



South Central Ambulance Service

NHS Trust

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Dear Ms Gannon

I am writing in response to the Ofcom consultation for the allocation of a three digit number for non emergency healthcare services. South Central Ambulance Service (SCAS) response is as follows:

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.

The establishment of the proposed non-emergency healthcare three-digit number is seen as a welcome development by the ambulance service as it will enable the public to have the ability to consider an alternative pathway to address their healthcare needs/concerns to the established 999 emergency number.

The 999 emergency number is easily recognised by the public and it is an established brand, we hope that overtime the public will recognise the proposed non-emergency healthcare three-digit number in the same light. However, if this is not achieved, then there is a danger that the existing 999 emergency number will remain the default number and it is essential that the inter-relationships and dependencies between the two numbers are addressed during the development of the proposed non-emergency three-digit number. The real benefits of a new number will lie in the ability of those operating it to resolve patient's needs as soon as and appropriately as possible. This will probably require links to be made between the organisations answering both numbers – the ability to pass calls between them and shared information systems, so that they can recommend and arrange consistent response to patient need.

*Towards
Excellence*

It is crucial that during the development phase that we manage the expectations of the public regarding the proposed non-emergency healthcare three-digit number to ensure that they do not default to the existing 999 emergency number. This could be achieved by developing pathways between both systems to ensure that patients/public are directed to the appropriate intervention and the ambulance service would welcome the opportunity to discuss how the pilots of pathways of care and capacity management system that we are undertaking could support the development of the inter-relationships and dependencies between the two numbers to deliver the desired outcome.

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

The SCAS supports the outcome of the public consultation exercise undertaken by the DH regarding the proposed three-digit number for non-emergency healthcare, namely that it should be established and that the most appropriate number would be 111.

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

It is our considered view that any charging for the proposed non-emergency healthcare number would potentially be detrimental to its introduction, as potential service users have access to the free 999 emergency number, therefore, there is a danger that any charging/tariff for the new number could result in the public/patients defaulting to the 999 service.

Therefore, to aid its successful development and usage we would propose that Option 1: free to callers would be the best option to be taken forward by the DH.

Q4. Do you have any comments on the proposed notification of modifications to the Numbering Condition in Annex 8 of this document?

We feel that Ofcom has complied with their legal duties regarding the above and have no comments to make.

Yours sincerely



Lisa Hodgson
Director of Service Development