

Professional role	154	I think, sometimes, I think again <u>paediatrics has more in common</u>	Family centred care;
	155	<u>with General Practice than most specialties,</u> but obviously <u>in General</u>	holistic versus disease
	156	<u>Practice you're looking at the whole person, not just the disease</u> and	model; 1° vs. 2° care
Place & Space	157	obviously the good quality Paediatrician does that and <u>if you're</u>	Local = more holistic –
	158	<u>seeing people nearer to their home setting,</u> then you can see, you	families in their
Place & Space; Patient experience	159	know an <u>outpatient department is a bit remote</u> and I'm not saying	environment not
	160	it's inhumane but <u>if you are in a setting you're comfortable in,</u>	doctors; more relaxed;
	161	<u>you're going to be more relaxed,</u> you might be <u>more honest and</u>	shift in power?
Primary- secondary care	162	<u>open and give better quality answers particularly if there are social</u>	Experience differs
	163	<u>issues. It would be good for consultants to be, you know recognised</u>	according to setting –
	164	<u>in a certain area</u> and I think they would appreciate that as well. So	impact on consultation
Quality of care	165	no I think, obviously <u>ways in which care could deteriorate are in</u>	/ outcomes?
	166	<u>terms of records</u> because obviously if the consultant doesn't have	Construction of
Technology	167	the notes, that's a disaster, so I don't know what the <u>IT set up</u> would	consultant as
	168	be like, that would, you know obviously if the <u>consultant can access</u>	detached?
	169	<u>notes remotely</u> whatever you're planning, that would be very, very	Notes, technology, IT
	170	important.	systems affect quality
			of care, risks