



**Glasgow Centre for Population Health
Management Board Meeting
Tuesday 13 December 2016**

General update

Recommendations

Board members are asked to:

- Note this update on progress since the last Board meeting on 13 September 2016;
- Identify any developments and priorities in their own areas that are of potential significance for the Centre.

Governance issues

1. We have been notified of a change in Board membership from the City Council. Councillor Emma Gillan will be replaced by Bailie Anne Simpson. An introductory meeting with Bailie Simpson is scheduled for 10 January 2017.

Staff update

2. Oonagh Robison has joined the team as a Public Health Researcher (replacing Grieg Inglis and providing support to Themes 1 and 3). Ms Robison started on the 31 October and joins us from the MRC/CSO SPHSU where she held a PhD studentship. Two members of the team have recently returned from maternity leave: our Communications Manager Jennie Coyle returned in August and Dr Claire Mckechnie-Mason returned to continue working on the AHRC Connected Communities project on the 1st November. Joe Crossland returned to the post of Communications Officer after covering the Communications Manager during Ms Coyle's maternity period. Dr Mckechnie-Mason, as part of the multi-partner arrangements of the *Representing Communities* project, will be on placement at the Centre for Medical Humanities at Leeds University from the start of December until March 2017.
3. A contract extension has been offered to the GoWell Community Engagement Specialist, Cat Tabbner. This will align her contract end date with the core team members. The Acting Associate Director cover has been extended for three months, in the first instance, as we await confirmation of funding that would allow recruitment of a permanent Associate Director.

Olympia and the Social Research Hub

4. The GCPH continues to support the promotion of the University of Glasgow Research Hub through our joint knowledge exchange and community engagement post (held by Jessica Watson). Conversations are underway with Prof Bob Davies at the University of Glasgow to support University-facing activity in the Hub to promote interest among staff. See also our contribution to the ESRC Festival of Social Science below.

Outputs and activities

5. This section summarises the Centre's outputs and activities since the last Board meeting in line with the agreed approach to monitoring and reporting. It includes events and seminars, reports and publications, media and communications activity.

Events and seminars

6. *Building Connections Improving Outcomes for Minority Ethnic Communities* (28 September 2016). As part of the JRF-funded demonstration project *Building Connections*, Jamie Sinclair and GCPH colleagues ran a workshop exploring how the principles of joined-up and holistic service provision through Jobcentre Plus could be aligned to support minority ethnic service users. Sixty people participated.
7. *Doors Open Day* (17 September 2016). The Social Research Hub and GCPH were involved in the city's 'doors open day' event. Three tours of the Social Research Hub took place, and members of the public were given the opportunity to view GCPH films, photographs from Bridgeton Historical Society and an introduction to the Community Health Profiles. The event adds to our community engagement programme and after the success of this year, will be run again in future years. Forty-five people participated in the tours (a sell-out).
8. Several GCPH team members gave poster or oral presentations at the Faculty of Public Health Conference: *Public Health 'Strong Voices: Pragmatic Public Health* in October. The Centre's contribution ranged over the four Themes of our work plan including community engagement, excess mortality, alcohol and ageing, real-time data collection, climate resilience and asset-based services. Prof Tannahill provided input on a plenary panel discussing directions and themes for the future development of Public Health in Scotland.
9. *Seminar Series 13 Lecture 1*. Ian Jackson, Director, Bromley by Bow Health Partnership, London; delivered the first lecture of Seminar Series 13 entitled '*Mobilising Healthy Communities*' on 9 November at The Lighthouse. Ian presented on the approach of this East London practice to re-conceptualise the role of primary care through social prescribing, co-production and bridging a bio-medical and a community approach. A session was held the next morning to discuss implications. The seminar had 121 attendees with 21 attending the morning-after session.
10. ESRC Festival of Social Science (FoSS), *Barras Social* (12 November 2016). As part of its contribution to the FoSS, the Centre commissioned filmmaker Chris Leslie to produce a film exploring the question 'what difference does social science make?' The film focused on the east end in relation to GCPH's move to Bridgeton and the University's Social Research Hub. The Festival targets the general public, and our film was pitched to a general audience and premiered at the event.
11. Naomi Eisenstadt, the Scottish Government's Independent Advisor on Poverty and Inequality, visited the Centre of the 19 September 2016 and met with Carol Tannahill, Bruce Whyte, David Walsh and James Egan to hear about the Centre's work. Her focus is on improving the life chances of young people and the poor health experienced by this age group was of particular interest to her.

As a consequence of this visit, Bruce and James met with the Government's Social Justice Division to discuss the implications of their work. Carol Tannahill contributed to an academic roundtable with Ms Eisenstadt on 23 November.

12. The re-arranged visit from the Minister for Public Health and Sport, Ms Aileen Campbell, took place on 15 November, with contributions to discussion from Prof Tannahill, Chris Harkins, Dr Gerry McCartney of Health Scotland, and Dr Seaman. The Minister heard about the Centre's work on excess mortality, social connectedness, Sistema and support for the Clyde Gateway evaluation. Discussion focused on the cross portfolio nature of Public Health.
13. Colleagues from NHS Grampian visited the Centre on 23 November, following discussion through the Shared Services for Public Health process in which there was positive feedback about the GCPH model. NHS Grampian is considering a similar model and is seeking to learn from the GCPH.
14. *Glasgow's Healthier Future Forum 18: Perspectives on Place* (23rd November 2016), St Andrews in the Square. This HFF presented an opportunity to discuss research focusing on different dimensions of place led by GCPH and What Works Scotland. Speakers included Andy Milne (SURF), Nick Watson (WWS), Pete Seaman, Russell Jones and Lisa Garnham (GCPH). This event was fully subscribed with 93 delegates in attendance. Report to follow.
15. *Exploring Neighbourhood Change, Activate course findings workshop* (29 November 2016), Calton Heritage and Learning Centre. This workshop showcased findings from the Activate course (the University of Glasgow introduction to community development course) run to provide community voice and input into the *Exploring neighbourhood change: Life, history, policy and health inequality across four Glasgow communities* work in Theme 4. The workshop brought together community researchers and professionals with a research into action focus to shape the capacity-building dimension of the wider project. Seventy-four attendees, including representatives from the City HSCP, Thriving Places East, Glasgow Life and the third sector, discussed findings from the community research. Report to follow.
16. Seminar Series 13 Lecture 2. Prof Graham Watt, (University of Glasgow) *Re-imagining the NHS: Lessons from General Practice at the Deep End* (8 December 2016), the Teacher Building. Professor Watt shared learning and future aspirations from Deep End work including the Link Worker Programme, Govan SHIP, Care Plus, the Parkhead Financial Advice Project and the Pioneer Scheme. One hundred and forty-four delegates registered.
17. Seminars in development for 2017 include Tessy Britten (17 January 2017) who has interests researching and prototyping everyday participation; Daniel Wahl (7 March 2017), interests include sustainability and resilience; and social geographer Danny Dorling (21 March 2017).

Indicators

18. The Children and Young people's profiles of Glasgow neighbourhoods were published on the Understanding Glasgow website at the start of December. There are 60 individual profiles covering Glasgow as a whole, the three sectors within Glasgow and 56 neighbourhoods. The profiles contain a wide range of indicators relevant to children's health and their life circumstances, including: healthy life expectancy, child poverty, victims of crime, children's proximity to green space, childhood obesity and likely development difficulties in pre-school children.

An interactive graphing/mapping facility will accompany the profiles. In addition, nine 'Evidence for Action' briefings have been prepared to help inform local action in relation to specific issues e.g. addressing poverty, increasing physical activity through active travel, encouraging safe sleeping positions for infants. The profiles have been designed to support the HSCP's children's service plan, education planning and project evaluation activity.

Publications

The following reports have been published since the last Board meeting:

19. *Synthesis Series: Health and early years, children and young people*. The report outlines evidence in relation to different 'spheres' of influence impacting on children's health and wellbeing utilising GCPH work over our 12 year lifespan. Focus areas include: family and parent environment; learning environment; neighbourhood environment; and socio-economic context. This has been very well received by policy and practice colleagues, including within Scottish Government. It has also generated much engagement on social media.
20. Briefing Paper 49. *Cost of the School Day (CoSD)*. This paper develops the findings from the CoSD work with a consideration of evidence for actions to reduce costs of the school day for families on low incomes. A blog by Marion Fairweather of Child Poverty Action Group accompanied the Briefing Paper released to coincide with Challenge Poverty Week.
21. *Parenting support: exploring the current landscape in Glasgow*. Joint publication by GCPH and NHSGGC. This publication seeks to provide services and agencies delivering parenting interventions with a better understanding of the range of parenting support available across Glasgow and make recommendations for future service delivery. This is a web-only publication.
22. *GoWell*: Two new briefing papers from GoWell have recently been published. *Briefing paper 27: Impacts of the Commonwealth Games 2014 on young people in the East End of Glasgow* and *Briefing Paper 28: Food bank use among residents of Glasgow's deprived neighbourhoods*. An accompanying infographic on the food bank briefing paper was developed to help promote it via social media. This Briefing Paper was also featured in the Herald in an article entitled 'Food banks 'a poor solution' as hungry families stay away, study reveals'.

All publications are available on the GCPH website.

Forthcoming publications

23. *Synthesis Series: Active travel in Glasgow: what we've learned so far*. This report brings together GCPH learning on transport and health, with a specific focus on active travel. It highlights the strong and growing evidence base for the health benefits of a more sustainable transport system which encourages more physical activity, improved air quality, reduced carbon emissions, less reliance on cars, improved accessibility of amenities and more connected communities. The report is intended to provide a basis for discussion with and between the Centre's partners and networks about actions required to increase levels of active travel in Scotland.

24. *Striking a balance: asset-based approaches in service settings: An illustration of asset-based approaches in services, and an exploration of their potential for the future.* This report supports the broader implementation of asset-based approaches through case-study examples of how asset-based approaches have been embedded in service delivery. A number of enablers and constraints to embedding asset-based practice are discussed: including power and control, leadership and management style and organisational cultures. Questions are also raised as to what constitutes 'evidence' in legitimising the approach. This report will be published in the New Year and an event is being planned to launch the report and discuss and share the findings. A related Briefing Paper is in preparation.

Journal articles

25. IN PRESS: Lisa Garnham. Public health implications of four decades of neo-liberal policy: a qualitative case study from post-industrial west central Scotland. *Journal of Public Health*.
26. IN PRESS: David Walsh, Gerry McCartney and Dermot O'Reilly. Potential influences on suicide prevalence in comparisons of UK post-industrial cities. *Public Health*

Media coverage

27. The payday lending Briefing Paper attracted a front page article by Helen Puttick, Health Correspondent at the Herald: "*Payday loans blamed for increase in mental illness*". The Herald also ran an associated commentary piece. The Briefing Paper was also covered by Scottish Housing News.
28. The excess mortality synthesis continues to attract widespread interest. A Guardian interview with Naomi Eisenstadt linked to the report; Clare Bambra's new book discusses the GCPH work and quotes the excess mortality policy recommendations; BBC Scotland's inequalities week referred to the report and quoted some of the findings, and Alison Thewliss MP (Glasgow Central) commended the report in parliament: "*I commend to the House the recent report by the esteemed Glasgow Centre for Population Health, 'History, politics and vulnerability: explaining excess mortality in Scotland and Glasgow', which seeks to explain why Glaswegians continue to die younger than they should. The policy of this Government and of previous Governments has a lot to answer for, and we must not make the same policy mistakes now.*"
29. In response to the latest National Records for Scotland report on life expectancy trends, the *Evening Times* contacted Bruce Whyte who was quoted in their article (1 December 2016).
30. The Centre supported BBC Scotland's week long 'equalities' feature which ran across television, radio and web. The lead producer Rebecca Wearn met with the Acting Associate Director and Communications Manager to shape the approach to discussing health inequalities and get assistance in negotiating access to community groups through the Neighbourhood Change study and to the Deep End network. Centre work was highlighted in in BBC news article associated with the 'Inequalities' feature: <http://www.bbc.co.uk/news/uk-scotland-38003373>
31. The joint GCPH/WWS report on participatory budgeting was launched at the International Participatory Budgeting conference in September.

It was also mentioned in Third Force News article online: “£100m for the citizens of Glasgow to spend how they chose” and in The National: "Shona Craven: Can a dose of people power drive the change we need?"

32. Centre work was highlighted in Sunday Herald article “*Forget about the big society, focus on the people next door*” (27 November 2016).

Social media and website

33. The number of people following the Centre’s Twitter account continues to increase at a rate of around 2-3 per day (currently standing at 3,105 followers).
34. Activity during Challenge Poverty Week (the publication of the Cost of the School Day briefing paper and the accompanying blog by CPAG; the publication of the GoWell briefing paper on food banks, accompanying infographic and media coverage; and the promotion of the refreshed theme 3: poverty, disadvantage and the economy web pages and quote infographics) earned 202 engagements (retweets, quotes, likes and retweets) and twelve additional followers. This demonstrates the usefulness of promoting and linking the Centre’s work during and into these types of national or international awareness campaigns.
35. A total of 20,416 ‘unique users’ visited the GCPH website, and 23,142 visited the Understanding Glasgow website, between April to October 2016. These figures represent an increase of 22% and 10% respectively compared with the same period last year: Web stats are also available for individual pages and for the first time this year film downloads. These can be useful metrics in helping to assess the Centre’s reach and look at, for example, which publications and blogs proved popular online and whether our filming of the seminar series is a well-used resource.

Consultations

36. We continue to respond to consultation requests that are within the scope of the remit of our work. Responses since August include the Centre’s contributions to *A New Future for Social Security Consultation on Social Security in Scotland*. This was informed by engagement with broader partners through attendance at a consultation event run by the Scottish Public Health Network. The response was also aligned to Corporate Inequalities Team and conversation with What Works Scotland. The team also submitted responses to the Scottish Government consultation on the Child Poverty Bill for Scotland and Glasgow City Council’s Housing Strategy for 2017-22.
37. The Centre will be contributing the Scottish Government’s Consultation on New National Health and Social Care Standards through Glasgow City HSCP’s submission.

Funding decisions and new bids

38. The application led by Kenneth Thompson of Allegheny County (which contains the city of Pittsburgh) to the Robert Wood Johnson Foundation has been funded and will support study visits between Glasgow and Pittsburgh. Value of grant \$240,000.
39. The Robert Wood Johnson Foundation has also gifted the Centre \$10,000 which will be administered through NHSGGC’s endowment fund infrastructure. This follows an input to their Board visit to Scotland in July.

40. A Right Here, Right Now II funding bid has been submitted to the Chief Scientist Office. Stage II will work with three organisations (Glasgow Life, the Poverty Leadership Panel and Sustainable Glasgow have provided Letters of Support) around a particular focus area: food, mental health and wellbeing; and poverty and inequalities. Decision imminent.
41. GoWell sponsors have indicated a willingness to consider a proposal to extend funding beyond the current period (to April 2017), and are identifying their priorities for further research and analysis. This feedback will inform the development of a proposal for consideration by funders in the new year.

Developments

42. This section sets out developments which are additional to the current work plan, notable updates on current work programme activity, and examples of opportunities for impact and influence.
43. Glasgow Mental Health Commission. The September update reported that GCPH would support Glasgow HSCP, NHS Health Scotland and Glasgow City Council develop the Health Commission announced by the Leader of the Council at 2015's State of the City Conference. This approach has evolved so that the Health Commission (made up of elected members, professionals in mental health and community members) will focus on adult mental health as the theme for a short-life Commission (reporting in March 2017). A key output will be a filmed resource to accompany the formal written report. GCPH is providing administrative and advisory support to the film production. Media Education have been commissioned for the work.
44. As part of her joint GCPH/ Early Years role, Fiona Crawford accepted an invitation to attend a meeting between the Scottish Directors of Public Health group and other public health leaders, Scottish Government and the Deputy First Minister. The meeting aims were: to build relationships with Scottish Government; achieve a common understanding of the main issues facing public health; and explore the role of public health and cross-organisational leadership in facing challenges. The Deputy First Minister underlined the need to build coalitions of interest and combine thinking to support the move towards prevention. He also highlighted the importance of closing the attainment gap as a major priority of the First Minister.
45. Museums Association Conference (8 November 2016). Pete Seaman presented as part of a panel session entitled "*Museums and Health: a wider view*" alongside Dr Mark O'Neill, Director of Policy and Research and Duncan Dornan, Head of Museums and Collections, both of Glasgow Life. Further meetings will take place to align the learning of Glasgow Life and the Centre around the role of cultural services in promoting health and reducing inequality.
46. The Centre will be represented on the Governance Board for the evaluation of Minimum Unit Pricing led by NHS Health Scotland's Measuring and Evaluating Scotland's Alcohol Strategy programme (MESAS). The role of the Governance Board includes agreeing the scope and areas for study for the evaluation of MUP, quality assurance of the MUP evaluation plan and advice on study design, methods, data sources and peer reviewing reports as appropriate.
47. Carol Tannahill has been appointed as a Trustee of the Joseph Rowntree Foundation and Joseph Rowntree Housing Trust. This will help to strengthen links with Scotland, and will also bring to the Trustee Board an enhanced focus on health and health inequalities.

Carol has also been asked to join the Group to Review Targets and Indicators for Health and Social Care, chaired by Sir Harry Burns. This Group met for the first time in early November.

GCPH
December 2016



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Budget position: month 7

Recommendations

The Management Board is asked to:

- Note the Centre's financial position for the seven months to October 2016.
 - Advise on the proposed presentation of budgets and spend
1. The budget statement shows spend to end October 2016 and projected outturn at year end. For this budget statement, and on advice of the Board, outstanding orders are also included. This shows a spend of £916,182 to the end of October 2016, outstanding orders £144, 417 leaving a projected end of year position of £1,500, 327 when core staffing (salaries) are included.
 2. On current projections this would represent an underspend of £21,821 (which is a reduction of the projected month 5 figure of 36,807). This reflects the fact we slightly overcommitted our expenditure for financial year 2016/17 on account of a historical tendency to underspend due to staff vacancies, some projects coming under budget or not developing as rapidly as anticipated.
 3. Points to note:
 - Core salary expenditure – the biggest single budget line - is broadly in line with plan. Budget implications of staffing changes over the remainder of the year will be kept under review.
 - Current low spend on some research budget lines relates to timing of invoices for committed spend.
 - The underspend anticipated in Centre Management, Admin and Running costs of £9309 includes training budgets for the team which expect to spend before year end.
 4. Programme managers are regularly asked to review their work plans and budgets and to highlight any areas where expenditure is expected to differ significantly from planned.

Liz Anderson
Pete Seaman

13 December 2016

At a Glance Midyear report

THEME	PROGRAMMES	PROJECTS	STATUS AT MIDYEAR
1.Understanding Glasgow's Health	1.Three Cities	4 CORE projects, 1 DESIRABLE	GREEN (4 projects) except iii: Amber: CORE
	2. National analyses	2 CORE projects, 3 IN DEVELOPMENT	GREEN (except iii and v. Amber: both IN DEVELOPMENT)
	3. Mortality and neighbourhood analyses	6 CORE projects	GREEN (3 projects) (except i, ii and iii; Amber: All CORE)
	4. Social capital	1 CORE project	GREEN
	5. Neighbourhood profiling	3 Projects IN DEVELOPMENT	GREEN
	6. Inequalities analyses	3 Projects IN DEVELOPMENT	GREEN
	7. Population health indicators and comparisons (Understanding Glasgow)	2 CORE projects; 1 IN DEVELOPMENT	GREEN
	8. Child Health	3 CORE projects, 4 IN DEVELOPMENT	GREEN
	9. Alcohol-related harm	1 CORE project	AMBER (CORE)
	10. National/local forums and survey groups	4 CORE Projects	GREEN
2. Urban Health	1.GoWell – ecological monitoring	5 CORE projects	GREEN (4 projects) (except elements of project v; Amber :CORE)
	2.Social Regeneration (SISTEMA evaluation and Participatory Budgeting)	2 CORE projects	GREEN (except vii: Amber: In DEVELOPMENT)
	3.Healthy Urban Environments	7 CORE projects, 1 IN DEVELOPMENT	GREEN (except vii: Amber: IN DEVELOPMENT)
	4.Healthy Sustainable food	4 CORE projects, 1 DESIRABLE	GREEN (4 projects) (except iii and iv: Amber: CORE)
	5.Health Impact of Events	2 CORE projects	GREEN
	6. Understanding Glasgow(including Glasgow game)	4 CORE projects	GREEN
	7.Sustainability, transport and travel	5 CORE projects, 5 IN DEVELOPMENT	GREEN (8 projects) (except iii and iv: Amber: CORE)
3.Poverty, Disadvantage and the Economy	1.Early years	3 CORE projects, 2 IN DEVELOPMENT	GREEN 3 projects (except project vi: Amber IN DEVELOPMENT) (except ii: Red: CORE)
	2. Adult years	3 CORE projects, 4 IN DEVELOPMENT	GREEN (except vi. vii and viii: AMBER: IN DEVELOPMENT)
	3.Older years	2 CORE projects	i Red : CORE ii Amber: CORE (both due to capacity issues after staff change)
	4.Right Here, Right Now	CORE project	GREEN
	5.Strategic Monitoring and development	1 CORE project, 3 IN DEVELOPMENT	GREEN (except i: CORE and iv; IN DEVELOPMENT)
4.Asset Based Approaches and Resilience	1.Creative approaches and methodological developments (AHRC)	2 CORE projects	GREEN
	2.Resilience for public health	7 CORE projects	GREEN (4 projects) AMBER (in particular ii, vi and vii: CORE) NB staff

			change
	3. Neighbourhood change (peer research)	3 CORE projects	GREEN
	4. Animating Assets	2 CORE projects	GREEN 1 project (except 1 Amber:)
	5. Asset based health and care services research	1 CORE project, 1 DESIRABLE, 2 IN DEVELOPMENT	GREEN (except v and vi : IN DEVELOPMENT)
	6. Social enterprise as a public health intervention (Commonhealth)	2 CORE projects	GREEN
	7. Exploring assets & resilience through play	IN DEVELOPMENT	GREEN (except iii: IN DEVELOPMENT)
	8. Culture and Health	1 CORE PROJECT, 1 IN DEVELOPMENT	GREEN

Criterion for whether cells are coloured 'Amber' or 'Green' is whether projects are 'core' or 'in development'.

Criterion for cell coloured 'red' is poor likelihood of 'core' project being taken forward by year end.



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Midyear Report 2016/17 Cover Paper

Recommendations

Board members are asked to:

- Note progress to date against the 2016/17 work plan, and advise on elements of project 'status reports' brought to their attention
- Consider any areas on which additional focus is requested
- Advise on emerging priorities and opportunities which the Centre's next work plan could contribute to and support

Introduction

1. This report is an overview of progress against the 2016/17 work programme (Board paper 219) at the six month point (October 2016). The midyear report is a core part of GCPH governance processes to ensure that the Management Board is satisfied with progress. The format of the report takes account of feedback and suggestions from both the EMT and the Board.
2. A detailed update on each programme and project is provided in Annex 1 in tabular form and is supplemented with an 'at a glance' summary table. To provide a navigable structure to the volume of project work within the Centre's work plan, individual projects sit under programmes of work which in turn sit in the Centre's four themes (*Understanding Glasgow's Health; Urban Health; Poverty, Disadvantage and the Economy; and Asset-based Approaches and Resilience*). Within each Theme, projects are designated as 'Core', 'In Development' or 'Desirable'. Feedback from our partners in the past has highlighted the need to protect time for developmental work if the Centre is to maintain its role and purpose in facilitating the exchange of ideas, fresh thinking and debate. More recently, we have also been asked to reflect on the relationship between 'core' and developmental pieces of work. The Board development sessions in December and February will provide scope for further reflection here. Projects in the 'Desirable' category are subject to resources and partner priorities.
3. Alongside the outputs achieved through the delivery of projects within the work plan, we also devote time and commitment to working alongside partners in a responsive manner. This means our annual work plans do not capture the full extent of our work across the year. The section on 'new and responsive work' attempts to draw together work underway which may shape activities contributing to the 2017/18 work plan. Often our role is in facilitation, fostering a futures orientation and supporting fresh

thinking. It is often most powerful and relevant when it is more emergent and developed as a result of existing and new relationships and collaborations.

Strategic context for the work plan

4. The work plan for 2016/17 was developed and agreed in response to our partners strategic priorities, key dimensions of which were understood at the time as:
 - The full establishment of Glasgow City's Health and Social Care Partnership
 - Glasgow City Council's continuing commitment to tackling the root causes of poverty and refreshed poverty, economic and housing strategies
 - A climate of financial tightening among statutory and third sector partners
 - A focus on transformational change
 - The Scottish Approach to Government
 - The Public Health Review

5. Our programmes of work have continued to support these priorities through identifying approaches and actions which shift delivery of services rather than new interventions. Contributions include publication of new syntheses in the six months to October including on excess mortality and early years, children and young people – with an active travel synthesis to follow. We have continued to support key strategic priorities in the city through provision of evidence to the anti-poverty and resilience strategies and developmental support for aspirations of closer working between the HSCP and partners (for example the city Mental Health Commission and Health Scotland). We also continue to engage with the Public Health Review process, making the case for evidence-informed policy and practice and the necessity for multi-agency approaches in tackling the root causes of poverty, inequality and poor health.

Staffing

6. The reporting period commenced with the departure of the Associate Director (Lorna Kelly) and an increased time commitment to the Scottish Government by the Director (Prof Carol Tannahill). An interim Associate Director was appointed in July (Dr Pete Seaman) after a competitive internal recruitment process. Over the first half of the year, the shift in role of Dr Seaman (from a full time Programme Manager on Theme 4), a number of posts being temporarily vacant and maternity leave established capacity challenges in Themes 3 and 4. These are reflected in the reporting of project delivery in the Thematic updates. The second half of the year promises to see the team closer to full capacity subject to security of funding.

University of Glasgow's East End Research Hub

7. Our August 2015 move to the Olympia Building was a significant development, enabling exploration of opportunities for academic and community collaboration. Successful collaborations have included:
 - a new collaboration between the GCPH, the Robert Owen Centre and What Works Scotland to establish and evaluate a children's neighbourhood;
 - support for Clyde Gateway through evaluability assessment of the health impacts of regeneration;
 - co-hosting a post to promote the Hub among the University and communities in the east end and;
 - securing a Lord Kelvin/ Adam Smith doctoral scholar to study community centres' roles in social regeneration locally;

- The ESRC Festival of Social Science at the Barras market, which saw GCPH commission a film to promote public understanding of the role of social science. We continue to embed community participation into our core business of evidence generation.

New and responsive work

8. Alongside the Social Research Hub activity, the establishment of new work continues with our core and wider partners. Some of these will necessitate additional contribution from team members for the second half of the year. The pathfinder programme funded by Big Lottery will support the exploration of innovative practice in child care in support of the city-wide early years strategy. The GCPH contribution is written into the grant as evaluation support. The Children's Neighbourhoods work will also necessitate contribution from a Programme Manager. If successful, bids with the Robert Wood Johnson Foundation (to explore practice around health inequalities and resilience in Glasgow and Pittsburgh) and a further stage of Right Here Right Now (bid in with Chief Scientist Office) will both require additional contribution from the Associate Director.
9. Our partnership with NHS Health Scotland and MRC/CSO SPHSU has seen the emergence of a collaboration to conduct a systematic review of income and health inequalities and two pieces of work with Edinburgh University: public perceptions of health inequalities and further early years research. The evaluability assessment of Clyde Gateway has been important in supporting the emerging understanding of how the health impacts of physical and economic regeneration are assessed. It is likely this will develop into a full evaluation with GCPH required to agree its level of involvement.
10. The Health Commission support group established by Glasgow City Council and involving NHS Health Scotland, NHSGGC and Glasgow City HSCP has provided an opportunity for GCPH to contribute expertise and support. The Centre has also provided support to the development of the Public Health Evidence Network (comprising MRC/CSO SPHSU, NHS Health Scotland, Scottish Collaboration for Public Health Research and Policy, NHS Health Information Services) and this will require an on-going contribution during 2017.
11. We now regularly contribute to consultation requests from Scottish Government and Glasgow City Council when they conform to our criteria for response. In the first half of the year the Centre has compiled and submitted responses to the Community Empowerment (Scotland) Act 2015, Child Poverty Bill, and Scottish Government Consultation on Social Security in Scotland. Glasgow City Council's Housing Strategy for 2017-22 also received an official GCPH response and we look forward to contributing to its development further.
12. Next steps in existing and new programmes of work will be developed over the coming six months within a broader period of priority setting within the GCPH and a changing partner context. It remains important that our work plan develops in a manner which is responsive to partner needs while allowing room for GCPH leadership and fresh thinking.

Thematic updates

The following section summarises key areas of progress which can be found in finer detail in the reporting matrix in Annex 1. A summary and account of projects which

are behind schedule or have changed direction (identified elsewhere through a Red/Amber/Green reporting system) are provided as 'status reports'.

13. Each project has been designated a traffic light colour to denote whether it is on schedule (green), behind schedule or has changed direction significantly (amber) or is causing concern to the delivery of the centre's core programme of work (red). There can be various reasons why projects are delayed, ranging from capacity in the Centre to dependence on partner contributions or a change in direction over the course of a year. Indeed, at midyear, we would expect a number of projects to be behind schedule as progress is not uniform across all projects over a six month period. To highlight areas where additional attention or key decisions need to be made at the 6 month period, a red indicator is used. The 'at a glance' summary table is used to allow consideration of the status of programmes and not just individual projects. In designating elements of programmes as green, amber or red we use the criteria of (i) whether the delayed/changed work is 'core' or 'in development' (the latter being considered less serious to core delivery and reflecting a degree of programmed 'stretch' in work planning) and (ii) the likelihood of work running to schedule by year end.
14. **Theme 1: *Understanding Glasgow's Health***. Activity has continued to generate and disseminate analyses to build a comprehensive understanding of health and support commitments to tackle root causes of health inequality. The year began with the synthesis report on excess mortality, a high profile feature of the Centre's work plan and profile. A substantial and intensive dissemination strategy (going beyond usual expectations in terms of responding to ad-hoc requests as well as planned presentations) has followed and will continue into 2017. Work in this Theme has also supported the growing interest in understanding how adverse childhood experiences (ACEs) influence health outcomes across the life course, with a published paper on the relationship with excess mortality. This analysis will provide a foundation for future collaborations and activity in the city in responding to ACEs. Support for action in the early years is also provided by the development of the children and young people's profiles, collaborating with Police Scotland, the Scottish Children's Reporter and the Urban Big Data Centre. Impact from these neighbourhood level profiles is progressed by a set of evidence for action briefings. As they become used, an evaluation of the evidence for action briefings will be required. Links to the Public Health Evidence network will support this ambition.
15. Status reporting: Most programmes within Theme 1 are on schedule, as anticipated at the start of the year. The exceptions are collaborative projects where the team is awaiting analysis by partners and expected to be resolved by year end and those delayed by staffing issues. The Alcohol programme in Theme 1 is delayed in relation to partner input which is expected to be delivered by the end of the reporting year. Recruitment of a Public Health Research Specialist to work on indicators, and a joint statistical post with MRC/CSO SPHSU, will enhance the Theme's progress in the second half of the year.
16. **Theme 2: *Urban Health***. This Theme continues to describe the social, economic and physical environmental impacts on health and wellbeing and develop partnerships for action and change. In relation to disseminating existing evidence, an active travel synthesis has been developed which has expanded in scope to include work beyond GCPH. This is due for publication early in the second half of the year. The Theme has also contributed a section (on 'Transport') to a report produced by Cleaner Air for Scotland to support civil servants drafting the next climate change plan. The Weathering Change project exploring climate resilience in communities in the North of Glasgow continues to engage with residents and stakeholders in North Glasgow

informing the work of Land and Environmental Services and indirectly supporting City Deal related developments through Council links.

17. The programme of work exploring action to support sustainable food production continues after initial successes in setting the direction of the Glasgow Food Policy Partnership. Following up on the establishment of the group will be a key dimension of work in 2017. A literature review on the expected health impact of taxation on sugary food and drink has been completed and dissemination (including through a briefing paper) is being planned.
18. Status reporting: Most programmes of work within this theme are being delivered in accordance with anticipated progress. Exceptions include a change of direction on the work planned to report on the relationship between regeneration and health inequalities, using the learning from GoWell. A draft paper was completed, however due to data and measurement issues the conclusions were limited. A series of recommendations for future analysis and research were produced for internal use. Indicators work has been delayed by reduced analytical capacity which should be ameliorated by the staffing developments listed above (Theme 1). Other delays are due to data availability and the extended scope of the active travel synthesis.
19. **Theme 3: *Poverty, Disadvantage and the Economy***. Theme 3 continues to provide evidence and support for key strategic priorities among our partners encompassing the early years, adult years, welfare provision and employment services, later years and evidence to inform practice. Progress in this Theme has been good, particularly given the reduced staff capacity associated with Greig Inglis' and Lorna Kelly's departures in June. Influential areas of progress include informing the city's anti-poverty strategy through the cost of the school day work and the follow-up cost of the school holidays. The additional funding from the Joseph Rowntree Foundation for the continuation of the Building Connections demonstration work is evidencing and supporting improvement in practice to support people far from the labour market through pathways to employment. The work fosters collaboration between Jobcentres and third sector service providers and evidences new ways of working within Deep End practices. Reports on the Deep End learning (towards improving partnership working between primary care and money advice services) and a literature review of the health impacts of Pay Day Lending have been key milestones. The submission of the Right Here, Right Now part 2 application, if successful, will support the development of evidence collection and use in the 2017/18 work plan.
20. Status reporting: Work which is not progressing as anticipated includes a descriptive paper from Healthier Wealthier Children (delayed due to partner capacity) and analysis of survey data available on young people of carers (analytical capacity). An 'in development' project exploring the implications for low income families of the rise in private rented housing has not been progressed and a decision will be taken as to whether the Theme still has the necessary expertise or capacity to develop this. A Briefing Paper on alcohol use in the later years will follow in 2017. A priority of this Theme for the remainder of the year is the work on social protection to be delivered through post-graduate internships in collaboration with University partners.
21. **Theme 4: *Asset-Based Approaches and Resilience***. The programmes of work located in this Theme continue to influence new and emerging forms of practice and policy. The work on asset-based approaches has developed a national profile for informing service and practice development. A recently completed report communicates findings on the impact of such approaches in relation to health and wellbeing. The collaboration with the Yunus Centre at Glasgow Caledonian University (funded by a Medical Research Council programme grant) is also

premised on new forms of research and practice. This work is evaluating social enterprise as an intervention to house vulnerable young adults. An evaluability assessment has been completed and data collection is underway. Support for the city resilience strategy continues (launched in September 2016) with GCPH contributing to the design and delivery of an indicator stakeholder workshop. The inclusion of the indicators on the Understanding Glasgow website is on course for early 2017. Work also continues with Glasgow Life in assisting in the development of a research agenda around culture and health.

22. Status reporting: One of the Theme's two Programme Managers has been acting-up in the role of Associate Director since July 2016. The substantial additional workload has seen some projects highlighted as 'amber' in the tabular report. Of particular priority for the remainder of the year will be work nurturing leadership through early years and teaching. The evaluation of 'play' in relation to public health outcomes has also been set back due to absence (a health psychology trainee).

Communications

23. Regular communication updates are provided to the Management Board and EMT as part of the general update papers. This section highlights key activity and metrics over the last six months, not already covered in theme reporting.
24. The *publications* listed throughout the Theme reports over the past six months demonstrate the range of outputs being produced from across the Themes including syntheses reports, specific project reports, briefing papers, consultation responses and peer reviewed journal articles. Summary leaflets on the Centre and on each of the synthesis reports have recently been produced. These are proving useful resources for meetings and disseminating at seminars and conferences and have the benefit of costing much less to print and transport than the full reports.
25. *Events and seminars* supporting dissemination of research and the exchange and debate of fresh thinking and learning from elsewhere have also been reported in Management Board and EMT general update papers and indicated throughout Theme reporting. In addition to these GCPH events and seminars and team contributions to seminars and conferences, the communications team actively tries to identify opportunities to display GCPH material and engage with delegates at national events and conferences. Over the past six months these have included the annual NHS Scotland Conference, the annual PHINS seminar and the Scottish Government 'Evidence week' in Edinburgh and Glasgow.
26. We continue to take a considered approach to *media coverage*, reserving media coverage for new findings that are particularly newsworthy or topical. Over the past six months this approach has resulted in media coverage of the excess morality synthesis in several different news outlets, the public health implications of payday loans featuring on the front page of the Herald and the GoWell briefing paper on food banks featuring in the Herald. The team also continues to respond to requests from journalists to comment on health and life expectancy, and health inequalities in general.
27. Alongside supporting the team's communication and dissemination of research through publications, events/seminars, and traditional media, the communications team continue to use online media to raise awareness of and promote the Centre and develop new ways of engaging people with our work. This includes the use of infographics to summarise and visualise data content and highlight key findings, the

use of blogs to add interpretative or commentary type content to our website and the use of Twitter to link the Centre's work in wider conversations and debates.

28. A total of 20,416 'unique users' visited the GCPH website, and 23,142 visited the Understanding Glasgow website, between April to October 2016. These figures represent an increase of 22% and 10% respectively compared with the same period last year: Web stats are also available for individual pages and for the first time this year film downloads.

These are useful metrics in helping to assess the Centre's reach and look at, for example, which publications and blogs proved popular online and whether our filming of the seminar series is a well-used resource. Page views for the three syntheses reports from publication to now are provided below:

- Excess mortality synthesis – 3,821 unique page views (since May)
- Social contexts synthesis – 726 unique views (since February)
- Early years synthesis – 1,145 unique views (since September)

29. The number of people following the Centre's *Twitter* account continues to increase at a rate of around 2-3 per day (currently standing at 3,135 followers). As well as using Twitter to promote and share new research from the Centre, increasingly we are using it to promote existing content to relevant audiences and link the Centre's work into wider conversations and debates and increasing our reach. For example, our activity during Challenge Poverty Week earned 202 engagements (retweets, quotes, likes and retweets) and 12 additional followers. While the promotion of the early years synthesis and accompanying infographic earned 757 engagements and seven additional followers.

30. The use of *blogs* on the Centre's website helps provide a balance for the site's research and data-heavy content, adding interpretation and commentary. This has included an increase in the use of guest blogs relating our work to the wider context. These have proved popular in terms of viewing rates. Blogs focussing on methodologies, our public health films and most recently a range of 'myth busting' blogs have been developed with strong page view rates. For example the 'myth busting' blog on 'Life expectancy in Calton – no longer 54' is the most viewed blog on our website to-date (1,456 unique views). As well as providing engaging content, the quality of blogs on our website also appear to be well recognised and our blogs have recently been nominated for the annual UK Blog Awards in the health and social care category. The winners are due to be announced in December 2016.

31. The communications team is currently conducting a review of the existing communications strategy as part of the process of developing a new strategy for the next phase of the Centre. This is in line with the overall process of review and forward planning the Centre is conducting as it enters its next Phase. Further detail of this is provided in the 'Communications strategy refresh' paper.

Conclusion

32. The midyear report highlights areas of progress and draws attention to emerging new projects in response to partner-led opportunities. These have implications for capacity, particularly when taking account of 'in development' or 'desirable' components of the work plan which have not progressed. We welcome advice on managing the balance of delivery for the remainder of the year.

33. The second half of the year will also see the Centre entering its planning phase for future activity. All elements of the Strategic Context which set the operational background of the year look to remain 'live' over the next six months with the implications of the Public Health Review a key uncertainty. It is important that the Centre is not only seen as responsive to partner needs but that the work plan resembles a coherent whole including leadership in fresh thinking and new ways of working. We will continue to engage with the Board and EMT for guidance on maintaining this balance.

Pete Seaman
November 2016