

Possible key areas/questions:

- How will good quality be maintained and monitored?
- More information on how patients will access services and who might be denied
- The need for better integration of health/social care, with services joined up that work for patients
- We need to know how services work/will work (i.e. case studies of pathways)
- We are interested in the role of 'new' technologies in helping people stay healthy, for self-care, and to enable Carers to support those they care for
- We need a commitment to integration, and assurances that services will work together for patients, Carers and communities - case studies would help
- We need good quality information to manage patient expectations e.g. waiting times
- We need to be sure this isn't just about cost-cutting or 'privatisation'
- Will the same healthcare professionals be available to continue long-established relationships?

File path:

- Will there be a greater reliance on unpaid Carers?
- How will the needs of different groups be met?
- Description of how mental health services will be integrated
- Clear illustration of acute care networks and links to other acute providers is required
- Clear illustration of the relationship with primary care is key
- Robust models will demonstrate patient experiences to test model
- It is recommended that existing services are not withdrawn until other community services and associated workforce are ready to go live unless it is clear that the service under consideration is no longer needed