As well as presenting data, this report is about celebrating achievements and showcasing examples of best practice in public health. We hope that it will inspire others to get involved in this collective movement for change to mitigate some of the health effects of poverty and disadvantage. The scale of transformational change required to achieve a step change in the health of our population will need clear, courageous action that is fully joined up on a reduced number of priorities which go beyond the short term and well beyond the boundaries of our own organisation. At present, we are asked to respond to a plethora of policies, performance frameworks and initiatives that do not sufficiently impact on public health. This report contains many calls for reviews, evidence, strategies and information. Arguably the greater priority is for population needs to be translated more systematically and coherently into action.

Clarity and focus are becoming ever more vital as we respond to the increasing external challenges we face as an organisation. Increasing demands on services and public sector budget challenges mean that financial pressures are intensifying. Public health can help shape a response to these challenges by: providing an objective analysis of population needs; advising on evidence based health and social care systems; and supporting an evaluative perspective on evolving services and strategies. As we enter yet another phase of major structural change in health and social care services in Scotland, we will need to focus even more strongly on cost effective actions for the most important drivers of health in our population. This will require an explicit framework of clearly defined interventions, based on need, co-production approaches and balancing individual level interventions with effective action on the determinants of population health in NHSGGC. Figure 1 shows the requirement to balance individual level healthcare with wider preventive action.
Figure 1: Balancing individual level healthcare with wider preventive action (Modified from Dahlgren & Whitehead)

NHSGGC has an exceptionally strong track record of developing new initiatives for improving services to patients and to our wider population. This report describes just a fraction of the innovation which has taken place since the last biennial DPH report. However, some of this innovation is fragmented, localised and risks ‘withering on the vine’ if not understood, supported and embedded in the wider organisation. There is an urgent need to accelerate evidence-based redesign of services and get real energy behind the transfer of knowledge and experience about what works best for our local health system. The work underway in redesign of our future clinical strategy provides an important opportunity to deliver transformational change, by integrating evidence based prevention into all of our clinical systems in ways that reflect the experience, capacity and learning of real people in our communities and those at the front line of service delivery.
We also continue to have a duty to assess the health needs of population groups and communities who are adversely affected by welfare changes, lack of employment opportunities and in-work poverty, in order to advocate for changes in national policy, local responses and social attitudes.