

THALAMOS PLATFORM

Service Definition Document

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1.0 THALAMOS PLATFORM OVERVIEW

Thalamos is a digital health company dedicated to improving mental health crisis care by streamlining and digitising essential mental health processes. Thalamos does this by providing cross organisational workflow tools to better support frontline professionals to provide care and treatment. These tools also provide high quality pathway data to enable targeted care improvements. This document summarises the Thalamos platform and features. More granular functional and non-functional specifications are available on request.

1.1 Platform

The Thalamos Platform is a modern cloud-based web application hosted on AWS in the UK. It provides cross-organisational workflows for the different stakeholders involved in care. The Platform has two products which both integrate with each other. These are MH Forms and eMHA. Both products are architected API-first. They integrate with each other and the other systems in use by procuring organisations including Record Management Systems, Electronic Patient Records and electronic prescribing systems. The Thalamos platform is also the only MHA administration system used by national partners including the Care Quality Commission SOAD Service and British Transport Police, ensuring complete national workflow integration and high data quality.

1.2 Products

MHForms is primarily used by Policing Teams to triage mental health incidents and support the application of Section 136 and other mental health pathways providing an auditable handover to healthcare services. May also be used by other procuring organisations requiring triage response and secure data sharing with partners.

eMHA is a modular service used by Health and Social Care providing complete Mental Health Act pathway and Mental Capacity Act pathway coverage across the configured geography including all stakeholders.

1.3 Benefits

- Accelerates urgent mental health care – quicker assessment and treatment.
- Reduces administrative burdens on clinical and back-office teams.
- Enhances security and compliance; reduces legal exposure.
- Improves system collaboration: NHS, social-care, police, MOJ, and independent partners.
- Supports better decision-making with real-time data insights.
- Integrates with national regulatory bodies and national policing services.
- Informs patient flow improvements via operational bottleneck data.
- Reduces errors and incidents by >90%.
- Reduces expenses and creates cash-releasing benefits.
- Improve population health-management – direct prevention and earlier intervention.

1.4 Cross-Organisational Workflow

Thalamos provides digital workflows that enable all stakeholders to complete their role under the Mental Health Act (MHA) across any care setting – including Assessment and Admission, Treatment, Community and Discharge. Mental Capacity Act (MCA) and ancillary workflows (Dols, BIA etc) are also supported. Workflows are always completed in the context of a patient record and in the context of an organisation to ensure accuracy and joined-up audit trail as patients move between care settings and responsible organisations (e.g. NHS, Local Authorities, independent providers, CQC SOAD Services, Police Service etc).

The workflow models the footprint of the deployment including data sharing requirements to enable robust data governance.

1.5 Forms and Sections

Thalamos workflows Service the following forms and sections, additional forms or workflows may be included subject to client request.

Form	Section	Description
Admission Forms		
-	136	Police powers in a public place. Extends to wider Right Care Right Person workflows including voluntary admission pathways, Mental Capacity Act (MCA) assessments and subsequent reliance on MCA Ss 5/6
-	135	Warrant to enter a person's home
-	132	Patient rights under Section 132
A1	2	Application by nearest relative for admission for assessment
A2	2	Application by an Approved Mental Health Professional for Admission for Assessment
A3	2	Joint Medical Recommendation for Admission for Assessment
A4	2	Medical Recommendation for Admission for Assessment
A5	3	Application by nearest relative for admission for treatment
A6	3	Application by an Approved Mental Health Professional for Admission for Treatment
A7	3	Joint medical recommendation for admission for treatment
A8	3	Medical Recommendation for Admission for Treatment
A9	4	Emergency application by nearest relative for admission for assessment
A10	4	Emergency application by an approved mental health professional for admission for assessment
A11	4	Medical recommendation for emergency for assessment

AMHP Referral and AMHP Report Forms	-	Referral Request for an AMHP to carry out an assessment and the Record of assessments by the Approved Mental Health Professional
Medical Rationale form	-	Record of an assessment by the Medical Practitioner
Hospital Forms		
H1	5(2)	Report on hospital in-patient
H2	5(4)	Record of hospital in-patient
H3	2,3 and 4	Record of detention in Hospital
H4	19	Authority for transfer from one hospital to another under different managers
H5	20	Renewal of authority for detention
H6	21B	Authority for detention after absence without leave for more than 28 days
Leave form	17	Leave of absence from hospital
Guardianship Forms		
G4	7	Medical recommendation for reception into guardianship
G5	7	Record of acceptance of guardianship application
G6	19	Authority for transfer from hospital to guardianship
G7	19	Authority for transfer of a patient from the guardianship of one guardian to another
G8	19	Authority for transfer from guardianship to hospital
G9	20	renewal of authority for guardianship
G10	21B	Authority for guardianship after absence without leave for more than 28 days
CTO Forms		
CTO1	17A	Community treatment order
CTO2	17B	Variation of conditions of a community treatment order
CTO3	17E	Community treatment order: notice of recall to hospital
CTO4	17E	Community treatment order: record of patient's detention in hospital after recall
CTO5	17F(4)	Revocation of community treatment order
CTO6	17F(2)	Authority for transfer of recalled community patient to a hospital under different managers
CTO7	20A	Community treatment order: report extending the community treatment period
CTO8	21B	Authority for extension of community treatment period after absence without leave for more than 28 days
CTO9	-	Part 6 – community patients transferred to England
CTO10	19A	Authority for assignment of responsibility for community patient to hospital under different managers
CTO12	64C(4A)	Certificate that community patient has capacity to consent (or if under 16 is competent to consent) to treatment and has done so (Part 4A consent certificate)
Treatment Forms		

T1	57	Certificate of Consent to treatment and second opinion
T2	58(3)(a)	Certificate of consent to treatment
T3	58(3)(b)	Certificate of second opinion
T4	58A(3)	Certificate of consent to treatment (patients at least 18 years old)
T5	58A(4)	Certificate of consent to treatment and second opinion (patients under 18)
T6	58A(5)	Certificate of second opinion (patients who are not capable of understanding the nature, purpose and likely effects of the treatment)
Urgent Treatment	62	Urgent Treatment form
Soad Report Form (SRF)	-	SOAD Report resulting from SOAD assessment
Miscellaneous Forms		
M1	-	Part 6 - date of reception of a patient in England
M2	25	Report barring discharge by nearest relative
Discharge Forms		
Holding Powers Discharge	5(2), 5(4)	Discharge from holding powers
Section 23 Discharge	23	Discharge of patients
Aftercare	117	Recording of 117 aftercare
Tribunal and Hospital Managers Hearings Forms		
Application Forms	-	Application and referral forms
Report Forms	-	Responsible Clinician Report, Nursing Report, Social circumstances Report
Statement of Information Forms	-	Statement of information about the patient form
Hearing Forms	-	Hearing questionnaire forms and Case management and pre-hearing forms
Forensic Forms		
Hospital Order Forms	37/41/38	Hospital Order forms and Hospital Order with Restrictions forms, and interim Hospital Order forms
Transfer Forms	47/49	Transfer Direction forms and Transfer Direction with Restrictions forms
Restriction Direction Forms	45	Restriction Direction on a Hospital Order form
Advance Choice Documents and Care Plans		
ACDs	-	Clinically informed Advance Care Planning developed in collaboration with Kings College London.
Mental Capacity Act		

MCA	-	MCA Assessments and ancillary frameworks and assessments including DOLs, LPS and BIAs.
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1.6 Dashboards, Reporting, and Notifications

The Thalamos workflow captures high quality data to deliver rich insights into mental health pathways. Dashboarding, reporting and accompanying notifications are available in two main formats.

Real Time Operational

Real-time dashboards powered by the Thalamos MHA Status Engine summarise key information and insights generated by form and actions completed within workflows. This records the MHA status of each patient including which section they are detained under, until what date, what consents or rights they have in place and which organisation is responsible for them at any given time. These operational dashboards deliver:

- MHA legal status and summary of MHA history at point of assessment
- Alerting of new events, such as S136 arrived in ED or assessment started in the community
- Upcoming expiry, renewal and other administrative alerting to ensure powers do not lapse without appropriate actions
- System level patient flow insights including who is being detained under which powers, and where - plus key metrics across system partners including MHA usage and waiting times

Near Real Time Statistical

Near-real time statistical dashboarding and reporting allows for more complex and strategic reports, queries and insights to better understand historical trends including:

- On demand reports showing historical MHA usage to support MHSDS, CQC reports, Home Office returns and internal reporting on MHA usage
- Information on demographics
- Reviewing how initiatives and ways of working are impacting MHA usage and patient flow.

1.7 Dr Finder - Section 12 Booking and Payments

S12 Booking and Payments provide a fully digital workflow for the identification, coordination, and remuneration of Section 12-approved doctors. The module enables Approved Mental Health Professionals (AMHPs) to locate appropriately qualified and available doctors in real time, arrange assessments, and manage associated payments within a single, compliant environment. By embedding this capability within the eMHA workflow, S12 Booking and Payments reduces administrative burden, accelerates the completion of Mental Health Act (MHA) assessments, and

improves data consistency across organisations. The module delivers end-to-end visibility and auditability of assessment activity and financial transactions, supporting operational efficiency and governance for Local Authorities, NHS Trusts, and Integrated Care Systems (ICSs).

Key Functionality

- Enables Approved Mental Health Professionals (AMHPs) to identify and contact appropriately qualified Section 12-approved doctors in real time.
- Provides a digital booking workflow for coordination of MHA assessments within a single, compliant environment.
- Integrates digital claim submission and payment processing for Section 12 doctors.
- Delivers full visibility and auditability of bookings, assessments, and financial transactions.
- Reduces administrative burden and minimises delays in arranging assessments.
- Improves data quality and consistency across Local Authorities, NHS Trusts, and Integrated Care Systems (ICSs).
- Enhances governance and financial oversight through integrated reporting and approval workflows.

1.8 Organisations, Teams, and Users

Workflows are always administered in an organisational context to ensure continuity of care across shifts, co-ordination of care between organisations and robust handover practices. Role based access control (RBAC) ensures members of teams receive experiences tailored to their functions. Users can only administer the Sections of the MHA for which they have accreditations and can only access data which they have permissions to access.

Data completed within a team or site context is aggregated up so that users with the appropriate permissions, such as mental health law teams can review data for their whole organisation. Data sharing leads are modelled into the domain ensuring the correct MHA data is available within the agreed organisational, ICB, or regional scope but is otherwise only available when explicitly shared to users involved in the patient's care. A broad summary of users is included below. Rich RBAC Controls allows further granularity of roles and access controls subject to needs of procuring organisations.

Stakeholders / User Types	Key Functionality
Professional Users	
Approved Mental Health Professionals	Forms/Sections, Shared Caseload, Dr Finder, Dashboarding and Operational / Statistical Reporting

Local Authorities & Social Care	Forms/Sections, Shared Caseload, Dr Finder, Dashboarding and Operational / Statistical Reporting
Nurses & Ward Teams	Forms/Sections, Shared Caseload, Dashboarding and Operational / Statistical Reporting
Doctors	Forms/Sections, Shared Caseload, Dr Finder, Dashboarding and Operational / Statistical Reporting
Mental Health Legal Teams	Forms/Sections, Shared Caseload, Dashboarding and Operational / Statistical Reporting
Community and Neighbourhood Teams	Forms/Sections, Shared Caseloads, Dashboarding and Real Time / Near Real Time Reporting
Hospital Managers	Forms/Sections, Shared Caseloads, Dashboarding and Real Time / Near Real Time Reporting
Operational Management	Dashboarding and Real Time / Near Real Time Reporting
Business Intelligence and Analytics	Dashboarding and Near Real Time Statistical Reporting
Commissioners	Dashboard and Near Time Statistical
SOADs	Forms/Sections, Scheduling and Caseloads
Finance Teams	Dr Finder
Police Officers	Section 136, Dashboarding and Operational / Statistical Reporting
Non-Professional Users	
Nearest Relative	Right to information, Applications. Leave and Discharge
Patients	132 Rights, ACDs & Section 17 Leave
Other Users	
Secure Guest User	Users of the eMHA system can invite non-Thalamos users to access MHA documents by sharing an encrypted and time sensitive link to ensure flexibility of use preventing delays for an individual to access urgent care

1.9 Audit and Traceability

Thalamos' infrastructure and application layers are engineered to deliver end-to-end auditability and evidential integrity. Every action within the Thalamos platform – whether clinical, administrative, or technical – is recorded in line with NHS Digital, ICO, and UK GDPR expectations for immutable, time-stamped records. This framework provides both clients and regulators with a defensible audit trail that supports accountability, patient safety, and forensic investigation capability.

Audit Architecture

- **AWS Cloud Trail and CloudWatch** record all administrative and infrastructure-level actions with immutable time-stamped logs retained for 10 years.

- **Application-level audit trail** captures every user interaction within the Thalamos platform – including form completion and amendments – ensuring that every action is attributable and traceable.
- **Event correlation and log integrity** are maintained via SIEM solutions and AWS GuardDuty, detecting anomalous behaviour and preserving a complete chain of custody for all events.

Point-in-Time Restoration and Evidential Preservation

The Thalamos database, hosted on Amazon Aurora for PostgreSQL, maintains continuous, second-by-second backups for 30 days, enabling restoration of the full system state at any precise point in time. Each audit record is write-only to the database, ensuring non-repudiation. All audit data is encrypted in transit (TLS 1.2+) and at rest (AES-256) stored exclusively within AWS' UK Police Assured Secure Facility (PASF) region (London eu-west-2).

2.0 INTEROPERABILITY

2.1 Overview

Thalamos Platform is architected in a way to seamlessly integrates with the wide range of record systems used across the NHS, social care, police services, private providers and wider partner organisations. eMHA aligns with NHS data and interoperability standards (Fast Healthcare Interoperability Resources [FHIR], Systemized Nomenclature of Medicine [SNOWMED] NHS number etc.) and is exposed over open Application Programming Interfaces (APIs) to any solution that needs to integrate.

2.2 Integrations

The enabling infrastructure described above facilitates integrations with other systems. These are not included as standard and will vary depending on the procuring organisation strategy and other tools or software in use. These are therefore subject to scoping and priced on a time and materials basis. The list included is non exhaustive.

- **The Spine:** Integration with Patient Demographic Service (PDS) to establish identity if this function is not being performed via integration with the Electronic Record System.
- **Electronic Record Systems:** Integration with core Electronic Patient Record (EPR) or equivalent systems in social care or police services including in context launch to avoid double keying and data write backs (both documents and structured data) to ensure one record is maintained in the core record system.
- **Shared Care Records:** Summary MHA record surfaced in shared care records to support partner organisations relevant information, such as AWOL or recent discharge if assessed.

- **Other Thalamos users:** Integration with other Thalamos users for seamless cross-organisational pathways including SOAD and Police workflows provided by Thalamos.
- **ePMA:** Integration with electronic prescribing systems to surface treatment form data in prescribing workflows.
- **Patient Portals:** Integration with Patient and Nearest Relative / Nominated Person facing applications in use
- **Authentication:** Integration with a variety of authentication options including SSO via NHS.net, ADFS, SAML, Azure AD or integration with other core systems. Thalamos also supports multi-factor authentication (MFA).
- **Scheduling and Billing:** Integration with scheduling, rostering and billing tools in use
- **Data Warehouses / Data Lakes:** Integration with data warehouses / data lakes and other reporting or BI workflows in use.

3.0 INFRASTRUCTURE

3.1 Overview

Thalamos' infrastructure combines UK-sovereign cloud hosting, resilient architecture, and NHS Digital Gold Standard performance standards. Designed for complex inter-organisational workflows, it provides the scalability, integrity, and availability necessitated by mission-critical technologies.

3.2 Cloud Architecture and Hosting

Our systems are fully cloud-native, built on Amazon Web Services (AWS UK Region-London, eu-west-2).

- **Fully cloud-hosted (multi-tenant by design):** Each customer environment operates within logically segregated virtual private clouds (VPCs).
- **AWS-managed infrastructure:** Core infrastructure services, patching, and hardware maintenance are delivered and continuously updated by AWS.
- **Multi-availability zone deployment:** Thalamos employs geographical redundancy via multiple AWS data centres across UK regions, ensuring service continuity in the event of a local failure.
- **Zero-trust network segmentation:** Public, private, and data layers are isolated within dedicated subnets protected by AWS Security Groups, Network ACLs, and Web Application Firewalls (WAF).

3.3 Data and Storage

- **Primary data layer:** Hosted on AWS Aurora (PostgreSQL) with continuous replication across data centres and point-in-time recovery up to date within 30 days.
- **Immutable backups:** File data is stored on Amazon S3, configured with Object Lock Governance (10-year write-once retention), providing tamper-proof immutability, and audit trails.
- **Encryption:** All data at rest is protecting using AES-256, and all data in transit uses TLS 1.2+.

3.4 Performance and Resilience

- **Uptime target:** NHS Digital Gold Standard 99.9%, with intrusion detection, continuous vulnerability and performance monitoring (AWS Guard Duty), and log correlation.
- **Scalability:** Auto-scaling rules dynamically respond to workload demand, maintaining performance under peak load conditions.
- **Rolling deployments and Change Management:** New software versions are deployed incrementally, using segregated testing environments, ensuring uninterrupted service.

3.5 Business Continuity and Disaster Recovery

- **BCDR Plan and exercise:** Robust business continuity and disaster recovery plan, with annual testing to validate technical and organisational readiness in the event of an incident.
- **CVSS-based patching:** Critical vulnerabilities remediated within 48 hours.
- **Recovery Time Objective (RTO):** 4 hours; **Recovery Point Objective (RPO):** 1 hour.

4.0 GOVERNANCE AND SECURITY

4.1 Responsible Innovation Group

Thalamos implement a novel approach to governance, adapting theories of data privacy “by design”; Thalamos have created Responsible Innovation “by design”. Our Responsible Innovation Group (RIG) is a multi-disciplinary panel that brings together expertise in mental health law, clinical safety, living experience, and data governance. Our shift-left approach to risk ensures best-practice and compliance is not an after-thought but embedded in all aspect of our software development.

- **Clinical Safety:** Assuring compliance with DCB0160 and DCB0129 standards to embed clinical risk management throughout design, testing, and deployment.
- **Mental Health Law:** Ensuring our products are compliant with, and at the forefront of, Mental Health Law best practice and legislative standards.
- **Living Experience:** Championing patient and practitioner experience at the centre of our product design and decision-making.
- **Data Governance:** Upholding compliant, ethical data processing across complex data-sharing contexts within healthcare environments.

4.2 Accreditations

Thalamos’ accreditation framework reflects a mature, independent validated approach to information security and clinical technology assurance. Through internationally recognised certifications, continuous penetration testing and NHS and Police aligned security controls, Thalamos demonstrates enduring operational resilience and trust across its platform and service delivery ecosystem.

- **ISO/IEC 27001:2022:** Information Security Management System is independently audited and certified under ISO 27001, confirming compliance with global standards for information security governance, risk management, and continuous improvement across all Thalamos systems.
- **Cyber Essentials Plus:** Certified against NCSC standards for endpoint, patching, and access security controls.
- **NHS DSP Toolkit:** Validated as exceeding NHS Digital standards for data security and protection.
- **NHS Digital Technology Assessment Criteria:** Fully meets NHS DTAC for safety, interoperability, and security.
- **OWASP Secure Coding & NIST Cybersecurity Framework Alignment:** Secure development lifecycle embedded with OWASP and NIST cybersecurity best practices.
- **Independent Penetration Testing:** Annual CREST and CHECK-certified testing for our application and API security posture.

For the most up-to-date and comprehensive overview of Thalamos’ certifications, independent audit results, and detail security governance framework – including policies, technical controls, and assurance processes – please visit our [Trust Centre](#).

5.0 ONBOARDING

5.1 Overview

Organisations will be supported by a dedicated Thalamos Programme Manager, who is experienced in the delivery of the Thalamos Platform across multiple organisations in line with PRINCE2 methodology and risk management strategies. A dedicated Thalamos Programme Manager will provide a comprehensive Thalamos Platform Implementation Pack including:

- Template project plan and checklist
- Integration and software configuration documentation
- Benefits Realisation Tool Kit

Thalamos recommends the procuring organisation allocates a project manager for implementations and can recommend key personnel to be involved in the project.

5.2 Training and Change Management

Thalamos provides a hybrid training wraparound that focuses on ensuring staff feel confident using the platform in real-world situations. This approach makes training available for all learning styles. Thalamos will also support a training needs analysis to identify which staff need training, key messages, any organisation-specific information required to support safe use of the platform.

Thalamos provides the following training:

- **E-learning package:** user-specific e-learning SCORM package that can be hosted on your organisation's learning management system.
- **Webinar sessions:** drop-in virtual sessions to support FAQs and real-world usage scenarios.
- **On-site engagement:** floor-walking and real-time troubleshooting during the go-live period.

Further training sessions can also be requested by customers any time after go-live.

5.3 Programme Management

Thalamos delivers programmes through a proven, standardised approach that supports safe, efficient deployment across organisations, local authorities, and police forces. The methodology is based on PRINCE2 principles and focuses on understanding current processes, aligning future workflows, managing change, and ensuring statutory compliance. Digitising complex pathways involves multiple organisations and stakeholders, therefore Thalamos focuses on ensuring implementation support for consistent and prolonged adoption.

- **Process & Organisation Mapping:** mapping current pathways, user groups, and interdependencies to understand the scale of change, inform configuration, identify risks, and support training, and engagement activities.
- **Change Management:** using a practical, blended approach to training and adoption that supports front-line staff operating in high-pressure environments. This includes e-learning, webinars, super-user models and post-go-live floor-walking. This ensures users feel confident and supported from day one.
- **Adaptable Delivery Model:** the approach is flexible to different organisational structure and can be adjusted for multi-organisation, regional, national, or single-force/single-Trust delivery. Workstreams and resourcing are tailored to the context and scope.
- **Ongoing and BAU Support:** following go-live, Thalamos provides ongoing optimisations, benefits support, user feedback cycles, and access to product steering groups to ensure sustained adoption and continuous improvement.

6.0 SERVICE MANAGEMENT AND SUPPORT

6.1 Maintenance and Availability

Scheduled maintenance follows a zero-downtime deployment method which means the application is never down or in an unstable state during the standard deployment process. Where downtime maintenance is required, customers will be notified at least 4 weeks in advance.

Thalamos Platform maintains a quarterly service availability of at least 99.9%, aligned to the NHS Digital Service Classification Gold Standard. Information about availability calculations is available in any Service Level Agreements.

6.3 Support Levels

Thalamos provides a responsive, clinically aware support service designed to ensure users can always access and use the platform effectively.

Support is triaged, first through customer's local service desk and agreed internal support processes, enabling organisations to provide familiar, first-contact assistance to users and ensure efficient triage of common access or usage questions.

When an issue requires deeper technical investigation or cannot be resolved locally, Thalamos' specialist support team is readily available to assist. Escalated queries can be raised directly with Thalamos, where they are handled by experienced support professionals with detailed knowledge of the platform and its clinical and operational context.

Standard acknowledgement times for escalated issues raised by email are:

- **Monday-Friday 09:00 – 18:00:** 1 hour

- **Monday-Friday 18:00 – 09:00:** by 10 am the following morning
- **Saturday-Sunday:** by 10 am Monday morning

Support channels are provided through the following channels, adhering to NHS Digital recommendations:

- Phone
- Email
- Online Ticketing System

Phone support services are provided 24 hours a day, 7 days a week, including holidays, in accordance with the NHS Digital Gold Standard. Urgent issues should be escalated by phone, particularly out of hours.

6.4 Incident Management

Thalamos' support framework utilises best practices for incident management, integrated with our Business Continuity and Disaster Recovery (BCDR) Plan. Incidents are triaged using predefined severity classifications, with each class having defined response actions and target resolution times.

Users may report incidents via phone, email, or online ticketing system. Channels are monitored 24 hours / day / 7 days a week.

6.5 Release Management

Thalamos provides regular software updates and patches and will support the customer with any change processes resulting from a release by providing release notes or any other relevant documentation for releases which will result in a change process for the customer:

Standard notice period of releases:

- **Minor Release:** 3 weeks
- **Major Release:** 5 weeks
- **Emergency Release:** <24 hours after the release

7.0 SERVICE TERMS

For service terms please refer to the “Terms and Conditions” document on the Thalamos Platform Service webpage.

8.0 TECHNICAL REQUIREMENTS

For technical requirements please refer to the “Using the service” section on the Thalamos Platform Service webpage.

9.0 PRICING

For pricing, please refer to the “Pricing” document on the Thalamos Platform Service webpage.

10.0 OFF-BOARDING

10.1 Offboarding Process

At the end of a contract the Thalamos Team will support client and users to safely bring the contract to conclusion. This will include ensuring all relevant data has been handed over to local record systems and ensuring that all user accounts are closed. All data held within the Thalamos Platform will be deleted after a period of 30 days. At this point accounts will no-longer be accessible or usable by customers. An invoice/credit note is issued within 30 days to cover any under/over usage following the end of the contract.

10.2 Data Removal and Extraction

At the end of a contract users should ensure they have downloaded all data held within Thalamos. This may be downloaded from within the application in PDF format and in CSV. Thalamos can also provide data in SQL format plus a zip of PDF files.