**FOI Ref: 6653**

**Category(ies): Clinical - Assessments/Monitoring**

**Subject: Remote Monitoring and Virtual Ward**

**Date Received: 11/10/2022**

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| **Your request:** | **Our response:** |
| I am writing to request information under the Freedom of Information Act regarding use of remote monitoring and virtual wards. Please can you complete the attached questions. |
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