

<p>Changing Policy</p> <p>Tragic event resulting from economic policy/welfare reform promotes media storm</p>	<p>Changing Policy</p> <p>Rapid outsourcing of NHS services to private and voluntary sectors</p>	<p>Changing Policy</p> <p>Closing the gap is adopted as part of HEAT targets prompting major service redesign</p>
<p>Changing Policy</p> <p>Scotland's oil revenue goes into free childcare</p>	<p>Changing Policy</p> <p>NHS recreates itself as a healing, person centred service which focuses on people at all ages by redesigning its approach to care</p>	<p>Changing Policy</p> <p>More integration of social care, primary care and secondary care</p>
<p>Changing Policy</p> <p>Health boards reconfigured, changing healthcare practice</p>	<p>Changing Policy</p> <p>Scotland sees huge investment in rural economy</p>	<p>Changing Policy</p> <p>Rural rail networks re-established</p>
<p>Changing Policy</p> <p>Public Health moves into local authority</p>	<p>Changing Policy</p> <p>Retirement age 80</p>	<p>Changing Policy</p> <p>Local boards replaced by single health board: new links with Wales and Northern Ireland.</p>
<p>Changing Policy</p> <p>Public Health told to attract private sector funding</p>	<p>Changing Policy</p> <p>NHSGGC protects provision of the poorest communities by limiting provision of expensive interventions to the few</p>	

<p>Changing Population</p> <p>Increasing poverty drives significant increase in cheap alcohol and tobacco</p>	<p>Changing Population</p> <p>Local tragedy highlights the impact of social policy on individuals</p>	<p>Changing Population</p> <p>Unexpected climate change leads to sudden arrival of young, skilled migrant population</p>
<p>Changing Population</p> <p>Mental Health problems reach epidemic levels</p>	<p>Changing Population</p> <p>Scotland gains independence</p>	<p>Changing Population</p> <p>Welfare reform drives a bigger wedge between those with resources and those without</p>
<p>Changing Population</p> <p>Digital exclusion leads to increased destitution and e-health measures widen inequality</p>	<p>Changing Population</p> <p>Lone (and grand) parenting as common as two parent families</p>	<p>Changing Population</p> <p>Poverty experienced by families not previously impoverished</p>
<p>Changing Population</p> <p>Family work/life balance changes</p>	<p>Changing Population</p> <p>Increased mortality and reduced healthy life expectancy as a result of welfare reform</p>	<p>Changing Population</p> <p>Scotland experiences a baby boom</p>
<p>Changing Population</p> <p>Unexpected health scare has significant impact on Scottish population</p>	<p>Changing Population</p> <p>Glasgow's population continues to become more ethnically diverse</p>	<p>Changing Population</p> <p>Some retire and thrive, others must keep working</p>
<p>Changing Population</p> <p>Socio economic inequalities remain and become even more polarised</p>	<p>Changing Population</p> <p>Living alone becomes the norm</p>	<p>Changing Population</p> <p>Increasing suicide rates as a result of austerity</p>

Changing Population

People come together to address their own health challenges in spite of reform

Changing Population

Insistence on existing institutional arrangements disengages population

Changing Population

Cuts in welfare to disabled people leads to increase use of health services

<p style="text-align: center;">Changing Practice</p> <p>Unemployment per se, becomes a recognised and treatable mental health disorder</p>	<p style="text-align: center;">Changing Practice</p> <p>“Cloud storage” of health records leads to more DWP access to records</p>	<p style="text-align: center;">Changing Practice</p> <p>GPs rebel against increased demands of supporting patients with benefit claims</p>
<p style="text-align: center;">Changing Practice</p> <p>New job role created to straddle between primary and secondary care to improve health for most marginal</p>	<p style="text-align: center;">Changing Practice</p> <p>GPs develop a robust vision for supporting a primary care response to increasing poverty</p>	<p style="text-align: center;">Changing Practice</p> <p>Rise of a “cottage hospital movement”</p>
<p style="text-align: center;">Changing Practice</p> <p>NHSGGC becomes a two tier service, effective responses to those who make demands, poor response to the rest</p>	<p style="text-align: center;">Changing Practice</p> <p>Health improvement practice becomes more holistic</p>	<p style="text-align: center;">Changing Practice</p> <p>Hospital at home becomes the norm</p>
<p style="text-align: center;">Changing Practice</p> <p>Tele health offers new opportunities for practitioners</p>	<p style="text-align: center;">Changing Practice</p> <p>Personal health budgets provided to those in greatest need</p>	<p style="text-align: center;">Changing Practice</p> <p>All GPs are salaried</p>
<p style="text-align: center;">Changing Practice</p> <p>Eradication of all forms of violence associated with inequality adopted as an outcome in Community Planning</p>	<p style="text-align: center;">Changing Practice</p> <p>Increased investment in occupational health</p>	<p style="text-align: center;">Changing Practice</p> <p>Self care becomes a conditional part of treatment in some areas/populations</p>
<p style="text-align: center;">Changing Practice</p> <p>Authentic mutual approaches develop among service users/providers</p>	<p style="text-align: center;">Changing Practice</p> <p>Primary and social care integrate successfully</p>	<p style="text-align: center;">Changing Practice</p> <p>Voluntary sector melt down re money advice services as they are unable to cope with demand.</p>

<p>Changing World</p> <p>Climate change brings new public health challenges</p>	<p>Changing World</p> <p>Re-opening of the shipyards due to demand for warships/wind turbines etc.</p>	<p>Changing World</p> <p>The current welfare system is rapidly collapsing</p>
<p>Changing World</p> <p>Tertiary education opportunities decline, vocational apprenticeships increase</p>	<p>Changing World</p> <p>Social networking and citizen journalism undermine established institutions</p>	<p>Changing World</p> <p>Welfare reform has stimulated small scale economic responses to maximise the wealth and well being of its recipients</p>
<p>Changing World</p> <p>Cheap, plentiful energy comes to an end</p>	<p>Changing World</p> <p>Private healthcare market expands</p>	<p>Changing World</p> <p>With less money to go round more pressure on costs of care</p>
<p>Changing World</p> <p>Glasgow becomes the IT Capital of the UK</p>	<p>Changing World</p> <p>In a changing world ethical and aesthetic values are the most enduring features</p>	<p>Changing World</p> <p>The economic situations worsens</p>
<p>Changing World</p> <p>Glasgow re-positions itself as a world class innovative city to combat recession</p>	<p>Changing World</p> <p>Long term rises in fuel, food and travel costs</p>	<p>Changing World</p> <p>Jobs market dominated by more part-time and temporary posts</p>
<p>Changing World</p> <p>Rise of food banks and malnutrition</p>	<p>Changing World</p> <p>Law passed on euthanasia</p>	<p>Changing World</p> <p>Stagnant economy creates long term uncertainty</p>

Changing World

Welfare reform creates more tensions in Glasgow leading to more violence, community and domestic

Changing World

Socio-economic inequalities increase and geography of deprivation intensifies