

**Reference Number:** FOI202526/020  
**From:** Private Individual  
**Date:** 10 April 2025  
**Subject:** Patient Engagement Portal/Patient Portal

**Q1** Has the trust implemented a Patient Engagement Portal (also known as a Patient Portal)?

**A1** No

**Q2** If so, please provide the name of this solution, and the name of the company that supplied it.

**A2** Information not held – not applicable as per A1

**Q3** When was this solution procured?

**A3** Information not held – not applicable as per A1

**Q4** Does the trust have any plans in the near future to replace this solution?

**A4** Information not held – not applicable as per A1

**Q5** Please confirm which of the following care pathways, the Patient Portal is used across:  
a. Diabetes  
b. COPD  
c. Heart Failure  
d. Weight management and weight loss  
e. MSK

**A5** Information not held – not applicable as per A1