



The Mobile Broadband Group

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Dear Elizabeth

A Three-digit Number for Non-Emergency Healthcare Services

The Mobile Broadband Group ("MBG", whose members are the UK mobile businesses of O2, Orange, T-Mobile, Virgin Mobile, Vodafone and 3), welcomes the opportunity to respond to Ofcom's consultation on the Department of Health's plan to use 111 as the access number for non-emergency healthcare services.

Our comments not only relate to the specific plan to use 111 but also to the wider issues associated with greater use of short dial numbers, which is self evidently a policy with a very limited capacity.

Moreover, as Ofcom notes in its analysis of the options, the three digit option is likely to result in higher costs and inconvenience for communications providers who need to set up charging and routing processes for new individual numbers. Our preference would therefore be that, for this and future high profile public service numbers, Government departments continue to acquire numbers from the existing national numbering plan.

We feel that the Government may be overstating the benefit of a three digit number and could, in fact, be inducing diminishing returns from their use.

In paragraph 4.58 of the consultation document, Ofcom identifies opportunity costs of using the 111 number, all of which we agree with. However, it omits a further opportunity cost – the more three digit numbers there are in use, the less memorable each one becomes, as members of the public try to remember the respective functions of 999, 100, 112, 101, 111 and so on. It may also work against other public interest campaigns that are seeking to

embed memorable numbers in people's minds (for example Crimestoppers use 0800 555 111)

Analysis of the research

Before proceeding with the 111 project, we would ask Ofcom and the Government to re-evaluate its own and other research about the public's relationship with telephone numbers.

In its covering paper, the Department of Health (DH) references a Which? survey that revealed that just over 25% of people surveyed could remember the NHS Direct Telephone number. DH portrays this as a poor result.

It should be consoled by research carried out by Professor Ian Robertson of Trinity College Dublin which revealed that 25% of people surveyed could not even remember their own landline number¹.

It makes sense that people would tell the Which? surveyors they would prefer a three digit number but experience shows that it's not necessarily a route to improved uptake.

Even after 17 years, the European Commission discovered in 2008 that only 20% of people, knew the 112 pan-European emergency call number. (This research further revealed that in some countries (of which the UK was one) up to 90% of calls were hoax or false calls).

Far from demonstrating low awareness of the NHS Direct number, the MBG believes that, considering other factors, the Which? result is actually a rather positive outcome

Not only do these other surveys reveal that just having a three digit number is not sufficient for ensuring a successful use of numbers but it seems clear and intuitively obvious that people are not committing to memory numbers that are not essential to everyday existence.

People have more and more personal information that is critical to their lives – such as bank PIN numbers and on-line passwords – and have developed strategies for storage and retrieval that does not always rely on memory, such as using the 'Contacts' facility on a domestic or mobile phone.

The MBG believes that the Government continually overestimates people's capacity and willingness to memorise uninteresting information such as telephone numbers, even when the information could be important in certain circumstances.

From the Which? survey, it is clear that the NHS Direct number has a solid 25% of awareness on which to build. The 08 45 46 47 is a good, memorable number. The important thing, though, is not that people remember the number but that they know where to access it when needed – for instance having the number stored in their phones – that is where the Government's awareness and promotional efforts should be directed.

Misdials

At section 4.85, the Ofcom states that:

¹ <http://pcworld.about.com/od/dataprotection/Too-Many-Passwords-or-Not-Enou.htm>

A small minority of respondents identified the possibility of mis-dials as a potential shortcoming for 111, and the particular challenge around ensuring that three digits had been dialled was seen as a risk. This potential for mis-dials was identified in Ofcom's consultation on the designation of 101, where ergonomic advisers indicated that the same digit should not be repeated consecutively in order to avoid mis-dials. However, those who expressed this view in the DH research also suggested that it was a small price to pay for a number with many other advantages.

On the face of it, the views of some interviewees who concluded that the risk of misdials 'was a small price to pay' is an inadequate assessment of whether it is in fact a small price to pay. Has the cost benefit been properly assessed? What analysis has been carried out on this?

At sections 4.86, the consultation document states that *'mis-dials to 101 and 112 have been almost eliminated by the use of a four second gap (see paragraph 4.55 above) and therefore the same system on 111 would also prevent this type of misdial on this number.*

However, the MBG understands that this just relates to erroneous pulses on landlines and that the problem of misdials resulting from the repeated pressing of consecutive digits on mobiles in pockets and handbags remains. The emergency services handle between 3 and 4 million such silent 999 calls per annum and have instituted a silent calls procedure to circumvent the problem (something that is itself not without risk).

If networks and other services are misused because of poor number planning, this should be of concern to Ofcom and the MBG would urge that the misdial risk be examined more closely.

The tariff

The MBG notes that the section on tariff options is set out on behalf of the Department of Health and supports Ofcom's proposal not to intervene. As with all short codes, tariff setting process is no different to the existing 08xx number arrangements in so far as the terminating network operator hosting the 111 service provider will be responsible for commercial and interconnect arrangements with both transit and originating network operators. The tariff for 111 will depend on those arrangements and each mobile operator will discuss this individually with the Department of Health.

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Yours sincerely,

Hamish MacLeod

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