

Ref no: 008140519
From: Commercial
Date: 14/05/19
Subject: Remote patient monitoring system

REQUEST

Could I possibly suggest that you direct these questions towards one or some of the following Trust employees: - the Matron in charge of the Discharge services, Community Liaison team, Multidisciplinary health and Social care staff, Director of operations and/or clinical director,

Please you please answer the following:

1. Does your organization presently promote/or endorse a (RPM) **remote patient monitoring system** to capture vital signs or other health related measurements post discharge from hospital and whilst a patient is residing in their own home or being cared for in a non-acute environment such as community hospital/hospice/residential or care home - (*Measurement examples being blood pressure/weight/temperature/Oxygen Saturation/EWS/ pulse/glucose etc.*)?

The answer is no.

1. If the answer is **NO** –
 - 1.1.2 Within the next 2 years, is telemedicine/ RPM, something that the Trust would consider as a way of either reducing hospital admissions, promoting an earlier discharge and/or recognizing and acting upon patient deterioration sooner?

The answer is yes.

- 1.1.3 If the Trust is not considering RPM for suitable patients (*able to take their own readings or have a relative who can do this for them*) – is there a reason why this is not being considered either on a per Trust basis or part of an agreement with the CCG?

- 1.2 If the answer is **YES** – RPM is presently used for some discharged patients- could you please detail – **N/A**
- 1.2.2 the system type/name/supplier
 - 1.2.3 When this came into use and when the contract expires
 - 1.2.4 Who funds home monitoring, is this the CCG, the Acute Trust or a combination of both or other organization (e.g. charity/STP)?
 - 1.2.5 How much this cost per patient or per year for multiple patients
 - 1.2.6 What patient data is captured & is there measurements you would like to capture but cannot achieve at the moment?
 - 1.2.7 What systems does this data feed into – e.g.GP systems & supplier
 - 1.2.8 Has there been any analysis of this data to demonstrate that remote patient monitoring from home has:
 - Reduced patient re-admissions into hospital
 - Expedited the discharge process
 - Improved “follow up” care post discharge – reminding patients to take medications/ monitor on-going health measurements etc.

2 Who is the main person(s)/ decision maker (s) – who would probably be responsible for the decision to use remote patient monitoring post discharge? (*Name/title/contact details etc.*)

Christine.walters@sthk.nhs.uk Director of Informatics