

Request under Freedom of Information Act 2000

Request Ref: NGFOI 18/19: 664

Thank you for your request for information received at Northampton General Hospital NHS Trust (NGH) on 08/03/2019.

I am pleased to be able to provide you with the following information:

Please answer the following questions regarding your organisations use of mobile applications to support employee mental/emotional health and wellbeing.

1. *Does your organisation offer any **digital apps** as a resource for staff to support their mental/emotional health and wellbeing? (e.g. Big White Wall, My Possible Self, Thrive) Apps may provide advice and guidance to support wellbeing, diary entries or an interactive self-help programme etc. to support the reduction of stress, anxiety and/or depression*

No, the Trust does not offer any digital apps as a resource for staff to support their mental/emotional health and wellbeing.

2. *If yes to Q1 please provide the following information for **each app** used by the organisation*

N/A

- a. *Name of third-party supplier(s)*
- b. *Who is responsible for the payment of the app (i.e. employee or employer)*
- c. *What is the annual price paid for the app in 17/18?*
- d. *Contract start date & end date*
- e. *What date did the app **go live** in the organisation?*
- f. *Did the organisation use a framework to procure the service? If so, please state the framework used*
- g. *Please list **all external systems** the app integrates with (e.g. EAP providers, GP referrals)*
- h. *Does the app include any form of financial wellbeing support? (e.g. advice and/or helplines)*
- i. *Through the utilisation of the app, has your organisation seen any **quantifiable benefits**? Please provide detail on the benefits achieved (e.g. an increase in employee productivity, increase in staff retention, reduction in staff sickness absence or a reduction in occupational health referrals)*

3. *For **each supplier** listed in Q2, please indicate the number of employees registered on the app, split by the following staffing groups*

| Name of Supplier | Nursing & HCA's | Medical | Allied Health Professional/ Scientific, Therapeutic and Technical (AHP/STT) | Non-medical Non-clinical (NMNC) | Total |
|------------------|-----------------|---------|---|---------------------------------|-------|
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N/A