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4 April 2019

Freedom of Information Request – Ref: FOI 355-1819

Thank you for your recent Freedom of Information request about Remote Patient Monitoring. Please find our response below.

- Does the nature of some medications and/or treatment used in your organisation mean that if a
 patient is on home leave, it is important that some vital signs are still measured? Yes, this is the
 case for Clozapine initiation where vital signs such as temp pulse BP standing and
 sitting are required twice daily up to day 30. This is risk assessed and would be
 undertaken by community teams.
- 2. Does your organization presently use and/or endorse a (RPM) **remote patient monitoring system** to capture vital signs or other health related measurements whilst a patient is on a leave of absence and/or weekend leave e.g. residing in their own home (*Measurement examples being blood pressure/weight/temperature/Oxygen Saturation/EWS/ pulse/glucose etc.*)? No, not currently.
 - 1. If the answer is **NO**
 - 2.1.1 Is telemedicine/ RPM, something that the Trust would consider (within the next 2 years)? Yes, we would be interested to know more about the system. Please contact Alison Curson, Deputy Director of Nursing, on 0300 421 7045 or email her on alisoncurson@nhs.net.
 - 2.1.2 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?
 - 2. If the answer is **YES** RPM is presently used in the community could you please detail Not Applicable.
 - 2.2.1 the system type/name/supplier
 - 2.2.2 Where do you send this data/measurements to for instance...GP system?
 - 2.2.3 When this system came into use and when contract expires
 - 2.2.4 How much does this costs the Trust (approximately) per patient or per year for multiple patient?
 - 2.2.5 What patient data is captured & is there measurements you would like to capture but cannot achieve at the moment?
 - 2.2.6 Has there been any analysis of this data to demonstrate that remote patient monitoring from home, (or community residence) has rimproved patient care/medication needs/ allowed patients more time at home etc?

3. Who is the main person(s)/ decision maker (s)or team – who would probably be responsible (or is responsible) for the decision to use remote patient monitoring in the community? Name/title... John Trevains, Interim Director of Quality.

Yours sincerely,

Francis Perrin

FRANCIS PERRIN
Trust Secretariat Support Officer
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