



Management Board Meeting

Wednesday 18th June 2025

3.00 – 5.00pm

AGENDA

Conference Room, Olympia Building

1. Welcome and apologies
2. Minutes of last meetings (February 2025), rolling actions and matters arising
3. General update (GCPHMB/2025/472)
4. End of year report 2024-25 (GCPHMB/2025/473)
5. Work Plan 2025-26 (GCPHMB/2025/474)
6. End of year 2024-25 finance report (GCPHMB/2025/475) and 2025-26 Budget Plan (GCPHMB/2025/476)
7. AOCB
8. Close

Date of next meeting: 16th September 2025 at 3pm



**Minutes of a meeting of the Management Board
of the Glasgow Centre for Population Health**

**Tuesday 18th February 2025
Hybrid in-person/online meeting**

PRESENT

Dr Lesley Thomson (Chair)	Chair, NHS Greater Glasgow and Clyde
Dr Anita Morrison	Co-Deputy Director, Health and Social Care Analysis Division, Scottish Government
Mr Michael Kellet	Director of Strategy, Governance & Performance, Public Health Scotland
Dr Bea Von Wissman	Interim Head of Health Services & Inequalities, NHS Greater Glasgow and Clyde
Dr Pete Seaman	Deputy Director, Glasgow Centre for Population Health
Prof Laurence Moore	Director, MRC/CSO SPHSU
Prof Chris Pearce	Vice Principal for Research and Knowledge Translation, University of Glasgow
Prof Chik Collins	Director, Glasgow Centre for Population Health
Cllr Anne McTaggart	Councillor, Glasgow City Council
Prof Emma McIntosh	Professor of Health Economics, University of Glasgow
Dr Jennifer McLean	Acting Deputy Director, Glasgow Centre for Population Health
Prof Moira Fischbacher-Smith	Vice Chair, Vice Principal for Teaching and Learning, University of Glasgow

IN ATTENDANCE

Ms Meghan McEwan	Chair, NHS Orkney (observing)
Ms Gillian Neish	Training Consultant (item 739)
Ms Rebecca Lenagh-Snow (minute)	Programme Administrator, Glasgow Centre for Population Health

		<u>ACTION BY</u>
787	<u>WELCOME AND APOLOGIES</u>	
	Dr Thomson gave a welcome to the group, and introductions were made. Apologies were recorded from Ms Michelle Booth (GCC), Mr Gary Dover (GHSCP), Dr Una Graham (NHS GGC), and Dr Emilia Crighton (NHS GGC).	Noted
788	<u>MINUTES OF LAST MEETINGS, ROLLING ACTIONS AND MATTERS ARISING</u>	
	The minutes of the previous meeting (December 2024) were ratified, with one minor amendment of Mr Kellet's job title. Dr McLean spoke to the rolling actions from the December meeting of the Board. All rolling actions had been addressed/were in progress or being reported on as part of the meeting agenda.	Noted

	It was highlighted that mention of the External Advisory Group (EAG) has been removed from the MoU and Centre governance arrangements. The value of external advice was acknowledged, and an advisory group may be established to support the future work of the Centre.		Noted
789	<u>GENERAL UPDATE</u>		
	<p>Dr McLean spoke to the General Update paper [GCPHMB/2025/469] and highlighted several points.</p> <p>The next meeting of the EMT will take place on the 19th February. Feedback from the meeting will be provided at the next Board meeting.</p> <p>Gregor Yates is now on secondment to the Clyde Metro team.</p> <p>Several funding projects have been awarded or bids, which include GCPH team members have been submitted. Ms McEwan was very interested in the health impacts of community wealth building (CWB) and asked if Citizens Advice Bureau (CAB) was involved in the bid around debt? Dr McLean said the CWB bid is at stage 2 of consideration and the team awaits the outcome. The unmanageable debt is at an earlier stage of consideration with Stage 1 submitted in December and confirmed that the CAB is involved, and the bid has been community informed from the outset. GCPH would lead on the Public Involvement and Engagement component of both bids, if successful.</p> <p>Dr Morrison was pleased to see the NIHR announcement of the successful HDRC award and asked what that meant for GCPH. Dr Seaman reported they are currently working with Kimberly Hose at GCC on a workplan. GCPH had been costed in on contributions and input around communications and output knowledge translations. In terms of money 10% of Dr Seaman's time has been costed and then there would be individual pots of money depending on the tasks (including for events).</p> <p>Dr Thomson commented on the session the GCPH team had with Mike Burns around child poverty, particularly how 'research is driving the change' and how social services has been dealing with this which is very important for the team to hear. Dr Seaman thinks GCPH could also have space in helping to address the benefits of a focus on child poverty. This is an ongoing conversation and the CLT have a follow up meeting with Mr Burns and Mr John Sherry tomorrow.</p> <p>The Chair and Cllr McTaggart emphasised the importance of this as an example of public service reform and retargeting. Cllr McTaggart also mentioned the Glasgow Community Fund and will share details with GCPH once the fund is launched.</p> <p>Mr Kellet asked if there would be a launch for the HDRC? Dr Seaman confirmed there would, separate to the senior research involvement event. It is anticipated the launch will be in the first half of the first year.</p>		<p>Noted</p> <p>Cllr McTaggart</p> <p>Noted</p>
790	<u>QUARTERLY FINANCE UPDATE</u>		
	<p>Prof Collins spoke to the paper [GCPHMB/2025/470] prepared with assistance from Ms Buchanan and the NHS GGC finance team.</p> <p>The headline item to note is the Centre is due to finish the year much closer to a breakeven point than previously forecast.</p>		Noted

	<p>Spend is broadly as expected across the two teams. A new line (E6) has been added for the Cash First Partnership project funding.</p> <p>Some more spend may be put through if we can safely do so.</p> <p>The Board noted the finance update with no further comment.</p>		Noted
791	<u>ACCOMMODATION UPDATE</u>		
	<p>Prof Collins reported there had been a viewing of the Clarice Pears Building at the University of Glasgow on 10th January and this was very positive, although the precise space and associated costs have not been finalised yet.</p> <p>It has also been clarified that the lease on the Olympia building continues to the end of June 2025, so there is no immediate urgency to be fully moved by the end of March.</p> <p>There have been continued discussions with other partners regarding accommodation, but Clarice Pears is the strongly preferred choice, and discussions are proceeding on this understanding.</p> <p>Prof Collins thanked the UofG colleagues for their assistance in progressing the move and related discussions.</p>		<p>Noted</p> <p>Noted</p> <p>Noted</p>
792	<u>TOWARDS A REFRESHED GCPH PARTNERSHIP MOU</u>		
	<p>At the December Board meeting there was general agreement that partners were content with the edited version of the MoU document subject to small further revisions in relation to consistency of language and organisational status of each partner of the Board. These revisions were made and the updated draft MoU circulated to Board members in early February and again with the Board meeting papers.</p> <p>A. Further draft revision to MoU document</p> <ul style="list-style-type: none"> • Prof Moore asked for clarification around the titling of Appendix A, which is missing from the current document circulated. It was confirmed that the paper 'Past experience, future perspective, envisaged functions, impacts and required inputs (October 2024)' will be inserted. • Prof McIntosh highlighted in the updated changes version there was the inclusion of description of GCPH work across wider Scotland and she feels this is an important inclusion. Mr Kellet agreed with this. <p>Dr Thomson noted the updated version, including Appendix A, will be re-circulated and members given one week given for any more comments, after which this version will be considered final and progressed for sign off with the core partners.</p> <p>Partner representatives were also to be asked to provide a timescale required for institutional sign-off.</p> <p>B. Scottish Government funding</p> <p>It was hoped that confirmation of final funding for GCPH for 2026-26 would be available for the Board meeting, but Dr Morrison explained there is an ongoing financial process SG is going through before the precise level can be confirmed.</p> <p>Dr Morrison has spoken to the budget lead, and they indicated the final figure is likely to be closer to the £800k end of the proposed scale than the £1.3M. The figure is to be agreed by the end of the February.</p>		<p>GCPH</p> <p>Noted</p> <p>GCPH/ All</p> <p>GCPH/All</p> <p>Dr Morrison</p>

	<p>Comments:</p> <ul style="list-style-type: none"> • Dr von Wissman said this obviously means external funding is even more important and these collaborations with partners and other organisations will be very important. • Prof Collins said obviously we will be hoping to get as closer to the £1.3M rather than lower end. The £1.3M was budgeted on the basis of recruiting adequately after the difficult time the Centre has had recently with staffing and being able to offer reasonable security for the future. Prof Collins would also hope to be able to offer the best contract possibilities for recruitment. Alternative financial plans and models have been drawn up for other budget possibilities. • Related to this and the move to Clarice Pears, Prof McIntosh asked if there were any plans around launching or advertising GCPH to the wider school and making sure people know how they can work with us. • Prof Fischbacher-Smith said this links in with leveraging the UofG collaboration. She would also suggest meeting with stakeholders to get an idea of the projects and interests and ambitions of the School of Health and Wellbeing and the wider College of MVLS. She and Prof Pearce and McIntosh will think of some names to arrange initial meetings with. • Dr von Wissman said regarding this budget and SG, given the imminent launch of the Population Health Framework and emphasis on whole systems working - GCPH's importance and contribution here is clear especially in how translation is being prioritised. <p>Dr Morrison said she will take this discussion and these comments back to the SG Population Health Director and budget lead, Richard Foggo and John Nicholson respectively, and underline the points made.</p> <p>Dr Thomson indicated that a discussion is planned between herself and Richard Foggo on Wednesday 26th Feb.</p> <p>It was emphasised by all partners that this current financial landscape is extremely challenging.</p>		<p>GCPH</p> <p>Profs Pearce, McIntosh, Fischbacher -Smith and Collins</p> <p>Dr Morrison</p> <p>Noted</p>
793	<u>UPDATE ON GCPH WORK TOWARDS BECOMING AN ANTI-RACIST ORGANISATION</u>		
	<p>Ms Gillian Neish was welcomed and introduced to the meeting by Dr Seaman, and he briefly summarised the work the Centre has done around anti-racism, outlined in the paper [GCPHMB/2025/471]. Recognising how race and racialisation impacts on our workplace and our outside communications, and the work done internally which led to Ms Neish being commissioned to do some learning and development with the team.</p> <p>Ms Neish spoke on her experience working with the team and said it has been good to work with people willing to acknowledge that society is unbalanced and try to work on it. This is especially important in the current climate.</p> <p>Dr Seaman said there are a number of proposed actions going forward:</p> <ul style="list-style-type: none"> - An audit is required on where issues of racism and racialisation influences our workplans, evidence and findings. The application of EQIA to our work plan will assist this. - Mapping of other links in the city/services structure and linking with other the work of other organisations in this space. - Our organisational governance arrangements to ensure diversity. 		GCPH

	<p>Dr Thomson asked that we return to discuss the governance issue as a Board, to ensure it receives the time and consideration it requires, and that we consider issues of diversity beyond ethnicity.</p> <p>Mr Kellet highlighted work undertaken at PHS by CRE and an organisational action plan responding to the issues highlighted, which he is happy to share.</p> <p>Prof Fischbacher-Smith reported at UofG is that senior leaders have a personal plan and leadership objectives in relation to equality and diversity and anti-racism. UofG also has a shadow Board and is happy to share her thoughts about this. She also suggested considering other forms of mentoring such as reverse mentoring opportunities for staff.</p> <p>Dr Thomson agreed and said NHS has a number of forums that could be useful here. There was discussion on the importance of having and holding space for talking about these topics. Dr Thomson suggested the EAG could be a form of shadow Board and a place for building diversity.</p> <p>Dr von Wissman reported that SG has put forward a commission to the CHI Board to include ethnicity in the new CHI. This will not be a quick fix but will mean going forward we will have more correct data.</p> <p>Prof Collins noted great thanks to Ms Neish for her help and work with the team. Dr Seaman and Ms Neish will meet and discuss the plan for further work.</p>	<p>Noted/future agenda</p> <p>Mr Kellet</p> <p>GCPH</p> <p>Noted</p> <p>Noted</p> <p>Dr Seaman/Ms Neish</p>
794	<u>AOCB</u>	
	There was no other competent business raised.	
795	<u>DATE OF NEXT MEETING</u>	
	Wednesday 18 th June 2025, 3pm.	GCPH



**Glasgow Centre for Population Health
Board of Management
18 June 2025**

General Update

Recommendations

Board members are asked to:

- Note this report providing an update on ongoing work and key developments since the February meeting of the Board.
- Identify any developments and priorities in their own organisational contexts that are of potential significance for the Centre, including any which might be referred to the Executive Management Team (EMT) for discussion of operational priorities (taking consideration of the current resource constraints at the Centre).

Governance and Staffing

1. *Special Meeting of the Management Board (May 2025) and Planning for the Future Options Appraisal.* At the February meeting of the GCPH Management Board, it was advised that Scottish Government (SG) would not be able to meet the request for flat funding expressed at the December 2024 meeting and that further advice would follow after a meeting between the GCPH Chair and the SG's Director of Population Health scheduled for 26th February. The outcome of the latter meeting was that GCPH would be allocated £1m for 2025-26 and that this should also support the delivery of an options appraisal for the future of the partnership. The Board was updated by email thereafter and a special meeting of the Management Board was convened on 6th May to consider the implications and the way forward. All partners were represented at the May meeting and Prof Jann Gardner, Chief Executive of NHS GGC, also attended. A summary of key agreements and next steps was circulated by e-mail following the meeting. These included that NHS GGC colleagues will convene a group to meet in July to further lay the basis for the options appraisal. The group will take a 'hackathon' approach. The options appraisal is to be delivered no later than October 2025, but the expectation is that it will be progressed well ahead of that deadline (August). The date for the 'hackathon' has now been confirmed as Tuesday 8th July (9am – 12.30pm) to which all Board members have been invited.
2. *GCPH Leadership Team Departures.* Early in April, Management Board members and others were advised that GCPH Deputy Director, Pete Seaman, would be leaving his position at the end of May and that GCPH Director, Chik Collins, would also be leaving

his position at the end of June. At the special meeting of the Management Board on 6th May, it was mentioned that NHS GGC would be taking steps to appoint an interim GCPH Director.

3. *Management Board and EMT membership.* After many years representing the University of Glasgow on both the GCPH Board and EMT, Prof Laurence Moore has notified us of his intention to step down from both groups as his role at the University change and he begins partial retirement from October. We thank Laurence for his guidance and creative input to the GCPH governance processes and for his time and commitment to GCPH and the GCPH partnership. Discussions will commence with University representatives as to how the University will be represented going forward on these groups.
4. *End of year report 2024-25.* The end of year work plan report for 2024-25 is being presented to the June Board meeting for discussion and approval (GCPHMB/2025/473). The report provides the end of year status for each of the projects in the workplan, a summary of our Communications activities and outputs alongside an overview of how the work of the team during 2024-25 has met GCPH's purpose as well as the challenges and risks to delivery during the year.
5. *Work plan 2025-26.* The draft work plan (GCPHMB/2025/474) is also being shared with Board members for feedback, discussion and approval at the June Board meeting, following development work with the team during March and April. The new work plan takes account of the much-diminished staffing within GCPH – especially pronounced for the research staffing.
6. *GCPH finances.* The end of year financial report for 2024-25 (GCPHMB/2025/475) and the draft budget plan for 2025-26 (GCPHMB/2025/476) are also brought to the June Board meeting for discussion and approval. There is a small positive balance on the accounts for 2024-25 which we are able to carry forward into 2025-26.
7. *Accommodation.* Planning for our move to the Clarice Pears Building on the main campus of the University of Glasgow is progressing, with our move being scheduled with University colleagues for the week beginning 30th June. We are engaging a removals firm ourselves. Space has been identified within the Clarice Pears Building, but, at the time of writing, we await details on the terms of lease including confirmation of costs, length of lease, etc. We have previously been in touch with the Property and Asset Management Department at NHS GGC as to the contracts and occupancy agreements to support our move.
8. *Staffing and iMatter Staff Survey.* As indicated above, after 20 years at GCPH, Dr Pete Seaman left the Centre at the end of May, and Prof Chik Collins will leave at the end of June. We wish both Pete and Chik the very best for the future.

Following a short period on secondment to the Clyde Metro team at GCC, Gregor Yates has returned to GCPH where he will continue to progress the strategic health component of the Clyde Metro project, contribute to commissioned work, and to attend weekly team meetings, alongside contributions to other GCPH work.

In April we welcomed Chloe McAdam, Public Health Registrar, currently based in NHS Forth Valley, on a six-month training attachment to GCPH. During her time at GCPH Chloe will be supporting work towards the implementation of the Good Food Nation Act,

our work with NHS GGC on ‘missingness’ and our work with the Glasgow Health Determinants Research Collaboration on ethnicity/racialisation.

We have also welcomed Adam Shaw (MSc Nutrition) to GCPH on an Adult Work Placement (10 days) under the supervision of Jill Muirie. Adam is undertaking a short project in collaboration with Glasgow City Council to produce case studies looking at the impact of funding through GCC’s recent Food System Development Fund on 5 recipient projects, as part of our work on the Glasgow City Food Plan.

Programme Manager, Chris Harkins, has been on sick leave since the beginning of May and is not expected to return to work until the beginning of July – assuming no further extension of leave. Chris’s post accounts for 1.0 of the 1.7 FTE we currently have in Programme Manager positions.

iMatter Survey: The annual NHS GGC iMatter Staff Survey is currently underway. As in previous years, we have encouraged staff to complete the survey, have provided guidance on the interpretation of questions (where there was previously some uncertainty) and have also collectively reviewed progress against the action plan which was developed by the team in light of the outcomes of last year’s survey outcomes. Results should be available in the later part of June.

Developments and partnerships

9. *Political engagement.* Following a request to the Centre, Jill Muirie met with Carol Mochan, MSP for South Scotland, who is currently looking at the future of women’s health in Scotland, with a particular interest in screening and prevention. Jill shared information relating to trends in female life expectancy and healthy life expectancy and discussed the inequalities in these trends in terms of SIMD and particular health concerns that relate to women’s health (e.g. diabetes, obesity, pregnancy complications), as well as inequalities in take up of screening opportunities (breast and cervical), and wider social concerns relating to women’s wellbeing.
10. *Artificial Intelligence (AI) within Public Health and healthcare systems in Scotland.* Published in April and authored by Chris Harkins, this new introductory discussion paper is designed to stimulate engagement and conversation concerning the potential and future uses of AI within Public Health and healthcare systems in Scotland. The paper, which draws on over 170 evidence sources and expert insight, is designed to be an accessible introduction to some important concepts, alongside risks and important practical, ethical, and moral considerations. Also see Para 31.
11. *NHS Greater Glasgow and Clyde – Supporting the Health Board to mitigate poverty.* GCPH has been working with the Public Health Directorate at NHSGGC to help translate the role of poverty as both a cause of health inequality and as a key determinant of health need, and further, as a barrier to accessing the health care and treatment that is required. We commissioned Professor Andrea Williamson’s team at Department of General Practice and Primary Care, University of Glasgow, who are currently leaders in research on understanding the causes and impact of ‘missingness’ or ‘the repeated tendency not to take up offers of care’ on a person and their life chances’. The brief included the team showcasing evidenced examples of ways to address missingness within a range of contexts – in accessible formats designed to enable change in policy and practice. To this end, the commissioning team (GCPH and

Public Health Directorate NHSGGC) established engagement with clinical contacts, particularly those in secondary care related to the leading disease burdens as highlighted within the Scottish Burden of Disease study (particularly drug use, depression, ischaemic heart disease). An initial briefing event with key leads in these service areas was held in March 2025. Work is now underway to design workshops with key NHS GGC clinicians, and practitioners to discuss the impact of missingness and to consider 'tests of change' of pragmatic improvements that could be made at a service level. A further meeting is scheduled with Prof Williamson to discuss next steps.

12. *Planetary Health: A collaboration involving University of Glasgow and University of Sydney.* Since November 2024, researchers and leads from the two Universities have been exploring the potential shape and form of a programme of work, developed collaboratively, that could underpin a continuing international partnership and attract funding for globally innovative work in the area of Planetary Health. Cross project team calls took place on 11th December 2024 and 4th February 2025. Pete Seaman, GCPH, and Professor Corinne Caillaud, University of Sydney, were designated co-leads on the development of a theme on *Eco-anxiety* being developed as one of the key pillars of the work. Other pillars included *Accountable Institutions*, *Economies in service of people and the planet*, *Sustainability frameworks for bridging local and global practices*, *Indigenous and Historical Knowledge and Biodiversity*. The involvement of GCPH was linked to a continuing interest in mental health demand, particularly as experienced with younger age groups, and responses to increased demand foregrounding community and participatory interventions. At this stage, however, it is not clear whether and how GCPH involvement can be maintained, given Pete's departure and other recent and impending departures and absences.
13. *Glasgow Fair Food for All Partnership's delivery of Scottish Government funded Cash First project towards ending reliance on food banks.* Progress in April and May was focused on reporting and reflecting on the findings of commissioned research and working with the Partnership on plans for the second part of the Cash First project funding period (to January 2026) and its ongoing impact and legacy. Meetings are planned for early June to agree these plans and the resulting work will take place over the summer.
14. *Glasgow City Food Plan working groups.* All eight food plan working groups have continued to meet and work on their specific priorities although some are better supported by stakeholders than others. GCPH and GFPP staff (Jill Muirie and Riikka Gonzalez) lead or support all of these working groups and work closely with a small Food Plan project team (with partners from the Glasgow Community Food Network and Glasgow City HSCP) to maximise coordination.
15. *Good Food Nation (Scotland) Act implementation.* An initial event took place on 28th May at the Glasgow City Council Learning Centre, planned and delivered by small group comprising colleagues from NHSGGC, GCPH and GFPP. Around 35 invited participants from the 6 local authorities in the NHSGGC area, along with representatives from key national stakeholders including Scottish Government, came together to hear a series of presentations about the implications and requirements of the Good Food Nation (Scotland) Act and to participate in facilitated roundtable discussions about preparing for implementation, who to work with, what to focus on and how to work together to maximise collaboration and synergy and minimise duplication. Meetings with NHSGGC in early June will reflect on discussions at the event and plan next steps.

16. *Funded projects:*

- The National Institute of Health and Care Research (NIHR) funded Health Determinants Research Collaboration (HDRC) in Glasgow.* Pete Seaman, who – as indicated previously – has now left GCPH, has been the main colleague representing GCPH as the HDRC has been developing. The principal contribution of GCPH for the coming period has been to lead on the development of a seminar series aiming to support the development of the HDRC network for shared activity and collaboration across the city. Prior to Pete's departure, and outline proposal for such a seminar series was delivered to the HDRC leadership and a response is awaited. The GCPH Communications team will support the further development and delivery of the seminar series. A further area of contribution by GCPH to the HDRC is on ethnicity and racialisation. The intention had been for GCPH Programme Manager, Chris Harkins, to deliver an initial briefing paper on this in early June, and for this to inform an event to be planned for delivery later in June. However, Chris has been on extended sick leave since the beginning of May and is not expected to return until July at the earliest. Consideration is currently being given to how we might best seek to progress a GCPH contribution to this area of work in the months ahead based on available resources.
- Submitted bid. Community Wealth Building evaluation: Learning lessons from Scotland* in response to the NIHR call for bids for Interventions to Deliver Inclusive Economies. This is being led by Dr Micaela Mazzei, Reader in Social Economy, and Prof Neil Craig, Professor of Public Health Economics, at Glasgow Caledonian University, together with Dr Jennifer McLean and Mohasin Ahmed of GCPH and colleagues from the University of Glasgow and the University of Lancaster. It aims to evaluate the health and health inequalities impacts of creating a more inclusive economy through Community Wealth Building (CWB). A 'sustainable, inclusive economy' is one of six national public health priorities in Scotland and the Scottish Government is developing CWB legislation during the current parliamentary term (2021-26). However, evidence on the health impacts of CWB is sparse. To inform further national roll out in Scotland, this project will evaluate the impact of CWB on population health, health inequalities and inclusive economy outcomes in Scotland and explore how CWB has been implemented in different areas to understand what aspects have worked, for whom, in what circumstances. GCPH will lead on the Public Involvement strand of the project. Following consideration, the bid was shortlisted and was assessed for scientific quality, feasibility and value for money at the October 2024 Funding Committee. A Stage 2 proposal was submitted in early January 2025. Initial positive general feedback, especially regarding the importance of the topic, the strengths of the team and the overall approach we were proposing, alongside a number of areas for clarification, was received in late January. A response from the team was submitted by the 5th February 2025 deadline. ***In March we received notification that the application was approved for funding***, with an official commencement date of the 1st October 2025 (to end of September 2028). The project team is now moving into the project set up stage.
- Submitted Stage 1 bid. The health impact of addressing unmanageable debt: Realist evaluation of financial advice in non-health community settings (REINVENT).* The bid was led by Prof Olga Biosca, Professor of Economics, and Dr Neil McHugh, Reader in Public Health Economics, at the Yunus Centre for Social Business and Health, Glasgow Caledonian University, together with Dr

Jennifer McLean and Mohasin Ahmed of GCPH and colleagues from the University of East London, the University of Northumbria and the University of South Wales. The research proposed aimed to find out if, how, for whom, and in what circumstances financial advice interventions can improve the health and wellbeing of people struggling with debt. If successful, GCPH was to lead on the Public Involvement strand of the project. The Stage 1 proposal was submitted in mid-December, but we were notified of an unsuccessful outcome in March 2025.

- *Evaluation of Glasgow's community-led food markets.* A collaborative funding application, with University of Glasgow, has been awarded funding of over £1M from the UKRI Biotechnology and Biosciences Research Funding Council for 3 years from April 2025, although at the time of writing this news still remains embargoed. This study is aiming to establish if community-led food markets are a viable solution to improve access to affordable and nutritious food that supports meeting national dietary targets. The intervention itself (for which funding is still being assembled) will be in the form of weekly community-led food markets in two low-income areas of Glasgow with limited grocery availability ('food deserts'). These food markets are to be developed and delivered in collaboration with Glasgow Food Policy Partnership, Glasgow Community Food Network, Glasgow City Council and Glasgow City Health and Social Care Partnership's Health Improvement specialists. The markets will be launched one at a time and developed in consultation with local communities so that they are appropriate to local needs and circumstances. The study will work with the markets to develop a programme of research to understand and address dietary inequalities in socioeconomically deprived neighbourhoods. The research aims are:
 - 1) to explore and understand factors that affect access to and choice of nutritious foods, contextualised to meeting national dietary targets (e.g. fruit and vegetables, oily fish, and fibre-rich foods).
 - 2) to co-design, implement and evaluate a place-based, community-led intervention using local community-led food markets as a driver for diet and behaviour change. The traditional market approach will be innovated by incorporating art and food literacy activities to support participant engagement and promote affordable, healthier food environments with consideration of social and cultural barriers. We will focus on increasing exposure and familiarisation to raw ingredients and nutrient-rich foods not usually consumed by the population via tasting and engagement with the food produce in the market.

GCPH Programme Manager, Jill Muir, will lead workstream 3 (learning from the development and delivery of the market intervention) and contribute to other workstreams.

Communications outputs and activities

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

Events, seminars and presentations

18. *Unlocking local resources in Glasgow: A guide to ALISS* – On 12th February, Cash First hosted an [online session which provided an overview of ALISS](#), a useful online platform that connects individuals to local health and wellbeing services, resources, and support networks. We explored how ALISS works, its key features, and offered valuable insights into how ALISS can help improve service delivery, empower communities, and enhance collaboration across sectors.
19. *Alternative community food retail in Glasgow* – On 25th February, Glasgow Food Policy Partnership (GFPP) hosted a [webinar looking at alternative community food retail in Glasgow](#). We heard from three alternative food outlets from around the city who explained how they source food and support people in the communities where they are based.
20. *Housing and Health in Glasgow: A Journey Through Film* – This co-curated screening on 19th March explored the city's housing history and its impact on health. Hosted by the National Library of Scotland Moving Image Archive and organised in collaboration with media co-op and Glasgow Centre for Population Health, the event featured archival films from the 1940s to the 2020s. The films sparked reflections on the city's past ambitions and aspirations for public housing, as well as the human aspect of policy-driven housing crises, and the power of community-led solutions. The event was chaired by media co-op Director Lucinda Broadbent, with panellists Tilly Mason (Living Rent campaign), Chik Collins (GCPH), and Johnny Roger (Professor of Urban Literature at Glasgow School of Art). Speakers highlighted the need for radical change in housing ownership to improve public health, emphasising that sustainable, affordable housing is key to a healthier future.
21. *Sustainable Food Directory training event (GCPH funded, with Slow Food Glasgow)* – First ever Sustainable Food Directory training event for the independent hospitality and retail sector with expert speakers, linking them with local sustainable suppliers (in-person event, 13th May).
22. *Good Food Nation Planning Workshop (with NHS GGC)* – On 28th May, GFPP ran an in-person workshop aiming to inform all relevant local authorities and health boards about the latest guidance into creating local Good Food Nation plans and starting a conversation about best ways to create collaborative plans within the health board area. The session included presentations from the Scottish Government's Good Food Nation Team, Food Standards Scotland, Living Good Food Nation Lab, Glasgow City Food Plan team and NHSGGC Health Board Health Improvement and Facilities.
23. *Providing Tasty, Healthy Food During the Holidays* – On 29th May, GFPP organised a webinar - [Providing Healthy, Tasty Food During the Holidays](#) - aimed at the Glasgow City Council Holiday Programme grant holders (approx 40 organisations). A toolkit including links to healthy eating, food safety, sustainability, suppliers, recipes and activities will be created after the event.
24. On 26th February, Chris Harkins (GCPH) gave a presentation to the LGBT+ Cross Party Group hosted by the Scottish Government about the findings of the scoping review '[Examining the social determinants of LGBT+ health and wellbeing: A scoping review of evidence, unmet health needs and policy implications](#)'. He and co-author Rebecca

Hoffman (LGBT Health and Wellbeing) also presented their work at the Queer Minds Scotland Network online event on 25th March.

25. On 10th March, Faiza Hansraj-Jackson gave a presentation at the Cash First Communities 2025 conference, organised by IFAN and Trussell.
26. Riikka Gonzalez manned a stall for the GFPP/Glasgow City Food Plan (GCFP) at the Glasgow City Council Education Health Festival at the City Chambers on 11th March. She also gave a talk to Caledonian University nutrition undergraduate students about GCFP/Nutrition policy in Glasgow on 25th March. On 21st May, she delivered a 'Project Based Learning and Activities Event' on Glasgow City Food Plan for all P6 pupils at Bankhead Primary. The session included discussions about 'good food' and the pupils re-creating a 'Let Glasgow Flourish' crest with 'Let Glasgow Nourish' theme along with a 'good food' themed tablecloth for the school.
27. Jill Muirie spoke at Glasgow University Environmental Sustainability Team (GUEST) evening seminar on food inequality on 19th March. She also was an invited speaker at the Cross Party Working Group (Food) at Scottish Parliament on 14th May.
28. Mohasin Ahmed and Jennifer McLean hosted two workshops at the Scottish Communities for Health and Wellbeing event *The Even Bigger Big Get Together* on 3rd April, during which they shared learning about the CommonHealth Assets project and the creative approaches we used to generate and demonstrate impact. The Lived Experience Panel's comic [Our Voices – Community impact in Action](#) was shared in the delegates pack to approximately 100 people.
29. Pete Seaman, Gregor Yates and Chloe McAdam facilitated a CHIA toolkit training session on 7th May, offered to all local authorities in the city region – economic development and equalities officers. This is part of the embedding element of the Economies for Healthier Lives project.
30. Gregor Yates presented to the Clyde Metro team on the social determinants of health and the key health challenges for the Glasgow City Region (8th May).

Publications

31. *The potential of Artificial Intelligence (AI) within Public Health and healthcare systems in Scotland – an introductory discussion paper* (Chris Harkins), published 23rd April 2025. This introductory discussion paper sheds light on the transformative possibilities and important associated considerations in the adoption of AI within Scotland's Public Health and healthcare systems. It explores AI's evolving role, and the importance of public engagement, awareness, trust and transparency in shaping AI's future within healthcare. The report highlights AI's capacity to supplement clinical practice and decision-making, analyse vast amounts of complex population health data at near instantaneous speed, improve healthcare systems efficiency, and personalise patient care. It also underscores ethical considerations, and the need for robust governance to mitigate risks (such as algorithmic biases) and to coordinate and support evaluation of AI implementation in Scotland's healthcare settings. As Scotland's AI strategy is set for renewal in 2026, the report aims to serve as a timely resource for policymakers, healthcare professionals, and the public. The findings encourage a balanced approach to AI integration, one that prioritises patient safety, ethical responsibility, and inclusivity.

32. *LEP final evaluation report* (Mohasin Ahmed, Jennifer McLean). Following completion of the CommonHealth Assets research project and the Patient and Public Involvement and Engagement (PPIE) aspect led by GCPH over the last three years, this report presents learning and insight as to the impact of the Lived Experience Panel – on the individual members of the Panel who engaged with us, on the project researcher, and on the research project as a whole. The report also discusses the place, role and value of PPIE in public health research. The report will be published following the publication journal article on the same subject which has been accepted for publication by *BMC Research Involvement and Engagement*. We await an update from the journal as to the anticipated publication date.
33. *Thrive Under 5 Year 2 Evaluation: Piloting approaches to support child healthy weight in three Glasgow neighbourhoods* (by Gregor Yates, with Jill Muir). This report was due to be published late last year. However, with staffing changes and significant late comments and changes requested by stakeholders, the report was delayed. Amendments to the final report are being prepared with anticipated publication later this month.
34. *Economies for Healthier Lives – Year 3 evaluation* (Gregor Yates, Val McNeice). This report summarises the progress and key learning from year three of the Glasgow City Region (GCR) Economies for Healthier Lives project, one of five Health Foundation funded projects across the UK. Each of the projects aims to promote health and reduce inequalities by strengthening the relationship between economic development and health. Following a delay due to staffing changes we have now received the draft final report which is being prepared for publication in mid-June.

Media

35. [New era of inequality: profound changes to mortality in England, Scotland, and 10 major British cities | European Journal of Public Health | Oxford Academic](#) – Journal article by David Walsh, Gerry McCartney et al, which was resourced by GCPH (*European Journal of Public Health*, 19th Feb). This research was also featured on STV News on 19th Feb: [Mortality inequalities widening in cities across the UK, Glasgow University and Public Health Scotland study shows | STV News](#)
36. [Glasgow Commonwealth Games bid to shed 'Europe sick man' tag fails | The Herald](#) – The GoWell East study from 2018 is mentioned (The Herald, 25th Feb).
37. [SCDC Weekly - 5th March 2025](#) – The CommonHealth Assets Lived Experience Panel's comic *Our Voices – Community Impact in Action* is mentioned in the SCDC newsletter (SCDC, 5th Mar).
38. [Glasgow catering team 'full of beans' after winning top award | Glasgow Times](#) – GFPP and Riikka Gonzalez are quoted in this article celebrating GCC winning an award related to the Full of Beans campaign (Glasgow times, 14th Mar).
39. [Housing and health in Glasgow: a journey through film - TFN](#) – Guest blog by Lucinda Broadbent about the event of the same name. This is a copy of the blog she wrote for the GCPH website, see below in Digital section (Third Force News, 24th Mar).

40. [Historic Dundee Craft Donates to Music and Social Project | Charity Today News](#) – Our evaluation of Sistema's Big Noise is mentioned (Charity Today, 9th Apr). More on the same subject: [Young people from Big Noise Torry perform on stage with RSNO | Charity Today News](#) (Charity Today, 19th May) and [Exam support for school pupils as learners prepare to take SQA assessments | Charity Today News](#) (Charity Today, 23rd May).
41. [AI could transform NHS but must be 'used with caution' | The Herald](#) – Exclusive about Chris Hakins' report *The potential of Artificial Intelligence (AI) within Public Health and healthcare systems* (The Herald, 23d Apr). This research was also quoted in [Digit News](#) (23rd Apr) and on the [Glasgow City of Science and Innovation](#) (24th Apr) and [University of Glasgow](#) (23rd Apr) websites.
42. [The birthplace of universal credit where one in three are out of work](#) – This article includes a quote by Director Chik Collins, who was contacted by the journalist for advice/guidance (The iPaper, 28th Apr).

Digital

43. *Understanding Glasgow*. Over the last nine months, the Data Consultancy team at Public Health Scotland have been updating Understanding Glasgow website pages and sections with the newest data, including from last year's Census publications. This work has now been completed, with 138 website pages and over 200 charts updated. This includes several children's health indicators, as well as population estimates for adults, disability data and commuting trends.
44. *CommonHealth Assets*. In early March, we published [Celebrating our involvement in CommonHealth Assets](#), a blog in which Jennifer McLean reflects on our involvement in the CommonHealth Assets project, the impact it has had, and the opportunities it brought. Jennifer and Mohasin Ahmed, lead facilitator of the Lived Experience Panel, also shared some thoughts on their involvement in the project in a [new video](#).

We also produced [six short videos](#) narrating each comic of the LEP/Magic Torch publication '*Our Voices – Community impact in action*'.

45. *Glasgow 850*. Following our co-curated screening *Housing and Health in Glasgow: A Journey Through Film*, the event's Chair Lucinda Broadbent wrote a [guest blog](#) for the GCPH website, in which she shares her reflection about the films and following discussion.
46. *Artificial Intelligence in Public Health*. To go alongside the publication of his report *The potential of Artificial Intelligence (AI) within Public Health and healthcare systems in Scotland – an introductory discussion paper*, Chris Harkins wrote a [blog in which he gives an overview of the report's findings](#). The blog was published on 24th April. A [short video](#) about the report was also shared on our social media channels on the 25th April.
47. *Glasgow Game*. The page has been updated, with newly designed rules, downloadable fact sheets and a short video explaining what the game is.
48. In March, we sent our [second e-update](#) of the year, and in April we published a new [Concept Explainer](#) about Community Wealth Building.

Other

49. Digital Communications Officer Rory MacLean left GCPH at the end of February and Events Officer Carol Frame is on medical leave until the end of June. Kelda McLean, Project Administrator, has been appointed Acting Communications Officer for six months in order to support Acting Communications Manager, Berengere Chabanis, in the delivery of the Centre's communications work.

**GCPH
June 2025**



Work plan 2024-25: End of Year Report

This report presents the end of year position against the 2024-25 GCPH workplan (GCPHMB 2024/455). As well as providing the end of year status for each of the projects in the workplan, the report also presents an overview of how the work of the team during 2024-25 has met GCPH's purpose as well as the challenges and risks to delivery during the year.

Introduction

The Glasgow Centre for Population Health (GCPH) was established to understand the evolving patterns of population health and health inequalities in Glasgow and Scotland, and to work with partners to identify solutions. The Centre achieves its purpose through delivery of trusted evidence and practical support for partners working to create better and more equal health.

During 2024-25, our purpose has been to *'Work towards enabling partners to achieve improved and more equal population health outcomes, through identifying the action and responses required to address underlying vulnerabilities and supporting the development and delivery of these actions with our partners'*. We have achieved this through:

- Delivery of highly credible evidence on the past, present and emerging patterns of population health in Glasgow and Scotland, and understanding the causes of these patterns.
- Development and evaluation of responses with partners in service delivery and in communities.
- An effective communications strategy, growing and diversifying our networks and presenting outputs accordingly.

During 2024-25, our work has been focused on:

- Understanding and mitigating the health impacts of ongoing financial austerity and the cost-of-living crisis, particularly the impacts on the most vulnerable populations.
- Closer alignment with the work of our key partners, especially in NHS GGC, Glasgow City Council, Glasgow City Region (GCR) and the Glasgow City Health and Social Care Partnership (HSCP).
- Supporting the shared pursuit of a more equitable and sustainable economy.
- Supporting the creation of connected, inclusive and empowered communities and places.
- Building a fairer, healthier and more sustainable local food system

Our work is directed at the longer-term outcome of improved healthy life expectancy and a narrowing of health inequalities, and in the short-medium term, support for the mitigation of the causes of the recently declining population health trajectory (and especially growing health inequalities).

The Centre's way of working benefits from our long standing, and consequently embedded, role within networks of policy and delivery. This has enabled us to play a key role in establishing shared understandings and creating common purpose, leading to concerted action among the many

organisations and agencies whose focused involvement is necessary to address population health challenges.

The structure of this report

This report is presented in four sections.

- Section 1 summarises our activity, progress, resources and organisational challenges during 2024-25.
- Section 2 presents a summary 'At a Glance' table with end of year RAG rating.
- Section 3 presents a detailed matrix of key projects and their end of year position.
- Section 4 lists main GCPH outputs, engagement events and communications activities from April 2024 to the end of March 2025.

Section 1. End of year 2024-25: activity, progress and challenges

This report presents the end of year position on the delivery of the GCPH 2024-25 workplan, in collaboration with our partners and stakeholders. Overall, it presents evidence-based progress and understanding of the underlying patterns and causes of health and health inequalities, with our activity continuing to focus on working in the solutions spaces and supporting the identification of actions that can help in confronting and addressing the current challenges of population health.

The causes and consequences of health inequalities are multiple and complex. The ways in which we work for change often address the diverse components and levels of influence on population health simultaneously, both within individual projects and across the wider workplan. The report highlights work that we have undertaken on behalf of, and also in partnership and collaboration with, GCPH core partners and with many other organisations, ranging across social determinants of health, from access to healthy food and improvements to Glasgow's food systems, to the evaluation of large scale city capital infrastructure investments, to patient and public involvement in research, and recognising poverty as a barrier to accessing health services. Our work also continues to have a clear focus on the health and wellbeing of those with protected characteristics under the duties of the Equalities Act, alongside exploring the potential of Artificial Intelligence (AI) in public health and healthcare services.

The Centre's way of working continues to be grounded within networks of policy and delivery and is focused on achieving impact by aligning evidence-based insight with the operational priorities of our partners in delivery – through co-producing work with partners and end-users. This includes work focussing on data collection, on how insights are used, and on influencing and shaping the kinds of concerted action necessary to address population health challenges.

Sections 2 and 3 of this report present the range of projects delivered by the GCPH team during a challenging, yet productive year. The 'At a Glance' table in Section 2 provides a summary overview of the work undertaken during 2024-25. The tables in Section three provide detailed end of year positions across the range of areas of work and activity, delivered in partnership with Glasgow City partners and stakeholders, including Scottish Government, community organisations and academic partners.

Sections 2 and 3 present 24 separate projects and areas of work. At the end of the year (March 2025) 17 of these were rated 'green' and are completed, ongoing or on track for completion in line with the project milestones, including two new projects, which despite substantial challenges of organisational capacity, have been started and completed in the last six months of the year. One area of work is rated 'amber' due reduced capacity internally to progress in line with milestones, and six are rated

'red' primarily due to substantial loss of staff and being unable, due to ongoing funding uncertainty and NHS GGC restrictions, to recruit.

Communications end of year 2024-25 report

Our communications function involves strategic and responsive use of a range of media to further build our profile, ensure the most appropriate and maximum exposure for our work in pursuit of impact, and to support other organisations and agencies to respond to the relevant challenges.

This past year has been one of change for the Communications team, with Communications Manager, Jennie Coyle, moving on to a new post in September, Communications Officer (Digital), Rory MacLean leaving in February, and Events Officer, Carol Frame, being on medical leave since the end of February. Interim arrangements to manage these changes were put in place and the team has had a busy and productive year, producing a series of outputs and events to raise the profile of GCPH and to support the dissemination and impact of the work of the Centre (as detailed in Section 4).

During the first few months of 2024-25, a large proportion of the team's work was focused on the completion, successful migration and launch of the new GCPH website (April 2024) and the new Understanding Glasgow website (September 2025). Both received positive feedback from partners and stakeholders, with particular reference to the new websites being visually more engaging, more accessible, and easier to navigate. Since then, we have been working with colleagues at Public Health Scotland to update Understanding Glasgow with new data, in particular from the 2022 Census. Three priority groups were devised, and by end of March 2025 we were over halfway through the third priority group (with a total of 138 pages updated by the end of April 2025).

There were fewer publications than in previous years, due to staff changes and reduction of internal capacity. The LGBT+ health and wellbeing review, written in partnership with LGBT+ Health and Wellbeing was particularly well received by partners and practitioners working in the field, and was featured in a number of different media outlets. It also led to a series of dissemination events throughout the year with local organisations and Scottish Government colleagues, the most recent one having taken place in March.

Other in-year publications included the GCPH reflections paper for Scottish Government '*Mobilising People to Protect Health: Challenges in Population Health and Health Inequalities in Contemporary Scotland*', the third Glasgow City Food Plan, and the evaluation of the Sighthill Bridge.

In February, CommonHealth Assets and GCPH published a comic *Our Voices: Community impact in action*, created by the project's Lived Experience Panel and Magic Torch Comics, which illustrated the Programme Theories developed during the project. Six narrated videos of the comic stories were also produced. This creative way to share learning was very well received, and led to the comic being included in the delegate packs of the event *The Even Bigger Big Get Together* (Scottish Communities for Health and Wellbeing) and two workshops being delivered at the event.

To mark Glasgow's 850 anniversary, we also digitised and re-published *Pioneering the health of the city: A historical town trail through the heart of Glasgow*, which was first published in 2005, and we are working towards producing more outputs throughout 2025, including an audio walking tour based on the above booklet and a Glasgow Health Timeline.

A notable number of events (online and in person) were organised, facilitated and delivered by the Communications team. This included a series of events for the Glasgow Food Policy Partnership and the related Cash First project, discussion events on climate change, learning events and workshops following publication of the Go Cycle (March 24) and LGBT+ health and wellbeing reports, and thematic screenings at the Glasgow Film Theatre and the National Film Library.

2024-25 also saw a growth in our digital outputs and offerings. This has included a series of videos supporting the dissemination of findings (LGBT+ health and wellbeing) or shining a light on a particular project, for example CommonHealth Assets videos, and one on the Glasgow Game. We also continued our popular 'Concept Explainers', with the most recent one focusing on Community Wealth Building.

During the year, we have also published a series of blogs, with subjects ranging from a systems approach to food justice, to breastfeeding, to lived experience in research, to gambling, and housing.

Our social media reach and engagement has also grown, with a particular focus on our LinkedIn account (1040 followers), and our new Bluesky account created in November (938 followers). It is interesting to note that we have lost 500 followers on X (Twitter) over the last year, very likely due to people moving away from the platform for political reasons. In the next year, we will aim to eventually leave X altogether.

Section 4 of this report presents a comprehensive overview of the outputs, events and activities published and delivered by GCPH in 2024-25.

Organisational governance during 2024-25

During the 2024-25, the Centre governance structures have been further strengthened through the continued commitments of partners to support the organisation. The second half of the year saw the active engagement of partners in the discussion and agreement of the envisaged functions, impacts and required inputs of the organisation for the future, in preparation for the agreement of the GCPH Partnership Memorandum of Understanding (MoU) for the period 2025-2030. The February 2025 Management Board meeting agreed the new MoU document between core partners and the refreshed Management Board Terms of Reference. The work, support and commitment of the Board has enabled GCPH to continue to progress during the challenges of the year, as demonstrated in Sections 2 – 4 of this report.

In September 2024, Dr Lesley Thomson KC, took up the Chair of the GCPH Management Board following the completion of a two year tenure by Rev John Matthews OBE. The partner representative membership of the Board also changed during the year, following the retirement of a number of Board colleagues and internal re-organisation by partners. During the year we have welcomed Dr Una Graham and Dr Emilia Crighton of NHS GGC to the GCPH Management Board.

During 2024-25, we have also strengthened our partnership, working relationship and alignment with Public Health Scotland (PHS), with planned contributions to the Collaboration for Health Equity in Scotland (CHES)/Marmot Places initiative led by PHS (drawing on GCPH's experience as a sustained place-based collaboration for equitable health improvement). The partnership with PHS aims also to facilitate a clear connection between the CHES initiative and the Glasgow Health Determinants Research Collaboration (HDRC). To further consolidate this new partnership, which has recently involved PHS having membership of the GCPH EMT, Mr Paul Johnston, PHS Chief Executive, and his deputy, Mr Michael Kellet, PHS Director of Strategy, Governance & Performance, have joined the GCPH Management Board.

The role and purpose of the Executive Management Team (EMT) has also been reaffirmed during 2024-25, and this has been enabling more productive dialogue with our core partners, focused on collaborative identification of operational priorities for resource allocation, based on identified pathways to impact on population health and health inequalities.

In the autumn of 2024, the University of Glasgow confirmed that it was not renewing the lease of the third floor of the Olympia Building, Bridgeton, home to the GCPH for the last 10 years. As part of the MoU discussions and negotiations, all three core partners offered possible accommodation options from their estates. Following visits to a number of properties, our preferred option is co-location within

the School of Health and Wellbeing at the University of Glasgow. At the time of writing, we have a well-advanced understanding with the University of Glasgow regarding taking up residence in the Clarice Pears Building in June 2025.

Resources and resource management during 2024-25

Delivery of the work plan during 2024-25 has required a broad set of skills including specialism in a range of data collection, analysis and interpretation methods; research and evaluation; community engagement; and communications. Members of the GCPH team have demonstrated expertise working across the domains of public health, research, policymaking, the third sector, community engagement, communications and administration.

The 2024-25 year has seen GCPH face a number of inter-connected challenges. These have included uncertainty about the longer-term Scottish Government financing for GCPH and the reluctance of NHS GGC, as the legal employer of GCPH staff, to support recruitment of new staff to replace the substantial number of colleagues who have left the organisation.

Furthermore, in the context of emergency financial measures announced by Scottish Government in mid-August 2024, GCPH was asked to take reasonable steps to minimise spend over the remainder of 2024-25. This resulted in a decision, supported by the Board, to no longer attempt to recruit staff for the remainder of the year. In line with this request by Scottish Government, a revised budget plan for 2024-25 (September 2024, GCPHMB/2024/463) was prepared based on a Scottish Government allocation of £850,000, noting potential for further reduction should contingency funds remain uncommitted. Following communication with the Scottish Government and a subsequent review of funding (December 2024, GCPHMB/2024/468) the allocation was reduced by a further £50,000. Thus, the available Scottish Government finance for GCPH for 2024-25 was reduced by £500,000 from the original expectations (£1.3 million - as presented to the Management Board in June 2024, GCPHMB 2024/460) to £800,000.

The 2024-25 workplan was then delivered against a revised budget of £1,326,582 comprised of core funding from Scottish Government (£800,000), additional external income for individual project delivery and contributions (£289,473) and an approved carry forward (£240,109) as detailed in the 2024-25 revised Budget Plans (September 2024 and December 2024) and quarterly finance reports brought to the GCPH Management Board. As of the end of March 2025, the Centre is in the position to conclude the 2024-25 financial year with an underspend of £27,879 (GCPHMB/2025/475).

On behalf of GCPH, NHS GGC received an allocation of £800,000 from the Scottish Government in January 2025 for the financial year 2024-25.

Generating external funding during 2024-25

During 2024-25, the generation of external income from our contribution, input and advice to a number of externally funded projects has supplemented our core grant funding from the Scottish Government to the value of £299,683. This is an important aspect of organisation delivery which supports programme activity development.

External income has been generated for our involvement (as detailed in Section 3) in: the University of Glasgow's GALLANT project (Glasgow as a Living Lab Accelerating Novel Transformation); Glasgow City Region's Project Management Office (GCR PMO) for the evaluation of the Sighthill Bridge, and the evaluation of Economies for Healthier Lives; the NIHR funded CommonHealth Assets project and the Scottish Government funded Cash First Partnership to reduce reliance on food banks.

These projects demonstrate the commitment of team members to collaboration and work in partnership with academic and statutory partners, through the development and successful funding of project bids, direct project commissions to GCPH, and through staff secondments (during 2024-25

to the GCR PMO, the GCC Clyde Metro team and Strathclyde University). Our involvement in these projects also demonstrate the expertise, skills and agility that team members bring to partner projects.

A number of funding bids developed with partners in year have also been submitted on a range of areas of work and although most were unsuccessful following consideration by the funder, they have built collaborations and partnerships and consolidated opportunities for the future.

Impact and influence

The renegotiation of the GCPH MoU and our partner agreement during 2024-25 has enabled a focus on the context in which GCPH operates and how, through our ways of working, we facilitate wider engagement with research findings and evidence, and support and lead the development of shared activity to address the underlying determinants of health across the fields of health services, local and national government, and academia. Through this, we have sought to maximise complementarity with our partner organisations to promote a future focus that energises research-led systems change. Work during the year has maintained and revitalised the local and national partnerships through which knowledge translation and utilisation flow.

During the next funding period (2025-26) we will continue to build these partnerships through the Centre's established expertise in these ways of working.

Key activities and examples that demonstrate this impact and influence during 2024-25 (and described in detail in Section 3) include:

- Identifying and promoting the population health benefits of Clyde Metro to enable a strong health-focussed dimension to the evolving business case for this capital investment in the cities infrastructure. This was supported by an embedded senior Public Health Research Specialist within the Clyde Metro team. Our ongoing involvement and contribution to the Clyde Metro project will continue to shape this aspect of their work plan through the close working relationships established.
- Working with senior management within NHS GGC to mainstream learning about the causes of missingness in health services and to address barriers to health services access created by persistent poverty.
- Significant contributions to the development year of the NIHR-funded Glasgow Health Determinants Research Collaboration.
- Demonstrating the successful embedding of meaningful and effective Patient and Public Involvement and Engagement within community-based research settings, as evident through the delivery of the CommonHealth Assets Lived Experience Panel, and wider learning about the impact of community-led organisations (CLOs) on health.
- Taking a leadership role in furthering the understanding of the social determinants of LGBT+ health and wellbeing from the evidence – with a focus on unmet health needs and policy implications arising.
- The ongoing leadership, co-ordination and implementation of the Glasgow City Food Plan, pursuing change in the city food systems, and leadership of the multi-agency Glasgow Cash First Partnership, focused on reducing food insecurity.

This alignment with key stakeholders holding the levers to addressing population health is done with the intention of partners collectively developing the required strategic responses to address persistent health inequality.

Challenges to work plan delivery during 2024-25

The activity of the team during 2024-25 has been impacted by a combination of coming towards the end of the current MoU period for GCPH, with a significant degree of uncertainty about the future, and the emergency financial measures implemented by Scottish Government – which saw GCPH take steps to minimise in year spend by not replacing staff who had retired or moved on to employment elsewhere. This has posed challenges, with a resultant impact on available capacity for delivery of projects detailed within the work plan agreed at the beginning of the year. This changed context has been managed by the reorganisation of available capacity and skills across the team, and the reallocation of existing resource and prioritisation of projects. As noted in Section 2 of this report, only a small number of projects were rated ‘red’ at the year-end due to not completing as expected.

During 2024-25 we have seen a loss of a further 7 members of the team, a total of 6.2 FTE. This has had a significant unsettling effect on team morale and work.

However, despite this challenging backdrop, this report demonstrates that the team has continued to work hard, with agility, responsiveness and a focus on partnership, to deliver the 2024-25 work plan.

GCPH
May 2025

Section 2. Work plan 2024-25: End of year 'At a Glance' table

Area of Focus	Projects	End of year status (March 2025)
<i>Young people</i>	Long-term, life-course evaluation of Big Noise. On behalf of Sistema Scotland, with Audit Scotland.	
<i>Adult years and working age</i>	Ageing and later life work: evidence from British-Scottish Pakistanis living in Glasgow.	
<i>Mental health</i>	With NHS GGC mental health services , tracking and exploring demographic, social, economic and cultural changes in demand.	
<i>Poverty as a barrier to health services access</i>	Working with NHS GGC to develop responses which, through patients' engagement with healthcare services, mitigate the impact of poverty.	
<i>Understanding Glasgow</i>	Website migration, re-development, and maintenance.	
	Understanding Glasgow data update and refresh.	
	New Glasgow city neighbourhood profiles.	
<i>Excess mortality research</i>	Differences in the experiences of poverty/deprivation between Scotland and England.	
<i>Health inequalities</i>	Understanding health benefits of active commuting.	
	Breastfeeding analyses.	
<i>Sustainable travel and transport</i>	Evaluation of the Sighthill Bridge. On behalf of Glasgow City Region PMO/GCC.	
<i>Sustainable food</i>	Glasgow Food Policy Partnership: Leadership and development of Glasgow City Food Plan.	
	Cash First Partnership to reduce the need for foodbanks. Funded by the Scottish Government.	
	Evaluation of Thrive Under 5. On behalf of NHS GGC.	
<i>Housing</i>	Moving from temporary homelessness accommodation to secure housing: comparative case studies across three local authorities.	
	SIPHER Collaborative – understanding policy processes and evidence in housing and public health.	
<i>Public Health innovations</i>	The potential of Artificial Intelligence (AI) within Public Health and healthcare systems.	
<i>Promoting community-based participation</i>	CommonHealth Assets: Community approaches that mobilise people as assets - Patient and Public Involvement lead. Funded by the NIHR. With Glasgow Caledonian University, community and UK academic partners.	
<i>HDRC</i>	Glasgow Health Determinants Research Collaboration. With GCC, Glasgow City HSCP and UofG. Funded by the NIHR funded.	
<i>Equalities and racialisation in Public Health</i>	Understanding the health inequalities experienced by LGBT+ populations. With LGBT+ Health and Wellbeing.	
	Learning to support GCPH to become an anti-racist organisation.	
	Equalities organisational development and internal EQIA systems.	

<i>Climate adaptation and resilience</i>	Systemic approaches to economic, health inequalities and climate resilience – GALLANT community collaboration workstream. With UofG.	
<i>Health and Inclusive economy in Glasgow City Region</i>	Economies for Healthier Lives funded project; evaluation partner. On behalf of the Glasgow City Region PMO. Funded by the Health Foundation.	
	Supporting community wealth building (CWB) approaches and the health and wellbeing opportunities of the City Region's economic development strategies. With Glasgow City Region PMO/GCC.	

Section 3. GCPH work plan 2024-25 matrix of projects

Ongoing and existing work moving into 2024-25						
Project title, main outputs, timescales and resources	GCPH priority areas ¹	GCPH contributors & partners	Delivery priority (high/medium/low)	Key deliverables for 2024-25	Pathways to anticipated impact	End-year status (March 25)
<p>Project: <i>Glasgow City Food Plan (GCFP) – food plan leadership and coordination</i></p> <p>Main outputs: Delivery of the GCFP; Annual report of progress</p> <p>Timescales: Ongoing: year 3-4 of 10-year plan</p> <p>Resources: Coordinator (JM, part funded); Programme Manager (RG, 0.5FTE); Communications</p>	<p><i>Poverty, Inequality and the Economy</i></p> <p>Also contributes to: <i>Place, Community and Engagement; Climate Change; Mental Health</i></p>	<p>RG, JM, TG</p> <p>With Glasgow Food Policy Partnership partners (e.g. GCFN, GCC, HSCP, NHSGGC, Chamber of Commerce) - 23 partners in all.</p>	High	<ul style="list-style-type: none"> GCFP 2023-24 annual report on progress in year 3. Webinar series on food system developments in Glasgow. The Good Food for Glasgow campaign (with GCFN) to widen knowledge of improvements underway through the Food Plan. Progress all city food plan actions across themes/working groups: <ul style="list-style-type: none"> Fair Food for All (food inequality) Community Food Catering and Procurement Food economy 	<ul style="list-style-type: none"> Working through the established structures of the GCFP to further build understanding and commitment, including senior buy-in from key partners. Collaboration, coordination and coherence across the work of all stakeholders improving Glasgow's food system. Securing funding for collaborative projects that 	<p>GREEN - ongoing</p> <ul style="list-style-type: none"> JM chairs the Glasgow Food Policy Partnership which oversees the food plan. JM reports on food plan progress to the PHOG. The GCFP annual report was published in October 2025 and disseminated widely. It was followed by a successful stakeholder event to share the progress made through food plan activities in 23/24. Support from GCPH being provided to all 8 city food plan working groups which are meeting quarterly

¹ Poverty, Inequality and the Economy; Place, Community and Engagement; Race, Equalities and Intersectionality; Climate Change; Mental Health.

Project title, main outputs, timescales and resources	GCPH priority areas ¹	GCPH contributors & partners	Delivery priority (high/medium/low)	Key deliverables for 2024-25	Pathways to anticipated impact	End-year status (March 25)
officer (TG, part funded)				<ul style="list-style-type: none"> ○ Reducing food waste ○ Increasing urban agriculture ○ Children and Young People ○ Communications <p>Examples include:</p> <ul style="list-style-type: none"> • Cash First project • King's Coronation Food Waste project (with FareShare) • Sustainable Food Directory v3 (with Slow Food Glasgow) • Community fruit and veg market expansion (with GCC) • Full of Beans campaign • Glasgow Food Growing projects (with GCC) • Support Good Food Groups in Schools (with GCC Education). 	<p>support delivery of the Food Plan.</p> <ul style="list-style-type: none"> • Improved support for third sector and community organisations working to address food insecurity and improve opportunities to access affordable nutritious food. • Collaboration with academic partners to ensure that up-to-date evidence informs the Plan, and that the Plan is regularly and robustly reviewed 	<ul style="list-style-type: none"> • The webinar series has continued with monthly events featuring evidence and examples of food system improvements and are achieving a wide reach. • Good Food for Glasgow campaign continuing and engaging new audiences through online and social media and monthly podcasts. • Launch of the Sustainable Food Directory v3 and commencement of development of v4, in collaboration with Slow Food Glasgow. • First weekly community food market piloted (Aug to Dec 2024) in Whiteinch which plans developed for community food markets in other areas

Project title, main outputs, timescales and resources	GCPH priority areas ¹	GCPH contributors & partners	Delivery priority (high/medium/low)	Key deliverables for 2024-25	Pathways to anticipated impact	End-year status (March 25)
						(with a linked evaluation). <ul style="list-style-type: none"> • Full of Beans campaign completed with UofG evaluation published. • Evaluation plans for Glasgow Food System Development Fund in progress.
Project: <i>Understanding Glasgow: the Glasgow indicators project.</i> Main outputs: Up-to-date and accessible public health intelligence for Glasgow Timescales: On-going	<i>Poverty, Inequality and the Economy</i> Also contributes to: <i>Place, Community and Engagement; Climate Change; Mental Health; Race, Equalities and Intersectionality</i>	BW, MY, KT, KMcL, GY & GCPH Comms team (BC, CF)	High: A key aspect of the Centre's observatory role	<ul style="list-style-type: none"> • Migration of site to new CMS (Spring 2024). • Addition of new and updated indicators from 2022 Census (Spring – Autumn 2024). • 	<ul style="list-style-type: none"> • Provision and active promotion of a set of credible and relevant public health indicators in an accessible format in one place. • Providing public health intelligence supports understanding of population health and its determinants, in local areas. 	GREEN - ongoing <ul style="list-style-type: none"> • Following successful migration, new Understanding Glasgow website launched at the end of Sept 24. • Ongoing support from team to continue to develop.
Project: <i>Understanding differences in the experience of</i>	<i>Poverty, Inequality and the Economy</i>	KT with D Walsh (lead) & G McCartney	High	<ul style="list-style-type: none"> • Work planning group established/meeting regularly. • Funding to be agreed. 	<ul style="list-style-type: none"> • Establishing a set of prioritised concepts (including further working with people 	RED <ul style="list-style-type: none"> • Scoping exercise completed to identify

Project title, main outputs, timescales and resources	GCPH priority areas ¹	GCPH contributors & partners	Delivery priority (high/medium/low)	Key deliverables for 2024-25	Pathways to anticipated impact	End-year status (March 25)
<p><i>poverty and deprivation between populations in Scotland & England</i></p> <p>Main outputs: Final output would be new measurements.</p>	Also contributing to: <i>Place, Community and Engagement</i>	(University of Glasgow).		<ul style="list-style-type: none"> Primary research planning. 	<p>with experience of poverty).</p> <ul style="list-style-type: none"> Comparing these measures between Scottish and English populations in population surveys. Presenting all resulting evidence to policymakers regarding the gaps in current levels of knowledge and the extent to which these can be filled by the new research. 	<p>potential partners for this work.</p> <ul style="list-style-type: none"> Funding being sought to undertake the next stage of this work.
<p>Project: <i>Understanding the health benefits of active commuting</i></p> <p>Main outputs: Published paper in Spring 2024.</p>	<p><i>Poverty, Inequality and the Economy</i></p> <p>Also contributes to: <i>Climate Change; Place, Community and</i></p>	BW with input from colleagues at the Universities of Glasgow and Edinburgh	High	<ul style="list-style-type: none"> Robust, Scotland-specific, policy-relevant evidence of the benefits of active vs non-active travel for a wide range of health outcomes. Paper (Spring 2024). Second paper on associated cost savings 	<ul style="list-style-type: none"> Widespread dissemination of findings of two journal papers, including specific targeting of Scottish Government ministers, and other Scottish politicians. 	<p>GREEN - complete</p> <ul style="list-style-type: none"> Journal article and associated infographic published <p>Friel C et al., Health benefits of pedestrian and cyclist commuting: evidence from the Scottish</p>

Project title, main outputs, timescales and resources	GCPH priority areas ¹	GCPH contributors & partners	Delivery priority (high/medium/low)	Key deliverables for 2024-25	Pathways to anticipated impact	End-year status (March 25)
Timescales: Spring – Summer 2024 Resources: Costs of open access publication.	<i>Engagement; Mental Health</i>			to NHS associated with active commuting (Summer 2024).		Longitudinal Study. <i>BMJ Public Health</i> 2024;2:e001295. <ul style="list-style-type: none"> Presentation at the Scottish Faculty of Public Health conference
Project: <i>Modelling of cycling and pedestrian casualties</i> Main outputs: Published paper later in 2024. Timescales: Spring – Summer 2024. Resources: Open access publication costs.	<i>Poverty, Inequality and the Economy</i> Also contributes to: <i>Climate Change; Place, Community and Engagement</i>	BW & MY with D McArthur (University of Glasgow)	Medium	<ul style="list-style-type: none"> Report and possibly a paper in Summer/Autumn of 2024, if analysis goes to plan. 	<ul style="list-style-type: none"> Improved understanding of the circumstances and heightened risks pertaining to road collisions involving vulnerable road users (pedestrians and cyclists) versus car drivers. Relevant to the National Road Safety Framework. 	RED No further commitments.
Project: <i>Breastfeeding analyses</i>	<i>Poverty, Inequality and the Economy</i>	BW with PHS	Low: Completion of a legacy project, demonstrating the health benefits and	<ul style="list-style-type: none"> Academic paper (Spring 2024). 	<ul style="list-style-type: none"> Paper submitted for publication and in due course the findings will be 	GREEN – complete No further commitments.

Project title, main outputs, timescales and resources	GCPH priority areas ¹	GCPH contributors & partners	Delivery priority (high/medium/low)	Key deliverables for 2024-25	Pathways to anticipated impact	End-year status (March 25)
Main outputs: academic paper if accepted. Timescales: Work complete. Resources: Open access publication costs.	Also contributes to: <i>Place, Community and Engagement; Mental Health; Race, Equalities and Intersectionality</i>		healthcare cost savings associated with breastfeeding versus bottle feeding.		widely disseminated and promoted. <ul style="list-style-type: none"> The work is expected to be of wide interest given strong health inequalities focus that breastfeeding can not only protect child health but has a role in addressing child health inequalities 	<ul style="list-style-type: none"> Journal article published Ajetunmobi O et al., Levelling up health in the early years: A cost analysis of infant feeding and healthcare. <i>PLOS ONE</i> 2024, 19(5) <ul style="list-style-type: none"> Associated blog and infographic also published.
Project: <i>CommonHealth Assets</i> Main Outputs: Robust evidence and important learning about the impact of community-led organisations (CLOs) on health.	<i>Place, Community and Engagement</i> Also contributes to: <i>Poverty, Inequality and the Economy; Mental Health; Race, Equalities and Intersectionality</i>	JM, MA Led by GCU, academic partners (University of East London, University of Bournemouth and Queens University Belfast) and community	High Project completion Sept 24.	<ul style="list-style-type: none"> Delivery of two LEP meetings (March & July 24). Monthly PMT online, in-person Glasgow (Mar 24) and London (June 24). LEP exit planning (July – Sept 24). Final project LEP process and impact evaluation report (Sept 24). 	<ul style="list-style-type: none"> By working with UK academics, practitioners and CLOs this research will provide evidence as to how CLOs impact on H&WB, providing insights by what mechanisms these changes take place, for who and in what context – thus 	GREEN - complete <ul style="list-style-type: none"> Project officially end at the end of February 2025. Final LEP meeting took place in Glasgow on the 30th Sept to 2nd Oct 2024. Series of blog and video outputs created and published.

Project title, main outputs, timescales and resources	GCPH priority areas ¹	GCPH contributors & partners	Delivery priority (high/medium/low)	Key deliverables for 2024-25	Pathways to anticipated impact	End-year status (March 25)
Timescales: April – Sept 2024 Resources: External income £15,900 for GCPH expertise on project and £15,926 for delivery of the LEP.		partners (CLOs) UK Lived Experience Panel (LEP)		<ul style="list-style-type: none"> Further development of blog series. Presentation at ‘Authenticity into Action, University of Central Lancashire (May 24). LEP academic paper (by December 24). Policy analysis paper (under review). Presentation to SG Expert Speaker Series (Nov 24). 	influencing funders in their decision making. <ul style="list-style-type: none"> Dissemination will influence support for investment in and efficacy of CLOs. Support translation into community level impact. 	<ul style="list-style-type: none"> LEP Comic and associated narrated videos published. Academic paper submitted to <i>Research Involvement and Engagement (review and resubmit)</i>. Final evaluation report to be published following acceptance of academic paper. Policy review paper published.
Project: <i>SIPHER Collaborative</i> Main outputs: Fuller understanding of health inequalities evidence needs of policymakers. Timescales: Secondment until Sept 2024.	<i>Place, Community and Engagement</i> Also contributes to: <i>Poverty, Inequality and the Economy</i>	LG University of Strathclyde, University of Glasgow, Scottish Government, various English Universities and policy partners	High Project completion Sept 2024	<ul style="list-style-type: none"> Secondment until Aug 2024. GCPH outputs and format of knowledge transfer within the organisation (Sept-Dec 2024). 	<ul style="list-style-type: none"> Improve knowledge of systems approaches within GCPH, their value, and consider if we should use them. Contribution to SIPHER outputs on housing as a social determinant of health, including evidence products delivered to SG and PHS. 	RED

Project title, main outputs, timescales and resources	GCPH priority areas ¹	GCPH contributors & partners	Delivery priority (high/medium/low)	Key deliverables for 2024-25	Pathways to anticipated impact	End-year status (March 25)
<p>Project: <i>Thrive Under 5 evaluation</i></p> <p>Main outputs: Evaluation report on efficacy and sustainability of healthy weight project.</p> <p>Timescales: March to June 2024</p> <p>Resources: £12,722 GCPH income.</p>	<p><i>Place, Community and Engagement</i></p> <p>Also contributes to: <i>Poverty, Inequality and the Economy; Mental Health; Climate Change</i></p>	GY	High	<ul style="list-style-type: none"> Evaluation report by June 2024. 	<ul style="list-style-type: none"> Publication and dissemination of report. Focused session with Advisory Group based on learning to collectively identify recommendations. Building relationships with organisations involved with commitment to learning and and robust evaluation. 	<p>GREEN – complete</p> <ul style="list-style-type: none"> Report due for publication in June 2025.
<p>Project: <i>Examining the social determinants of LGBT+ health and wellbeing: A scoping review of evidence, unmet health</i></p>	<p><i>Place, Community and Engagement</i></p> <p>Also contributes to: <i>Poverty, Inequality and the Economy; Mental Health</i></p>	CH in collaboration with LGBT Health and Wellbeing (expert LGBT charity)	High	<ul style="list-style-type: none"> Evidence scoping review report presenting clear evidence of LGBT+ health inequalities, unmet health needs and policy recommendations. Development of an LGBT+ health model. 	<ul style="list-style-type: none"> GCPH is taking a leadership role in furthering the understanding and profile of this large, overlooked population group and its experience of profound inequalities. 	<p>GREEN – ongoing</p> <ul style="list-style-type: none"> Report was published in May 2024 with good media coverage. An initial dissemination event took place in September 2024 with colleagues from NHS GGC, GCC, SG and

Project title, main outputs, timescales and resources	GCPH priority areas ¹	GCPH contributors & partners	Delivery priority (high/medium/low)	Key deliverables for 2024-25	Pathways to anticipated impact	End-year status (March 25)
<p><i>needs and policy implications</i></p> <p>Main outputs: Collaborative report</p> <p>Timescales: April/May 2024</p>				<ul style="list-style-type: none"> Communications and dissemination plan. Presentation to GCPH Board and partner agencies; HSCP Equalities Group, GCC Vulnerable Adults Committee. Presentation to Scottish Government Policymakers (Dec 24). 	<ul style="list-style-type: none"> GCPH will shape the understanding of how the LGBT+ inequalities reported in the Census are interpreted and understood. Potential for GCPH to lead data linkage of LGBT+ demographic data to health outcomes and healthcare usage information later in 2024-25. 	<p>relevant 3rd sector organisations. Further dissemination has taken place including presentations to:</p> <ul style="list-style-type: none"> Scottish Gov Health and Social Care directorate Scottish Gov Mental Health directorate "LGBT+" Cross Party Group, Scottish Parliament. Chaired by Jamie Greene and Maggie Chapman (MSPs). "Queer Minds Scotland Network" - hosted by Edinburgh University and including range of academic, 3rd sector and public services partners from across UK. Review of UKRI funding applications and peer review of relevant journal articles.

Project title, main outputs, timescales and resources	GCPH priority areas ¹	GCPH contributors & partners	Delivery priority (high/medium/low)	Key deliverables for 2024-25	Pathways to anticipated impact	End-year status (March 25)
						<ul style="list-style-type: none"> Advising the NIHR Evaluation, Trials and Studies Coordinating Centre in developing a programme relating to LGBT health. Supporting the London DPH, Borough of Croydon in developing and reporting on interventions to reduce LGBT+ health inequalities.
Project: <i>Sistema Evaluation</i> Main outputs: Collaborative report Timescales: December 2024	<i>Place, Community and Engagement</i> Also contributes to: <i>Poverty, Inequality and the Economy</i>	CH in collaboration with Audit Scotland	High	<ul style="list-style-type: none"> A series of interviews and focus groups with Big Noise parent and guardians to qualitatively assess programme impacts on family and community life. AC will conduct fieldwork, CH will supervise and edit report. 	<ul style="list-style-type: none"> The evaluation has several national partners who will support and disseminate the findings as well as local partners in six geographies across Scotland. The evaluation also has international interest and will be shared within existing networks. 	GREEN – ongoing <ul style="list-style-type: none"> Continue to provide supervision and support for the ongoing fieldwork.

Project title, main outputs, timescales and resources	GCPH priority areas ¹	GCPH contributors & partners	Delivery priority (high/medium/low)	Key deliverables for 2024-25	Pathways to anticipated impact	End-year status (March 25)
<p>Project: <i>Economies for Healthier Lives (EfHL)</i></p> <p>Main outputs: Ongoing evaluation support and annual report</p> <p>Timescales: February to December 2024</p> <p>Resources: £10,946 GCPH income.</p>	<p><i>Place, Community and Engagement</i></p> <p>Also contributes to: <i>Poverty, Inequality and the Economy</i></p>	GY, VM, BW	High	<ul style="list-style-type: none"> • Evaluation report by end December 2024 (may change in line with potential funding extension). • Ongoing evaluation learning presented to Core Team and project groups. • Appraisal of requirement for further evaluation of the project. 	<ul style="list-style-type: none"> • Publication and dissemination of learning. • Support for development of Capital Investment Health Impact assessment toolkit (BW). • Continued involvement in next stage of approach which involves capturing toolkit use and impact. 	<p>GREEN - complete</p> <ul style="list-style-type: none"> • Publication due in June 2025.

New work for 2024-25						
Project title, main outputs, timescales and resources	GCPH priority areas	GCPH contributors & partners	Delivery priority (high/medium/low)	Key deliverables for 2024-25	Pathways to anticipated impact	End of year status (March 2025)
<p>Project: <i>Glasgow City Food Plan - Cash First project</i></p> <p>Main outputs: Clear and consistently delivered referral pathways to advice and cash first support for those in crisis across all frontline services.</p> <p>Improved understanding of emergency food demand and support services in Glasgow.</p> <p>Timescales: Months 3 to 15 of 24-month project.</p>	<p><i>Poverty, Inequality and the Economy</i></p> <p>Also contributes to: <i>Place, Community and Engagement; Climate Change; Mental Health</i></p>	<p>JM, FHJ</p> <p>With GCFP Fair Food for All Partnership (part of the GCFP delivery structure) (incl. HSCP, GCC, Trussell Trust, IFAN)</p>	High	<ul style="list-style-type: none"> • Appointment of practitioner to lead the project. • Fully mapped cash first and social retail provision in the city. • Revised and clear referral pathways enabling the transition from foodbank-centred to cash-based support for people in food insecurity. • Training for front line staff to enable implementation of the referral pathways. • Research projects to improve understanding of the drivers for different population 	<ul style="list-style-type: none"> • All frontline staff in the city understand poverty, incorporating the broader issues of destitution and food insecurity, and are confident in the referral pathways to advice and cash first support. • Strengthened relationships with and between partners working on emergency food aid, financial inclusion and welfare advice. • Peer learning across all Scottish Cash First projects. • More consistently implemented pathways to income 	<p>GREEN – ongoing</p> <ul style="list-style-type: none"> • Project lead organising the learning and networking opportunities and working closely with partners across the city. • Project lead supports the cross sectoral partnership (Fair Food for All Partnership) which meets quarterly supports and advises on the development of the project in Glasgow • Commissioned project to collate existing data on food insecurity, linking it with qualitative and lived experience data, with data gaps identified. • A range of awareness raising and learning events took place for front line staff in public

Project title, main outputs, timescales and resources	GCPH priority areas	GCPH contributors & partners	Delivery priority (high/medium/low)	Key deliverables for 2024-25	Pathways to anticipated impact	End of year status (March 2025)
Resources: £200,000 income over 24 months (SG award)				groups using food banks.	maximisation and welfare advice support for those in crisis. <ul style="list-style-type: none"> Linking delivery of this project to the wider food system change as part of the implementation of the GCFP. 	and third sectors to increase knowledge and understanding on cash first approaches, available support and referral pathways and specific population groups (such as people with no recourse to public funds).
Project: <i>Ageing and later life work: evidence from British-Scottish Pakistanis living in Glasgow.</i> Main outputs: GCPH report. Timescales: 1 year Resources: Estimated development budget: £15,000.	<i>Poverty, Inequality and the Economy</i> Also contributes to: <i>Race, Equalities and Intersectionality; Place, Community and Engagement</i>	PS & KT Co-investigators: Newcastle University, Queen's University Belfast. Steering Group: GCPH, GCC, Public Health Scotland, CEMVO Scotland, Age Scotland,	High	<ul style="list-style-type: none"> Advisory Group convened and research approach agreed (Mar/Apr 24). Ongoing Advisory Group meetings (Apr 24 onwards). Expert anchor organisation(s) chosen (Apr/May 24). Interview schedule/methods co-designed (May/Jun 24). Interviewees contacts and 	<ul style="list-style-type: none"> Co-production with anchor organisations: crucial to work being relevant to their work and to their members' experiences. An Advisory Group is being convened which will evolve in the early months of the research as areas of policy challenge come to light. Generated learning shared with 	RED <ul style="list-style-type: none"> Project did not proceed as planned due to staff capacity issues and prioritisation of work with remaining staff.

Project title, main outputs, timescales and resources	GCPH priority areas	GCPH contributors & partners	Delivery priority (high/medium/low)	Key deliverables for 2024-25	Pathways to anticipated impact	End of year status (March 2025)
		Scottish Asian Business Chamber.		primary research (Jun-Aug 24). <ul style="list-style-type: none"> • Analysis (Aug-Sep 24). • Write-up (Oct 24). • Academic paper(s) (Oct-Dec 24). • Dissemination (Nov 24-Jan 25). 	relevant policy networks/forums tackling key strategic priorities that include poverty, anti-racism, and work-related inequalities.	
Project: <i>Supporting NHS GGC to understand and respond to poverty as a driver of demand</i> Main outputs: Practice review and associated knowledge transfer materials Timescales: Commissioned by end-March 2024, Delivered Autumn 2024	<i>Poverty, Inequality and the Economy</i> Also contributes to: <i>Place, Community and Engagement; Mental Health; Race, Equalities and Intersectionality</i>	PS, Anna Baxendale and Debbie Schofield (Dept of Public Health, NHSGGC)	High	<ul style="list-style-type: none"> • A practice review (literature) and associated knowledge translation materials. 	<ul style="list-style-type: none"> • NHS GGC has a role in tackling poverty and its determinants, including understanding and delivering a role in poverty mitigation, alongside reducing inequalities in relation to accessing services. • This work will enable the translation of learning – directly into practice, around how services mitigate 	GREEN - ongoing <ul style="list-style-type: none"> • Research has been commissioned to the University of Glasgow and have reported preliminary findings of literature review to senior managers in NHSGGC. Subsequent actions flowing: <ul style="list-style-type: none"> • Seeking incorporation of awareness of missingness into Primary Care strategy implementation. NHS Reform work and Virtual Hospital design, digital appointments

Project title, main outputs, timescales and resources	GCPH priority areas	GCPH contributors & partners	Delivery priority (high/medium/low)	Key deliverables for 2024-25	Pathways to anticipated impact	End of year status (March 2025)
Resources: £20,000 expenditure					the impact of poverty.	and Patient Direct booking (Citizen Access Programme) and access to psychological and wellbeing support.
Project: <i>Glasgow Health Determinants Research Collaboration (GHDR)</i> Main outputs: Delivery of integrated GHDR work plan within 12-month development period Timescales: 2024 and then a further 5 years if 12-month development period successful.	<i>Place, Community and Engagement</i> Also contributes to: <i>Poverty, Inequality and the Economy; Mental Health; Race, Equalities and Intersectionality</i>	PS, CC. GCC, UofG and, NHS GGC, Glasgow City HSCP	High	<ul style="list-style-type: none"> Identify a pipeline of research-informed innovation in service delivery and research that positions partners to attract further research and development funding. Establish collaborative research capacity and processes with wider stakeholders including elected members, public and community representatives. April 2024. Complete 	<ul style="list-style-type: none"> A shared understanding, commitment and vision across the collaborators (GCC, NHSGGC, HSCP and UofG) and wider partners for a research-informed prioritisation, design, development and implementation culture to drive forward action on health determinants. Creation of the collaboration model for wider implementation. 	GREEN - ongoing <ul style="list-style-type: none"> The HDRC has completed its development year with GCPH identified contribution within Workstream 3: Culture Change and Engagement – specifically around aspects of knowledge transfer/support and community engagement. Two contributions identified to take into 2025-26. Developing and delivering a learning network for HDRC including four workshop events.

Project title, main outputs, timescales and resources	GCPH priority areas	GCPH contributors & partners	Delivery priority (high/medium/low)	Key deliverables for 2024-25	Pathways to anticipated impact	End of year status (March 2025)
Resources: GCPH resource for 0.5FTE 0.2 and 0.1 FTE of PS and CC time if passes development year.				stakeholder mapping. <ul style="list-style-type: none"> July 2024. Complete stakeholder interviews. September 2024. Systems Mapping workshops. September 2024. Leaders event. 	<ul style="list-style-type: none"> Identify a pipeline of research-informed innovation in service delivery and research that positions partners to attract further research and funding. 	<ul style="list-style-type: none"> Briefing note on Glasgow's changing ethnic profile and implications for racialised health inequalities. Project Manager support provided for the first three months of 2024-25 however the member of staff left and wider staff shortage meant that we could not refill.
Project: <i>Sighthill Bridge Evaluation</i> Main outputs: Evaluation of impact of Sighthill Bridge and wider regeneration Timescales: March --Nov 2024 Resources: £38,560 GCPH income, including	<i>Place, Community and Engagement</i> Also contributes to: <i>Poverty, Inequality and the Economy; Race, Equalities and Intersectionality</i>	BW, VMcN, GY, JMcL GCR Programme Management Office (PMO)	High	<ul style="list-style-type: none"> Evaluation report (Aug 2024). Transferrable Learning report (Oct 2024). 	<ul style="list-style-type: none"> Evaluation learning provided to a strategic partner organisation centrally involved in major investment decisions. Influence on approaches to evaluating other regeneration schemes in GCR. 	GREEN – complete <ul style="list-style-type: none"> Final report submitted to the GCR PMO in December 2024.

Project title, main outputs, timescales and resources	GCPH priority areas	GCPH contributors & partners	Delivery priority (high/medium/low)	Key deliverables for 2024-25	Pathways to anticipated impact	End of year status (March 2025)
£18K external commission.						
Project: <i>Moving from temporary homelessness accommodation to secure housing: comparative case studies across three local authorities</i> Main outputs: GCPH report Paper Timescales: February to October 2024	<i>Poverty, Inequality and the Economy</i> Also contributing to: <i>Place, Community and Engagement; Mental Health</i>	KT & MY (delivery) PS (supervisory support) Homelessness Network Scotland, Crisis, PHS.	High	<ul style="list-style-type: none"> Advisory group meetings – at each stage of research. Agree case study areas with group – late Feb/early Mar 2024. Case study interviews: Apr - Jun 2024. Data analyses: Jun-Aug 2024. Final report: Oct 2024 Dissemination: Nov 2024 onwards. 	<ul style="list-style-type: none"> Generated evidence takes account of contextual policy/practice pressures – to encourage meaningful uptake and implementation of evidence through established networks/alliances. Sharing examples of good practice among local authorities. 	RED <ul style="list-style-type: none"> Due to loss of staff work did not proceed as planned. Six interviews completed but limited internal capacity for analysis, no further interviews have been sought.
Project: <i>New community profiles</i> Main outputs: A set of health profiles for the Glasgow City Region	<i>Poverty, Inequality and the Economy</i> Also contributes to: <i>Place, Community and Engagement;</i>	BW, MY, KT & Comms Team input Likely to be undertaken in collaboration with PHS and with the	High	<ul style="list-style-type: none"> Data availability from 2022 Census (Spring/summer 2024). Profiles potentially available in late Autumn 2024. Dissemination phase Autumn 	<ul style="list-style-type: none"> A wide demand for this type of public health intelligence among planners, policymakers, third sector groups community groups and the public. 	RED

Project title, main outputs, timescales and resources	GCPH priority areas	GCPH contributors & partners	Delivery priority (high/medium/low)	Key deliverables for 2024-25	Pathways to anticipated impact	End of year status (March 2025)
Timescales: Feb – late autumn 2024 Resources: c. £20,000 required	<i>Climate Change; Mental Health; Race, Equalities and Intersectionality</i>	support of local partners in GCC, HSCPs and in NHS GGC		2024 to Spring 2025.		
Project: <i>Learning to support GCPH to become an anti-racist organisation</i> Main outputs: Coproduced program of activity: 1. Build ‘baseline’ racial literacy. 2. Promoting understanding of racism as a determinant of health. 3. Individual and organisational reflection, growth and culture change.	<i>Race, Equalities and Intersectionality</i> Also contributes to: <i>Poverty, Inequality and the Economy; Place, Community and Engagement; Mental Health</i>	PS, CH, JC, KMcL and Neish Training	High	<ul style="list-style-type: none"> Series of monthly team sessions. Report to GCPH Board. A set of outcomes identified that the team could work towards collectively in relation to anti-racist practice. 	<ul style="list-style-type: none"> A process of training coproduced between an external facilitator and team utilising team knowledge, experience and desired areas for growth. Designed to maximise buy-in and create collective agreement and commitment to the outcomes to be pursued in relation to becoming an anti-racist organisation 	GREEN - ongoing <ul style="list-style-type: none"> Over the reporting period we have delivered three training sessions to the GCPH tea over the reporting period, organised by the internal working group. The final session(s) will focus on actions we can take in relation to GCPH operations. Paper and discussion at Board meeting of February 2025. Actions recommended for next planning period: <ul style="list-style-type: none"> Audit on where issues of racism and racialisation shapes

Project title, main outputs, timescales and resources	GCPH priority areas	GCPH contributors & partners	Delivery priority (high/medium/low)	Key deliverables for 2024-25	Pathways to anticipated impact	End of year status (March 2025)
<p>4. Embed anti-racist principles and practice.</p> <p>Timescales: Feb – Aug 2024</p> <p>Resources: £15,000 expenditure</p>						<p>workplans, evidence and findings.</p> <ul style="list-style-type: none"> • Application of EQIA to our work plan • Mapping of other links in the city/services structure and linking with other the work of other organisations in this space.
<p>Project: <i>Understanding the changed demand in mental health services.</i></p>	<p><i>Mental Health</i></p> <p>Also contributes to: <i>Poverty, Inequality and the Economy; Race, Equalities and Intersectionality</i></p>	<p>PS and Martin Culshaw (Director of NHS, NHSGGC)</p>	<p>Medium</p>	<ul style="list-style-type: none"> • This is a developmental piece of work which requires further discussion and clarification. PS to engage with MC over the first three months of 2024-25 as capacity becomes available. 	<ul style="list-style-type: none"> • The involvement of Director of MH services for NHSGGC would maximise the likelihood of findings being implemented. 	<p>RED</p>
<p>Project: <i>Update and refresh of the Understanding Glasgow indicator data</i></p>	<p>All priority areas – across 12 Understanding Glasgow domains, and 18 key indicators.</p>	<p>KT, BC, JM</p>	<p>High</p>	<ul style="list-style-type: none"> • Update the Understanding Glasgow website, particularly focused on updating the site 	<ul style="list-style-type: none"> • Continue to provide up to date data, charts and written interpretation of data in an accessible way. 	<p>GREEN</p> <ul style="list-style-type: none"> • Over 130 pages and 200 charts, graphs and accompanying narratives updated.

Project title, main outputs, timescales and resources	GCPH priority areas	GCPH contributors & partners	Delivery priority (high/medium/low)	Key deliverables for 2024-25	Pathways to anticipated impact	End of year status (March 2025)
Main output: Update of UG website data Timescales: September 2024 to March 2025 Resources: £45K commission to PHS				with recent relevant census data. <ul style="list-style-type: none"> Updated associated infographics. 		<ul style="list-style-type: none"> Associated infographics also updated. Further UG pages and data to be updated in 2025-26 of resource available.
Project: The potential of Artificial Intelligence (AI) within Public Health and healthcare systems in Scotland Main output: Accessible, introductory briefing paper		CH	Medium	<ul style="list-style-type: none"> Production of an introductory discussion paper in April 2025 to engage and support Public Health and Healthcare professionals in engaging with this ongoing strategic development (April 2025) 	<ul style="list-style-type: none"> GCPH has delivered this output demonstrating leadership and strategic insight of the Centre. A range of dissemination events and presentations are planned and are beginning in May 2025. 	GREEN – ongoing <ul style="list-style-type: none"> Report is complete and will be published on 23rd April 2025. Accompanying blog and video also prepared. Dissemination to support impact and influence among core partners are in planning at present.

Section 4. GCPH outputs, events and communications activities to March 2025

2024/25 in numbers

19
events



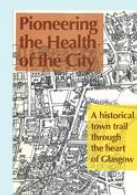
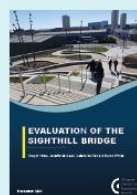
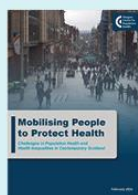
➡ **6** in person

➡ **1,387** attendees

➡ **13** online

➡ **1,330** views

6
publications



6
journal articles



30
press articles



6
e-updates



2
new websites



11
blogs



13
videos



Events

- [Sustainable Diets: Should We Reduce our Meat and Dairy Intake](#), 23rd April: GFPP webinar chaired by Riikka Gonzalez, with presentations from Professor Lindsay Jaacks, (University of Edinburgh), Dr Fiona Comrie (Food Standards Scotland), and Andrew Stark (Eating Better) – 97 attendees, 133 views.
- *'In conversation with Michaela Loach'*, 30th April: in-person event chaired by Zarina Ahmad (Council for Ethnic Minority Voluntary Organisation in Scotland) – 73 attendees.
- *Go Cycle learning event*, 7th May: in-person event chaired by Gregory Kinsman-Chauvet (Bike for Good) with Glasgow Life and local organisations representatives – 27 attendees.
- [Widening access to healthy food](#), 21st May: GFPP webinar chaired by Jill Muir, with presentations from Jonathan Pauling and Ashleigh Hall (Alexandra Rose Charity), Siobhan Boyle (Glasgow HSCP), Louise MacKenzie (Scottish Pantry Network) – 128 attended, 171 views.
- Screening of *'The Old Oak'*, 4th June: chaired by Pete Seaman, with panellists David Archibald (University of Glasgow), Amy Rich (CRER), and Aekus Kamboj (Cemvo Scotland) – 46 attendees.
- [Building a Glasgow that Supports Breastfeeding](#), 11th June: GFPP webinar chaired by Jill Muir, with presentations from Janice Moodie (NHSGGC), Mairi McLachlan (Glasgow HSCP), and Lyndsay Thomson (Glasgow HSCP) – 330 attendees, 406 views.

- [Community Connections through Climate Actions](#), 12th September: GFPP webinar chaired by Riikka Gonzalez with presentations from Glasgow Community Food Network's Food and Climate Action team – 24 attendees, 107 views.
- *Examining the social determinants of LGBT+ health and wellbeing learning event*, 12th September: workshop with key stakeholders – 10 attendees.
- [The Full of Beans campaign celebration event](#), 18th September: in-person GFPP event chaired by Riikka Gonzalez – 30 attendees.
- [Cash First approaches: Reducing the need for food banks in Glasgow](#), 10th October: webinar chaired by Jill Muirie with presentations from Faiza Hansraj-Jackson (Cash First/GCPH), Lesley Haddow (Glasgow City Council's Child Poverty Pathfinder team) and Audrey Laing (Trussell) – 132 attendees, 113 views.
- *Glasgow City Food Plan Annual Networking Event*, 31st October: in-person event hosted by the Courtyard Pantry and chaired by Dale Todd – 50 attendees.
- [Money Counts Training: a Cash First approach to food insecurity](#), 30th October: webinar chaired by Faiza Hansraj-Jackson with presentations from Emma Österberg (Independent Food Aid Network), Lisa Belletty (Trussell), and Sarah-Jayne Dunn (Citizens Advice Scotland) – 59 attendees, 75 views.
- *An overview of Universal Credit Managed Migration*, 5th November: in-person Cash First workshop delivered by Robert Hinds (Glasgow HSCP) – 21 attendees.
- [An introduction to working with asylum seekers and refugees experiencing food insecurity](#), 19th November: a Cash First webinar in collaboration with Scottish Refugee Council – 96 attendees, 93 views
- [Delivering Healthy School Meals in Glasgow](#), 26th November: GFPP webinar which looked at the important role school meals play in children and young people's mental and physical wellbeing, along with academic attainment – 31 attendees, 79 views.
- *Dignity in Practice: Food for All*, 15th January: a tailor-made Cash First webinar designed and delivered by people with lived experience of the asylum process for staff and volunteers engaged in community food services in Glasgow – 37 attendees (no recording for privacy reasons).
- [Unlocking local resources in Glasgow: A guide to ALISS](#), 12th February: Cash First webinar focussing on ALISS, the online platform that connects individuals to local health and wellbeing services, resources, and support networks – 81 attendees, 66 views.
- [Alternative community food retail in Glasgow](#), 25th February: GFPP webinar looking at alternative community food retail in Glasgow, how they source food and support people in the communities where they are based – 57 attendees, 87 views.
- *Housing and Health in Glasgow: A Journey Through Film*, 19th March: This co-curated screening explored the city's housing history and its impact on health. Hosted by the National Library of Scotland Moving Image Archive and organised in collaboration with media co-op and Glasgow Centre for Population Health, the event featured archival films from the 1940s to the 2020s – 58 attendees.

Publications

- [Examining the social determinants of LGBT+ health and wellbeing: A scoping review of evidence, unmet health needs and policy implications](#) (Chris Harkins) May 2024. Written in collaboration with LGBT Health and Wellbeing, this paper summarises findings of an evidence scoping review of over 200 UK studies examining the contemporary social determinants of LGBT+ health and wellbeing.
- [Mobilising People to Protect Health: Challenges in Population Health and Health Inequalities in Contemporary Scotland](#). Following a number of requests from partners and approval from our funder, the reflections paper that was produced for Scottish Government in February was published in September 2024.

- [Glasgow City Food Plan – Year 3 annual report](#) (Jill Muirie) October 2024. Annual report summarising the work of the Glasgow City Food Plan between July 2023 and June 2024.
- [Evaluation of the Sighthill Bridge](#) (Gregor Yates, Jennifer McLean, Valerie McNeice & Bruce Whyte), December 2024. Evaluation report commissioned by Glasgow City Region. There is no plan to publish it on our website.
- [Pioneering the health of the city: A historical town trail through the heart of Glasgow](#) (Ronnie Scott). Digitised and republished in January 2025 for Glasgow's 850th anniversary, originally published in 2005. This booklet gives a detailed overview of Glasgow's health history, based on a walking trail through the 'historic backbone' of Glasgow.
- [Our Voices – Community impact in action](#), February 2025. Comic by the Lived Experience Panel with Magic Torch Comics, illustrating the Programme Theories developed during the project.

Journal articles

- Ajetunmobi O, McIntosh E, Stockton D, Tappin D, Whyte B (2024). [Levelling up health in the early years: A cost-analysis of infant feeding and healthcare](#). *Plos ONE* 19(5): e0300267 (published 22 May).
- Friel C, Walsh D, Whyte B, Dibben C, Feng Z, Baker G, Kelly P, Demou E, Dundas R. [The health benefits of pedestrian and cyclist commuting: evidence from the Scottish Longitudinal Study](#). *BMJ Public Health* 2024;2:e001295 (published 16 July).
- Watson R, Walsh D, Scott S, Carruthers J, Fenton L, McCartney G, Moore E. [Is the period of austerity in the UK associated with increased rates of adverse birth outcomes?](#) *European Journal of Public Health*, 2024 (research started at and funded by GCPH, published 01 November).
- Roy M J, Rendall J, McLean J, et al. [Is Government Policy a Barrier or Facilitator to the Work of Place-Based Community-led Nonprofits?](#) *Nonprofit Policy Forum*, 2024 (published 05 December).
- de Haro Moro MT, Schofield L, Munoz-Arroyo R, McCartney G, Walsh D. [A new era of inequality: profound changes to mortality in England, Scotland, and 10 major British cities](#). *European Journal of Public Health*, Volume 35, Issue 2, April 2025, Pages 235 241 (research started at and funded by GCPH, published 19 February).
- Bradford D, Brown D, McCartney G, Douglas M, Dundas R, Walsh D. [Excess mortality in England and Scotland in 2022: The long shadow of austerity and the return to an unacceptable pre-pandemic baseline](#). *medRxiv* 2025.03.03.25323230 (research started at and funded by GCPH, published 04 March).

Media

- Coverage of LGBT+ scoping review in *The Herald* '[Trans people facing 'worst societal' discrimination](#)'. Also featured on [Glasgow City Of Science & Innovation](#), [University of Glasgow](#) and [news.myScience](#) websites (29 May).
- Breastfeeding journal article featured in several publications, including [EurekAlert](#) (22 May), [News Medical Life Science](#) (23 May),
- 2022 stalling mortality report referenced in article by Susan Aitken, Leader of GCC in *Glasgow Times* '[Economic austerity is a key factor on people dying younger](#)' (12 June) and in [What was the austerity of 2010 and how did it impact the UK?](#) (Yahoo News, 30 August).

- Our work on healthy life expectancy was mentioned in [Shock figures show North Ayrshire is worst for healthy life | Largs and Millport Weekly News](#) (17 June).
- Article on breastfeeding webinar featured on healthandcare.scot [‘Breastfeeding in Glasgow: a collective responsibility’](#) (18 June).
- Active commuting article and press release from BMJ Public Health achieved widespread coverage including [The Times](#), [The Telegraph](#), [Mailonline](#), [Euronews](#), and [New York Post](#) (July), [Vermilion](#) (August) and [Cycloturismo](#) in Italy (January).
- Sistema and GCPH evaluation quoted in several articles in June and July including [‘Big Noise is a life-changer for Stirling violinist who transformed his life’](#) (Daily Record), [‘Big Noise is a life-changer for violinist Adam’](#) (Stirling Observer), [‘Meet Scotland’s new national youth orchestra, where no auditions are required’](#) (The Scotsman), [‘Glasgow schoolchildren perform in Scotland’s new national youth orchestra’](#) (Glasgow World). There was also coverage in October [‘Young people make a Big Noise with world-renowned RSNO’](#) (Third Force News and Charity Today), and in February [Preschool music class hits all the right notes for Wester Hailes families](#) (Edinburgh Evening News).
- Full of Beans campaign and Glasgow Food Policy Partnership featured in Glasgow Times [‘School menus set to change in Glasgow with more beans’](#) (4 July)
- GCPH research on proximity to derelict land quoted by Paul Sweeney MSP in an article by [Clyde Radio](#) (10 July).
- GCPH research on life expectancy was quoted in Bella Caledonia (11 Oct) [The real reason 25% of Scottish children are allowed to live in poverty – Bella Caledonia](#).
- GCPH research on the impacts of austerity was quoted in the National (27 Oct) [Scots life expectancy worse due to inequality caused by austerity](#).
- Research by University of Glasgow, started at and funded by GCPH was mentioned in The Guardian: [UK austerity policies ‘increased rate of premature and low birth weight babies’ | Children’s health | The Guardian](#) (02 Nov).

Digital

- Launch of GCPH website (April 2024) and Understanding Glasgow website (September 2024).
- Six e-updates during 2024-25 to our network of subscribers in [May](#), [June](#), [September](#), [November](#), [January](#) and [March](#).
- The following blogs were published:
 - [The Transformative Power of Community Performance in Supporting Recovery and Wellbeing](#) by Mohasin Ahmed (May)
 - [The Case for Breastfeeding in Scotland: Health Benefits and Socioeconomic Impact](#) by 'Tomi Ajetunmobi (May)
 - [The Impact of Lived Experience Panels on Research: Insights from CommonHealth Assets](#) by Mohasin Ahmed (June)
 - [Addressing Problem Gambling in Scotland: A Public Health Crisis](#) by Chris Harkins (July)
 - [Bringing lived experience of migration and racialisation into research](#) by Macrine Haruna (foreword by Mohasin Ahmed) (October)
 - [Can we fix the food system? A systems approach to food justice: Part 1](#) by Jill Muirie (adapted from a presentation by Abi Mordin, November)

- [Can we fix the food system? A systems approach to food justice: Part 2](#) by Jill Muirie (adapted from a presentation by Abi Mordin, November)
- [Bringing data to life with lived experience](#) by Mohasin Ahmed (November)
- [Pioneering the Health of the City: A re-publication to mark Glasgow's 850th anniversary](#)
- [Celebrating our involvement in CommonHealth Assets](#) by Jennifer McLean (March)
- [Housing and Health: A Journey Through Film](#) by Lucinda Broadbent (March)
- Two new pages on the GCPH website, one about [Understanding Glasgow](#), and one about our [Concept Explainers series](#).
- 138 Understanding Glasgow pages updated with new data in collaboration with Public Health Scotland.
- The following videos were produced:
 - [Examining the social determinants of LGBT+ Health](#)
 - [Mohasin Ahmed on Patient and Public Involvement in research](#)
 - [Lived Experience panellists describing their experience of being involved in the study](#)
 - [Two of the LEP members, Tawa and Dudley, talking about Vita Nova and their journey in recovery](#)
 - [Principal Investigator, Prof Rachel Baker, on the value of the lived experience panel on the project](#)
 - [CommonHealth Assets Final Reflections](#)
 - [How to play the Glasgow Game?](#)
 - Six videos narrating the comic 'Our Voices: Community impact in action':
 - + [Our Voices: Community Impact in Action: Self-worth, empowerment, confidence](#)
 - + [Our Voices: Community Impact in Action - Space and inclusion](#)
 - + [Our Voices: Community Impact in Action - Improvements to physical and mental health](#)
 - + [Our Voices: Community Impact in Action - Purpose, productivity and social connection](#)
 - + [Our Voices: Community Impact in Action - Social interaction, inspiration and self-esteem](#)
 - + [Our Voices: Community Impact in Action - The power of communities](#)
- We continued to grow our social media platforms and joined Bluesky in November 2024.
 - Bluesky: 938 followers
 - LinkedIn: 1040 followers
 - X (Twitter): 6061 followers



Work plan 2025-26

Introduction

The Glasgow Centre for Population Health (GCPH) was established to understand the evolving patterns of population health and health inequalities in Glasgow and Scotland, and to work with partners to identify responses and solutions. The Centre achieves its purpose through delivery of trusted evidence and practical support for partners working towards creating better and more equal health.

During 2025-26, GCPH continues to be funded by the Scottish Government as a partnership between NHS Greater Glasgow and Clyde (NHS GGC), the University of Glasgow (UofG) and Glasgow City Council (GCC) – ahead of an options appraisal as to the future of the organisation being undertaken by October 2025 at the request of the Scottish Government. Led by NHS GGC and using a 'hackathon' approach, the process will commence in July 2025.

This plan outlines the work that will continue to be delivered by the Centre during this transitional period and takes account of the wider organisational operating context of significant reductions in both staffing and funding.

Within this operating context, our purpose remains one of: *Working to support partners to achieve improved and more equal population health outcomes, through identifying actions and responses and supporting the development and delivery of these with our partners.* We will work to achieve this through:

- Delivery of highly credible evidence on key aspects of population health in Glasgow and Scotland.
- Development and evaluation of responses with partners in service delivery and in communities.
- A highly effective communications strategy, maintaining and developing, where possible, our networks and adapting outputs accordingly

In 2025-26, our work is focused on:

- Understanding and mitigating the health impacts of ongoing financial austerity and the cost-of-living crisis, particularly the impacts on the most vulnerable populations
 - for example, work on food systems and on disability welfare policy.
- Ongoing alignment with the work of our key partners, especially in NHS GGC, GCC, and the University of Glasgow
 - for example, work as part of the Glasgow Health Determinants Collaboration, with NHS GGC on 'missingness' and with University of Glasgow on the GALLANT project and the evaluation of community food markets.

- Supporting the creation of connected, inclusive and empowered communities and places
 - through our work on the Glasgow City Food Plan work and Cash First Partnership, our contributions to the Clyde Metro team and through ongoing collaboration with Glasgow Caledonian University on community assets, embedding lived experience and community wealth building.

We will seek to continue to work this way in the period between now and the end of the year.

The structure of this work plan

The GCPH work plan for 2025-26 takes account of current organisational capacity, skills and capabilities and will be reviewed at mid-year in light of the outcome of the options appraisal.

The plan is presented in two sections. Section 1 describes the delivery of a scaled down GCPH work plan for 2025-26, highlighting risks and challenges to delivery. Section 2 presents a detailed matrix of key undertakings for the year, including the work of our Communications function.

Section 1. GCPH in 2025-26

As outlined in the 2024-25 End of Year Work Plan Report (GCPHMB/2025/473), the last 12 months have been a time of uncertainty and challenge for the GCPH team. Given continuing uncertainty, and the resource and staffing challenges, our work plan for 2025-26 is focussed on a smaller number of projects.

From a governance perspective, we are currently operating (since April 2026) without an agreed Memorandum of Understanding in place – though all partners are fully informed and agreed as to the steps being taken in the coming months (pending the outcome of the Options Appraisal).

Communications

A key component of how we work towards change is through our strategic and responsive use of communication outputs. Our Communications has evolved to maximise the impact of the Centre through:

- Maintaining and strengthening our profile through increasing awareness of GCPH.
- Raising awareness of the social determinants of health across multiple policy areas.
- Disseminating our research findings, increasing awareness of our research priorities and projects, and maintaining our reputation for credible and trusted research.
- Growing our influence through enhanced engagement and reach with target audiences including policymakers, planners, third-sector partners and the media.
- Supporting partnership working on which the Centre's activity and impact rests, among an expanded range of stakeholders and end-users of outputs.

Success for the Communications function during 2025-26 will be for GCPH to continue to be known for its flagship work on population health in Glasgow and beyond, work which is trusted, respected and valued, and which has influence and impact on policy and practice across the public policy spectrum.

Risks to delivery

This work plan has been developed taking account of the substantial reductions in both funding and staffing available to GCPH over the coming months. The main foreseeable risks to delivery of this plan are

- Further loss of staffing – if more team members elect to leave GCPH in light of the current challenges and issues (especially in a context where we are not able to appoint replacement staffing due to the future uncertainty).
- Further staff absences amongst the diminished staff currently available.
- In both cases above, the risks are particularly clear in relation to the already much-diminished research staffing - especially at Programme Manager level (where we currently have 1.7 FTE, with 1.0 FTE currently on long-term absence).
- If partners reduce their openness/willingness to collaborate with GCPH, considering our reduced capacity to deliver and future organisational uncertainty.
- If Scottish Government were to ask for us to take in year steps to minimise spending and return part of our financial allocation for the year – as was the case in 2024-25.

GCPH
June 2025

Section 2. GCPH work plan 2025-26: Matrix of key projects

Specific activities for 2025-26	Description and timescales	Priority for 25-26 (high/med/low)	Deliverables for 2025-26 GCPH lead and partners	Pathways to anticipated impact
Glasgow Health Determinants Research Collaboration and GCC Child Poverty Programme	Contribution to city-wide network of aligned interest through development of HDRC learning network Timescales: Four events over 2025-26	High	<ul style="list-style-type: none"> Develop brief for the learning network in collaboration with work stream 3. Support delivery of the seminar series in collaboration with HDRC partners. 	<ul style="list-style-type: none"> Supporting public sector reform in Glasgow aiming to achieve impacts on social determinants of health through: <ul style="list-style-type: none"> Sharing and promoting examples of good practice in relation to evidenced-based innovation in addressing the wider determinants of health. Raising the HDRC profile, building networks of shared interest and developing the connections necessary for further funding bids and projects in support of the HDRC's adoption process and impact.
	Contribution to development of evidence and action on racialised health inequalities in Glasgow Timescales: By end of March 2026	High	<ul style="list-style-type: none"> GCPH contribution to be further clarified on return from absence of relevant Programme Manager 	<ul style="list-style-type: none"> Improved understanding of impact of racialisation on population health in Glasgow, with possible resourcing implications for the city.
Food systems	<p><i>Glasgow City Food Plan:</i> Leadership and development and linking this with the local Good Food Nation Plan development.</p> <p><i>Glasgow Food Policy Partnership:</i> Chairing and Co-Ordination linking this work with the UK-wide Sustainable Food Places network.</p>	High	<p>Jill Muirie, Riikka Gonzalez</p> <p>With Glasgow Food Policy Partnership partners (e.g. GCFN, GCC, HSCP, NHS GGC, Chamber of Commerce) - 23 partners in all.</p>	<ul style="list-style-type: none"> Working through the established structures of the GCFP to further build understanding and commitment, including senior buy-in from key partners. Collaboration, leading development, coordination and coherence across the work of all stakeholders improving

	<p>Timescales: ongoing (year 5 of 10)</p> <p>Note: Not externally funded.</p>			<p>Glasgow's food system. and the rest of Scotland.</p> <ul style="list-style-type: none"> Improved support for third sector and community organisations also the private sector (independent food businesses, The Chamber and contract caterers) working to address food insecurity and improve opportunities to access affordable nutritious and sustainably produced food. Collaboration with academic partners to ensure that up-to-date evidence informs the Plan and any work linked to it (projects/campaigns/etc), and that the Plan is regularly and robustly reviewed.
	<p><i>Good Food Nation (Scotland) Act</i> implementation support for NHS GGC</p> <p>Timescales: TBC but expect national guidance in October 2025 with local plans (for NHS Boards and local authorities) by Oct 26)</p> <p>Note: no external funding indicated (yet)</p>		<p>Jill Muirie, Riikka Gonzalez</p> <p>With NHS GGC and NHS GGC local authorities</p>	<ul style="list-style-type: none"> Deliver stakeholder information/mapping day in collaboration with NHS GGC (May 25) Support peer learning with NHS GGC local authorities and common approaches to local GFN food plans and public consultations (to avoid duplication)
	<p><i>Evaluation of community food markets in Glasgow.</i> Lead for Market Implementation Workstream</p> <p>Timescales: 3 year project from 01/04/25 to 31/03/28</p> <p>Note: committed and research funded by UKRI (excluding market implementation funding)</p>	High	<p>Jill Muirie</p> <p>With UofG, GCC, Glasgow Community Food Markets CIC, GCFN</p>	<ul style="list-style-type: none"> Working with funders build appropriate resourcing for market implementation. Coordination and coherence of workstreams in research programme. Establishment and maintenance of the markets in collaboration with local community organisations Effective collaboration with stakeholders to assess impact of

				markets and effective communication of learning to wider audiences.
	<p><i>Cash First Partnership</i> to end the need for foodbanks</p> <p>Timescales: funded until January 2026</p> <p>Note: committed and funded by SG 'Cash First' Programme</p>	High	<p>Jill Muirie, Faiza Hansraj-Jackson</p> <p>With GCFP Fair Food for All Partnership (part of the GCFP delivery structure) (incl. HSCP, GCC, Trussell Trust, IFAN)</p>	<ul style="list-style-type: none"> Improved understanding of emergency food demand and support services in Glasgow. Frontline staff in the city understand poverty, incorporating the broader issues of destitution and food insecurity, and are confident in the referral pathways to advice and cash first support. Strengthened relationships with and between partners working on emergency food aid, financial inclusion and welfare advice. Peer learning across all Scottish Cash First projects Linking delivery of this project to the wider food system change as part of the implementation of the GCFP.
Disability Welfare Policy	<p><i>Population health and NHS service demand impacts</i></p> <p>Timescales: Delivery in early 2026</p>	High	<p>Chris Harkins</p> <p>With health economists and disability organisations.</p> <ul style="list-style-type: none"> Economic analysis to quantify implications and model costs for the future Further qualitative work on lived experience. Policy recommendations for government and partners in light of all of the above. 	<ul style="list-style-type: none"> Dissemination via established pathways and networks for work with minorities and groups with protected characteristics. To be further clarified on return from absence of relevant Programme Manager.

Supporting NHS GGC to understand and respond to poverty as a driver of demand	<p><i>Addressing poverty-related causes of 'missingness' in health care.</i></p> <p>A rapid review of the evidence including grey literature on poverty as a driver of reduced access to healthcare and its resultant impact.</p> <p>Timescale: completion by end of June 2025</p> <p>Showcasing of best practice examples of ways to address this within a range of contexts.</p> <p>Timescale: September/October 2025</p>	<p>High</p>	<p>Chloe McAdam</p> <p>With NHS GGC, UofG</p> <p>A rapid review of the evidence including grey literature on poverty as a driver of reduced access to healthcare and its resultant impact – June 2025</p> <ul style="list-style-type: none"> Research team will devise presentation resources to deliver at NHS GGC stakeholder events. Face to face presentations to four senior management teams within NHS GGC as part of the routine business of these teams. Materials that can be utilised on an ongoing basis by NHS GGC and other stakeholders. 	<ul style="list-style-type: none"> Improved understanding by relevant stakeholders of ways to reduce impacts of poverty on access to health care. As commissioned with NHS GGC involvement, the findings will have an access point in senior leadership peer group. Resultant actions will be developed with decision-makers in NHS GGC and therefore with a stronger degree of ownership.
Capital Health Impact Assessment public health training delivery	<p><i>Assisting Health Impact Assessment of Glasgow City Region capital investments.</i></p> <p>Timescales: May 2025</p>	<p>High</p>	<p>With GCR PMO</p> <p>Initial training session to 30 planners in GCR to explore how their decisions can impact the wider determinants of health.</p>	<ul style="list-style-type: none"> Improved appreciation of potential health impacts of upcoming capital investments, leading to more beneficial impacts.
Clyde Metro	<p>Clyde Metro will be a fully integrated mass transit public transport system operating throughout the Glasgow City Region.</p> <p>Delivered over multiple decades, Clyde Metro will aim to have a transformation impact on the region.</p>	<p>High</p>	<p>Gregor Yates</p> <p>With GCC Clyde Metro team.</p> <ul style="list-style-type: none"> Development of a Health Strategy and Action Plan to sit alongside wider programme of work. 	<ul style="list-style-type: none"> A robust evidence base on the relationship between health and mass transit for the Glasgow City Region. Alignment of Clyde Metro with relevant strategy, plans and policies for health in the city region.

	<p>This work will involve supporting the Case for Investment (CFI) by offering evidence-based expertise on the health and equalities implications of the proposed development.</p> <p>Timescales: ongoing until mid-2027</p>		<ul style="list-style-type: none"> • Support for commissioned components of CFI (i.e. Stag Appraisal, Strategic Environmental Assessment, Non-Environmental Impact Assessment). • Delivery of Action Plan. • Ad-hoc requests for information as required. 	<ul style="list-style-type: none"> • Establishment of a network of health professionals and organisations to generate advocacy for Clyde Metro as a means of supporting health and addressing spatial inequalities across the region. • CFI commissioned outputs informed by robust evidence and good practice relating to health, wellbeing and inequalities for Clyde Metro. • Specific route or network options being informed by data and evidence on health and inequalities. • As part of a transformational approach to the delivery of Clyde Metro, health will be a widely understood and recognised consideration alongside other policy areas.
CommonHealth Assets	<p>Knowledge translation and utilisation - evidence into practice.</p> <p>Timescales: until end of March 2026</p>	Medium	<p>Jen McLean, Mohasin Ahmed</p> <p>With GCU and UK academic and community partners</p> <ul style="list-style-type: none"> • Publication of CHA Lived Experience academic journal article • Publication of final LEP evaluation report and supporting resources • Contribution to further academic outputs. Co-authors on economic evaluation and programme theories journal articles. • Conference and meeting inputs 	<ul style="list-style-type: none"> • Robust evidence and important learning about the impact of community-led organisations (CLOs) on health. • By working with UK academics, practitioners and CLOs this research will provide evidence as to how CLOs impact on health and wellbeing, providing insights by what mechanisms these changes take place, for who and in what context – thus influencing funders in their decision making. • Dissemination will influence support for investment in and efficacy of CLOs. • Support translation into community level impact.

Generation of innovative and fundable research questions and collaborations aligned to impact	<i>Evaluation of Community Wealth Building: Learning lessons from Scotland</i> Timescales: October 2025 – September 2028	High	Jen McLean, Mohasin Ahmed With GCU and UK academic and community partners <ul style="list-style-type: none"> • GCPH to lead PPIE via a Public Involvement Panel • Establishment of Panel with representation across 6 LA's involved • Delivery of 2 in person Panel meetings in Year 1 • Development of evaluation plan. 	<ul style="list-style-type: none"> • An assessment of CWB and its implementation in Scotland and its overall impact of CWB on health, income and work in local areas • Integrated PPIE will ensure a clear community voice within the project, influencing methodological approaches, relevance and applicability of learning.
	Systemic approaches to economic, health inequalities and climate resilience – GALLANT -Glasgow as a Living Lab Accelerating Novel Transformation Timescales: Ongoing.	Medium	Jill Muirie With UofG. <ul style="list-style-type: none"> • Lead of the Community Collaboration workstream - Facilitating community collaboration research that incorporates local knowledge and community input. 	<ul style="list-style-type: none"> • Taking a whole-systems approach GALLANT will use Glasgow as a living lab to trial new sustainable solutions throughout the city. • While addressing the city's key environmental challenges, the programme will consider the co-benefits and trade-offs for public health, wellbeing, and the economy.
Sistema Scotland evaluation	Sistema Scotland is a national charity working to improve lives and strengthen communities through music and nurturing relationships. Continued provision of supervision and support for the ongoing fieldwork and evaluation of Big Noise Scotland, the music education and social change programme.	Low	Chris Harkins With Audit Scotland <ul style="list-style-type: none"> • Limited specific undertakings within the 25-26 – but greater undertakings beyond that. 	<ul style="list-style-type: none"> • The evaluation has several national partners who will support and disseminate the findings as well as local partners in six geographies across Scotland. • The evaluation also has international interest and will be shared within existing networks.

	Timescales: Ongoing – <i>but limited undertakings duringp2025-26.</i>			
Leveraging additional resources in collaboration with partners	New and emerging initiatives/collaborations	High	<ul style="list-style-type: none"> Revised bid to the NHS GGC endowment fund to support the work of the Glasgow City Food Plan. Collaborative bid to NIHR on LGBT Health and Wellbeing. Collaborative bid with HDRC partners for work on racialisation in Glasgow. 	<ul style="list-style-type: none"> Various pathways to impact, depending on the precise initiative/collaboration.
To provide effective and responsive communications to promote understanding and support of the implementation of required responses.				
Specific activities for 2025-26	Description and timescales	Priority 25-26	Deliverables for 25-26 GCPH lead and partners	Pathways to anticipated impact
GCPH Communications function	<p>Strategic and responsive use of a range of media to build our profile, ensure maximum impact and exposure for our work, and to support organisations and agencies to respond to the relevant challenges.</p> <p>Maintenance of digital presence, calendar of engagement and dissemination events, and the publication, dissemination and promotion of a wide range of outputs from work plan projects.</p> <p>Timescales: ongoing</p>			
	Publications and print media	High	<ul style="list-style-type: none"> Robustly proofed, edited and designed publications Targeted dissemination plan for each output. Ongoing development of 'house' style including increased use of design and imagery. 	<ul style="list-style-type: none"> Broad range of high-quality, relevant, accessible and memorable outputs. Quality of publications maintained with consistency in tone, messaging and style. Targeted dissemination ensures outputs reach and engage intended audiences. Others sharing and using our publications. Deeper and more strategic comms alliances and coalitions through increased collaborative

				<p>communications via dissemination plans.</p> <ul style="list-style-type: none"> Engagement of broader range of perspectives through more accessible and inclusive comms.
	Event development and delivery	High	<ul style="list-style-type: none"> Topic-specific and targeted workshops and events. Knowledge exchange/knowledge translation events focussed on the interpretation of evidence. Series of four events in collaboration with HDRC. Increased use of UofG facilities and other partner venues as more cost-effective way to host events. 	<ul style="list-style-type: none"> Well planned, organised and executed events run smoothly, are documented, and have visual outputs and/or event reports when appropriate. Engagement of new audiences (via external orgs events and conferences). Bringing public health and inequalities expertise together with knowledge from other disciplines, sectors and topics enables the sharing of different perspectives to yield new insights. Co-produced recommendations grounded in reality.
	Digital media and engagement	High	<ul style="list-style-type: none"> Maintenance and update of both websites, focusing on accessibility and visual engagement. Development of new digital outputs including videos, graphics and associated mixed media. Glasgow 850 content (blogs, health timeline, audio tour). Production of six e-updates per year. Growth of our social media platforms, with a specific focus on Bluesky and LinkedIn. 	<ul style="list-style-type: none"> Publishing articles, reports, and documentation. Sharing educational materials and resources. Enhancing visual communication and engagement by creating infographics and using a variety of images. Leveraging multimedia for storytelling and understanding, by sharing video experiences and expert accounts. Ensuring content stays within a specific brand and visual identity in social media posts and website outputs. Reaching intended audience direct to their inbox (e-update and targeted emails).

				<ul style="list-style-type: none"> • Broad interactions across social platforms with relevant change makers. • Leveraging personal profiles and maintaining consistent output. • Utilising people behind research wherever possible to arouse emotions.
	<i>Understanding Glasgow: the Glasgow indicators project.</i> Timescales: Ongoing	Medium	<ul style="list-style-type: none"> • Maintenance and ongoing updating of the Understanding Glasgow website, particularly focused on updating the site with recent relevant census data. • Updated associated infographics. 	<ul style="list-style-type: none"> • Provision and active promotion of a set of credible and relevant public health indicators in an accessible format in one place. • Providing public health intelligence supports understanding of population health and its determinants, in local areas
	<i>Glasgow neighbourhood health and wellbeing profiles</i> Timescales: July 2025 to March 2026	High	With PHS <ul style="list-style-type: none"> • Development of a new and updated set of adult and children and young people neighbourhood profiles for Glasgow City - across the 3 sectors and the 57 Glasgow City small geography neighbourhoods • Commissioned to Data Consultancy Team at PHS. 	<ul style="list-style-type: none"> • A wide demand for this type of public health intelligence among planners, policymakers, third sector groups community groups and the public. To provide organisations and communities with up-to-date and locally relevant public health intelligence, highlighting health and social inequalities • To provide local level information for targeting resources and priority setting.



**Glasgow Centre for Population Health
Management Board Meeting
18 June 2025**

Budget position: 1st April 2024 to 31st March 2025

Recommendations

The Management Board is asked to note:

- The Centre’s financial position for the period April 2024 to March 2025 detailing expenditure of £1,311,913.
- The planned budget for 2024-25 originally comprised of the following streams of funding:

	£
• Annual SG allocation	1,300,000
• External income from partners and others	286,473
• Brought forward from prior year	240,109

However, a combination of uncertainty about the longer-term finances of GCPH, and issues with navigating the vacancy approval process at NHS GGC, as previously brought to the Board’s attention, created a situation where GCPH was unable to fill a number of vacancies, leading to a projected underspend.

Furthermore, in the context of emergency financial measures announced by Scottish Government in mid-August, the GCPH Centre Leadership was asked to take reasonable steps to minimise spend over the remainder of 2024-25. This resulted in a decision, previously communicated at the September 2024 Board meeting, to no longer attempt to recruit staff for the remainder of the financial year.

In line with this request by Scottish Government, a revised budget plan for 2024-25 was prepared, noting potential for further reduction in funding should contingency funds remain uncommitted. The revised Budget Plan was subsequently approved at the September 2024 Board meeting (GCPHMB/2024/463).

Following recent communication with the Scottish Government and a further review of contingency funding GCPH have received an allocation of £800,000 for 2024-25 – an overall reduction of £500,000 on the 2023-24 allocation.

Brought forward funds are secured.

The final revision to the budget is as follows:

	£
• Annual SG allocation	800,000
• External income from partners and others	286,473
• Brought forward from prior year	240,109

Commentary on Table 1

1. Available budget is reduced by £500,000 from the original expectations due to Scottish Government spending controls. An £800,000 allocation was received late in the financial year.
2. Contingency funds were reduced from £314,558 to £26,964 in the final revised budget plan.
3. Spend on staffing in 2024-25 amounted to £933,448 a considerable reduction on the previously costed staffing profile which would now exceed £1.4 million.
4. Project spend to March amounted to £205,161 and includes Cash First expenditure recorded in the final period of the year.
5. Income from external partners (inclusive of the Cash First grant noted above) has marginally exceeded expectations.
6. GCPH has concluded the year within the allocated budget envelope and a small carry forward of £27,879 will be actioned.

Communications with the Scottish Government concerning the 2025-26 Budget allocation have suggested that £1 million will be available. A spending plan in line with this allocation, expected income and the small carry forward from 2024-25 is currently being prepared for discussion and approval at the June 2025 Board meeting (GCPHMB/2025/476).

Fiona Buchanan
May 2025

Table 1. Financial position 1st April 2024 to 31st March 2025

Revised Financial Plan 24.25					
	<u>Income</u>	£	Actual to March £	Forecast Out-turn £	Forecast Variation from Budget £
I 1	Annual SG Allocation	800,000	800,000	800,000	-
I 2	Other Income	286,473	299,683	299,683	13,210
	Total Income 24/25	1,086,473	1,099,683	1,099,683	13,210
I 3	Carry Forward from previous years	240,109	240,109	240,109	-
	Total Available 24/25	1,326,582	1,339,792	1,339,792	13,210
	<u>Expenditure</u>				
	Research:				
E 1	Team 1 - Evidence for action	55,000	57,345	57,345	(2,345)
E 2	Team 2 - Evidence for action	49,000	47,528	47,528	1,472
E 3	Glasgow City Food Plan	35,000	59,324	59,324	(24,324)
E 4	Training and Development	5,000	3,080	3,080	1,920
E 5	Axiom research & consultancy	17,215	17,215	17,215	-
E6	Cash First Expenditure		20,669	20,669	(20,669)
	Total Research	161,215	205,161	205,161	(43,946)
	Communications:				
E7	Communications (including website proje	40,000	19,972	19,972	20,028
	Total	40,000	19,972	19,972	20,028
					-
	Management and Administration				-
E8	Centre Management, Admin & Running Co	25,000	13,735	13,735	11,265
E9	Accomodation Costs	130,000	139,597	139,597	(9,597)
E10	Core Staffing	943,403	933,448	933,448	9,955
	Total Management & Admin	1,098,403	1,086,780	1,086,780	11,623
	Total Expenditure	1,299,618	1,311,913	1,311,913	(12,295)
	Balance	26,964	27,879	27,879	



**Glasgow Centre for Population Health
Management Board Meeting
18 June 2025**

Budget Setting: 1st April 2025 to 31st March 2026

Recommendations

The Board is asked to:

- Review the commentary in this paper and accept the budget setting proposal summarised in Table 1.

Commentary on Table 1

1. Income :

- 1.1. The funding allocation from Scottish Government is anticipated at £1,000,000. The amount is for financial year 2025-26 only and therefore is classed as non-recurring.
- 1.2. It has been possible to facilitate carry forward funding of £27,000 from 2024-25 – a carry forward which sees a significant reduction on prior years due in part to a funding settlement from the Scottish Government which was reduced in year. (I3).
- 1.3. Research income (I2) is expected in relation to several projects including GALLANT and Community food markets research (University of Glasgow) and the evaluation of Community Wealth Building in Scotland (Glasgow Caledonian University).
- 1.4. There is also funding during 2025-26 from Scottish Government for the delivery of the Cash First Partnership in Glasgow.

2. Expenditure:

- 2.1. Staff Costs (E10) for the current staff complement have been calculated based on an agreed 4.25% salary uplift.
- 2.2. After significant movement in staff throughout 2024-25 the complement costed for 2025-26 is approximately 50% reduced from the original establishment of GCPH.
- 2.3. Following discussion with Board members in May, and in keeping with 2024-2025, there are no plans to recruit replacement staffing until the longer term future and funding for the Centre is clarified.
- 2.4. The Public Health Practitioner Specialist post funded from the Cash First Partnership grant (until January 2026) is also included within the overall staffing compliment costed.

- 2.5. Accommodation costs (E9) for rent, cleaning and utilities are budgeted at £70,000. This allows for the first quarter of the year at the Olympia Building, Bridgeton before moving to the Clarice Pears building in July 2025. It is assumed that GCPH will not be liable for any degree of dilapidation.
- 2.6. A small allocation of £20,000, similar to previous years, is provided to cover Centre Management costs (E8) including administrative costs, postage, equipment, stationery, IT requirements and computer sundries and centre running expenses.
- 2.7. The communications budget for 2025-26 (E6) has been set at £23,000 to include ongoing communications activities, outputs and events – including the delivery of four events in collaboration with the Glasgow Health Determinants Research Collaboration.
- 2.8. Related to point 1.3 above and research income received from Glasgow Caledonian University for the successful funding by NIHR of the Community Wealth Building Evaluation: Learning Lessons from Scotland study, GCPH will lead on the Patient and Public Involvement and Engagement (PPIE) component of the study and will receive income for our involvement but also a budget for the delivery of the PPIE component (E1).
- 2.9. Line E2 provides ongoing support to the staffing and delivery of the Glasgow City Food Plan, including sustaining current staffing (the PT Co-ordinator and PT Communications posts), support for work in 20 local schools, support for and evaluation of local food market provision, and a developing research collaboration between Glasgow University and Castlemilk Law Centre.
- 2.10. Building on the successful update of the Understanding Glasgow website by PHS in 2024-25, work is now underway to support the refresh and updating of the adult, and children and young people, Glasgow neighbourhood profiles (E5) during 2025-26.
- 2.11. Some spending is currently planned for work on population health and NHS service impacts of disability welfare reform. Planning for this has been temporarily paused, pending the return to work of the relevant Programme Manager. An update will be provided at the September Board meeting.

3. Conclusions

- 3.1. On the current projection, GCPH would conclude financial year 2025/26 in an underspent position (see BALANCE in Table 1), however this reflects the intentional retention of some capacity for spending which can be committed during the remainder of the year, in consultation with the governance mechanisms and processes.

Fiona Buchanan
June 2025

Table 1. Proposed Budget Plan 2025-26

<i>Income</i>		<i>Planned 2025/26</i> <i>£</i>
I 1	Annual SG Allocation	1,000,000
I 2	Other Income	98,841
	<i>Total Income 25.26</i>	<i>1,098,841</i>
I 3	Carry Forward from previous years	<i>27,000</i>
	<i>Total Available 25/26</i>	<i>1,125,841</i>
	<i>Expenditure</i>	
	Research:	
E1	Community wealth buiding - PPIE	8,190
E2	Food Plan incl local food market support	111,000
E3	Training & Development	5,000
E4	Cash first - Engagement & Commisioning	12,500
E5	Community Profiles - Public Health scotland	75,000
E6	Population Health & NHS service impacts of Disability Welfare Reform	40,000
	<i>Total Research</i>	<i>251,690</i>
	<i>Communications:</i>	
E7	Communications	23,000
	<i>Total</i>	<i>23,000</i>
	<i>Management and Administration</i>	
E8	Centre Management, Admin & Running Costs	20,000
E9	Accommodation Costs	70,000
E10	Core Staffing	652,399
	<i>Total Management & Admin</i>	<i>742,399</i>
	<i>Total Expenditure</i>	<i>1,017,089</i>
	<i>Balance</i>	<i>108,753</i>