



Healthcare
Improvement
Scotland

SHTG
Advice on health
technologies

Virtual ward platform technologies to support patients to go home sooner or avoid hospital admission

Plain language summary | June 2026

What is our advice to NHSScotland?

NHS boards should offer virtual wards that use virtual ward platform technologies as an option, either to help people leave hospital earlier or to avoid hospital admission altogether.

Virtual wards should only be used for patients who are medically suitable and who need regular monitoring.

Taking part should always be the patient's choice, based on clear discussions with clinicians about the possible risks, benefits and other options.

When offering virtual ward monitoring, staff need to consider each patient's home situation, whether they have support from family or carers, their access to digital devices, and how confident they are in using technology.

Remote monitoring equipment should work reliably for people with different skin tones. Some monitoring devices don't work equally well for everyone. For example, pulse oximeters can be less accurate for people with medium to dark skin tones.

Clinical decisions should be based on several measurements, not just one reading.

The evidence about how well virtual wards work is limited and mixed. It is not yet clear what extra benefit virtual ward platform technologies provide, so its use should go hand in hand with ongoing and systematic data collection.

What are virtual wards?

In NHSScotland, the term ‘virtual ward’ is used to describe what happens when patients are monitored at home rather than in hospital. Checks by healthcare staff are carried out by phone or online, with little or no direct face-to-face contact with the patient. Virtual wards may be supported by virtual ward platform technologies. These normally include an app or website for patients, medical devices to record symptoms and vital signs, and an online system used by healthcare professionals to monitor the patients’ readings.

Is a virtual ward the same as hospital at home?

In Scotland, ‘virtual wards’ and ‘hospital at home’ are two different types of services, although the terms are often mixed up. In NHS Scotland, hospital at home services are well-established and provide short-term, hospital-level care in a patient’s own home or a home-like setting, including face-to-face care from healthcare professionals. Virtual wards involve remotely monitoring patients at home and increasing the level of care if it is needed.

Why is this important?

Virtual ward technology lets patients be monitored at home. This can be more comfortable for patients, reduce the risk of infections and may help people recover more quickly. For the wider health system, virtual wards may help free up hospital beds and lower costs.

What we did

We looked at the evidence on using virtual ward platform technologies. We looked at whether they were effective, safe and good value for money. We also considered patient experiences of being monitored at home using virtual ward platform technologies.

What we found

The evidence available on virtual wards and the technology that supports them is limited and varies widely in quality. Studies looked at different types of services, with different designs, levels of monitoring and terminology, which makes it hard to compare results or understand what works best.

Most research focused on outcomes like hospital admissions and length of stay, mainly in patients with respiratory or acute (short-term) conditions. While patients in virtual wards generally seemed to do as well as those in hospital, it is still unclear how much benefit comes specifically from the virtual ward technology itself.

What SHTG considered when developing advice for NHSScotland

1. The term 'virtual ward' is used in different ways and can be confusing for everyone. Clear explanations are needed, especially since the technologies used in virtual wards are sometimes used for services like hospital at home.
2. Virtual wards and remote monitoring will not suit everyone. Some technologies place extra demands on patients and their carers, though there are options that may be easier to use and more acceptable for some people.
3. Any benefits from virtual ward technology depend on how well it is built into existing hospital services, including having the right staff, processes and follow-up. More evidence is still needed, particularly on costs and long-term value.

What next?

This SHTG Recommendation will be shared with colleagues within Healthcare Improvement Scotland, the Scottish Government and NHSScotland to inform discussions about future investment and development of the virtual ward model of service delivery.

This plain language summary has been produced based on an SHTG Recommendation: Virtual ward platform technologies to support transition of patients to the home setting or to avoid hospital admission