



**Academic Health
Science Network**
North East and North Cumbria

No One Left Behind

Improving Digital Health and Care Inclusion

2:30-4:30pm, 20th October 2021

#NooneleftbehindNENC



**HEALTH
NETWORK
NORTH**



European Union
European Regional
Development Fund



www.ahsn-nenc.org.uk

[@AHSN_NENC](https://twitter.com/AHSN_NENC)

House Keeping

- Please ensure your microphone and video are turned off during the session unless asked otherwise.
- If you need to take a break, please feel free to drop off the call at any time and re-join
- This event will be recorded and photographs may be taken.
- Please ask any questions you have through the chat facility. We will try to address questions during the event, but if we don't manage to do this we will follow up after the event.
- If you cannot see the chat please email your question/s to sarah.black@ahsn-nenc.org.uk
- Join the conversation on Twitter #NooneleftbehindNENC
- Speaker presentations and recording will be circulated following the event.



Welcome and Introductions

Dave Belshaw
Digital Transformation Director
AHSN NENC

#NooneleftbehindNENC

House Keeping

- Please ensure your microphone and video are turned off during the session unless asked otherwise. Please turn them on while in the breakout sessions so that you can participate.
- If you need to take a break, please feel free to drop off the call at any time and re-join.
- This event will be recorded and photographs may be taken.
- Please ask any questions you have through the chat facility. We will try to address questions during the event, but if we don't manage to do this we will follow up after the event.
- If you cannot see the chat please email your question/s to sarah.black@ahsn-nenc.org.uk
- Join the conversation on Twitter #NooneleftbehindNENC
- Speaker presentations and recording will be circulated following the event.

Who we are



Dave Belshaw
Digital Transformation Director



Charlotte Fox
Innovation Manager/Digital Transformation



Christine Jordan
Health Network North Manager

Background and Scene Setting

- Digital technology is changing the way health and care services are delivered
- COVID-19 pandemic radically accelerated the spread of digital solutions
- A significant proportion of people are currently digitally excluded and are more likely to be socially disadvantaged and experience health inequality
- Today is about sharing good practise from across the region, thinking about what we might do next and how we influence the agenda, oh and a personal pledge for action

Network Aim:

- Stimulate innovation and increase economic growth – the uptake of more products within the NHS which are co-created.

The Network will provide:

- Access to bespoke support services available across the AHSN Innovation Pathway.
- Networking opportunities with key organisations and access to frontline health care professionals, **and Unmet Need Calls.**
- Support Industry to showcase latest immersive technology to frontline clinical staff through **Arts of the Possible events.**
- Access to a range of **workshops and networking events** for Industry and Partners:
 - <https://www.ahsn-nenc.org.uk/event/> or <https://supernetwork.org.uk/webinars/>
- If you would like to hear more sign up here: <http://eepurl.com/ggdmdn>

Section 1: How do we identify who is left behind?

Key Findings from Darlington Healthwatch Digital Exclusion Report

Michelle Thompson BEM
Chief Executive
Healthwatch Darlington

#NooneleftbehindNENC




Healthwatch Darlington

Digital Exclusion - Understanding the impact on Primary Care services and patients in Darlington during the Covid-19 pandemic.



Background

- Healthwatch Darlington (HWD) were commissioned by Healthwatch England (HWE) to explore the potential inequalities surrounding the shift to remote GP appointments during the COVID-19 pandemic.
 - Darlington's Primary Care Network (PCN) were keen to understand the challenges faced by our population and to make care as accessible as possible. They gave their full support to this project and match funded HWE's funding.
 - HWD targeted specific people, groups and communities with the help of the PCN including:
 - Older people - 65+
 - People with disabilities - especially people with sensory impairments, learning disabilities or dexterity/mobility issues
 - People with language barriers - whose first language isn't English
 - HWD held a focus group with professionals to gather feedback on their perspective of the project including GP's, Nurse Practitioners and receptionists
- 




Context

- The Borough of Darlington is a vibrant and large market town with an approximate population of 108,600 people.
 - <http://darlingtonpcn.co.uk/>
 - <https://www.darlington.gov.uk/your-council/communities/equality-information/>
 - Darlington is based within the North East and by comparison the region is considered to have higher levels of deprivation compared to the average in England.
 - During the pandemic Universal Credit claims have increased by a third in Darlington which is worse than the England average.
 - Further to this Darlington's current suicide rate is 13.5 which is 3.5 higher than the England average of 10.5.
 - Darlington residents identify with over 64 different main languages with the largest non-white ethnic group being Asian followed by people of mixed or multiple ethnicity.
- 




People find it more difficult to use remote methods for a variety of reasons

- Limited interest in technology
 - Lack of digital skills
 - Age and disability
 - Lack of trust
 - Language barriers
 - Affordability
-
- If people fall into several vulnerable categories, the likelihood that they are digitally excluded increases.
 - Participants often mentioned that they weren't interested in accessing healthcare remotely, even if they could. However, our experience at Healthwatch has taught us not to take such statements at face value, and the system needs to continue exploring why people feel reluctant to take up remote offers.
- 



Summary of local findings


Older Patients

- Generally older patients have been able to receive the care and service they usually do from their GP practice.
 - Phone call waiting times have increased
 - Problems for those who use mobile phone devices - issues with batteries running out during the wait and worries about the cost of phone calls.
 - Older patients who were able to use the internet, said that it works really well for them.
 - However, most patients had no interest in using online services or learning how to in the future. They felt they had no need for the added cost within their home.
 - They prefer to see a doctor face to face because they could explain things in more detail and show the problem if needed.
- 



Summary of local findings


Disabled Patients

- Hearing impairment patient enjoyed taking part in video calls - only works well if the correct interpreter with the right skill level is present, and if the third party (professional) is also visible.
 - Wheelchair user found experience really good - was able to book appointment online as normal and able to take photo's using phone and email them over to the doctor which was easy and could do it in the comfort and privacy of own home.
 - Patients with learning disabilities prefer real face to face as they can see facial expressions and gauge moods which would otherwise be a barrier when using a telephone. However, patients with anxiety felt it was easier using a phone as they become nervous in social situations.
- 



Summary of local findings


Black, Asian and Minority Ethnic Patients (BAME)

- Speaking to patients from this group was difficult due to complexities and barriers that practices and patients are currently facing because of the pandemic.
 - A lead GP practice in Darlington for BAME patients noticed patients from the Asian community disengaging with their practice due to the myths surrounding Covid-19.
 - Children often try to help with online calls and connections but this creates frustration and problems within families.
 - Extra pressures on mental health and physical wellbeing were cited by several patients, as many are incredibly vulnerable, and they felt that they were being isolated due to their language and cultural barriers.
 - When ordering a repeat prescription over the phone they could not explain all the medication details due to the length of some of the spellings of medication and not being bilingual.
- 




Summary of local findings

Professionals

- Most health professionals welcome the changes within their practice indicating they wish to see new processes and appointment methods to continue in the future.
 - They recognise offering remote consultations might not be suitable for older patients, disabled patients and those with language or social deprivation barriers who may be less likely to use digital technology.
 - The added demand on telephone appointments, means some patients may not be seen as quickly due to less urgent patients taking appointments first.
 - They fear that some patient groups may go for long periods of time without medical care as they may not continue to telephone GP surgeries to try and book an appointment.
- 




Local Recommendations

1. Health and care services should continue working together especially tackling digital inclusion for those vulnerable or experiencing disadvantage.
 2. Support more joined-up approaches and sharing of resources and community assets to find solutions for those most socially deprived.
 3. The provision of digital access through community organisations such as libraries, community centres and health and care services.
 4. Commissioners to explore ways to reduce the cost of digital access including working with local businesses to provide free public Wi-Fi.
 5. GP services must ensure they have the necessary communication methods for all their patients.
 6. GP's should review their accessible information policy and/or interpreting and translation policy ensuring that there a clear focus on the support available for non-speaking English patients.
- 



5 principles for post-Covid digital healthcare

1. Ensure remote methods are maintained alongside traditional models of care and support patients to choose the most appropriate method of care to meet their needs.
 2. Invest in support programmes to give as many people as possible the skills to access remote care
 3. Clarify patients' rights regarding remote care, ensuring people with support or access needs are not disadvantaged when accessing care remotely
 4. Enable practices to be pro-active about inclusion by recording people's support needs.
 5. Commit to digital inclusion by treating internet as a universal right
- 

Reports

Digital Exclusion Report 2021 - Understanding patient experiences when using primary care services

<https://www.healthwatchdarlington.co.uk/report/2021-06-16/digital-exclusion-report-2021-understanding-patient-experiences-when-using-primary>

Locked out: Digitally excluded people's experiences of remote GP appointments

<https://www.healthwatch.co.uk/report/2021-06-16/locked-out-digitally-excluded-peoples-experiences-remote-gp-appointments>





External data of relevance

In addition to the intelligence gathered during this project we have included further data below captured via similar projects or in other surveys, telephone calls and meetings.


The Doctor Will Zoom You Now: getting the most out of the virtual health and care experience. August 2020
<https://www.healthwatch.co.uk/report/2020-08-18/doctor-will-zoom-you-now-getting-most-out-virtual-health-and-care-experience>

Darlington Primary Care Report 2019
<https://www.healthwatchdarlington.co.uk/report/2020-11-09/darlington-primary-care-report-2019>

The Great North Care Record Report 2018
<https://www.healthwatchdarlington.co.uk/report/2018-03-27/great-north-care-record-report-2018>

Black, Asian and Minority Ethnic (BAME) Communities - GP Accessibility & Registration Report 2018
<https://www.healthwatchdarlington.co.uk/report/2018-07-28/black-minority-and-ethnic-bme-communities-gp-accessibility-registration-report>

Opportunity for Change - Black Minority Ethnic (BME) Report 2015
<https://www.healthwatchdarlington.co.uk/report/2015-04-26/opportunity-change-black-minority-ethnic-bme-report>



Key Findings from Tackling Digital Poverty in the North East of England: Lessons learned from the region's VCSE sector

Adam Parnaby
Researcher
Vonne & Open Lab

#NooneleftbehindNENC

Tackling Digital Poverty in the North-East

Lessons From the Local VCSE Community

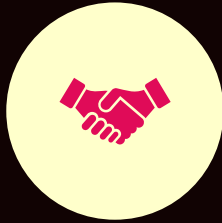
Adam Parnaby

Email: a.w.parnaby2@newcastle.ac.uk Twitter: @ParnabyAdam



NOT-EQUAL

About the Report



WORKED WITH
VCSE
PRACTITIONERS
SUPPORTING
DIGITAL
INCLUSION
ACROSS THE
NORTH-EAST



MAPPED THE
CURRENT STATE OF
DIGITAL INCLUSION
PRACTICE IN THE
REGION



DEVELOPED A SET OF
RECOMMENDATIONS
FOR POLICYMAKERS,
FUNDERS, AND
TECHNOLOGISTS

Full report at: <https://www.vonne.org.uk/tackling-digital-poverty-north-east-lessons-learned-regions-vcse-community>

The Context

- This research took place during **Autumn 2020**.
- By necessity this research took place **online**.
- Most of these findings **were applicable before the pandemic**, and would be applicable if the virus were eradicated tomorrow.

Values in Digital Inclusion Work

- **Consult** with the beneficiaries of our work
- **Inform** beneficiaries so that they can make decisions
- **Follow** the interests and needs of beneficiaries
- **Be patient** and keep beneficiaries' comfort in mind
- **Make** things inclusive and accessible
- **Consider** the whole process of digital inclusion
- **Work** to address underlying social and economic inequalities

Key Point 1: Complexity

To be included, we need:

- Sufficient **connectivity**
- The right **device** for the job
- Appropriate **skills**
- Accessible **content**
- Adequate **support**
- A sense of **confidence** in our abilities and safety

...and all of these things are **context-dependant**

“We did find some [tablet] devices with free data which, again, we [were] able to share with some people. But that is problematic in itself, because some of these people, you know, can use a computer but they can’t use a tablet.”

– **Workshop Participant**

Key Point 2: Collaboration

- Practitioners want to collaborate, but **don't always have the tools**, the environment, or the knowhow
- The scale of the challenge is often **underestimated** by policymakers and service providers
- Developers have a key role to play in making their services more **accessible**

“One of the answers that we got back [...] was that digital inclusion isn't high on their priorities, because you can get cheap broadband deals. And you know that sort of singular mindset that they have is driving the exclusion wide scale”

-Workshop Participant

Key Point 3: Current Challenges

- Coordinating the **sharing** of knowhow, data, and tools
- Safeguarding and security in **complex** contexts
- The **pace** of innovation in digital services
- Interventions that are overly **siload** and **short-term**

“I mean if you look at what’s happened really, everyone’s done something in their silos. Really we haven’t joined up.”

-Workshop Participant

Recommendations



RECOGNISE THE
COMPLEXITY OF
DIGITAL INCLUSION



SUPPORT AN
ECOSYSTEM
APPROACH



WORK **WITH**
TECHNOLOGISTS



PROVIDE **TRAINING**
FOR
PRACTITIONERS

Section 2: Access to Digital Services

The Role of Self-advocacy Groups and Your Voice Counts

Lindsay Henderson
Head of Communities
Your Voice Counts

#NooneleftbehindNENC



Digital inclusion

20 October 2021

Lindsay Henderson
Head of Communities



About Your Voice Counts

- Charity based in the north-east of England, established in 1991.
- Statutory provider of advocacy services.
- We support:
 - people with learning disabilities and autistic people
 - people experiencing mental health challenges
 - people who are vulnerable due to disability, illness or old age
 - families and carers.
- Our services are designed to help people be **better connected**, have **choice and control** in their lives, and **speak up** for what they want and need.

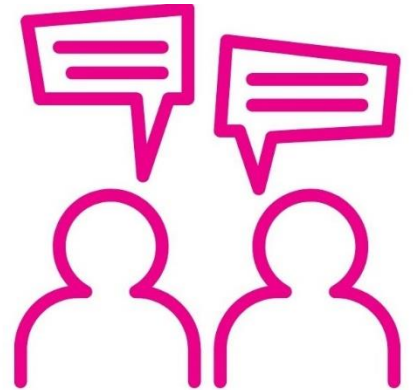
Experts by Experience are at the heart of everything we do.

Communities Team

We offer services for people with learning disabilities and/or autistic people in Gateshead and South Tyneside:

- 121 support (crisis and community connection)
- Drop-ins and group activities (online and in person)
- Employability support
- Involvement work (focus groups, peer-led training and quality checks)
- Support self-advocacy and user-led groups to run their own groups tailored to their own priorities.

We are proud to employ many colleagues with lived experience of the services both we and other organisations provide.



Getting Online – The Barriers

Lockdown = limited face to face work

Not having the means:

- No devices
- No Wi-Fi

Providers, Carers and families as gate keeping

Fear of the risks of being online

Actual risks of being online

People not having the understanding or skills to support online access



The Solutions

Funding

Accessible information / Easy Read guides

A designated techs-pert within services/area

Using Team viewer for tutorials

Problem solving with gatekeepers

Workforce development

Measuring risk with the person we support



Managing the risks

- Risk Assessment
- Detailed conversations regarding each risk
- Training/workshops for people
- Peer Support group
- Weekly check ins
- Easy read safety information
- Continuous risk/ongoing review



Your Voice Counts Digital Toolkit



- [Margaret's Story](#)



- [Peter's Story](#)



Shall we have a practice while I'm here?



Peter's Story

A man with glasses and a green scarf is standing outdoors, holding a smartphone in his left hand and a pen in his right hand. He is looking at the phone. The background shows a brick building with windows and a tree. A grey bar with white text is overlaid at the bottom of the image.

And you press it

Support us

We are a small independent charity, separate from funders, public bodies and other service providers.

Support us by:

- **Following** and sharing our social media accounts.
- **Subscribing** to our mailing list for our latest news.
- **Donating** by cheque, over the phone or online.
- **Working with us** – we are always open to new partnerships and ideas. Get in touch if you think we can support each other.

Twitter: @YVC_Advocacy Facebook: @YourVoiceCountsCommunity

www.yvc.org.uk 0191 478 6472

Get in touch

- Visit: www.yvc.org.uk
- Call: 0191 478 6472
- Email: mail@yvc.org.uk
- Facebook: @YourVoiceCountsCommunity
- Twitter: YVC_Advocacy
- LinkedIn: Your Voice Counts



Better ConNEcted Campaign

Anya Bonner
Associate
Collective Impact Agency CIC

Richard Boggie
Development Manager
Difference North East

#NooneleftbehindNENC

Web Content Accessibility

Perceivable



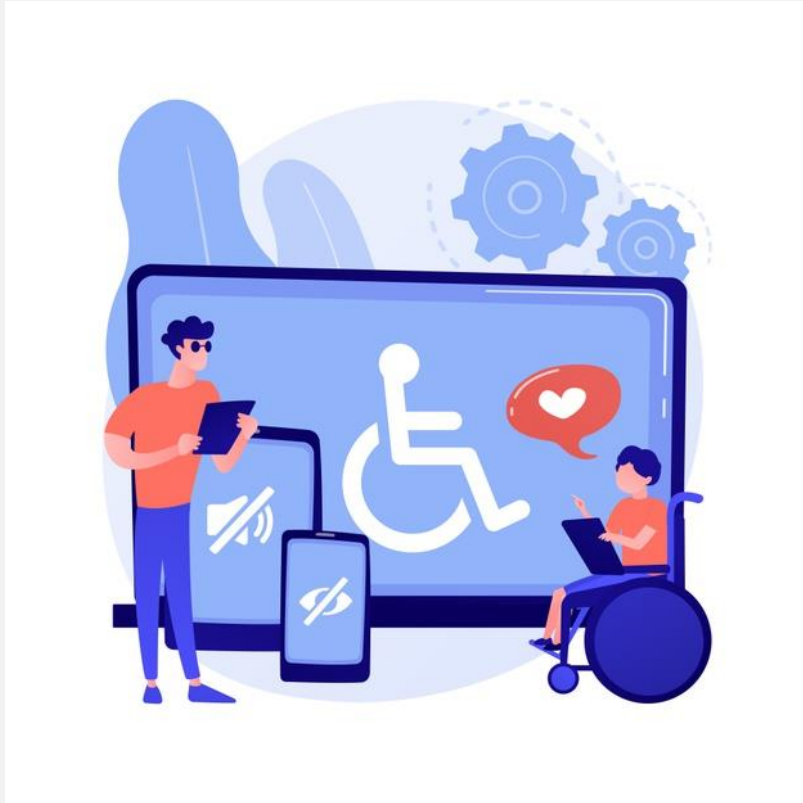
Operable



Understandable



Robust



- **Digital Accessibility Training**
- **Disability Awareness Training**
- **Consultancy**

differencenortheast.org.uk



Other neglected groups

- Asylum seekers
 - [Doctors of the World](#) translate health guidance into different languages
- Low literacy levels or English as a second language
 - Try the [Hemingway App](#) for help with lowering the reading age of your writing!

Section 3: How do we build cross sector partnerships building on good practice?

Better ConNEcted Partnership

Anya Bonner
Associate
Collective Impact Agency CIC

#NooneleftbehindNENC

Better ConNEcted

The importance of cross-
sector solutions to digital
inclusion



Why this is necessary

Digital inclusion is a complex landscape of interplaying factors. All these factors need to work together and communicate.

It is not a binary concept where a person was excluded and then becomes included.

Digital access needs to be seen as:

- A social determinant of health
- A gateway to our human rights



Our team

We are a collective of organisations and individuals who want to experience a more digitally inclusive region.

We share our skills, expertise and time to collectively act on this.

There is no hierarchy.

We acknowledge that we are not experts.



Connected Voice



Collective Impact Agency



Difference North East



VONNE



Inclusion North



Hartlepower



Digital Voice



Not Equal



Sunderland Software City



Newcastle Vision Support



Traiders



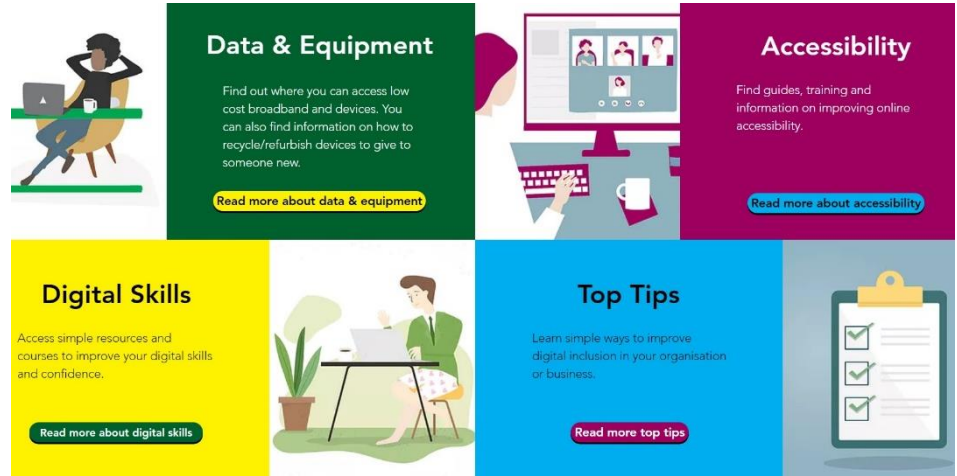
City Fibre

Our approach

Digital inclusion will only be realized when a community can:

- Easily access up-to-date devices
- Perform digital tasks required with confidence
- Access the internet without barriers to disability
- Afford and access internet connectivity or data

To achieve this, we cannot work alone.



Get in touch

To get involved, find out more or join our mailing list visit:

www.betterconnected.org.uk

Or email

betterconnectedne@gmail.com



Group Discussion

What other activities do we need to engage in across the region to get Digital Inclusion right?

slido



What other activities do we need to engage in across the region to get Digital Inclusion right?

① Start presenting to display the poll results on this slide.

slido



**What did you enjoy most
about the session?**

① Start presenting to display the poll results on this slide.

slido



What other topics would you like to see covered in the future digital inclusion sessions?

① Start presenting to display the poll results on this slide.



Personal Pledge

Creating a Community Partnership

Summary and Next Steps

Dave Belshaw
Digital Transformation Director
AHSN NENC

#NooneleftbehindNENC



#NooneleftbehindNENC