# A Digital Inclusion Framework for Health and Care

Interactive tool

The digital inclusion framework for health care takes into account the different requirements needed for a service user to be able and motivated to engage with digital health and care, now, and in the future.

# How to use the digital inclusion framework for health and care interactive tool:

To use this interactive tool, click on the arrows in the framework to get more detail of the service users' perspective, the health and care systems objectives to enable inclusion, the populations more likely to be affected at each stage (while recognising everyone is at risk at exclusion for a variety of reasons) and recommendations.

You can scroll though sequentially or you can go back to the framework to look at specific sections.

This framework is supported by other resources to help application in health and care.

Go to framework





**Kent Surrey Sussex Academic Health Science** Network



**Support** 

# A Digital Inclusion Framework for Health and Care

#### A Service User's Journey for Digital Health Services/ Technologies Consideration **Awareness** Use **Post-Use** I have reliable access to Do I have, or I can get, suitable and the device(s) and internet Access and affordable access to device(s) and/or whenever I need it for the internet for digital health and **Affordability** my digital health and care? care. L can access and interact with digital health and **Accessibility** care safely and Do I have the necessary literacy, digital, Skills and and Usability and personal skills to effectively engage effectively. and/or do I feel that I will be able to get Support Am I aware of the support when I need it? I have access to reliable. The digital health and trusted, support service/pathway care service/ whenever I need it. and technology pathway/ technology and its was accessible. relevance to me? useable, and easy This service/ pathway/ for me to interact Can/do I see the value of this digital health technology befitted me, with. I find digital health and care **Motivation** and care service/ pathway/ technology, and motivates me to easy to use, convenient, and and do I feel that it will be worth the effort continue to use other of personal benefit to me. to engage in it? digital health and care. Can/do I trust the service/pathway/technology? I feel safe, and I feel that my **Trust** data is secure. Can/do I trust what will happen to my data and how it will be used? **Guidance** and I have the information and support I need across all aspects of the digital health service/pathway/technology (Awareness, Consideration,

Use, Post Use and accessibility and Usability)

#### AM I AWARE OF THE DIGITAL HEALTH AND CARE SERVICE/PATHWAY/TECHNOLOGY AND ITS RELEVANCE TO ME?

#### **Health and Care Digital Inclusion objective**

Our population is aware of digital health and care services/pathways and technologies and their relevance to them as individuals.

### Health and care service users' perspective

- What is digital health and care?
- How can digital health and care services, pathways and technology(s) support my individual health and care needs?
- What health and care pathways and technologies would be of personal benefit to me?
- How do I access trusted health and care pathways and technologies?

# **Recommendations**

- Develop a digital health and care communication strategy (national, regional, local, population level).
- Use all health and care opportunities to raise awareness of trusted digital health and care transformation and individual pathways/technologies to relevant populations.
- Consider workforce requirements (including their capacity and capability) to raise awareness and support/signpost people to relevant/trusted digital health and care.
- Develop a library of trusted, accessible, useable, digital health and care
- services/pathways/technologies to aid people accessing these independently
- Collaborate with other agencies working to improve digital access and skills to also promote digital health and care including:
  - Community/voluntary sector groups
  - Libraries
  - Local authorities

Everyone is at risk of digital exclusion in their life time

### Pay special attention to:

For each service/pathway/technology pay special attention to groups most likely to benefit from digital health and care, e.g., people on polypharmacy are more likely to benefit from NHS app for repeat prescriptions, specific Long-Term Conditions (LTC) and populations most affected by those.

#### DO I HAVE, OR I CAN GET, SUITABLE (AND AFFORDABLE) ACCESS TO DEVICE(S) AND/OR THE INTERNET FOR DIGITAL HEALTH AND CARE?

# **Health and Care Digital Inclusion objective**

Our population has suitable access or can get suitable access to devices and/or the internet so they have equitable access, and can interact with, and benefit from digital health and care.

#### Health and care service users' considerations

- Do I have suitable access to device(s) so that I can access and interact with digital health and care whenever I need to? Will my current device work with this health and care technology?
- If I don't have reliable access, do I know where I can get access to the device(s) needed?
- Do I have the wifi/data/electricity services that I need to access and interact with digital health and care whenever I need to?
- Can I afford to buy and maintain a suitable device, and the wifi, data, electricity services needed to access and interact with digital health and care whenever I need to?
- If I can't afford the device, the wifi, data, or electricity services, are there alternative (reliable) ways to access this which would enable digital health and care to be accessible to me?

#### Recommendations

- Understand specification requirements for each digital health and care technology- is this technology fully useable on all devices our population has access to, and if not how will gaps be filled?
- Ensure service users are not excluded, or disadvantaged, from accessing equitable health and care because they cannot afford the appropriate technology, wifi, data, and electricity they need.
- Ensure service users understand that they will not be excluded from the benefits of health and care if they do not have access to appropriate devices or cannot afford to run them Through provision of devices etc. or equitable health and care alternative.
- Provide technology and connection for the highest health and care need populations to enable them to access and interact with digital health and care. Mechanisms to do this could include:
- Direct provision or loan of relevant equipment, or 'prescribing' appropriate technology etc.
- Removing data charges for an individual's essential health-related services (e.g., NHS app)
- Collaborate with other agencies working in this area to provide access to technology and data including:
- Community/voluntary sector groups, libraries, local authorities
- Partnership with internet service providers

Everyone is at risk of digital exclusion in their life time

#### Pay special attention to:

People on low/no income
People in insecure/social housing/homeless
Older adults
'Limited' users: Ethnic Minorities, women, younger adults

Our population will be enabled to access and interact with digital health and care safely and effectively regardless of their literacy, digital or personal skills

#### Health and care service users' considerations

- Is this service/pathway/technology information accessible to me, written in a language and format that I can understand? Can the information be translated?
- Do I feel the internet and/or this digital health and care service/pathway/technology will be easy for me to access and interact with?
- Do I have the (literacy, digital, and personal) skills needed to interact with this service/pathway/technology safely and effectively?
- Do I have the ability/confidence/motivation/energy to upskill if needed? What support is available to help me with this?
- Could I benefit from this pathway/service/technology if the right support was available?
- Can I easily and confidently access the support that I may need (friends, family, community, or formal support)? Am I willing to ask and share data to do this?
- Will any support that can be provided be enough for me to then feel I can safely and effectively access and interact in digital health and care service/pathway/technology?
- Will this technology interoperate with other (health/care/assistive) technology I need to use?

#### **Recommendations**

- Ensure the service/pathway/technology is designed to be as easy to access and interact with as possible for all health and care service users.
  - Reduce the literacy, digital, and personal skills that will be necessary to access and interact in this digital health and care service/ pathway/ technology.
  - Ensure all the service/pathway/technology information that is public facing is accessible, written in plain language, and is translatable.
- Ensure the digital health and care pathway/technology is interoperable with assistive technologies and other health and care pathways/digital products.
- Move towards single sign-on (SSO) where users are asked to enter their login credentials one time to access all health and care related applications.
- Provide additional skills training where there are known skills requirements.
- Provide service/pathway/technology support whenever that is needed to ensure safe and equitable access.
- Collaborate with other agencies working in this area to develop digital skills and confidence in using technology including:
  - Community/voluntary sector groups, libraries, local authorities
  - Private sector/NGOs

Everyone is at risk of digital exclusion in their life time

# Pay special attention to:

People with low literacy/low confidence in their literacy
People who left school at/before 16
People in NRS social grades D&E
People whose first language is not English
People living with disabilities
Older adults

# CAN/DO I SEE THE VALUE OF THIS DIGITAL HEALTH AND CARE SERVICE, PATHWAY, TECHNOLOGY, AND DO I FEEL THAT IT WILL BE WORTH THE EFFORT TO ENGAGE IN IT?

# Health and Care Digital Inclusion objective

Our population can see the value of accessing and interacting with relevant digital health and care services/pathways/technologies.

#### Health and care service users' considerations

- How will I personally benefit from this digital health and care service/pathway/technology?
- How will it be easier and more convenient or me?
- Will it be worth the effort that I'll need to put in to access and interact with it?
- Are other people, like me, already benefitting from this digital health and care service/pathway/technology?

# **Recommendations**

- Ensure the benefits of using digital health and care are explicitly clear, in written and other formats including how it has benefited other similar/representative populations.
- Pay special attention to populations where more personalised/ health specific information may be needed.
- Design easy to use, convenient services/pathways/technology that require minimal individual effort in order to engage.
- Ensure the benefits of using digital health and care are explicitly clear, in written and other formats including how it has benefited other similar/representative populations.
- Pay special attention to populations where more personalised/ health specific information may be needed.
- Design easy to use, convenient services/pathways/technology that require minimal individual effort in order to engage.

Everyone is at risk of digital exclusion in their life time

# Pay special attention to:

People with lower literacy/confidence in their literacy
People who left school at/before 16
People in NRS social grades D&E
People whose first language is not English
Older adults

Our population can, and does, trust in this service/ pathway/ technology

#### Health and care service users' considerations

- > Do I trust the NHS/care system?
- > Do I trust digital?
- Can I be scammed? Can my device get a virus? Can my identity be taken?
- > Do I trust this digital health and care service/pathway/technology?
- Do I trust information provided over a digital service? How do I know this information is reliable?
- Will it be as safe or safer to use than the alternative?
- Do I trust there will be enough clinical oversight for my condition?
- Will I still be able to see someone face to face if I need to?
- Will I feel safe using this service?
- Is there any negative press or any rumours in my community about this service/pathway/technology?
- > Do I trust my abilities to interact with this digital health and care?
- Do I trust my own skills and ability to access and interact with this service/pathway/technology?
- Does the NHS/service trust me with my health and care information?
- > What happens if something goes wrong?

#### **Recommendations**

- Pay special attention to populations more likely to mistrust health and care services (e.g., people accessing mental health services, asylum seekers)
- Build and maintain trust in digital health and care by only using tested/trusted/reliable/secure technology.
- Ensure clinical safety and clinical oversight is transparent and built into the pathway.
- Ensure service users can easily feedback any issues, concerns, adverse events, complaints.

Everyone is at risk of digital exclusion in their life time

# Pay special attention to:

Everyone - but additional focus may be needed for populations less likely to trust health and care, e.g., people accessing mental health services or asylum seekers.

#### CAN/DO I TRUST WHAT WILL HAPPEN TO MY DATA AND HOW IT WILL BE USED?

#### **Health and Care Digital Inclusion objective**

Our population can, and does trust, what is happening to their data and how it is being used

#### Health and care service users' considerations

- Can/do I trust the health and care system with my personal data and how it is being used?
- Can/do I trust the technology companies I am asked to submit my data too?
- Can I easily find out what will happen to my data, who will have access to this data, how will it be used if I want to?
- Can I choose how my data is used?

#### **Recommendations**

- Be transparent about happens to data, data security, and how health and care data can be used to benefit the individual.
- · Avoid transferring data through third parties.
- Use NHS brand to build trust in service/pathway/technology.
- Be aware of overwhelming people with information- some people will trust the NHS and will be burdened by too much information. Others will want access to the details.

Everyone is at risk of digital exclusion in their life time

# Pay special attention to:

Everyone - but additional focus may be needed for populations less likely to trust health and care, e.g., people accessing mental health services or asylum seekers.

All our service users have reliable access to devices and the internet when they need it to enable them to access and interact with digital health and care

#### Health and care service users' considerations

- I can access and interact with the digital health and care technology on my own device, or a device I have access to whenever I need to.
- If I'm borrowing/sharing access that is proving reliable and confidential enough to meet my health and care needs currently.
- The digital health and care technology works well with my device.
- Whether I need constant or intermittent connection to wifi/data for digital health and care I can access this when I need it for my health and care needs
- I can either afford to use the internet or buy data to support this digital health and care service/technology or has this been provided for me.
- This technology interoperates with other (health/care/assistive) technology I need to use.

#### Recommendations

- Understand specification requirements for each digital health and care technology- is this technology fully useable on all devices our population has access to, and if not how will gaps be filled?
- Ensure service users are not excluded, or disadvantaged, from accessing equitable health and care because they cannot afford the appropriate technology, wifi, data, and electricity they need.
- Ensure service users understand that they will not be excluded from the benefits of health and care if they do not have access to appropriate devices or cannot afford to run them Through provision of devices etc. or equitable health and care alternative.
- Provide technology and connection for the highest health and care need populations to enable them to access and interact with digital health and care. Mechanisms to do this could include:
- Direct provision or loan of relevant equipment, or 'prescribing' appropriate technology etc.
- Removing data charges for an individual's essential health-related services (e.g., NHS app)
- Collaborate with other agencies working in this area to provide access to technology and data including:
- Community/voluntary sector groups, libraries, local authorities
- Partnership with internet service providers

Everyone is at risk of digital exclusion in their life time

#### Pay special attention to:

People on low/no income
People in insecure/social housing/homeless
Older adults
'Limited' users: Ethnic Minorities, women, younger adults

All our service users can access and interact with digital health and care safely and effectively

#### Health and care service users' considerations

- I find using the Internet/this health and care pathway/ technology easy and convenient to use because it meets my literacy, digital and personal needs.
- When needed, I have access to reliable support to enable me to access and use this health and care pathway/technology.
- This service/pathway/technology interoperates with the other (health/care/assistive) technology I need to use.
- I can understand and interact with the digital health and care pathway/technology because the information is provided in plain language and is translatable.

# **Recommendations**

- Ensure digital health and care pathways and technologies are easy and convenient to use (accessible and useable)
- Design digital health and care pathways to require the least amount of additional digital support necessary.
- Build in provision of support at the least inconvenience to the individual/population concerned
- Ensure all information is accessible, written in plain language and is translatable.
- Ensure the pathway/technology interoperates with assistive technologies/other digital health and care pathways/technologies.
- Ensure there is a system in place to monitor complaints, safety data, outcomes.

Everyone is at risk of digital exclusion in their life time

#### Pay special attention to:

People with low literacy/low confidence in their literacy
People who left school at/before 16
People in NRS social grades D&E
People whose first language is not English
People living with disabilities
Older adult

All our service users have access to reliable, trusted, support whenever they need it

#### Health and care service users' considerations

- I can access digital, service, pathway, and technology support whenever I need it.
- I find that support helpful.
- If I am providing support to a friend/family member to access digital health and care I know where I can access support.

# **Recommendations**

- Design digital health and care services/pathways/technologies to be accessible and useable to reduce the amount of additional support needed.
- Design support requirements into the service/pathway/technology (digital prompts/personal support).
- Understand formal support requirements and who will deliver that including workforce capacity and capabilities.
- Avoid the need for informal support in more complex or sensitive health and care pathways.
- If informal support is needed consider the support needs of informal carers /workforce, their skills, capacity and capability, and the service user's right to confidentiality and privacy.

Everyone is at risk of digital exclusion in their life time

### Pay special attention to:

People with low literacy/low confidence in their literacy
People who left school at/before 16
People in NRS social grades D&E
People whose first language is not English
People living with disabilities
Older adults

#### I FIND IT EASY TO USE, CONVENIENT, AND OF PERSONAL BENEFIT TO ME

#### **Health and Care Digital Inclusion objective**

Our service users value digital health and care and will continue to use it.

#### Health and care service users' experience

- This digital health and care service/pathway/technology is an easy, safe, and convenient way to access and receive health and care.
- I understand what is happening, what I need to do, and how to do it.

# Recommendations

- Design easy to use, convenient, accessible services/pathways/technology that require minimal individual effort in order to engage and remain engaged.
- Ensure the digital health and care pathway/technology is interoperable with assistive technologies and other health and care pathways/digital products.
- Ensure the digital health and care pathway is as good as, if not better than the alternative for service users.

Everyone is at risk of digital exclusion in their life time

All our service users feel safe and know that their data is safe when using digital health and care

#### Health and care service users' experience

- My health and care needs are met, and I feel safe.
- When I have a concern, I know how to raise it, and that it will be responded to.
- I am confident I am receiving the right advice and know what will happen/what I need to do next.
- The health and care service/pathway/technology helps me understand and manage my condition.
- The health and care service/pathway/technology picks up any health and care concerns and facilitates a safe and effective response.
- My personal data is kept safe and is only used by trusted health and care providers.

#### **Recommendations**

- Build and maintain trust in digital health and care by only using tested/trusted/reliable/secure technology that is clinically effective.
- Ensure information is presented in accessible ways.
- Ensure clinical safety and clinical oversight is transparent and built into the pathway.
- Feedback to service users when they enter data, so they know this has been reviewed and if they need to take action.
- Ensure service users can easily feedback any issues, concerns, adverse events, complaints.

Everyone is at risk of digital exclusion in their life time

All of our service users find digital health and care services/pathways/technologies accessible and useable

#### Health and care service users' perspective

- I understand how to use this digital health and care service/pathway/technology
- I can easily access and use this digital health and care service/pathway/technology
- I can safely and effectively interact with it
- If I need assistive technology, or other health and care pathways/digital products it interoperates easily with this digital health care pathway/technology.

#### **Recommendations**

> Design the digital service/pathway/technology to be accessible and easy to use for all service users and workforce.

- Design the digital health and care service/pathway/technology with literacy and cognitive accessibility requirements as core standard.
- Ensure the digital health and care pathway/technology is interoperable with assistive technologies and other health and care pathways/digital products.
- Move towards single sign-on (SSO) where users are asked to enter their login credentials one time to access all health and care related applications.
- Design the digital health and care service/pathway/technology in a way that users can accomplish goals easily and in a familiar way (e.g., the interfaces need to be designed in a way that is familiar to what users are asked to do when using other digital services).

Everyone is at risk of digital exclusion in their life time

### Pay special attention to:

People living with disabilities
People with low literacy/low confidence in their literacy
People who are unwell/ stressed/ neurodiverse (cognitive requirement)
People whose first language is not English
Older adults

<sup>\*</sup>Accessibility = are ALL users able to access an equivalent user experience, however they encounter product or service

<sup>\*</sup>Useability = how well a specific user in a specific context can use a product/design to achieve a defined goal effectively, efficiently, and satisfactorily.

Our population experience that they benefit from digital health and care and are motivated to continue using it

#### Health and care service users' reflection

- This digital service/pathway/technology provided easier and more convenient access to health and care
- This service/pathway/technology was useful and beneficial to me.
- This service/pathway/technology was safe and effective.
- I had the information and support I needed when I needed it.
- I was given the opportunity to feedback including any concerns I may have had, and these were responded to.

#### **Recommendations**

- > Routinely measure:
- Populations at risk of digital exclusion
- Populations not accessing digital health and care
- Access and usage data of digital technologies
- Service user experience and satisfaction in relation to the service, pathway, technology
- Clinical outcomes including safety
- > Collate and respond to feedback and any clinical issues raised.

Everyone is at risk of digital exclusion in their life time

# I HAVE THE GUIDANCE AND EMOTIONAL SUPPORT I NEED ACROSS ALL ASPECTS OF THE DIGITAL HEALTH SERVICE/PATHWAY/TECHNOLOGY.

# **Health and Care Digital Inclusion objective**

Our population knows where they can access information and support about digital health and care throughout their journey of awareness, consideration, use and post use of digital health and care

#### Health and care service users' requirements

- I know where I can get information about digital health and care if I need it
- I know where I can get support for digital health and care if I need it
- I know where I can raise concerns and feedback about digital health and care.
- The information and support that is available is accessible to me.
- I get the same (or improved) access to personalised information and support that I would get if I was receiving non digital health and care.

#### **Recommendations**

- Ensure people accessing digital health and care have the same (or improved)
  access to personalised, accessible and useable health and care information and
  support as if they were accessing non digital health and care.
- Information and support must be presented in accessible and useable ways to individuals including taking into account cultural sensitivities.
- If not provided in person, prompts and feedback mechanisms must be included to deliver support when it is needed or signpost people to where support can be easily located.

Everyone is at risk of digital exclusion in their life time