain only natural sugars (intrinsic) and are therefore less harmful to teeth (Mahboubi et al., 2021).

| Summary of Achievements: 2019-20 / 2020-21 / 2021-22 / 2022-23 / 2023-24   |         |         |         |         |         |
|--|---------|---------|---------|---------|---------|
| Universal Children’s Vitamin D (ProHealth) - free Vitamin D drops to all infants and children from birth until their 3rd Birthday. Distribution via health visitors, family nurse, health improvement and over 100 community venues across Lanarkshire including health centres, libraries and community partner and 3rd sector groups. Uptake increased over the years as awareness increases and through partnership working and learning from tests of change. 2023/24 data table available for all products (including for pregnancy). |         |         |         |         |         |
| <ul style="list-style-type: none"> <li>• CLD deliver Family Learning Groups with a focus on nutrition e.g., Big Chef, Little Chef.</li> <li>• CLD Family Learning Team delivered workshops in partnership with Specialist Dietitians from ND service to look at eating challenges with ASD children.</li> <li>• CLD Family Learning Team delivered Food for Mood Programme in partnership with LCFHP authority wide. Funding provided by Bellshill Consortium.</li> </ul>  |         |         |         |         |         |
| Number of Nursery Meals Provided (No of children / no of meals served)   |         |         |         |         |         |
|  | 2019-20 | 2020-21 | 2021-22 | 2022-23 | 2023-24 |
| <b>No. of children</b>   | n/a     | 2,587   | 5,045   | 5,200   | 5,200   |
| <b>Meals served</b>  | n/a     | 491,506 | 958,467 | 977,600 | 982,800 |

## 1140 hours Early Learning & Childcare

In line with the Children and Young People (Scotland) Act 2014, all three to five-year-olds, as well as some two-year-olds, are entitled up to 1140 hours Early Learning and Childcare.



## Nursery Menu

Eating well is essential for children in their early years; Setting the Table Guidance (2024) provides nutritional standards and practical guidance for Early Learning and Childcare Providers in Scotland. These standards support Facility Support Services to create healthy meals based on scientific evidence. This guidance ensures that all children in early years' settings receive nourishing meals, snacks, and drinks to support learning and development.

### Setting the Table Guidance, 2024

<https://www.gov.scot/publications/setting-table-guidance/documents/>

The council nursery menu provides a healthy balanced meal containing a minimum of two portions of vegetables, one portion of fruit and a glass of water and milk or milk alternatives.

For further information on the nursery menu, please visit: <https://www.northlanarkshire.gov.uk/schools-and-learning/school-meals-0/nursery-school-menu>

## Scottish Milk and Healthy Snack Scheme

Any child aged five years and under, who attends a registered setting for two hours or more a day, will be entitled to receive milk and a healthy snack (such as a piece of fruit) for free.

Eligible childcare settings which are registered with the Care Inspectorate, who register for the new scheme, will receive agreed funding via local authorities to provide cow's milk (or, where children cannot drink cow's milk, a specified alternative) and a portion of fruit or vegetables to pre-school children who are in registered daycare for two hours or more (Care Inspectorate, 2018).

Children will receive the milk and healthy snack once a day, even if they attend more than one setting in a day. Parents and providers will be responsible for discussing how this should be managed in line with existing arrangements for agreeing division of responsibility for meals, with the expectation that the first setting that the child attends will provide the milk and snack.

The Scheme is open to all organisations or individual childminders who meet these requirements and not just those who work in partnership with the council. This includes playgroups or other early years organisations that look after young children for more than two hours a day.



# School Children and Young People

## School Meals in Scotland

School meals in Scotland were transformed by the Hungry for Success Initiative and the schools (Health Promotion and Nutrition) Scotland Act 2007. These influential strategies supported health promotion guidance for local authorities and schools to improve health and wellbeing. Schools represent one of the best places to educate children around food and health to promote positive health behaviours in a meaningful way providing opportunities to explore new tastes and textures of different foods. School can also play a fundamental part in developing a child's relationship with food and to understand the broader elements of food and environment such as the food chain, climate change, economy and health.

The council recognises that food in school matters - both what children and young people eat and what they learn about. Over the last few years, Scottish Government have provided funding to all Scottish Local Authorities to assist with the priority of supporting ways in which to reduce child poverty across Scotland. Universal Free School Meals are now available for all Primary 1 – Primary 5 pupils.

In February 2025, a further investment was undertaken to ensure that all children whose parents received the Scottish Child Payment benefit also received a universal free school meal. There has been a massive investment in capital to invest in the infrastructure across Scottish schools in preparation for the further roll out of Primary 6 and Primary 7 universal free school meals. At the moment no date has been agreed for this.

Scottish Government are also operating pilots at the moment in relation to primary school breakfast and pilots in secondary schools regarding the roll out of UFSM expansion. However, NLC has also invested to ensure that all primary school children who are entitled to a free school meals are also entitled to a free breakfast. Again, this is a council initiative to ensure those children and others who may be living in poverty are receiving all the nutritional benefits in being provided with a breakfast before starting the school day. The added value to providing these free nutritional meals ties in with the national goal to reduce child obesity across Scotland.



## School Meals and Health - National Context

The Nutritional Requirements for [Food and Drink in Schools \(Scotland\) Regulations 2020](#) place obligations on schools to provide healthy and nutritious food. Local authorities have further obligations to meet children's healthcare needs under the [Education \(Additional Support for Learning\) \(Scotland\) Act 2004](#). Children and young people with additional health needs may require an adapted school menu, such as support for food allergies or diabetes etc. For further information see Appendix 2: Nursery and School.

The standards required by the Act are closely linked to the health and wellbeing aspects of Curriculum for Excellence and place health at the heart of school learning and school life. The Curriculum for Excellence was launched in 2010 and provides a framework for learning and teaching including maintaining a holistic approach to health and wellbeing, which also provides experiences and outcomes for children around food and health. Better Eating, Better Learning sets school food in a strategic context and by doing so shows how everyone involved in school food can have an impact (Scottish Government, 2014 [Better Eating Better Learning A New Context for School Food](#)).

Beyond the School Gate guidance provides practical advice on how we can work together to positively influence the food environment outside of schools looking to provide better support for children and young people, and the wider community, to make healthier choices.

## United Nations Convention on the Rights of the Child (UNCRC)

The United Nations Convention on the Rights of the Child (UNCRC) is a legally binding international agreement setting out the civil, political, economic, social, and cultural rights of every child, regardless of their race, religion or abilities. For further information on the UNCRC, please refer to **APPENDIX 2: NURSERY AND SCHOOL.**

## Healthy Schools

The Healthy Schools approach aims to support children and families to improve their health and wellbeing. Through a partnership approach designed to build healthy lives within and beyond the curriculum. The approach works in several ways. The first part is a teaching framework that has been developed by NHS Lanarkshire working with North and South Lanarkshire Education Services. It has been designed specifically to address the need for a coordinated holistic approach to health and wellbeing education in our schools and early year's establishments.

The Healthy Schools resource has key healthy eating messages embedded across all levels with appropriate links to quality teaching resources and suggestions for practical activities.



# Care Experience Children, Young People and Young Adults

## Corporate Parents Support

Care experienced children are likely to have lived through trauma, neglect and poverty. These experiences might come with higher levels of health inequalities compared to their typically developing counterparts. In terms of food and health children may also have a negative relationship with food.

The responsibilities continue to apply until the care leaver reaches their **26th Birthday - Corporate parents** have many of the same roles as **parents** do.

## Guiding document

Guidance was taken from Health & Social Care Standards: My Support, My Life. This document outlines guiding principles and standards in working with care experienced young people and young adults. There are outlined in the table below:

| Guiding                   |   |
|---------------------------|---|
| Guiding Principles        | Guiding Standards   |
| Dignity and respect       | 1. I experience high quality care and support that is right for me.                   |
| Compassion                | 2. I am fully involved in all decisions about my care and support.                    |
| Be included               | 3. I have confidence in the people who support and care for me.                       |
| Response care and support | 4. I have confidence in the organisation providing my care and support                |
| Wellbeing                 | 5. I experience a high-quality environment if the organisation provides the premises. |

For more information on the specific standards, see **APPENDIX 3: TRAINING AND ADULTHOOD.**

# School Meals and Health – Nutritional Context

## School Meals in North Lanarkshire Council

Facility Support Services in 2024-25 reviewed both primary and secondary school menus to ensure all the children’s favourite dishes were incorporate but also ensuring that several new dishes were supported on the menu. The menu was implemented at the beginning of June 2025 and ran until the end of term to allow feedback and consultation with catering managers, parents and children. The menu was slightly adapted to incorporate some of the further suggestions from the children. Please find below links to both primary and secondary menus.

[Primary school menu | North Lanarkshire Council](#)

[Secondary school menu | North Lanarkshire Council](#)

To find out more about this resource, please see **APPENDIX 2: NURSERY AND SCHOOL (Healthy Schools).**



## Special Diets

Special or therapeutic diets provide support in managing diagnosed conditions, with the aim of improving symptoms and preventing further health complications. Depending on the condition in question, such diets may be either long-term or short-term, but in any case, they should be monitored by a qualified health professional or dietician. Most prescribed diets are for conditions such as Type 1 Diabetes, Coeliac Disease, Food Intolerances and/or Food Allergies.

Food allergies affect approximately 1-10% of the global population. For several reasons, prevalence levels vary between cohorts and populations (Gupta et al., 2023). Food allergy is increasing annually and represents a growing problem in industrialised countries such as the UK.

The councils Facilities Support Services staff cater for a variety of special dietary needs which are required for many reasons, including medical, cultural, religious and ethical purposes. The Service provides an adapted menu to suit an individual child's needs, such as children with a milk allergy, require a dairy-free menu or alternatively, children with diabetes require a carbohydrate-count menu. Facility Support Services have recognised a significant increase in the number of children, both nursery and school, with allergens and intolerances to food.

Council services are required to provide for children with different food allergies and special diets, however, restrictions for some should not result in restrictions for all. Best practice requires good food-safety procedures and hygiene methods being in place, to minimise risk of reaction or cross contamination, alongside regular training and update sessions for partners and staff in this rapidly changing area of dietary provision.

For more information on special diets see **APPENDIX 2: NURSERY AND SCHOOL.**

### Summary of Achievements: 2019-20 / 2020-21 / 2021-22 / 2022-23 / 2023-24

- All catering managers within ASN, primary and high school settings with textured and modified diets underwent Dining with Dignity training.
- All catering staff undertake allergy training (Natasha's Law).
- All catering staff will either receive REHIS training or Introductory Food Hygiene training (est. 433 catering staff trained per annum)
- FSS provide a training gateway for succession planning for Catering Manager roles (SVQ Kitchen Skills SCQF Level 5). Approx. 10 staff per annum.

### ACTUAL NUMBER OF MEALS SERVED (Free / Paid / Total)

| 2019-20      |                  | 2020-21      |                  | 2021-22      |                  | 2022-23      |                  | 2023-24      |                  |
|--------------|------------------|--------------|------------------|--------------|------------------|--------------|------------------|--------------|------------------|
| Free         | 2,087,333        | Free         | 1,068,549        | Free         | 2,289,658        | Free         | 2,702,590        | Free         | 2,829,283        |
| Paid         | 1,671,406        | Paid         | 545,611          | Paid         | 819,458          | Paid         | 842,047          | Paid         | 971,303          |
| <b>Total</b> | <b>3,758,739</b> | <b>Total</b> | <b>1,614,160</b> | <b>Total</b> | <b>3,109,116</b> | <b>Total</b> | <b>3,544,637</b> | <b>Total</b> | <b>3,800,586</b> |

### TOTAL VOLUME OF MEALS SERVED

| 2019-20   | 2020-21   | 2021-22   | 2022-23   | 2023-24   |
|-----------|-----------|-----------|-----------|-----------|
| 3,758,739 | 2,105,666 | 4,067,583 | 4,522,237 | 4,783,386 |

### NUMBER OF SPECIAL DIETS (Medical Diets)

| 2019-20 | 2020-21 | 2021-22 | 2022-23 | 2023-24 |
|---------|---------|---------|---------|---------|
| 81      | 78      | 312     | 390     | 425     |

## Oral Health (Childsmile)

### Childsmile – Improving the oral health of children in Scotland

Childsmile is a national programme designed to improve the oral health of children in Scotland and reduce inequalities both in dental health and access to dental services. **Childsmile – Improving the oral health of children in Scotland**

It is funded by the Scottish Government and has three main elements:

- -Toothbrushing
- -Community and Practice
- -Fluoride Varnish

Currently nursery establishments and primary schools are taking part in the national Childsmile Programme to prevent dental disease. Consideration should be given by both catering staff and teaching staff to help reduce children's overall access to sugar whilst in the care of education. The consumption of drinks and snacks containing sugar between meals is a concern. Staff should reinforce that the only safe drinks for teeth are plain water and milk and snacks between meals should be sugar free, including those brought from home.

Although dental decay (caries) is a preventable disease, Scotland still has high levels of tooth decay. Appendix 6a and 7 is the % (of people) with no obvious decay experience in permanent teeth. (Public Health Scotland, 24 October 2023) which shows that there has been progress made both nationally and in Lanarkshire since 2005, but there remains much work to do.

National targets are currently set at 75% of Primary 1 children and 80% of Primary 7 children with no obvious decay experience in permanent teeth by 2024 (The Minister for Public Health and Women's Health, 2023).

This means, the targets for Lanarkshire by 2024 are 74.6% for P1 and 74.9% for P7 with no obvious decay experience in permanent teeth (Minister for Public Health and Women's Health and Health, Social Care and Sport Committee, 2023). Although NHS Lanarkshire has already met the target for P7 (NDIP 2023 P7 detailed report, reported that 77.6% had no obvious decay experience) (Public Health Scotland, 24 October 2023), there remains an inequalities gap.

There has been an improvement in the inequality measures, but dental health inequalities persist. Only 71.9% (49.9% in 2009) of P7 children living in the most deprived quintile have no obvious decay experience compared to 88.0% (76.2% in 2009) living in the least deprived quintile (Public Health Scotland, 24 October 2023).

The percentage of Primary 7 children with no obvious decay experience in permanent teeth inspections since 2017 in North and South Lanarkshire can be seen in appendix 6b (% with no obvious decay experience in permanent teeth) (Public Health Scotland, 24 October 2023).

If the dental health of Scotland's children and young people is to improve, then a collaborative preventative approach to reducing tooth decay is required and key oral health messages should be promoted in a variety of settings. Messages should not only encourage the reduction in the overall volume of sugar but also a reduction in the frequency of sugar consumption, brushing twice daily with fluoride toothpaste and regular dental visits, as per Healthier Scotland's Oral Health Improvement Plan (Scottish Government, 2018 **[Oral health improvement plan - gov.scot](#)**).



**Summary of Achievements: 2019-20 / 2020-21 / 2021-22 / 2022-23 / 2023-24**

**NHS (Health Improvement)**

The National Dental Inspection Programme (NDIP) reports 2020 - 2023.

NDIP 2020 P1 report, informed that in school year 2019/20, 72% of P1 children in Lanarkshire had no obvious dental decay experience (73.5% in Scotland). The report states that 72.4% of P1 children in North Lanarkshire and 72% of P1 children in South Lanarkshire had no obvious dental decay experience.

NDIP 2022 P1 report (school year 21/22), stated that due to the COVID-19 public health measures that were in place until January 2022, it was agreed that dental staff would only undertake a Basic Primary 1 inspection.

The main points in NDIP 2022 P1 report and summary report are:

- 73.1% of P1 inspected in 2022 were estimated to have no obvious decay experience. The experience by board table shows the results for NHS Lanarkshire as 74% of P1 children had no obvious decay experience.
- The proportion of children estimated to have severe decay or abscess increased from 6.6% in 2020 to 9.7% in 2022.
- Inequalities remain, with 58.4% P1 children in Scotland estimated to have no obvious decay experience in the most deprived areas (SIMD 1), compared with 85.8% in the least deprived areas (SIMD 5).
- Lanarkshire is reported to have had an inequalities gap with 61.5% of Primary 1 children in Scotland estimated to have no obvious decay experience in the most deprived areas (SIMD 1), compared with 88.6% in the least deprived areas (SIMD 5).

The NDIP 2023 P7 report, reported that in school year 22/23 77.6% (81.9% in Scotland) of P7 children in Lanarkshire had no obvious decay experience. The report stated that 77.3% of children in North Lanarkshire and 78.1% in South Lanarkshire had no obvious decay experience.

For further information on Childsmile please refer to

**APPENDIX 2: NURSERY AND SCHOOL.**



## 3. Training and Adulthood

### Physical Activity

Staying physically active is one of the absolute best things we can do for our physical and mental health. It helps to prevent heart disease, strokes, diabetes, and several cancers as well as playing an important part in helping us maintain a healthy weight and reduces the risk of developing depression (Chan et al. 2019); Posadzki, et al. 2020) Physical activity and sport have a transformative effect on individuals and communities. They provide opportunities for people to connect with their neighbourhoods and come together in shared activities which inspire and motivate. Sport and physical activity provide a powerful means of addressing isolation, building community cohesion and developing confidence <https://www.gov.scot/policies/physical-activity-sport/>

Physical activity is also fundamental to energy balance and weight maintenance. Adequate physical activity levels can reduce the risk of cardiovascular disease and promote positive physical and mental health and well-being (NHS, 2024).

Adults should aim to be active daily. Over a week activity should add up to 150 minutes (2 ½ hours) of moderate intensity activity (Scottish Government, 2019). One way to approach this is to do 30 minutes over 5 days with an additional 2 strength sessions per week. This is the same advice for older adults but adding on a flexibility session.

Children should engage in at least 60 minutes of moderate to vigorous intensity activity every day (Scottish Government, 2019).

The Council is committed to achieving their strategic physical activity outcome of more people enjoying the benefits of having a physically active life by increasing participation in community based physical activity programmes by increasing the uptake of the Active Health Programme, increasing the number of people referred to exercise referral classes participating in these classes and increasing Active NL memberships.

## Food and Health within Communities

The promotion of a healthier diet in tandem with increasing levels of physical activity is key to improving the health of communities and tackling health inequalities within North Lanarkshire and Scotland. There are a range of national and local initiatives which exist to tackle food issues in low-income communities including the availability and affordability of healthy food, shopping skills, cooking skills, and food culture for example LCFHP. Increasing the availability of healthy food in low-income and rural communities needs to address quality as well as cost, particularly in terms of fruit and vegetables.

Affordability of transport to and from shops and markets can be just as important as the cost of food itself. Improving cookery skills and challenging ingrained habits which have led to poor dietary health, are central to community action.

In collaboration with partners such as NHS Lanarkshire and LCFHP, the council is committed to supporting projects which aim to address food poverty and poor diet through community action.

This includes:

- Supporting LCFHP to provide fresh fruit and vegetables, as well as deliver a range of healthy eating activities for children, parents and families.
- Supporting LCFHP to train staff and partners to deliver a range of cooking skills and nutritional advice sessions targeting low-income groups within community settings across North Lanarkshire.
- Supporting the work of community cafes, food co-ops and other community food and health initiatives by, for example, providing kitchen equipment, expert advice and training.
- Providing support for the development of healthy living projects, with improving diet as their key aim.
- Ensuring diet and nutrition is central to wider plans for social inclusion and community regeneration.

The table below outlines the summary of achievements in relation to Training and Adulthood.

| Summary of Achievements: 2019-20 / 2020-21 / 2021-22 / 2022-23 / 2023-24  |
|---|
| <ul style="list-style-type: none"><li>• Over the 5-year period 2019 to 2024, provision of a range of targeted programmes has been delivered by North Lanarkshire Leisure Ltd and following a return to North Lanarkshire Council (Active &amp; Creative Communities) in 2021 which contribute to PHP6 – ‘A Scotland where we will eat well, have a healthy weight and are physically active.</li><li>• Active Health, funded through NHS Lanarkshire and Communities Solutions but sitting within NLC, has provided a consistent and successful programme of activity to connect and support individuals with a range of low to high-risk health conditions back into physical activity. Over the 5-year period of the strategy, these programmes have linked 17436 individuals to activities to help maintain a healthy lifestyle while increasing physically activity levels and reducing sedentary behaviours. Additionally, 75408 attendances have been recorded through the Specialist Health Class programme for high-risk individuals with long term conditions. Captured within both of these figures are specific areas of work addressing healthy weight through the Weigh to Go Programme, a Tier 2 programme at a community level which is part of the Lanarkshire Weight Management Service. This programme delivers 14 weekly courses looking at changing behaviour, education and physical activity and operates both on a referral and self-referral basis. 1286 specific referrals have been processed for W2G over the 5-year period of the strategy. A separate 891 people had ‘Reduce Body Weight’ as a main reason for referral noted on their Active Health referral Form. Additional Tier 3 support has been offered to Children and Adults with high BMI levels linking them to intensive dietetic, psychological and personal training sessions.</li><li>• <b>Health improvement referral programme 2021-2024</b> - Pre COVID this 12-week Nutrition and exercise programme was introduced it is aimed to tackle prediabetes, high blood pressure or any other condition that can be improved through a change in diet and regular exercise. The programme consists of an initial consultation appointment then 3 further face to face appointments (weight and bodyfat/BMI check) over the course of 12 weeks. Throughout the programme there is constant diet support through food diaries and check ins. There is also support into exercise and 6 months free ActiveNL membership included.</li><li>• <b>Active NL</b> – there are membership options to support people into physical activity. Reduced passport to leisure rates for students and people in receipt of benefits, corporate discounts, over 60s membership (£60 per year) and active teens (£5 per month). Active NL have several leisure centres and swimming pools and over 700 fitness classes per week to help support people into physical activity. Customer Journey is included in every membership, where members are encouraged to book in for a programme to help facilitate exercise and create a focus in the gym. This programme is followed up and reviewed every 12 weeks. Total health and fitness membership base to date is 30,706 across NLC.</li><li>• <b>Slim Start</b> - Weight management class (new for 2024) - Classes are charged per time and create a group environment. For accountability there are weekly food diaries. The class uses calorie counting to ensure sustainability and healthy habits.</li><li>• <b>Full of Beans (2019-present)</b> - Ran by our sports development department. 10 week running blocks in community hubs and leisure centres. This is a free programme, and anybody can attend, it is parent and child participation at set days/times. Each week the children are encouraged to take part in some exercise then there is a brief talk/discussion on a nutrition/healthy eating topic, centred around the Eatwell plate.</li></ul> |

## 4. Work life and Employment

### Wellbeing of Employees

North Lanarkshire Council is committed to improving the health and wellbeing of all its employees, particularly through the promotion of a healthy diet and lifestyle. This will be done by creating a supportive and healthy work environment, promoting health improvement initiatives, and providing health benefits for staff.

NLC Cafes will adopt the principles of the Eating Out, Eating Well initiative (**Eating Out, Eating Well**). This will aid the transition to a healthy, sustainable, and affordable balanced diet throughout all the Council's hospitality establishments.

### On-site catering

The main principle of onsite catering is to offer healthy food and drink options. The use of promotion and marketing activities is adopted to support and encourage healthier eating.

Further actions and goals are set out in the 'Café, Coffee and Sandwich Shops - action and top tips publication' (PHS, 2024). This sets out clear guidelines on the approach and expected delivery which include actions already achieved, but also sets out further actions such as calorific information, sustainable food choices, healthier choices for children, employees, and the public.

These principles will become the cornerstones of the menu offerings for NLC catering premises moving forward. For more information see **APPENDIX 4: WORK LIFE AND EMPLOYMENT**.

#### Summary of Achievements: 2019-20 / 2020-21 / 2021-22 / 2022-23 / 2023-24

- Against our objectives outlined in the 2019 Diet and Nutrition Policy we set out to maintain and improve on the methodology set out within the 'Healthy Living Award'. All units were set a minimum of 50% 'Healthy' foods to 'Unhealthy' foods. In most venues, (Civic Centre, Strathclyde Park, Drumpellier Park, Summerlee Museum, Dalziel Building, Dalziel Pod, Houldsworth Building) all offered more than the pre-requisite number of 'Healthy' foods and over a quarter of these reduced fried foods by 100%.
- Where we serve hot food at minimum of 50% are lower fat, vegetarian or vegan based, and higher fat foods were added as a 'Daily Special' as a treat. All proteins served within the various sandwiches and products are the lowest fat available. Vending suppliers that we operate must supply a strict 50/50 healthy/low fat products to ensure that staff have a balanced choice available to them.



## 5. Retirement and Care

### Adults and Older Adults

Social Work Services in North Lanarkshire play a lead role in supporting and safeguarding communities. Income maximisation and tackling poverty are key strands in the delivery of social work and social care services across all localities.

These priorities are integrated into day-to-day practice and service delivery and have a strong fit with the core values of social work of:

- Promoting independence
- Self-help and self-reliance

Equally important and threaded through Adult Services activity is a commitment to strength, relationship based and trauma-informed practice.

In North Lanarkshire, NHS Lanarkshire and North Lanarkshire Council have integrated the planning and delivery of all community health and social care services. Community health, social care and social work functions are delegated to the Integration Joint Board (IJB) by North Lanarkshire Council and NHS Lanarkshire, through the University Health and Social Care North Lanarkshire (UHSCNL).

Community based services include:

- Mental health services
- Adults with disability and long-term conditions
- Addiction services
- Occupational therapy
- Health and wellbeing improvement
- Care homes
- Adult and Child Protection
- Carers service
- Community care assessment and planning
- Contracted support services
- Equipment and adaptations, technology and telecare
- Intermediate care service
- Aspects of housing support
- Day opportunities and day services
- Homecare services
- Children and families' social work
- Community Justice social work



The IJB's Strategic Commissioning Plan for 2023-26 sets out 5 key priorities:

- Increased focus on prevention, early intervention and tackling inequalities by working with people and communities
- Do the right thing first time.
- Develop and support a workforce for the future.
- Improve mental health and wellbeing.
- Support people through a whole family approach

The outcomes the partnership has a duty to deliver are reflected in an agreed set of nine national Health and Wellbeing Outcomes. These are:

The IJB's Strategic Commissioning Plan 2023-2026 plan sets out how community health, social care and social work functions delegated to the Integration Joint Board by North Lanarkshire Council and NHS Lanarkshire will be planned and delivered over the medium term.

| Wellbeing Outcomes |   |
|--------------------|---|
| <b>Outcome 1</b>   | People are able to look after and improve their own health and wellbeing and live in good health for longer.  |
| <b>Outcome 2</b>   | People, including those with disabilities or long-term conditions, or who are frail, are able to live, as far as reasonably practicable, independently and at home or in a homely setting in their community. |
| <b>Outcome 3</b>   | People who use health and social care services have positive experiences of those services and have their dignity respected.  |
| <b>Outcome 4</b>   | Health and social care services are centred on helping to maintain or improve the quality of life of people who use those services.   |
| <b>Outcome 5</b>   | Health and social care services contribute to reducing health inequalities.   |
| <b>Outcome 6</b>   | People who provide unpaid care are supported to look after their own health and wellbeing, including to reduce any negative impact of their caring role on their own health and wellbeing.                    |
| <b>Outcome 7</b>   | People using health and social care services are safe from harm.  |
| <b>Outcome 8</b>   | People who work in health and social care services feel engaged with the work they do and are supported to continuously improve the information, support, care and treatment they provide.                    |
| <b>Outcome 9</b>   | Resources are used effectively and efficiently in the provision of health and social care services.   |



## Older Adults

North Lanarkshire council follow the Caroline Walker Trust principles for eating well for older people. The Caroline Walijker Trust is dedicated to the improvement of public health by means of good food. Established in 1988 to continue the work of Caroline Walker and in particular to protect the quality of food, it is a charitable trust that has produced several publications, training materials and computer packages which provide practical guidance on eating well for those who care for vulnerable people within our society.

In general, the nutritional requirements of older adults (aged 65 years and over) who are healthy and active are like those of the adult population (NHS, 2016). However, where people are subject to ill health, this can lead to a lack of appetite and a reduction in food consumption that may result in dietary deficiency of certain nutrients. Some long-term illness and treatments can adversely affect a person's food intake and lead to older adults becoming undernourished, requiring them to have diets that are more energy and nutrient dense (WHO, 2024). This means that the same amount of energy (from fat and carbohydrate), protein, vitamins, minerals, and trace elements must be provided in a smaller volume of food.

## Lunch Clubs

Older adults are encouraged to live independently in their own homes for as long as they can safely do so (Age UK, 2024). Community meals, such as those provided by integrated day services, lunch clubs and home support services are therefore increasingly valuable for supporting those living at home in older age.

Many older adults who use Housing and Social Work Services may be undernourished because of social and economic factors such as poverty and social isolation which in turn can lead to psychological problems such as depression. It is recognised that there are several common health problems that can be avoided or improved by the promotion of a healthy diet. These include coronary heart disease, stroke, osteoporosis, osteomalacia (softening of the bones), anaemia (floate, iron and B12) diabetes, obesity and constipation (WHO, 2020). A healthy diet and sufficient levels of physical activity can minimise potential health

problems and can help older adults to recover more quickly from illness. It is also important to ensure sufficient fluid intake in older adults (approximately 1.5 - 2 litres per day) as this can also assist in preventing dehydration and constipation (BDA, 2024).

As mentioned before vitamin D is required for bone health and sunlight helps synthesise this important vitamin. Older adults who have limited exposure to sunlight (particularly those who rarely go outside or are fully covered with thick clothes when they do so) may be at risk of deficiency. In addition, the ability to convert vitamin D to its active form is impaired with ageing (UK Government, 2012).

Evidence suggests that the prevalence of malnutrition is higher in older adults in long-term care, compared to those living at home, because of higher levels of physical and mental ill health (Scottish Government, 2011).

Older Adults can be 'nutritionally vulnerable' if they:

- Are undernourished
- Have unexplained or unintentional weight loss
- Have physical difficulty eating and/or drinking
- Have acute or chronic illness affecting appetite and food intake
- Have cognitive or communication difficulties
- Have increased nutritional requirements (e.g. due to an injury)
- Require the texture of food and/or fluid to be modified



# Monitoring progress and setting objectives for 2025/26 – 2029/30

The Eat Well, Be Well Working group which comprises of representatives from NHS, third party organisations and North Lanarkshire Council will meet again by the end of 2025 to set out the objectives for 2025/26 to 2029/30. The current policy is a live working document, when these are agreed by the group, they will be implemented into the policy and the group will work towards meeting on a six-monthly basis to monitor progress and ensure the outcomes identified are achievable.

The Policy will be reviewed on an annual basis to reflect on any new, changed or adapted Government legislation and to provide an update on the progress of outcomes in relation to the following key areas:

1. Pregnancy & Parenthood
2. Nursery & School
3. Training & Adulthood
4. Work life & Employment
5. Retirement & care

The Eat Well Be Well Policy will be shared across all Council services and all, services, stakeholders and partners will be encouraged to comply with this policy.

# Appendices / Further Reading

## Appendix 1: Pregnancy & Parenthood

### Nutrition During Pregnancy

During pregnancy, women are advised to avoid certain foods and drinks as they may cause illness or result in harm to the infant.

These include:

- Limit intake of tuna (to no more than 2 fresh tuna steaks or 4 medium-sized cans each week) and avoid shark, marlin and swordfish. This is due to the levels of toxins and mercury they may contain which can harm the baby's developing nervous system.
- Avoid pate (including vegetable pate), liver and liver products, and certain types of cheese (Camembert, Brie, soft blue cheeses), raw shellfish, raw and undercooked meat, undercooked ready meals. Eggs can be eaten provided they have the British Lion stamp.
- Limit caffeine intake to less than 200 milligrams each day (equivalent to 2 mugs of instant coffee, 2 mugs of tea, 5 cans of cola or 2 cans of 'energy' drink)
- Avoid alcohol completely.



## Alcohol

Drinking in pregnancy can lead to long-term harm to the baby. The best advice is to NOT drink during pregnancy as this can lead to brain damage (NHS, 2023). Drinking alcohol passes from the blood through the placenta to baby and can seriously affect brain development. Baby does not have a fully developed liver and cannot process alcohol.

Drinking alcohol during pregnancy increases the risk of miscarriage, premature birth and having a low birthweight. Drinking during pregnancy can cause your baby to develop a serious life-long condition called **Fetal Alcohol Spectrum Disorder (FASD)**.

FASD can cause problems with:

- Learning and behaviour
- Hyperactivity and impulse control
- Communication, such as problems with speech
- Managing emotions and developing social skills
- Joints, bones, muscles and some organs

For further information and support please see link:

**[Alcohol and pregnancy | Ready Steady Baby!](#)**



## Vitamin supplementation

Some groups may require special consideration in relation to vitamin supplementation, specifically, pregnant and breastfeeding women, children and older adults.

Research indicates that many people in Scotland have low vitamin D levels. The groups who are at greater risk of vitamin D deficiency and should take a daily supplement of 10 micrograms ( $\mu\text{g}$ ) (all year round is the following):

- All babies and young children from birth to 5 years.
- Babies who are fed infant formula will not need vitamin drops unless they are drinking less than 500ml of formula milk a day, as these products are fortified with vitamin D.
- All those who are pregnant and breastfeeding.
- People who are not exposed to much sunlight, including those who are housebound or stay indoors for long periods, those in an institution such as a care home, and those who cover their skin for cultural reasons.
- People who have darker skin and therefore need to spend longer in the sun to produce vitamin D.



NHS Lanarkshire provides free ProHealth Vitamin D supplements to all babies from birth until their 3rd birthday. These can be accessed from their health visitor, family nurse or many community health settings.

As well as those most at risk, everyone aged 5 years and over should consider taking a daily supplement of 10 micrograms ( $\mu\text{g}$ ) vitamin D, particularly during the winter months October to March (NHS, 2023).

## Children

It is recommended that all children from birth to five years of age should receive a daily supplement of 10µg (400 IU) vitamin D and 233µg vitamin A unless, contrary to recommendations, they are consuming more than 500ml of formula milk a day<sup>3</sup>.

Everyone (children and adults) age 5 years and above should consider taking a daily supplement of 10 micrograms(µg) vitamin D, particularly during the winter months (October – March). Vitamin supplementation is the responsibility of the child's parent or carer; however, staff should be aware of the recommendations in relation to vitamin supplementation in children and can raise awareness and discuss with parents or carers.

## Important Vitamins and Supplements

The NHS recommend women should take a daily folic acid supplement of 400 micrograms (mcg) per day when trying to conceive. This is to help prevent neural tube defects (NTDs) such as Spina Bifida and ideally should be taken at least 3 months before becoming pregnant. These are easily available in chemists and supermarkets, with no difference between branding and cost.

Some higher risk groups, those living with obesity, diabetes or epilepsy, may be at higher risk of neural tube defects and therefore require a higher dose of 5 milligrams (mg) of folic acid (RCOG, 2018). This requires a prescription therefore should be discussed with their midwife or GP (RCOG, 2018).

Furthermore, some women may be at a higher risk of NTDs and therefore require a higher dose of 5 milligrams (mg) folic acid, which is obtainable from their GP.

This includes:

- Couples where either partner has spina bifida, or a family history of NTD
- Women that have had a previously affected pregnancy.
- Women that have diabetes.
- Women taking certain anticonvulsants for epilepsy.

- Women with coeliac disease or other conditions that affect the absorption of nutrients.
- Women that are overweight (BMI over 30kg/m<sup>2</sup>).
- Women that recently received bariatric surgery. They need to delay pregnancy for 2 years to reduce the risk of NTDs.



## Vitamin D

All pregnant and breastfeeding women should take a daily supplement containing 10 micrograms(µg) of vitamin D, to ensure the mother's requirements for vitamin D are met and to build adequate foetal stores for early infancy to ensure optimal bone health.

Women at greatest risk of vitamin D deficiency include women from ethnic minority groups (particularly of African, African-Caribbean and South Asian origin) and women who are not exposed to much sun (for example, women who cover their skin when outside or who spend large amounts of time indoors).

Prior to and during pregnancy, women should avoid taking supplements containing vitamin A and fish liver oil supplements (which contain high levels of vitamin A) as these may be harmful to the growth and development of the baby.

Further information on Vitamin D: <https://www.gov.scot/publications/vitamin-d-advice-for-parents/>

## Breastfeeding

- **Infant health:** Breastfeeding protects children from a vast range of illnesses, including infection, diabetes, asthma, heart disease and obesity, as well as cot death (sudden infant death syndrome)
- **Maternal health:** Breastfeeding can reduce the risk of breast cancer, ovarian cancer, and heart disease
- **Relationship-building:** Breastfeeding supports the mother-baby relationship and the mental health of both baby and mother
- **Worldwide benefits:** The benefits are seen in both high- and low-income countries, with a study published in The Lancet in 2016 finding that increasing breastfeeding rates around the world to near universal levels could prevent 823,000 annual deaths in children younger than five years and 20,000 annual maternal deaths from breast cancer
- **Cost savings:** Due to the significant health benefits of breastfeeding for both mum and infant, there is a reduction in the requirement of NHS services such as GP consultations and hospital admissions. This in turn contributes to significant savings for the NHS, with initial breastfeeding service investments paying off within just a few years (UNICEF, 2016).

Women are advised to follow general healthy eating advice before and during pregnancy and for the duration of breastfeeding. There are also specific recommendations on vitamin supplements during this time.

## Caffeine and breastfeeding

- Caffeine can reach your baby through your breast milk. Caffeine is a stimulant, if mothers consume a lot, it may make baby restless and keep them awake.
- Caffeine occurs naturally in lots of foods and drinks, including coffee, tea and chocolate. It's also added to some soft drinks and energy drinks, as well as some cold and flu remedies.
- There's not enough information to say how much caffeine is too much, and babies respond to caffeine differently. But it's a good idea to reduce caffeine intake, especially when baby is less than 6 months old.

If breastfeeding, it's recommended to have no more than 200mg a day. This may include 1 mug, 1 can or 1 bar of:

- instant coffee (100mg)
- filter coffee (140mg)
- tea (including green tea, which can have the same amount of caffeine as regular tea) (75mg)
- cola (40mg)
- energy drink (a 250ml can is 80mg)
- plain dark chocolate (a 50g bar is less than 25mg)
- plain milk chocolate (a 50g bar is less than 10mg)

Pregnant and breastfeeding women are advised to eat a variety of foods, including:

- Plenty of fruit and vegetables
- Plenty of starchy foods (especially wholegrain varieties) such as bread, pasta, rice and potatoes
- Protein such as lean meat and chicken, fish, eggs and pulses
- Dairy foods such as milk, cheese and yoghurt, or calcium-fortified alternatives
- At least two portions of fish each week including one of oily fish (however, no more than two portions of oily fish should be eaten each week, including, fresh tuna, mackerel, sardines and trout)
- Foods high in fat, sugar and salt should only be consumed in small amounts and less often (please see section on 'Eating well' on page x for further information).

## Peanuts and breastfeeding

Eating peanuts or foods containing peanuts, such as peanut butter, while breastfeeding can be enjoyed as part of a healthy, balanced diet (unless allergic to them). If you have any questions or concerns about food allergies, you can talk to your GP, midwife or health visitor (NHS 2022).

Further information can be found at: NHS Food Allergy <https://www.nhs.uk/conditions/food-allergy/> and Infants & new mums — First Steps Nutrition Trust

## Complementary Feeding

Complementary feeding is the introduction of solid foods to a baby's diet (also known as weaning) should take place at around six months, but not before 4 months. Alongside continuing breastfeeding and/or formula feeding as recommended by the World Health Organisation (WHO, 2024). Solid foods are gradually introduced to provide adequate nutrition and provide new tastes and textures. Additionally, variety of textures at age-appropriate levels help develop oral motor skills needed for speech and language development (Department for Education (DfE), 2024)

When introducing solids over a period of months, babies can eat generally normal family meals by their first birthday (Public Health Scotland, 2024). There are certain foods to avoid before the age of 12 months, for example, honey, due to risk of botulism, and cow's milk as a drink due to nutritional imbalances and potential kidney strain. However, a small amount of cow's milk can be used during cooking, but only if this is pasteurised and full-fat milk (NHS, 2023).

It is important babies consume energy-dense foods, as they have smaller appetites and generally eat less at one sitting (WHO 2024). Children under five are therefore likely to require regular meals as well as healthy snacks (NHS 2023).

For more information on introduction of solid foods, please visit:

NHS Health Scotland resource - Fun First Foods <https://publichealthscotland.scot/publications/fun-first-foods-an-easy-guide-to-introducing-solid-foods/>

Ready Steady Baby [www.readysteadybaby.org.uk](http://www.readysteadybaby.org.uk)

Parent Club [What is weaning? | Parent Club](#)



## Appendix 2 - Nursery & School

### **The UNCRC (incorporation) (Scotland) Act 2024 states that:**

- Article 12 (respect for views of the child): Every child has the right to express their views, feelings and wishes in all matters affecting them, and to have their views considered and taken seriously. The right applies at all times including [...] the child's day to day home life.
- Article 23 (children with disabilities): A child with a disability has the right to live a full and decent life with dignity and, as far as possible, independence and to play an active part in the community. Governments must do all they can to support disabled children and their families.
- Article 24 (health and health services): Every child has the right to the best possible health. Governments must provide good quality health care, clean water, nutritious food, and a clean environment and education on health and well-being so that children can stay healthy. Richer countries must help poorer countries to achieve this.

More specifically Article 24 mentions that every child has the right to the best possible health. Local authorities must provide good quality health care, clean water, nutritious food, and a clean environment and education on health and well-being so that children can stay healthy.

## Nursery and School (Healthy Schools)

The Healthy Schools resource supports co-ordination across the school and progression throughout the learner journey from Nursery through to Senior Phase. It brings together GIRFEC principles and values, as well as eight Wellbeing (SHANARRI) indicators. The United Nations Convention on the Rights of the Child (UNCRC) has been embedded in this approach since its conception as well as all Health & Wellbeing Experiences and Outcomes from Curriculum for Excellence. This high-quality teaching resource is currently being used by the majority of schools across North Lanarkshire.

The second part of the approach is called Healthy Schools Partnerships and aims to put the child at the centre of a community context. This extracurricular component acts as a focal point for the creation of home-school-community links. It facilitates a connected, cohesive, and consistent approach to child and family Health and Wellbeing (HWB) across learning communities. The Cluster Planning for HWB has been developed to facilitate seamless partnership work and partner agencies have the opportunity to offer unifying communal cluster activities that impact on whole communities. Health Enhancing School Environment is the third part of the approach allowing schools to support and further enhance the environment in which children and young people grow and develop.



## Additional Support Needs

Healthy Schools resource is constantly being updated and expanded in line with latest advice and guidance from both education and NHS staff. Recently, specific Additional Support Needs (ASN) content has been added to the teaching and planning framework. Additionally, healthy lifestyle pathways are being created between schools and healthy lifestyle services run in the community. This will allow schools quick and easy access to local services and health professionals who can provide targeted hands-on support.

Scottish Ministers have made additional funding available for local government to provide universal school meals for all children in primary 1 to primary 5, across Scotland, to help ensure every child has the best possible start in life (Scottish Government, 2024). The council promotes the uptake and benefits of school meals, particularly free school meals for children in primary 6 to high school. Additionally, the council ensures school lunch menus are nutritionally analysed and comply with national nutrient standards (Scottish Government, 2020).



## Special Diets

### Medically Prescribed Diets

When devising an adapted menu, the nutrition team within Facility Support Services liaises with NHS Health Professional and Caregivers as appropriate, to discuss ways of making meals more appetising, varied and nutritious.

Consideration is given to carefully planning menus in advance so that the food offered will be suitable for individual dietary needs and where possible, food provided for special diets aims to continue to follow healthy eating principles.

When a medical diet is required, the dietary request form is completed with supporting evidence from a Dietitian, Speech and Language Therapist, GP or the appropriate Health Professional and sent to North Lanarkshire's Facility Support Services.

Details on the Special Diet Procedures can be found on the North Lanarkshire website: [Special Diets](#)

### Food Allergy

Food allergy is where the immune system has an adverse reaction to harmless proteins within food such as those contained in peanuts for instance. Before developing into an actual food allergy primary sensitisation needs to occur in the immune response to an allergen. The Immunoglobulin (IgE)-mediated response to allergic food allergen starts within the environment whereby the allergen gains access through bodily systems such as oral consumption or (absorption through the) skin (O'Hehir et al., 2023). Furthermore, reactions are linked to a range of signs and symptoms that can include skin, gastrointestinal and respiratory tracts, as well as the cardiovascular system. When the IgE-mediated allergic response takes place, this is a leading trigger for anaphylactic shock, the onset can occur in seconds and/or minutes which can be life threatening if untreated (Packi et al., 2023).

In contrast, when the symptoms are more delayed (appears after two hours and up to a couple of days) the reaction does not usually involve the production of Ig-E antibodies against a particular food, but a different type of immune reaction involving other cells of the immune system. These types of reactions are most frequently gastrointestinal (vomiting, diarrhoea, constipation) and/or skin reactions (atopic eczema) and are known as non- Ig-E mediated food allergies (BDA, 2021).

## Food Intolerance

Food intolerance is where the body finds it hard to digest certain compounds in foods causing unpleasant reactions such as abdominal pain, bloating, diarrhoea, nausea, headache and fatigue as well as skin rashes and itching. Unlike food allergies, the immune system is not involved, and the reaction is not life-threatening.

The most common food intolerances tend to be to milk and gluten, for example lactose intolerance which occurs because these individuals have either too little or no lactase which is the enzyme that helps to digest milk sugar lactose. However, there are many food intolerances with unknown mechanisms such as intolerance to food additives (BDA, 2021).

## Coeliac Disease

Coeliac is an autoimmune disease where the immune system attacks a substance found in gluten, damaging the lining of the small intestine (small bowel). This results in inflammation within the small intestine and causes malabsorption of nutrients, for example calcium. All these symptoms can be preventable by following a gluten-free diet.

Gluten is found in all products containing wheat, barley and rye. Some individuals may also find that oats can trigger symptoms as well due to cross contamination (NHS, 2023). Some oat milk products may contain gluten.

Examples of food products containing gluten:

- Pasta
- Cakes
- Breakfast cereal
- Most breads
- Sauces and gravies
- Ready meals
- Process meats may contain gluten such as sausages

## Diabetes

Diabetes UK is the largest support organisation for people with diabetes. They have an excellent website and call service where most questions can be answered.

There are many types of diabetes, however, the most common are Type 1 and Type 2 Diabetes. Management of diabetes can be unique for each individual, based on their diagnosis, stage of the condition and treatment regime.

## Type 1 Diabetes

Type 1 Diabetes Mellitus is also a lifelong autoimmune condition (when a person's immune system mistakenly attacks their own body cells). This condition can develop at any age. Diabetes occurs when the pancreas is unable to produce the hormone insulin, which is needed to control glucose by moving it from the bloodstream into the body's cells to support brain function and moving muscles (Grasso et al., 2024). Insulin is the key to unlocking the glucose so that a person can function. Without insulin, blood glucose levels run high causing damage to other systems in the body and cause the person to become very unwell. All carbohydrate foods provide glucose for energy.

Children and young people with Type 1 Diabetes are required to have insulin injections or an insulin pump to manage their glucose levels. As part of their care plan, they need to know how many carbohydrates are in each meal, so their insulin can be matched appropriately. This will be supported by the family and by a trained health professional.

# Food Safety and Labelling Laws

## 14 Allergens

Food businesses and providers need to advise customers if any food they provide contain any of the listed allergens as an ingredient by food law 2014.

There are 14 common food allergens including:

- Celery
- Cereals containing gluten (such as wheat, rye, barley, and oats)
- Crustaceans (such as prawns, crabs and lobsters),
- Eggs
- Fish
- Lupin
- Milk
- Molluscs
- Mustard
- Tree Nuts (such as almonds, hazelnuts, walnuts, brazil nuts, cashews, pecans, pistachios and macadamia nuts)
- Peanuts
- Sesame seeds
- Soya
- Sulphites (if the sulphur dioxide and sulphites are at a concentration of more than ten parts per million)

## Natasha's Law

The UK Food Information Amendment, also known as Natasha's Law, came into effect on the 1st of October 2021. Meaning all food businesses are required to provide a list of all ingredients and allergens in a form of a label for direct sale on the premises. This applies to Catering within North Lanarkshire Council.

## Cook Safe

Cook safe is a food safety assurance system in Scotland which helps catering businesses understand and implement HACCP-based systems. HACCP (Hazard Analysis and Critical Control Point), which is a widely accepted food safety management system that can easily be adapted to suit all sizes and types of food businesses (FSS, 2021).

## International Dysphagia Diet Standardisation (IDDSI) and Modified Texture Diets

The International Dysphagia Diet Standardisation Initiative is a global standard with terminology to describe modified textured foods and thickened liquids.

This global terminology should be used for individuals with dysphagia of all ages in different settings. The framework aims to improve clinical safety by offering care providers standardised terminology. This is a standardised framework and contains levels for fluids as well as foods allowing for consistent terms within one framework.

The IDDSI framework consists of 8 levels (0-7) (Appendix 10). Levels are identified by text labels, numbers and colour codes to improve safety and identification. The standardised terminology and testing methods will allow for consistent approaches throughout different care settings (IDDSI, 2024).

## Additional Support Needs

The Healthy Eating in Schools Supplementary guidance on diet and nutrition for children and young people with additional support needs (Scottish Government, 2011). Provides support and practical guidance for all schools and recognises the complex and diverse range of eating and drinking difficulties that children and young people with additional support needs can encounter.

For instance, many establishments cater for those who have chewing and swallowing difficulties or require additional support with eating and drinking and in this scenario, foods are adapted to ensure they are of an appropriate texture and consistency.

All food and drinks provision in schools are in accordance with national nutritional standards and these will be adhered to wherever possible. However, some children that are neurodiverse such as autism can have unique choices or challenges relating to food that may result in a restrictive diet. In this instance, the Council will implement reasonable adjustments to support children during the school meal provision.

## Lifestyle and Religious Diets

### Vegetarians and Vegans

A vegetarian is someone who lives on a diet of grains, pulses, nuts, seeds, vegetables and fruits, with or without the use of dairy products and eggs. A vegetarian does not eat any meat, poultry, game, fish, shellfish or crustacea, or slaughter by-products (The Vegan Society, 2024).

A vegan is someone who eats a plant-based diet free from all animal products, such as meat, animal milks, eggs, honey and gelatine (The Vegan Society, 2024). North Lanarkshire Council provides a vegetarian alternative daily in nursery, primary and secondary schools.

## Religious and Cultural Diets

Many individuals have various cultural and religious beliefs which can influence the choice of foods they eat.

People following the Muslim faith are only permitted to eat foods that have been slaughtered in the correct Islamic way (Halal). Meat from pigs and other meat-eating animals is strictly forbidden. Fish, eggs and dairy foods are permitted; however, cheese should not contain animal rennet. Muslims will avoid food items thought to contain lard or fat from animals not slaughtered in the correct way (for example, cakes, biscuits and pastries). Alcohol and gelatine are also forbidden.

People following the Jewish faith will only eat meat which is Kosher. Only meat from cloven hoof animals may be eaten (beef and lamb), meat from pigs is strictly forbidden. Most Jews will eat eggs and fish; however, only fish with fins and scales are permitted. Meat and milk foods must be kept apart when cooking and eating. Cooking and eating utensils for milk and meat are kept separately.

Most people following the Hindu faith are vegetarian, and many (especially women) avoid eggs. The cow is sacred and even Hindus who are non-vegetarians will not eat beef. Non-vegetarian Hindus will eat lamb, pork, chicken and some fish. Staple foods include baked cereal products (chapattis and breads), rice, pulses, milk, yoghurt and cheese (made without animal rennet). Lard and other carcass-derived fats are strictly forbidden.



## The Childsmile Community and Practice programme

Childsmile Dental Health Support Workers (DHSWs) in Lanarkshire work closely with health visitors and Public Health Nurses and General Dental Practices to encourage registration of children with a dentist from an early age for the delivery of preventive care.

The Childsmile Community and Practice programme is designed to address oral health inequalities, through embedding DHSWs within the more disadvantaged communities and offering oral health support to families with young children, in the family home (NHS Scotland, Healthier Scotland, 2024a).

Tooth decay is preventable, if Childsmile can support families to remove barriers that prevent daily, routine, toothbrushing; this can reduce the need to see a dentist.

## Childsmile Toothbrushing Programme (Nurseries and Schools)

Healthy Schools resource has key healthy eating and oral health messages embedded across early level with appropriate links to quality teaching resources and current health improvement messages contained in the suggested activities.

- Support and encourage children to develop good oral health practices by the continued delivery of the Nursery Toothbrushing Programme (NHS Scotland Healthier Scotland, 2024d).
- Support children in practicing good oral health routines by continuing toothbrushing activity in primary schools (NHS Scotland Healthier Scotland, 2024d).

The toothbrushing programme component of the programme in Lanarkshire is offered to:

- Two-year-old children receiving free place at nursery

- Every three and four-year-old child attending nursery
- 20% of P1 and P2 classes of schools situated in areas with the highest level of need

## Childsmile Fluoride Varnish Applications

Fluoride Varnish Applications should be offered at least twice-yearly from the age of two years by dental practices. They are safe and an added protection to children's teeth.

Lanarkshire Extended Duties Dental Nurses also attend nurseries and schools in disadvantage twice yearly to apply fluoride varnish. This is a targeted programme (NHS Scotland Healthier Scotland, 2024b). The fluoride varnish applications received in nursery and school are in addition to fluoride application offered in dental practices.

## Childsmile Universal Pack Distribution

Every child receives a dental pack and free flow cup at around six months. This is followed by oral health packs at eight months, 13 – 15 months and 27 – 30 months. In addition, oral health packs are provided at age two years, and at ages three and four in nursery, where children receive at least two dental packs, In Primary 1, at least one dental pack will be distributed to all children (NHS Scotland Healthier Scotland, 2024c).



## Appendix 3 – Training and Adulthood

### Health & Social Care Standards: My Support, My Life

#### 3.1 Specific Standards

Standard 1 is most relevant to the policy, which outlines specifically.

1: I experience high quality care and support that is right for me.

#### Wellbeing:

- 1.33 I can choose suitably presented and healthy meals and snacks, including fresh fruit and vegetables, and participate in menu planning.
- 1.34 If I need help with eating and drinking, this is carried out in a dignified way and my personal preferences are respected.
- 1.35 I can enjoy unhurried snack and mealtimes in as relaxed an atmosphere as possible.
- 1.36 If I wish, I can share snacks and meals alongside other people using and working in the service if appropriate.
- 1.37 My meals and snacks meet my cultural and dietary needs, beliefs and preferences.
- 1.38 If appropriate, I can choose to make my own meals, snacks and drinks, with support if I need it, and can choose to grow, cook and eat my own food where possible.
- 1.39 I can drink fresh water at all times.



**In striving to meet these standards North Lanarkshire Council will:**

1. Provide at least five portions of a variety of fruit and vegetables every day.
2. Base meals on potatoes, bread, rice, pasta or other starchy carbohydrates; choosing whole grain versions where possible.
3. Have some dairy or dairy alternatives (such as soya drinks); choosing lower fat and lower sugar options.
4. Include some beans, pulses, fish, eggs, meat and other proteins (including 2 portions of fish every week, one of which should be oily).
5. Provide water, fruit juices and smoothies to ensure children, young people and young adults can maintain hydration and improve vitamin and mineral intake.
6. Provide a choice of unsaturated oils and spreads and eat in small amounts.
7. Offer support to children, young people and young adults who have known or suspected food allergies. Or who need to take food before medicine is administered.
8. Provide for religious and cultural considerations including, halal and kosher meal options where needed.
9. Provision will be made for children, young people and young adults who are vegetarian or vegan.
10. Offer minimum high-fat processed foods, such as burgers, sausages, chicken nuggets, fish fingers, pies and pastries. These foods should be served no more than twice per week, and healthier options should be made available.
11. Provide healthier snacks and drinks to children, young people and young adults ensuring crisps, carbonated drinks and confectionery are not purchased unless as part of a planned outing or activity as a treat.
12. Ensure services are free from unhealthy vending machine options.
13. Give consideration to health conditions including eating disorders or food addiction. It is recognised that difficulties arising from life stresses, such as anorexia, bulimia or being overweight and obesity may need to be catered for within all services. This is especially so for residential childcare practitioners and social work colleagues. Workers should consult with a GP or Registered Dietitian, should they have serious concerns about a young person's weight or eating patterns, and where this is part of a multi-agency care plan decision.
14. Provide children, young people and young adults healthy breakfast options, including cereals with milk, toast, fruit or pure fruit juice.
15. Ensure that Traditional breakfasts are grilled where possible to reduce fat content.
16. Ensure that Food labelling is considered for pre-packaged foods accounting for salt, sugars, fats, energy and saturated fats.
17. Encourage young people to share in the social aspect of mealtimes by eating with other young people and staff, developing good table manners, setting the table, and clearing plates away following a meal.



## Appendix 4 – Work Life and Employment

4.1 The following are the menu offerings for NLC catering premises moving forward:

- A selection of fresh fruit and vegetables.
- Salad, including salad bars, plated/ boxed salads, salad in sandwiches, and as a meal accompaniment. Low fat salad dressings should always be available.
- Where breakfast is served, wholegrain and low-sugar cereals.
- A variety of brown and wholemeal bread and rolls.
- A non-fried, non-processed alternative to chips, fried or processed potato products.
- Baked potatoes with lower fat fillings.
- Lean protein items in salads and sandwiches, such as lean meat, poultry, fish (including oil-rich varieties), lower fat cheese.
- A selection of vegetarian options.
- Lower fat dairy products, including semi-skimmed and skimmed milk, low fat yoghurt, and lower fat cheese (e.g. Edam, mozzarella, cottage, reduced fat cheddar).
- Lower fat spreads and alternatives to sugar (sweeteners).
- Water, milk and pure fruit juice. Where high sugar drinks are available, a sugar-free alternative should always be offered (free, fresh drinking water should be available to all staff on a daily basis).
- Lower fat, lower salt varieties of savoury snacks, such as reduced fat crisps, unsalted nuts, plain crackers, bread sticks.
- Alternatives to chocolate and sugar confectionery, including fresh fruit, dried fruit, low fat yoghurt/ mousse, lower sugar cereal bars, and home baking (scones, pancakes, carrot cake, and fruit loaf).

- These options which are available in the main NLC council outlets meet the majority of the main principles of the Eating Out, Eating Well scheme, namely:
- Increase fruit and vegetables
- Increase fibre
- Increase oil rich fish
- Reduce fat
- Reduce salt
- Reduce sugar
- Action on promotions and availability
- Action on portion size
- Action on calories
- Action on sustainable food
- Code of practice for children's menus

### Vending Food

Vending machines offer a useful and alternative service point for the provision of food and drinks within the workplace. Where food vending is available, selling items such as breakfast cereals, sandwiches and pasta/ salad pots, the above criteria should apply.

### Confectionery

Vending units selling confectionery and crisps are available in many Council workplaces. Confectionery and crisp provision should be kept to a minimum.

Healthier alternatives should always be available, including, fresh fruit, dried fruit, low fat yoghurt/ mousse, lower sugar cereal bars, lower fat crisps, crackers, unsalted nuts, and seeds. At least 25% of options within this type of vending unit should be healthier alternatives to confectionery and standard crisps.

## Drinks

- Plain water (still or sparkling)
- Skimmed or semi-skimmed milk
- Pure fruit juices
- Lower fat yoghurt and milk drinks (with less than 10g sugar per 100ml)
- Still or carbonated soft drinks with less than 0.5 grams of sugar per 100ml (e.g. sugar-free flavoured water, sugar-free fruit juice drinks, and diet carbonated drinks)
- Herbal/fruit tea
- Tea and coffee (decaffeinated is preferable)
- Combinations of the above

Any soft drink (still or carbonated) containing more than 0.5 grams of sugar per 100ml should be kept to a minimum and should only form a maximum of 50% of all drinks vending provision.



## Premises without on-site catering facilities

Many staff work in locations without access to on-site catering facilities. Where possible, these staff should be provided with appropriate kitchen facilities and utensils to allow them to prepare their own lunch. This may include a microwave, kettle, toaster, refrigerator, sink, hot and cold water, eating utensils, and an appropriate dining area.

## Hospitality

Hospitality for staff and visitors is provided by Facility Support Services for business meetings, staff conferences and corporate events. Healthy options should always be available in such instances. Hospitality within schools will also follow the principles set out above.

A healthy eating policy for employees has been developed to provide information to staff about eating healthily in the workplace (Health and Safety Arrangement Section 35A - Employee Healthy Eating 01 April 2017). This policy can be accessed from MyNL and search for Healthy Eating.

## Work well NL

Work well NL is fully committed to the health and wellbeing of NLC colleagues and to support colleagues to be at their best, energised, motivated and resilient. It is a digital one stop shop that has been created to provide NLC council staff with quick and easy access to health and wellbeing information. Work well NL home page (images below) contains links ranging from health and lifestyle checks to podiatry to the importance of sleep.

## Private Sector Trading

There are numerous private sector outlets selling foods and drinks throughout North Lanarkshire (for example, local shops and mobile catering outlets/street traders). Many of these outlets operate within the vicinity of Council catering units, particularly secondary schools.

Due to the national and local drive to improve diet, the choice and availability of foods and drinks provided by some local shops and street traders is a growing concern.

The Council constantly strives to improve school meals and maximise their uptake by children and young people, in order that they receive full benefit from healthy and nutritious food provision. However, the Council is aware that some young people may choose to leave school at lunchtime to utilise other food outlets, including mobile units and local shops.

Neighborhoods can play a part in influencing our dietary choices if we are able to increase access to healthy food and limit access to unhealthy food. Good Places Better Health for Scotland's Children (Our Place, 2011) recommends identifying mechanisms to limit the number of fast-food outlets in neighborhoods.



# Appendix 5: Achievable outcomes 2019/2020 – 2023/2024

## Pregnancy & Parenthood

| <b>Pregnant and Breastfeeding Women Indicators / Policy:</b>  |   |
|---|---|
| <b>Pregnant and Breastfeeding Women Indicators / Policy</b>   | <ul style="list-style-type: none"> <li>To reduce the drop off in breastfeeding rates at 6-8 weeks by 10% by 2025</li> <li>Increase uptake of Healthy Start Vouchers (Best Start Foods from Winter 2019 onwards)</li> </ul>  |
| <b>Childsmile / Oral Health Improvement Challenge for 2024</b>  |   |
| <b>Child Smile / Oral Health – Oral Health Improvement Challenge for 2024</b>                           | <p>To improve the oral health of Scotland’s children, specifically the achievement of the national outcomes:</p> <ul style="list-style-type: none"> <li>75% of P1 children with no signs of dental disease by 2024 (this requires a ten-percentage point increase on each NHS Boards last NDIP result).</li> <li>80% of P7 children with no signs of dental disease by 2024 (this requires a ten-percentage point increase on each NHS Boards last NDIP result).</li> </ul> <p>That means, the targets for Lanarkshire by 2024 are 74.6% for P1 and 74.9% for P7 (detailed inspection). NHS Lanarkshire has already met the target for P7 (NDIP 2023 P7 detailed report, reported that 77.6% had no obvious decay experience). We need to wait for the 2024 P1 report to be published in October 2024 to see whether we meet the target for P1.</p> |
| <b>Childsmile Universal Pack Distribution</b>   | <p>Every Child receives a dental pack and free flow cup at around six months. This is followed by oral health packs at eight months, 13 – 15 months and 27 – 30 months. In addition, oral health packs are provided at age two years, and at ages three and four in nursery, where children receive at least two dental packs, In Primary 1, at least one dental pack will be distributed to all children.</p>  |
| <b>Childsmile Community and practice. Our Dental Health Support Workers will visit family homes to:</b> | <ul style="list-style-type: none"> <li>Use a person-centred, empathic method to support families living in disadvantaged areas to understand the everyday barriers and facilitators to adopt child, oral health promoting behaviours.</li> <li>Develop tailored practical ideas for parents to support behaviour change.</li> <li>Provide the central link between dentists, the family and the health visitor/ public health nurse.</li> <li>Give additional oral health support to children and families most in need.</li> <li>Additional support will be given to children and families most in need through home visits, community initiative and primary care dental service.</li> </ul>  |

|   |  |
|---|--|
| <p><b>Childsmile Toothbrushing</b></p>          | <p>The Childsmile toothbrushing programme is available in Lanarkshire. The toothbrushing programme component of the programme is offered to:</p>   |
| <p><b>Programme (Nurseries and Schools)</b></p> | <ul style="list-style-type: none"> <li>• Two-year-old children receiving free place at nursery.</li> <li>• Every three- and four-year-old child attending nursery.</li> <li>• 20% of P1 and P2 classes of schools situated in areas with the highest level of need. In addition, Lanarkshire extended Duties Dental Nurseries (EDDNs) attend nurseries and schools in disadvantage twice yearly to apply fluoride varnish. This is a targeted programme.</li> </ul>  |
| <p><b>Oral Health Promotion</b></p>             | <ul style="list-style-type: none"> <li>• Oral Health awareness sections.</li> <li>• Oral Health Training for staff internally and externally.</li> </ul>   |
| <p><b>Reducing Oral Health Inequalities</b></p> | <ul style="list-style-type: none"> <li>• Target areas of deprivation to make sure that everyone, no matter where they live, can have the best oral health.</li> <li>• Find innovative ways to tackle oral health inequalities in Scotland, recognising the need to enable people to have more health promoting behaviours. Improving Information for Patients</li> <li>• Provision of clear advice for people on dental treatments available, the location of general dental practices and benefits advice in relation to dental treatment.</li> <li>• Raise awareness of National Smile Month &amp; Mouth Cancer Action Month in the general population using NHSL’s social media platforms. Meeting the Needs of Specific Priority Populations</li> <li>• Support Homeless or risk of homeless population</li> <li>• Support ageing population through community projects</li> <li>• Provided support to Care experience Children and their families.</li> </ul> |



## Nursery and School

Recognising the importance of a well-balanced diet for early years and young children, the Council will:

### Early Years

- Ensure all nurseries meet the National Care Standards: early education and childcare up to the age of 16.
- Ensure all nurseries are health promoting, providing a safe and healthy environment in which children can learn.
- Ensure all food and drinks provision complies with the NHS 'Setting the Table' national nutritional guidance for early years.
- Deliver training to staff where required, to support the implementation of nutritional guidance.
- Through Curriculum for Excellence, support and encourage food activity within early years to increase children's familiarity with a variety of foods and raise awareness of the importance of healthy eating.
- The Scottish Milk and Healthy Snack Scheme (SMHSS), provide any child aged five years and under, who attends a registered setting for two hours or more a day, will be entitled to receive milk and a healthy snack such as a piece of fruit for free.
- Improve knowledge of healthy eating by the delivery of free health promotion sessions to children and their parents/ carers.
- Support and encourage children to develop good oral health practices by the continued delivery of the Nursery Tooth Brushing Programme.
- Ensure parents and carers are well informed about food and drinks provision within the nursery setting.



In addition, and in recognition of the strategic importance of schools both in ensuring a health balanced diet and in education on the topic, the Council will:

### Early Years

- Provide healthy and balance school meals that meet the food and drink regulations.
- Promote the uptake of school's meals especially for those entitled to a free school meal.
- Continue to provide a breakfast club service (cereal with milk, toast and fruit) in all primary schools, ensuring children get the best possible start to the day.
- Continue to offer a breakfast service in secondary schools
- Ensure all tuckshop and vending provision in schools complies with national nutritional standards
- Ensure pupils and parents/carers are well informed about food and drinks provision in schools.
- Provide information to parents and carers on healthy packed lunches for those who choose to provide children with a packed lunch from home.
- Continue to develop children's knowledge of diet and health and provide opportunities to participate in practical food activity in line with the Curriculum for Excellence to allow them to make informed choices about the food they eat and help to establish lifelong eating habits

### **In providing for people with special dietary needs, the council will:**

- Provide information and training to staff involved in the provision of special diets.
- Consult regularly with those requiring a special diet to ensure provision meets the needs and expectations of all service users.
- Support schools to implement the nutritional regulations for any child or young person with a special dietary need or issues related to their additional support need.
- Ensure all special dietary needs are catered for appropriately. A vegetarian option will be available daily in schools.



Recognising the importance of a well-balanced diet for early years and young children, the Council will:

### Early Years and Young Children

- Ensure all nurseries meet the National Care Standards: early education and childcare up to the age of 16.
- Ensure all nurseries are health promoting, providing a safe and healthy environment in which children can learn.
- Ensure all food and drinks provision complies with the NHS 'Setting the Table' national nutritional guidance for early years.
- Deliver training to staff where required, to support the implementation of nutritional guidance.
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- Improve knowledge of healthy eating by the delivery of free health promotion sessions to children and their parents/ carers.
- Support and encourage children to develop good oral health practices by the continued delivery of the Nursery Tooth Brushing Programme.
- Ensure parents and carers are well informed about food and drinks provision within the nursery setting.

## Training & Adulthood

To support adults/older adults the council will:

### Adults / Older Adults

- Support adults through active health and nutrition advice
- Provide a healthy balanced lunch club menu
- Deliver training to staff where required, from appropriate professionals, to support the implementation of nutritional guidance.
- Ensure that the food offered to service users is culturally appropriate, well presented, tailored to suit individual needs and is available in a form and consistency that ensures a safe and healthy diet.
- Ensure that appropriate support is available to those requiring assistance with eating and drinking.
- Regularly consult with service users regarding food provision, menu planning, food preferences and ideas for improvement.
- Serve meals in an inviting and comfortable environment, allowing service users to enjoy the social aspect of mealtimes.
- Ensure service users and their relatives receive adequate information regarding food, drinks and healthy lifestyle provision.

In collaboration with partners such as NHS Lanarkshire and LCFHP, the council is committed to supporting projects which aim to address food poverty and poor diet through community action. This includes:

### Adults / Older Adults

- Support adults through active health and nutrition advice
- Provide a healthy balanced lunch club menu
- Deliver training to staff where required, from appropriate professionals, to support the implementation of nutritional guidance.
- Ensure that the food offered to service users is culturally appropriate, well presented, tailored to suit individual needs and is available in a form and consistency that ensures a safe and healthy diet.
- Ensure that appropriate support is available to those requiring assistance with eating and drinking.
- Regularly consult with service users regarding food provision, menu planning, food preferences and ideas for improvement.
- Serve meals in an inviting and comfortable environment, allowing service users to enjoy the social aspect of mealtimes.
- Ensure service users and their relatives receive adequate information regarding food, drinks and healthy lifestyle provision.
- Supporting LCFHP to provide fresh fruit and vegetables, as well as deliver a range of healthy eating activities for children, parents and families.
- Supporting LCFHP to train staff and partners to deliver a range of cooking skills and nutritional advice sessions targeting low-income groups within community settings across North Lanarkshire.
- Supporting the work of community cafes, food co-ops and other community food and health initiatives by, for example, providing kitchen equipment, expert advice and training.
- Providing support for the development of healthy living projects, with improving diet as their key aim.
- Ensuring diet and nutrition is central to wider plans for social inclusion and community regeneration.

The Council is committed to achieving their strategic physical activity outcome of more people enjoying the benefits of having a physically active life by increasing participation in community based physical activity programmes by increasing the uptake of the Active Health Programme, increasing the number of people referred to exercise referral classes participating in these classes and increasing Active NL memberships.

## Worklife and Employment

To promote the Health and Wellbeing of Council Employees, the Council and partners will:

### Council Employees

- Continue to promote health improvement and healthy eating within the workplace via commitment to the Healthy Working Lives agenda.
- Ensure healthy eating principles are embedded in all staff restaurants and establishments open to the public including country parks, public libraries and leisure facilities, making sure a variety of healthy options are available daily.
- Offer healthy options within all vending facilities.
- Ensure customers can easily identify healthy options.
- Ensure healthy options are promoted and competitively priced to encourage take up.
- Maintain and work towards the principles of the Eating Out, Eating Well scheme in each of the establishments.
- Ensure that sufficient information is provided to staff in relation to diet and nutrition, particularly to those without access to on-site catering facilities through visual aids and posters from this publication.
- Ensure, where possible, that staff without on-site catering facilities have access to appropriate kitchen facilities, equipment and utensils with which they can prepare their own lunch.

## Retirement and Care

### Older Adults

To support adults/older adults the council will:

- Support adults through active health and nutrition advice
- Provide a healthy balanced lunch club menu
- Deliver training to staff where required, from appropriate professionals, to support the implementation of nutritional guidance.
- Ensure that the food offered to service users is culturally appropriate, well presented, tailored to suit individual needs and is available in a form and consistency that ensures a safe and healthy diet.
- Ensure that appropriate support is available to those requiring assistance with eating and drinking.
- Regularly consult with service users regarding food provision, menu planning, food preferences and ideas for improvement.
- Serve meals in an inviting and comfortable environment, allowing service users to enjoy the social aspect of mealtimes.
- Ensure service users and their relatives receive adequate information regarding food, drinks and healthy lifestyle provision.









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