



GCPH Joint Management Board & EMT meeting

Strategic awayday

Monday 12th June

Satinwood Suite, Glasgow City Chambers

09:30 - 1300 hours

AGENDA

Tea and coffee

(from 9:30)

1. Welcome and apologies

(10:00-10:10)

2. Strategic session 1:

(10:10-11:15)

Context setting, current position and feedback from team strategic sessions

Break – tea and coffee

(11:15-11:30)

3. Strategic session 2

(11:30-12:30)

Strategic direction, priority setting, and resources

4. Closing remarks and next steps

(12:30-12:35)

Lunch



**Minutes of a meeting of the Management Board
of the Glasgow Centre for Population Health
held on 23 March 2023
Hybrid in-person/virtual meeting**

PRESENT

<p>Mr John Matthews (chair) Dr Martin Culshaw</p> <p>Dr Jennifer McLean Prof Chik Collins Prof Moira Fischbacher-Smith Prof Emma McIntosh Ms Karen MacNee</p> <p>Mr Kevin Rush Cllr Anne McTaggart Ms Michelle McGinty</p>	<p>Non-executive Board Member, NHS Greater Glasgow and Clyde Deputy Medical Director: Mental Health and Addictions, NHS GGC</p> <p>Programme Manager, Glasgow Centre for Population Health Director, Glasgow Centre for Population Health</p> <p>Vice-Principal Learning & Teaching, University of Glasgow Professor of Health Economics, University of Glasgow</p> <p>Interim Deputy Director of Health Improvement Division, Scottish Government</p> <p>Director of Regional Economic Growth, Glasgow City Council Councillor, Glasgow City Council Head of Corporate Policy and Governance, Glasgow City Council</p>
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IN ATTENDANCE

<p>Ms Rebecca Lenagh-Snow Mrs Jennie Coyle</p>	<p>Administrator, Glasgow Centre for Population Health Communications Manager, Glasgow Centre for Population Health</p>
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726	<u>WELCOME AND APOLOGIES</u>		
	<p>Mr Matthews welcomed everyone to the meeting, particularly Ms McGinty who joins the Board as the new GCC representative in place of Mr Colin Edgar.</p> <p>Apologies were recorded from Dr Pete Seaman, Ms Suzanne Miller, Dr Emilia Crichton, Mr Colin Edgar, Ms Fiona Buchanan. Prof Collins explained Dr Seaman’s absence from the meeting and the Board wished him a full recovery.</p>		Noted
727	<u>MINUTES OF LAST MEETING, ROLLING ACTIONS AND MATTERS ARISING</u>		
	<p>The minutes of the last meeting were ratified.</p> <p>Under matters arising/rolling actions Dr McLean highlighted:</p> <ul style="list-style-type: none"> • Links about the austerity research with University of Glasgow colleagues are developing and being progressed. • The climate change paper is still in draft but Dr McLean confirmed that links have been made with Scottish Government 		

	<p>colleagues in relation to the paper and will share a draft once ready.</p> <ul style="list-style-type: none"> • Ms Julie Robertson met with MRC colleagues on 23rd January. • iMatter survey progress is noted in the General Update paper. • Prof McIntosh has shared the Café Culture survey highlighted during the risk register review. • Dr McLean will ask Drs Garnham and Timpson to make contact with Prof Moore about the Mental Health Hubs work. • Dr Culshaw corrected that the 'diversity pathway' mentioned should be 'neurodiversity pathway'. This will be corrected in the minute. 		<p>GCPH</p> <p>GCPH</p> <p>GCPH</p>
728	<u>CHANGING LIFE EXPECTANCY: RESEARCH AND COMMUNICATIONS</u>		
	<p>Prof Collins introduced the thinking behind Mrs Coyle's update, and how it links with wider thinking around the importance of the communications role within the Centre.</p> <p>Mrs Coyle introduced and spoke to her presentation on the communications approach taken around the changing life expectancy work [attached]. Among other points she highlighted use of new language around 'emergency' and 'crisis', the importance of eye-catching data and figures in the October media coverage and the launch of the report and animation in the May media coverage.</p> <p>Mrs Coyle then asked how far does this high-level media coverage translate into action? Mrs Coyle ran through her reflections on the coverage received and highlighted the possible need for a theory of change to ensure our communications are evidence-led and impactful.</p> <p>Mr Matthews thanked Mrs Coyle for a very good presentation.</p> <p>Ms MacNee agreed that outcomes are what we want to achieve but how the work is communicated is important. She thought a theory of change would be helpful, but this is not necessarily something GCPH needs to come up with on its own. She has put Prof Collins in contact with relevant colleagues at Scottish Government who are working on theory of change work at the moment.</p> <p>Ms MacNee also highlighted that the Health Foundation has launched a new campaign called Health Equity which is publicising differences in life expectancy in a number of cities across the UK, including Glasgow. Mrs Coyle said she was unaware of the campaign and we had not had any contact from the Health Foundation in connection with it. Ms MacNee will share the details she has received about the campaign with Mrs Coyle.</p> <p>Prof McIntosh thought it was a very good presentation and asked what level a theory of change would be positioned at – micro or macro level? Mrs Coyle thought we need an overall communications one but also to then be able to drill down into specifics. Prof McIntosh said this led her thinking to the Director's report and about what the space that GCPH operates in, and what is the direction of travel for the Centre.</p>	 <p>Comms_slides for Board 22.03.23.pdf</p>	<p>SG/GCPH</p> <p>Ms MacNee Mrs Coyle</p>

	<p>Prof Fischbacher-Smith agreed that it links very well in with thinking about the direction of travel. She wanted to congratulate Mrs Coyle and the team on the great communications work. She mentioned the 40 recommendations from the main austerity report, and she had discussed them with university colleagues and there was wide agreement but they also asked what and where are the drivers for these?</p> <p>Dr Culshaw agreed that things needing to be achievable, and the point about media coverage and finding a way to keep issues in people’s minds. He wondered if the political pick up helped or distracts from the topic and if there is any way of addressing that? He also wondered about a different kind of narrative to frame this evidence.</p> <p>Cllr McTaggart agreed about the fleeting nature of media and media coverage. They do share concerns at GCC about these issues. The issue of what is achievable and ‘where can we make a difference?’ is a key one.</p> <p>Mr Rush agreed it was a great presentation and impressive media coverage was achieved. He would agree with Dr Culshaw regarding the coverage and framing of the evidence. It is a political issue but not party political.</p> <p>Mrs Coyle said she agreed with the points about framing our messages and passed on her thanks for the helpful feedback.</p> <p>Prof Collins congratulated the Comms team on their work and also their focus on how they can progress to do better on top of the high-quality work they have been doing. He agreed with the points above about framing: We are now being careful to try to ensure a focus on ‘policy’ rather than ‘the political’.</p>		
729	<u>REPORT FROM DIRECTOR</u>		
	<p>Prof Collins briefly spoke to this report [GCPHMB/2023/444]. He highlighted the evolving challenges for the Centre and its position in the current context. He also spoke about the work and discussions that have been taking place with the team in relation to the work of the Centre, pivoting in response through a refreshed strategy and set of priorities. Prof Collins also shared as an appendix to the paper an excerpt from his interview paperwork which proposed key activities which should be undertaken within the first three and six months and year in post. These proposed activities are clearly aligning with the internal and external work taking place.</p>		
730	<u>DISCUSSION</u>		
	<p>The Comms presentation and report from Director were discussed.</p> <p>Cllr McTaggart asked how do we move forward with the partners around the table? We need to do something different as we in various ways seem to have had the ‘answers’ for many years now, but have not seen the desired progress.</p> <p>Prof Fischbacher-Smith was struck by paragraphs 4 and 5 (of paper GCPHMB/2023/444) about the Centre wanting to play a special role and how this has not been achieved. We need to think about that,</p>		

	<p>as it is not due to the quality of the work, which has always been high. She thinks we have landed on a really key question here and thought needs to be given to this as a Board. Perhaps a strategic workshop with Board members may be helpful to give focused time and thought to these questions?</p> <p>Mr Matthews agreed that maybe we are at a point now where a strategic half day or similar was needed.</p> <p>Ms McNee thought it was a good, thoughtful paper and she felt quite optimistic about what is now happening at the Centre. She has a long history with GCPH and thinks the main two things about the Centre are, firstly, relationships – Prof Tannahill had key relationships with Scottish Government in the set up and early days of the Centre – and, secondly, what the focus of the Centre should be – local, West of Scotland or Scotland wide.</p> <p>Dr Culshaw said he was new to the Board and the workplan of the Centre is very impressive, but he wondered if this has been spreading GCPH a bit thin. He wondered if we should look at where the focus is and where we can make a difference. He also queried if there had been any meta-analysis done on what works at a national or international level? If so, this could indicate what areas we should concentrate on.</p> <p>Ms McGinty said she was also new to the Board, but she would say it is a difficult environment at the moment, with an increasingly difficult budget environment. At GCC they are focusing intensively on the early years and would find pointers or data in that area from GCPH very useful.</p> <p>Prof Collins agreed a strategic half day would be very helpful and GCPH will progress this suggestion. He felt Dr Culshaw’s point about strategic decisions and work planning was crucial and aligns very closely with what has been happening with discussions within the GCPH team. He also took the points from Ms MacNee, about relationships and geographic focus, stressing that we have continued to work beyond Glasgow and to have a perspective on the relevance of our work in the wider context.</p>		<p>GCPH</p> <p>GCPH</p> <p>GCPH</p>
731	<u>GENERAL UPDATE</u>		
	<p>Dr McLean spoke to this paper [GCPHMB/2023/445] and highlighted several points.</p> <p><i>Governance and staffing</i> As a team we are delighted that Prof Collins has joined the Centre. He has had a busy first three months and has established the Centre Leadership Team to take collective governance within GCPH. The formalisation of this arrangement is being progressed as part of a wider reorganisation withing the Public Health Directorate of NHS GGC.</p> <p>Lynn Naven retired from her Research Specialist post at the end of March after 12 years with the Centre. Ms Naven has led on several important pieces of work during her time at GCPH, key among them the Healthier Wealthier Children initiative. The team and the Board</p>		<p>To note</p> <p>To note</p>

	<p>In relation to the active travel work, Prof Collins commented that we are keen to not just make recommendations to people operating in various contexts, but to stimulate and support evidence-based discussions with relevant individuals, groups and bodies which can help to find constructive, and where possible consensual, ways forward. Ms McGinty welcomed this approach and said that the council do need to take various perspectives into consideration in their planning work.</p>		
732	<u>FINANCE UPDATE</u>		
	<p>Dr McLean spoke to this paper in Ms Buchanan's absence [GCPHMB/2023/446].</p> <p>Key points to note are that the Scottish Government funding for 2022/23 has been received, including an uplift of £50k.</p> <p>The NHS payment settlement has now been agreed, this is at a slightly higher level than forecast, 7.4% as opposed to 3% budgeted for – this has however been balanced by staffing underspends and overall results in a break-even position. Going forward, last year's pay uplift and next year's 6.5% plus a one off payment, will need to be factored into budget planning. Given these uplifts we will be more committed than our SG grant and consideration will need to be given to the use of our carry forward and additional income supports streams.</p> <p>Ms Buchanan also highlighted that the NHS is having to make significant savings (£75M in 23/24), with GCC in a similarly challenging position.</p> <p>The learning and development line has seen little spend as many resources continue to be available online at minimal or no cost. A second round of in-house media training for staff is planned in May.</p> <p>There has been a slight change in timescales for the website CMS upgrades and spend will now go through in the 2023/2024 budget year.</p> <p>There will be an estimated carry forward of £250,000-£300,000, which is in line with previous years.</p> <p>Prof Collins commented that Staffing, Management and Administration take up the majority of the GCPH budget and funding at present and this will need to be looked at in preparation of the 23/24 budget plan.</p> <p>The contents of the finance update were noted and accepted.</p>		<p>To note</p> <p>To note</p>
733	<u>AOCB</u>		
	<p>Prof Collins thanked Dr McLean for all the work and support she has provided to the team and to himself since he came into post, especially with Dr Seaman being off. The formalities to have Dr McLean formally act up into the existing Deputy Director job description, in the absence of Dr Seaman (who is Associate Director), are being progressed through NHS GGC HR.</p>		To note

	<p>Mrs Coyle highlighted that from a team perspective it has been very good to have new leadership within the Centre after a long period of interim arrangements.</p> <p>Ms MacNee asked that best wishes be passed on to Dr Seaman.</p> <p>Ms MacNee's also informed the Board that this would be her last GCPH Board meeting as she will be moving onto a new role in SG in prison health. She also updated that Anita Morrison and Nicola Edge from Scottish Government Health and Social Care Analysis Division have been put in touch with the Centre as the new SG representatives on the Board.</p> <p>On behalf of the Management Board and the Centre Mr Matthews thanked Ms Macnee for her very important contributions during her time as a Board member.</p>		<p>To note</p> <p>To note</p>
734	<u>DATE OF NEXT MEETING</u>		
	The date of the next Management Board meeting is: Thursday 29 th June, 2-3.45pm.		To note

Rolling Actions list (June 2023)

Board meeting date	Action	Responsibility	Update
<i>8th December</i>	In relation to the ongoing media interest and communications in the austerity work, Mrs Coyle to follow up with Kaukab Stewart following the MSP briefing.	Mrs Coyle	Followed up and awaiting response.
<i>8th December</i>	Ms MacNee stated her interest in the climate change and health synthesis and requested to see a draft.	Dr McLean	The paper is still in preparation and GCPH team members have been in touch with Scottish Government in relation to the focus of the paper.
<i>23rd March</i>	Ms MacNee to our prof Collins in touch with SG colleagues leading on theory of change work, and to share information about the Health Foundation's health Equals campaign with Mrs Coyle.	Ms MacNee, Prof Collins, Mrs Coyle	SG colleague contact details and information about the Health Equals campaign shared. See update in General update paper.
<i>23rd March</i>	Request for a strategic awayday session for Management Board Members to be planned.	Prof Collins, Dr McLean	Session will take place on Monday 12 th June with GCPH Management Board and EMT members.
<i>23rd March</i>	Expected publication of active travel case studies report.	Mrs Coyle	This report 'Commuting, COVID and decarbonising transport: learning from five Scottish institutions on their progress in decarbonising transport and supporting active and sustainable travel' will be published in June.



**Glasgow Centre for Population Health
Management Board
12 June 2023**

General Update

Recommendations

Board members are asked to:

- Note this update on progress since the last Management Board meeting on Thursday 23 March 2022.
- Identify any developments and priorities in their own organisational contexts that are of potential significance for the Centre.

Governance and Staffing

1. The proposal to establish a GCPH Centre Leadership Team (CLT), composed of the Director supported by two Deputy Director posts (with a revised DD job description), continues to be considered within NHS GGC, within the wider context of a structural review of the Public Health Directorate (of which GCPH is a part), led by Dr Emilia Crighton (Interim Director of Public Health). As an interim measure, due to the sickness absence of Dr Pete Seaman, Dr Jennifer McLean, has taken up the post of acting Deputy Director (under the existing Deputy Director job description) until mid-August. We hope that by that point the proposal will have been approved and the new team will be constituted or be in the process of being constituted.

The 'shadow' CLT continues to meet weekly with a formal agenda and note of actions, supported by Ricky Fleming, GCPH Office Manager. A key focus of meetings has been maintaining good oversight of activity across the Centre, meeting governance arrangements and requirements, planning for strategic team development sessions with a focus on renewal of a collective mission and purpose, strategy and priorities, organisational values and culture, and the work to refresh the Centre workplan in line with our renewed strategy and purpose. These discussions have been both challenging and productive.

2. Prof Chik Collins continues to meet with partners and key actors from across the City and across sectors and professional disciplines to establish connections and develop understanding of their key priorities as we work towards the renewed GCPH strategy. The meetings since the last report to the Board have included: Clyde Gateway Urban Regeneration Company, the Leader of Glasgow City Council, the Senior Adviser to the Leader of the Council, the UK Government's Cabinet Office, the Glasgow Chamber of Commerce, the Yunus Centre at Glasgow Caledonian University, the Vice-Principal and Head of College of Medical, Veterinary and Life Sciences at the University of Glasgow,

the Health Improvement Managers at the Glasgow HSCP, the Glasgow Child Poverty Pathfinder, Health Equals/Health Foundation, the Wheatley Group, and the Scottish Community Development Centre/Community Health Exchange.

3. *GCPH Management Board membership.* Following the stepping down of Ms Karen MacNee from the Board due to a new post within Scottish Government, we are pleased that Ms Anita Morrison and Ms Nicola Edge, Deputy Co-Directors, Health and Social Care Analysis, Population Health Directorate, have now joined the Board. We are also pleased to announce that Mrs Michelle McGinty, Head of Corporate Policy and Governance and Mr Frankie Barrett, Group Manager, Employment and Skills, Economic Development, Chief Executive's Department, both of Glasgow City Council, have also joined the Board in place of Mr Colin Edgar and Mr Kevin Rush. We pass our sincere thanks to Karen, Colin and Kevin for their important contributions and support to the Board and the GCPH team over the years.
4. *Joint GCPH Management Board and Executive Management Team awayday.* Following discussion at the last Board meeting in March 2023 it was proposed that protected time to discuss the strategic direction and work priorities of GCPH would be welcomed by members. The awayday session will take place on the morning of Monday 12th June (9.30am – 1pm) at Glasgow City Chambers. All members of the GCPH Management Board and the Executive Management Team have been invited. The purpose of the session is to reflect on how, in the current, very challenging, social and economic context, the GCPH should be prioritising its resources to support partner organisations to achieve impact in relation to population health improvements and, in particular, reducing health inequalities. To support these discussions, we will provide an update and feedback from our extended series of team development sessions, which have been focusing, amongst other things, on this question. Regular standing Board papers (minute, rolling actions, general update, finance update) have been prepared and shared in advance to ensure that Board and EMT members continue to have good oversight of more routine/ongoing GCPH progress and developments, while being able to focus discussion primarily around strategy and priorities.
5. iMatter is the annual NHS Scotland Staff Experience continuous improvement tool, developed nationally, and used within all NHS Scotland Boards. iMatter is designed to help individuals, teams, Directorates, Health and Social Care Partnerships (HSCPs) and Boards to understand and improve staff experience. The last iMatter survey for the GCPH team (August 2022) reported a number of key areas for improvement, including confidence that performance is managed well within the organisation, visibility of Board members in the organisation, and involvement in decision making about 'my organisation'. The response rate from staff was lower than would have been hoped for, and also there was some apparent confusion around how to interpret and respond to some of the questions. The survey for 2023 was circulated to the team on the 15th May for completion. Guidance has been provided to the team as to the importance of us having good engagement with this tool, our desire to understand and to make use of the results, and also regarding how to interpret/respond to key questions. Looking at the period since the last survey, recent developments, including a strengthening focus on 'performance management' and engagement with staff around mission, strategy, and priorities, and hopes for the future, seem to be making a difference internally, and we hope this will be reflected in the survey responses.
6. Our colleague Dr Russell Jones will retire from GCPH on the Friday 30th June. Russell has worked for NHS GGC for 23 years and with the GCPH for 19 years. Russell joined

NHS GGC as a Public Health Research Officer (Addictions) in December 1999 before moving onto the post of Health Promotion Senior Research Office (evaluation) in July 2001. Russell joined the GCPH team in December 2004 where, most recently, he has co- led the programme on Sustainable and Inclusive Places, supporting processes of change to help Glasgow become a more inclusive, resilient, and sustainable city where local citizens are empowered to influence developments in their local area. Russell was also Glasgow's Healthy City Coordinator for the UK Healthy Cities Network. Russell has been a social researcher for over thirty years and has a long-standing interest regarding the interactions between people and their environments. The team wish Russell much happiness in his retirement and thank him for his contribution to GCPH over the years.

7. Mairi Young 'returned' to work from maternity leave on the 24th April – though, after using accrued annual leave entitlement, will return to the office in early July. Pete Seaman, who has been on sick leave since mid-March, will, by the time of the Board meeting, we anticipate, have returned to work on a phased basis – and may be able to join the Board meeting.
8. *GCPH equalities work and taking forward GCPH as an anti-racist organisation.* Following the team training session with the NHS GGC Equality and Human Rights Team (EHRT) in November, we are continuing our discussions with EHRT about undertaking an informal Equalities Impact Assessment (EQIA) of specific projects within the GCPH workplan, with a view to developing guidance to support the assessment of risk for future projects. In agreement with the EHRT, three initial areas of work will now progress with an informal EQIA. These include the small grants project, the evaluation of the Go Cycle fund and an evaluation of a housing intervention for vulnerable tenants on Universal Credit.
9. *Budget: Year-end for 22/23.* The GCPH financial plan for 22/23 as initially formulated (see GCPHMB433, June 2022) was based on an assumed Scottish Government allocation of £1.25m, and other income of some £135k, giving a total of £1.385m in income. This was set against an anticipated expenditure of some £1.695m, with the shortfall to be covered by a carry forward from previous years of some £310k, leaving a further, reduced, carry forward of some £86k into 23/24. In the event, variances from plan in both income and expenditure (including an additional £50k from Scottish Government – which may or may not be consolidated going forward) led to an increased carry forward into 23/24 of some £212k.

It is important to note that in 22/23 our basic running costs (core staffing, accommodation and running costs) exceeded our regular SG allocation, and that total actual expenditure (albeit almost £150k lower than had been planned) *exceeded all of our income* (SG and other income) *by some £100k*. This outcome was based on not replacing staff while on secondment or on maternity leave or when leaving the organisation. This picture reflects a pattern which has been established in recent years of relying increasingly, in any given year, on carry forward from previous years – which clearly presents challenges of sustainability.

10. *Budget: Planning for 23/24.* We are working with Ms Fiona Buchanan (Principal Finance Manager, Corporate and Partnerships Finance at NHS GGC) to confirm the GCPH budget plan for 2023/24. The development of this plan has been somewhat delayed. This is due, firstly, to some significant uncertainties around income:
 - The precise level of SG funding – £1.25m (as 2017/18-2021/22) or £1.3m (as in 2022/23 – a 4% increase), or with a further increase

- A potential allocation coming via NHS GGC to support salary uplifts over the past two years – potentially £200k (we are also unclear as to whether this would be a one-off payment or somehow consolidated for the future – though the former seems the more likely).

Secondly, though less crucially, we need also to work out the implications of the refresh of the GCPH workplan for 23/24 (which is still in process).

What is clear at this stage, is that lacking the additional income indicated above, GCPH will, even after tightly limiting programme funds and managing spend very carefully, be likely to spend all income in year and have little or nothing to carry forward – which would pose very significant challenges entering 2024/25. This is an important matter which will be an aspect of the presentation and discussion at the Special Board meeting. At the point of writing, Ms Buchanan is on leave and not due to return until 8th June, and this may pose challenges in having a budget plan circulated in advance of the meeting, or ready for the meeting.

Developments and partnerships

11. *NIHR research funding call, Health Determinants Research Collaboration.* Board members may remember that GCPH contributed, towards the end of 2021, to an unsuccessful first stage application to the first call for this funding. The programme of funding looks to create cultures of research and evidence-use within local authority policy and planning. A requirement of the funding (£5m over 5 years) is that the collaborations be local authority led, with universities and others as joint and co-applicants (in our case MRC Social and Public Health Sciences Unit at Glasgow University, NHS GGC, GHSCP and GCPH).

In the early months of this year there was work towards submitting an application for a second call – with an April deadline. After some challenges in securing clarity around approach, a much-improved application was submitted (with colleagues at MRC/CSO SPHSU making a particularly important contribution). The collaborating partners met at Glasgow University on 25th May to discuss how we will seek to progress to a second stage application, if successful at stage one, and importantly, there is an appetite to take forward collaboration in some way even if funding is not secured at this stage. Clearly, the creation of a HDRC in Glasgow would have significant implications for the work of GCPH – perhaps especially in light of some of the financial issues outlined in Paragraph 10 above.

12. *Chamber of Commerce.* GCPH is committed to working with those who are in various ways able to shape key determinants of health in the city of Glasgow and elsewhere. One constituency which is able to do that, but which GCPH has not hitherto engaged with very systematically, is the business community. Over the recent months we have been progressing a dialogue with the Glasgow Chamber of Commerce, who we have found to be very interested in exploring collaboration opportunities. Initially, our Director met with the Chief Executive, Stuart Patrick, leading to a further meeting involving some key colleagues from each organisation. The organisations have since exchanged short papers, outlining interests and possible areas of collaboration, which are to provide the basis for further progress in the coming months. We will update the Board in due course.
13. *The Health Foundation and Health Equals campaign.* At the March Board meeting, Ms Karen MacNee highlighted the Health Equals campaign being led by the Health

Foundation. Their website states that '*Health Equals is a group of people and organisations who want equal opportunity for health and wellbeing, for everyone. We bring together expertise, influence and evidence to create change, working with people who understand what impacts health, from a variety of different perspectives*'. The campaign group currently brings together 28 organisations from across different sectors and areas of focus in the UK, including Crisis, Race Equality Foundation, British Red Cross, JRF, Citizens Advice, Shelter, Royal Society for Public Health, Local Government Association, Institute for Health Equity and What Works Wellbeing, to name a few. A meeting in late April took place with Carrie Hume, Head of Health Equals, where it was explained that Health Equals was a 5-year initiative funded (10 staff and working with 9 public affairs, creative agencies) by the Health Foundation to develop a 'new approach', encompassing a new voice in the public health space about the wider determinants of health. They are one year into their work and currently running two main campaigns, largely aimed at increasing public awareness and understanding of the root causes of health inequalities. There are clear overlaps with our own work, and we have agreed to share information and to have further conversations in the coming months and we will be seeking to work constructively with them and, where we can, to influence and support their interventions. In parallel to this, there have also been discussions between David Walsh and the Health Foundation in Scotland, and GCPH is now looking to take that discussion onto a more strategic level.

14. *Common Health Assets*. The third meeting of the Common Health Assets Lived Experience Panel (LEP) took place at the Bromley-by-Bow Centre in London on Thursday 4th May. The meeting brought together panel members from Northern Ireland, Bournemouth, East London, Lanarkshire and Glasgow. Project researchers and academic partners also joined the meeting for the afternoon session. As well as providing a space for panel members to further connect with each other and provide updates on the community organisations they work with, especially the funding challenges that many of them currently face, the meeting provided updates from across the research project as a whole and activities and discussion about the development and agreement of programme theories. The fourth meeting of the Panel will take place in October/November of this year in Bournemouth or Belfast.
15. Funding bids/funded projects
 - *CommonHealth Catalyst – Developing a Community Research Consortium to Address Health Disparities* funded by the AHRC (November 2022 to July 2023). Involving Dr Jennifer McLean, Dr David Walsh, and Mohasin Ahmed from GCPH. Led by Prof Michael Roy, Professor of Economic Sociology and Social Policy at Glasgow Caledonian University, this project will catalyse a 'community research consortium' focused on Lanarkshire. David Walsh is contributing to Theme 1: Learning from the past to shape future solutions, specifically leading on the historical epidemiology and health profile over time, with a report providing contextual information for the other components of the project (and future development of the project). This will mean providing a detailed picture (for Lanarkshire and its communities) of: population health (outcomes and inequalities); its key determinants; the relevant data sources that exist to explore these issues; and important gaps in the data and evidence base. Jennifer McLean is contributing to Theme 2: Mapping the health and wellbeing ecosystem and leading the community asset mapping component. Eight workshops with community-based organisations have been delivered across Lanarkshire with the support of SCDC. A report of the key themes and learning from the workshops is in preparation. Mohasin Ahmed is leading the

Patient and Public Involvement and Engagement strand and has been establishing a Lived Experience and Advisory Panel (LEAP) to ensure the project is informed by community voice and perspective. The second meeting of the LEAP took place in Motherwell on the 18th May. The project is nearing completion.

Communications outputs and activities

16. This section summarises the Centre's communication-related outputs and activities since the last meeting in March in line with the agreed approach to communications monitoring and reporting.

Events and seminars

17. On 27th April, we hosted a film screening in the GCPH offices of the ['It will start with me'](#) documentary film made by the peer researchers involved in the ['Our Rights Our Communities'](#) advocacy project and the peer-led evaluation of that (which was supported by Dr Lisa Garnham). The film documents the experiences of peer researchers and the processes involved in conducting peer-led research. The event was attended by the six 'New Scots women' who co-produced and appeared in the film along with their families and a range of community organisations. The film will also be screened during the 'Govanhill International Festival and Carnival' in August. It has also been submitted as a 'Beyond the Text' piece to *Sociology Research Online*.
18. Jill Muirie collaborated on a recent event with colleagues from the University of Glasgow on developing a better understanding of the research under way, or planned in the academic institutions in Glasgow, that relates to the food system. The aim was to ascertain what research is happening that might be relevant to the Glasgow City Food Plan and to seek to build a more cohesive research strategy with our academic partners going forward. Jill also spoke at a Food Sovereignty Network event in May on sustainable cities and food systems at the University of Glasgow ARC.
19. Led by Glasgow Food Policy Partnership (GFPP), we are supporting the organisation of a Glasgow Food Summit to be held on 6th September at Glasgow City Chambers. This follows a previous food summit held in May 2019, which led to the development of the 10-year Glasgow City Food Plan. The aim of this event is to refresh the plan, taking account of recent contextual changes, and to increase support for the delivery of the plan from partners and stakeholders. The event will be a mix of presentations from experts and workshop sessions based on the six themes of the plan.
20. A drop-in session for MSPs and parliamentary staff is being held at the Scottish Parliament on 7th June. Organised by Paul Sweeney, MSP and Labour Shadow Minister for Mental Health, Health Inequalities and Sport, this aims to raise further awareness of the changing mortality rates research. Chik Collins, David Walsh and Jennie Coyle will attend. Also sponsored by Paul Sweeney, we are holding a GCPH exhibition in the Garden Lobby of the Scottish Parliament between 6-8 February next year. This will again aim to engage MSPs more in our work and will showcase a broader range of our research.
21. In collaboration with the Faculty of Public Health, the third webinar in our current Seminar Series will be delivered by Prof Kevin Fenton on 12th June. The seminar is to be entitled '*A public health approach to incorporating anti-racism and structural discrimination in tackling racial and ethnic health disparities*'. Prof Fenton has occupied a number of high-profile roles within Public Health in England and is currently London Regional Director at

the Office for Health Improvement and Disparities, Health Advisor to the Mayor of London, and President of the UK Faculty of Public Health. In his talk, Prof Fenton will explore the importance of incorporating anti-racism and addressing structural discrimination in public health efforts to tackle racial and ethnic health disparities. He will discuss how systemic racism and discrimination contribute to health inequities and how a public health approach that recognises and addresses these factors can lead to more effective and equitable solutions. He will also explore practical strategies for incorporating anti-racism and addressing structural discrimination in public health policies and programs. [Further information and registration here.](#)

22. Planning for Seminar Series 20, to run from autumn 2023 to spring 2024, is progressing with an outline and potential speakers/topics for the series now developed. A recurring thread running through all the seminars will be a reflection on the past two decades and what that means for the present, and future, in terms of population health improvement and inequality reduction. The series will likely be a mix of in-person events and online webinars.

Publications

23. [Glasgow's bikeshare scheme: trends in use.](#) (Lisa Garnham, Bruce Whyte). This report provides an analysis of bicycle hires made by users of the Glasgow bikeshare scheme over an eight-year period, from scheme inception in July 2014 to the end of July 2022. The report provides an insight into how the scheme has developed and how it is used. It also provides a focus on the potential health and environmental benefits of the scheme and how it may impact on transport inequalities in the city.

Forthcoming publications

24. *Commuting, COVID and decarbonising transport: learning from five Scottish institutions on their progress in decarbonising transport and supporting active and sustainable travel.* Led by Bruce Whyte, this report is the product of a collaboration between the University of Strathclyde, University of Glasgow, City of Glasgow College, Glasgow City Council, and the Scottish Parliament. The report focusses on the progress these five organisations are making in achieving a shift to more active and sustainable travel among staff and students. The information gathered, via a desktop exercise, describes the context of each organisation, staff travel trends, the impacts of COVID-19 on travel, and active and sustainable travel policies and schemes to promote more sustainable travel. A workshop to discuss the findings and develop some perspectives for future engagement was held on 28th March. An event report is in draft and the key learning points from the event are now being incorporated into the final case studies report. Publication June 2023.
25. *A rapid examination of the impact of the cost-of-living crisis on disabled people* (Chris Harkins). Written in collaboration with Glasgow Disability Alliance, this paper presents a rapid examination of the impacts of the current cost-of-living crisis on the lives, health and wellbeing of disabled people. It includes the experiences and perspectives of disabled people living in Glasgow along with a scoping review of emergent evidence from across the UK concerning how disabled people report that the current crisis is impacting their lives. Publication June 2023.
26. *Summary of a Place Standard Pilot in Barmulloch, Glasgow* (Russell Jones). The Place Standard is a widely used resource for discussing community issues and priorities. It encourages users to consider the quality of their neighbourhood by assessing 14 themes.

This report summarises findings from a Place Standard event in Barmulloch, Glasgow, which was a pilot for the Wheatley Group to explore the applicability of the tool for engaging with their customers. Publication June 2023.

27. *Evaluation of Glasgow City Council and Registered Social Landlords (RSLs) project to prevent homelessness* (Katharine Timpson, James Egan). This pilot between GCC and four RSLs was undertaken to test a method of fast-tracking people from temporary accommodation into secure tenancies. It was proposed that fast-tracking support measures could reduce rent arrears accrued when awaiting entry into a new tenancy, which in theory could improve RSL-tenant relationships and increase the likelihood of tenancy sustainment. Publication June/July 2023.
28. *An applied synthesis of research and literature on patients with mental health and wellbeing needs* (Katharine Timpson, Lisa Garnham). This paper synthesises the findings of work originally undertaken in the context of planning for new Mental Health and Wellbeing services in Glasgow. This includes a literature summary of Glasgow-based grey literature on “what ‘good’ looks like” in mental health service provision, conducted by GCPH; community conversations around what mental health and wellbeing services should look like, carried out by Health Improvement Teams; pathways workshops with professionals who work in mental health and wellbeing around the needs of those not currently well served by services and how to better meet those needs, carried out by Glasgow HSCP; and the perspective of a service that supports patients within a Primary Care setting, offering connections to a range of services including outwith the health service. Taken together, these offer insights into how mental health and wellbeing services need to be designed and operated, in order to meet the needs and wants of patients – both now and in the future. The synthesis identifies the overlaps and tensions in their findings, fleshes out what this means for the design of mental health and wellbeing services, and identifies areas in which further evidence or information is required. Anticipated publication July/August 2023.

Consultation responses/contribution to external publications

29. We have submitted responses to the following consultation/call for evidence.
 - Glasgow City Council [Glasgow’s Draft Local Housing Strategy 2023-2028](#) (April 2023)

Journal articles

30. Douglas MJ, Teuton J, Macdonald A, Whyte B, Davis AL. Road space reallocation in Scotland: A health impact assessment. *Journal of Transport & Health*, Volume 30, 2023, <https://doi.org/10.1016/j.jth.2023.101625>.
31. Zhang A, Gagne T, Walsh D, Ciancio A, Proto E, McCartney G. [Trends in psychological distress in Great Britain, 1991-2019: evidence from three representative surveys](#). *Journal of Epidemiology & Community Health* 2023.

Media

32. The Small Grants collaborative project between GCPH and University of Glasgow has been shortlisted for the Outstanding contribution to the local community prize in *The Herald* [Higher Education Awards 2023](#).

33. Media training for the CLT and Programme Managers was held on 18th May at GCPH. This one-day workshop involved active learning and simulated TV and radio scenarios to further develop our media broadcasting competences. Feedback on the individual performances of participants was positive, while some internal work to improve and strengthen the communication of our core messages was identified.

Digital

34. The [April e-update](#) was circulated to our 3,000 network subscribers at the start of the month. We are currently reviewing the frequency and format of these.
35. Following the tendering process led by the NHSGGC eHealth Senior Procurement and Contracts Manager, the contract for a new Content Management System (CMS) for the GCPH and Understanding Glasgow websites has now been awarded to tictoc Digital. Several scoping workshops have been held and work will commence shortly on the GCPH website, following by Understanding Glasgow. It is anticipated each website will take approximately three months, with the work expected to be complete by the end of this calendar year.
36. A third blog as part of our cost-of-living crisis blog series has been published by Jill Muirie [‘Cost-of-Living Crisis: Hungry for Change.’](#)
37. Bruce Whyte has been invited to write a guest blog for Public Health Scotland on the introduction of the LEZ in Glasgow in June. The blog focuses on why the LEZ is being brought in, the impacts of air pollution on health, where the LEZ fits in with other policy aimed at cutting carbon emissions and promoting sustainable travel in the city, and it provides important commentary on the concerns that the LEZ will negatively impact on people on low incomes who have older cars. Anticipated publication early to mid-June 2023.

**GCPH
June 2023**



**Glasgow Centre for Population Health
Management Board Meeting
12 June 2023**

Budget position: 1st April 2022 to 31st March 2023

Recommendations

The Management Board is asked to note:

- The Centre's financial position for the period April 2022 to March 2023 detailing expenditure of £1,462,742 against a full year budget of £1,694,967 which included £85,842 of reserves.
- The planned budget is comprised of the following streams of funding.

	£
• Annual SG Allocation	1,250,000
• External Income from Partners and Others	135,349
• Brought Forward from prior year	309,618

Commentary on Table 1

1. Spend against the staffing budget has concluded the year recording a small overspend. This is largely due to the greater than anticipated NHS pay settlement averaging 7.4% against a planned uplift of 3%.

The recruitment of the GCPH Director, funded via the Public Health Directorate has resulted in the full costs of the Associate Director Post now being charged to GCPH. (During the period of vacancy, the Public Health Directorate contributed to GCPH by partially funding the Associate Director post in lieu of the vacancy)

2. Funding from the Scottish Government was transferred via NHS GGC Board allocation letter in November 2022, and it is pleasing to note the increased level (4%) of funding at £1,300,000. Confirmation has been received that this amount will be consolidated.
3. Other income returned a near breakeven position (a slight positive variation).
4. Project spend was steady throughout the last 2 quarters of 22/23 but did not fully consume the budget set aside. Programme work continues into financial year 23/24.
5. The allocated to training and development budget saw little spend during 22/23.
6. The plan to upgrade and migrate both the GCPH and Understanding Glasgow websites is now underway following award of the contract, but due to contract delays will now straddle into 23/24 – meaning an underspend for 22/23.

7. Accommodation costs were slightly underspent on budget at the year end, largely due to the phasing of costs which were over accrued at the start of 22/23.
8. In summary, GCPH has returned a balanced budget position for 22/23. The unallocated (reserve) funding of £85,842 was not required and further underspend, together with the additional Scottish Government income, means that a total of £284,290 is potentially available for 23/24 commitments, subject to Audit.

Fiona Buchanan
9th June 2023

Table 1. GCPH budget position: 1st April 2022 to 31st March 2023

		<i>Planned 2022/23</i>	<i>Actual to March</i>	<i>Out-turn</i>	<i>Forecast</i>
	<i>Income</i>	<i>£</i>	<i>£</i>	<i>£</i>	<i>Variation from</i>
					<i>Budget</i>
					<i>£</i>
I 1	Annual SG Allocation	1,250,000	1,300,000	1,300,000	50,000
I 3	Other Income	135,349	137,414	137,414	2,065
	Total Income 22/23	1,385,349	1,437,414	1,437,414	52,065
I 4	Carry Forward from previous years	309,618	309,618	309,618	-
	Total Available 22/23	1,694,967	1,747,032	1,747,032	52,065
	Expenditure				
	Research:				
E 1	Action on Inequality	25,000	8,534	8,534	16,466
E 2	Understanding Health Inequalities	30,000	31,014	31,014	(1,014)
E 3	Sustainable Inclusive Places	60,000	43,633	43,633	16,367
E 4	Innovative Approaches to Improving Outcomes	6,000	10,847	10,847	(4,847)
E 5	New Project Developments - Mental Health	50,000	16,667	16,667	33,333
E 6	Training & Development	15,000	873	873	14,127
E 7	Allocation to Networks	5,000	-	-	5,000
	Total Research	191,000	111,568	111,568	79,432
	Communications:				
E 8	Communications (including website project costs)	110,000	56,325	56,325	53,675
	Total	110,000	56,325	56,325	53,675
	Management and Administration				
E 9	Centre Management, Admin & Running Costs	25,000	15,032	15,032	9,968
E 10	Accommodation Costs	130,000	103,458	103,458	26,542
E 11	Core Staffing	1,153,125	1,176,359	1,176,359	(23,234)
	Total Management & Admin	1,308,125	1,294,849	1,294,849	13,276
	Total Expenditure	1,609,125	1,462,742	1,462,742	146,383
	Balance	85,842			