Question 20190919 FOI ref 332-1920	Required Response	Response					
Do you use a Patient Appointment reminder service	Y/N, if Yes please provide either the name of an internal PAS system or the Company name of the external provider	Netcall Appointment Reminders					
What channels do you use to remind patients about their appointments?	For each Channel type please state annual volume and cost per unit, if you do not use a certain channel type please leave blank	Channel Type		Annual Volum	ne Cost Per Unit		
		SMS		401476	Unable to break this down		
		IVR / IVM		401476	Unable to break this down		
		Agent Calls		Not applicable	Not applicable		
		Email		Not applicable	Not applicable		
		Posted Letters		Not applicable	Not applicable		
Do you currently offer a 'blended' appointment reminder service (use various channels until you reach a patient)?	Y/N – If Y please state what combination of channels do you use and who is the provider	3 Reminder Calls and 1 Reminder SMS. Appointment Letter also sent to patients.					
Can Patients cancel or rearrange appointments using the reminder service?	Y/N	Υ					
When is the Appointment reminder contract due for review	Please state review date	April 2020					
Do you currently use Hybrid Mail? (electronic patient	Y/N - If Y please provide the Providers name, annual volume	Provide	rs Name	Annual Volum	ne Cost Per Unit		
notifications that, via a link, directs to an online portal to retrieve letters, notifications etc)	and cost per unit. If the system you use is internal please put internal.	Not applicable		Not applicable	Not applicable		
When is the Hybrid Mail contract due for review	Please state review date						
Do you currently outsource your Friends and Family Test	Y/N – Please state the name of the provider	Netcall for A&E only					
What Channels do you currently use for Friends and Family Test	CHANNEL TYPE	Channel Type	Used (Y/N)	Annual Volume	Cost Per Unit		
	Please put a Y next to the relevant channel type used for Patient surveys and a S next to the channel type used for Staff surveys (separated by a /) Then provide the annual volume and cost paid per unit for each of Patient and Staff (separated by a /)	SMS	N	Not applicable	Not applicable		
		IVR / IVM	Υ	As above	As above		
		Agent Calls	N	Not applicable	Not applicable		
		Email	N	Not applicable	Not applicable		
		Paper Based	N	Not applicable	Not applicable		
		Tablet / Ipad	N	Not applicable	Not applicable		
When is the Friends and Family Test contract due for review	Please state review date	April 2020	<u>'</u>				
Do you use any other messaging? Pre-Op: Messages relating to what patients need to do pre-	If used state: channel used, annual volume, cost per unit.	Service Type	Channel Type	Annual Volume	Cost Per Unit		
operation. Post-Op: Medication reminders, general advice.		Pre-Op	Not applicable	Not applicable	Not applicable		
Key Patient Messages : Mental Health / Maternity support,		Post-Op	Not	Not applicable	Not applicable		

Smoking cessation etc			applicable			
Broadcasts : bad weather / Incidents / appointment cancellations to staff and or patient		Key Patient	Not	Not applicable	Not applicable	
			applicable			
			Not	Not applicable	Not applicable	
		Broaucasts	applicable	1		
Do you pay any other fees (Monthly service charge etc) for	Please state what the fee is for and how much you pay (inc	Not applicable				
any of the services mentioned above?	one off set up charges)					
Please provide the name and role of the person(s)						
responsible for the implementation and continued running	Name, role (contact details if applicable)	Head of Service Delivery, IM&T, 01782 672472.				
of the services mentioned above						