



**Glasgow Centre for Population Health
Management Board Meeting
Wednesday 20 June 2018**

GCPH Management Board: Interim Chair

Recommendations

Board members are asked to:

- Note that John Brown has taken on additional interim responsibilities as Chair of NHS Tayside, resulting in his having to step down as Chair of the GCPH Management Board for a period of time.
- Approve the proposal that Rev John Matthews be appointed as interim Chair of the GCPH Management Board until at least end 2018, and until John Brown is in a position to resume the full span of his roles within Greater Glasgow and Clyde.
- Note that Prof Moira Fischbacher-Smith will continue as Vice-Chair of the Management Board, and will work closely in partnership with John Matthews during this period.

Background

1. The terms of reference for the GCPH Management Board (attached) specify that the Board will be chaired by the Chair of NHS Greater Glasgow and Clyde, in recognition of the importance of ensuring coherence with the governance processes of the NHS Board (as GCPH staff are NHS employees) and close alignment with the Board's responsibilities for improving the health of the population. The Vice-Chair is nominated by the Chair and comes from one of the other partner organisations (the University of Glasgow or Glasgow City Council).
2. Members will be aware that an atypical situation has arisen in which our Chair, Mr John Brown, has agreed to take on additional responsibilities on an interim basis as Chair of NHS Tayside. It is likely that these responsibilities will continue until at least the end of 2018. As a consequence, Mr Brown has had to step away from some of his other commitments within Greater Glasgow and Clyde for this period, including his chairing of our Management Board.

Proposal of interim Chair

3. Following discussion with the GCPH Director and Vice-Chair, it is proposed that Rev John Matthews be approved as interim Chair of the Management Board until Mr Brown returns. Rev Matthews has generously agreed to take on this role, on top of his other significant commitments.

4. Rev Matthews is a Non-Executive Director on the Board of NHS Greater Glasgow and Clyde, and Chair of the Board's standing committee on public health. He is also a member of the Glasgow IJB and Chair of the IJB's public engagement committee. These roles, on top of his long-standing interest in and commitment to social justice and public service, make him ideally placed to be our interim Chair.
5. Members of the Management Board are asked to approve this appointment for the period to Mr Brown's return to his full duties within Greater Glasgow and Clyde.
6. Prof Moira Fischbacher-Smith has kindly agreed to provide support to Rev Matthews in her role as Vice-Chair, and will work closely in partnership with him during this period.
7. Any other Board members who would welcome an introductory meeting or conversation with Rev Matthews, should please let him know directly. He would be very keen to hear views and have the opportunity to get to know Board members beyond the formal meeting cycle.

Carol Tannahill, Director
(on behalf of, and approved by, John Brown CBE)



Glasgow Centre for Population Health Management Board Terms of Reference

Role of Glasgow Centre for Population Health Management Board

The Management Board will, collectively and severally, ensure good governance of the Glasgow Centre for Population Health on behalf of the core partners, and provide leadership, advice and support to the Centre's management team and staff. Its strategic role is to ensure the overall delivery of the Centre's work and its continued relevance to, and interface with, partners' interests. The Board also has responsibilities for ensuring that the organisational culture supports staff wellbeing and development, and reflects the GCPH's values and working principles. The Management Board will work closely with the Executive Management Team to ensure that the Centre's work is fully operationalised and supported appropriately by partners, and will take cognisance of the views and opinions of the External Advisory Group.

Remit and responsibilities

1. To agree the Centre's strategic plans and annual financial plans.
2. To ensure appropriate governance – including financial governance, human resource governance, and research governance – and quality of the Centre's activities.
3. To review, annually, the Centre's progress and achievements, taking account of any feedback from the External Advisory Group.
4. To develop the Centre's core partnership, and to ensure the securing and delivery of contributions from individual partners to the success of the Centre.
5. To respond to, and promote, the outputs of the Centre through supporting changes in policy and practice within partner organisations and more widely, in the light of new findings.
6. To share accountability for the management and leadership of the Centre with the Executive Management Team (EMT), delegating authority to the EMT to ensure operational developments and delivery are taken forward within the strategic framework agreed by the Management Board.

Ways of working

The Board will meet quarterly in Glasgow, typically for two to three hours. Board meetings will be chaired by the Chair of the NHS Board, with the executive lead provided by the Director and Associate Director of the Centre. A Vice-Chair will be nominated by the Chair, and will be a senior representative from either the University of Glasgow or Glasgow City Council. The Chair and Director(s) together will agree the agenda.

Members of the Board will be asked for advice and comment on Centre developments between Board meetings, via telephone, email, or face-to-face discussion. Members of the Board will be expected to draw any opportunities – or issues of concern – to the attention of the Executive Management Team or the Chair of the Board, as appropriate.

On occasion, members of the Board may be asked to act as representatives for the Centre – for example by chairing seminars, writing discussion papers, etc.

On an ongoing basis, members of the Board will have a role in disseminating and supporting the use of the Centre's work within their own organisations and networks.

Membership

Membership of the Board will be drawn from all of the Centre's partner organisations – Scottish Government, NHS Greater Glasgow and Clyde, Glasgow City Council and the University of Glasgow – with the local partners having two representatives attending meetings and Scottish Government, one representative. The Chief Officer of Glasgow's Integration Joint Board, the GCPH Director and Associate Director will also be full members of the Board. Should there be a need for a formal vote each partner organisation will have one vote, as will GCPH.

The Board will be quorate when there is at least one representative present from each of the partners and GCPH.

Where partners operate a pool system to rotate membership, it is expected that these individuals (all equal, full members) will liaise to ensure that at least two are present at meetings. Partners will take responsibility for agreeing attendance and communicating who will attend from their organisation to the GCPH office manager, in advance of each meeting.

Membership as at May 2018

Scottish Government:

Mr Daniel Kleinberg, Head of Health Improvement

NHS Greater Glasgow and Clyde:

Mr John Brown, Chairman (Chair)

Dr Linda de Caestecker, Director of Public Health

Dr Michael Smith, Associate Director for Mental Health and Addictions

Dr Sonya Scott, Consultant in Public Health

Glasgow City Council:

Cllr Jennifer Layden

Baillie Russell Robertson

Mr Colin Edgar, Head of Communication and Strategic Partnerships

Mr Kevin Rush, Head of Economic Development

University of Glasgow:

Prof Moira Fischbacher-Smith, Assistant Vice-Principal Learning and Teaching (Vice Chair)

Prof Laurence Moore, Director, MRC/CSO Social and Public Health Sciences Unit

Prof Nick Watson, Director of What Works Scotland

Prof Emma McIntosh, Deputy Director of HEHTA

Glasgow HSCP:

Mr David Williams, Chief Officer

Glasgow Centre for Population Health:

Prof Carol Tannahill, Director

Dr Peter Seaman, Acting Associate Director



**Glasgow Centre for Population Health
Management Board Meeting
Wednesday 20 June 2018**

General Update

Recommendations

Board members are asked to:

- Note and discuss this update on progress since the last Management Board meeting on 12 March 2018.
- Confirm the ongoing commitment of the partner organisations to the work of the GCPH.
- Identify any developments and priorities in their own areas that are of potential significance for the Centre.

Governance, partnership and staffing

1. As noted at the March Board meeting, Scottish Government has confirmed core funding for GCPH of £1.25m for the 2018/19 year. Funding is contingent on ongoing commitment from the local partners. The funding letter also asks for a workplan for the 2018/19 financial year and a three year forward look. These are being discussed as a separate item on this meeting's agenda.
2. Staff contracts have now been updated: all core staff with more than two years' service have been offered permanent contracts with NHSGGC; and those working on specific time-limited projects or with less service, a fixed-term extension to 31 June 2019. Pete Seaman has accepted an extension to his acting Associate Director position until the end of the 2018/19 financial year, to coincide with the period of Carol Tannahill's current role with Scottish Government.
3. There are two changes to membership of the Management Board. Rev John Matthews is proposed as the interim Chair, during the period of John Brown's role with NHS Tayside (paper 353 on this meeting's agenda); and Cllr Jennifer Layden will replace Cllr John Letford as one of Glasgow City Council's representatives. Introductory meetings have taken place with both Rev Matthews and Cllr Layden, and both are warmly welcomed to the Management Board.
4. The team were delighted to hear that our Directors' work and leadership at GCPH and throughout her career has been recognised in the Queen's Birthday Honours list, receiving an OBE for services to Public Health. Congratulations Carol!

5. With the General Data Protection Legislation (GDPR) coming into force on the 25th May 2018, our office manager Janet Robison led action to ensure the team and our systems are compliant. This included reviewing all files held electronically and manually in the GCPH, registering files on NHSGGC's Information Asset Register, and ensuring the retention and destruction policy was adhered to. Discussion with the Board's GDPR Officer indicates we are compliant in relation to the consents we hold for our network and we will communicate this in our next e-update and elected member update. The GCPH team have been kept abreast of requirements, and a lunchtime seminar with the Board's GDPR Officer is being arranged to clarify any remaining issues.
6. The iMatter team report (the NHS Scotland staff survey) for 2018 has been received and indicates 'green' scores for all items describing people's 'Experience as an Individual', and 'My Team/My Direct Line Manager'. The third section, on 'My Organisation', was answered inconsistently, with some staff taking this to refer to GCPH and others to NHSGGC. In this section, all but three items were also green – those three relating to visibility of senior managers, involvement in decision-making, and performance management. A short-life working group was formed to identify particular strengths, and develop an action plan for improvement. Overall GCPH is viewed positively by staff, who are clear on their roles and responsibilities and feel supported and treated fairly.
7. Action has also been taken to reach compliance on the mandatory LearnPro modules and assessments. Individual end of year reviews and personal/professional development planning are well advanced.
8. The Centre contributed to an IJB development session as part of the process of their strategic update. Pete and Fiona Crawford presented on 'Population Health in Glasgow' focusing on trends and potential for action. Later discussion focused on devolution of power and decision-making to communities within HSCP.

Developments

9. Members of the GCPH team have contributed in a range of ways to the development of the Greater Glasgow and Clyde Public Health strategy. The strategy has not been finalised in advance of our own workplanning processes, but the proposed aims, objectives and programmes have shaped our plans. Similarly, we have been involved in the processes leading to the identification of six public health priorities for Scotland. These have also influenced our proposed workplan. The six priorities are:

'A Scotland where we...

live in vibrant, healthy and safe places and communities

flourish in our early years

have good mental wellbeing

reduce the use of and harm from alcohol, tobacco and other drugs

have a sustainable, inclusive economy with equality of outcomes for all

eat well, have a healthy weight and are physically active.'

10. Following discussion at the March Board meeting, Pete and Carol met with Kevin Rush and Colin Edgar to discuss the potential for GCPH to inform inclusive growth developments within Glasgow. Key issues included the need to set out what inclusive growth could look like in Glasgow; the importance of articulating what would need to change to ensure that economic growth is more inclusive; and the need for a better understanding of how health constraints and consequences could be more central to the

decisions taken about the city's economic development. The potential of a joint post embedded within the Council was discussed and a proposal is being developed for consideration and funding.

11. At the state of the city economy event in November 2017, the launch of a Connectivity Commission for Glasgow was announced. The Commission will explore challenges and opportunities with the city centre's public realm; congestion and pollution levels, and public transport patronage. Jill Muirie presented GCPH evidence to the Commission on 2 May on the potential for transport – and the city's approach to transport – to contribute to improved health and reduced health inequalities. There was considerable interest in this input.
12. Child Poverty Delivery Plan 2018-22 (*'Every child, every chance'*). The Centre's work has been heavily cited with explicit reference to Healthier Wealthier Children, Cost of the School Day recommendations and Children's Neighbourhoods Scotland.
13. In our February update, developing work with the ALLIANCE on a dementia friendly co-production project was highlighted. We are disappointed to report the Life Changes Trust have decided not to request a more detailed proposal on this work highlighting similarities with work they have funded with Glasgow Life to establish a network of dementia-friendly mini-hubs in north east Glasgow. Committee members suggested applying for dementia-friendly communities development funding when it opens in autumn 2018. We will review this option.
14. The Centre have been named as a co-applicant on a bid to NIHR on the evaluation of the Glasgow 'Avenues' and 'City Ways' active travel infrastructure projects. Led by the Institute of Occupational Medicine Bath, the 'Transport for Healthy Air Quality' (TransportHAQ) proposal specifies an evaluation of whether there is a change in air quality, improvements in health due to air quality changes and an economic analysis of impacts. GCPH's role if successful, led by Bruce Whyte, will be in stakeholder and community engagement.
15. Children's Neighbourhoods Scotland: the Bridgeton and Dalmarnock site continues to develop well, and a small amount of additional funding has been secured from Clyde Gateway to enable current staffing to be sustained for the full financial year. The evaluation strategy is being progressed, incorporating a capabilities approach, and a visit to the Shankhill in Belfast has laid the ground for a learning partnership with their work on children's neighbourhoods. Following the formal launch in February, Children's Neighbourhoods has also piqued interest and gained support from Scottish Government, with a financial commitment of £2m for the period of the current Child Poverty Delivery Plan to spread the approach to another urban centre, a small town and a rural area. Work is currently being undertaken to look at organisational models to support this roll-out, and also to explore potential sites on the basis of prevalence and local authority commitment to addressing child poverty. The roll-out is also required to strengthen links between children's neighbourhoods and approaches to local economic development.
16. New Perspective on Health. The Frameworks Institute ran a session for members of the GCPH team and external invitees on Communicating for Action on Change with a focus on health inequalities. The workshop built on the work Frameworks produced for the Joseph Rowntree Foundation on building lasting support to tackle poverty using evidence-based approaches to framing messages about poverty and inequality. This was supported by the New Perspectives on Health budget and allowed 40 participants to attend.

17. Aberdeen City has expressed interest in learning from the GCPH model, in terms of the approach to public health in the council area and also specifically in relation to the evaluation of the Big Noise programmes delivered by Sistema Scotland. Aberdeen City Council has been restructured to support delivery of early intervention and prevention, and asked for GCPH input to help realise the potential of the new structure and associated leadership commitment. An initial workshop was held with their Chief Executive and senior managers on 22 May. Ongoing support has been requested.

Outputs and activities

18. 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 digital activity.

Events and seminars

19. The fourth lecture in Seminar Series 14 was held on 23rd March at 200 St Vincent St, and took a different format than usual, with Pete chairing a 'transatlantic conversation' with three US-based experts on the subject of resilience and climate change. '*Building cities from the people-up: empowering communities for health and resilience*' brought together Lolita Jackson, Special Advisor on climate policy in the New York City Mayor's office, Grant Ervin, Chief Resilience Officer and Assistant Director in the Department of City Planning, Pittsburgh, and Jeremy Kalin, President and CEO of Eutectics and a former Minnesota State Representative, to explore how cities in the USA are supporting the resilience and sustainability of people and places. The seminar was attended by 101 people.
20. The fifth lecture in Seminar Series 14, '*Is a basic income good for your health?*' was unfortunately postponed due to an ice storm preventing our speaker Prof Evelyn Forget from leaving Canada. This has been rescheduled as the opening seminar in Seminar Series 15 in September. A more focused workshop with a group involved with Scotland's basic income pilots will also be held.
21. The 21st Glasgow's Healthier Future Forum was held on Thursday 19th April at 200 St Vincent St. *Resilience in Glasgow – where next?* was an opportunity to review our progress over the last five years since resilience became part of the policy and practice discourse in Glasgow. Speakers included Sarah Toy, Chief Resilience Officer for Bristol's resilience strategy and her Glasgow counterpart, Duncan Booker. A series of workshops focused discussion on how we continue to embed resilience thinking, what still remains to be done and where the resilience concept might take us next. 81 people attended the forum.
22. The above event was an anchor point for series of blogs focused on the subject of 'resilience for population health'. Content was written by members of the GCPH team and by external guest bloggers (Cathy Sharpe of Research for Real; Jamie Cooke of Royal Society of Arts Scotland; Sarah Ward of the Children's Neighbourhoods Scotland project; and Andressa Gadda from the University of Stirling). The series covered a broad range of topics including citizenship in the early years, social protection and asset-based approaches for health improvement. The blogs were published over the course of a two week period in advance of the Healthier Future Forum event. The individual blogs are currently being brought together as a summary paper to be published as an online resource.
23. The Seminar Series has been delivered in-house for the past year on account of our funding term creating a difficult basis to negotiate an external contract. Carol, Pete and

our Communications Manager, Jennie Coyle met recently to review the experience and propose ideas for 2018-19.

Forthcoming

24. We will have a presence at the annual NHS Scotland event being held at the SEC on 18-19 June 2018 through an exhibition stand. The theme of this year's event is 'Delivering Now, Improving for the Future'. Jennifer McLean has had a poster abstract accepted on the Children's Neighbourhoods Scotland project.
25. We are in the process of planning our next GHFF event which will be held in September with a focus on young people. The Board will be updated on this as plans develop.
26. The annual PHINS seminar will be held on 21st September.
27. The Faculty of Public Health annual conference will be held on 1-2 November in Peebles. Several members of the team have submitted abstracts.

Centre contributions to partner/other events

28. A joint GCPH/NHS GGC housing and health workshop '*Foundations for wellbeing: building connections between public health and housing*', was held in The Lighthouse on 14th March. Chaired and led by Jackie Erdman, this was attended by 50 delegates from a range of housing and health backgrounds to explore how the public health and housing sectors in Scotland could work together more effectively to reduce health inequalities. Inputs were provided by Emily Tweed on the 2017 ScotPHN report 'Foundations for well-being: reconnecting public health and housing' and Carol Tannahill on GoWell. An event report has been produced.
29. On 26 April 2018 we hosted a visit of 22 visitors from Bergen, Norway as the first stop on their two day learning journey to Glasgow. The majority of the visitors were either head teachers or school managers, with a few working in the department of culture, the department of sport or on area-based programmes in deprived areas of Bergen. Their request was to find out more about the public health issues of Glasgow and to learn more about GCPH's work, particularly around deprivation, learning, upbringing and inclusion. Russell Jones presented an overview on Glasgow's health and the GCPH, Gregor Yates presented on 'Community resilience in the face of climate change', Jennifer McLean presented on 'Asset-based approaches' and Valerie McNeice presented on 'Resilience and the early years'.
30. The team continue to contribute to university courses and this has included: Jennifer McLean and Valerie McNeice delivering a half day workshop on asset-based approaches for occupational health students doing an MSc at Glasgow Caledonian University (01.03.18); Pete Seaman and Cat Tabbner teaching a module on Public Health Theory into Action for the GCU MSc in Public Health (05.03.18); Cat Tabbner and Julie Clark (UWS) teaching at UWS's School of Media, Culture and Society symposium "Spring into methods – participatory action research methods in the field", with a presentation entitled: 'To understand the world or to change it? Research knowledge exchange and empowerment with a community panel' (27.04.18).
31. In addition, Pete Seaman presented at the 'Developing Shared Public Health Priorities for Scotland' Engagement Events (27.02.18); David Walsh presented on excess mortality to the Edinburgh Skeptics Society (15.03.18); Bruce Whyte presented on the Understanding Glasgow children and young people's profiles at a ScotPHO event in Perth: 'Using public health intelligence to influence decisions' (08.05.18); David Walsh

presented on the recent ethnicity work at the Migration, Ethnicity, Race and Health (MERH) conference in Edinburgh (18.05.18).

Publications

The following reports have been published since the last meeting.

32. *Evaluation of Glasgow's Volunteering Charter*. Gregor Yates & David Bomark (March 2018).
33. *Glasgow 2014 Commonwealth Games clyde-sider study – a synthesis of the learning*. Gregor Yates and Russell Jones (April 2018).
34. *Weathering Change: community resilience in the face of climate change*. Gregor Yates (April 2018).
35. Three GoWell reports have also been published recently: *Food and beyond: exploring the food bank experience* (March 2018); *Village life: the early experience of living in the Commonwealth Games Athletes' Village development, Glasgow* (April 2018); and *Monitoring the impacts of the Commonwealth Games and regeneration on the East End of Glasgow: headline indicators 2012-2016* (April 2018).

Forthcoming publications

36. *Supporting community based evaluations of participatory budgeting* (August 2018). The profile of Participatory Budgeting (PB) in Scotland has never been higher and with this increasing profile and resource allocation to PB, comes greater scrutiny of PB processes and impacts. This briefing paper aims to support the evaluation of PB and proposes a logic model to support community-based PB practitioners and community members involved in the planning, implementation, monitoring and evaluation of PB.
37. *Rising levels of personal unsecured debt: exploring the implications for public health* (August 2018). Unsecured personal debt, including; credit cards, overdrafts and short-term loans, is at its highest level in the UK since before the 2008 economic recession; with the level projected to rise higher still in the coming years. The evidence reviewed in this briefing paper makes clear the risks to public health; those with this form of debt are significantly more likely to have mental health disorders compared to the wider population and there are also proven links to worsened physical health.
38. *Future of social protection* (September 2018). This was produced by the three social protection interns reviewing literature on alternative approaches to social protection. With evidence that current austerity programmes are failing to ameliorate the harshest effects of poverty, the report is intended to stimulate discussion on the future role of social protection and the values that may underpin it and fit within a wider context of rapidly changing labour markets, climate and ecological challenges, and intergenerational fairness, gender and equality group justice. Rather than making the case for a singular solution, the report explores some of the wider challenges and opportunities that might need more attention, particularly for those Scottish local authorities exploring the concept and feasibility of a basic income.
39. Other GCPH briefing papers and reports in development include: Representing Dennistoun project; Neighbourhood change project; Citizenship in the early years; CHANGE project one year evaluation; and Money advice worker in primary care settings pilot roll-out evaluation and a report on earnings inequalities.

Consultation responses

40. We have responded and published our responses to the following consultations:
 - Scottish Government consultation on 'A Connected Scotland: Tackling social isolation and loneliness and building stronger social connections' (April 2018)
 - Scottish Parliament Inquiry into Poverty and Attainment (April 2018)
 - Glasgow City Council consultation on the City Charter (February 2018)

Media coverage

41. Bruce Whyte was interviewed and filmed by BBC Alba for the *Eorpa* Gaelic programme on the health impact of the Commonwealth Games. He drew on our cycling analysis data, GoWell East and our study of the clyde-sider volunteering programme. The programme aired on 29.03.18.
42. GCPH was mentioned in an article in the Herald based on our response to the Scottish Government's consultation '*A healthier future – action and ambitions on diet, activity and healthy weight*': "Keep children in school at lunchtime to stop them eating high-calorie junk foods, say health experts" (09.03.18).
43. GCPH was mentioned in an Evening Times article based on our response to the Scottish Government's consultation on diet, activity and healthy weight consultation: "School meals work in Glasgow helping to tackle obesity" (10.03.18).
44. GCPH evaluation of Big Noise was mentioned in the Herald's obituary of Jose Abreu, founder of *El Sistema*: "Jose Abreu, founder of the *El Sistema* music project that inspired Big Noise in Scotland" (26.03.18).
45. Extensive media coverage of CWGs Clyde-sider synthesis report and GoWell East reports which were published to coincide with the publication of the Scottish Government's own report on CWG legacy and media release. This included the Sunday Post, Evening Times, The Scotsman, Glasgow Live, the Daily Record and BBC Scotland (03.04.18).
46. GCPH was mentioned in a Glasgow Live article on the Bikes for All launch: "Bike scheme inspiring refugees to cycle rolls out across Glasgow" (17.04.18).
47. GCPH was mentioned in a Care Appointments article on Children's Neighbourhoods Scotland: "University collaborates in project to tackle child poverty in Glasgow" (09.04.18).
48. Pete Seaman quoted in a 'Next Pittsburgh' article about the Glasgow/Pittsburgh collaboration: "Why Pittsburgh is looking at Glasgow to solve our toughest health problems" (14.05.18).
49. GCPH mentioned in report on Sistema Scotland anniversary in the Aberdeen Evening Express: "Young Aberdeen musicians perform for Nicola Sturgeon at Holyrood" (24.05.18).

Digital

50. The number of people following the Centre's Twitter account continues to increase at a rate of around 3-4 per day (currently standing at 4,303 followers).

51. We continue to receive a lot of engagement with our infographics – both online and off. Recent sharing of our new graphics representing the new website restructure have received a lot of engagement online. Sheena Fletcher has been invited to deliver a lunchtime seminar at the MRC on how we use infographics as part our communications approach.
52. The latest issue of the GCPH e-update was circulated in May, and had a 34% open rate (939 people) and a 24% click rate which is comparable to previous e-updates.
53. A shorter more tailored e-update was sent to GCC elected members in April, and received a 44% open rate.
54. The GCPH website refresh is ongoing, with the new-look site launched in May. This presents our work in relation to eight 'topics', following the approval to move to user-led navigation at the last EMT meeting. Troubleshooting will continue until early June.

**GCPH
June 2018**



**Glasgow Centre for Population Health
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GCPH Risk Register

Recommendations

Board members are asked to:

- Note that the GCPH draft risk and opportunity register has been revised following Board discussion in March 2018.
- Review the proposed register, recommend any further revisions required, or approve this version.

Background

1. The GCPH team undertook a review of the context within which the Centre operates, to assess potential risks we might face in the short to medium term. The risk and opportunity register has been designed to identify:
 - a. Categories and types of risk the Centre might face in the short to medium term, their likelihood of occurring and impact if they occurred.
 - b. The actions we can take to prepare for these possibilities and reduce any detrimental impact.
2. A draft register was prepared for consideration by the Management Board at its meeting in March 2018, following discussion with the Executive Management Team. The Board recommended a number of changes to the document, and in particular a need to separate out 'issues' from 'risks', minimise repetition, and to be more specific in quantification of the risks and of the mitigation proposed. It was also agreed that risk scores should relate to the likelihood and severity of the risk after the mitigating action has been implemented. It was also highlighted we should be more specific over the aspects we had more control over and that the intention of actions should be stated, such as sending team members to forums and meetings to influence processes. Individual feedback from two members following the Board discussion was that the risk of key staff leaving should be recognised up front.

Proposal

3. The Board is asked to review the attached revised risk and opportunity register, which is much shorter and 'tighter' as a result of the revisions proposed. Key changes from the previous draft are as follows:

- a. Risks associated with staff contracts and stability of the staff team have now been removed, following the NHSGGC agreement to move core staff with more than two years' employment on to permanent contracts. Clarity has also been secured in relation to the approach to be adopted in filling any vacancies.
 - b. Several previous entries (to do with the political and partnership context, GCPH credibility, and communications issues) have been removed, as these were regarded as general issues rather than specific risks for the GCPH.
 - c. Entries relating to public health reform have been rationalised.
 - d. Mitigating actions have been made more specific.
 - e. Proposed scores relate to the current (2018/19) financial year specifically.
4. The resulting register contains a set of risks associated with GCPH staffing and resources and public health reform. It indicates that the greatest risks facing GCPH in the current financial year are: loss of key staff including potential changes in leadership, and changes resulting from the public health reform process.
 5. It is proposed that the risk and opportunity register is refreshed for consideration again by the Board at its meeting in March 2019 in advance of the next financial year.

Pete Seaman
Carol Tannahill
June 2018

Risk and opportunity register 2018/19

Potential risk	Comments	Prevention, mitigation or adaptation	Post mitigation	Treated risk rating (/25)
GCPH staffing and resources				
Loss of key staff including potential change in leadership	The GCPH has had a very stable staff team and consistency of leadership since its establishment. This means that the work and Centre's profile is strongly associated with individuals.	Attention to staff development and succession planning, including bringing new experience into the team. Emphasis on shared responsibility within the team, to minimise risk when individuals move. Move to three year planning supports continuity.	Probability: High (5) Potential impact: Medium (3)	15/25
Loss of funding or partner support	Sustainability of GCPH depends on core SG funding plus a strong local partnership. Both aspects depend on the work being seen to be relevant, influential and providing added-value both nationally and locally. Changes in personnel, funding contexts and priorities all have an impact.	Performance management and team development to ensure an ongoing high level of delivery and quality of GCPH outputs. Ongoing attention to achieving impact and articulating this. Regular engagement at Board level in scoping the partnership landscape to ensure the profile and connectedness of GCPH is as effective as it needs to be. Regular stakeholder mapping to ensure the necessary connections are being made. Board members alert Directors early about any likely changes in support, and any opportunities to stabilise/extend existing support.	Probability: Low (1) in 2018/19 Potential impact: High (4)	4/25

Potential risk	Comments	Prevention, mitigation or adaptation	Post mitigation	Treated risk rating (/25)
Business continuity in the face of unforeseen shock	GCPH infrastructure (IT, finance support, accommodation) is largely provided by our partner organisations, so we are protected to a considerable degree by their larger corporate systems and resilience. However, as a small organisation located separately we are less visible and central to resilience planning. Some issues (e.g. site-specific safety) need GCPH-specific attention.	Develop business continuity plan Put in place systems with partners to reduce risk of GCPH being overlooked in corporate resilience planning.	Probability: Low (1) Potential impact: Moderate (3)	3/25
GCPH reputation is challenged	This could result from reduced quality control of outputs, limited political acuity, unprofessional behaviours or misrepresentation of results/messaging by the media or others. The risk increases as management and quality assurance processes become more stretched, and the work more diverse.	GCPH has managed its reputation, communications and work quality very well throughout its history. No new preventative actions are proposed, but attention will be paid to early alerts of reputational change and also to ensuring that internal processes continue during any reductions in staffing.	Probability: Low (1) Potential impact: High (4)	4/25
Public health reform				
The process of public health reform in Scotland results in the GCPH being changed or incorporated into a new structure.	The reform process will establish a new national body (Public Health Scotland). It not clear what changes will be made to sub-national structures and ways of working, including the role and remit of the GCPH. The opportunity is to recognise that the GCPH works in ways that are being actively promoted/sought by the reform process, and therefore might be seen as a model to be	Clear communication of the GCPH model, ways of working and added value. Board members have an important advocacy role in this too. Contributions to the reform process and proposals, to ensure that the GCPH is part of considerations and helps to shape sub-national developments. Keep GCPH team updated with the	Probability: Medium-high (4) Potential impact: Moderate (3)	12/25

Potential risk	Comments	Prevention, mitigation or adaptation	Post mitigation	Treated risk rating (/25)
	strengthened and replicated.	reform process and discussions. Prepare GCPH team for possibility of change. Any changes to partner priorities or structures as a result of the reform process are considered in relation to their implications for the GCPH.		



**Glasgow Centre for Population Health
Management Board Meeting
Wednesday 20 June 2018**

**End of year report
2017-18**

Recommendations

The Board is asked:

- To note and approve the progress made in delivering the Centre's work plan to April 2018.
- To highlight any issues for follow-up action.
- To reflect and comment on the structure and content of the report and make suggestions toward continuous improvement.

Introduction

1. This report is an overview of progress over 2017-18 against the 2017-18 work plan (Board paper 337). The end of year report is a core aspect of the agreed GCPH governance processes to ensure that the Management Board is satisfied with progress. The format of the report has been previously approved by the EMT and the Board. It follows the mid-year review discussed at the December 2017 Board meeting (Board paper 345).
2. The report follows the agreed format with a detailed update on each programme and project provided in Annex 1, supplemented with an 'at a glance' summary table. The structure of the report reflects the approved work plan with updates for the four programmes of work (action on inequality across the life course; understanding health, health inequalities and their determinants; sustainable inclusive places; and innovative approaches to improving outcomes), and updates on our strategic context, staffing and resources, and communications.

Operating context for 2017-18

3. The year marked the beginning of the Centre's fourth phase (Phase 4) with a refresh of the programme structure and an identification of eight cross-cutting themes that characterise the Centre's distinctive way of working. Internal processes were also proposed such as new programme meetings, programme manager, research, and community engagement meetings to improve cross-programme working. This year also saw a trialling of bringing the delivery of the New Perspectives on Health contract in-house. An internal group was established to identify developmental work that cuts across programmes. This led to a team training session on framing messages on poverty and inequality and proposals to support community councils and developing opportunities for staff placements. The seminar series has delivered four well-

attended, successful events with a fifth having to be postponed until September. The seminar series will continue to be delivered in house for the coming year.

4. The new programme structure has fostered opportunity to take advantage of cross-programme working as demonstrated for example in the Children's Neighbourhoods Scotland work, Childcare and Nurture in Glasgow East, Building Connections and Citizenship and Early Years projects. The success of this cross-programme working presents a challenge to our established reporting framework where projects have been located within discrete programmes. We have avoided duplication across the reporting framework – one consequence of which is that Programme 4's contribution (innovative approaches to improving outcomes) appears underrepresented, due to its substantive contribution to other parts of the work plan.

Partner and wider context 2017-18

5. Elements of our partner and wider strategic landscape, and our responses to it within 2017-18 included:
 - Establishing clearer links and support through evidence with Glasgow's Integrated Joint Board and Health and Social Care Partnership. To this end the Centre has contributed to an IJB development session and Board meeting and established clarity on the partner relationship with HSCP representation on the GCPH Board.
 - Supporting the NHS Board's responsibilities as a public health organisation both through ongoing joint initiatives and through the new opportunities presented by the Standing Committee on Public Health and the development of a Public Health Strategy for GGC. Explicit reference is made in the draft strategy to GCPH's responsibilities for providing evidence and data on best practice and realistic application in specific contexts. We will further develop this role in the 2018-19 work plan.
 - Positioning ourselves to contribute actively and inform the process of Public Health Reform in Scotland over the year through the Director's membership of the Public Health Review Oversight Board and Associate Director's membership of a group establishing criteria for priority setting. Marion Bain has visited the Centre, providing an opportunity for the team to communicate our approach and model of working.
 - Maintaining a focus on, and implementation of, place-based approaches and city strategies related to housing and the associated need for understanding the principles of inclusive growth and social regeneration. In supporting these issues the 2017-18 work plan included contributions through the Neighbourhood Change project, a programme of work dedicated to Sustainable Inclusive Places and collaborative geographically-focussed work such as Children's Neighbourhoods Scotland and the Child Care and Nurture work.
 - The continuing programme of welfare reform including the planned roll-out of Universal Credit in Glasgow for autumn 2018 has major implications for population health. The Building Connections project explored transferable learning on how co-location of financial advice services can ameliorate financial hardship. Learning from this project has been shared with government colleagues establishing the Scottish Social Security Agency, particularly in relation to the principles of fairness, dignity and respect being upheld in service user experience. Further monitoring has been undertaken of financial inclusion work in GP settings through collecting data on user experiences and demand. We have also led on the convening of a network with NHS and other partners to develop work outlining the impact of welfare reform on populations within the NHSGGC area.

- Supporting the implementation of the Community Empowerment Act, including support in the development of Policy Scotland's City Deal work and continuing support for the Poverty Leadership Panel. The team also contributed to Doors Open Day and the ESRC Festival of Social Science to engage with the wider public.
- Working with the University of Glasgow to continue to develop the Olympia Social Research Hub. The Hub now houses the UK Collaborative Centre for Housing Evidence (CACHE) and members and activity of the Robert Owen Centre, Policy Scotland and What Works Scotland. Through our own and joint working, we help deliver the Hub's defining focus on the interlinked areas of education, housing and health inequalities. This has included progress on joint projects within the work plan and joint contributions with CACHE to the Festival of Social Science.
- Providing information and support for Glasgow City Council's elected membership following the 2017 election. Following an induction session for Councillors held in August 2017, we responded to a request for policy ideas in the run-up to the drafting of the Budget paper, and have provided e-newsletters for elected members. We were also invited (and agreed) to attend the Strategic Board of the Community Planning Partnership.

Staffing and resources

6. The work plan this year was delivered within a budget of £1.25m of core funding from Scottish Government and other income dedicated to specific areas of work amounting to £200,000. An end of year financial report circulated with this paper outlines income and expenditure in more detail. There were challenges associated with a one-year funding model in terms of being able to make firm commitments to partners for work that would go beyond the 2017-18 financial year.
7. The year also saw our Office Manager of nine years, Jackie Hale leave the Centre with the post vacant for three months; a new Office Manager, Janet Robison, took up post in November 2017. A period of discussion on contracts with the NHS Board saw vacant posts not being filled; one Public Health Research Specialist post has been vacant for much of the year and another was not filled during a period of maternity leave. The Associate Director position remained on an acting basis for the year.

Purpose, aims and ways of working Phase 4

8. The Centre's purpose for Phase 4 highlighted our dual focus on understanding the causes of health inequalities and developing and supporting the implementation of solutions. Our purpose and aims in 2017-18, were expressed as:

Purpose:

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.

Aims

- 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.

- Maintaining 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.

Progress on purpose, aims and ways of working

9. Our characteristic way to deliver on our purpose is to embed the aims across all the work we do. Case study examples therefore are a useful way of showing the work delivered to progress our stated aims and purpose. These case studies also highlight how timeframes involved can go beyond yearly planning cycles.

Case study 1: Working across boundaries to promote mitigation and prevention of childhood adversity.

10. This example of work focussed on Adverse Childhood Experiences (ACEs), highlights how the team built on its credibility as a source of evidence to convene networks of shared interest, to co-produce new solutions, promote a future perspective and developmental activity to generate new approaches. Work to ensure the new approaches developed become part of mainstream understanding and delivery is a key aspect of our continuing involvement in partnerships.

What we did

An opportunity was identified from the growing awareness of a system-wide need to understand and prevent the effects of family adversity to inform and support action on key social determinants of health and inequality. Through a combination of communications and traditional research outputs, an early intention was to convene networks of shared interest around the continuing effects of ACEs and to utilise the critical mass of awareness to explore new approaches to services working better together and across systems to reduce this determinant of poor health and inequality.

What outputs and actions underpinned it?

Traditional outputs such as a seminar and follow-up session in April 2015 delivered by Jane Stevens (*How Adverse Childhood Experiences and 'the theory of everything' can help build healthy communities*) and a GCPH Healthier Future Forum (*Thinking Ahead in the Early Years*, 2015) established momentum and commitment for the establishment of a Scottish ACEs Hub. Members of the team also supported ScotPHIN's ACEs report (*Polishing the Diamonds*) supported by a national conference in November 2016. An early translational output utilising the network of interest formed, hub and evidence it collated was to issue evidence-informed guidance for educational staff on using the Pupil Equity Fund to best mitigate the effects of ACEs. The ten-year synthesis of GCPH work on *Health, Early years, Children and Young People* also continued the process of translating evidence.

Success is indicated by the rapid acceptance of the language of childhood and family adversity as a key feature of continuing poor health outcomes and inequality. ACEs were highlighted as a key challenge in the latest Director of Public Health's report for Greater Glasgow and Clyde and through the inclusion of questions on ACEs in the next Scottish Health Survey. A range of past and continuing projects aim to keep the development of action as a means of improving population health outcomes and reducing inequality at the forefront of collective agenda. Such work includes reports such as the statistical comparison *Poverty, parenting and poor health; comparing early years' experience in Scotland, England and three city regions*, practice orientated work exploring 'nurture' approaches in nursery, and a mapping of parenting and family support across Greater Glasgow and Clyde. Current work seeks to support the development of promising investments towards positive change through partnership as embodied in the *Children's Neighbourhoods Scotland* and *Childcare and Nurture in Glasgow's East End* work.

What was our role?

Events, workshops, conferences and facilitation have been crucial for this. Production of accessible and credible evidence provided a foundation of national and local momentum on which to build action for change. At the core was an openness to work with a range of partners in a flexible way, and to offer a space for collective discussion, reflection and taking forward of ideas.

Case study 2: Strengthening partners' responses to tackling child poverty

11. This case study illustrates how GCPH work over the last seven years, and continuing in 2017-18, has impacted on partners' responses to tackling child poverty through, amongst other outcomes, the development and mainstreaming of Healthier Wealthier Children (HWC), a focus on lone parent households and the Cost of the School Day (CoSD). As with the first case study, it highlights how impact was achieved by involved and engaged partners coalescing around an issue; and creating, using and applying learning with the support and facilitation of GCPH. Rather than learning being applied to specific recommendations from individual research outputs, partners and GCPH often work together to synthesise evidence and interpret ways forward through improved understanding of the opportunities and constraints provided by organisational ways of working.

What we did

Healthier Wealthier Children (HWC) was developed in an earlier phase of the Centre. HWC developed new ways of providing money and welfare advice services across NHS GGC to help pregnant women and families with children at risk of, or experiencing, poverty. An important aspect involved setting up referral links between health and advice services with a view towards embedding mitigation of child poverty within partnership responses. Today, HWC remains a visible feature of activity to mitigate child poverty with cumulative referrals of around 16,000 leading to £18.5 million in household gains. Between 2010 and 2013, GCPH played a key role in establishing a network, developing responses and mainstreaming HWC planning structures.

What outputs and actions underpinned it?

The success of HWC in terms of outcomes, learning and experience of joint working encouraged the development of further work such as lone parent work, with the Poverty Leadership Panel, to improve the way mainstream services support lone parents; and the Cost of the School Day project. A GCPH briefing paper (2016) identified the level of school clothing grant across Scotland's 32 councils (from £20 to £110 with an average of £50).

In 2017, One Parent Families Scotland, working with the Child Poverty Action Group, undertook an online national survey to seek parents' views on the grants. Parallel work with Glasgow City Council and the lone parent work led to a local increase in the payment and a move to automatic payment of the grant, instead of families needing to apply. This led to an increased uptake among low income families. In 2018, Scotland's new Child Poverty Act stated that local delivery plans were required to consider automatic payment of benefits and support with a new minimum payment for School Clothing grant across Scotland.

What was our role?

HWC acted as the bedrock and launched work that is now embedded in the Child Poverty Delivery Plan. This work started back in 2010 and has taken eight years to get to this point although after year three of HWC, two reports showed positive outcomes. An incremental approach to handing over has been necessary. The Centre created diverse networks and new relationships across organisational settings including NHS, local authority and third sector. This enhanced the understanding of NHS policy and practice contexts among third sector partners and built on our established reputation within the partner network, generating evidence and supporting knowledge translation through space, time and motivation for collaborative reflection and action.

Programme updates

12. This section summarises the progress of each of our four Programmes during 2017/18. It should be read in conjunction with the 'at a glance' summary.

Programme: Action on inequality across the life course

(Leads: Fiona Crawford and James Egan)

13. 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

14. Much of the work in this programme draws together projects from the Centre's work previously 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. Key components of the 2017-18 programme included:
 - 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 (ACEs) and health outcomes and evaluation of childcare, early learning and interventions.

Progress against priorities

15. Welfare reform: The Programme has been working with NHS partners to outline a new piece of work to monitor the impact of welfare reform on populations in the health board area. Local authorities, Health and Social Care Partnerships, Child Poverty Action Group and Health Scotland have met routinely over the year to develop ways forward. This has included supporting the NHSGGC Employment and Health Strategic group to consider evidence as it emerges around impacts of Universal Credit through a report submitted in May 2018.
16. New forms of social protection: Across the year the programme planned to produce a series of scoping papers exploring what a healthier 21st century social protection might look like. The work was delivered through internships in collaboration with What Works Scotland. An advanced draft of a report has been produced and the interns developed a fictive case study based exercise which was used with the GCPH team and ran at a workshop at the resilience Healthier Future Forum. The document is currently being revised by James Egan, Pete Seaman and Nick Watson of What Works Scotland with the aim of launching the final version to coincide with the visit and lecture by Evelyn Forget on Basic Income in September 2018.
17. ACEs and early years: A range of activity has been undertaken over the year including an evaluation of the use of the Children and Young People's profiles by partners which highlighted the ways they are being used in planning, and a report scrutinising the impact of family and parenting support in Greater Glasgow and Clyde. A core component of this work is Children's Neighbourhoods Scotland, which was launched in February 2018. A theory of change has been developed, clarifying the aims and priorities for the Bridgeton and Dalmarnock neighbourhood, and work undertaken with local people, organisations and services has underpinned those priorities. The evaluation strategy has also been progressed, and researchers recruited. A key indication of wider strategic support (and impact) was the commitment to additional financial support for four years through the Child Poverty Delivery Plan to support expansion of children's neighbourhoods within Glasgow and beyond. The programme also continues to contribute to the Scottish ACEs Advisory Group, and has contributed to guidance for education staff on using the Pupil Equity Fund (see case study 1 above).

Challenges

18. A small number of projects have been delayed due to internal capacity within GCPH or with partners. An evidence review relating to contemporary debt and its health and wellbeing impacts is behind schedule, awaiting unsecured personal debt data. A project in development to outline the extent of missed appointments by vulnerable groups was not taken forward by NHSGGC. A key piece of work, which is behind schedule but which is now being given a renewed focus is a systematic review to develop understanding of causal pathways between ACEs and health outcomes.

Programme: Understanding health, health inequalities and their determinants

(Leads: David Walsh and Bruce Whyte)

19. The ambition of this programme is to provide analysis to support the developing understanding of trends in health, inequalities and their determinants. Alongside identifying emerging issues, it aims to support the development of policy responses through recommendations. The work has continued to be developed through analysis across national, city and local levels and against international comparators. As well as influencing externally, the analyses will continue to inform, shape and support elements of work across the GCPH work plan.
20. 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.

Progress against priorities

21. The Understanding Glasgow domains for the main, children's and resilience pages were updated over the year and progress has been made in developing links to excess mortality topics. Dissemination of excess mortality work has continued during the year and a paper examining protective effects of ethnicity on mortality in Manchester in comparison to Glasgow was submitted to the Journal of Epidemiology and Community Health. A detailed analysis of mortality by age and gender comparing Glasgow with the rest of Scotland was published in Autumn 2017 detailing trends across a 35 year time frame from 1981 onwards. Findings highlight different trajectories in mortality in relation to age, gender and cause of death; worsening trends for women and an increase in mortality for the over 65s. The report 'Changing ethnic profile of Glasgow and Scotland' was also published in the Autumn and responded to the need for policy-makers and service-planners to understand the changing ethnic profile of the population and its implications for service planning. Findings highlighted that the size of the non-White population is likely to see continued growth in future years. This will include increases in the number of ageing and elderly members of that population. Awareness to different disease risks is encouraged. Work supporting the informing investments to reduce health inequalities continues an analysis of trends earnings with underpinning analysis complete.

Challenges

22. A continuing challenge has been moving the updating of profiles on to a more sustainable footing and progress has been made on this challenge over the year with support from analysts from ISD. The programme is small in terms of staff resource

available and as a consequence decisions need to be made about investments in developmental work. This has included decisions not to progress certain planned technical journal submissions over the year. Due to absence of sufficient data, analyses of Scottish and European mortality trends for working age populations has been postponed.

Programme: Sustainable and inclusive places

(Leads: Russell Jones and Jill Muirie)

23. This programme's purpose is to support processes of change to help Glasgow become a more inclusive, resilient and sustainable city. The programme seeks to inform and support policy, partnerships and practice to promote fair and equitable access to healthy and sustainable environments. This is to 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.
24. 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 year marked the GoWell programme's final year of core funding with an emphasis of knowledge translation. This included learning from GoWell's community engagement activities both within the wider GCPH work programmes as a cross-cutting approach and amongst partners in delivery. On-going work to establish a city-wide approach to sustainable food also reached a critical phase.
25. Key projects included:
 - 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.
26. GoWell has reached the end of its core funding period, and the anticipated final phase of analysis, dissemination and knowledge translation will run until the end of the 2018/19 year. A Knowledge Exchange Forum was established in 2017. This has met four times over the year to consider ways of utilising findings and linking to local and national strategic fora. All planned publications and an annual event were delivered during the year.
27. Jill Muirie has continued as the interim Chair of Glasgow Food Policy Partnership. There are subgroups on food waste, public sector food procurement and support for a Sugar Smart campaign in North Glasgow. The multi-partner arrangements for a network coordinator have now progressed to allow recruitment. The post will add momentum to efforts to produce joined-up, cross-system approaches to sustainable and healthy food production, distribution, procurement and consumption.

Challenges

28. Developmental work on the growth and implications of private rented sector housing has not progressed as rapidly as hoped, particularly foundational mapping work. Discussions around data acquisition continue.

Programme: Innovative approaches to improving health

(Leads: Jennifer McLean and Pete Seaman)

29. 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. The programme responds to the expressed need from partners regarding a combination of challenges around demography (such as an ageing population), the increased contribution of psychosocial 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 GCPH work on Asset-based approaches and resilience, 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 continues on making the case for innovative practice, policy and intervention through evidence, evaluation and knowledge through translational resources and engagement.
30. A key element of this programme's operating context is the formalisation of the relationship of Glasgow City's HSCP to the Centre, strengthening opportunities for translational learning. Dissemination of pieces of work on community-based responses such as participatory budgeting, the Commonwealth Games volunteer study and Glasgow City's Resilience Strategy also feature. Key projects and tasks included:
 - a briefing paper 'Evaluating the health and social impacts of Participatory Budgeting' to support knowledge translation about an innovative approach with demonstrable community impact;
 - publication of the Commonwealth Games Clyde-sider study;
 - evaluability support for a Glasgow Life and 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 production of a briefing paper to support translation into policy and practice.

Progress against priorities

31. Engagement with communities and What Works Scotland, has led to the development of a logic model to support community-based evaluation of participatory budgeting. A paper supporting the community-based evaluations has been produced. Work relating to volunteering and participation has seen the publication of the final survey of the Commonwealth Games Clyde-sider study, a synthesis of existing surveys and work to mainstream the learning on volunteering through opportunities provided by the 2018 European Championships. Other progress includes the Centre's contribution to understanding the role social enterprises can play in improving population health and reducing inequalities. Delivered in collaboration with the Yunus Centre at GCU, as part of the wider MRC funded Common Health programme, our contribution explores social

enterprise as a response to vulnerability in the private rented housing sector. Data collection for waves 1 and 2 has been completed over the year. Preliminary findings and the underpinning theory are being presented at a number of housing conferences across Europe. A Healthier Future Forum exploring next steps for resilience was delivered in partnership with Glasgow and Bristol's Chief Resilience Officers. The event was used as an anchor for a blog series in the run-in period. The delivery of the 'Power' animation (and its positive reception) and the Centre's role in the delivery and translation of the Health Inequalities Commission's report on Mental Health also highlight key aspects of translation work alongside partners in response to strategic priorities.

Challenges

32. As reported at mid-year, there has been reduced capacity within this programme over the year. One of the programme managers, Pete Seaman, has continued his acting role in the post of Associate Director and the programme's research specialist (Lisa Garnham) has been on maternity leave. There has also been a developmental focus to the work this year, particularly in relation to building on past work on asset-based approaches and an aspiration to explore the role of play within public health approaches. Key projects affected by stretched capacity and external factors include:
- Work on 'play' was not progressed as planned and by mid-year a decision was taken to postpone this on the basis of capacity.
 - Support for the primary care Link Worker role has been delayed, as neither the Monitoring and Evaluation group nor the Advisory group have been established nationally as of year-end.
 - The proposed PhD research into Community Centres has been discontinued as the student chose not to proceed.
 - Our understanding of asset-based working is informing the GCPH contributions to Childcare and Nurture in Glasgow East (CHANGE) and Children's Neighbourhoods Scotland. The planned development of a 'perspective on evidence' and work to explore the cost of the maternity pathway remain at early stages of development with plans in place to work with the national Public Health Evidence Network in relation to the former.
 - The reduced capacity in this programme (important for the historical learning from this programme to inform other aspects of the Centre work plan) has resulted in initial explorations of further work being limited. However, the successful delivery of a report exploring literature on citizenship in the early years and the management of the Building Connections project by members of this Programme are examples of ways in which the exploration of new approaches has made significant contributions to work in other areas of the GCPH work plan.

Communications

33. The year saw a refresh of our Communications Strategy to better align to our Phase 4 aims and purpose and to build on learning of impact and influence, a process through which eight communications objectives were identified. These are:
- i. Build awareness of GCPH.
 - ii. Ensure our work is widely shared and accessible in a variety of formats.
 - iii. Encourage wider participation in GCPH events.
 - iv. Provide opportunities for two-way engagement and feedback.
 - v. Support the process of implementation and change.
 - vi. Ensure all outputs and activities are recognisable as GCPH (in terms of the brand, style and organisational voice).

- vii. Protect and enhance the reputation and credibility of GCPH.
- viii. Continually develop and improve means and methods of communication through monitoring and evaluation.

34. A comprehensive list of our outputs over the year is provided in Appendix 2.

Progress against objectives

- 35. The awareness of GCPH, ensuring work is shared and accessible, and our relevance to different audiences has been addressed through an increasingly strategic and impact orientated approach to communications which is conscious of reach and engagement with core partners. This includes the use of shareable content through social media that reflects a growing preference for engagement by elected representatives and linking to on-line conversations and debates to highlight relevant GCPH learning. An indicator of success here, beyond our growing on-line engagement figures, was the use of a GCPH disability infographic in a parliamentary debate by Alison Thewliss MP as a result of our timing of a tweet to coincide with interest in the debate.
- 36. In relation to widening reach, we have used established GCPH outputs to encourage wider participation by broadening the scope of perspectives included in our Seminar Series and Healthier Future Forums. This also supports the intention of Public Health Reform to work across sectors. To this end, events leading on topics such as power, prison and the justice system, museums and health, and play attracted delegates across a broader range of sectors and interests and many of whom were new to GCPH. This year saw the addition of 400 new subscribers to our network, from a total of almost 3,000.
- 37. In relation to supporting processes of change, we have consciously orientated outputs to support elected members, including an information session to raise awareness of our work and, on the basis of feedback from this event, tailored monthly e-updates.
- 38. The year saw a redesign of the GCPH website to reflect user-led navigation with the aim of making the experience of the website more intuitive and accessible. Led by eight topics, the content encourages visitors to understand the interconnected nature of the influences shaping health and health inequalities. We will use website analytics over the first six months of 2018-19 and seek user feedback for continuous improvement.

Headline engagement figures

- Our total followers on Twitter stands at 4,100 (March 2018), representing an increase of 24% in our followers over the year. There has also been a noticeable increase in Twitter interactions, with our account mentioned, retweeted or liked 5,700 times, a 57% increase on last year. Our profile page was viewed 23,168 times, representing a 3% increase on the previous year.
- New visitors to our websites increased with 32,201 unique visitors to the GCPH website, 70% of which were 'new' to the site) and 41,265 to the Understanding Glasgow website (85% new to the site).

Challenges

- 39. One of the ongoing challenges we face is ensuring there is balance of understanding and awareness of the broad range of our work. We are well recognised and regarded for our work on increasing understanding of the causes of the city's poor health and

health inequalities. It is important that we are known as much for our work with key partners and communities to support processes of change and implementation of potential actions in response to this evidence. This requires us to synthesise messages, describe why and how we work on particular issues alongside findings and recommendations and in a manner and format that aids discussion, informs action and supports change. To support this and respond to priorities and opportunities as they emerge over Phase 4 it is important that our communication outputs are flexible and agile.

40. Understanding better how our outputs connect with our audience and stakeholders in a manner that informs change is a challenge that we seek to address through an evaluation of our approach to communications and how we present our messages over the year ahead.

Summary

41. This report provides an overview of the GCPH work delivered during 2017/18. The detail for each programme and project is provided in the attached matrix, and the 'At a glance' paper summarises the position.
42. As the Board is aware, GCPH staffing has been impacted this year as a consequence of vacancies, maternity and sick leave, and acting-up arrangements. Staffing and resource constraints are evident in all of our partner organisations also, and requests for GCPH input to projects continue to increase. Prioritisation is therefore becoming ever more important, and should be considered in relation not only to this end of year report but also the proposed work plan for 2018/19.
43. The 'At a glance' summary shows that of the 57 projects in our plan for 2017/18, 33 are classified as 'green', 20 'amber' and 4 'red' (these being entirely due to either external factors or internal reprioritisation due to specific staffing issues). This reflects a considerable body of work by the team, delivered in partnership and continuing to extend the reach and influence of the Centre. The 'At a glance' summary does not reveal the level of commitment and GCPH involvement across the work, for example, Weathering Change which has utilised a lot of GCPH staff commitment in establishing networks required. Individual end of year reviews are providing an opportunity to discuss learning and strengthen performance as needed.
44. Finally, it is important to note that the report here does not adequately reflect the range of contributions made by GCPH team members in advisory and influencing roles – such as membership of the ScotPHO and ScotPHEN steering groups, public health reform structures and the NHSGGC public health standing committee, community planning structures, Greenspace network, the city's poverty leadership panel – and many more. In these roles, GCPH staff bring evidence, take forward specific actions, make connections between seemingly disparate activities and geographies, and undertake knowledge exchange. This sort of influence and 'glue' is needed to help bring coherence to the wide range of actions being taken forward in different parts of the system. Our General Updates to the Board seek to reflect some of this activity, and members will be aware that it is an important part of our role albeit that it is not easily projected in the format required for this end of year report.

GCPH
June 2018

Appendix 1: 2017-18 Work Plan 'At a glance'**End of year update****Key**

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.

PROGRAMME	AREA OF FOCUS	PROJECTS		
Action on inequality across the lifecourse	Child health	Children's Profiles	Core	Green
		Early years review	Core	Green
		Childcare Pathfinder evaluation project	Core	Green
		Adverse Childhood Experiences	Core	Amber
		Evaluation of joint food policy	Core	Amber
	Children's Neighbourhoods Scotland	Initiative development and awareness	Core	Green
		Community engagement	Core	Green
		Developing theory of change	Core	Green
		Communications strategy	Core	Green
	Disrupting cycle of child poverty	Healthier Wealthier Children	Core	Green
		Cost of the School Day	Core	Amber
		Cost of the School Holiday	Core	Amber
		Children and Young People as Carers	Core	Green
		Sistema	Core	Green
	Citizenship and early years	Nurturing citizenship in early years	Core	Green
	Adult years and working age	Building Connections	Core	Green
		Welfare reform and Deep End	In Dev't	Green
		Contemporary debt and health	Core	Amber
		Access to service by vulnerable groups	In Dev't	Amber
	Future of social protection	Three PhD internships	Core	Amber
		In-work conditionality	In Dev't	Green
Understanding health, health inequalities and their determinants	Understanding Glasgow	Website maintenance	Core	Green
	Excess mortality research	National excess mortality analysis	Core	Green
		Three cities research (four projects)	Core	Amber
	National and international analysis	Six analytical projects	Four Core	Core projects green
	Neighbourhood profiling	Neighbourhood change and five analytical projects	Four Core	G A
Sustainable inclusive places	Sustainable travel and transport	Informing investments to reduce inequalities and four analytical projects	All Core	Green
		South City Way monitoring	In Dev't	Amber
		Trends in bus, car ownership and walking	In Dev't	Amber
		M74 study dissemination	Core	Green
	Healthy Urban Environments	Glasgow City Deal	In Dev't	Green
		Weathering Change	Core	Green
		Children's access to greenspace	In Dev't	Amber
		Private rented sector housing	In Dev't	Amber

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

Appendix 2

Summary of outputs and activities

GCPH events and seminars

Title	Date	Delegates
Seminar Series 13, Lecture 6. Annie Warburton: "Can Do - Flourishing in the 21st Century"	April 2017	97
Creating liveable cities – the role of active and sustainable travel	May 2017	68
PHINS 2017 Annual Seminar	Sept 2017	350
Seminar Series 14, Lecture 1. Pete White: "From prison to parliament - bringing dark experience to light"	October 2017	100
The M74 study: Findings and implications for policy and practice.	October 2017	18
Public Health Shared Learning Event: Glasgow Health and Inequalities Commission	Nov 2017	37
Glasgow's Healthier Future Forum 20: "Power, health and social justice"	Nov 2017	150
Building Connections	Dec 2017	24
Building Connections	Dec 2017	27
Seminar Series 14, Lecture 2. Mark O'Neill: "Museums and public health in Glasgow – the lessons of history"	Dec 2017	70
Place Standard Training – UK Health Cities Network	Dec 2017	41
Seminar Series 14, Lecture 3. Sue Palmer: "21st century children - the state of play"	February 2018	155
Foundations for wellbeing: Building connections between public health and housing	March 2018	50
Seminar Series 14, Lecture 4. Lolita Jackson, Grant Ervin, and Jeremy Kalin: "A transatlantic conversation: building cities from the people-up: empowering communities for health and resilience"	March 2018	101
Glasgow's Healthier Future Forum 21: "Resilience in Glasgow: where next?"	April 2018	81

Publications

Title	Date
Evaluating Sistema Scotland: Big Noise Torry – initial findings report	June 2017
Clyde-sider applicant journeys: findings from a two-year follow-up survey	July 2017
Young carers in Glasgow: health, wellbeing and future expectations	August 2017
Exploring parenting support: wider Greater Glasgow and Clyde area – phase 2	August 2017
The Deep End Advice Worker Project: embedding advice in general practice	Sept 2017
The changing ethnic profiles of Glasgow and Scotland	Sept 2017
Nurturing citizenship in the early years	October 2017
The potential impact of sugar taxation on young people's dietary intake	October 2017
Community engagement report: the M74 study	Nov 2017
Recent mortality trends in Glasgow: 1981-2015	Nov 2017
Building Connections: co-locating advice services in GPs and job centres	Dec 2017
Evaluation of the Glasgow Lone Parent Project: final report	Feb 2018
Evaluation of Glasgow's Volunteering Charter	March 2018
Glasgow 2014 clyde-sider study – a synthesis of the learning	April 2018
Weathering change: community resilience in the face of climate change	April 2018

Consultation responses

Title	Date
Restricted Roads (20mph limit) (Scotland) Bill (Scottish Parliament)	July 2017
Supplementary Guidance – Placemaking (Glasgow City Council)	July 2017
Socioeconomic duty (Scottish Government)	August 2017
Glasgow's Draft Community Plan (Glasgow City Council)	August 2017
Social Security (Scotland) Bill (Scottish Parliament)	August 2017
Building Scotland's low emission zones (Transport Scotland)	Nov 2017
City Charter (Glasgow City Council)	February 2018

A healthier future – action and ambitions on diet, activity and healthy weight (Scottish Government)	February 2018
Inquiry into poverty and attainment (Scottish Parliament)	April 2018
A Connected Scotland: Tackling social isolation and loneliness and building stronger social connections (Scottish Government)	May 2018

GoWell

Publication/event	Date
Living in new homes in Glasgow's regeneration areas: the experience of residents in the Pollokshaws and Sighthill Transformational Regeneration Areas	May 2017
After the event: perceptions of change and issues of perceived fairness in Dalrnock, Glasgow	August 2017
Achieving a sustainable mixed community: report of a survey of residents of the Commonwealth Games Athletes' Village in Glasgow	August 2017
Community and neighbourhood change in the GoWell Wider Surrounding Areas	August 2017
10th GoWell annual event (70 delegates)	Sept 2017
GoWell Progress report 2016/17	Sept 2017
Changes in health-related indicators in GoWell and other areas undergoing housing-led renewal between 2000/2 and 2010/12	Sept 2017
Health and the wider determinants of health over time in Glasgow's deprived communities: findings from the GoWell household survey	Nov 2017
Consultation response: fuel poverty strategy for Scotland (Scottish Government)	February 2018
Food and beyond: exploring the foodbank experience	March 2018
Monitoring the impact of the Commonwealth Games and regeneration on the east end of Glasgow: headline indicators 2012-2016	April 2018
Village life: the early experience of living in the Commonwealth Games Athletes' Village development, Glasgow	April 2018
Consultation response: A Connected Scotland: tackling social isolation and loneliness and building stronger communities (Scottish Government)	May 2018

Annex 1 - End of Year Reporting May 2018

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, David Walsh.

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

Area of focus	Projects	Lead(s)	Milestones for 2017-18	Description/ Comments (include whether 'Core' or 'In development')	End of year up-date	R/A/G
Child health	Children's Profiles	BW, FC	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).	An evaluation of the profiles and evidence for action briefings was completed in June of last year based on an on-line questionnaire and web statistics. The findings were very positive with users valuing having information in one place, highlighting the utility of the resource in providing evidence for planning, targeting resources and making bids for funds. The evaluation findings were presented at the FoPH conference in November 2017 and have also been presented at a ScotPHO workshop on 'Using intelligence to influence decision making' (Perth, May 2018). To date it has not been possible to discuss with local partners, particularly the HSCP, whether and how this resource might be updated.	G
	Early years review	FC, VM	Completion of second stage qualitative research	Core Scrutinise and report on the impact of family/parenting support programmes and initiatives on	Complete – report and recommendations circulated to key stakeholders across Clyde partnership areas.	G

Area of focus	Projects	Lead(s)	Milestones for 2017-18	Description/ Comments (include whether 'Core' or 'In development')	End of year up-date	R/A/G
			regarding parenting programme delivery in Clyde partnership areas (July 2017)	child and family outcomes.		
	Childcare Pathfinder Evaluation Project (Childcare and Nurture, Glasgow East - CHANGE)	FC, VM, BW	Baseline profile of and baseline Childcare data (August 2017) Qualitative research with parents/carer, parent/carer survey and telephone interviews with local childcare providers (Summer 2017)	Core Three-year collaborative project (commenced October 2016) being delivered by Children in Scotland, Glasgow City Council and GCPH funded by Big Lottery Fund aiming to establish improved, innovative, affordable, 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.	Year one evaluation complete and year two evaluation activities underway. Findings to date emphasise the importance of flexibility, accessibility, affordability and quality of ELC if it is to be utilised by low income families in East Glasgow. Policy briefing sent to senior SG officials in Dec 2017 outlining implications for policy and practice. Phase 1 of process evaluation also complete. CHANGE and Children's Neighbourhoods Scotland initiative communicating and collaborating to share learning and avoid duplication of effort.	G
	Adverse Childhood Experiences (ACEs)	FC, DW	Completion of systematic review by early 2018	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	(1) The systematic review is still ongoing (initial screening was completed in line with timescales; however, because of evidence that emerged, the search was expanded to include additional search terms). Will hopefully be complete and written up in late summer/early autumn. (2) The initial online survey was undertaken in autumn 2017 but there has	A

Area of focus	Projects	Lead(s)	Milestones for 2017-18	Description/ Comments (include whether 'Core' or 'In development')	End of year up-date	R/A/G
				<p>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>	<p>been a delay in analysing data and write up as the lead researcher is off work. Interim feedback to respondents is in preparation.</p> <p>Ongoing</p>	G
	Action research with three schools on implementation and monitoring/ evaluation of GCC Education and Cordia joint School Food Policy	JM	Final report Summer 2017	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.	This is not yet completed as further engagement has not been possible with the school. The intention is still to complete the report and suitable opportunities to meet with the teachers involved to finalise the report are being pursued.	A
Breastfeeding	Preparation of paper on health care savings in early childhood associated with exclusive breastfeeding	BW	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.	A final draft for submission to an academic journal is imminent.	A

Area of focus	Projects	Lead(s)	Milestones for 2017-18	Description/ Comments (include whether 'Core' or 'In development')	End of year up-date	R/A/G
	versus formula feeding					
	Paper modelling impact of smoking in pregnancy on child health outcomes	BW	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.	A paper entitled, 'The impact of maternal smoking on early childhood health: a retrospective cohort study of 697,003 children born in Scotland 1997-2009', was submitted to BMJ Open in April 2018.	G
Children's N'hoods Scotland (CNS)	Initiative development, awareness raising and embedding in local community Confirmed CNS neighbourhood area and boundaries Community engagement and analysis of local context Development of a shared CNS Theory of Change and evaluation plan Development and agreement by partners of project	JMcL, CT, LL	Phase 1 & early Phase 2 of planned approach Establish steering gp, CNS team and schedule of meetings Appoint Local Co-ordinator and prepare Dalmarnock Primary School as first CNS. Identify indicators of change and methods Press launch–	Core 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.' 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.	CNS in Bridgeton and Dalmarnock continues to develop guided by Advisory Group. CNS Planning Group and R&E groups continue to meet monthly. A detailed analysis of context has been undertaken and a theory of change developed, in partnership with local organisations and services. We have also undertaken a range of community-led activities and engagement opportunities to identify shared priorities across the most significant phases of children's lives and into adulthood. Two research associates have also joined the CNS team to lead on the evaluation of the initiative. The evaluation plan is in preparation, ethics applications submitted, a range of literature reviews are in development and a specific Bridgeton and Dalmarnock area profile has been developed. A number of blogs discussing a range of topics/aspects of CNS are published on the CNS website.	G

Area of focus	Projects	Lead(s)	Milestones for 2017-18	Description/ Comments (include whether 'Core' or 'In development')	End of year up-date	R/A/G
	plan and communications strategy		Summer 2017 Delivery launch of Dalmarnock CNS - Autumn 2017		<p>National and local interest in CNS continues to build. CNS recently received significant financial support over the next four years through the Child Poverty Delivery Plan. This will see CNS expand further within Glasgow, into another urban centre, a small town and a rural area. Initial data gathering and analysis to identify these areas is underway.</p> <p>Two events have taken place in the last 12 months – a learning event in October 2017 and the formal launch event of CNS in Bridgeton and Dalmarnock in February 2018.</p> <p>A poster presentation on CNS will be presented at the NHS Scotland conference in June 2018.</p>	
Disrupting the cycle of child poverty	Healthier Wealthier Children	JE, LN	1) Jun '17 2) Autumn '17	<p>Core</p> <p>1) Paper for publication - at stage of finalisation.</p> <p>2) Conducting interviews with FI leads to update running costs of HWC project and return on investment - in planning stage.</p>	<p>Paper submitted (Nov 2017) to Journal of Poverty and Social Justice. Rejected by peer review.</p> <p>Completed report to be presented at NHSGGC FI planning group (Jun 2018) and learning shared.</p>	<p>G</p> <p>G</p>
	Cost of the School Day publication	LN, JE	Draft paper planned for end September 2017	<p>Legacy project</p> <p>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).</p>	Ongoing but partially delayed due to staff bereavements.	A

Area of focus	Projects	Lead(s)	Milestones for 2017-18	Description/ Comments (include whether 'Core' or 'In development')	End of year up-date	R/A/G
	Cost of the School holiday	FC, JE	Publish GCPH BP summarising study and recomm's 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.	Not pursued after consultation with partners.	A
	Children and Young People as carers	OR, JE	Publish report (June '17) and stakeholder event (July '17)	Core Undertake secondary analyses of the Glasgow schools survey (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.	Final report published and stakeholder event held. Positive indication from HSCP that the research would be reflected in the city's new Young Carers' strategy. Further analysis of other NHS GGC local authorities to be undertaken, with short local reports produced alongside GCPH briefing paper – data secured from Inverclyde and East Dunbartonshire.	G
	Evaluation of Sistema Scotland's Big Noise programme	CH, KM, CT	Publication of Big Noise Torry report summer 2017	Core Big Noise Torry report fieldwork continuing and publication planned, alongside press conference and seminar in Aberdeen.	Complete Big Noise Torry report published in summer 2017. Three sites report fieldwork is nearing completion and report will be published as per the summer 2018 target.	G

Area of focus	Projects	Lead(s)	Milestones for 2017-18	Description/ Comments (include whether 'Core' or 'In development')	End of year up-date	R/A/G
				The next output will be a Big Noise '3 Sites' progress report covering the centres in Stirling, Glasgow and Aberdeen. Continued dissemination of findings and peer reviewed journal publications are ongoing priorities.	Publication of further evaluation findings in Journal of Public Health in December 2017. Continuous dissemination of findings, including session with Aberdeen City Council senior management team in May 2018.	
Citizenship and early years	Nurturing citizenship in the early years literature review	JM, VM	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.	Complete Literature review completed and published on the GCPH website in October 2017. A blog on this area of work and its links to building resilience in the early years and in children and young people was published as part of the GCPH resilience blog series in April 2018. A GCPH briefing paper, prepared by the researchers at the University of Stirling, summarising the findings from the large literature review is due for publication in June 2018.	G
Adult years and working age	Building Connections	JS, PS	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	Final report was published in December 2017 with subsequent dissemination events to affiliate discussion of findings and implications for practice locally and inform broader strategic approaches. The events were aimed at senior managers and decision-makers from the Scottish Government, local authorities, third sector agencies and public sector services. These launch events were followed by a parliamentary briefing, organised by JRF	G

Area of focus	Projects	Lead(s)	Milestones for 2017-18	Description/ Comments (include whether 'Core' or 'In development')	End of year up-date	R/A/G
				WWS will detail the experiences of the project, identify transferable components of practice and produce a series of recommendations regarding approaches to collaborative working.	and hosted by Pauline McNeill, MSP for Glasgow and Deputy Convenor of the Social Security Committee at Holyrood on 31st January 2018. This included a roundtable discussion and cross-party reflections from members of the Social Security Committee. The Scottish Government also requested a response to the report's findings on two separate occasions during general questions. The first, in February, was asked by Elaine Smith MSP for Central Scotland and was responded to by Aileen Campbell.	
	Welfare reform and Deep End	OR, JE	1 year delivery project which goes live June 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.	Fieldwork is underway, with follow up interviews with clients; the majority of practice interviews; advice worker interviews completed. Final report expected by late August 2018.	G
	Contemporary debt and health	CH	BP due late Autumn 2017	Core Overview/ summary of existing literature relating to contemporary forms of debt and impacts of health and wellbeing.	Evidence review is ongoing; currently the latest population unsecured personal debt figures have been requested from the Office of National Statistics. Anticipated publication August 2018.	A
	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	Decision by NHSGGC not to proceed with this work.	A

Area of focus	Projects	Lead(s)	Milestones for 2017-18	Description/ Comments (include whether 'Core' or 'In development')	End of year up-date	R/A/G
				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 21st 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.	The interns produced an advanced draft of a report and developed a fictive case study based exercise which was used with the team and ran at a workshop at the resilience Healthier Future Forum. The document is currently being revised by JE, PS and NW of What Works Scotland with the aim of launching the final version to coincide with the visit and lecture by Evelyn Forget on Basic Income in September 2018.	A
	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	During 2017, three meetings were held with partners from NHSGGC, local authorities, HSCPs, CPAG and NHS Health Scotland to:	G

Area of focus	Projects	Lead(s)	Milestones for 2017-18	Description/ Comments (include whether 'Core' or 'In development')	End of year up-date	R/A/G
				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.	<ul style="list-style-type: none"> - Explore how alliances could help prepare for UC rollout. - Support NHSGGC Employment & Health Strategic Group (EHSB). - Consider the emerging evidence and need to undertake research. <p>Report (including logic model on possible positive/negative outcomes from UC rollout) submitted to EHSB (May 2018). Reconvene meeting with partners to develop next steps.</p>	
Represent's on expert panels, steering groups etc.	Poverty Leadership Panel	PS, JE	Ongoing	Core	Agreed PLP restructuring (Mar 2018) from 9 to 4 work strands (child poverty, housing, employment & skills and welfare reform) alongside new cross-cutting links to participation, stigma, equalities and poverty premium.	G
	Child poverty subgroup	LN	Ongoing		See comment below*	
	Governance group	JE, OS	Ongoing		GCPH supported governance stakeholder event (Nov 2017) chaired by JRF which informed decision to undertake PLP restructuring.	
	Child Poverty Coordinator Steering Group	JE	Group set up to support co-ordination of actions to meet new statutory reporting.		* Group outputs to be fed into the city's child poverty subgroup with links to the new NHS GGC Child Poverty Action Co-ordinating Network. New alliances and partnership opportunities will be captured in the forthcoming GCPH work plan.	

Area of focus	Projects	Lead(s)	Milestones for 2017-18	Description/ Comments (include whether 'Core' or 'In development')	End of year up-date	R/A/G
	NHSGGC - Employability Health Strategic Group	JE	Ongoing	Core	See end of year update on Universal Credit project work.	G
	NHSGGC - Financial Inclusion planning group	JE	Ongoing	Core	GCPH review of HWC across NHSGGC submitted to the planning group.	G
	NHS GGC Child Poverty Action Co-ordinating Network	LN	Early stages of group set up to co-ordinate local actions across NHSGGC to feed into new statutory reporting duty	Core	Ongoing – see above end of year comments* on Glasgow's Child Poverty Coordinator Steering Group.	G
	Scottish Government - Welfare Reform Health Impact Delivery Group	JE	Ongoing	Core	Ongoing attendance.	G
	Scottish ACES Advisory Group	FC	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.	FC continues to be an active and contributing member of the group. Co-authored national guidance for education staff on using PEF to tackle ACES. Supporting local and national awareness raising and action through meetings, conferences and workshop involvement. Contributed to Scottish Government roundtable discussions on tackling ACES in Bellahouston Academy on 26/3/18 chaired by John Swinney.	G

Area of focus	Projects	Lead(s)	Milestones for 2017-18	Description/ Comments (include whether 'Core' or 'In development')	End of year up-date	R/A/G
	Child Poverty Action Group – Early Warning System expert advisory group	LN	Ongoing		Ongoing - continue to keep informed and feed into established and new child poverty planning groups (GCC & NHS GGC).	G
	Deep End GP advice work – advisory group (NE Glasgow)	JE, OR	Ongoing		Ongoing – see end of year comments on Welfare reform and Deep End project.	G

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

Area of focus	Projects	Lead	Milestones for 2017-18	Description/ Comments (include whether 'Core' or 'In development')	End of Year Update	R/A/G
Understanding Glasgow: the Glasgow indicators project	Development, maintenance and updating of health and wellbeing indicators for Glasgow	BW	<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)</p> <p>Key areas include:</p> <ul 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> <ul 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>	<p>Updates to the majority of the domains of Understanding Glasgow (12 main domains and 7 children's domains) will have been completed by the end of May.</p> <p>Work on this is progressing but not complete. New delivery date October 2018.</p> <p>Discussions have been held with Community Safety Glasgow and NHS GGC. Some support provided by CSG and ISD analysts means have been</p>	<p>G</p> <p>A</p> <p>G</p>

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				a. Education Dept, GCC b. NHS GGC c. Glasgow Life d. Community Safety Glasgow. 4. Resilience Indicators	updated this year. (to monitor) Glasgow's Resilience Strategy and a report on resilience indicators added to Understanding Glasgow.	G
Excess mortality research programme	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): a. Ethnicity analysis: investigating protective effects for mortality b. Social class analyses c. Journal paper(s) from 'spatial arrangement of	DW (1-3)	Journal papers for 2 and 3a by end of year	Core 1. Continued oral presentations and selected written pieces. In Development 2. ISD Scotland encouraged to take the lead (partly to encourage personal development). Core 3. 'Remnants' of previous three cities programme of research: 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).	1. Continued throughout the year. 2. Initially delayed because of ISD's commitments. Now dropped because of impending maternity leave of lead author. As this was an 'In Development' project for external staff development proposed removing from next year's work plan. 3a) Analyses complete; journal paper written up and submitted to JECH.	G A G

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	deprivation' PhD d. Continued contribution to advisory group for 'impact of local policy and practice' PhD (UWS)			In Development b. Led by MRC-SPHSU: GCPH contribution is support for/co-management of analyses and involvement in writing up of results. Core c. Main journal paper resulting from now-completed UoG PhD d. Ongoing advisory role for UWS PhD.	3b) No progress – onus was on MRC-SPHSU to progress this. Suggest that given the developmental nature, this is removed from next year's plan. 3c) Paper written - resubmitted recently following second set of comments from reviewers. 3d) Ongoing throughout the year.	A G G
National & international mortality analyses	1. Cause specific mortality analyses by age and gender, Glasgow and rest of Scotland 2. Scottish and European mortality trends analyses for working age populations 3. Life expectancy trends by deprivation	BW (1-4) and DW (4-6)	Project 1 Report completed by June 2017 Project 2 - decision on whether to progress this project this year by June 2017 (dependent on having enough trend data) Project 3 - Analyses and write-up of methodology	Core 1. Detailed analyses of cause specific mortality by age and gender, comparing Glasgow with the rest of Scotland. In Development 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. Core 3. Analysis of long-term life expectancy trends by deprivation for Glasgow and rest of Scotland.	1. Report completed. 2. Not progressed – awaiting further years of data to accrue and also will require staff resource. Suggest postponing this work this year. 3. Preparatory work undertaken, but work not completed due to other commitments and lack of capacity/time.	G R A

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	<p>4. Age, period and cohort effects analyses</p> <p>5. Comparative analyses of poverty and mortality in parts of Scotland and USA (TBC)</p> <p>6. Trends in absolute and relative inequalities in mortality in Scotland and England</p>		<p>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>4. Age, period and cohort effects in mortality in UK cities (with NHSHS and University of Glasgow).</p> <p>In Development 5. Being led by NHS Health Scotland and subject to various uncertainties (hence 'TBC').</p> <p>Core 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.</p>	<p>4. Severely delayed – initially because of (very) late arrival of data, and since then because of a lack of time/capacity. Hope to start work soon once other ongoing work is out the way.</p> <p>5. Delayed because of unavailability of analyst. Analyses now underway.</p> <p>6. Journal paper published in BMJ Open in July 2017.</p>	<p>A</p> <p>A</p> <p>G</p>
N'hood profiling and analyses	1. Neighbourhood Change project - Understanding health and social trajectories in two pairs of Glasgow neighbourhoods	BW (1-6) LG & PS (1)	1. Will be completed by July 2017	Core 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	1. Outputs were completed in draft in July 2017 but will be published in June 2018 due to maternity leave. These include a GCPH report and a plain English two page briefing, as well as plain English summaries of the final project event. New delivery date Summer 2018.	A

Area of focus	Projects	Lead	Milestones for 2017-18	Description/ Comments (include whether 'Core' or 'In development')	End of Year Update	R/A/G
	<p>2. Creation of long-term (1971 -2011) trends in socio-economic health indicators for Glasgow neighbourhoods</p> <p>3. Reporting on findings of Making Data Meaningful project and evaluation of West Dunbartonshire profiles</p> <p>4. Support HS's evaluation of population migration and health in Clyde Gateway area</p>		<p>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>Neighbourhood Change Reference Group, for delivery in summer 2017.</p> <p>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> <p>In Development</p> <p>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.</p> <p>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>	<p>2. Work completed. Trend data used in one of the CHANGE (programme 1) context reports.</p> <p>3. Presentation given at ScotPHO/LARIA profiles workshop May 2018). No further progress on reporting - dependent on resources from What Works Scotland.</p> <p>4. Project being led by Health Scotland, no further input required from GCPH. (NB Also mentioned under Action on inequalities through the life course.)</p>	<p>G</p> <p>A</p> <p>G</p>

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	5. Evaluation and future development of Children and Young People's profiles for Glasgow Neighbourhoods		Project 5 - Evaluation of Children and young people's profiles completed and written up by September 2017	Core 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.	5. An evaluation of the profiles and evidence for action briefings was completed in June of last year based on an online questionnaire and web statistics. The findings were very positive with users valuing having information in one place, highlighting the utility of the resource in providing evidence for planning, targeting resources and making bids for funds. The evaluation findings presented at the FoPH conference (Nov 2017) and have also been presented a ScotPHO workshop on 'Using intelligence to influence decision making' (Perth, May 2018). To date it has not been possible to discuss with local partners, particularly the HSCP, whether and how this resource might be updated.	G
	6. Advice and links with other national profiling work involving the Improvement Service, Health Scotland and the OEPB (Outcomes, Evidence and Performance Board)			6. Advice and links with other national profiling work involving the Improvement Service, Health Scotland and the OEPB (Outcomes, Evidence and Performance Board). Series of meetings planned into the autumn of 2017.	6. On-going input to national profiles group. Successfully organised a ScotPHO profiles workshop event with Health Scotland - Using public health intelligence to influence decisions (Perth, May 2018).	G

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Health inequalities and their determinants	1. Informing Investment to reduce health Inequalities (II)	DW (1-6) and BW (1-3)	Completion and reporting of analyses for projects 2 and 3 by end of year	Core 1. Contribution to Health Scotland's development of the Ill tool as part of the advisory group.	1. Ongoing involvement on advisory group throughout the year.	G
	2. Income and earning inequalities analyses			2. Analyses of trends in earnings and income in Scotland, England, and a range of UK cities and other parts of the UK.	2. Delayed (because of very late arrival of data, and then because of complexity of analyses/data format) but analyses now complete.	G
	3. Ethnicity and health project			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).	3. GCPH report published on website in September 2017. Journal paper version submitted to journal January 2018 (still waiting for referees' reports).	G
	4. Longitudinal cohort analyses		Results of initial analyses for Project 4 by end 2017	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).	4. Nature of analyses was changed by the interest of advisory group in exploring different theories of social class and their relevance to health outcomes. From this, a 'theory' paper is under review, and analyses have been completed by Dr Wami. Journal paper started.	G
	5. Systematic review of socio-economic inequalities in mortality			5. Led by NHSHS and MRC-SPHSU. Contribution includes undertaking of descriptive analyses and reporting.	5. Various contributions made to project throughout the year.	G

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	6. Public understandings of health inequalities project			6. University of Edinburgh led project. Possible advisory role only.	6. Minor contributions required only this year.	G
National and local groups	1. Annual PHINS seminar 2. Input to ScotPHO collaboration in 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 6. NHS GGC Secondary School Pupils' HWB survey	DW (1, 2 & 5) and BW (1,3-4, 6)	PHINS seminar is 29 th Sept 2017	Core 1. Organising programme for seminar. 2. Includes ongoing maintenance of website sections and contribution to steering group. 3. Ongoing contribution. 4. Ongoing contribution to advisory group. 5. Part of organising committee for 2018 conference. 6. On survey steering group and questionnaire group	1. Successful event held in September 2017; planning for 2018 event is advanced. 2. Contributions throughout the year. 3. Contributions to advisory group meetings during the year. 4. Ongoing. 5. Contributions to organisation made throughout the year. 6. Contributions made on survey process and questionnaire content this year (2018).	G G G G G

**Programme: Sustainable inclusive places
May 2018**

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), Valerie McNeice (healthy urban environments)

Area of focus	Projects	Lead	Milestones for 2017-18	Description/ Comments (include whether 'Core' or 'In development')	End of Year Update	R/A/G
Sustainable travel and transport	South City Way monitoring	BW		In Development Advisory role, working alongside the University of Glasgow's Urban Big Data Centre (UBDC) 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.	This work is likely to progress in future years once the new route has been completed (it is currently under construction). Also dependent on future status of UBDC.	A
	Understanding trends in bus use, car ownership and walking	JM		In Development Explore collaboration with UofG, and possibly SPT, building on forced car ownership GoWell research.	Discussions have continued with colleagues from UofG and UWS but have not progressed to specific projects – this is partly due to developments in the city's approach to transport which we have been closely involved in, e.g. the Transport Summit (October 2017), the establishment of the Active Travel Forum (which we are a member of and host for some of the meetings), and the Connectivity Commission to which we presented evidence (May 2018).	A

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	Analysis of Census travel to work/study trends from 2001 and 2011	BW	Project to start in Aug 2017	<p>In Development</p> <p>Work to be carried out by Physical Activity for Health Research Centre at Edinburgh Uni (subject to accessing data).</p> <p>There are three main aims of this work:</p> <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). <p>Specification still to be finalised. Impact of recession and young people and car ownership to be included in analysis.</p>	<p>After delays due to difficulties in accessing the required Census data, this project is now on track. An extension to funding was agreed and work on the project is progressing with the aim that the university produces a report covering all the work by October 2018.</p> <p>The work now incorporates structural and multi-level modelling, a HEAT analysis of the health impacts of walking and cycling and an estimate of the contribution that walking and cycling commuting journeys make to achieving the guidelines for physical activity.</p>	A
	M74 study. As co-investigator contribute to finalisation of research findings, conclusions and recommendations and production of	FC	Targeted briefings; Briefing Paper on findings; GCPH seminar (Autumn 2017)	<p>Core</p> <p>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 	<p>Work complete.</p> <p>Final report approved and published by NIHR in June 2017. Communication and dissemination of plain English summary and accompanying infographics undertaken. Community engagement report finalised and disseminated.</p>	G

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	final report and journal article			<p>stakeholders/decision makers with link to scientific summary and full report on NIHR website.</p> <ul style="list-style-type: none"> • Create and issue a plain English summary of findings for all involved as research participants or during community engagement to send out. • Send out findings alert along with link to community engagement final report, which is finalised. • Write a BP based on findings but drawing on other evidence/research on transport and health, particularly active travel synthesis. • 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>	<p>Decision taken not to proceed with BP due to comprehensiveness of other outputs. Six published journal articles in academic literature.</p> <p>In November FC chaired and presented at an invited stakeholder workshop involving policy-makers, planners and elected members to discuss implications of findings for future planning of major urban initiatives. Elected members particularly appreciative of this new evidence for action in tackling inequalities and sustainable transport aspirations in the city.</p> <p>M74 findings also integral to evidence presented by Jill Muirie to the Glasgow Connectivity Commission in May 2018.</p>	
Sustainable travel and transport – social inclusion	Bikes for All	BW, GY	Started in early 2018	This project developed after an approach from Bike Plus, the lead partner on the project. Other partners include Bike for Good, Cycling Scotland and Next Bikes.	We have drafted a 'before' survey for people recruited to the projects to fill in prior to getting training and starting to use the hire bikes.	G

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				<p>The project aims to encourage greater cycling among low participation groups in Glasgow, through targeted reduced cost offer of Next bikes and training.</p> <p>Our involvement is focused on the evaluation of impact.</p>	A further 'after' survey is being designed.	
Sustainable travel and transport - Glasgow City Deal:	Knowledge exchange/k'ledge into practice collaboration with University of Glasgow and What Works Scotland supporting a pilot project applying the inclusive growth framework (being developed by David Waite at UofG)	JM, BW, CatT with David Waite (UofG)		<p>In Development</p> <p>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>	Contributed to a paper written by David Waite which puts forward an evaluation framework and outline approach for monitoring and evaluating the inclusive growth impacts of the Sighthill project, one of the city deal projects. While based on one 'case study' project, the framework is intended to have generic applicability for measuring inclusive growth impacts of other projects. This work has been informed by a workshop jointly organised by GCPH. A briefing paper was presented by DW to the city's Commission for Economic Growth and a longer version is being prepared as an academic paper. Further collaboration with DW to further develop an evaluation approach for measuring inclusive growth is likely to be discussed.	G
Healthy urban env'ments	Weathering Change	RJ, GY, VM	<p>Report on Phase 1 Summer 2017</p> <p>Presentation at ECCA conference June 2017</p>	<p>Core</p> <p>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</p>	A report has been published on the GCPH website and was launched to coincide with workshop at the Healthier Future Forum on Resilience. Summary report to be presented to the Environment, Sustainability and Carbon Reduction Committee (GCC). Currently discussing where work can be taken forward and learning applied.	G

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			<p>Presentation at Int'l Conference on Urban Health</p> <p>Feed into other Sniffer adaptation activity (ongoing)</p>	<p>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>	Involved in ongoing work with Sniffer bringing together learning on how to support community resilience (to be synthesised into a two page document with policy recommendations for the Scottish Government).	
	Children's access to good quality greenspace and play space	BW	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 project.</p>	This has been a useful collaboration with UBDC and the spatial planning team in Glasgow City Council. The initial work led to the creation of an indicator of children's access to greenspace, which was included in the children and young people's neighbourhood profiles. Further work has led to the creation of better indicator of access to quality assessed greenspace. The outputs of this include a set of neighbourhood level indicators and maps of children's access to quality assessed greenspace across Glasgow. Some of this data has been presented, for example, at a CHANGE knowledge exchange event. BW is drafting a blog to describe the process of creating this new intelligence and the potential uses of this data.	A

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	Supporting processes of change (changed from Strategic Development Plans)	RJ, GY, JM, BW, CT, CH, JW	Mostly ongoing Consultation response to Supplem'ntary Guidance on Placemaking and Supplem'ntary Guidance on Green Belt and Green Network June 2017	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. 	Continue to engage with Clydeplan, GCC, Green Network Partnership, community groups and others to influence policy and practice. Response to Placemaking Supplementary Guidance submitted to Glasgow City Council in July 2017. Consultation response submitted to Scottish Government on low emission zones (November 2017). Consultation response submitted to Scottish Government on draft Healthy Weight strategy (Jan 2018). Consultation response to GCC City Charter (February 2018).	G
	PhD student project	RJ	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.	PhD complete. Blog about research on GoWell website and summary report presented to GoWell Knowledge Exchange Group.	G

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			Briefing paper synthesising project Winter 2017			
	Private rented sector (PRS) housing	RJ, GY, LG,	Identification of quant. data sources (Summer '17) Commission mapping (Summer 17)	In Development Partnership links developed with Shelter and Glasgow City Council DRS: 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 research. Exploration of the experiences of those living within the PRS. Link with UK Collaborative Centre for Housing Evidence and Urban Big Data Centre.	Decision made to expand to Glasgow City Region. In principle buy-in from representatives of each Local Authority. Progress slow due to challenges in accessing data from the Landlord Register for 8 Local Authorities. Data acquisition ongoing. Discussions held with both the UK Collaborative Centre for Housing Evidence and Urban Big Data Centre.	A G
Sustainable food	Glasgow Food Policy Partnership (GFPP) and Sustainable Food City work.	JM		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 one year who would be located within Olympia.	JM remains the interim Chair of the GFPP. Support is growing for the GFPP with the City Council including in its Council Plan a commitment to work towards sustainable food city goals. A public sector food procurement subgroup of the GFPP has been established and has met twice and is developing a work plan. A food waste subgroup has been established and has met once. The GFPP has also supported the Sugar Smart Campaign in the North of the city.	G

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					Funding for a PT coordinator has been confirmed (from GFPP and GCC with matched funding from Sustainable Food Cities). This post will be appointed in summer 2018 for 1 year.	
	Glasgow Community Food Network	JM		Core Project Support the development and launch of the Glasgow Community Food Network. Note: Due to launch in June 2017.	The Glasgow Community Food Network was launched as planned in June 2017 and is now an autonomous CIC. Its membership is growing amongst community food organisations and it is represented on the Glasgow Food Policy Partnership. It has organised and hosted useful and well attended bi-monthly workshops on specific topics such as food intercept work and community cafes.	G
	URBACT	GY, RJ, PS	Draft action plan Spring 2018	Core Working with Glasgow City Council, developing an action plan to 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.	Action plan sent to URBACT committing to six small food-related projects in North Glasgow. Funding for the project ended in May 2018 and the projects are being delivered by Propagate.	G
	Provide support to the Dalmarnock food hub social innovation fund feasibility project.	JW, JM		In Development Potential to consider this as a pilot for sustainable food city principles.	Ongoing provision advice and support to this project. Partners have experienced some delays e.g. with applying for second stage funding (successful) and as of May 18 needing to re-recruit for key posts.	G/A

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Community engagement and empow'ment	Synthesis of GCPH community engagement work and identification of learning that can be used to inform future work (internal and external work).	JW and CatT		Core Outputs to be utilisation focused briefing papers (one on research and one for service providers).	Due to competing pressures, this work has not progressed to an output this year. Some of the CEE work at the GCPH has been reviewed and this information, in combination with current progress with CEE in the Centre, has informed a draft planning tool for our CEE work. This tool is a prototype and will be in the work plans 2018-19 to take it to each GCPH programme so that it can be refined and used across the Centre.	A/R
	Innovate and evaluate promising approaches to community engagement to improve health and social justice outcomes	JM, CatT, JW	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. 	This work has progressed slightly differently to the early plans. CT undertook desk based research into PB activity in the city to inform the development of PB work in GCPH. This has not yet progressed to directly supporting the use of PB with a community group. Engagement with SCDC did not progress due to two factors: firstly, the Scottish Government have been developing an evaluability assessment of PB; and secondly, engagement with SCDC did not progress beyond initial conversation about their action research activities around the Act because of the status of the evaluability assessment of the Act, which has been developed into a discussion paper. SCDC remain a stakeholder for this discussion paper. In the meantime, discussions have taken place about engaging GDA in PB work.	A/G

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					Cat is having further discussions with researchers and this is likely to inform work in 17/18.	
	Evaluability Assessment of Community Empowerment Act	Cat T JW JM		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.	This collaboration has evolved slightly differently and rather than resulting in an evaluability assessment, the primary output is a paper intended to stimulate discussion about how the Community Empowerment Act can be evaluated in terms of its impact on inequalities. The paper is intended for a wide audience and, if there is support, may result in a collaborative that will together explore how the impact of the Act on inequalities can most usefully be evaluated.	G
	To engage effectively and contribute positively to the local community in which the Social Research Hub/the GCPH is based.	JW		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 Scotland and the UK Collaborative Centre for Housing Evidence (CaCHE).	In addition to local network-building in order to identify opportunities for local partners to access GCPH knowledge and outputs, a number of events and planning for future projects continue: <ul style="list-style-type: none"> • Place standard event with UK Healthy Cities network held 11 December at Calton Heritage and Learning Centre [led by RJ]. Plans for further work with CHLC as part of the ESRC Festival of Social Science, in collaboration with UofG colleagues. • Building relationships with GCC Education Services colleagues to coordinate schools engagement efforts with UofG colleagues and to build stronger links with schools local to Olympia. • Development of a table-top activity using Understanding Glasgow data, to 	G

Area of focus	Projects	Lead	Milestones for 2017-18	Description/ Comments (include whether 'Core' or 'In development')	End of Year Update	R/A/G
					be taken to Glasgow Science Festival in June 18 and for ongoing use as a community engagement resource.	
GoWell	Lead responsibility for governance and delivery of GoWell commitments	Carol T, JC		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.	Steering Group meetings held in May 17 & Nov 17 and agreed to move to six monthly meetings, meeting most recently in May 18. More regular meetings between GoWell and sponsors held via newly established Knowledge Exchange Forum. Given a long delay in recruiting a replacement for GoWell's lead analyst, the Scottish Government issued a no no-cost extension to the grant until end-March 2019. GoWell's qualitative researcher has also been issued with a contract extension. Discussion of exit strategy for GoWell therefore postponed until Dec 18 Steering group meeting.	
	GoWell Community Engagement work programme	Cat T		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.	The GoWell Panel exit strategy worked well and Panel members were supported to move on to 'next steps' that were appropriate to them after their final contribution to GoWell – a successful workshop at the GoWell Annual event. A draft Briefing Paper has been prepared and will be published this year along with online profiles/guides intended for practitioners from third, voluntary, public and academic sectors. These have been developed in response to frequently	G

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					asked questions from audiences about the processes we used to achieve empowering results. These succinct, one-page profiles summarise how we developed the Panel and how we applied what have become common axiomatic practices, including co-production. The profiles include links to the resources, standards and practices that we used.	
	Communications & dissemination	JC and Cat T	Annual event Sept 17	<p>Core</p> <p>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 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,</p>	<p>New Knowledge Exchange Forum (KEF) established consisting of GoWell PIs and Comms Manager and key representatives from each of the sponsors. Four meetings have been held: Sept 17, Nov 17, Feb 18 and May 18. This group considers and advices on knowledge exchange opportunities for specific findings and topics with a key focus on informing and linking GoWell into relevant local and national policy and practice developments and forums.</p> <p>All planned reports published as expected and ongoing dissemination of these. Annual event held in Sept 17, attended by 70 delegates. Feedback received anecdotally and via the evaluation forms very positive.</p> <p>A briefing paper and practitioners toolkit to share learning from the GoWell community engagement and empowerment work programme are in development and will be published later this year (see above).</p>	

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				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.	Due to a lack of analytical capacity to produce area level findings, the final GoWell newsletters have been delayed until later this year. A PhD student has been employed on a five month contract to produce a summary of change over time for each study area on a standard set of indicators.	
	Ecological monitoring relating to GoWell – record linkage	DW	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.	'On hold' pending clarification/direction from GoWell PIs.	R
	Ecological monitoring relating to GoWell – long term trends	DW	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.	Complete. Two reports (by Morna Watt (intern)) sent to GoWell PIs in July 2017. Data sent also sent to Ade Kearns for any further analyses.	G
Thriving Places	Support Aspiring Communities Fund project in Gorbals	JM/CT with A Fyfe		In Development Provide advice on the development of this project if	Early discussions took place as planned, however delays in the funding has meant that the project has not progressed.	R/A

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		(RS)		successful in being granted funding.	It is uncertain whether or not this will proceed in the future.	

Additional work (not originally in work plan):

Presentations						
As presented in mid-year review	Active travel	BW		Climathon event organised by Resilient Glasgow		
	Active travel	JM		STEP summer seminar		
	Active travel	JM		City Chambers Transport Summit		
	Active travel	JM		School run summit in North Glasgow organised by 'Heart of Scotston'		
	Active travel	JM		Cycling Scotland Conference 2017		
	Low Emissions Zones	JM		Friends of the earth seminar on LEZ		
	Food poverty and schools	JM		APSE Soft Facilities Management seminar		
	Weathering change	GY		Faculty of Public Health Conference		
	Weathering Change	GY		Delivery of Green Tease event in Possilpark		
	Weathering change	RJ		European Climate Change Adaptation Conference		
May 2018	Sustainable and	JM		Glasgow's Connectivity		

	inclusive travel			Commission		
Emergent work						
As presented in mid-year review	PhD studentship	BW	Application due mid-December	Collaborative PhD with Urban Big Data Centre on 'The use of changes within Integrated Transport Network (ITN) maps to identify new cycling infrastructure and its impact on adjacent property prices both commercial and residential'.	This application was not successful but further collaborations with UBDC proposed.	G
	Childcare Pathfinder Evaluation Project, Public Health Registrar and Community Engagement and Empowerment	FC, CT	Induction and ad hoc advisory to public health registrar	FC oversaw placement for a registrar in key competencies including: qualitative research, health improvement, community engagement, influencing policy and practice. Ad hoc CEE advice was provided.	The CEE advice element of this placement was effective in helping a registrar apply core community engagement principles and practices in a useful and meaningful way to an evaluation. Particularly useful were concepts like the ladder of participation to understand that a range of community engagement methods can be chosen depending on the project/context and clear communication is required. The context of the evaluation gave the registrar the means to apply this learning. The useful combination of a registrar-led piece of work (with supervision and support) on a GCPH-area of expertise with CEE advice promises a potential 'template' that could be mutually valuable to the Centre and the future public health workforce and strategy.	G
	Policy briefing	BW, JM	Draft end December	Policy briefing responding to the announcement in the SG's Programme for Government of a doubling of the active travel budget.	Draft has been written but not published. May be an opportunity to redraft and use alongside publicising updated trends in casualties (see below).	G

	Grant proposal	RJ	Submit Nov 2017	<p>Collaborative proposal to Scottish Universities Insight Institute entitled Practical Philosophy: Thinking for the Future.</p> <p>The project proposes using philosophical dialogue with marginalised groups to discuss issues central to Scotland's future on the themes of education, health, culture, politics and the environment and to facilitate their voice being heard among decision-makers.</p>		G
	Commonwealth leaders and UN Sustainability Development Goals	BW, CT	24 August 2017	<p>The Common Purpose 33Sixty leadership programme asked the GCPH to help their delegates develop innovative recommendations for the Commonwealth Secretary-General, who had asked for ways of reaching the UN Sustainability Development Goals. To address this task, a shortened version of the Glasgow Game was designed and facilitated. In response to the Centre-wide request to give three PhD students experience and skills training, they were mentored to provide assistance on the day in the game itself and on drafting the full report.</p>	<p>The full report of the workshop was written and published on the GCPH website.</p> <p>One of the students, who had first-hand experience of inequalities as a young person of an ethnic minority growing up in a poor part of Glasgow, was supported to guest write a blog about the impact of this workshop on him and his hopes for the city.</p>	G
	Advisory group	RJ	Draft review Dec 2017	Advisory group for "A systematic review of interventions to boost social relations through improvements in community		G

				infrastructure (places and spaces)” commissioned by What Works Centre for Wellbeing.		
	National Transport Review - Inequalities sub-group	BW	Ongoing to June 2018	BW was invited mid-year to join this group which has been tasked with formulating policy responses to tackle transport related inequalities. The group’s outputs will feed into the overall review process		G
	Air quality	BW	Ongoing	<p>1. BW attended GCC’s inaugural delivery forum on the Glasgow Low Emission Zone.</p> <p>Potential future projects:</p> <p>2. MSc dissertation (Glasgow Caledonian) comparing implementation and effectiveness of other LEZs in Europe (arose out of Austin Booth’s placement in GCPH in April).</p> <p>3. GCPH was part of collaborative NIHR bid led by the Institute of Occupational Medicine to evaluate the impact of avenues and city ways projects on air quality, health and liveability.</p>		G
	Table-top object	JW, LL, RJ, CT, BW	December 2017 – May 2018	Relationship-building with the Calton Heritage and learning Centre, one of the core communities hosting the UK Healthy Cities network led to a bespoke project. An idea for a ‘higher or lower’ game was developed as a paper prototype and it was highly successful in sparking conversations at a drop-	The finished object will be used for the Glasgow Science Festival and subsequently as a resource to promote research to the general public for future pop up events, consultation sessions and workshops.	G

				in community event at the Calton Heritage and Learning Centre. In response, a table-top object has been commissioned to facilitate engagement with the research of the GCPH and the University of Glasgow.		
Additional work at year end	New analysis	BW	To continue in 17/18	Accessing STRAVA data for Glasgow with the aim of creating a set of cycling metrics for the city e.g. numbers of cyclists, their geographic distribution, their contribution to meeting physical activity guideline, a HEAT calculation of potential health benefit of regular cycling, notional contribution to reducing carbon emissions. Data now accessed from UBDC. Analysis to be planned and undertaken.		G
	Updating analysis and possible briefing paper	BW	To continue in 17/18	Updating of pedestrian and cyclist casualty trends for Scotland, Glasgow and by deprivation. Work is being progressed by ISD analysts and is close to completion. Next stages will involve writing this up and deciding a suitable format for dissemination e.g. briefing paper		G
	Consultation response (from the Glasgow Food Policy Partnership) to a) Scotland's	JM	End Jan 2018	As interim Chair of the GFPP JM collated comments from GFPP members and prepared a response from the GFPP to the SG draft Healthy Weight strategy.	Completed and submitted on time.	G

	obesity and Healthy Weight strategy consultation b) Glasgow's draft procurement strategy					
	Member of the School Run Working Group (NW Glasgow)	JM	To continue in 17/18	Contributing to discussions and developing plans for a sector wide approach to improving active travel rates to school. GCPH will provide evidence and use the information gathered to inform future plans in order to generate outputs that have utility to schools.	Ongoing.	G
	Enhancing Food Security in Scotland: Steering Group	JM	To continue in 17/18	JM sits on this national steering group to oversee SG funded research to improve understanding about food security and how to improve it. Involves attending quarterly meetings, commenting on research methodologies and draft papers.	Due to complete summer 2019.	G
	Planning and the school food environment research steering group	JM	To continue to Q2, 17/18	JM sits on this national steering group to oversee SG funded research to bring together evidence and good practice relating to how planning processes and systems can contribute to an improved food environment around schools. Involves quarterly meetings and commenting on draft papers.	Due to complete summer 2018.	G
	Road Safety project – schools in areas of deprivation	BW, JM, JW	Since December 2017 - to continue to	This project is being led by the road safety team in Glasgow City Council. BW was initially involved in planning the work, JM advised	Due to complete summer 2018. May inform further school road safety/active travel pilots which we may be involved in.	G

			end Q1 17/18	on the development of this project and JW has been involved in advising and facilitating the community engagement component. The research is seeking to learn more about the factors that influence real and perceived road safety around schools in areas of deprivation as well as generating ideas about ways to improve road safety.		
	Active Travel Forum (Glasgow)	BW, JM	Ongoing	BW has been involved in re-establishing what was the cycling forum into an active travel forum for Glasgow. This is a cross city forum chaired by a Councillor (Convenor of the Transport Committee). GCPH are represented on the group and are active contributors. GCPH hosted the second meeting of the forum.		G

Programme 4: 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	Milestones for 2017-18	Description/ Comments (include whether 'Core' or 'In development')	End of year Update	R/A/G
Participatory budgeting	Supporting community-based evaluations of participatory budgeting Continued support to National BP working group	CH, KM	Briefing Paper – Winter 2017	Core Building on earlier 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'.	Development of paper has broadened to include input from community groups within Glasgow who have experience of PB. This has involved input from GCPH community engagement staff and will support the relevance and utility of the paper. The paper now also involves further collaboration with What Works Scotland. Anticipated publication: July/Aug 2018. Co-authoring a book chapter entitled ' <i>Participatory budgeting in Scotland: The interplay of public service reform, community empowerment and social justice</i> ' in 'Hope for Democracy: 25 years of PB around the world'. Other contributing authors include What Works Scotland, University of Edinburgh, COSLA, SCDC, Scottish Government and The Democratic Society.	G G

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Volunteering and participation	Commonwealth Games (CWG) Volunteer Study	RJ, GY	Two year follow-up survey report - Summer 2017	Core Publication of final survey report as part of CWG clyde-sider volunteer study.	Published on GCPH website.	G
			CWG synthesis briefing paper - Autumn 2017	Core Synthesis of key findings from CWG volunteer study (survey findings and commissioned qualitative research) for GCPH briefing paper.	Synthesis paper on key learning from three surveys and qualitative research with volunteer applicants for the Glasgow 2014 CWGs published on GCPH website.	G
			Article submitted to 'Health and Place' - Autumn 2017	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.	Delayed due to restructuring and loss of staff within Leeds Beckett University who are leading on publication. Draft working version complete. Expected to be submitted to journal in July 2018.	A
	European Championships (summer 2018)			In Development Publication of feedback from volunteers/volunteer applicants for the 2018 European Championships. Ongoing involvement in the steering groups for the development of the volunteering programme.	Continue to meet with European Championships working group. Initial analyses of information from the application form for applicants presented. Study protocol submitted and questionnaire development underway for online survey conducted immediately after the Games.	G
	Evaluation of Volunteer Glasgow's Volunteer Charter			In Development Supporting Volunteer Glasgow's ongoing use of the Volunteer Charter for Glasgow by evaluating the impact of the charter on participants.	Report completed and published on GCPH website (March 2018). Initial findings presented to Volunteer Glasgow staff to inform discussion section of report.	G

Area of focus	Projects	Lead	Milestones for 2017-18	Description/ Comments (include whether 'Core' or 'In development')	End of year Update	R/A/G
Social enterprise as a health intervention	Homes for Good evaluation	LG, PS	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).	Wave 1 data collection completed March 2018. Wave 2 data collection completed May 2018. Publication of underpinning theory published in March 2017 as GCPH Briefing Paper. Briefing paper for CommonHealth series produced April 2018 and revised article submitted to <i>Housing Studies</i> May 2018. Further peer review publications are currently submitted to various journals and are being presented at a number of housing conferences across Europe. This includes two papers at European Network Housing Research in Uppsala in June 2018 – one summarising the main findings about impacts on H&WB and one other exploring the blurring of boundaries between social and private renting illustrated by Homes for Good and North Glasgow Housing.	G
Asset-based approaches across services and settings	Synthesis and communication of learning on asset-based approaches	JMcL/ VM	Animation of learning – Winter 2017	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.	No further progress made to date in relation to this objective due to capacity and focus of work in relation to asset-based approaches moving to new programme of work.	A

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	Exploration of leadership supporting an asset-based culture change		Initial scoping paper Autumn 2017	<p>In Development Initial scoping paper proposed outlining rationale for interest in this area, areas for exploration and identification of sources of literature.</p> <p>Linkage to Action across of Lifecourse programme – Review of the literature on citizenship in the early years and Children's Neighbourhoods Scotland.</p>	Continued interest in area but no progress to report.	R
	Animating Assets follow up		Autumn 2017	<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>	Publication of citizenship report on GCPH website and accompanying blog. Briefing paper on citizenship review in preparation. Importance of strategic and local leadership emerging as key theme in development and delivery of Children's Neighbourhood Scotland.	G
	Asset-based approaches in primary care		Ongoing	<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</p>	Initial contact made with Glasgow Animating Assets research sites leads but no progress made due to competing demands. Connection to Animating Assets team remains with possibility of future collaboration remaining open.	R
					Contact established with the Jigsaw project based in Drumchapel and meetings held with new project officer. Ongoing support offered.	A

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	Partnership working and sharing learning		Ongoing	<p>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>	<p>Opportunities to share learning and insights and to work with others exploring or implementing asset-based approaches being actively taken up. Services research presented at the 2017 Faculty of Public Health annual conference, presentation and workshop delivered to GCal University Occupational Health Students and scheduled to present to the North of England DPH's in September 2018.</p> <p>Also providing support, insights, time and capacity to a number of academic research proposals including University of Napier with McMillan Cancer Research (unsuccessful), University of Stirling, NI Community Health and Development Network and Hull and York Medical School.</p>	G
Culture and health	<p>Representing Communities</p> <p>1. Support for community led grant application</p> <p>2. Submit 2nd draft of Policy Press chapter</p>	<p>PS, JW</p> <p>PS</p>	<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</p>	<p>1. Unsuccessful application to Carnegie late Summer on role of libraries in supporting health was followed by Heritage Lottery Fund Grant led by Glasgow Life on collaboration with Impact Arts to sustain the activity developed in Representing Communities to engage youth with the heritage of the area. This</p>	G

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	3. Briefing paper 4. PhD Supervision	PS PS	Winter 2018	Communities work, with a focus on heritage and youth participation in Dennistoun. 2 and 3. First drafts to receive feedback and by resubmitted accordingly. 4. PhD student Maddie Phillips to submit draft of thesis.	has successfully passed the first stage. Full application is due in August/September 2018 with decision in the new year. 2. Draft chapter submitted to Representing Communities lead but illness of designated editor has prevented the book from progressing any further. Situation unlikely to improve 3. Briefing paper drafted but capacity of PS in Acting Associate Director role has seen this reduce in priority. 4. Student found permanent employment before submitting thesis	R A R
	Museums and health: 1. Glasgow Life Befriending project 2. Cultural Services and Health book chapter	PS,CH PS (M O'Neil, Dorna n)	Responding to Glasgow Life timescale- likely to see progress Autumn 2017 Winter 17/18	In Development Supporting Glasgow Life in evaluability assessment of befriending project with Wheatley Group.	Museums and health 1. Capacity issues at Glasgow Life mean this project is being re-imagined. After conversation in new year, resource pressures led to Glasgow Life discontinuing involvement. To be removed from next year's work plan 2. Book chapter in advanced stage of drafting with publisher deadline for early 2018 (since pushed back by publisher)	A G
	Community Centres as resources for regeneration PhD	PS (Ade Kearns Dave Beck)	Annual review August 2017	PhD supervision. Involves bi-monthly meetings with student and co-supervisors.	PhD student chose not to continue after Annual review	

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Exploring assets through play	Exploration and drawing together of evidence on benefits of play	GY	Briefing paper - Spring 2018	<p>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.</p> <p>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.</p> <p>Linkage to Baltic Street Adventure Playground through Children's Neighbourhood Scotland work in the Lifecourse Programme.</p>	<p>Work no longer progressing as planned at the start of the workplan period due to capacity and competing priorities.</p> <p>This topic focus represents a cross-cutting interest for a number of programmes across GCPH - CHANGE, place-based approaches, urban health, access to greenspace, children's neighbourhoods, participation etc. In support of these other priorities, we hosted a talk from Sue Palmer as part of the GCPH Seminar Series entitled: 21st century children- the state of play.</p>	<p>R</p> <p>A</p>
Glasgow Game	Glasgow Game in a box	BW	As required	<p>Core Continued support, awareness raising and usage of the Glasgow Game in a Box by partners and interested others. Provision of facilitation as required.</p>	<p>The Glasgow Game has been used with MPH students from Glasgow Caledonian University again this year.</p> <p>Development of a related learning resource is pending and dependent on discussions with the Modern Studies Association.</p>	G
Developing a perspective on 'evidence'	Exploring the nature of 'evidence'	VM PS	Publication of blog - Summer 2018	<p>In Development Development and publication of an initial blog on the GCPH</p>	<p>Complete Shift in focus from work plan. Blog series planned, collated and published with</p>	G

Area of focus	Projects	Lead	Milestones for 2017-18	Description/ Comments (include whether 'Core' or 'In development')	End of year Update	R/A/G
				<p>website exploring wider perspectives in relation to the nature of evidence.</p> <p>In Development Hold small workshop/conversation to progress discussion around exploring the nature of evidence for asset-based approaches and wider interests.</p> <p>In Development Exploring participatory research and evaluation methods and sharing examples. Possible future collaboration with PHEN.</p>	<p>inputs from a range of external contributors. General theme of 'resilience for population health', supporting the Healthier Future Forum event. The series explores issues including citizenship, social protection, asset-based approaches, appreciative enquiry, and touches on measuring resilience.</p> <p>In response to wider interest in this subject, links have been made to planned and existing work with partners. For example, qualitative synthesis work with the Public Health Evidence Network (PHEN), Prof Trish Greenhalgh's evidence workshop at University of Oxford, and Simon Rippon's paper on 'Promoting Asset-Based Approaches for Health and Wellbeing'.</p> <p>New collaborative work with PHEN being established around qualitative synthesis.</p>	<p>A</p> <p>G</p>
Public Health Evidence Network	Power animation	JM	Completion - Autumn 2017	<p>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.</p>	<p>Power animation completed and launched in August 2017. Dissemination plan delivered as planned including a range of presentations and blogs relating to the animation.</p> <p>A three month monitoring report was completed and circulated internally for information. A nine month monitoring</p>	G

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					report will be completed in 2018/19 Q1 for information about the reach, impact and influence of the animation.	
Link worker follow-on	Membership of Links Worker Monitoring and Evaluation group and Advisory Group	JM, PS, JE	Attend meetings as required reviewing M&E group membership at end of year	<p>Core</p> <p>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.</p> <p>GCPH will also be represented on the Advisory Group (PS,JE) with a role offering learning and evidence from the other relevant work and research GCPH has been involved in, and also to offer a 'critical friend' perspective.</p>	Neither the M&E or the Advisory group have yet been established due to changes in plans for the programme at national level.	R
Partnership working, sharing learning and supporting practice across work of Programme	<p>Sharing learning and dissemination of findings</p> <p>Partnership working and support</p> <p>Expertise on advisory/steering groups</p>	ALL	Ongoing, as required/ opportunities identified	<p>Core</p> <p>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.</p> <p>To continue to increase the impact of GCPH work on approaches for improved outcomes by establishing joint working and building chains of alliances.</p>	<p>Across the programme the team continue to actively take up opportunities to present and share research and learning from across areas of focus and activity.</p> <p>Continue to provide support, advice and input to those exploring innovative ways of working and approaches to improving outcomes, on long term and ad hoc basis, including supporting colleagues from NHS Ayrshire & Arran, NHS HS, Children's Neighbourhoods Scotland, One Parent Families Scotland, Clyde Gateway, Volunteer Glasgow, the Alliance, Carnegie UK, Corra Foundation, and the SCDC.</p>	G

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				Provide support and advice to organisations (statutory and third sector) that are exploring and developing new innovative approaches to practice.	<p>We continue to share learning and support practice with colleagues at Glasgow City Council in relation to volunteering following the Commonwealth Games and in preparation for the 2018 European Championships.</p> <p>Contribution and co-authoring of a book chapter on PB in Scotland. Chapter highlights influential role of GCPH in making the links between PB and strategic and policy challenges within Scotland.</p> <p>Preparation of a blog on social networks, connections and resilience for the Health Foundation.</p>	
	Pittsburgh Collaboration	PS	Fortnightly Skype calls. Attend Pittsburgh session September 2017	<p>Core Eighteen month project exploring what Pittsburgh can learn from Glasgow' experience of responding to de-industrialisation and developing resilience strategy.</p> <p>Presentation/workshop will be required from PS in September and taking share of organising guest contribution to fortnightly Skype calls.</p>	<p>The Pittsburgh collaboration continues with a week-long exchange to the city in September 2017. Fortnightly skype meeting and 'webinars'; have taken place including a focus on opioids and diseases of despair and strategies to combat loneliness and isolation.</p> <p>Since mid-year, webinars have continued with interest from Pittsburgh in relation to the future of work and Glasgow's perspective on inclusive growth and Scotland's' Basic Income pilots. A webinar on sustainable food production and responses to food scarcity was particularly insightful for Glasgow colleagues. A seminar within out GCPH series entitled "Building cities from the</p>	G

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					<p>people-up: empowering communities for health and resilience, a transatlantic conversation" also flowed from the collaboration.</p> <p>Two planned visits of Glasgow colleagues are in preparation. The first (from GGC and UofG) will concentrate on University's role in city development and inclusive growth. The second will include NHSGGC colleagues and will focus on regeneration and health, alleviating child poverty and food.</p>	
	Glasgow City Health Inequalities commission, Mental Health Support group	PS	Reporting Summer 2017 Joint workshop Autumn 2017	<p>Core</p> <p>To support launch and dissemination of outputs. Knowledge translation activity through joint Health Scotland/HSCP/NHSGGC/GCPH event.</p>	Commission reported in October and GCPH led on production of films and a 'making sense of the recommendations' event with Health Scotland and Glasgow Health And Social Care Partnership. The event was hosted by GCPH with PS facilitating.	G



**Glasgow Centre for Population Health
Management Board Meeting
Wednesday 20 June 2018**

2017-18 Month 12 Budget Statement

Recommendations

Board members are asked to note:

- The Centre's financial position for the 2017/18 showing expenditure to date of £1,491,886 resulting in an underspend of £44,688.
- The reasons for the underspend being slightly higher than the previous forecast of £11,541.

Commentary on Table 1

1. The column showing planned expenditure is in line with that previously reported to the Board in December.
2. Actual spend for the year of £1,491,886 is slightly lower than previously estimated resulting in an underspend of £44,688.
3. The underspend in the project lines are mainly due to projects slipping into the current financial year. However plans are in place to fully utilise this funding in 2018/19 and the undernoted projects have been reflected in the 2018/19 budget plan.
 - **Action on Inequality** - £2,500 due to work on rolling out social protection findings being delayed. This will happen in 2018/19.
 - **Sustainable Inclusive Places** - £16,500 of this is required to fund a GoWell post in 2018/19.
 - **Innovative Approaches to Improving Outcomes** - £5,000 development plan for later years will be utilised in 2018/19 to support later years and loneliness development.
 - **New Perspectives on Health** – There are commitments (including staff and wider partner training on communicating messages around poverty and staff facilitation skills) and proposals produced by the team to support development through internships and secondments which amount to £21,000. We wish to honour these commitments and proposal in the 2018-19 work plan.

**Liz Anderson
13th June 2018**

Table 1 - 2017-18 Financial Plan

		<i>Planned 2017/18 £</i>	<i>Actual at Month 12 £</i>	<i>Variance from Original Plan £</i>
<i>Income</i>				
I 1	Annual SG Allocation	1,250,000	1,250,000	-
I 2	Sponsors Contribution to GoWell & GoEast	108,000	104,350	3,650
I 3	Other Income	106,000	75,346	30,654
	<i>Total Income 17/18</i>	<i>1,464,000</i>	<i>1,429,696</i>	<i>34,304</i>
I 4	Carry Forward from previous years	<i>115,432</i>	<i>106,877</i>	<i>8,555</i>
	<i>Total Available 17/18</i>	<i>1,579,432</i>	<i>1,536,573</i>	<i>42,859</i>
<i>Expenditure</i>				
<i>Research:</i>				
E 1	Action on Inequality	71,000	68,028	2,972
E 2	Understanding Health Inequalities	33,600	36,706	(3,106)
E 3	Sustainable Inclusive Places	55,950	28,662	27,288
E 4	Innovative Approaches to Improving Outcomes	30,500	25,757	4,743
E 5	GoWell/GoEast	120,000	120,000	-
E 6	New Perspectives on Health	48,000	16,598	31,402
E 7	Allocation to Networks	27,000	21,397	5,603
	<i>Total Research</i>	<i>386,050</i>	<i>317,148</i>	<i>68,902</i>
<i>Communications:</i>				
E8	Communications	45,000	43,667	1,333
	<i>Total</i>	<i>45,000</i>	<i>43,667</i>	<i>1,333</i>
<i>Management and Administration</i>				
E 9	Centre Management, Admin & Running Costs	27,000	9,824	17,176
E 10	Accommodation Costs	118,000	117,977	23
E 11	Core Staffing	1,003,382	1,003,270	112
	<i>Total Management & Admin</i>	<i>1,148,382</i>	<i>1,131,071</i>	<i>17,311</i>
	<i>Total Expenditure</i>	<i>1,579,432</i>	<i>1,491,886</i>	<i>87,546</i>
<i>Balance</i>		<i>(0)</i>	<i>44,687</i>	<i>(44,688)</i>



**Glasgow Centre for Population Health
Management Board Meeting
Wednesday 20 June 2018**

2018-19 Work plan

Recommendations

- This document sets out the GCPH work plan for 2018-19. It follows discussions with the team, Board and members of the EMT on how we can continue to align our work to support wider strategic priorities. The Board is asked to review and approve the plan, subject to any required revisions.
- The Board are also asked to note how this year's plan addresses the challenge of indicating the Centre's success and impact, particularly in relation to moving to longer term planning.

Introduction

1. When confirming funding for the financial year 2018-19, Scottish Government requested both a detailed one year plan and a higher level three year view. To this end, this year's work plan takes account of the GCPH Management Board's recent 'forward look' session together with planning discussions with the team. Both are incorporated into this paper to outline how we will use the planning for 2018-19 and up to 2021 to maximise potential impact and continue to support partner priorities, respond to an evolving landscape and build on our existing approach to supporting processes of change.
2. Guidance from the GCPH Management Board was to develop a clear articulation of the Centre's role both in describing challenges in relation to trends in health and inequalities and in supporting responses to these challenges. Consequently, our work plan is rooted in our understanding of the responses required to improve health and reduce inequality and in the role GCPH plays as part of those responses. Such activity can range from convening knowledge and action within our networks, to evaluating promising approaches and/or developing new responses alongside partners. We also routinely build community engagement and empowerment into our work.
3. An associated budget plan accompanies this paper (Board paper GCPHMB/2018/359). This work plan is to be delivered within £1.25m of core funding from Scottish Government. There are currently 26 staff (23.8 FTEs) within GCPH, the majority being core staff, with a small number under joint working arrangements or on time-limited projects.
4. Appendices present the work plan 'at a glance' (Appendix 1), an overview of the cross cutting approaches (Appendix 2) and a detailed description of the programmes in table form (Appendix 3).

Context for 2018-19

5. The wider context in which the Centre operates continues to evolve and we seek to respond to it in planning our work. The strength of the work plan rests on the relevance and alignment of our proposed and continuing work with a number of key strategic priorities nationally and locally.
 - *The wider operating context at a national and local level and the priorities raised by it.* Particular reference is made to our core partners' (Scottish Government, NHS Greater Glasgow and Clyde, Glasgow City Council and Glasgow City Health and Social Care Partnership) strategic priorities. A key development being the NHSGGC Public Health Strategy 2018-2028.
 - *An understanding of how we deliver our impact and influence* to improve health, reduce inequalities and assist others to do so. It is our intention to make this understanding visible and coherent within the plan, through both our evidence and monitoring work and attention to how we support processes of change.
 - *A clear direction of travel for the three year period with indicative milestones* should also read as explicit: where we want to be and how we will get there.
6. Elements of the national context we are responding to include:
 - Continuing focus on inequalities and child health given additional impetus by Child Poverty Delivery Plan and local authority duties stated within it.
 - Demographic change and related shift in disease burden including population ageing and increasing ethnic diversity.
 - The new National Performance Framework with its headline purpose revised to include explicit references to wellbeing and inclusive growth.
 - The continuing economic context of austerity with reduced partner resources and implications for our collaborative work. Increasingly, we are being asked less to produce more research, and more to provide an active role in facilitating change.
 - Public Health Reform and a core set of national public health priorities – providing opportunities for the GCPH to contribute to the desired shift towards a whole system approach to improving the public's health and reducing inequalities. The emerging priorities show alignment and convergence with other national and local outcomes (particularly place and community, early years, mental health and wellbeing, poverty and exclusion).
7. Elements of the local partner context informing the shape and approach taken in our work plan are outlined below.
8. Working with **NHSGGC** on the development, delivery and monitoring of the Public Health Strategy for Greater Glasgow and Clyde. The Strategy identifies GCPH along with others as providing skills and resources needed to deliver the strategy and to inform NHSGGC's horizon scanning for future public health and service challenges. Over the year, we will work alongside the Director of Public Health as the Strategy evolves to:
 - Support the identification of indicators of progress on the Strategy's headline outcomes, including narrowing the inequality in life expectancy within the Board area and the inequality in healthy life expectancy between the Board area and the rest of Scotland. This will take account of the multiple and complex drivers of improvements in population health and reduction in inequality.
 - Support the development of actions within the Strategy's six programmes. One proposed area of focus is in relation to the Strategy's programme *Intervening on the intermediate causes of poor health and health inequalities*. Our work on Sustainable and Inclusive Places and Innovative Approaches to Improving Health Outcomes can supplement the focus on behaviour and behaviour change in the Strategy

- through developing approaches that produce health enhancing environments, cultures and services. Examples include action to improve air quality, promotion of active travel, promoting the conditions for improved child health, promotion of participatory budgeting and support for new ways of working to promote supported self-management amongst older populations.
- Contribute to the NHS Board's service plans for facing the future. This connects with GCPH analyses of the changing needs of the population and actions which can be taken across the system, including communities as well as practitioners, to adapt to and mitigate projected service demand.
 - Across the Public Health Strategy's objectives, there is notable alignment with wider national priorities and an opportunity for Centre learning and collaboration to support the shift to preventative approaches, to reduce inequalities through advocacy and community planning.
9. The GCPH team will continue to work with **Glasgow City Council** colleagues on the priorities of reducing inequality, including through inclusive growth and creating opportunities for citizen involvement in decisions. These priorities show convergence with other national and local priorities, particularly the National Performance Framework headline purposes of increased wellbeing and inclusive growth. Further alignment and support for delivery is expressed through the Glasgow City Community Plan with priorities of economic growth, resilient communities and a fairer more equal city. In relation to these priorities GCPH will:
- Work alongside Glasgow City Council in developing a shared understanding of what inclusive growth might look like in Glasgow, given the city's particular challenges in relation to the city's health profile. Conversations with Glasgow City Council colleagues have led to a commitment to joint work on inclusive growth to articulate and strengthen the links with these health dimensions and also with child poverty.
 - Utilise the Centre's growing expertise in community engagement and empowerment (CEE) to support partners in the implementation and evaluation of the CEE aspects of local programmes such as Thriving Places, inclusive growth and participatory budgeting.
 - Continue our representation on the Poverty Leadership Panel in support of its four strands of Child Poverty, Housing, Employment and Skills and Welfare Reform and for our emerging and continuing work to align with and support their priorities.
10. GCPH will continue to develop evidence and support policy and practice changes in relation to active travel and the city's food network; and will sustain a focus on the early years – for example through action on child poverty, the development of Children's Neighbourhoods Scotland and new models of childcare; we will remain an active partner in the Community Planning Partnership, and in the city's work on resilience and sustainability.
11. The **University of Glasgow's** Social Research Hub in the Olympia building is now the site for policy-focussed research on health, housing and attainment. The team based in the Olympia delivers a range of community-focussed participative activities. During 2018-19 we will take stock of priorities for further development, in particular at how to maximise the wider profile and impact of the collective activity. Beyond the Olympia building, GCPH works with Glasgow University colleagues on specific research programmes (excess mortality and GoWell, for example) and contributes to advisory structures and strategic developments.

Our understanding of impact

12. We have periodically visited the question of the change GCPH makes 'in the world' and the steps we consciously take to achieve such change. In our previous work plans, our activity has been described as having two connected dimensions: a data component and an action component. The first relates to work that supports changing understandings of health, health inequalities and their determinants through the analysis and synthesis of data on trends and patterns of health outcomes and the drivers of health and inequality. Evidence is also provided on the types of investments and actions that may offer practical ways forward to mitigate the impacts of health inequalities and their determinants and reduce the inequality gap. This data analysis and reporting component is perhaps what we are best known for and represents an important core of our activity.
13. The second aspect to how we work focuses on responses. This work is conducted in collaboration with partners and stakeholders to develop the actions, approaches and policies required to maximise the conditions for improving health and reducing inequality. This work is well recognised by the organisations involved in specific projects and in shaping responses, but may be less well known more widely. The two ways of working are not mutually exclusive and the one supports the other. Both ways of working are captured in the stated purpose, aims and structure of the work plan.

The GCPH purpose and aims

14. Purpose
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.
15. To support the delivery of our purpose, we have established the following aims:
 - To build 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.
 - To develop our resource base and outputs to **support the development and application of promising investments and actions** to improve population health outcomes. To do so in a manner underpinned by strong and productive relationships and work embedded within partner organisations and priorities.
 - To maintain a strong focus on the **social justice and equity implications** of investments, interventions and policies designed to improve health and inequality outcomes.
 - To embed **community engagement and participation across** our programmes of work and communicate learning from these processes more widely.
 - To maintain 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.
 - To continue 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.

16. To illustrate how we have previously delivered on these aims, case study examples of successful impact and influence have been produced (see End of year Review 2017-18: GCPH Board paper 356). These case studies highlight:
 - How our impact and role in change goes beyond the delivery of projects to include providing time, space and support for partners to create solutions using and applying learning informed by GCPH resources and work.
 - How 'impact' often comes outside the timeframe of project delivery (usually marked by the launch of a report and associated dissemination) and after a period of 'mainstreaming' activities across partnerships.
 - Creating the conditions for success for these activities involves an incremental approach to 'handing over' and continuing relationships after project delivery.
17. Consequently, it is important that the work plan reflects the balance of not only 'core' delivery and 'developmental' work as in previous plans but also continuing mainstreaming work through involvement in networks and being in a position to respond to opportunities.

Indicators of success against our aims

18. In three years' time we should be able to describe or indicate the following progress against our aims.
 - To have provided credible **evidence and insight** to develop and support local and national efforts to understand and respond to health inequalities. A key success indicator will relate to the on-going development and delivery of NHSGGC's Public Health Strategy. Firstly, we will have worked co-productively with NHSGGC in the identification and monitoring of appropriate indicators of progress towards the Strategy's headline outcomes (narrowing of inequality in life expectancy locally and narrowing gap in healthy life expectancy between Board area and national level). Secondly, we will have contributed to the Strategy's programmes of action by delivering in relation to the key objectives of: practical intervention in the intermediate causes of poor health and health inequalities and the application of a life course approach to tackling fundamental causes of poor health. Our contribution will relate to approaches which go beyond a focus on health behaviours to how public health efforts can establish and maintain the conditions through which health is created.
 - To have collaborated with Glasgow City Council, Community Planning Partners, and Glasgow City Health and Social Care Partnership to **support the implementation of investments and actions** aimed at strengthening the conditions and environments in which health and wellbeing is created for citizens. Key points of contact here include bringing a clear population health perspective into the plans and practice of Inclusive Growth; City Deal projects; and strategic local activity such as Thriving Places, early years activity, Scottish Children's Neighbourhoods and other place-based strategies. This will be through provision of evidence and facilitative support for new approaches.
 - To demonstrate **continuing commitment to networks of policy and action to mitigate the experiences of poverty and inequality as drivers of poor health** outcomes. We will be able to narrate GCPH's role in the process of mainstreaming for example, child poverty actions, mainstreaming awareness and responses to Adverse Childhood Experiences or monitoring and collaborating to respond to implications of welfare reform.

- To have evidenced that the principles and practice of **Community Engagement and Empowerment (CEE)** have shaped a broad cross-section of the Centre's work and to have supported key partners in the application of CEE approaches (particularly the University's engagement in the East End and beyond) and City Deals. This will be achieved through the provision of outputs communicating generalisable learning from GCPH work and facilitative support for their development and implementation.
- To provide examples of our **primary role in bringing a new concern or response to an existing issue** from the margins to mainstream understanding and practice, with evidence of continuing support to networks of policy and practice in developing responses required. This could be for example in relation to healthy and sustainable food production and consumption, impact of the roll-out of Universal Credit or an emergent trend.
- To demonstrate ways in which our **communications function has continued to evolve**, not only growing the size and diversity of our networks but adapting our outputs to support practitioners, policy makers and other key actors to develop approaches to reduce or mitigate health inequalities. Further, we can evidence widespread recognition of the impact and role of GCPH in processes of change by our key partners particularly NHSGGC and Scottish Government.

The work plan

19. This year's work plan follows the established structure of four programmes of work, all comprised of multiple projects; a communications function; and eight cross-cutting approaches. This section of the document highlights how the work proposed for the four programmes relates to the Centre's Aims and associated indicators of success.
20. The following issues have been addressed in developing the programme plans:
 - Aim and purpose of the Programme and indicators of success in three years
 - Links to and support for partner priorities and key contextual issues they respond to and address
 - Three year aspiration and year one milestones to include: delivery on current work, development of new work and emerging areas, and continuing partnership work on projects which may have already reported.

Overview of Programmes

1. Action on inequality across the life course

Aims and purpose

- To build understanding of the influence that poverty and experiences of inequality exert on health.
- To develop actions and approaches to their mitigation and provide evidence for action.
- For such actions to be developed collaboratively with a view to shifting the balance of decision making more clearly towards proactive and preventative responses.
- To develop and strengthen engagement and influencing skills within the GCPH team to support partner efforts to tackle poverty and inequality.

Key areas of work for three years

- Continued support for tackling child poverty across Greater Glasgow and Clyde.

- Development of accessible population health information on Children and Young people.
- Understanding, preventing and responding to ACEs.
- Earnings analysis and supporting responses to the impact of Universal Credit on a range of population groups.
- Young people and life transitions.
- Childcare and Nurture in Glasgow East.
- Children's Neighbourhoods Scotland.
- Evaluation of Sistema Scotland.

Three year aspiration and success indicators (examples)

Area and ambition	Success indicator
Support for strategic tackling of child poverty.	<p>Contributed to more accurate monitoring of child poverty trends and provision of evidence for actions to mitigate and reduce child poverty.</p> <p>We will have supported the delivery of the Child Poverty Delivery Plan utilising expertise with key delivery agencies, for example, the Poverty Leadership Panel, the Glasgow Child Poverty Co-ordinator and contributed learning from developmental work such as CHANGE and Children's Neighbourhoods Scotland.</p>
Support processes of improving health and wellbeing of children and young people.	<p>Evidence of influence in use of population health intelligence in partner decisions (Scottish Government, NHS GGC, HSCP and Local Authorities).</p> <p>Production of accessible population health information and evidence for action.</p>
Understanding and responding to and preventing ACEs. Contribute to a whole system approach with collaborative action across sectors.	<p>Use of ACE questions in routine partner surveys (e.g. Scottish Health Survey). Widespread awareness of ACEs, their antecedents and prevention in responses to health inequality and their determinants across the public health system.</p> <p>Evidence of trauma informed practice across services.</p> <p>ACEs as priority in policy responses across Scottish Government portfolios.</p>
Contribution to developing improved, affordable and sustainable childcare.	<p>Development and provision of affordable, flexible and accessible childcare services that work for families in East Glasgow.</p> <p>Increased GCPH and partner knowledge of factors in preventing access to affordable child care.</p> <p>Production of outputs that support the adoption of principles and learning beyond East Glasgow.</p>

2. Understanding health

Aims and purpose

- To promote greater understanding of trends in health, health inequalities and their determinants (at national, city and regional levels) through conducting and sharing analysis through a range of outputs.
- To support future service planning through the identification of emerging issues and trends in demography and the determinants of health and inequality.
- To support collective efforts to improve health and reduce inequality through policy recommendations that can be used by policy-makers locally and nationally.

Key areas of work for three years

- Support for service planning to tackle poor health and inequality through continued development and updating of the Understanding Glasgow resource in response to partner priorities, particularly in relation to children and young people.
- Continuing national and international mortality analyses.
- A focus on income inequalities as a fundamental cause of health inequities including new income and earnings analyses, participation in systematic review and engagement with other international work.
- Expanding understanding of the potential impacts of changes in the population (e.g. migration, changes in ethnic diversity) on health outcomes and service planning.

Three year aspiration and success indicators (examples)

Area and ambition	Success indicator
To influence local and national efforts to better understand and address health inequalities.	<p>Provided support to the Director of Public Health on the development of methods to monitor progress on indicators that can be tracked in relation to Public Health Strategy's objectives.</p> <p>Evidence from stakeholder interviews and assessment 'scorecard' document of influence and progressing of excess mortality synthesis recommendations.</p>
To update report on international comparative mortality trends: Scotland within Western Europe (the 'Sick man' report).	Alongside delivery of associated outputs, engagement with stakeholders and organisations around implications and actions e.g. NHSGGC, HSCP and GCPH Board.
To extend understanding of emergent trends in important health outcomes across relevant populations.	Delivery of associated outputs and engagement with stakeholders in delivery e.g. NHSGGC, HSCP and GCPH Board.

3. Sustainable inclusive places

Aims and purpose

With a focus on elements considered foundational to living a healthy and flourishing life (employment, education, public transport, physical activity, food, pay culture and social connection) to:

- Support processes of change for Glasgow to become a more inclusive, resilient and sustainable city.
- Inform and support policy, partnerships and practice to fair and equitable access to healthy and sustainable environments.

- Provide evidence, evaluation and engagement with partners and communities in relation to key priorities nationally and locally.

In response to key contextual developments of:

- The introduction of Low Emission Zones in Glasgow and plans for other Scottish cities.
- The increase in active travel budget and new developments such as South City Way, Avenues project and Sighthill Village development.
- A potential new Scottish Transport Bill to include bus franchising and city-wide connectivity.
- Links to partner priorities such as Glasgow's Community Plan, focus on Place and Community, Diet and Physical Activity in National Public Health priorities, Glasgow Food Policy Partnership, Glasgow's Commission for Economic Growth and Glasgow's Active Travel Forum.

Key areas of work for three years

- To promote sustainable food in the city through Glasgow Food Policy Partnership and joining up all aspects relating to food production, distribution and consumption.
- Air quality and Low Emission Zones: Monitoring and offering support for future development. Evaluation of impact of Avenues and City Way projects on air quality, health and liveability.
- To collaborate with Glasgow City Council and community partners to develop solutions to mitigate and adapt to climate change in North Glasgow.
- To understand the health impacts of the growth of the private rented sector and to work towards solutions in collaboration with housing, homelessness and public health colleagues.
- Continue to monitor active travel trends, including casualties and contribute to new metrics to describe the health impact of walking and cycling.
- To continue to embed health considerations in national, regional and local spatial planning.

Three year aspiration and success indicators (examples)

Area and ambition	Success indicator
To engage and support national and local effort to improve air quality, to support and influence the development of active and sustainable transport through research, community engagement and advocacy.	Through delivery of outputs outlined and collaborations established there is evidence and recognition of our influence in key transport strategies, such as the city's connectivity strategy and networks of shared interest supported, including community perspectives. There is evidence that such strategies recognise and reflect the importance of transport for health and social justice. Policies are implemented in an inequalities sensitive, community engaged way.
Supporting Glasgow to move toward becoming a sustainable food city through cross-city and cross-sectoral representation and commitment.	Our role in connecting and coordinating work on different aspects of sustainable food is evidenced and has enabled a strategic approach to food related issues in the city. This includes evidence of city wide commitment to a food poverty response that

	<p>goes beyond foodbanks and emergency food aid and which is owned by local communities.</p> <p>We have supported Glasgow City Council's commitment to become a sustainable food city.</p>
Supporting the evolving definition and understanding of actions to promote inclusive growth	<p>Plans for IG projects and their monitoring and evaluation are informed by a public health and social justice perspective and have engaged with relevant communities. GCPH has collaborated and led with key partners involved in economic development and city deals in the achievement of this.</p> <p>Evaluation and monitoring indicates progress on the above outcomes.</p>
Community Engagement and Empowerment (CEE).	<p>GCPH is seen as a source of information and support for partners in the implementation of CEE expectations as outlined in legislation and National Standards.</p> <p>CEE is embedded across the programmes of work at GCPH and undertaken collaboratively across the Olympia Social Research Hub.</p> <p>Established and mutually beneficial partnerships with the organisations represented at the Social Research Hub which engage with and benefit the local community.</p>

4. Innovative approaches to improving outcomes

Aims and purpose

The Centre has a recognised reputation for exploring, developing and implementing new approaches in research methodology, evaluation and practice underpinned by an ambition to broaden the understanding of what is considered public health intelligence and evidence and a clear focus on the wider social determinants of health and their impact on health inequalities. This Programme places a focus on reviewing new and established innovative and pioneering approaches across substantive areas of research and methods.

Key contextual issues

The work of the programme and our established relationships and partnerships will support the delivery of partner priorities and key policy documents and outcomes locally and nationally. This includes contributing to the NHSGGC Public Health Strategy, HSCP priorities, GCC Strategic Plan, the Scottish Government Child Poverty Delivery Plan and Thriving Places.

Key areas of work for three years

- Participatory budgeting: supporting wider use through provision of credible outputs, ongoing support and assistance to the National PB working group and new Glasgow City Council PB Advisory Group.

- Volunteering: Building on evidence and networks already created to make best use of volunteering in a manner which reduces health inequalities in the city.
- Developing a new perspective on evidence: Supporting Public Health Evidence Network through partnering on qualitative evidence synthesis and evidence matrix work utilising learning from other GCPH work where innovative approaches to evidence have been utilised such as Weathering Change, CHaNGE and Children's Neighbourhoods Scotland.
- Social Enterprise as a health intervention: Developing methods to evaluate new pathways to health creation arising from social enterprise through evaluation of Homes for Good. Research to be completed next year and opportunities for collaboration with Yunus centre for discussion. We will look for learning to influence other GCPH work.
- Delivering the GCPH Seminar Series to encourage innovative perspectives to be heard and discussed in the city.

Three year aspiration and success indicators

Area and ambition	Success indicator
Participatory Budgeting: Supporting progress towards 1% of Council budgets being allocated through PB through preparation and publication of further resources to support practice and ongoing support and assistance to the National PB working group and through membership of new Glasgow City Council PB Advisory Group.	Achievement of 1% target and influence of Centre work in delivery.
Climate change and adaption: For the implications of climate justice and the potential of adaptation to address community priorities and inequality to be widely recognised and a core part of responses.	Evidence from planning and strategy documents of climate and environmental justice being a component of mainstream responses. The Centre being able to provide a narrative of our role in influencing networks, for example, through closer working with Centre for Climate Justice at GCU.
Volunteering: To increase and support opportunity for volunteering as a component of legacy for large event planning in the city. We would wish to see narrowing of the gap in the socioeconomic composition of those who access and benefit from volunteering opportunities through using our evidence and perspective within event planning networks.	Indication of movement in diversity of event volunteers as reported in Scottish Household Survey.
Later years: to establish a new project exploring practice development in relation to later years, responding to the need of services to take account of the shifting disease burden in relation to demographic change, the need to mainstream preventative approaches and living well in later years.	Evidence of convening networks and co-productively identifying a pertinent set of issues for exploration. Key partners might include HSCP, the ALLIANCE and/or Glasgow Life.

Communications

21. The GCPH Communications Strategy was refreshed in 2017. The objectives this refresh outlined were designed to maintain a close connection between our Communications function and the Centre's aims and purpose. These objectives will be reflected in planning, notably;
- Ensuring our work is widely shared and accessible in a variety of formats.
 - Encouraging wider participation in GCPH events.
 - Providing opportunities for two-way engagement and feedback.
 - Supporting the process of implementation and change.
 - Continuing to develop and improve means and methods of communication through monitoring and evaluation.
 - Maintaining an awareness to the receptiveness of our messages with the public and other audiences and that the work does not pose significant sensitivity to our partners.

Summary

22. This work plan outlines how will deliver our programmes of work in a manner which builds upon of previous success, is consistent with the Centre's aims and purpose and responds to and supports partner priorities in relation to improving health and reducing inequality. We have given particular attention to how we may assess progress by establishing indicators that reflect change in relation to the underlying determinants of health and inequality.

Conclusion and recommendations

23. The development of the work plan as outlined above should help the GCPH team and management articulate how our work supports key partner priorities and provide a sense of direction with longer term goals and aspirations identified.
24. We welcome discussion on further development of this approach at the June Board meeting.

**Pete Seaman and GCPH team
June 2018**

Appendix 1: 2018-19 Work Plan 'At a glance'

PROGRAMME	AREA OF FOCUS	PROJECTS	
Action on inequality across the lifecourse	Child health	Children's Profiles	Core
		Monitoring to support child poverty delivery plans	Core
		Childcare and Nurture in Glasgow East (CHANGE)	Core
		Stepping Stones evaluation	Core
		Evaluation of joint food policy	Core
		ACEs	Core
	Children's Neighbourhoods Scotland	Continuing development of activities and evaluation	Core
		Support for expansion across Glasgow and other urban centre	Core
		Publication of evaluation plan	Core
		Communications and dissemination	Core
	Disrupting cycle of child poverty	NHSGGC Co-ordinating group and related activity	Core
		HWC review report	Core
		Cost of the School Holidays	Core
		Evaluation of Sistema	Core
	Adult years and working age	Universal Credit proposal development	Core
		Future of social protection	Core
		Welfare reform and Deep End	Core
		Contemporary debt and health	Core
	Future of social protection	Social protection paper	Core
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	Six analytical projects	4 Core
	Neighbourhood profiling	Neighbourhood change and five analytical projects	4 Core
Sustainable inclusive places	Sustainable travel and transport	Informing Investments to reduce Inequalities and four analytical projects	All Core
		Air quality and low emission zones	Core
		South City way monitoring	In Dev't
		M74 study dissemination	Core
	Healthy Urban Environments	Glasgow City Deal	Core
		Weathering Change	Core
		Place standard and climate change	In Dev't
		Private rented sector housing	Core
	Sustainable food	Glasgow Food Policy Partnership	Core
		Glasgow Community Food network	Core
		Food poverty/insecurity	In Dev't
	Community Engagement and Empowerment	Synthesis of transferable learning	Core
		CEE support for GCPH programme	Core
		Evaluability Assessment of Community Empowerment Act	In Dev't

		Social Research Hub Community Engagement	Core
	GoWell	Ongoing analysis, communications and dissemination	Core
	Inclusive Growth	Support for city deals and city wide economic strategy to understand what inclusive growth may look like for Glasgow	Core
Innovative approaches to improving outcomes	Participatory budgeting	Supporting community based evaluations	Core
	Volunteering and participation	2018 European championships study	Core
		Supporting city-wide commitments to volunteering	C'tinuing
		Evaluation of Volunteer Charter	In Dev't
	Social enterprise as health interventions	Homes for Good evaluation	Core
	Asset-based approaches across services and settings	Support for CNS	Core
		Sustainability of Animating Assets	Core
		ABAs in Primary Care	In Dev't
	Culture and health	Representing Communities follow-on and dissemination	Core
		Cultural services and health	In Dev't
	Developing a perspective on 'evidence'	Qualitative synthesis	In Dev't
	Later years and social isolation	Develop network of interest and proposal	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 role and to ensure our distinctive features are well represented across all our work. In 2017-18, a lead was 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 four work 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: 2018-19 Programme Plan; Detailed outline of one-year activity

Action on inequality across the life course

Programme leads: James Egan and Fiona Crawford.

Programme support: Bruce Whyte, Jennifer McLean, Valerie McNeice, Oonagh Robison, David Walsh (this means members of the team who work on projects located in this programme)

Admin contact: Ricky Fleming

Area of focus	Projects	Team members and lead	Cross-cutting App'ches	Milestones for 2018-19	Description/Comments
Child health and wellbeing	Children's Report Card.	BW, FC, JM, SS (NHS GGC)	1,3,5,6-8	a) Advisory group set up (April 2018). b) Agreement on themes and collection of indicators (May-October 2018). c) Draft report cards by theme (by end of 2018). d) Publication and dissemination (first half of 2019).	<p>CORE</p> <p>This project aims to produce report cards on key topics relating to children and young people's health well-being in the Glasgow and Clyde Valley Region.</p> <p>There will be an overarching element emphasising the purpose and context of the work. Beneath this there will be the following sub-themes: mental health; poverty; healthy diet, weight and physical activity; environment/safety; 21st century issues.</p> <p>For each theme, a set of key headline and determinant indicators will be agreed and collected, key indicators and issues will be described and evidence for action will be highlighted.</p> <p>Project is a collaboration between GCPH, NHSGGC, ISD, HS, Glasgow HSCP, Glasgow's Education dept. Other partners are likely to be involved as the project develops.</p>
Child poverty	Monitoring, advising and influencing the development of child	BW, FC, JE, OR, LN, SS	1-5,7-8	a) Establish understanding of SG and local plans for monitoring child poverty	<p>Monitoring child poverty</p> <p>This could potentially lead to getting better local estimates of child poverty and longitudinal trends, and</p>

Area of focus	Projects	Team members and lead	Cross-cutting App'ches	Milestones for 2018-19	Description/Comments
	poverty delivery plans across NHS GGC local authorities and HSCPs.			<p>against targets.</p> <p>b) Adjust and develop monitoring framework, building on existing monitoring on Understanding Glasgow.</p>	be useful for local delivery plans and our own monitoring on Understanding Glasgow.
Childcare provision	Evaluating the impact of Childcare and Nurture Glasgow East (CHANGE) on individual and community wellbeing.	FC, VMcN, BW	1,2,4,5,6, 7,8	<p>Year 2 evaluation underway comprising:</p> <p>Quantitative data collection and analysis to monitor increase in provision of places and quality of provider (data available in June 2018).</p> <p>Qualitative research with parents who do not access childcare to explore perceptions and reasons for non-engagement. Interviews will be conducted during summer 2018.</p> <p>Findings will be written up and presented to project board in autumn 2018 and disseminated to external stakeholders thereafter.</p>	<p>CORE</p> <p>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, 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.</p>
Parenting and child wellbeing	Evaluate Stepping Stones for Families (SSfF) Family Wellbeing Service.	FC, VMcN, OR	1,2,4,5,6, 7,8	By end June 2018 : Clarify aims, outcomes and performance indicators of project; agree overall aims/objectives of evaluation.	<p>CORE</p> <p>Assessing the impact of third sector led early intervention on parenting and child outcomes amongst vulnerable families in Glasgow. Five year BLF funded project (April 2014-April 2019) being delivered by SSfF.</p>

Area of focus	Projects	Team members and lead	Cross-cutting App'ches	Milestones for 2018-19	Description/Comments
				<p>Establish multi-agency advisory group and terms of reference.</p> <p>By July/ 2018: Establish theory of change to inform evaluation aims/objectives/methods. Agree specific parameters of research.</p> <p>By August 2018: Source resources to conduct field work and data collection. Gather and analyse data through quant and qual methods.</p> <p>By December 2018: Finalise report and submit to SSfF.</p>	<p>GCPH invited by SSfF to conduct evaluation during 2018 to inform final report to BLF at end of funding period. Mixed methods will be employed to explore questions such as how where and why the model works, what is it that makes a difference and why and who doesn't engage with the service and for what reasons etc. conduct the evaluation during the next 6 to 9 months with a final report agreed and submitted to SSfF by the end of the calendar year. This is a core project.</p>
Adverse childhood experiences	<p>Understanding, preventing and responding to adverse childhood experiences through:</p> <p>a) systematic literature review of association between SE status and ACES;</p> <p>b) exploring expert</p>	FC, DW	1,2,3,4,5,6,7,8	<p>a) Systematic review completed and written up by end of 2018. Presentations made to appropriate stakeholder groups from October 2018 onwards.</p> <p>b) By end of August synthesise results of initial online survey and circulate to survey participants for comment and feedback. Discussion and</p>	<p>Both pieces of work are aimed at better understanding the causal pathways from ACEs to adverse social and health outcomes. There are clear links to current SG (and other partners') priorities, and involves collaborative work with NHSHS, NHSGGC, UoG and SG.</p>

Area of focus	Projects	Team members and lead	Cross-cutting App'ches	Milestones for 2018-19	Description/Comments
	<p>knowledge of evidence of pathways linking ACES to social, economic and health related factors;</p> <p>c) contribution to joint priority setting and action through national ACES advisory hub and through leading CPD across GGC work groups.</p>			<p>dissemination of findings to be brokered through ACES advisory hub later in year.</p> <p>c) Ongoing throughout the year.</p>	
Children's Neighbourhoods Scotland	<p>Further development of the CNS model of working in Bridgeton and Dalmarnock.</p> <p>Support CNS governance structures – Advisory Group, Planning Group and R&E Group.</p> <p>Publication of the Evaluation plan for CNS and support wider research and evaluation approach and fieldwork.</p> <p>Publication of</p>	JM, CT	1, 2, 3, 4, 5, 7, 8	<p>Ongoing – phases 2 and 3 of planned approach.</p> <p>Ongoing – supporting quarterly Advisory Group meetings and monthly Planning and R&E group.</p> <p>September 2018 – publication of plan, ethics approvals, supporting research and evaluation fieldwork and methods.</p> <p>August 2018 – publication of contextual literature reviews</p> <p>Ongoing – via learning events, blogs and taking up dissemination opportunities.</p>	<p>CORE</p> <p>Children's Neighbourhoods Scotland will continue to work in partnership with local people and partners in Bridgeton and Dalmarnock to improve outcomes, services and opportunities for children and young people. Embedding a place-based and innovative collective impact approach, CNS will continue to develop activities, frameworks and tools to support better health and educational outcomes for young people, including contextual analyses, asset mapping, community-led activities based on identified and shared priorities, partner and community engagement, monitoring of the theory of change and drawing on learning from elsewhere.</p> <p>Following the publication of the Child Poverty Delivery Plan CNS has been awarded £2m over the period 2018-2022 to further expand CNS within Glasgow and into another urban centre, a small town and a rural community. Work is underway to identify possible</p>

Area of focus	Projects	Team members and lead	Cross-cutting App'ches	Milestones for 2018-19	Description/Comments
	<p>number of contextual literature reviews.</p> <p>Sharing of learning and insights from CNS locally and nationally via learning events, blogs and dissemination opportunities.</p> <p>Support the further expansion of CNS across Scotland as detailed in the Child Poverty Delivery Plan.</p>			Ongoing – support identification of expansion areas and build local partnerships, work to support the development of appropriate governance and delivery arrangement.	locations and a proposal for Scottish Government is in development.
Disrupting the cycle of child poverty	<p>NHSGGC child poverty co-ordinating group (Sonya Scott) is responsible for NHSGGC/six local council's jointly preparing annual child poverty action reports to Scottish Government.</p> <p>Explore merits of a development session involving GCPH, Joseph Rowntree, NHS GGC and executive leads</p>	JE, LN		Summer 2018 onwards.	<p>This proposed work is in the very early stages of planning. Possible theme that could be included to support local child poverty action reports are:</p> <ul style="list-style-type: none"> Sharing existing evidence developed by the GCPH/JRF to-date.

Area of focus	Projects	Team members and lead	Cross-cutting App'ches	Milestones for 2018-19	Description/Comments
	across the 6 council areas to look at how shared learning can support local child poverty action reports.				
	Healthier Wealthier Children review report (June 2018).	LN, JE	4,5,7	June 2018 onwards.	<p>CORE Sharing learning from completed Healthier Wealthier Children report which is based on interviews with local Financial Inclusion Leads (covering running costs and return on investment).</p> <p>Post report on GCPH website and share learning at NHSGGC Financial Inclusion Planning group (June 2018).</p> <p>Other dissemination opportunities to be considered (Summer 2018 onwards).</p>
	Cost of the School day publication.	LN, JE	4,5,7	Draft paper delayed due to staff bereavements.	Revised peer-review paper to be prepared by late Autumn 2018 (To be published in conjunction with CPAG and University of Strathclyde, Dr Edward Sosu).
	Cost of the School Holiday.	JE, FC	4,5,7	Publish GCPH BP summarising study and recommendations by Autumn 2018.	<p>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.</p>
	Children and Young People as carers.	OR, JE, PS	1,4,5,6	Produce local reports and GCPH briefing paper and contribute to young person's event.	<p>CORE Building on the Glasgow city report (2017) undertake analyses of other NHS GGC local authorities with short local reports to be produced alongside a GCPH briefing paper (Summer 2018).</p>

Area of focus	Projects	Team members and lead	Cross-cutting App'ches	Milestones for 2018-19	Description/Comments
					Contribute to GCPH event linked to Year of Young People (event will include a young carers theme) Sep 2018.
	Evaluation of Sistema Scotland.	CH, CT, KM	4,5,6,7,8	<p>Publication of Big Noise 2018 progress report.</p> <p>Strategic support and influence within Aberdeen City Council.</p> <p>Data sharing protocol agreements in place across local authority areas; Glasgow, Stirling and Aberdeen.</p> <p>Continuation of evaluation advisory group (EAG).</p>	<p>CORE 2018 progress report publication, seminar event, press release and dissemination are planned for summer 2018.</p> <p>Meetings with Aberdeen City Council senior management team concerning early intervention and approaches to evaluating preventative interventions.</p> <p>Building required approvals and data infrastructure to enable access to and analysis of educational attainment data in Stirling Council.</p> <p>GCPH leads and administers multi-disciplinary Sistema Scotland EAG in collaboration with independent chair.</p>
Adult years and working age	Building on 2017/18 Universal Credit (UC) activities, strengthen alliances and links with planning groups to consider research on the impacts of UC roll out across NHS GGC.	JE, LN		Reconvene short-term working group to develop a proposal (Summer 2018 onwards).	<p>CORE A possible strand of work would involve build on Jonathan Morduch's work ('The hidden financial lives of low-income households') to consider the UC journey facing people with disabilities and women on low pay, the so called 5C's – caring, catering, cashier, clerical and cleaning). Any planned work will need to consider UC activities being planned by Glasgow City Council.</p>
	Future of Social protection	JE, PS Nick Watson, WWS		Final report due – September 2018 (revised date).	<p>CORE The completed report will be posted on the GCPH/WWS websites and serve as a foundation to undertake workshops with representatives from across Scotland on the development of alternative and 'healthy' models of social protection. Report launch to coincide with Evelyn Forget visit and follow-on session.</p>

Area of focus	Projects	Team members and lead	Cross-cutting App'ches	Milestones for 2018-19	Description/Comments
	Welfare reform and Deep End.	OR, JE		Final report expected by Autumn 2018.	Core Since 2013, the GCPH has developed a series of partnership outputs involving the Deep End GP project. This final evaluation report will complete evaluation activities over this five year period. However, there may be scope to produce summary outputs capturing learning over this period.
	Contemporary debt and health.	CH	3,4,5	Briefing paper publication summer 2018.	Publication, press release and dissemination with partners concerning the increase in unsecure personal debt and the potential impacts on population health; highlighting service redesign implications.
Representation on expert panels, steering groups etc.	Poverty Leadership Panel.	PS, JE	4,7	Ongoing.	GoWell Panel members were supported to attend the Poverty Leadership Panel as part of legacy planning in the final stage of GoWell's community engagement. This involved joint working between GoWell's Community Engagement Manager and Glasgow City Council. At least two GoWell Panel members take part in the PLP. This has led to dialogue about developing future PLP participation from citizens as part of the GCPH's community engagement activities. Local child poverty delivery plans: it will important to consider GCPH membership of Glasgow's child poverty subgroup and coordinator steering group alongside the NHS GGC Child Poverty Action Co-ordinating Network. New alliances and partnership working opportunities that emerge will be captured in this work plan.
	Child poverty subgroup.	LN		Ongoing.	
	Child Poverty Coordinator Steering Group.	JE		New group set up to support co-ordination of actions to meet new statutory reporting.	
	Governance group.	JE, OS			
	NHSGGC – Employability Health Strategic Group.	JE	1, 4, 7	Ongoing.	
	NHSGGC – Financial Inclusion planning group.	JE	1,4,7	Ongoing.	

Area of focus	Projects	Team members and lead	Cross-cutting App'ches	Milestones for 2018-19	Description/Comments
	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.	
Cross-cutting: community engagement and empowerment	In development	JE, LN, CT, JM	2, 4	Analyse end of year work plan. Work planning meetings.	Analyse end of year work plan 2017-18 to identify promising areas of future CEE within this programme. CEE will attend work planning meeting to learn about the programme and provide reflection on potential novel methods and where CEE might support our projects. Developmental: work with the programme to develop CEE within our programme that adds value, builds on our current ways of working while also realistic and achievable.

Understanding health

Programme leads: David Walsh and Bruce Whyte

Programme support: Oonagh Robison, Welcome Wami and external organisations

Admin contact: Kelda McLean

Staff resources available: Approximate staff resource for this programme – 1 F/T programme manager, 1 P/T programme managers, 1 P/T researcher, 1 P/T administration support officer (although all have commitments to cross cutting themes and projects in other programmes) + ISD consultancy

Area of focus	Projects	Team members and lead	Cross-cutting App'ches	Milestones for 2018-19	Description/ Comments
Understanding Glasgow: the Glasgow indicators project	Development, maintenance and updating of health and wellbeing indicators for Glasgow. (Costs: Staff and currently ISD consultancy staff)	BW, OR	1-4, 6, 7	1. Updating UG is an on-going process through the year. 2. Should be completed by Oct 2018.	CORE 1. Developing and updating the content of Understanding Glasgow (dependent on support from external partners and staff resources within Centre). 2. Developing links to Excess Mortality topics: a. Adding selected graphs and text to relevant sections of UG. b. Making links to Excess Mortality report.
Excess mortality research programme	1. Excess mortality synthesis report policy recommendations 'assessment of progress'. 2. 'Three cities' research (Glasgow, Liverpool, Manchester): a. Ethnicity analysis:	DW (1 & 2)	1, 3	1. Completed assessment by end of year. 2. 2 journal papers published by Dec 2018; external examination of thesis in July 2018.	ALL CORE 1. Discussion with various policy leads, stakeholders, researchers etc. regarding any progress with the policy recommendations. An 'assessment' or 'scorecard' document will be created to help with this (with NHSHS and others) 2. 'Remnants' of previous three cities programme of research: a. Part of broader ethnicity and health research programme, this was examining the potential protective effects of ethnic diversity on mortality in

Area of focus	Projects	Team members and lead	Cross-cutting App'ches	Milestones for 2018-19	Description/ Comments
	investigating protective effects for mortality. b. Journal paper(s) from 'spatial arrangement of deprivation' PhD. c. Continued contribution to advisory group for 'impact of local policy and practice' PhD (UWS).				Manchester compared to Glasgow using the Scottish and English Longitudinal Studies (with ISD Scotland, University of Edinburgh, and NHSHS). Analyses all complete – just seeking to publish journal paper and disseminate findings. b. Main journal paper resulting from now-completed UoG PhD: seeking final publication (with UoG). c. PhD now complete: acting as external examiner.
National and international mortality analyses	1. Life expectancy trends by deprivation. 2. Age, period and cohort effects analyses. 3. Comparative analyses of poverty and mortality in parts of Scotland and USA.	BW (1 & 2), DW (2 & 3), WW (2 & 3)	1, 3, 4, 6	1. Analyses to be completed and written up by October 2018. 2. Analyses and write-up (journal paper) by end of year. 3. Analyses and write-up (journal paper) by end of year.	ALL CORE 1. Analysis of long-term life expectancy trends by deprivation for Glasgow and rest of Scotland. 2. Age, period and cohort effects in mortality in UK cities (with NHSHS and UoG). 3. Analyses being undertaken by WW; partners are NHSHS and MRC-SPHSU.
Neighbourhood profiling and analyses	1. Seek decision on future profiling options for Glasgow neighbourhoods. 2. Advice and links with other national profiling work	BW (1-3)	1-4, 8	1. Will seek to get clarification by Autumn 2018. 2. Ongoing commitment. 3. Aim to draft paper by Dec 2018.	ALL CORE 1. Discuss with HSCP whether and how future profiles can be created. Depending on these discussions further work may ensue. 2. Advice and links with other national profiling work involving the Improvement Service, Health Scotland and the OEPB (Outcomes, Evidence and Performance)

Area of focus	Projects	Team members and lead	Cross-cutting App'ches	Milestones for 2018-19	Description/ Comments
	<p>involving the Improvement Service, Health Scotland and the OEPB (Outcomes, Evidence and Performance Board).</p> <p>3. Write up children's profiling work for a journal paper.</p>				<p>Board). Series of meetings planned into the summer of 2018 and possibly beyond.</p> <p>3. An opportunity to describe process of creating the CYP profiles, their dissemination, examples of use and evaluation.</p>
Health inequalities and their determinants	<p>1. Informing Investment to reduce health Inequalities (II).</p> <p>2. Income & earning inequalities analyses.</p> <p>3. Ethnicity and health project.</p> <p>4. Longitudinal cohort analyses.</p> <p>5. Systematic review of socio-economic inequalities in mortality.</p> <p>6. Public understandings of health inequalities project.</p>	DW (1-7), BW (1-3), OR (7)	1, 3, 4, 6	<p>1. Ongoing commitment throughout the year.</p> <p>2. Report published by December 2018.</p> <p>3. Journal paper published by October 2018.</p> <p>4. Paper published by end of year.</p> <p>5. Paper by end of year.</p> <p>6. TBC.</p> <p>7. TBC.</p>	<p>1-5 ALL CORE PROJECTS; 6-7 IN DEVELOPMENT</p> <p>1. Continued contribution to Health Scotland's development of the III tool as part of the advisory group.</p> <p>2. Analyses of trends in earnings and income in Scotland, England, and a range of UK cities and other parts of the UK.</p> <p>3. Publication (and dissemination) of journal paper on ethnicity population projections and summary of ethnicity & health evidence (with ISD Scotland, NHSGGC, NHSHS, University of Leeds).</p> <p>4. Publishing paper on WW's analyses of different aspects of social class on health inequalities (with MRC-SPHSU, ISD Scotland, and UCL).</p> <p>5. Led by NHSHS and MRC-SPHSU. Contribution to various aspects of the project (including write-up).</p> <p>6. University of Edinburgh led project. Possible advisory role only.</p>

Area of focus	Projects	Team members and lead	Cross-cutting App'ches	Milestones for 2018-19	Description/ Comments
	7. Understanding differences in the experience of poverty and deprivation between Scotland & England				7. Develop proposal to seek to understand differences in 'unmeasured deprivation' between Glasgow and other UK cities.
National and local groups	1. Annual PHINS seminar. 2. Input to ScotPHO collaboration in terms of steering group, news alerts and web pages. 3. Scottish Health Survey Advisory Group. 4. GGC Health and Wellbeing Survey. 5. GGC Secondary School Children's HWB survey. 6. Society for Social Medicine annual conference.	DW (1, 2 & 6) and BW (1-5)	1, 3	PHINS seminar is 21 Sept 2018; SSM conference is 5-7 September 2018.	ALL CORE 1. Organising programme for seminar. 2. Includes ongoing maintenance of web site sections and contribution to steering group and 'ScotPHO leads' groups. 3. Ongoing contribution. 4. Ongoing contribution to advisory group. 5. Ongoing contribution. 6. Part of organising committee for 2018 conference.

Sustainable inclusive places

Programme leads: Jill Muirie, Russell Jones

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), Fiona Crawford (M74 study), Valerie McNeice (healthy urban environments)

Admin contact: Kelda McLean

Staff resources available: Approximate staff resource for this programme – 1 F/T programme manager, 2 P/T programme managers, 1 F/T CEE manager, 1 P/T KE/CE specialist, 1 F/T researcher

Area of focus	Projects	Team members and lead	Cross-cutting App'ches	Milestones for 2018-19	Description/ Comments
Sustainable transport and travel	Air quality and low emission zones.	BW	1-4,6-8	1. Ongoing. 2. To be confirmed. 3. Dependent on NIHR research funding application.	ALL IN DEVELOPMENT 1. Monitoring and where required contributing to the development of Glasgow's Low Emission Zone. 2. Potential supervision of MSc dissertation (Glasgow Caledonian) on implementation and effectiveness of LEZs in European cities. Evaluation of impact of avenues and city ways projects on air quality, health and liveability (with Institute of Occupational Medicine).
	Active travel related projects.	BW (1-5, 7-9,11), JM (6,7,10-11), GY (5)	1-4,6-8	1. Pending completion of route. 2. Dependent on receiving data from GCC. 3. Data accessed from UBDC. Progress dependent on time, staff resource and analytical complexity.	2, 4-8, 10 and 11 CORE 1, 3, 9 and 12 IN DEVELOPMENT 1. Monitoring of South City Way. 2. Updated reporting on use of West, South West City Ways, Cycle Hire Scheme and city centre cordon count. 3. Use of STRAVA data to create cycling metrics for Glasgow. E.g. numbers of cyclists, their geographic distribution, their contribution to meeting physical

				<p>4. Expect a report on completed project work by October 2018.</p> <p>5. Expect to complete 2nd questionnaire by June 2018. Reporting on 1st and 2nd questionnaires in autumn 2018.</p> <p>6. Input as required.</p> <p>7. Regular meetings (x4 per year).</p> <p>8. To complete and report in June 2018.</p> <p>9. Next stages to be decided, possible briefing paper.</p> <p>10. On-going contributions to discussions and developing plans for a sector wide approach to improving active travel rates to school.</p> <p>11. Project being led by the road safety team in Glasgow City Council. Will complete in 1st quarter of 2018/19.</p> <p>12. In development.</p>	<p>activity guideline, a HEAT calculation of potential health benefit of regular cycling, notional contribution to reducing carbon emissions.</p> <p>4. Analysis of Census travel to work/study trends from 2001 and 2011 (incorporates structural and multi-level modelling, a HEAT analysis of the health impacts of walking and cycling and an estimate of the contribution that walking and cycling commuting journeys make to achieving the guidelines for physical activity.)</p> <p>5. Bikes for All - project aims to encourage greater cycling among low participation groups in Glasgow, through targeted reduced cost offer of Next bikes and training. GCPH is evaluation partner.</p> <p>6. Support to Glasgow's Connectivity Commission.</p> <p>7. Engagement as part of Glasgow's Active Travel Forum.</p> <p>8. National Transport Review – Inequalities sub-group.</p> <p>9. Updating of pedestrian and cyclist casualty trends.</p> <p>10. Member of the School Run Working Group (NW Glasgow).</p> <p>11. Road Safety project – schools in areas of deprivation.</p> <p>12. Research into barriers/facilitators to walking in different neighbourhoods in Glasgow.</p>
	Sustainable transport systems/public transport.	BW, JM		Uncertain	<p>CORE Glasgow City Deal: Inclusive Growth Pilot.</p>

Healthy Urban environments	Housing/private rented sector.	RJ, LG, GY, VM	3,4,5,7,8	1. Summer 2018. 2. Autumn/winter 2018. 3. Spring 2018.	CORE Deliver study on the private rented sector: 1. Acquire data from the landlord register from Local Authorities within Glasgow City Region. 2. Analysis and mapping of landlord register data. 3. Develop protocol for qualitative research.
	Open space.	BW, RJ, GY	1,3,4,6-8	1. Produce blog in June 2018. 2. In development. 3. In development.	IN DEVELOPMENT 1. Blog on work to produce an indicator of children's access to quality assessed greenspace*. 2. Explore opportunities for further development with UBDC and other partners. *originally for CYP profiles. Modelling work done by UBDC. Links to outdoor nursery provision, children's physical activity and green networks. 3. Develop study exploring solutions based approaches to improving local environments. Examples might include community take-over of local greenspace management or take-over ownership and development of vacant sites. Explore links with NHS GGC environmental observational study on Safe Consumption Facility.
	Place making and place standard.	RJ, GY		In development.	Explore opportunities to use the Place Standard incorporating a climate change perspective.
	Planning.	RJ, GY, BW, JM		Ongoing.	CORE Continue to engage with and influence national, local and regional planning policy and practice
	Thriving Places.	CT	2	In development.	IN DEVELOPMENT Explore the possibility of working with a Thriving Place to develop their community engagement.
Sustainable Food	City wide Glasgow Food Policy Partnership.	JM	1,4,5,6,7	1. Ongoing. 2. Recruitment expected July	CORE 1. Supporting and enabling city wide support for the Glasgow Food Policy Partnership (GFPP), in particular

				2018; quarterly reports to be submitted to funders for the post (GCC and Sustainable Food Cities).	<p>the development of:</p> <ul style="list-style-type: none"> - community food through the Glasgow Community Food Network; - action to reduce food waste through the GFPP Food waste subgroup; - supporting the development of the food growing strategy for Glasgow; - more sustainable food procurement through the GFPP public sector food procurement subgroup; - enabling improved diets and reduced food insecurity particularly in low income areas. <p>2. Recruiting, agreeing a workplan for, and managing the work of the part time, 1 year GFPP coordinator post that will be located within GCPH.</p>
	Food Poverty/Insecurity.	JM	4,6,7	1. In development.	Work with partners to inform the development of a different approach to addressing food poverty and reflects the recommendations in 'Dignity' and goes beyond emergency food aid (In Development).
	Food Insecurity Research advisory group.	JM	4,7	Ongoing.	CORE Member of advisory group.
	Food Environment and Schools research advisory group.	JM	7,8	Due to complete Q2.	CORE Member of advisory group.
GoWell	Analysis and dissemination of study on health impacts of housing-led regeneration.	JC, CTan	1,3,5,7,8		Continued cross-sectional/longitudinal analyses, develop/implement qualitative work and generate/publish papers.
Community Engagement and Empowerment	Develop CEE resources using transferable learning	JW, CT	2, 8	<p>1. July 2018.</p> <p>2. To be tested over the year.</p>	CORE Develop a range of CEE resources for use by internal and external colleagues and support their use:

	stemming from the Centre's historical and current community engagement work.				1. Tabletop tool 2. CEE planning tool
	Support and develop CEE within place-based projects and the wider GCPH work programmes as a cross cutting approach and amongst partners in delivery.	CT, JW	2, 8	1. HFF22 – Sept 2018. 2, 3, 4: in discussion.	1 and 2 CORE 3 and 4 IN DEVELOPMENT 1. Support the development of HFF22 (young people) by providing CEE input and advice. 2. Develop a CEE project with at least one other GCPH programme. 3. Explore the CEE legacy of an historical project with at least one GCPH programme. 4. Support and develop a CEE place based project with an external partner (e.g. Thriving Places) (CT).
	Develop dialogue and a potential collaborative to evaluate aspects of the Community Empowerment Act in terms of impacts on inequalities.	CT, JW, JM	2, 7, 8	1. A summary for key stakeholders. 2. A discussion document for wider engagement and deliberation.	IN DEVELOPMENT This project is a continuation of work that began in 2017/18 which evolved from the work on power as a health and social justice issue. The discussion paper is near to complete but future work will involve engagement with stakeholders and potential development into a collaborative project.
	Support and develop CEE and knowledge exchange between partners in the Social Research Hub with the local community.	JW	2, 8	1. Ongoing. 2. Ongoing. 3. In development.	CORE 1. Open Community Engagement forum. 2. Range of CEE events. 3. Exploration and co-development of partnership with local schools.
	Collaboration with the Glasgow Disability Alliance: understanding sustainability and,	CT, GY	1,2,4,5,7	In development.	IN DEVELOPMENT Through the researcher's forum, we will explore opportunities to work with the Glasgow Disability Alliance. The focus of this collaboration will be agreed following a 'get to know each other visit', where GCPH

	inclusivity of places through a community of interest/identity.				and GDA staff will share their expertise and organisational priorities. Possible opportunities include sharing research knowledge, supporting community engagement and exploring a range of inequalities facing people with disabilities.
Inclusive Growth	Further work to help understand and evaluate inclusive growth within Glasgow.	BW, JM, CT, RJ	1-8	To be decided.	IN DEVELOPMENT Support to David Waite and colleagues in understanding and evaluating potential impacts of major projects with respect to inclusive growth.
Climate change resilience	Dissemination of learning from Weathering Change.	GY, RJ, VM	1,2,5,6,7	1. Publication of briefing note – Summer 2018.	CORE Supporting the ongoing dissemination of learning from Weathering Change, including the publication of short briefing note summarising key learning for different audiences.
	Apply learning from WC in new area.	RJ, GY, VM	1,2,4-8	Scoping summer 2018.	CORE Develop project building on learning from Weathering Change, perhaps using Place Standard from climate change perspective (see placemaking above) or using creative engagement with young people.
	Collaboration with new organisations on climate change and climate justice work/projects.	GY, VM, RJ	1,2,6,7	Ongoing.	IN DEVELOPMENT Explore additional opportunities for collaboration with other organisations on climate change work/ projects, including Health Scotland, Public Health Evidence Network (PHEN) and the Centre for Climate Justice.

Supporting processes of change in all areas of focus	<ul style="list-style-type: none"> • Consultation responses. • Ad hoc presentations. • Advice and information. • Community Plan/Planning. • Reducing inequalities. • Monitoring trends e.g. updating Understanding Glasgow. • Balancing research and practice. 	JM, RJ, BW, CT, GY, JC, JW, VM		Ongoing.	CORE Ongoing engagement with a variety of partners to embed considerations of health and wellbeing (Core).
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Innovative approaches for improving outcomes

Programme leads: Jennifer McLean and Pete Seaman

Programme support: Valerie McNeice, Lisa Garnham, Chris Harkins, Russell Jones, Gregor Yates

Other contributors: Bruce Whyte, Jill Muirie, Katie Moore, Jennie Coyle

Admin contact: Ricky Fleming

Area of focus	Projects	Team members and lead	Cross-cutting App'ches	Milestones for 2018-19	Description/ Comments
Participatory budgeting	Supporting community-based evaluations of participatory budgeting.	CH	2,4,5-8	<p>Publication Summer 2018.</p> <p>Participation within Glasgow City PB steering group.</p> <p>Co-author on book chapter concerning Participatory Budgeting in Scotland.</p>	<p>CORE</p> <p>As part of Glasgow's multi-disciplinary PB steering group (approx. £12m citywide PB allocation), GCPH will lead a session relating to the PB logic model concerning the planning, implementation and evaluation of PB processes across the city. GCPH continued attendance and influence within the group.</p> <p>Continued collaboration with What Works Scotland on PB outputs, events and dissemination.</p>
Volunteering and participation	Mixed methods study on 2018 European Championships Volunteering programme.	RJ/GY	1,2,4,7	<p>Secondary analyses of applicant data Summer-Autumn 2018.</p> <p>Online questionnaire development Summer 2018, administer questionnaire Summer 2018.</p> <p>Headline findings Autumn 2018.</p> <p>Qualitative research commissioned Autumn 2018.</p>	<p>CORE</p> <p>Working in partnership with GCC, GCPH will conduct a study of volunteer applicants for the Glasgow 2018 European Championships. This is a mixed-methods study involving secondary analyses, online questionnaires and qualitative research. It will also include a 2 year follow-up.</p>

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	Supporting ongoing city-wide commitments to volunteering.		2,5,7	Report Winter 2019. Ongoing, opportunities to be identified.	Continue dissemination of learning from the Glasgow 2014 Clyde-sider study and Volunteer Charter evaluation. Working with Volunteer Glasgow and other city partners, explore new opportunities to build evidence on the impacts of volunteering and encouraging increased participation in the most deprived parts of the city.
Asset-based approaches	Embedding asset-based approaches and perspectives in community-based setting.	JMcL	1,2,3,5-8	<p>Ongoing – phases 2 and 3 of planned CNS approach.</p> <p>Ongoing – supporting quarterly Advisory Group meetings and monthly Planning and R&E group.</p> <p>September 2018 – publication of plan, ethics approvals, supporting research and evaluation fieldwork and methodologies.</p> <p>August 2018 – Publication of contextual literature reviews.</p> <p>Ongoing – support Child Poverty Delivery Plan expansion, identification of new areas and building local partnerships.</p>	<p>CORE</p> <p>As detailed in the Programme 1 workplan, Children's Neighbourhoods Scotland working in communities across Scotland will bring an asset-based perspective to our partnership work with local children and young people, families and local stakeholders with the aim of building local capacity and capabilities ensuring that services are delivered in a joined-up way, that power is shared with communities, and that the poor childhood outcomes associated with disadvantaged settings are improved.</p> <p>Following the publication of the Child Poverty Delivery Plan CNS has been awarded £2m over the period 2018-2022 to further expand CNS within Glasgow and into another urban centre, a small town and a rural community. Work is underway to identify possible locations and a proposal for Scottish Government is in development.</p>
	Partnership working and sharing learning.	JMcL/VM			Continue to actively take up opportunities to present and share learning from across asset-based

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					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.
Glasgow Game	Glasgow Game in a Box.	BW	1,2,3,6,7	As required	Continued support, awareness raising and usage of the Glasgow Game in a Box by partners and interested others. Provision of facilitation as required.
Culture and health	Paisley.	PS		Developmental	IN DEVELOPMENT Possibility of supporting Paisley Culture and Leisure Services in the development of a strategy for health and wellbeing.
Developing a perspective on evidence	Exploring the nature of evidence. 'Weathering Change' follow-on. Partnership working and exploring shared areas of interest.	VM/PS/J McL/GY	1,2,5-8	Establish collective areas of interest with NHSHS and PHEN (June '18). With Prog 3, put in place work to follow on from 'Weathering Change' which uses innovation to explore the nature of evidence and seeks to generate knowledge and improve outcomes (Summer '18). Establish relevant connections with other people / organisations interested in exploring the nature of evidence (on-going). E.g. the Public Health Evidence Network (PHEN).	CORE In collaboration with the Programme 3 work ('sustainable, inclusive places'), continued work on exploring the nature of evidence will crossover with climate change adaption and resilience work, as a follow up to the 'Weathering Change' project. Working alongside colleagues from NHS Health Scotland and the Public Health Evidence Network (PHEN), seek to establish commonly agreed approaches to evidence gathering and knowledge generation (to include 'qualitative synthesis' work). Seek to use evidence / knowledge to answer public health questions with innovative, locally appropriate, sustainable and action-focused solutions, based on shared understandings.

Area of focus	Projects	Team members and lead	Cross-cutting App'ches	Milestones for 2018-19	Description/ Comments
Public health Evidence Network					
	Creative approaches to data production with young people.	VM/CH		Complete scoping exercise re creative and participatory approaches to data production with young people, and their usefulness in terms of knowledge generation (Dec '18).	IN DEVELOPMENT Incorporate learning from Sistema Scotland, Children's Neighbourhoods Scotland, and the CHANGE project.
	Power animation.	JM		Undertake a 2 nd stage (9 month) review of impact and influence of the animation. Report expected by Q2.	Working with colleagues at Health Scotland with support from the PHEN, undertake an online survey of those who have viewed the animation and report on digital data for the animation as well as qualitative feedback on the animation.
Partnership working, sharing learning and supporting practice across programmes of work	Sharing learning and dissemination of findings. Partnership working and support. Expertise on advisory/steering groups.	ALL	2,4,5,7	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.
	Support for the Aspiring Communities Fund projects (Family and	VM, CH, JM (support Research		Provide advice and evaluation support for the duration of the projects. Exact milestone to be	CORE GCPH has agreed to contribute staff time to the value of £6,000 towards research and evaluation activities for each of the two projects, which will augment the

Area of focus	Projects	Team members and lead	Cross-cutting App'ches	Milestones for 2018-19	Description/ Comments
	Childcare project (VMc) and participatory budgeting/community engagement project (CH)) in Gorbals.	Scotland projects)		agreed.	£6,000 grant for each of the projects that has been received from the Aspiring Communities Fund for research and evaluation activities.
	Cross programme working for system change.	VM	2,5-8	CHANGE evaluation – end of year two, Sept '18. SSfF – evaluation reporting by Dec '18. CoPP – to be established (research proposal/ application with NHS Endowments Committee for consideration).	CORE Innovative approaches to improving practice by making active links across GCPH programmes of work, specifically the evaluation of CHANGE, the evaluation of Stepping Stones for Families' (SSfF) Family Wellbeing Service and Cost of the Pregnancy Pathway research – synthesise learning and draw together knowledge to make practical, locally applicable recommendations for system change, supporting these recommendations into action.
	Working with marginalised groups.	RJ		Awaiting funding decision	IN DEVELOPMENT Work with a number of partners (University of Strathclyde, University of Aberdeen, University of Edinburgh, Glasgow City Council, East Dunbartonshire Council, Aims Advocacy Ayrshire) to use philosophical dialogue with marginalised groups to explore what can be done to facilitate and increase their voices and influence.
Developing and supporting international connections and collaborations	1. Pittsburgh 2. Manitoba 3. Bergen	PS RJ	1,5-7	Developmental	IN DEVELOPMENT 1. Complete Pittsburgh – Glasgow Collaboration by responding to Robert Wood Jonson Foundation funded team's requests for expert in-put on health equity and resilience. Visit planned for September 2018 with focus on food and NHSGGC efforts to tackling health inequalities.

Area of focus	Projects	Team members and lead	Cross-cutting App'ches	Milestones for 2018-19	Description/ Comments
					<p>2. Maintain link with Lorna Turnbull of University of Manitoba and grant to translate learning from GCPH work to Canadian context.</p> <p>3. We hosted visitors (Head teachers /school managers, department of culture, department of sport, and from an area-based programme in deprived areas) from Bergen, Norway (26 April 2018) as part of a learning journey to Glasgow. Aim: to find out more about the public health issues of Glasgow and to learn more about GCPH's work, particularly around deprivation, learning, upbringing and inclusion. Explore the potential to continue to develop GCPH's relationship with Bergen.</p>
	WHO European Healthy Cities Network	RJ	1,6,7	International conference in Belfast October 2018	Member of steering group for developing and delivering International Conference, including meetings, marketing, abstract assessment for scientific programme, chair UK CMO session. Conference title is "Changing Cities to Change the World" and the 6 themes are people, place, participation, prosperity, planet, peace.
Private Rented Sector	Housing through Social Enterprise research.	LG	1,2,3,5-8	<p>June 2018 – presentation of emerging findings at the European Network Housing Research Conference in Uppsala.</p> <p>August 2018 – Data collection complete.</p> <p>January 2019 – publication of project report.</p>	<p>CORE</p> <p>The Housing through Social Enterprise research project is a collaboration between Glasgow Caledonian University, Stirling University and GCPH – it is part of the CommonHealth Research programme. It considers tenants perspectives on housing and health, as well as health outcomes, across three housing social enterprises – a Housing Association, a Rent Deposit Scheme and a landlord and letting agency operating in the Private Rented Sector.</p> <p>It follows tenants across the first year of their tenancy, gathering both qualitative and quantitative data. It aims</p>

Area of focus	Projects	Team members and lead	Cross-cutting App'ches	Milestones for 2018-19	Description/ Comments
					<p>to better understand the causal pathways through which alternative approaches to housing might improve quality of life, health and wellbeing.</p> <p>The completion of the Housing through Social Enterprise research project at the end of 2018 will provide important new evidence on the implications of living in the private rented sector for low income tenants, as well as the potential for social enterprise to support such tenants in having a good quality of life. Dissemination and knowledge sharing activity throughout 2019 and beyond is intended to share this knowledge with relevant agencies and legislative bodies.</p>
Exploring health in later life Loneliness and social isolation		PS		Developmental	<p>IN DEVELOPMENT</p> <p>Establish a network to scope and develop a working proposal exploring later years and isolation that supports NHSGGC aspiration to shift investments to prevention and link to its programmes for action. Link the Carnegie Kindness Innovation Network and partners with, for example, service design expertise.</p>
Link worker follow on	Membership of Links Worker Monitoring and Evaluation group and Advisory Group.	JM	7,8	Contribute in an advisory capacity to the Evaluation group (JM) and to the Advisory Group (JE).	The role out of this programme stalled in 2017/18 – awaiting information about whether it is expected to proceed in 2018/19.
Seminar Series		PS /JC/ team		Core	<p>CORE</p> <p>Coordinate seminar series for 2018-19 utilising team suggestions and contacts.</p>



**Glasgow Centre for Population Health
Management Board Meeting
Wednesday 20 June 2018**

2018-19 Budget Plan

Recommendations

Board members are asked to:

- Approve the budget plan for the Centre for the period 1 April 2018 to 31 March 2019.

Commentary

1. The Centre's total budget for 2018-19 is £1,444,187. This is less than previous years due to a reduction in project-specific external income and a considerably smaller carry-forward than previous years. A carry forward of £44,687 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.
3. Other income of £66,500 is tied to the delivery of core projects including *Childcare and Nurture in Glasgow East* (£12,500 from Children in Scotland/Big Lottery Fund), the evaluation of *Big Noise* (£30,000 from People's Postcode Lottery and NHS Health Scotland) and *Aspiring Communities* (£12,000). There is also income of £12,000 associated with the *Stepping Stones for Families* evaluation which will be matched by £13,000 from the GCPH budget.
4. Accrual of sponsor contributions to GoWell amount to £83,000 (Scottish Government and NHS Health Scotland). There is also an NHS Endowment Fund contribution of £40,000 still to be drawn down.
5. The largest single budget line is represented in staffing costs (E11) which this year has absorbed a 3% pay award and increments. A part time analytical post (Band 6) has remained unfilled and we plan to fill this post on approval of this budget. The substantive Band 8a Programme Manager vacancy has been left unfilled over the last two years to reflect acting working arrangements in relation to the Associate Director post.
6. The majority of staff funded through GCPH core funding are on NHSGGC contracts. These were made permanent with by NHSGGC after our latest funding award with contracts issued to GCPH until March 2019.
7. The attached budget plan for 2018-19 reflects the work plan with allocations made in line with planned activity and committed spend across the work programmes (lines E1-E4: *Action on Inequality, Understanding Health Inequalities, Sustainable Inclusive Places and Innovative Approaches to Improving Outcomes.*) *The New Perspectives on Health*

budget line E6 has been renamed to *Training and Development* for ease of communication. This line represents developmental budget for individual team members but also cross team work. £25,000 is allocated to this line. This reflects the importance of preserving budget for staff development given the changing landscape of public health and the evolution of skill sets required to work across boundaries and in an increasingly action oriented manner.

8. Costs for *Communications and Accommodation Costs* (E8 and E10) remain unchanged from last year with a small reduction in *Centre Management, Administration and Running Costs* (E9) £24,668 from £27,000.
9. 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.
 - Requests for new work arising in year. This years' projected programme spends are tighter than in previous years. There is no resource available for responsive work not anticipated at time of work planning. This means such work will require in-kind contributions and/or external partner funding ahead of developed proposals for funding in the next round of budget planning.
10. 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.

**GCPH
June 2018**

Financial Plan 2018-19

<i><u>Income</u></i>		<i>Planned 2018/19 £</i>
	Annual SG Allocation	1,250,000
	Sponsors Contribution to GoWell & GoEast	83,000
	Other Income	66,500
	<i>Total Income 18/19</i>	<i>1,399,500</i>
I 4	Carry Forward from previous years	<i>44,687</i>
	<i>Total Available 18/19</i>	<i>1,444,187</i>
	<u>Expenditure</u>	
	Research:	
E 1	Action on Inequality	50,000
E 2	Understanding Health Inequalities	40,000
E 3	Sustainable Inclusive Places	31,000
E 4	Innovative Approaches to Improving Outcomes	20,000
E 5	GoWell/GoEast	99,500
E 6	Training & Development	25,000
E 7	Allocation to Networks	9,500
	<i>Total Research</i>	<i>275,000</i>
	Communications:	
E 8	Communications	45,000
	<i>Total</i>	<i>45,000</i>
	Management and Administration	
E9	Centre Management, Admin & Running Costs	24,668
E10	Accommodation Costs	118,000
E11	Core Staffing	981,519
	<i>Total Management & Admin</i>	<i>1,124,187</i>
	<i>Total Expenditure</i>	<i>1,444,187</i>
	<i>Balance</i>	<i>0</i>