



**Glasgow Centre for Population Health
Management Board Meeting
Monday 12 June 2017**

General Update

Recommendations

The GCPH Board is asked to:

- Note and discuss this update on progress since the last Board meeting on 11 April 2017;
- Identify any developments and priorities in their own areas that are of potential significance for the Centre.

Governance and forward planning

1. Scottish Government has confirmed funding of £1.25 million for the GCPH for the period April 2017- March 2018. This has enabled Notifications of Change to be issued to extend contracts for core GCPH staff for a one year period. Following the discussion of the Community Engagement Strategy at the April Board meeting, we are also moving to transfer the GoWell community engagement post to work across the Centre more broadly. The stability provided by written confirmation of funding allows the completion of the work planning process already started with the team and Board (see Board Paper 337).
2. GoWell has received funding for 2017-18 totalling £108,000, from Scottish Government and NHS Health Scotland. This funding will support further analysis of GoWell data, carried out at the University of Glasgow.
3. Following the May Council elections, we are awaiting news of representation of elected members on GCPH Board. We also plan to co-ordinate a session for elected members after the summer recess. Individual contacts have also been made by/with some elected members already including Cllr Anna Richardson regarding the work of Glasgow Food Policy Partnership and her role as City Convener for Sustainability and Carbon Reduction and Cllr Jennifer Layden in relation to her role as City Convener for Equalities and Human Rights.

Outputs and activities

4. 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, publications, media and communications activity.

Events and seminars

5. Seminar Series 13: Lecture 6. Annie Warburton '*Can do – flourishing in the 21st century*'. The Lighthouse, 25th April 2017. Annie Warburton is Creative Director at the Crafts Council, where she leads on exhibitions, education, innovation and research. Drawing on recent research on learning-through-doing, and on projects that bridge craft and health, this lecture explored what craft contributes to wellbeing. A total of 97 people attended the event, many of whom were new contacts from community craft projects. A follow-up seminar the next morning with 20 people continued the discussion from the seminar.

Centre contributions to external events

6. 21st April, Dr Jennifer McLean presented background, theory and the Centre's learning on asset-based approaches to the staff and Board of Cassiltoun Housing Association at their annual Business Away Day. Cassiltoun Housing Association and Community Trust are one of the service case studies included in the recent asset-based approaches publication, *Striking a Balance*. Dr McLean and Valerie McNeice also contributed to an asset-based approaches event in Leeds organised by the 'Minding the Gap' health inequalities programme in partnership with Wakefield Council (3rd May). Drawing on the *Striking a Balance* research, Dr McLean presented on 'Asset based approaches for health and wellbeing: redressing the balance' and Ms McNeice designed and delivered a conference workshop to explore assessing the value of asset-based approaches in practice.
7. The Head of Children & Family Services, Cornwall Council visited Glasgow for a fact finding visit on 20th-21st April to learn from the Healthier, Wealthier Children project with a view to implementing the model across Cornwall, and to learn about collaborative efforts to tackle child poverty across Greater Glasgow. Hosted and organised by James Egan and Lynn Naven, the visitors received presentations on and discussions of the Cost of the School Day/School Holiday projects, Glasgow's children's indicators, lone parent work, and the role of the Poverty Leadership Panel. The visitors were impressed with the integrated and shared approaches adopted across Greater Glasgow, and were particularly interested in the role that the GCPH and other public health partners played in tackling child poverty. The visitors are keen to maintain contact and are considering how this learning could be applied within a Cornish context.
8. 22nd April. *The Deep End Advice Worker Project: Embedding an Advice Worker in General Practice*. Calton Heritage and Learning Centre, presentation on data, learning and themes emerging from embedding an advice worker within two Deep End GP practices. Approximately 50 people attended, including representatives from the Scottish Government's Social Security Agency, Glasgow City Council, the NHS and various third sector partners.
9. 25th April. Carol Tannahill chaired a roundtable on Adverse Childhood Events, organised by the ACE hub as an opportunity to learn from a range of services about how ACEs are and could inform their services. Participants, drawn from across Scotland, came from different service sectors all of which are dealing with the consequences of ACEs. The intention is to produce a report that will help to shape a Scottish response to what we know about ACEs.
10. 10th May. Dr Lisa Garnham presented findings from the Neighbourhood Change project to Glasgow City Council's Development and Regeneration Services to assist in the framing of recommendations ahead of publication.

11. 12th May. Pete Seaman delivered a presentation and workshop on the invitation of University of Uppsala, Sweden on the topic of *sustainability, resilience and public health* to the Skaraborgsinstitutet, a multi-disciplinary research centre in Skaraborg, Sweden.
12. GCPH will have a stand at the annual NHS Scotland event at the SEC on 20th-21st June to showcase relevant work. The focus of this year's event is on 'working differently across boundaries transforming health and social care'. Jennifer McLean has had a poster abstract accepted: *Striking a balance: asset-based approaches in service settings*.
13. 24th May. *Scottish Transport and Applications Research Conference*, Glasgow. Karen Macpherson presented on 'Developments in cycling infrastructure and provision in Glasgow: an analysis of impact', her talk being well attended.
14. 25th May. Chris Harkins gave a Sistema Scotland evaluation presentation to the Gannochy Trust in Perth. There was an overview of findings to date and discussion as to how the Trustees might use the GCPH seven principles for social regeneration in assessing their community-based grant applications.
15. Presentations on *History, politics and vulnerability: explaining 'excess' mortality in Scotland and Glasgow* continue to be delivered by David Walsh including Royal College of Physicians of Edinburgh Symposium: Public health in a changing world' (31st May), NHSGGC 'Area Partnership Forum' (24th May) and Glasgow University Institute of Biodiversity, Animal Health & Comparative Medicine (28th April).

Forthcoming Events

16. 29th September 2017, *Public Health Information Network Scotland (PHINS) Conference*. Glasgow Royal Concert Hall. Dr David Walsh and Mr Bruce Whyte are part of the organising committee for the annual PHINS conference. Themes explored during this year's event will include 'new insights into health and health in inequalities in Scotland' and 'actions to address health inequalities in Scotland.' Speakers include Katherine Trebeck of Oxfam GB; Diane Stockton, NHS Health Scotland; Ian Grant, ISD Scotland; Sarah Curtis, Durham University; John Reilly, University of Strathclyde; Clare Bamba, University of Newcastle; Jeff Collin and Kat Smith, both University of Edinburgh. Areas of interest include: Scotland's Burden of Disease and implications for planning; mental health, recession and implications for public health policy; physical activity and obesity and; lay understandings of health inequalities.

Publications

The prolonged period of purdah leading up to Council and then General Elections means there have been fewer published outputs over the last two months. Two to note are:

17. Following an invitation ahead of purdah, the Centre authored a piece for a special edition of *Holyrood* magazine, marking the first birthday of the Holyrood baby, Kirsty. This fictional baby and campaign was developed as a conduit to look at policy and other actions in terms of 'real' people. Valerie McNeice authored the piece drawing on the policy recommendations drawn up ahead of Council elections and what they might mean for a one year old child such as the fictional Kirsty and her mum growing up in deprived circumstances in Scotland. The article covered research findings on the economy and employment; early years; poverty; neighbourhood environments; social contexts; and approaches to improve outcomes.
18. The report 'Traffic and Health in Glasgow' (the M74 study) was published by NIHR in May. No publicity is planned until after the general election, however the research team

alerted key stakeholders (Transport Scotland, Glasgow City Council, South Lanarkshire Council) in case of media interest, which has not followed. The research finds inequitable impacts of the M74 completion for those in deprived communities without access to a car and those with chronic health conditions. Later in the Summer/Autumn knowledge translation events will take place incorporating study findings and community engagement.

Forthcoming publications

The following outputs are scheduled for the end of the current purdah period:

19. *Evaluating Sistema Scotland – Big Noise Torry Executive Report* (June 2017), by Chris Harkins and Katie Moore. This report presents findings from an initial evaluation of the third Big Noise centre, within Aberdeen City. The work informs the GCPH long-term evaluation of Sistema Scotland. The report is based on extensive fieldwork from June to December 2016 and will be published in June 2017 after the local and national election purdah periods. Media coverage in local press is being co-ordinated by Sistema Scotland.
20. *Clyde-sider applicant journeys: Findings from a two year follow-up survey* (Summer 2017), by Gregor Yates and Russell Jones. This report summarises findings from a survey of Clyde-sider volunteer applicants two years after the Glasgow 2014 Commonwealth Games. The survey was the third to be issued to applicants as part of a longitudinal study of the impact of the official volunteering programme. In contrast to past big event research, this study has captured learning relating to those who were selected and those who were not.

Findings are presented in relation to four key legacy outcomes: skills used since the games; volunteering behaviour; social connections; and personal legacy. Findings reveal a positive picture in terms of the impact on Clyde-sider volunteers, although significant differences were found in relation to outcomes by area and age. For those who were not selected, outcomes were less positive, although increases in subsequent volunteering behaviour were found.

21. *The Deep End Advice Worker project: Embedding an advice worker in general practice settings* (June 2017) by Jamie Sinclair. This presents findings from an action research study to understand how delivering advice in general practice settings impacts practice staff and people engaging with the service to develop replicable approaches. This will be press released and therefore some media coverage is anticipated.
22. *Parenting support: exploring the current landscape in Greater Glasgow and Clyde* (July 2017) by Rona Dougall (NHSGGC), Valerie McNeice, Fiona Crawford. This report presents findings and recommendations from qualitative research conducted in late 2016 that explored key informants' views on the delivery and impact of parenting support programmes across Greater Glasgow and Clyde. It builds on earlier work that focused on parenting support in the Glasgow city area, published in November 2016. The findings from both of these reports are intended to inform the development, future prioritisation, planning and delivery of parenting/family support across Glasgow City and the Greater Glasgow and Clyde region.
23. *Exploring neighbourhood change: Life, history, policy and health inequality across four Glasgow communities* (Summer 2017) by Lisa Garnham and Pete Seaman. This reports the findings from a research project that explored residents' lived experiences of four parts of Glasgow: Easterhouse, Drumchapel, Anderston/Finnieston and

Bridgeton/Dalmarnock, examined through the lens of the past, present and future to understand more about why city-wide trends play out differently at the local level. Data were collected primarily by peer researchers (people without a research background who lived, worked or had some connection to one or more of the study areas) and supplemented through 'key informant' interviews and secondary data analysis. A number of outputs are being developed to disseminate the findings from this study – a research report; policy briefing; and a short summary for the peer researchers and communities involved.

Journal articles

24. Foley L, Prins R, Crawford F, Humphreys D, Mitchell R, Sahlqvist S, Thomson H, Ogilvie D, on behalf of the M74 study team. Effects of living near an urban motorway on the wellbeing of local residents in deprived areas: Natural experimental study. *PLoS ONE* 2017.
25. An article from the Sistema project published in *Journal of Public Mental Health* has been selected by the journal's editorial team as the Outstanding Paper in the 2017 Emerald Literati Network Awards for Excellence. Harkins C, Garnham L, Campbell A, Tannahill C. *Hitting the right note for child and adolescent mental and emotional wellbeing: a formative qualitative evaluation of Sistema Scotland's "Big Noise" orchestral programme.*

Consultation responses

26. We will be submitting a response to the GCC Development Plan – supplementary guidance consultation (Placemaking; Economic Development; Green Belt and Green Network; and Delivering Development). These are being developed to support the newly adopted Local Development Plan and will provide more detailed policy guidance and form the basis for making decisions on planning applications in the city. The GCPH response is being co-ordinated by Gregor Yates.
27. The Centre will also respond to Public Health Shared Services Review – Public Health Intelligence work stream consultation to support the co-ordination and delivery of PHI in Scotland. Response through an online survey.

Media coverage

28. Lisa Garnham's PhD work on Clydebank (work from UWS, not GCPH) featured in *Sunday Herald*: 'The Scottish town that's become a crucible for our modern social ills' (02.04.17).
29. Bruce Whyte interviewed in Gaelic by *BBC Radio Nan Gaidheal* in lunchtime slot on physical activity (05.04.17).
30. Jennifer McLean and Valerie McNeice were interviewed for a podcast hosted by Andrew Strong of the Alliance: "Podcast: Emphasising Humanity – Asset-based approaches: The first step to transformation" (16.05.17).

Social media and website

57. 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 3,404 followers).

58. **Headline website and Twitter analytics for the financial year 2016-17:**

Main GCPH website visitors: 35,436 (a significant 20% increase on previous year)

Understanding Glasgow website visitors: 42,117 (an 8% increase on previous year)

As of 31st March 2017 the GCPH had 3,356 followers on Twitter – a 30% increase on the previous year.

For the year 2016-17 the GCPH Twitter account was mentioned 3,181 times (a significant 50% increase on the previous year), the profile page was viewed 22,419 times (no comparative figures available) and 3,296 links (a significant 40% increase on the previous year) tweeted by the GCPH were clicked.

Collaboration with partners

59. The Building Connections project funded by the Joseph Rowntree Foundation will receive a funding extension of four months, enabling the project to develop its focus Springburn Jobcentre. The additional funds will be used to employ the Building Connections Programme Manager until the end of 2017.
60. Universal Credit (UC) and In-Work Conditionality. A meeting was held at GCPH on the 15th May to discuss the implications of the full transition to UC in Scotland and the extension of conditionality to the receipt of in-work benefits. Attended by representatives from NHS Health Scotland (with Martin Taulbut providing context), NHS GGC Board, Poverty Leadership Panel, East Dunbartonshire Council, Glasgow City HSCP, East Lothian Council and GCC Development and Regeneration Services. Questions discussed included how public sector employers respond to staff required to meet UC requirements. A small, short life advisory group on UC to be established and engagement and discussion will be instigated with public sector employers such as NHS Human resources around implications of roll-out.
61. Recruitment is proceeding for three doctoral student paid internships to explore the role on social protection in relation to health, the changing nature of work and employment and the potential of alternative models such as basic income. The interns will be funded by GCPH and employed through What Works Scotland. Interviews took place on 24th May. Mr James Egan and Dr Seaman will also attend a workshop on Glasgow City Council Universal Basic Income Pilot with the interns on 6th July.
62. Following the advice to contact Member Services regarding how we should engage with new and re-elected members at the last Board meeting, they have helpfully circulated an email on our behalf to all elected members providing some background on the Centre. They are also helping to co-ordinate a session for members after the summer recess. Individual contacts have also been made by/with some elected members – Cllr Anna Richardson regarding the work of Glasgow Food Policy Partnership and her role as City Convener for Sustainability and Carbon Reduction and Cllr Jennifer Layden in relation to her role as City Convener for Equalities and Human Rights.
63. The Centre has been formally invited to join Clyde Gateway's Population Health Working group with Bruce Whyte attending on 19th May. Further information was requested on the Childcare Pathfinder work and discussion of the Children's Neighbourhood's work.

Developments

64. This section sets out developments that are additional to the current work plan, notable updates on current work programme activity, and examples of opportunities for impact and influence.
65. On the back of the Building Connections work, Jamie Sinclair, Jim McCormack (Associate Director Scotland, Joseph Rowntree Foundation) and Pete Seaman met with members of the new Social Security Agency; David Wallace, Executive Director, Miriam Craven Head of Customer Service and also Carolyn Brennan (Improvement Advisor - Scottish Government – Leading Improvement Team). 20th April 2017. The Social Security Agency team were interested in exploring learning from Building Connections, which could inform the development of operations in the new agency. Areas discussed included staff training and development, service delivery processes, approaches to partnership working and co-locating services and the development of inter-agency referral processes. A further meeting is planned once an announcement has been made about the operating model of the new agency.
66. Jill Muirie who was involved in the commissioning of the Links Worker pilot evaluation whilst at Health Scotland has been exploring how the Centre can support translation of evidence to support the Link Worker programme. GCPH will have representation on the continuing Monitoring and Evaluation group (through Jill Muirie) and Advisory group (through Pete Seaman and James Egan) – to oversee the extension of the programme as it moves to a larger number of practices. Guidance and challenge are requested from advisory group members, drawing on and linking with other work and learning such as Deep End and Building Connections work.
67. Carol Tannahill continues to represent GCPH on a number of national forums. The first stage of the Burns review of indicators and targets for health and social care is nearing an end, and will report to the Cabinet Secretary in June. It is anticipated that recommendations will be made for a wider set of indicators to support a focus on population health and wellbeing. Prof Tannahill is also a member of the Disability and Carers Benefits Expert Advisory Group, which met for the first time in April. This group has been established to provide recommendations and advice to Ministers on the policy and practice options being developed in relation to the disability and carers benefits for which powers are being transferred to the Scottish Parliament. Thirdly, Prof Tannahill has been asked to join the Public Health Reform Oversight Board, which is being established by Scottish Government to oversee the next stages in establishing a new public health agency for Scotland and associated national public health priorities. This will meet for the first time at the end of June.

**Pete Seaman and GCPH
May 2017**



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Monday 12 June 2017**

**End of year report
2016-17**

Recommendations

The Board is asked:

- To note and approve the progress made in delivering the Centre's work plan to April 2017.
- To reflect and comment on the structure and content of the report and make suggestions toward continuous improvement.

Introduction

1. This report provides an overview of progress against the 2016-17 work programme as approved in Board paper 219 (June 2016). Alongside the six month report (Board paper 330, December 2016) the end of year report is a core part of GCPH governance processes to ensure that the Management Board is satisfied with progress.

Format

2. The format of this year's report takes account of the preferences expressed at the April 2017 Board meeting for a higher level update on progress over the year. During 2016-17, the Centre's work was structured into four themes made up of programmes that in turn comprised individual projects. The description of projects as '*core*' or '*in development*' was applied to distinguish key delivery priorities from more developmental work.
3. An accompanying 'at a glance' table (Appendix 1) provides a visual summary of each theme and programme with a traffic light reporting system to indicate the level of satisfaction or concern with progress. The rating of green, amber or red is applied at theme level on the basis of progress on underlying programmes, with exceptions to satisfactory progress reported in this paper. The rating is based on the following criteria:
 - Green: project complete, on track for delivery as planned, or with agreed change to plan and/ or timescale.
 - Amber: project progress slower than expected or substantially different from plan; refers also to '*in-development*' work changing direction or ceasing.
 - Red: significant delay or change to '*core*' programme or not proceeding.
4. A matrix showing the progress of individual projects (of which there are currently over 100) is available on request for Board members wishing for more detail.

Strategic context for the 2016-17 work plan

5. The work plan on which this paper reports responded to our partners' strategic priorities, key dimensions of which were understood at the time as being:
 - 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.
6. Our programmes of work have continued to support these priorities with a focus on identifying approaches and actions that shift delivery of services rather than new interventions. Since the publication of the ten year synthesis report in October 2014, syntheses of specific areas of research have been requested from partners and are used to inform partner investments (these are listed in theme updates). We have also continued to support key strategic priorities responsively through in-year opportunities to establish closer working links with Glasgow City HSCP, the Health Inequalities Commission and its focus on Mental Health, the city resilience strategy and the Poverty Leadership Panel. We also engaged with the Public Health Review, 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.
7. The University of Glasgow's Social Research Hub, in which the Centre is located, has been another important development over the past year, providing opportunities for collaborative work with the University, other partners, and the communities of the wider East End. Developments associated with this are included within this end of year report – several of which could not have been anticipated at the start of the year, but they reflect the commitment to the GCPH's role in ensuring that the potential of the Olympia development is maximised. Looking ahead, the co-location of GCPH, components of the Robert Owen Centre and (from August 2017) the Collaborative Centre for Housing Evidence (CaCHE) will further strengthen the potential of this social research hub to develop as a centre of excellence in applied research spanning health inequalities, education and housing research.

Resource and Staffing

8. The Centre's total budget for 2016-17 was £1,625,089 of which the Scottish Government allocation was £1.27million. Other significant income included £239,000 from partners for GoWell and income from the Arts and Humanities Research Council (£99,000). The largest category of expenditure is on our infrastructure (accommodation and running costs) and staffing costs, which totalled £1,082,000 in 2016-17. Core staff (total headcount of 24) include programme managers, research specialists, team administrators and communications specialists.
9. During this reporting period there was an agreed increase in the commitment to the Scottish Government from the Director (Prof Carol Tannahill; increase from 0.5 to 0.6 WTE) and an interim Associate Director was appointed in July (Dr Pete Seaman) after a competitive internal recruitment process following Lorna Kelly's move back to NHSGGC. The shift in role for Dr Seaman (from a full time Programme Manager on Theme 4), together with temporary vacancies/maternity leave, established capacity challenges in Themes 3 and 4. The consequences for delivery of planned work were evident at the point of midyear reporting, but progress has been recovered in the second part of the

year. Nevertheless, the programme manager role previously held by Dr Seaman remains vacant.

Responding to partner requests

10. As agreed as being an important role for the GCPH, the team has not only focused on planned priorities but has also worked responsively in support of partner-led opportunities to develop wider strategic priorities in the city over and above our published work plan. Such new and emerging areas are highlighted and discussed throughout the year in the developments section of the regular Management Board General Update paper. Some key developments for 2016-17 included:
- The Childcare Pathfinder work funded after the development of the 2016-17 work plan through the Big Lottery Fund: three members of the team provide evaluation capacity to the Childcare Pathfinder (subsequently 'CHaNGE'). Also focusing on the priorities of early years, wellbeing and attainment, GCPH has been central to the Children's Neighbourhoods collaboration, working with a range of partners in public, third, academic and private sectors. This involves a time commitment from the Director and one Programme Manager, and has secured portfolio funding from a range of sources.
 - A bid to the Robert Johnson Wood Foundation to fund shared learning between the cities of Pittsburgh and Glasgow was also successful. This has required responsive contributions from the Acting Associate Director and other members of the team.
 - The Centre's role in the Mental Health Commission Support group led by Glasgow City Council has required steering contributions as well as resources in the procurement of the film supporting the report.
11. The team's expertise continues to be sought for inputs including presentations, teaching, peer-reviewing and membership of steering and advisory groups. As far as is possible, these are incorporated into individual and team work plans although many new requests emerge after the completion of work plans. We are looking to formalise how we manage requests for advisory contributions to expert panels, courses and tuition through regular Programme Manager meetings.

Thematic Updates

12. This section summarises the progress of each of our four themes against their aims and objectives and work plan. It should be read in conjunction with the 'at a glance' summary.

Theme 1: Understanding Glasgow's Health

13. Theme 1 delivers the Centre's public health observatory function. The theme aims to improve understanding of the patterning and trends associated with health and its determinants, both within the city and through comparison with other places. As well as continuing to provide analyses to help partners monitor progress, outputs have a considerable influence on the framing of policy discussions about health and inequality both locally and nationally. Consideration is given to developing new means of representing data to maximise their accessibility and use. The public health data and analyses produced by the theme also play a key role in supporting the development of new work across the Centre's programmes of work.
14. Key developments during 2016-17 included the publication of the major report on Glasgow's excess mortality – *History, politics and vulnerability: explaining excess*

mortality in Scotland and Glasgow in May 2016. Dissemination included 25 presentations to key end-users of the work including Scottish Government, NHS Boards, academic researchers, the public, and public health professionals. The work was also cited in a parliamentary debate in Westminster and continues to be a source of peer-reviewed journal articles. The Centre's communications team also supported the report's launch resulting in observable impact across traditional and social media through newspaper and television coverage and blogs. By these measures, this synthesis continues to be one of our more 'popular' outputs. Feedback from partners has highlighted the importance of the work in framing the conversation around health and its relation to inequality more widely. Looking forward, there is an appetite for further engagement to explore how partners can develop responses, to this and other analytical outputs. The need to continue to support such responses is informing work planning for 2017-18.

15. New activity to inform decision making and investment has included the extension of the popular *Understanding Glasgow* web resource to include children and young people's profiles. In December 2016, 60 Children and Young People's profiles were launched for Glasgow sectors and neighbourhoods, supported by Evidence for Action briefings for each indicator. The existing *Understanding Glasgow* health and wellbeing indicators also continued to be developed with updates in year. These resources have been used to inform the interim evaluation of the South West Govanhill Housing Pilot, led by GCPH for Glasgow City Council; the Poverty Leadership Panel's Cost of the School Holidays sub-group; and by headteachers, to underpin applications for Pupil Equity Funding. An identified priority, looking ahead, is the need to allocate staff resource to continue to keep indicators up-to-date and to further develop the resilience indicators section.
16. A substantive area of progress within year across themes has been the multi-agency childcare pathfinder work (Childcare and Nurture in Glasgow East or 'ChaNGE') to evaluate innovative responses to childcare and early years support. This work gained support of the Big Lottery Fund in October 2016 on the back of GCPH contributions including the child health profiles. Analytical support will continue in the form of evaluation capacity as the work continues to October 2019.

Exception reporting

17. The 'at a glance' summary shows strong progress against all 'core' programmes with exceptions for mortality and social class analysis (note (a)) within the three-cities programme. This analysis has been delayed, awaiting contributions from partner lead. The analysis of Scottish and European mortality trends for working-age populations (note (b)) has also not progressed to the anticipated timescale. This will be reviewed in the next work plan as it will depend on the availability of new data allowing meaningful analysis.

Theme 2: Urban Health

18. This theme aims to undertake research, analysis and partnership work that supports understanding and development of policy, partnerships and practice to promote equitable access to healthy and sustainable environments. In 2016/17 the theme's scope expanded to include a stronger focus on social and cultural issues and on community engagement. Collectively, the programmes within this theme describe aspects of the physical, social, economic and cultural environments in Glasgow and how these impact on health and wellbeing. Key dimensions of activity include a focus on travel and transport, the food environment, place-making and innovative approaches to participation and intervention. Housing quality and neighbourhood change are also represented through the inclusion of GoWell in this theme.

19. Key achievements during 2016-17 include the active travel synthesis and analyses of new cycling infrastructure usage in the city, the city cycle hire scheme and of rates of walking and cycling to school. The active travel synthesis provided an opportunity to highlight new directions for the sustainable travel and transport programme for the next phase of the Centre's work to incorporate bus travel and a focus on inequalities. The M74 research study has also reported to its funder (NIHR) and findings will be used to inform policy and practice to mitigate the negative impacts of major infrastructure developments on local communities. Wider dissemination and stakeholder engagement will begin over summer/autumn 2017.
20. Alongside the production of new research and insights, a key aim is to provide leadership for change. One way in which this was developed over the last year was through the Centre's role as acting Chair (since November 2016) within the Glasgow Food Policy Partnership. Scottish Government funding was secured following a Centre-led feasibility assessment for a Community Food Network in Glasgow. These funds will be used to support the development of the network in the coming year. The team have also produced written submissions to support the food poverty work being led by Glasgow City Council, and a literature review scoping the potential impact of sugar – taxation (which is currently being reviewed by partners).
21. Through the place-making programme within this theme, the Centre's learning has contributed to the development of partners' strategic plans – including contributions to Supplementary Guidance on Place-making and the Openspace strategy. Work supporting the Place Standard has also been delivered working with NHS Health Scotland, Glasgow City Council and Scottish Government. The *Weathering Change*, climate-ready community engagement project has aligned agencies and communities in North Glasgow to engage in co-producing place based adaptations to climate change. The learning from this work will inform investments in climate adaption to be made by GCC. The year has seen an intensive period of community engagement and the production of a summary report. Priorities for action will be determined at a workshop scheduled for December 2017, in line with original plans.
22. Projects looking at innovative approaches to reducing inequalities within cities are also located in this theme. The evaluation of Big Noise Torry will report in June, building on the previous GCPH evaluations of Big Noise Raploch and Big Noise Govanhill; and GCPH staff were also centrally involved in a review of first generation Participatory Budgeting in Scotland, which was published in collaboration with *What Works Scotland* in October. An additional important publication from this theme was a synthesis of learning from work looking at social regeneration, setting out a set of principles to underpin future policy and practice within communities.
23. GoWell's final phase of data collection and analysis was completed, and initial analyses from the wave 4 survey presented to the Steering Group. Two draft reports from the programme's qualitative research have been produced: focusing on community cohesion and neighbourhood change in relation to new builds. A draft report has also been produced from the ecological team, looking at changes in health-related indicators across GoWell and other regeneration areas from 2000/02 and 2010/12. The programme has continued to be a source of success in terms of peer review publication with its 50th academic article published in August 2016; and GoWell's community engagement activity has continued to highlight the value of the Community Panel method of participation. We aim to embed the community engagement learning and expertise across the Centre's programmes of work as we move forward to 2017-18.

Exception reporting

24. Most of the slippage in project timescales in this theme has been in projects categorised as 'In Development' – which, by their nature, can be delayed or reconsidered due to emerging priorities within year. Exceptions in projects identified as 'Core' include the GoWell report on the relationship between regeneration and health inequalities from GoWell data (note (c)). A draft paper was completed in collaboration with NHS Health Scotland but a decision was made to incorporate the findings into another paper 'Changes in health-related indicators in GoWell and other areas undergoing housing-led renewal between 2000/02 and 2010/12' rather than report separately.
25. Action research with three schools on the implementation, monitoring and evaluation of the joint School Food Policy has progressed well in one of the three schools but progress being slower in two, leading to additional time being required for this work. Supporting the PLP in the development of the food poverty strand of the Tackling Poverty Strategy has also been slower than anticipated and resource will be sought to progress the food network in the next work plan. (Both note (d)).

Theme 3: Poverty, disadvantage and the economy

26. The aims of this theme are to explore the implications for health of the changing economic and welfare context and to develop innovative partnership approaches to mitigate negative impacts. Given the lifelong implications of early childhood experiences, a strong focus on early years and families has characterised the work over the past year. Activities were directed toward supporting our strategic partners' work with lone parents, and toward developing the Cost of the School Day (CoSD) and Cost of the School Holidays (CoSH) research and evaluation. The CoSH feasibility study was completed with final report and recommendations approved by the Poverty Leadership Panel and Glasgow City HSCP. Glasgow City Education Services led on the implementation and a GCPH Briefing Paper summarising the recommendations is currently with partners. Another key project looking at the changing economic context explored the public health implications of Payday Lending. This reported in July 2016.
27. The 'Building Connections' project to develop and test new approaches to improve the accessibility of financial, social security and housing advice through partnership work in GP practices, Jobcentre Plus and the third sector has progressed after securing funding from the Joseph Rowntree Foundation as one of a tranche of projects exploring new practice across the UK. Two projects which concluded this year with final reports published were *Right Here, Right Now*, which developed a tool for close to real time data collection and *Alcohol use in later life* which reported and led to a paper published in the journal *Public Health*.
28. New and developing work has included a project to explore issues facing young carers involving analysis of Glasgow City schools survey data, examining the relationship between young carer status and educational/occupational aspirations and outcomes.
29. For the next phase of work planning there is an aspiration for the focus on poverty, inequality and social justice implications of welfare reform to be expressed more explicitly across all programmes of work.

Exception reporting

30. At the midyear reporting stage, one programme within this theme 'Older years' was behind schedule (note (e)), as a consequence of staff changes. Both projects within this programme have now recovered their original timescales: James Egan is contributing to the Supporting Older People into Employment reference group; and as noted above, the

Alcohol and Later Life research paper has been published in the journal *Public Health*. In relation to the Strategic Monitoring and Development programme (f), the ambition to establish a theme advisory group has been reviewed and a decision made not to proceed, given the available advisory support already available across individual projects team networks.

Theme 4: Asset Based Approaches and Resilience

31. The priority for theme 4 over 2016-17 was the translation of research findings from well-established programmes into action with key partners. This was achieved in relation to the Glasgow City resilience strategy, the action research project 'Animating Assets' and 'Asset-based health and care services' research.
32. The Centre supported the development and content of Glasgow's resilience strategy as part the city's commitment to the Rockefeller 100 Resilient Cities network. The contribution provided the strategy a strong focus on the sources of community and individual resilience, distinguishing it from other network city strategies that tended to focus on disaster response and infrastructure. A suite of indicators to monitor progress was developed through engagement with practitioners, and their incorporation into *Understanding Glasgow* will be a priority for 2017-18. Although led by Glasgow City Council, the resilience strategy has connections across the range of city services and delivery agencies including emergency services and NHS colleagues. The Centre has played a key role in disseminating the strategy to partners such as Glasgow City HSCP and an animation to communicate the strategy to citizens and other cities in the network will be released in June 2017. The Rockefeller network also led to a successful bid to the Robert Johnson Wood Foundation to share learning on strategy to improve health, which cited GCPH as model of internationally innovative practice. The first visit of 5 public health specialists from Pittsburgh to Glasgow took place in March 2017.
33. Joint work has been developed with Glasgow Life to help understand the relationship between cultural services and health. This grew out of relationships established through *Representing Communities*. Engagement has included a joint Glasgow Life and GCPH session at the Museums' Association national conference that built upon two development sessions with Glasgow Life staff. A befriending intervention is now being developed with the Wheatley Group, for which GCPH will provide evaluability support. The *Representing Communities* work itself has reached the end of its period of funding, with the Glasgow contribution in terms of a draft chapter for a joint book between partners and the text for a briefing paper written.
34. The asset-based approaches programmes have developed a national profile for the Centre as a source of expertise in this area of service and practice development. During the past year, the *Asset-based health and care services research* was published, supported by an event, briefing paper, podcast, blog and infographics to highlight key findings. Another project exploring innovative practice and strategic partner interest is the evaluation of social enterprise as housing intervention for vulnerable adults. The project is a collaboration between the Yunus Centre at Glasgow Caledonian University, Stirling University and the GCPH. A working paper identifying key issues in private sector rented housing and a theory of change for the intervention and evaluation model were published in March 2017.

Exception reporting

35. The ambition to follow up Glasgow Animating Assets research sites to review progress has not progressed following positive initial conversations. This work will be reviewed in the next work plan, following conversations with Health Improvement Leads to explore the feasibility of, and appetite for, returning to project sites.

Communications

36. The following section outlines progress, development and outputs from the Centre's communications function and supports updates on communication outputs and activities that are provided to the Management Board and EMT routinely throughout the year. Communication outputs are provided in list form in Appendix 2.
37. 2016-17 saw a continuation of an integrated approach to communications, utilising more traditional communication research outputs such as reports, journal articles and presentations alongside newer (often digital) communication tools including social media and infographics. This supports the delivery of the Centre's established model of impact and influence with consideration given across the range of outputs and activities to purpose and audience.

Publications

38. Milestone publications have been mentioned throughout the theme reporting above, and include the excess mortality synthesis *'History, politics and vulnerability explaining excess mortality in Glasgow and Scotland'* and the *'Asset-based approaches in service settings: striking a balance'* report and accompanying briefing paper. Both of these substantive publications were supported by a range of dissemination and knowledge translation tools and activities including the development of infographics, blogs, social media activity, a healthier future forum event (for the asset-based approaches report) and widespread media coverage (for the excess mortality synthesis).
39. Two additions to the GCPH synthesis series were also completed and published: *'Health and early years, children and young people: a GCPH synthesis'* in September 2016 and *'Active travel: what have we learned so far'* in March 2017. The dissemination of these reports was also supported by infographics, social media and (for the active travel synthesis) a seminar and media coverage. A summary leaflet was produced for the early years synthesis and is proving to be a useful resource at meetings and conferences. A similar resource is being developed to support ongoing engagement from the active travel synthesis.

Consultation responses

40. Responding to consultation requests is an additional means of synthesising our research, and a direct opportunity for impact on strategic, policy decisions. In the past 12 months we have compiled and published responses to consultations on: the Community Empowerment (Scotland) Act 2015; the Child Poverty Bill for Scotland; Glasgow City Council's Housing Strategy 2017-22; Social Security in Scotland; and the proposed Job Centre closures in Glasgow.

Events

41. Events and seminars are a key component of our approach to dissemination and knowledge translation. GCPH events and seminars held during 2016-17 are listed in Appendix 1. Additionally, the communications team actively identify opportunities to share learning and resources at national events and conferences. During 2016/17 these

included the annual NHS Scotland Conference, the annual PHINS seminar and the Scottish Government's 'Evidence week' events in Edinburgh and Glasgow.

Digital

42. The communications team has continued to extend its use of digital channels to not only share GCPH work and promote new publications and events, but to engage people in new ways with our work. The Centre's main digital channels are the main GCPH, Understanding Glasgow and GoWell websites, social media (Twitter and Facebook), our YouTube channel and the GCPH e-update and network.
43. Infographics have been used to summarise and visualise data content and highlight key findings, blogs to add interpretive or commentary content, and Twitter to link our research into wider conversations and debates, trending topics and national and international awareness campaigns. There appears to be a continuing appetite for live tweeting from events. For example, the hashtag #GCPHsem13, used during the seminar series lecture on inequalities by Danny Dorling trended on Twitter in the UK during the lecture and there were over 200 uses of hashtag around the event.
44. The statistics below give a sense of the engagement we received through our online tools for the period 1 April 2016 to 31 March 2017.
 - For the 12 months up to 31 March 2017, the GCPH website had a total of 35,436 unique visitors (a 20% increase on the previous year.) The top three most popular pages were: publications (27%); events (15%), and latest (includes news and blogs) (14%).
 - The *Understanding Glasgow* website had a total of 42,117 unique visitors (an 8% increase on the previous year). The three most popular sections were: the indicators (58%: 38% main and 20% children and young people); neighbourhood profiles (22%) and the home page (6%).
 - Both websites receive a spread of new and returning visitors during 2016-17. For the main GCPH website this was 62% new and 38% returning; and for Understanding Glasgow 71% were new visitors and 29% were returning.
 - As of 31st March 2016, the Centre had 3,356 Twitter followers – a 30% increase on the figure for this date last year, a rate of increase of approximately one or two each day.
 - The key metrics used to measure Twitter activity are: the number of mentions (including retweets), Twitter profile views, and the number of click-throughs. Over 2016-17 the GCPH Twitter account was mentioned 3,181 times (a 50% increase on the previous year), the profile page was viewed 22,419 times (no comparative figures available) and 3,296 links tweeted by GCPH were clicked (a 40% increase on the previous year).
 - Our films and animations also continue to be viewed and downloaded via our YouTube channel. For example, the 'Supporting Resilience' animation has now received over 27,000 views on YouTube since its publication in February 2014: around 8,000 additional views since this time last year. This is, by far, our most popular piece of video material and illustrates an appetite for explanatory content.

- We currently have a total of 2,693 individuals registered on our network of contacts. Network subscribers receive the GCPH quarterly e-update and regular invitations to GCPH events and the IFF/GCPH seminar series.

Media

45. The Centre continues to take a considered approach to media coverage, reserving proactive media engagement for new findings that are particularly newsworthy or topical. Key coverage during 2016-17 included the excess morality synthesis, the public health implications of payday loans, the cost of the school day project and the cycling analysis and active travel synthesis. We increasingly receive requests from journalists for general comments on health and life expectancy, health inequalities, poverty, and travel and transport. More recently, this has included requests to comment on aspects of our work or publications that we had not sought media coverage of. This has raised the issue of control in relation to what aspects of, and how, our work is being picked up and reported by the media. These issues will be further considered going forward.

Priorities for the next phase

46. Priorities for the communications strategy for the next phase will include: recognition of communication and knowledge translation as a cross-cutting activity; alignment with community engagement; and an increased focus on tailoring our messages, outputs and activities for different audiences in response to feedback from the GCPH Board.

Conclusion

47. This end of year report highlights the continued progress the team has made in delivering on the work plan for 2016-17, and has highlighted areas of development for the next phase of work. Following work with both the Board and wider team, the 2017-18 work plan will look to accentuate the 'middle step' between research findings and action in Phase 4.

Pete Seaman
June 2017

Appendix 1: 2016/17 End of Year Report “At a Glance”

THEME	PROGRAMMES	PROJECTS	STATUS AT MIDYEAR	STATUS AT END OF YEAR
1. Understanding Glasgow’s Health	1. <i>Three Cities</i>	4 CORE projects, 1 DESIRABLE	GREEN (except iii: Amber: CORE)	GREEN (except iii: Amber: CORE) (a)
	2. <i>National analyses</i>	2 CORE projects, 3 IN DEVELOPMENT	GREEN (except iii and v. Amber: both In DEVELOPMENT)	GREEN (except iii and v. Amber: both In DEVELOPMENT)
	3. <i>Mortality and neighbourhood analyses</i>	6 CORE Projects	GREEN (except i, ii and iii; Amber: All CORE)	GREEN (except ii; Amber: All CORE) (b)
	4. <i>Social capital</i>	1 CORE project	GREEN	GREEN
	5. <i>Neighbourhood profiling</i>	3 Projects IN DEVELOPMENT	GREEN	GREEN
	6. <i>Inequalities analyses</i>	3 Projects IN DEVELOPMENT	GREEN	GREEN
	7. <i>Population Health indicators and comparisons (Understanding Glasgow)</i>	2 CORE projects; 1 IN DEVELOPMENT	GREEN	GREEN
	8. <i>Child Health</i>	3 CORE projects, 4 IN DEVELOPMENT	GREEN	GREEN
	9. <i>Alcohol–Related harm</i>	1 CORE project	AMBER (CORE)	GREEN
	10. <i>National / local forums and survey groups</i>	4 CORE Projects	GREEN	GREEN
2. Urban Health	1. <i>GoWell – ecological monitoring</i>	5 CORE projects	GREEN (except v 1 and v 5: Amber; All CORE)	GREEN (Except v1) (c)
	2. <i>Social Regeneration (SISTEMA evaluation and Participatory Budgeting)</i>	2 CORE projects	GREEN (except vii: Amber: In DEVELOPMENT)	GREEN (except vii: Amber: In DEVELOPMENT)
	3. <i>Healthy Urban Environments</i>	7 CORE project, 1 IN DEVELOPMENT	GREEN (except vii: AMBER: IN DEVELOPMENT)	GREEN (except vii: AMBER: IN DEVELOPMENT)
	4. <i>Healthy Sustainable food</i>	4 CORE projects, 1 DESIRABLE	GREEN (except iii and iv: Amber: CORE)	GREEN (except iii and iv: Amber: CORE) (d)
	5. <i>Health Impact of Events</i>	2 CORE projects	GREEN	GREEN

	6. <i>Understanding Glasgow(Including Glasgow game)</i>	4 CORE projects	GREEN	GREEN
	7. <i>Sustainability, transport and travel</i>	5 CORE projects, 5 IN DEVELOPMENT	GREEN (except iii and iv: Amber: CORE)	GREEN
3. Poverty, Disadvantage and the Economy	1. <i>Early years</i>	3 CORE projects, 2 IN DEVELOPMENT	Green except ii (Red: CORE) and vi (Amber; IN DEVELOPMENT)	GREEN
	2. <i>Adult years</i>	3 CORE projects, 4 IN DEVELOPMENT	GREEN (except vi. vii and viii: AMBER: IN DEVELOPMENT)	GREEN
	3. <i>Older years</i>	2 CORE projects	i RED, ii AMBER Both CORE (Capacity issues after staff change)	GREEN (e)
	4. <i>Right here, Right Now</i>	CORE project	GREEN	
	5. <i>Strategic Monitoring and development</i>	1 CORE project, 3 IN DEVELOPMENT	GREEN (except i: CORE and iv; IN DEVELOPMENT)	GREEN (except i: CORE and iv; IN DEVELOPMENT) (f)
4. Asset based Approaches and resilience	1. <i>Creative approaches and methodological developments (AHRC)</i>	2 CORE projects	GREEN	GREEN
	2. <i>Resilience for public health</i>	7 CORE projects	AMBER (in particular ii, vi and vii) NB staff change	GREEN
	3. <i>Neighbourhood change (peer research)</i>	3 CORE projects	GREEN	GREEN
	4. <i>Animating Assets</i>	2 CORE projects	GREEN (except i: AMBER)	GREEN (except i: AMBER)
	5. <i>Asset based health and care services research</i>	1 CORE project, 1 DESIRABLE, 2 IN DEVELOPMENT	GREEN (except v and vi' IN DEVELOPMENT)	GREEN (except vi IN DEVELOPMENT)
	6. <i>Social enterprise as a public health intervention (Commonhealth)</i>	2 CORE projects	GREEN	GREEN
	7. <i>Exploring assets & resilience through play</i>	IN DEVELOPMENT	GREEN (except iii: IN DEVELOPMENT)	GREEN (except iii: IN DEVELOPMENT)
	8. <i>Culture and Health</i>	1 CORE PROJECT, 1 IN DEVELOPMENT	GREEN	GREEN

Appendix 2: Communications outputs 2016-17

Event and Seminars

Title	Date	Attendance
SS 12: Jane Stevens 'How ACEs and the 'theory of everything' can help build healthy communities	April 2016	121
M74 Study Feedback Event	May 2016	39
Creating liveable cities - the role of active and sustainable travel	May 2016	68
Exploring support for a community food network in Glasgow	June 2016	46
Jo Phelan and Bruce Link seminar	June 2016	13
Right Here Right Now (RHRN) Study - report launch	June 2016	26
The hidden financial lives of low income households (Jonathan Morduch seminar)	June 2016	112
Building Connections event	Sept 2016	53
SS 13: Ian Jackson 'Mobilising healthy communities'	Nov 2016	123
GHFF 18: Perspectives on place	Nov 2016	98
SS 13: Graham Watt 'Re-imagining the NHS: Lessons from General Practice at the Deep End'	Dec 2016	89
SS 13: Tessy Britton 'City neighbourhoods made by everyone for everyone'	Jan 2017	111
Firestarter Festival event	Jan 2017	15
SS 13: Daniel Wahl 'Designing regenerative cultures - facilitating the emergence of whole systems health'	March 2017	POSTPONED
GHFF 19: Asset-based approaches in service settings - striking a balance	March 2017	117
SS 13: Danny Dorling 'Inequality and Scotland: measures of despair and signs of hope'	March 2017	168
Active and sustainable travel in the 21st century	March 2017	53

Publications

Title	Date
History, politics and vulnerability explaining excess mortality in Glasgow and Scotland	May 2016
Right Here Right Now study: final report	June 2016
Improving partnership working between primary care and money advice services	August 2016
Briefing paper 48: Public health implications of payday lending	September 2016
Health and early years, children and young people: a GCPH synthesis	September 2016
Briefing paper 49: Learning from the cost of the school day project	October 2016
Parenting support: exploring the current landscape in Glasgow	November 2016
Briefing paper 50: Principles for effective social regeneration	December 2016
Active travel in Glasgow: what we've learned so far	March 2017

Cycle journeys on the South-West City Way: a descriptive analysis	March 2017
Cycle journeys on the Anderston-Argyle Street footbridge: a descriptive analysis	March 2017
Glasgow's public cycle hire scheme: analysis of usage between July 2014 and June 2016	March 2017
Travel to school in Glasgow: a descriptive analysis of results of the Hands Up Survey	March 2017
Asset-based approaches in service settings: striking a balance.	March 2017
Briefing paper 51: Asset-based approaches in service settings	March 2017
Briefing paper 52: Housing through social enterprise	March 2017



**Glasgow Centre for Population Health
Management Board Meeting
Monday 12 June 2017**

Budget position: Month 12 March 2017

Recommendations

The Management Board is asked to note:

- The Centre's financial position for the financial year to 31st March 2017 showing an underspend of £115,000.
 - The original plan over committed the available resources by £29,807 so the actual movement from plan is £145,000.
1. The final position is broadly in line with what was reported at April's Board meeting which showed a planned outturn of £148k underspent.
 2. As previously reported the main reasons for the movement from plan are:
 - Additional income received which has not yet been fully committed (£70,000).
 - A credit related to the previous accommodation at Elmbank St (£45,000).
 - Savings in the Salaries budget (£20,000).
 - Slight underspends in programme areas (£7,000).
 - Reduced spend in running costs (£3,000).
 3. £115,000 will be made available to the Centre in 2017-18 on top of the in-year funding, and this is reflected in the 2017-18 Budget plan.

**Liz Anderson
2nd June 2017**

2016-17 Financial Plan				<i>Variance</i>
	<i>Income</i>	<i>Planned</i>	<i>Actual to</i>	<i>from Original</i>
		<i>£</i>	<i>March '17</i>	<i>Plan</i>
			<i>£</i>	<i>£</i>
I 1	Annual SG Allocation	1,277,000	1,277,000	-
I 2	Sponsors Contribution to GoWell & GoEast	269,008	528,225	(259,217)
I 3	Other Income	167,575	239,475	(71,900)
	Total Income 16/17	1,713,583	2,044,700	(331,117)
I 4	Carry Forward from previous years	17,081	17,081	-
	Total Available 16/17	1,730,664	2,061,781	(331,117)
	Expenditure			
	Research:			
E 1	Understanding Glasgow's health	45,750	45,441	309
E 2	Urban Health	140,000	128,922	11,078
E 3	Poverty Disadvantage and the Economy	42,000	53,720	(11,720)
E 4	Resilience and Asset Based Approaches	62,000	53,124	8,876
E 5	AHRC	15,000	15,000	-
E 6	GoWell/GoEast	269,008	528,225	(259,217)
E 7	New Perspectives on Health	48,000	49,035	(1,035)
	Total Research	621,758	873,467	(251,709)
	Communications:			
E 9	Communications	45,000	45,659	(659)
	Total	45,000	45,659	(659)
	Management and Administration			
E 10	Centre Management, Admin & Running Costs	27,000	23,786	3,214
E 11	Accomodation Costs	118,000	73,407	44,593
E 12	Core Staffing	948,713	930,030	18,683
	Total Management & Admin	1,093,713	1,027,223	66,490
	Total Expenditure	1,760,471	1,946,349	(185,878)
	Balance	(29,807)	115,432	(145,239)



**Glasgow Centre for Population Health
Management Board Meeting
Monday 12 June 2017**

Phase 4 Work Plan for 2017-18

Introduction

1. This document contains the work plan for Glasgow Centre for Population Health for the period June 2017-June 2018 following Scottish Government approval of funding for this time period. The work plan follows a period of consultation and discussion on the priorities, context and distinct contribution the Centre makes to improving health and reducing health inequalities within its partner landscape. This consultation involved the GCPH Board, Executive Management Team (EMT) and the staff team within the Centre. This document outlines the purpose, aims and underpinning programmes and projects for this new, fourth, period of funding, henceforth 'Phase 4'. The associated Communications strategy, implications for staff development, risks and reporting mechanisms are also described.
2. An associated budget plan accompanies this paper (Board paper 338). This work plan is to be delivered through a budget of £1.25m of core funding from Scottish Government and other income dedicated to specific areas of work, amounting £200,000.
3. Appendices cover the work plan 'at a glance' (Appendix 1), the cross cutting approaches characterising the work plan (Appendix 2), and a detailed description of the programmes in table form (Appendix 3).

Process for developing the work plan

4. Phase 4 work planning involved two sessions with the GCPH Board (in December 2016 and February 2017) and two sessions with the GCPH team (in February and April 2017). Written outputs from these sessions were discussed with the EMT. These sessions explored the context in which the Centre will continue to operate and deliver its programmes of work, important strategic priorities to which the work plan should align and exploration of how the Centre develops its 'distinct contribution' within the wider partner landscape. Key issues identified to which the work plan responds include recognition of the need to:
 - be responsive to our core partner (Scottish Government, Glasgow City Council, University of Glasgow and Glasgow City Health and Social Care Partnership) priorities, challenges and resource;
 - continue to develop the Centre's established areas of success, as understood on the basis of feedback from our key partners;
 - build on our established 'distinct contribution' to improving health and reducing inequalities. This is currently understood as the generation of credible evidence on the causes of poor health and health inequalities aligned with insight to

- support the changes in policy and practice necessary to improve population health;
- develop the Centre's resources, outputs and contribution to support organisations in taking forward approaches and investments (changes in practice, policy and service delivery) required to achieve the outcome of improved health and reduced inequality in Glasgow and more widely; and to do so in a manner that takes account of the complex and evolving context in which health outcomes are created in communities and mitigated or improved through policy, practice and service delivery;
- maintain a focus on the most vulnerable population groups;
- promote understanding of community engagement, empowerment and participation as a key dimension in both understanding and responding to health inequalities and their causes.

Context for 2017-18

5. This work plan responds to priorities within the operating context of our core partners, wider delivery partners locally and nationally, and understanding of how the Centre's resource can most effectively be applied to support shared priorities. Key elements of the strategic context include:
 - The continued integration of Health and Social Care Services in Glasgow City and elsewhere and the associated strategic commitment to shifting resource toward prevention, community-based health responses and promotion of increased healthy life expectancy. This will involve GCPH formalising its relationship with Glasgow City HSCP.
 - Key strategic priorities such as the implementation of place-based approaches, Thriving Places initiatives, city strategies relating to Housing, Resilience and Early years and the need for an associated understanding of the principles underpinning inclusive growth and social regeneration.
 - Welfare reform, its implications for population health and the opportunities for practice and policy stemming from the establishment of the Scottish Social Security Agency, the extension of the Link Workers programme, and an appetite locally and nationally to explore and review the shape of appropriate social protection models within a 21st century context and understanding of how policy and practice can break cycles of poverty and disadvantage.
 - The implications of the Public Health Review, both structurally and in relation to the development of a national public health strategy. During 2017-18, a Public Health Reform Oversight Board will be established, to guide progress in relation to: the development of a set of overarching public health priorities; the establishment of a new single national body to provide leadership and support on public health; and the development of stronger local partnerships to support a focus on public health. This work will have implications for GCPH and its partners.
 - Supporting key policy priorities such as the Community Empowerment Act (2014) Scotland and its focus on building capacity for community participation. Our response to include demonstrating promising approaches to community engagement and empowerment and supporting bodies tasked with implementing Community Empowerment legislation.
 - The University of Glasgow's continued investment in the Social Research Hub, Bridgeton in which GCPH is located, and the associated focus on improving outcomes for the population of the east end of Glasgow (with learning for elsewhere) aligned to improving understanding of the most promising investments in relation to health inequalities, educational attainment and housing.

Purpose, aims and programmes of work in Phase 4

6. In adapting and responding to the above priorities and building on feedback from our core partners on our established contribution to improving health outcomes, the Centre's purpose for Phase 4 highlights our dual focus on understanding the causes of health inequalities and identifying and supporting the implementation of solutions. Our purpose can be expressed as:

GCPH acts to understand and identify solutions in support of the improvement of population health and reduction of inequalities through generating quality evidence, advice support and innovative solutions. Our programmes of work are relevant and responsive to our partners' policy and practice, and grounded in their contexts, priorities and resources to support processes of development and change.

7. This purpose is underpinned by a refreshed set of aims which in 2017-18 we will be:
- building on our national and international reputation as a credible source of evidence, knowledge and insight on the patterning and trends in health outcomes, inequalities and their determinants;
 - developing our resource base and outputs to support the development and application of promising investments and actions to improve population health outcomes. We will do so in a manner underpinned by strong and productive relationships and work embedded within partner organisations and priorities;
 - maintain a strong focus on the social justice and equity implications of investments, interventions and policies designed to improve health and inequality outcomes;
 - embedding community engagement and participation across our programmes of work and communicate learning from these processes more widely;
 - maintaining a future perspective and display leadership in considering new and emergent issues that may be currently beyond our partners' priorities. We will also aim to stick with new developments long term;
 - continuing to innovate in developing our means of communication and to reflect on how we can engage effectively with a wider body of end-users and audiences.

The programmes of work

8. The new work plan features a structure of four 'work programmes' replacing the four 'themes' which characterised our work plan in previous years. In reviewing the distinctiveness of the Centre's approach while the work plan was in development, we additionally identified eight cross cutting approaches that characterise the core competencies through which the Centre engages with particular issues. A key intention of the new work plan structure is to encourage working that utilises the skills and perspectives of the team across the entirety of the work plan programmes.
9. The four programmes were developed through the collective engagement process outlined in paragraph 3, and encompass: *Action on inequality across the life-course; Understanding health, health inequalities and their determinants; Sustainable and inclusive places; and Innovative approaches to improving outcomes.* These are described in more detail in paragraphs 9-18, and component projects and delivery milestones are set out in table form at the end of this document.

Programme: Action on inequality across the life-course

(Leads: Fiona Crawford and James Egan)

10. The purpose of this new programme is two-fold: to understand the influence that poverty and new and emerging experiences of inequality exert on health outcomes; and to move beyond evidence generation to support action on inequality in support of shifting the balance of decision making more clearly towards proactive and preventative responses. The work within the programme recognises that poverty and inequality exert powerful and varied influences across the life-course (in early years, working age and later years) and seeks to develop knowledge about the changing influences at different life stages and about the types of interventions and investments that disrupt cycles of poverty and empower populations.

Priorities for 2017-18

11. Much of the work in this programme draws together projects from the Centre's work previous managed within the *Poverty, Disadvantage and the Economy* and *Understanding Glasgow's Health* themes, and locates these within a framework of life course-orientated research underpinned by a focus on poverty mitigation and disruption across age groups and not just within specific cohorts. The new programme will require time to develop over the year. With this in mind, key components of the 2017-18 programme will be:
- improving understanding of continuing welfare changes with a focus on the roll out of Universal Credit and associated developments around in-work conditionality;
 - work to explore the potential of new forms of social protection in a 21st century context;
 - understanding and promoting equity of access to services by vulnerable population groups;
 - an early years focus that will include improving understanding of the causal pathways between Adverse Childhood Experiences and health outcomes and evaluation of childcare, early learning and interventions.

Programme: Understanding health, health inequalities and their determinants

(Leads: David Walsh and Bruce Whyte)

12. The ambition of this programme is to provide analysis to support people's understanding of trends in health, inequalities and their determinants, to identify emerging issues, and to support the development of policy responses through recommendations. This will continue to be achieved through analysis across national, city and local levels and against international comparators. As well as external influence, the analyses will continue to inform, shape and support elements of work across our work plan.
13. The context for this programme is the widening gap in health (measured for example by life expectancy) between those living in the most and least deprived circumstances and for women in particular over the last decade. Inequalities in income and wealth, key determinants of health inequalities, have also widened in both Scotland and the wider UK. Consequently, priorities for this programme include new analyses of data on income and earnings as well as continued attention to how outputs are made available for use and interpretation to inform practice and policy, through resources such as *Understanding Glasgow*. Key projects include:
- maintenance of *Understanding Glasgow* and development of this web-based resource in response to emerging trends and wider priorities;

- continued dissemination and support for partners in responding to the excess mortality research;
- national and international mortality analyses;
- evaluation of children and young people's profiles;
- a focus on income inequalities as a fundamental cause of health inequalities including new income and earning analyses, a systematic review and engagement with emerging and developing work in this area.

Programme: Sustainable, inclusive places

(Leads: Russell Jones and Jill Muirie)

14. This programme's purpose is to support processes of change to help Glasgow become a more inclusive, resilient and sustainable city. The city's inequalities in health, income and associated outcomes can limit opportunities and access to elements foundational to living a healthy and meaningful life, such as: meaningful and well-paid employment, education, public transport, physical activity, healthy food, safe play, culture and social connection. The programme seeks to inform and support policy, partnerships and practice to promote fair and equitable access to healthy and sustainable environments. This will be achieved through evidence, evaluation and engagement with partners in relation to key priorities nationally and locally including urban planning, transport, housing, open space, economic growth and sustainability.
15. Opportunities for impact, influence and support stem from national priorities in implementing place-based approaches, the Place Standard, the Community Empowerment (Scotland) Act and development of sustainable food networks. In relation to key partnerships, the GoWell programme's final year will make 2017-18 an important period of reporting and knowledge translation. A particular priority will be knowledge translation stemming from GoWell's community engagement learning both within the wider GCPH work programmes as a cross cutting approach and among partners in delivery. Ongoing work to establish a city-wide approach to sustainable food also reaches a critical phase and remains a 'core' priority.
16. Historically, work on transport has tended to focus on active travel. In Phase 4, programme managers will develop this area of work to include a focus on bus travel and, aligned to the crosscutting approach of *social justice and perspectives on tackling poverty and inequality*, the equality implications of sustainable travel in relation to the most vulnerable groups.
17. Key projects include:
 - drawing together GoWell experience and learning into a range of dissemination outputs, and maximising opportunities for application of this learning;
 - development of a city wide sustainable food partnership;
 - continuing to support the creation of healthy urban environments through collaboration with partners such as Sustainable Glasgow, Thriving Places and third sector;
 - research into the private rented sector, in partnership with Glasgow City Council and other relevant housing research organisations;
 - translating work from the Commonwealth Games volunteer study into transferable and applicable recommendations;
 - a focus on transferable learning stemming from the Centre's historical and current community engagement work

Programme: Innovative approaches to improving outcomes

(Leads: Jennifer McLean and Pete Seaman)

18. The aim of this programme is to support the shift in policy and practice towards new ways of working grounded in prevention, a focus on promoting *healthy* life expectancy and community-based responses to population health improvement. This responds to the expressed need from partners in regarding a combination of challenges around demography (such as an ageing population), the increased contribution of psych-social disease conditions as a proportion of the disease burden of post-industrial societies and resource pressures associated with inequalities and reduced public sector spend. Building on the reputation of the *Asset-based approaches and resilience* theme of Phase 3, which displayed leadership in the translation of new approaches to tackling inequality, the programme will work with partners such as Glasgow Life, the Link Workers Monitoring and Evaluation Group, the Public Health Evidence Network, Glasgow City Council's Resilience Strategy and networks established through Animating Assets, to support transitions to new ways of working. A focus will be on making the case for innovative practice, policy and intervention through evidence, evaluation and knowledge through translational resources and engagement.

19. The formalisation of the relationship of Glasgow City's HSCP sets the context for translational learning, as does the continuing dissemination of key pieces of work around community-based responses such as participatory budgeting, the Commonwealth Games volunteer study and Glasgow City's Resilience Strategy. Key projects and tasks include:
 - a Briefing Paper "Evaluating the health and social impacts of Participatory Budgeting" to support knowledge translation around an innovative approach with demonstrable community impact;
 - publication of the Commonwealth Games clyde-sider study;
 - evaluability support for a Glasgow Life, Wheatley Group intervention to utilise Glasgow's Museums to support social connection and resilience;
 - exploring the sustainability of asset-based approaches through follow up of Animating Assets research sites;
 - developing our learning on available evidence on the benefits of play and translation into policy into practice through a Briefing Paper.

Cross cutting approaches

20. A new development for 2017-18 is the identification of cross cutting approaches to reflect the Centre's key competencies and characteristic ways of working. These also strengthen communication internally and externally about the contribution GCPH staff make to improving outcomes. A manager has been identified for each of the approaches, to provide oversight on the degree to which it is embedded across the work plan. The eight identified approaches are:
 - communication and knowledge translation;
 - supporting participation, community engagement and empowerment;
 - analysis of trends in health and improved understanding of inequality and its causes;
 - promoting social justice and perspectives on tackling poverty and inequality;
 - supporting the shift to new ways of working, prevention and service integration;
 - future thinking;
 - collaboration and supporting partner priorities;
 - innovation in evidence generation and research practice.

Communications strategy

21. The Centre has established a strong reputation for communications outputs, which are increasingly tailored to achieve impact with different audiences and end users. In this year's work plan, communication and knowledge translation are identified as one of our eight cross-cutting approaches to underline that our dedicated communications team works continuously alongside Programme Leads to improve the communication and impact of our outputs through identifying appropriate communications support in terms of publications, events, data visualisation, social media and media.
22. Opportunities for knowledge exchange in the context of wider developments and opportunities will be agreed collaboratively between the communications team and researchers.
23. A number of 'core' communication activities are programmed on an annual basis including the Seminar Series; two Glasgow's Healthier Future Forum (GHFF) events; and the GCPH quarterly e-update. Planning has started for the 2017-18 Seminar Series which will commence in Sept/Oct 17; GHFFs will be held in autumn 2017 and spring 2018; and the quarterly GCPH e-update will become a bi-monthly output with a refreshed format. Other 'core' activities occur on an ongoing basis such as maintaining the GCPH, Understanding Glasgow and GoWell websites; our Twitter and Facebook presence; reactive and proactive engagement with the media; and media monitoring.
24. In addition to the 'core', ongoing and programme support communications activities described above, communication and knowledge exchange priorities for 2017/18 include:
 - an increased focus on evidence/policy briefings to help bridge the gap between evidence and possible actions or solutions i.e. what the evidence means for policy, practice and service design and delivery;
 - developing our messages and outputs to be tailored for intended audience and for a wider range of audiences;
 - integration of communication and knowledge exchange activities with our new community engagement and empowerment approach;
 - consideration of how our reporting of outputs and activities can help support evidence of influence (as opposed to impact);
 - review of the GCPH Communications Strategy and internal publication guidelines;
 - developing in-house capacity for typesetting and design.
24. A Communications Strategy for Phase 4 of the Centre will be presented to and discussed at the August Management Board meeting, providing additional detail on substantive communication and knowledge exchange activities for this phase. Updates will be provided throughout the year at each EMT and Management Board meeting.

Professional Development

25. The focus within this work plan on supporting processes of change will have implications for the team's continuing professional development (CPD) requirements. CPD is currently delivered on the back of discussion at end of year and mid-year personal development and performance reviews, with an allocation of Centre running costs being available for training, conferences and workshops. Often CPD can be delivered through existing work and incorporated within personal work plans and

additionally through our contract with the International Futures Forum. We will continue to provide opportunities within the Centre's wider budget for staff development in relation to supporting processes of change, enabling access to the associated skills and approaches required.

26. A review of workforce development is also taking place within the wider public health workforce and we will support members of the team wishing to be considered for Specialist Registration or Specialist Practitioner status as well as continuing to offer professional development opportunities to people from outside the Centre, through internships, secondments and training placements

Risks to delivery

27. A number of risks are present which could impact on the delivery of this work plan or require a substantive change in direction in some of the projects and programmes published here. Among these are the issue of the shorter term of the current funding settlement. This potentiates uncertainty within the team and may impact longer term planning and collaboration, particularly in the latter half of the year. Implications for recruitment and replacing existing posts when vacated are also present included the recruitment of a substantive Associate Director.
28. As a transitional work plan, we will encourage the team to be responsive and flexible to partner needs such as the priorities stemming from the Public Health Review which we will be responsive to as we deliver the work plan.

Reporting to the Board

29. Performance reporting will take place on a six monthly basis with mid-year reporting coming to the Board in December 2017. We will continue to use a 'red, amber, green' system to summarise how projects and programmes are complying with agreed deadlines, supported with an "at a glance" table. Communications activity will continue to be reported through general update papers at each Board meeting.

Concluding remarks

30. We consider this work plan to reflect current priorities in the city and wider partner landscape, take account of where the Centre's resource and expertise can be best targeted to deliver impact and to represent an evolution of our distinctive contribution to improving health and supporting actions to reduce inequality. We welcome comment from the Board to support improved delivery of this plan.

**GCPH
June 2017**

Appendix 1: 2017-18 Work Plan 'At a glance'

PROGRAMME	AREA OF FOCUS	PROJECTS	
Action on inequality across the lifecourse	Child Health	Children's Profiles	Core
		Early Years Review	Core
		Childcare Pathfinder Evaluation project	Core
		Adverse Childhood Experiences	Core
		Evaluation of joint food policy	Core
	Scottish Children's Neighbourhoods	Initiative development and awareness	Core
		Community Engagement	Core
		Developing Theory of Change	Core
		Communications Strategy	Core
	Disrupting Cycle of Child Poverty	Healthier Wealthier Children	Core
		Cost of the School Day	Core
		Cost of the School Holiday	Core
		Children and Young People as Carers	Core
	Citizenship and Early Years	Nurturing citizenship in early years	Core
	Adult Years and Working Age	Building Connections	Core
		Welfare Reform and Deep End	Core
		Contemporary Debt and Health	Core
Access to service by vulnerable groups		In Dev't	
Future of Social Protection	Three PhD internships	Core	
	In-work conditionality	In Dev't	
Understanding health, health inequalities and their determinants	Understanding Glasgow	Website maintenance	Core
	Excess mortality research	National Excess mortality analysis	Core
		Three cities research	Core
	National and international Analysis	6 analytical projects	4 Core
	Neighbourhood profiling	Neighbourhood change and 5 analytical projects	4 Core
Health Inequalities	Informing Investments to reduce Inequalities and 4 analytical projects	All Core	
Sustainable inclusive places	Sustainable travel and transport	S'th City Way Monitoring	In Dev't
		Trends in bus, car ownership and walking	In Dev't
		M74 study dissemination	Core
		Glasgow City Deal	In Dev't
	Healthy Urban Environments	Weathering Change	Core
		Children's access to greenspace	In Dev't
		Private rented sector housing	Core
	Sustainable Food	Glasgow Food Policy Partnership	Core
Glasgow Community Food network		Core	

		URBACT- food resilience in Possilpark	Core	
		Dalmarnock Food Hub pilot	In Dev't	
	Community Engagement and Empowerment		Synthesis of GCPH CEE work and learning	Core
			Innovative approaches briefing paper	In Dev't
			Evaluability Assessment of Community Empowerment Act	In Dev't
		Social Research Hub Community Engagement	Core	
Go Well		Communications and dissemination	Core	
Innovative approaches to improving outcomes	Participatory budgeting	Evaluating the health and social impacts	Core	
	Volunteering and participation	Commonwealth Games Volunteer Study	Core	
		European Championships	In Dev't	
		Evaluation of Volunteer Charter	In Dev't	
	Social enterprise as health interventions	Homes for Good evaluation	Core	
	Asset-based approaches across services and settings	Synthesis and communication	In Dev't	
		Sustainability of Animating Assets	Core	
		ABAs in Primary Care	In Dev't	
	Culture and health	Representing Communities follow-on and dissemination	Core	
		Glasgow Life befriending	Core	
		Cultural services and health	Core	
		Community Centres PhD	Core	
	Exploring assets through play	Briefing paper	Core	
	Developing a perspective on 'evidence'		In Dev't	
Link Worker follow –on support	M&E and Advisory groups	Core		

Appendix 2: Cross cutting approaches

The identification and use of cross-cutting approaches is designed to reflect GCPH's distinctive contribution and to ensure our distinctive features are well represented across all our work. For 2017-18, a lead has been identified for each of the cross-cutting approaches (discussed below). The role of cross-cutting lead involves providing visibility for this particular dimension of the Centre's work and encouraging its integration across the Centre's 4 programmes. The lead is understood to be a point of contact for each cross-cutting area and point of expertise internally and externally. The role also includes identifying gaps and promoting the development of the team to maintain the Centre's capacity and resource in their particular cross-cutting area. At end of year and mid-year reporting, the lead will support the reporting of progress in each area as well as providing contributions to programme manager meetings.

Cross cutting approach	Lead
1. Communications and knowledge translation	Jennie Coyle
2. Supporting participation, community engagement and empowerment	Jill Muirie
3. Analysis of trends in health and improved understanding of inequality and its causes	David Walsh
4. Promoting social justice and perspectives on tackling poverty and inequality	James Egan
5. Supporting the shift to new ways of working, prevention and service integration	Jennifer McLean
6. Future thinking	Bruce Whyte
7. Collaboration and supporting partner priorities	Russell Jones
8. Innovation in evidence generation and research practice	Pete Seaman

Appendix 3: Detailed description of work programmes

Programme: Action on Inequality across the life-course

Programme Leads: Fiona Crawford and James Egan

Programme support: Lynn Naven, Oonagh Robison, Bruce Whyte, Jennifer McLean, Valerie McNeice and David Walsh.

Other contributors: Jamie Sinclair, Pete Seaman (Building Connections) Lizzie Leman (SCN)

Area of focus	Projects	Lead	Cross cutting Approaches (see App'x 2)	Milestones for 2017-18	Description/ Comments (include whether 'Core' or 'In development')
Child health	Children's Profiles	BW, FC	1,3,8	Final presentations in May 2017 Possible presentation at FoPH conference (Nov 2017).	Core Children and Young People's profiles for Glasgow neighbourhoods and Evidence for Action Briefings. (Evaluation of impact of profiles to be undertaken in May/June 2017 – covered under the "Understanding Health" programme. Decisions about updating and future profiles will be informed by the evaluation and influenced by national discussions on future profiling outputs).
	Early years review	FC, VM	1,5,7	Completion of second stage qualitative research regarding parenting programme delivery in Clyde partnership areas (July 2017)	Core Scrutinise and report on the impact of family/parenting support programmes and initiatives on child and family outcomes.
	Childcare Pathfinder Evaluation Project	FC, VM, BW	1,2,4,5,6,7	Baseline profile of and baseline Childcare	Core Three-year collaborative project (commenced October 2016) being delivered by Children in Scotland, Glasgow City Council and GCPH funded by BLF aiming to establish improved, innovative, affordable,

Area of focus	Projects	Lead	Cross cutting Approaches (see App'x 2)	Milestones for 2017-18	Description/ Comments (include whether 'Core' or 'In development')
				data (August 2017) Qualitative research with parents/carer , parent/carer survey and telephone interviews with local childcare providers (Summer 2017)	and sustainable childcare in three East Glasgow neighbourhoods: Calton/Bridgeton; Parkhead/Dalmarnock; and Tollcross/West Shettleston. GCPH leading mixed methods evaluation of the process and impacts of the project.
	Adverse Childhood Experiences (ACEs)	FC, DW	1,3, 4	Completion of systematic review by early 2017	<p>Core ACEs research group (DW, FC plus NHSGGC (Michael Smith), Glasgow University (Andrea Williamson) and NHS Health Scotland (Katy Hetherington, Gerry McCartney): current focus is to provide a better understanding of causal pathways related to links between ACEs and health outcomes. There are two overlapping components: (1) undertaking systematic literature review of the association between socio-economic status and ACEs; (2) supporting other research that will explore expert knowledge of evidence from all relevant disciplines, of various pathways linking ACEs to social, economic and health related factors.</p> <p>Contribution to joint priority setting and action through Scottish Child Public Health Group/Scottish DsPH group in order to improve life chances for children and families.</p>
	Action research with three schools on implementation and monitoring/evaluation of GCC Education	JM	7, 8	Final report Summer 2017	<p>Core In final stages of this project: working with two remaining schools to identify findings and recommendations. Report to be used for engagement with Education department rather than publicly available.</p>

Area of focus	Projects	Lead	Cross cutting Approaches (see App'x 2)	Milestones for 2017-18	Description/ Comments (include whether 'Core' or 'In development')
	and Cordia joint School Food Policy.				
Scottish Children's Neighbourhoods (SCN)	<p>Initiative development, awareness raising and embedding in local community</p> <p>Confirmed SCN neighbourhood area and boundaries</p> <p>Community engagement and analysis of local context</p> <p>Development of a shared SCN Theory of Change and evaluation plan</p> <p>Development and agreement by partners of project plan and communications strategy</p>	JM, CT, LL	1, 2, 3, 4, 5, 7, 8	<p>Phase 1 & early Phase 2 of planned approach</p> <p>Establish steering gp, SCN team and schedule of meetings</p> <p>Appoint Local Co-ordinator and prepare Dalmarnock Primary School as first SCN.</p> <p>Identify indicators of change and methods</p> <p>Press launch— Summer 2017</p> <p>Delivery launch of Dalmarnock</p>	<p>Core</p> <p>Joint initiative between What Works Scotland, Robert Owen Centre in GU, and GCPH to 'develop a way of working that provides an overarching synergy supporting the development of CYP in Dalmarnock.'</p> <p>Will build on and extend GCPH's community engagement and partnership working with local services and residents in surrounding East End communities and on the Centre's work on asset-based approaches across settings. Lizzie Leman has been appointed as a UoG Knowledge Exchange and Impact Fellow to support the development, implementation and evaluation of the initiative.</p>

Area of focus	Projects	Lead	Cross cutting Approaches (see App'x 2)	Milestones for 2017-18	Description/ Comments (include whether 'Core' or 'In development')
				SCN - Autumn 2017	
Child health	Preparation of paper on health care savings in early childhood associated with exclusive breastfeeding versus formula feeding	BW	1,3,7	Plan to submit to journal in autumn 2017	Legacy project Writing and editing research paper based on previous breastfeeding research programme data with 'Tomi Ajetunmobi and three other authors.
	Paper modelling impact of smoking in pregnancy on child health outcomes	BW	1,3,7	Modelling continues no firm publication dates	Legacy project Study using breastfeeding dataset (from project mentioned above). Role on ISD advisory group and contributing eventually to an academic paper.
Disrupting the cycle of child poverty	Healthier Wealthier Children	JE, LN	4,5,7	1) Jun '17 2) Autumn '17	Core 1) Paper for publication - at stage of finalisation. 2) Conducting interviews with FI leads to update running costs of HWC and return on investment (in planning stage).
	Cost of the School day publication	LN, JE	4,5,7	Draft paper planned for end September 2017	Legacy project Following the end of the CoSD research in Glasgow city, a peer-review paper is being prepared for publication in conjunction with CPAG and the University of Strathclyde (Dr Edward Sosu).
	Cost of the School Holidays	JE, FC	4,5,7	Publish GCPH BP summarising study and recommendations by Autumn 2017	Core Following the finalisation of the feasibility study, led by Glasgow Life, and subject to agreement with partners involved in commissioning and supervising the study it is proposed that a GCPH BP be produced to complement and reinforce learning and actions that have flowed out of the 'Cost of the School Day' research.
	Children and Young People as carers	OR, JE	1,4,5,6	Publish report (June	Core Undertake secondary analyses of the Glasgow schools survey

Area of focus	Projects	Lead	Cross cutting Approaches (see App'x 2)	Milestones for 2017-18	Description/ Comments (include whether 'Core' or 'In development')
				'17) and stakeholder event (July '17)	(2014) to explore if being a young carer is associated with poorer outcomes and future job expectations, alongside a review of the evidence on health and social outcomes that may prohibit participation in education or labour markets. A final report will be produced with the learning shared with GCPH partners and local networks. Further consideration will be given to undertake primary research with young carers.
Citizenship and early years	Nurturing citizenship in the early years literature review	JM, VM	5,6,7	Final report due July 2017	Core This study will explore how citizenship can be fostered in the early years. The focus will be on understanding how citizenship is understood by those responsible for educational provision and childcare in the early years and the practices that they associate with supporting the development of citizenship as a dispositional characteristic or particular actions or expressions of responsibility or concern. Literature review commissioned to the University of Stirling.
Adult years and working age	Building Connections	JS, PS	4, 5	Final report due Autumn 2017	Core Testing approaches to deliver co-located services in two GP practices and one jobcentre in east Glasgow - working with the DWP at a strategic level to test approaches to improving outcomes for BME communities accessing job centres in the city. The final report published in conjunction with GCPH, JRF and WWS will detail the experiences of the project, identify transferable components of practice and produce a series of recommendations regarding approaches to collaborative working.
	Welfare reform and Deep End	OR, JE		1 year delivery project which goes live Jun 2017	In Development Monitoring roll out of advice worker embedded in GP practices in (potentially) seven more locations over the next year. Will consist of monitoring GEMAP data; follow up interviews with clients who have gone through the service; key stakeholder interviews; analysis of HI diaries.
	Contemporary debt and health	CH	1,3,4,5	BP due late Autumn 2017	Core Overview/ summary of existing literature relating to contemporary forms of debt and impacts of health and wellbeing.

Area of focus	Projects	Lead	Cross cutting Approaches (see App'x 2)	Milestones for 2017-18	Description/ Comments (include whether 'Core' or 'In development')
	Access to NHS GGC services by vulnerable population groups.	JE, LN		Start summer 2017	In Development Preparation of paper outlining the extent of DNAs in Glasgow and synthesis of existing policy drivers, literature and work to address DNAs and access issues across NHSGGC. It is envisaged that the paper will inform NHSGGC planners and clinicians on potential further avenues of exploration.
Future of Social protection	GCPH/What Works Scotland partnership - exploring what a healthier 21 st century social protection might look like.	JE, PS N Watson, WWS		Start June 2017	In Development Three PhD students will be recruited to work with GCPH/WWS to co-produce 3 scoping documents to support the aim of exploring what a healthier 21st century social protection might look like. The documents will be published on the GCPH/WWS websites and will serve as a foundation to undertake workshops with representatives from across Scotland on the development of alternative and 'healthy' models of social protection. Students will have the opportunity to participate in this second stage. Both outputs (producing documents and workshop participation) will provide employability opportunities e.g. involvement in planning and negotiating and increasing awareness of policymaking networks and strategic/planning decision makers.
	Implications of on-going welfare changes including conditionality for in work benefits	BW, JE, LN & OR		Start summer 2017	In Development This project is in the early stages of development. However, it is proposed that the GCPH will work with NHS and other partners to outline a new piece of work that aims to describe the impact of welfare reform on populations across NHS GGC, using a mixture of data and case studies. The GCPH held a recent meeting with local and national partners to discuss the roll out of Universal Credit across Scotland and its wider impacts. The learning to emerge from this UC work will help shape this proposed area of work.
Representation on expert panels, steering groups etc.	Poverty Leadership Panel Child poverty subgroup	PS, JE LN JE, OS	4,7	Ongoing	

Area of focus	Projects	Lead	Cross cutting Approaches (see App'x 2)	Milestones for 2017-18	Description/ Comments (include whether 'Core' or 'In development')
	Governance group				
	NHSGGC - Employability Health Strategic Group	JE	1, 4, 7	Ongoing	
	NHSGGC - Financial Inclusion planning group	JE	1,4,7	Ongoing	
	Scottish Government - Welfare Reform Health Impact Delivery Group	JE	4,7	Ongoing	
	Scottish ACES Advisory Group	FC	1,3,4	Publication of a briefing on relevance of ACES for use of the Pupil Equity Fund by Education Professionals	Core Relates directly to tackling family adversity and connecting local and national priorities, learning and action across organisational boundaries.
	Child Poverty Action Group – Early Warning System expert advisory group.	LN	4,5,7	Ongoing	
	Deep End GP advice work – advisory group (NE Glasgow)	JE, OR		Ongoing	

Programme: Understanding health, health inequalities and their determinants

Programme Leads: David Walsh and Bruce Whyte.

Programme Support: Marie Martin, Oonagh Robison, Welcome Wami and external organisations

Other contributors

Area of focus	Projects	Lead	Cross-cutting Approaches	Milestones for 2017-18	Description/ Comments (include whether 'Core' or 'In development')
Understanding Glasgow: the Glasgow indicators project	Development, maintenance and updating of health and wellbeing indicators for Glasgow	BW	1-4, 6, 7	<p>Updating UG is an on-going process through the year</p> <p>2. To be completed by November 2017</p> <p>3. Discussions completed by August 2017</p>	<p>Core</p> <p>1. Developing and updating the content of Understanding Glasgow (dependent on support from external partners and staff resources within Centre) Key areas include:</p> <ol style="list-style-type: none"> a. Population b. Health c. Poverty (including food poverty additions) d. Economic Participation e. Transport f. Environment g. Education h. Children's learning i. Community Safety (incl. social work stats). <p>2. Developing links to Excess Mortality topics</p> <ol style="list-style-type: none"> a. Adding selected graphs and text to relevant sections of UG b. Making links to Excess Mortality report. <p>3. Discussions with external partners regarding support and resources for UG development and updating</p> <ol style="list-style-type: none"> a. Education Dept, GCC b. NHS GGC c. Glasgow Life d. Community Safety Glasgow. <p>4. Resilience Indicators</p>

Area of focus	Projects	Lead	Cross-cutting Approaches	Milestones for 2017-18	Description/ Comments (include whether 'Core' or 'In development')
Excess mortality research programme	<ol style="list-style-type: none"> 1. Continued dissemination of excess mortality synthesis report. 2. National excess mortality analyses: publication of technical journal paper 3. 'Three cities' research (Glasgow, Liverpool, Manchester): <ol style="list-style-type: none"> a. Ethnicity analysis: investigating protective effects for mortality b. Social class analyses c. Journal paper(s) from 'spatial arrangement of deprivation' PhD d. Continued contribution to advisory group for 'impact of local policy and practice' PhD (UWS) 	DW (1-3)	1, 3	Journal papers for 2 and 3a by end of year	<p>Core</p> <ol style="list-style-type: none"> 1. Continued oral presentations and selected written pieces. <p>In Development</p> <ol style="list-style-type: none"> 2. ISD Scotland encouraged to take the lead (partly to encourage personal development). <p>Core</p> <ol style="list-style-type: none"> 3. 'Remnants' of previous three cities programme of research: <ol style="list-style-type: none"> a. part of broader ethnicity and health research programme, with this part examining the potential protective effects of ethnicity on mortality in Manchester compared to Glasgow (and Liverpool) using the Scottish and English Longitudinal Studies (with ISD Scotland, University of Edinburgh, NHS GGC and NHSHS). <p>In Development</p> <ol style="list-style-type: none"> b. Led by MRC-SPHSU: GCPH contribution is support for/co-management of analyses and involvement in writing up of results. <p>Core</p> <ol style="list-style-type: none"> c. Main journal paper resulting from now-completed UoG PhD d. Ongoing advisory role for UWS PhD.

Area of focus	Projects	Lead	Cross-cutting Approaches	Milestones for 2017-18	Description/ Comments (include whether 'Core' or 'In development')
National & international mortality analyses	<ol style="list-style-type: none"> 1. Cause specific mortality analyses by age and gender, Glasgow & rest of Scotland. 2. Scottish and European mortality trends analyses for working age populations. 3. Life expectancy trends by deprivation 4. Age, period and cohort effects analyses. 5. Comparative analyses of poverty and mortality in parts of Scotland and USA (TBC). 6. Trends in absolute and relative inequalities in mortality in Scotland & England 	BW (1-4) and DW (4-6)	1, 3, 4, 6	<p>Project 1 Report completed by June 2017</p> <p>Project 2 - decision on whether to progress this project this year by June 2017 (dependent on having enough trend data)</p> <p>Project 3 - Analyses and write-up of methodology to be completed by August 2017</p> <p>Analyses complete for project 4 by end of year</p> <p>Journal paper for project 6 published by Autumn 2017</p>	<p>Core</p> <ol style="list-style-type: none"> 1. Detailed analyses of cause specific mortality by age and gender, comparing Glasgow with the rest of Scotland. <p>In Development</p> <ol style="list-style-type: none"> 2. Analyses of Scottish and European mortality trends for working age populations (15-44 and 45-64). The timing of this work is dependent on having enough European trend data to compare to. Ideally an extra 5 years of data beyond what was published previously by GCPH. If sufficient years of new data then scheduling of analyses will follow. <p>Core</p> <ol style="list-style-type: none"> 3. Analysis of long-term life expectancy trends by deprivation for Glasgow and rest of Scotland. 4. Age, period and cohort effects in mortality in UK cities (with NHSHS and University of Glasgow). <p>In Development</p> <ol style="list-style-type: none"> 5. Being led by NHS Health Scotland and subject to various uncertainties (hence 'TBC'). <p>Core</p> <ol style="list-style-type: none"> 6. Analyses of trends in absolute and relative socio-economic inequalities in mortality for Scotland vs. England over 1981-2011 undertaken by ISD Scotland and NHSHS. Contributions to journal paper required.

Area of focus	Projects	Lead	Cross-cutting Approaches	Milestones for 2017-18	Description/ Comments (include whether 'Core' or 'In development')
Neighbourhood profiling and analyses	<ol style="list-style-type: none"> 1. Neighbourhood Change project - Understanding health and social trajectories in 2 pairs of Glasgow neighbourhoods. 2. Creation of long-term (1971 -2011) trends in socio-economic health indicators for Glasgow neighbourhoods. 3. Reporting on findings of Making Data Meaningful project and evaluation of West Dunbartonshire profiles 4. Support HS's evaluation of population migration and health in Clyde Gateway area. 5. Evaluation and future development of Children and Young People's profiles for Glasgow Neighbourhoods 6. Advice and links 	BW (1-6) LG & PS (1)	1-4, 8	<p>Project 1 (Neighbourhood Change) will be completed by July 2017</p> <p>Project 2 – Trend data available for use internally in GCPH and by others (July 2017) with short accompanying internal report on how trends created (August 2017)</p> <p>Project 5 - Evaluation of Children and young people's profiles completed and written up by September 2017</p>	<p>Core</p> <ol style="list-style-type: none"> 1. Neighbourhood Change project - Quantitative data analysis was completed in March 2017. The write up of the project findings as a whole, including the desk-based research, key informant interviews and peer research is currently underway, for completion in July 2017. A range of alternative outputs are currently being devised in consultation with the Neighbourhood Change Reference Group, for delivery in summer 2017. 2. Creation of long-term (1971 -2011) trends in socio-economic health indicators for Glasgow neighbourhoods (with ISD Scotland). Trend data available for use internally in GCPH and by other researchers. There will be a short accompanying methodology report on how trends created. <p>In Development</p> <ol style="list-style-type: none"> 3. Reporting on findings of Making Data Meaningful project and evaluation of West Dunbartonshire profiles (working with WWS fellow). Timescales difficult to predict but reporting likely by end of 2017. 4. Support in an advisory capacity HS's evaluation of population migration and health in Clyde Gateway area (Health Scotland). Project likely to be over a period of years due to linkage requirements and other complexities. <p>Core</p> <ol style="list-style-type: none"> 5. Evaluation of Children and Young people's profiles and evidence for action briefings will be carried out in May and June 2017, mainly using a Survey Monkey questionnaire (with Fiona Crawford). Discussions with local and national partners (linked to 6) about whether to update and how to be taken forward during autumn of 2017. 6. Advice and links with other national profiling work involving the Improvement Service, Health Scotland and the OEPB

Area of focus	Projects	Lead	Cross-cutting Approaches	Milestones for 2017-18	Description/ Comments (include whether 'Core' or 'In development')
	with other national profiling work involving the Improvement Service, Health Scotland and the OEPB (Outcomes, Evidence and Performance Board).				(Outcomes, Evidence and Performance Board). Series of meetings planned into the autumn of 2017.
Health inequalities & their determinants	<ol style="list-style-type: none"> 1. Informing Investment to reduce health Inequalities (II). 2. Income & earning inequalities analyses 3. Ethnicity and health project 4. Longitudinal cohort analyses 5. Systematic review of socio-economic inequalities in mortality 6. Public understandings of health inequalities project 	DW (1-6) and BW (1-3)	1, 3, 4, 6	<p>Completion and reporting of analyses for projects 2 and 3 by end of year</p> <p>Results of initial analyses for Project 4 by end 2017</p>	<p>Core</p> <ol style="list-style-type: none"> 1. Contribution to Health Scotland's development of the III tool as part of the advisory group. 2. Analyses of trends in earnings and income in Scotland, England, and a range of UK cities and other parts of the UK. 3. Exploration of literature and undertaking of analyses aimed at gaining a better understanding of the implications of the changing ethnic profile of Glasgow and West Central Scotland (and Scotland as a whole) on future health outcomes and inequalities in the city and region (and country). 4. Joint GCPH-MRC/SPHSU post, currently exploring the impact of different aspects of social class on health inequalities (with MRC-SPHSU, ISD Scotland, and UCL). 5. Led by NHSHS and MRC-SPHSU. Contribution includes undertaking of descriptive analyses and reporting. 6. University of Edinburgh led project. Possible advisory role only.
National and local groups	<ol style="list-style-type: none"> 1. Annual PHINS seminar 2. Input to ScotPHO collaboration in 	DW (1, 2 & 5) and BW (1,3-4)	1, 3	PHINS seminar is 29 th Sept 2017	<p>Core</p> <ol style="list-style-type: none"> 1. Organising programme for seminar 2. Includes ongoing maintenance of web site sections and contribution to steering group

Area of focus	Projects	Lead	Cross-cutting Approaches	Milestones for 2017-18	Description/ Comments (include whether 'Core' or 'In development')
	terms of steering group, news alerts and web pages 3. Scottish Health Survey Advisory Group 4. GGC Health and Wellbeing Survey 5. Society for Social Medicine annual conference				3. Ongoing contribution 4. Ongoing contribution to advisory group 5. Part of organising committee for 2018 conference.

Programme: Sustainable inclusive places

Programme Leads: Russell Jones and Jill Muirie

Programme support: Bruce Whyte (sustainable, inclusive travel, Cat Tabbner (community engagement and empowerment), Gregor Yates (healthy urban environments), Jennie Coyle (communications and knowledge exchange and GoWell), Jessica Watson (community engagement and empowerment)

Other contributors: Carol Tannahill (GoWell), David Walsh (GoWell), Fiona Crawford (M74 study)

Area of focus	Projects	Lead	Cross-cutting Approaches	Milestones for 2017-18	Description/ Comments (include whether 'Core' or 'In development')
Sustainable travel and transport	South City Way monitoring	BW	3,6,7,8		In Development Advisory role, working alongside the University of Glasgow's Urban Big Data Centre and Sustrans monitoring and surveillance team, in project involving use of Strava data to help evaluate impact of new segregated cycling infrastructure in south of Glasgow. Project spec. and funding still to be agreed but looks likely to proceed.
	Understanding trends in bus use, car ownership and walking	JM	3,4, 7		In Development Explore collaboration with UofG, and possibly SPT, building on forced car ownership GoWell research.
	Analysis of Census travel to work/study trends from 2001 and 2011	BW	3,4,6,7,8	Project to start in Aug 2017	In Development Work to be carried out by Physical Activity for Health Research Centre at Edinburgh Uni (subject to accessing data). There are three main aims of this work: <ol style="list-style-type: none"> 1. to examine and model levels and trends of active commuting (walking and cycling) to work and study in Scotland, using 2001 and 2011 census data; 2. to explore how these may differ according to sociodemographic factors linked with health inequalities (age, gender, ethnicity and socioeconomic status); 3. to conduct an economic assessment of the health benefits of walking and cycling (using the WHO HEAT tool). Specification still to be finalised. Impact of recession and young people and car ownership to be included in analysis.

Area of focus	Projects	Lead	Cross-cutting Approaches	Milestones for 2017-18	Description/ Comments (include whether 'Core' or 'In development')
	M74 study. As co-investigator contribute to finalisation of research findings, conclusions and recommendations and production of final report and journal article	FC	1, 2, 4 8	Targeted briefings; Briefing Paper on findings; GCPH seminar (Autumn 2017]	<p>Core Final report due to be published in June 2017. Dissemination and communication plans are being developed to facilitate impact and influence on policy and practice in Glasgow. Plans include:</p> <ul style="list-style-type: none"> • Email alert to key stakeholders/decision makers with link to scientific summary and full report on NIHR website. • Create and issue a plain English summary of findings for all involved as research participants or during community engagement to send out (Lou). • Send out findings alert along with link to community engagement final report, which is finalised (Fiona Crawford/Jennie/Carol Frame). • Write a BP based on findings but drawing on other evidence/research on transport and health, particularly active travel synthesis (Fiona Crawford with help from David/Lou). • Organise GCPH seminar in the autumn placing findings in wider context of urban liveability/inequalities with an invited round-table the following morning to pursue thinking on actions locally. <p>Collaboration with David Ogilvie and Louise Foley (University of Cambridge) and funding by NIHR.</p>
Sustainable travel and transport - Glasgow City Deal:	Knowledge exchange/knowledge into practice collaboration with University of Glasgow and What Works Scotland supporting a pilot project applying the inclusive growth framework (being	CatT, JM, David Waite (UofG)	1, 2		<p>In Development Exploring how GCPH can support knowledge exchange and knowledge into practice as part of a City Deal pilot. Engaging communities would be a key part of this.</p>

Area of focus	Projects	Lead	Cross-cutting Approaches	Milestones for 2017-18	Description/ Comments (include whether 'Core' or 'In development')
	developed by David Waite at UofG)				
Healthy urban environments	Weathering Change	RJ, GY	1,2,3,4,5,6,7,8	<p>Report on Phase 1 Summer 2017</p> <p>Presentation at ECCA conference June 2017</p> <p>Presentation at Int'l Conference on Urban Health</p> <p>Feed into other Sniffer adaptation activity (ongoing)</p>	<p>Core In collaboration with GCC, Sniffer, greenspace scotland (links with innovative approaches programme). Action research exploring community resilience in the face of climate change working with local residents, community-based organisations and public sector organisations in the north of the city.</p> <p>In Development Explore links with other relevant developments (e.g. City Deal/Thriving Places), align with Action Plan for Supplementary Guidance "Green Belt and Green Network" and expand work to other part(s) of the city.</p>
	Children's access to good quality greenspace and play space	BW	1,3,7,8	Completed maps and methodology report, Oct 2017	<p>In Development Continued collaboration with Urban Big Data Centre (University of Glasgow) and planners in Glasgow City Council to create maps and summary indicators of children's access to 'quality assessed' greenspace across the city. This is a development of a basic indicator used in the CHYPs, which did not take account of the quality of greenspace. The aim is to create maps and summary indicators that can be used to influence discussions and planning decisions in Glasgow. As an example, such resources will be potentially of relevance to childcare developments in Glasgow and some information has already been fed into the Childcare Pathfinder</p>

Area of focus	Projects	Lead	Cross-cutting Approaches	Milestones for 2017-18	Description/ Comments (include whether 'Core' or 'In development')
	Strategic Development Plans	RJ, GY, JM, BW, CT, CH, JW	1,5,6,7	Mostly ongoing Consultation response to Supplementary Guidance on Placemaking and Supplementary Guidance on Green Belt and Green Network June 2017	project. Core <ul style="list-style-type: none"> • Actively maintain links with Clydeplan, GCC and others to stay on top of emerging changes to planning system and continue to exert influence to consider health. • Submit consultation responses. • Actively engage with City Region City Deals as appropriate.
	PhD student project	RJ	1,3,7,8	Systematic review article published in SSM Population Health May 2017 Additional articles submitted for publication Summer 2017 PhD completion Autumn 2017	Core External advisor on project on built environment, social capital and physical activity.

Area of focus	Projects	Lead	Cross-cutting Approaches	Milestones for 2017-18	Description/ Comments (include whether 'Core' or 'In development')
				Briefing paper synthesising project Winter 2017	
	Private rented sector (PRS) housing	RJ, GY, OR, LG,	1,6,7	Identification of quant. data sources. (Summer '17) Commission mapping (Summer 17)	In Development Partnership links developed with Shelter and Glasgow City Council DRS: <ol style="list-style-type: none"> 1. Mapping the distribution of PRS across Glasgow and profiling those living there. Including GIS and stakeholder interviews. 2. Identify two or three different areas of the city where PRS is high and comprises different populations to conduct further qualitative. Exploration of the experiences of those living within the PRS. Link with UK Collaborative Centre for Housing Evidence and Urban Big Data Centre.
Sustainable food	Glasgow Food Policy Partnership (GFPP) and Sustainable Food City work.	JM	2,4,7		Core Contribute to the strategic direction of the FPP, support the development of the FPP action plan and lead on relevant projects as appropriate. Focus specifically on food poverty. Jointly fund a PT coordinator for GFPP (with Soil Association) for 1 year who would be located within Olympia.
	Glasgow Community Food Network	JM	4,5		Core Project Support the development and launch of the Glasgow Community Food Network. Note: Due to launch in June 2017.
	URBACT	GY, RJ, PS	2,4,5,6,7,8	Draft action plan Spring	Core Working with Glasgow City Council, developing an action plan to

Area of focus	Projects	Lead	Cross-cutting Approaches	Milestones for 2017-18	Description/ Comments (include whether 'Core' or 'In development')
				2018	support Possilpark to become more food resilient. Meeting requirements of URBACT through ensuring project milestones are met throughout the project. Establishment of governance structure for delivery of project in Summer 2017. Explore links with GFPP.
	Provide support to the Dalmarnock food hub social innovation fund feasibility project.	JW, JM	2,4,7		In Development Potential to consider this as a pilot for sustainable food city principles.
Community engagement and empowerment	Synthesis of GCPH community engagement work and identification of learning that can be used to inform future work (internal and external work).	JW and Cat T	1,2,4,5		Core Outputs to be utilisation focused briefing papers (one on research and one for service providers).
	Innovate and evaluate promising approaches to community engagement to improve health and social justice outcomes	JM, Cat T, JW	2,4,5,7	Briefing paper: learning from using community engagement techniques to link action research with evaluation	In Development Further discussion required and proposal paper in development. Explore opportunities for small scale pilot work to link research, community engagement learning and community action, e.g. <ul style="list-style-type: none"> - Provide community engagement expertise to help link SCDC's action research about implementation of Participation Requests with an evaluation of the Act's impact on inequalities. - Support community group(s) to undertake participatory budgeting - linking community engagement approaches to research, evaluation and community action.

Area of focus	Projects	Lead	Cross-cutting Approaches	Milestones for 2017-18	Description/ Comments (include whether 'Core' or 'In development')
	Evaluability Assessment of Community Empowerment Act	Cat T	2, 7,8		In Development Design and apply community engagement techniques to the evaluability assessment being led by NHS Health Scotland, and providing input on aspects of the Act and secondary legislation from a community perspective.
	To engage effectively and contribute positively to the local community in which the Social Research Hub/the GCPH is based.	JW	2,4,7		Core Initiate, support and manage a range of community engagement and capacity building activities within the Olympia Social Research Hub and in the surrounding area that draw on research expertise in the GCPH. Including work with Children's Neighbourhoods and work with Housing Unit.
GoWell	Lead responsibility for governance & delivery of GoWell commitments	Carol T, JC	1,2,7,		Core Formal governance and accountability through GoWell quarterly Steering Group, co-ordinated by GCPH. GoWell has reached the end of its original final planned phases of data collection and analysis but additional funding has been secured for 2017/18 for data analysis. This analysis, the communication and dissemination of this and the existing outputs and an exit strategy for GoWell are key commitments for the year.
	GoWell Community Engagement work programme	Cat T	1,2,7		Core The GoWell panel exit strategy will conclude with the GoWell Annual event. Panel members will be supported (2 sessions) to plan, develop and deliver their input to the event.
	Communications & dissemination	JC and Cat T	1,2 7	Annual event Sept 17	Core Communications paper brought to May 17 Steering Group to consider communications priorities for remainder of GoWell. Although sponsor funding for ongoing analysis has been secured for an additional year, communications will continue to be resourced by the GCPH and this support and activities will run both concurrently

Area of focus	Projects	Lead	Cross-cutting Approaches	Milestones for 2017-18	Description/ Comments (include whether 'Core' or 'In development')
					<p>and subsequent to the analytical work. The timing and dissemination of reports and findings over the course of the year is crucial and a short-term Knowledge Exchange Forum is to be established to inform this.</p> <p>Key outputs/activities already agreed for the year include the finalisation and dissemination of the wave 4 findings, community cohesion and neighbourhood change , new build, and changes in health-related indicators reports; annual event in Sept 17, final community newsletter to all study areas, ongoing online activity via the GoWell website, Twitter account and e-update. Ecological report on long-term trends, report on qualitative study into foodbank use and other themed outputs from ongoing analysis also planned and communications and dissemination support will be provided for these. Briefing paper on learning from GoWell community engagement strategy and Panel processes and outcomes.</p>
	Ecological monitoring relating to GoWell – record linkage:	DW	1,3	Creation of linked file for potential future analysis	Core Oversee record linkage exercise to link baseline survey data to routinely collected morbidity and mortality data.
	Ecological monitoring relating to GoWell – long term trends	DW	1,3	Short report and data set (for September Annual event)	Core Undertake analyses of long-term trends (1971-2011 where possible) in census-based data relevant to health and its determinants for GoWell study areas and comparator neighbourhoods in Glasgow.
Thriving Places	Support Aspiring Communities Fund project in Gorbals	JM/Carol T with Andrew Fyfe (Research Scotland)	2, 4, 7		In Development Provide advice on the development of this project if successful in being granted funding.

Programme: Innovative approaches to improving outcomes

Programme Leads: Jennifer McLean and Pete Seaman

Programme support: Valerie McNeice (asset-based approaches, perspectives on evidence), Lisa Garnham (CommonHealth), Chris Harkins (PB, Museums and Health), Russell Jones (volunteering and participation), Gregor Yates (volunteering and participation, assets and play)

Other contributors: Bruce Whyte (Glasgow Game), Jill Muirie (Links worker follow on, power animation), Jessica Watson (culture and health), Katie Moore (PB)

Area of focus	Projects	Lead	Cross-cutting Approaches	Milestones for 2017-18	Description/ Comments (include whether 'Core' or 'In development')
Participatory budgeting	Evaluating the health and social impacts of PB Continued support to National BP working group	CH, KM	2, 4, 5, 6, 7	Briefing Paper – Winter 2017	Core Building on earlier influential publications and continued interest in PB by GCPH and nationally, continue to work in collaboration with What Works Scotland on PB research and evaluation. New PB briefing paper in development 'Evaluating the health and social impacts of PB'.
Volunteering and participation	Commonwealth Games Volunteer Study European Championships	RJ, GY	1, 2, 3, 5, 7	Two year follow-up survey report - Summer 2017 Commonwealth Games synthesis briefing paper - Autumn 2017 Article submitted to <i>'Health</i>	Core Publication of final survey report as part of Commonwealth Games Clyde-sider volunteer study. Core Synthesis of key findings from Commonwealth Games volunteer study (survey findings and commissioned qualitative research) for GCPH briefing paper. Core Working with Leeds Beckett University on a journal article for publication in a peer-reviewed journal on qualitative work conducted on the Glasgow 2014 Commonwealth Games volunteer applicants. In Development Publication of feedback from volunteers/volunteer applicants for the

Area of focus	Projects	Lead	Cross-cutting Approaches	Milestones for 2017-18	Description/ Comments (include whether 'Core' or 'In development')
	(summer 2018) Evaluation of Volunteer Glasgow's Volunteer Charter.			<i>and Place'</i> - Autumn 2017	2018 European Championships. Ongoing involvement in the steering groups for the development of the volunteering programme. In Development Supporting Volunteer Glasgow's ongoing use of the Volunteer Charter for Glasgow by evaluating the impact of the charter on participants.
Social enterprise as health interventions	Homes for Good evaluation	LG, PS	2, 7, 8	Wave 1 completed February 2018 Wave 2 data collection by May 2018 Publication of underpinning theory by January 2018	Core Commonhealth project (Homes for Good). Develop methods to evaluate new pathways to health creation arising from social enterprise (part of wider MRC funded CommonHealth project led by the Yunus Centre at Glasgow Caledonian University in collaboration with Stirling University, Homes for Good, NG Homes and YPeople).
Asset-based approaches across services and settings	Synthesis and communication of learning on asset-based approaches Exploration of leadership supporting an asset-	JMcL/VM	1, 4, 5, 7, 8	Animation of learning – Winter 2017 Initial scoping paper	In Development Explore potential of an accessible resource to bring together and communicate learning from asset-based approaches work across multiple settings, highlighting common themes and value and principles of this way of working. Continued development of resources supporting practitioners interested in asset-based approaches. In Development Initial scoping paper proposed outlining rationale for interest in this area, areas for exploration and identification of sources of literature. Linkage to Action across of Lifecourse programme – Review of the

Area of focus	Projects	Lead	Cross-cutting Approaches	Milestones for 2017-18	Description/ Comments (include whether 'Core' or 'In development')
	<p>based culture change</p> <p>Animating Assets follow up</p> <p>Asset-based approaches in primary care</p> <p>Partnership working and sharing learning</p>			<p>Autumn 2017</p> <p>Autumn 2017</p> <p>Ongoing</p> <p>Ongoing</p>	<p>literature on citizenship in the early years and Scottish Children's Neighbourhoods.</p> <p>Core Exploration of the sustainability of asset-based approaches in local community settings – follow up of Glasgow Animating Assets research sites to review progress, activity, emergent issues and local impact since the programme finished, with a view to further longitudinal review/contact. Further explore strengths and challenges of creating the conditions to support asset-based working locally.</p> <p>In Development Continued support for early conversations and work exploring asset-based approaches in practice in primary care. Working in collaboration with the GP lead and local third sector, it is hoped will offer the opportunity to test the application and impact of asset-based principles in a community setting.</p> <p>Core Continue to actively take up opportunities to present and share learning from across asset-based approaches programme of research and learning and provide support, advice and input to those exploring the potential of or implementing asset-based approaches both on long term and ad hoc basis.</p>
Culture and health	<p>Representing Communities</p> <p>I. Support for community-led grant application.</p> <p>II. Submit 2nd draft of Policy</p>	<p>PS</p> <p>JW</p> <p>PS</p>	1, 2, 7,8	<p>Summer 2017</p> <p>Summer 2017</p>	<p>Core Exit planning and delivery for Representing Communities: providing support for the community-led development of a grant application(s) by Dennistoun Community partners (Dennistoun Library and Impact Arts) to ensure a legacy for Representing Communities work, with a focus on heritage and youth participation in Dennistoun.</p> <p>II and III. first drafts to receive feedback and by resubmitted accordingly.</p>

Area of focus	Projects	Lead	Cross-cutting Approaches	Milestones for 2017-18	Description/ Comments (include whether 'Core' or 'In development')
	Press chapter III. Briefing paper IV. PhD Supervision Museums and health: I. Glasgow Life Befriending project II. Cultural Services and Health book chapter Community Centres as resources for regeneration PhD	PS PS PS,CH PS (Mark O'Neil, Duncan Dornan) PS (Ade Kearns, Dave Beck)		Winter 2018 Responding to Glasgow Life timescale-likely to see progress Autumn 2017 Winter 17/18 Annual review August 2017	IV PhD student Maddie Phillips to submit draft of thesis. I Supporting Glasgow Life in evaluability assessment of befriending project with Wheatley Group. PhD supervision. Involves bi-monthly meetings with student and co-supervisors.
Exploring assets through play	Exploration and drawing together of evidence on benefits of play	GY	2, 5, 8	Briefing paper - Spring 2018	Core Explore available evidence on the benefits of play, current policy on play and possible actions required to translate policy into practice to improve play opportunities (particularly in deprived areas). Briefing paper development. In Development Explore possibilities with Baltic Street Adventure Playground to co-design research to examine the role of the initiative as a community resource which has impact beyond the children, families, communities and places they engage.

Area of focus	Projects	Lead	Cross-cutting Approaches	Milestones for 2017-18	Description/ Comments (include whether 'Core' or 'In development')
					Linkage to Baltic Street Adventure Playground through Scottish Children's neighbourhood work in the Lifecourse Programme.
Glasgow Game	Glasgow Game in a box	BW	2, 3, 5, 6, 7	As required	Core Continued support, awareness raising and usage of the Glasgow Game in a Box by partners and interested others. Provision of facilitation as required.
Developing a perspective on 'evidence'	Exploring the nature of 'evidence'	JMcL/VM/PS	1, 5, 6, 8	Publication of blog - Summer 2018	In Development Development and publication of an initial blog on the GCPH website exploring wider perspectives in relation to the nature of evidence. In Development Hold small workshop/conversation to progress discussion around exploring the nature of evidence for asset-based approaches and wider interests. In Development Exploring participatory research and evaluation methods and sharing examples. Possible future collaboration with PHEN.
Public Health Evidence Network	Power animation	JM	1, 2, 4	Completion - Autumn 2017	Core Power animation completed as per 2016/17 work plan, with release and dissemination agreed and detailed within communications plan for work. In collaboration with NHS Health Scotland. Project due to end in 2017/18 Q2.
Link worker follow-on	Membership of Links Worker Monitoring and Evaluation group and Advisory Group	JM, PS, JE	4, 5, 7, 8	Attend meetings as required reviewing M&E group membership at end of	Core Member of Links Worker Monitoring and Evaluation Group (JM) at least for the first year, to give continuity and 'memory' to the group's discussions. GCPH will also be represented on the Advisory Group (PS,JE) with a role offering learning and evidence from the other relevant work and

Area of focus	Projects	Lead	Cross-cutting Approaches	Milestones for 2017-18	Description/ Comments (include whether 'Core' or 'In development')
				year	research GCPH has been involved in, and also to offer a 'critical friend' perspective.
Partnership working, sharing learning and supporting practice across work of Programme	Sharing learning and dissemination of findings Partnership working and support Expertise on advisory/steering groups	ALL	1, 2, 6, 7, 8	Ongoing, as required/ opportunities identified	Core Continue active dissemination of research findings and learning from areas of focus and projects across Programme, taking up opportunities for sharing learning where possible, with external audiences and partners and also across GCPH. To continue to increase the impact of GCPH work on approaches for improved outcomes by establishing joint working and building chains of alliances. Provide support and advice to organisations (statutory and third sector) that are exploring and developing new innovative approaches to practice.
	Pittsburgh Collaboration	PS	5, 7	Fortnightly Skype calls. Attend Pittsburgh session September 2017	Core Eighteen month project exploring what Pittsburgh can learn from Glasgow' experience of responding to de-industrialisation and developing resilience strategy. Presentation/ workshop will be required from PS in September and taking share of organising guest contribution to fortnightly Skype calls.
	Glasgow City Health Inequalities commission, Mental Health Support group	PS	1,4,5,7	Reporting Summer 2017 Joint workshop Autumn 2017	Core To support launch and dissemination of outputs. Knowledge translation activity through joint Health Scotland/HSCP/NHSGGC/GCPH event.



**Glasgow Centre for Population Health
Management Board Meeting
Monday 12 June 2017**

2017-18 Budget Plan

Recommendations

The Management Board is asked to:

- Approve the budget plan for the Centre for the period 1 April 2017 to 31 March 2018

Budget plan for 2017-18

1. The Centre's total budget for 2017-18 is £1,579,432. This is less than previous years due to a small reduction in Scottish Government funding and in project-specific external income. A carry forward of £115,432 is available as accounted for in the paper relating to the Month 12 budget position.
2. Scottish Government funding of £1.25m is currently confirmed for the financial year. The attached letter indicates the intention to continue funding at similar levels for the foreseeable future.
3. Other income of £106,000 is tied to the delivery of core projects including *Childcare Pathfinder* (£20,000 from Big Lottery Fund), *Building Connections* (£25,000 from Joseph Rowntree Foundation) and the evaluation of *Big Noise* (£30,000 from People's Postcode Lottery and NHS Health Scotland). The balance is made from smaller contributions to core projects from partners such as the Yunus Centre, Shelter, and Robert Wood Johnson Foundation. These smaller amounts of income relating to staff time are in turn reflected in the content of the work plan.
4. Sponsor contributions to GoWell amount to £108,000 (Scottish Government and NHS Health Scotland). We await confirmation of an NHS Endowment Fund contribution of £40,000 and the budget plan will be updated upon news of this.
5. The budget plan for 2017-18 (Appendix 1) reflects the revised work plan with allocations made in line with planned activity in the new programmes (lines E1-E4): *Action on Inequality, Understanding Health Inequalities, Sustainable Inclusive Places and Innovative Approaches to Improving Outcomes*. Planned expenditure for Line E5 *GoWell* includes the ring-fenced carry forward from 2016-17 that sits within this programme (£12,000).
6. Line E6 contains the budget designated to the *New Perspectives on Health* dimension of our work. Until the end of 2016-17, this was delivered through our commissioned collaboration with the International Futures Forum. We will begin a formal procurement process for this contract in June 2017. *Allocation to*

Networks (E7) is a new line to reflect our financial support for key networks of change and knowledge translation including the Glasgow Clyde Valley Green Network, UK Healthy Cities and Glasgow Community Food Partnership.

7. Costs for *communications, office management and administration* (E8, E9 and E10) remain unchanged from last year, in the 2017-18 budget plan.
8. *Core staffing* salaries are the single biggest area of expenditure (E11). This reflects the consolidation and growth of the staff team in recent years. The decision to bring more work 'in-house' was taken by the Board in past years, in line with the recognition of the value of sustained relationships; cutting of costs associated with procurement, and external on-costs; and the value of having flexibility to respond to opportunities in year through the contribution of staff time.
9. All staff funded through GCPH core funding are on NHSGGC contracts, which run to end June 2018. Contracts will be extended when formal confirmation of continued funding is received.
10. Given the emphasis being placed in the work plan on supporting processes of change, community engagement, and in being effective influencers, we recognise that there will be a renewed need to look at the team's skill-set and competencies in these areas as well as ensuring ongoing professional development in public health competencies. In 2016-17, staff development costs were funded from Centre Management Costs and we are considering the best approach for the current year.
11. As in previous years, the spend profile is expected to be weighted towards the end of the year as commissioned work is completed and invoices received for externally contracted work and events. Based on the work plan for 2017-18 the budget for the year is fully committed, reflecting the range of commitments and planned core activities.
12. The following risks are noted with respect to delivery in line with this proposed budget plan:
 - Staffing changes. Vacancies arising in-year are the most likely cause of variance from the plan. Known changes are taken into account in the budget plan, but further vacancies may arise in year.
 - Changes to externally commissioned work. Values and timescales for commissioned work are provisional until final specification and tendering is complete.
 - Full year costs of accommodation have been worked out on the basis of costs to date. However, some elements such as utilities and ongoing maintenance costs remain uncertain.
 - Requests for new work arising in year. These would be considered in light of the current budget position and any financial consequences agreed with the Board.
13. The Management Board will receive reports on actual and projected spend at each quarterly meeting. This will include contingency plans or additional proposals for spend if significant variance from plan is anticipated during the course of the year.

Pete Seaman
June 2017

Appendix 1

2017-18 Financial Plan

		<i>Planned 2017/18 £</i>
<i>Income</i>		
I 1	Annual SG Allocation	1,250,000
I 2	Sponsors Contribution to GoWell & GoEast	108,000
I 3	Other Income	106,000
	<i>Total Income 17-18</i>	<i>1,464,000</i>
I 4	Carry Forward from previous years	<i>115,432</i>
<i>Total Available 17-18</i>		<i>1,579,432</i>
<i>Expenditure</i>		
<i>Research:</i>		
E 1	Action on Inequality	71,000
E 2	Understanding Health Inequalities	33,600
E 3	Sustainable Inclusive Places	55,950
E 4	Innovative Approaches to Improving Outcomes	30,500
E 5	GoWell/GoEast	120,000
E 6	New Perspectives on Health	48,000
E 7	Allocation to Networks	27,000
	<i>Total Research</i>	<i>386,050</i>
<i>Communications:</i>		
E 8	Communications	45,000
	<i>Total</i>	<i>45,000</i>
<i>Management and Administration</i>		
E 9	Centre Management, Admin & Running Costs	27,000
E 10	Accomodation Costs	118,000
E 11	Core Staffing	1,003,382
	<i>Total Management & Admin</i>	<i>1,148,382</i>
<i>Total Expenditure</i>		<i>1,579,432</i>
<i>Balance</i>		<i>(0)</i>