

fair telecoms campaign

copy of letter



Letter to all practices using 084 numbers

Dear colleagues;

Re; use of 084 numbers in General Practice

In April 2010 there was a contractual obligation placed on Practices regarding use of telephone numbers for which "having regard to the arrangement as a whole, persons pay more to make relevant calls than they would to make equivalent calls to a geographical number". Entering into, renewing or extending such use was prohibited and those already using such numbers were required to take all reasonable steps to bring their use to an end. This was in recognition of the increased cost to the caller in dialling 084 numbers, use of 087 numbers having already been prohibited. Whilst we recognise that Practices may well have entered in to these contracts in good faith to improve the options for callers in many cases (queuing functions etc); it remains that there is, in the majority of cases, an additional cost to the caller and this impacts upon the public disproportionately, potentially exacerbating health inequalities.

This letter reiterates the prime importance of fair access for all patients

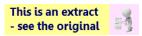
The National Audit Office recently reported on this matter urging the government to deal with the issue in respect of its own numbers. The report noted, "Vulnerable and low income households rely disproportionately on mobile pay-as-you-go telephone deals. These incur high charges for Freephone and higher rate lines. Cabinet Office guidance states that it is inappropriate to use higher rate numbers when dealing with people on low incomes or vulnerable groups."

The Department for Business, Innovation and Skills recently published draft regulations which will prohibit the use of all expensive numbers (084, 087 and 09) for customer enquiry lines by businesses.

It is now acknowledged that fully inclusive Call Plans (e.g. BT Unlimited Anytime) are the most popular overall. This will obviously be seen most clearly amongst those who are at home during the day. Calls to 084 numbers are excluded from these plans (barring some such numbers from some providers) making the premium cost 100%.

Where queuing arrangements are associated with a premium cost, this impacts most unfairly on those who cannot afford to stay on the line for long periods. This inequity is exacerbated if a cheaper alternative number is offered in parallel, as the caller cannot be sure of being answered in turn, as such a lesser service is provided to those with the least ability to pay.

As one organisation NHS England has been working to understand the extent of this practice nationally and the perceived barriers to Practices migrating to a geographical rate number in order to consider what strategies can be adopted to address this on-going difficulty.





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With thanks to the 'fair telecoms campaign' we are able to outline some facts and bust some myths regarding the use of 084 numbers.

Belief; Many Practices believe that the only way for them to withdraw from a current telephony contract is by paying a (sometimes considerable) penalty

Response; The telecoms industry in general, and leading providers of surgery telephone systems including Daisy Group, providers of the Surgery Line system, permit migration from 084 to geographic rate numbers at any time within the term of existing system and network telephone service arrangements, without penalty. The additional on-going cost incurred on migration from a 084 to geographic rate number represents the loss of the subsidy that has previously been provided, at the expense of patients and other callers.

It is NHS England's view that this represents one "reasonable" step that a practice could take

Belief; Offering a geographical alternative in parallel to a 084 number represents 'reasonable steps' until the 084 contract expires

Response; Providing an 084 number as a better service / higher cost alternative in parallel with a standard geographical option, is an unacceptable misrepresentation of what is meant by "choice" in the NHS. The NHS does not offer distinct tiers of service based on ability to pay

Access to general practice remains a key concern to patients and a strategic objective for NHS England as the commissioner. We look to Practices to work with us on this and many have already embraced new and innovative ways of ensuring good access using digital technologies. We are keen to hear of those initiatives that meet with the approval of patients and help Practices to respond to patient need and manage their workload. If you have such examples please email; england.primarycareops@nhs.net

Your Area Team will be in touch to understand your plans for swiftly moving away from the use of 084 numbers.

Many thanks

Dr Mike Bewick (Deputy Medical Director)

Dr David Geddes (Head of Primary Care Commissioning)

