## 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. :

Yes. I personally cannot remember the NHS Direct number without looking it up, and I have no memory impairment. (This was recently tested by my GP in connection with a neurological condition!) A 3-digit number is inherently easier to remember, and easier to dial. (See response to Q2b below.)

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. :
a) Yes
b) Agree 111 best option. Easily memorised; easily dialled, even in the dark or with visual impairment.

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

The 4 options (free; 10p fixed rate; 3p/min.; genuine local/natl. rate) selected seem a good place to start. 10p fixed rate per call, as with 101 , seems the fairest solution.

If calls were to be charged on a per minute basis, then people on very low incomes, especially using e.g. Pay-As-You-Go mobiles, might have to terminate their call before their problem had been addressed, since they would have no control over the length of a call which could mean extensive consultation, transfers between specialist advisors, etc.

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

Seems fair and correct.

