**Remote Care Monitoring (Preparation) Scheme 2013/14**

**Year End Return Template**

The remote care monitoring (preparation) scheme service specification[[1]](#footnote-1) requires practices to submit a return to NHS England at the end of the financial year. This return provides a summary of local decisions reached and progress made against the key requirements of the scheme.

This template is provided by the NHS England national support centre for use by area teams with practices participating in the enhanced service. The template has been provided in word and excel in consideration of differing local preferences.

The template should be completed by practices and forwarded to their NHS England area team representative.

|  |  |
| --- | --- |
| **Participation period (DD/MM/YY - DD/MM/YY):** |  |
| **Provider/Practice Name:** |  |
| **GP practice ODS code:** |  |
| **Provider/Practice Address:** |  |
| **Signature:**  *(typed is acceptable if submitted via email)* |  |
| **Print name:** |  |
| **Date submitted:** |  |

**Questions**

|  |  |
| --- | --- |
| **Question** | **Practice response** |
| **1(a). Which long-term condition has the practice been preparing to implement?**  *(insert name of condition and short description (e.g. diabetes, hypertension)* |  |
| **1(b). Has this condition been agreed with NHS England or the CCG (as appropriate)?**  **Yes/No - If no, explain briefly below why not.** |  |
| **2(a). Has the practice identified the on-going tests or bodily measurements required to supportthe stable management of the chosen condition as outlined within the agreement?**  **If the practice has not identified the tests/measurements the practice is required to provide a brief explanation as to why not.** |  |
| **2(b). Has the practice identified how those tests and measurements will be accessed or fed in by patients with the condition?**  **Yes/No - If no, explain briefly why not.** |  |
| **3(a). What options will be available to participating patients for reviewing their results from on-going tests other than by face-to-face consultation?**  *(List all options that apply (e.g. video call, telephone, text, email, skype or letter)* |  |
| **3(b). What governance arrangements are being put in place to support the safe and confidential exchange of information under such options? Please provide a brief description of the process.**  **Yes/No - If no, explain briefly what steps the practice is taking to address such issues.** |  |
| **4.Please provide the denominator[[2]](#footnote-2) and numerator[[3]](#footnote-3) for this enhanced service.**  *(confirm whether this is actual/estimated)* |  |
| **5.Does the practice have a plan for registering patients wishing to participate in remote care monitoring arrangements?**  **Yes/No - If no, explain briefly what steps the practice is taking to address such issues** |  |

Practices must make available to NHS England (or CCG requesting on behalf of NHS England) any information which NHS England may require that the practice has or could be reasonably expected to obtain, in order to establish whether the practice has fulfilled its obligation under the enhanced service arrangements.

1. Remote care monitoring (preparation) scheme service specification. NHS England. <http://www.england.nhs.uk/resources/resource-primary/> [↑](#footnote-ref-1)
2. Denominator - the number of registered patients with the identified long-term condition (LTC) i.e. number of registered patients with the identified LTC condition. For example hyperthyroidism  = 20 (denominator) [↑](#footnote-ref-2)
3. Numerator - the number of registered patients with the identified LTC whose records have been updated to reflect preferences i.e. number  of registered patients with hyperthyroidism whose records have been updated to reflect their preference = 15 (numerator)   [↑](#footnote-ref-3)