Q1 Do you agree with Ofcom’s view that the proposed non-emergency healthcare service represents a justified use of a three-digit number? Please give reasons for your views.

Q2 Do you agree with the DHs view that:

A) a three-digit number is the best choice for the proposed service and
B) of the three-digit numbers available, 111 is the best option?

Please give reasons for your views.

Q2B: The reason that 111 is not currently in use is that where Loop-Disconnect pulsing is enabled (whether in use or not) 111 suffers a high level of false traffic due to unintentional momentary makes and breaks in line current.

This used to happen where open "telegraph wires" tapped together in bad weather, but can also be caused by fumbling operation of the telephone switch hook and an assortment of fault conditions.

I was personally aware of a particular telephone exchange where the number ending 1111 had been given to more than one unsuspecting customer, and on each occasion had had to be changed at the customer's request because of false calls all round the clock.

I would therefore suggest that to avoid the new service being congested with false traffic, a different code should be used. If 111 is introduced then I believe it will need to be changed shortly after, causing confusion for the sick who need help.

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Q3 What are your views on the tariff options selected by the DH?

Q4 Do you have any comments on the proposed notification of modification to the Numbering Condition in Annex 8 of this document: