Widening Digital Participation

A case study for improving digital inclusion in health for excluded communities

@ngill10   **#nhswdp**

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About WDP

Set up to ensure everyone has the confidence, skills and means to access and use digital health services and tools – particularly the most excluded

Benefits of health technologies

- Provides access to information and tools to help people stay well
- Convenience
- Choice
- Better experience – if done right!
- Reduces the burden on frontline services

The challenge

- 11m lack the confidence, skills and means to get online
- Complex health & care needs
- Other health inequalities
- Difficult to engage with
- Multiple barriers – no one solution

What we're doing

- Design for inclusion first
- Learn more about needs & barriers and try new things (pathfinders)
- Develop toolkits and guides
- Build capability locally & nationally
- Share everything

Digital Inclusion pathfinders

- Cross sector local partnerships
- Learning more about needs & barriers
- Creating solutions that fit in peoples' day to day lives - 'go where they go'
- Use local infrastructure where possible
- Try new things – fail – iterate
- Develop 'How to' guides
- Share & scale what works

Social Prescribing — Sheffield
Can social prescribing of digital skills support physical and mental health?

Young people and mental health — Islington
Can digital help young people in the void between Universal Care contact?

Digital health on the high street — Nailsea
Can a community space help people use digital to improve their health?

Homeless and insecurely housed — Hastings
Can digital help rough sleepers get the health support they need?

Young carers — Bradford
Can digital improve the wellbeing of young carers and their dependants?

Long term conditions — Stoke-on-Trent
Can social networking improve access to health information for people with long term conditions?

Sensory impairments — West Yorkshire
Can digital tools improve the experience of people accessing health information and support?

Isolated older people — Sunderland
Can digital help to support older people with their move from health to social care?

People in social housing — Thanet
Can digital help people in social housing gain better access to health services?

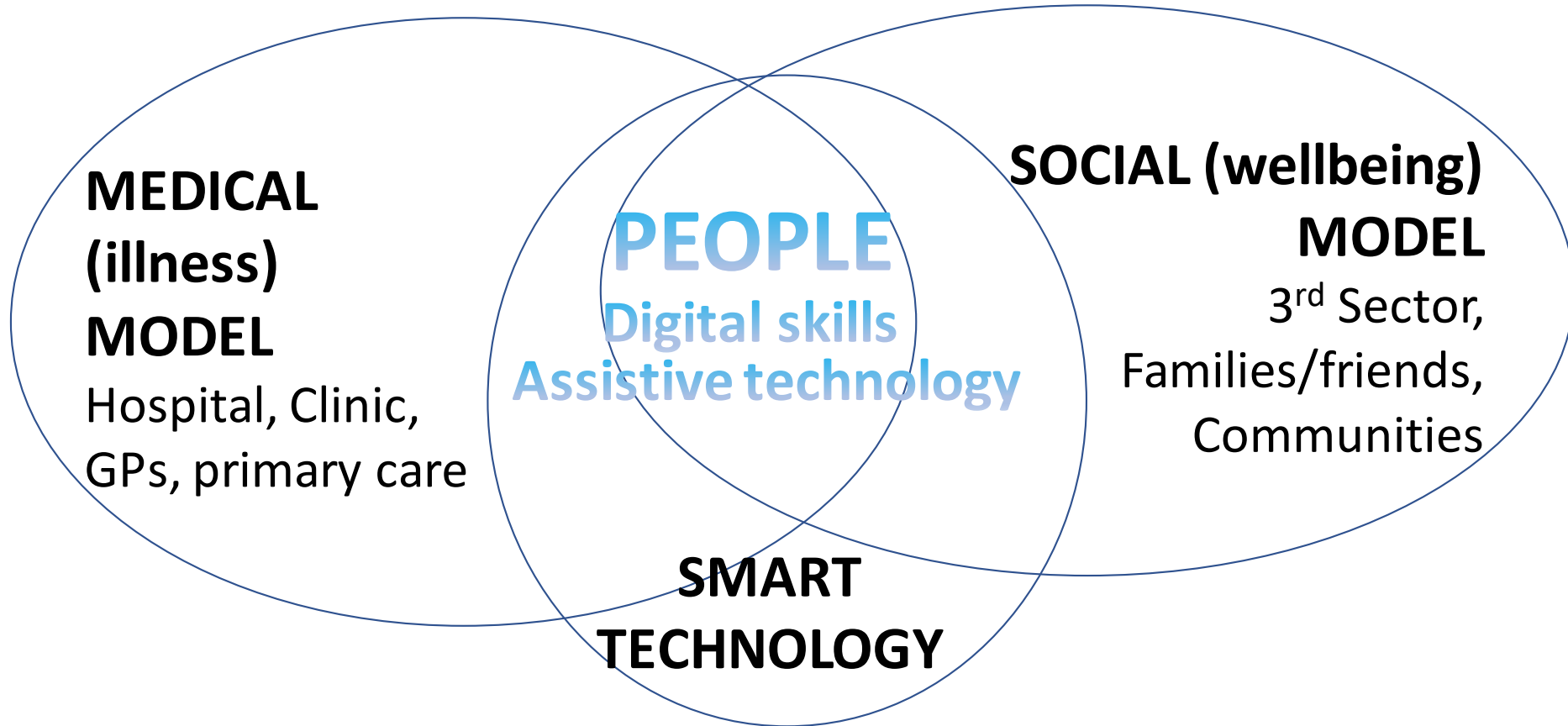# www.digital-health-lab.org

NAILSEA

Can a physical space in the centre of a community improve access and use of digital health tools and services?

Ian Morrell

Development Manager @65 High Street

Nailsea (North Somerset)

People-Centred Health and Wellbeing

MEDICAL (illness) MODEL
Hospital, Clinic, GPs, primary care

PEOPLE
Digital skills
Assistive technology

SOCIAL (wellbeing) MODEL
3rd Sector, Families/friends, Communities

SMART TECHNOLOGY

Treat the Person not the Condition
'no decision about me without me'

- Wellbeing is made at homes and in communities, not in hospitals and clinics

- Community organisations are resourceful, adaptable and cost effective

- 'Community' is not an homogenous entity

- Community groups need <u>places</u> (not one-stop shops) to meet, share, support

- Develop knowledge, confidence, coping skills and resilience

Linking the Medical and Social Models

65 High Street

SCALE ↑
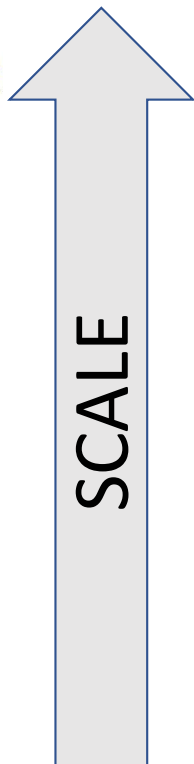
Statutory Bodies e.g NHS, District/County Councils, large charities

BARRIERS TO COLLABORATION
not done/invented here, silos, budgets, policies, professional boundaries, reorganisations, trust, power

3rd Sector e.g. volunteers, local charities, Community Interest Companies (CICs), housing associations

Challenges
(It's amazing what gets done
when no-one wants to take the credit)

- **Money is not the biggest challenge**
- **Abundance of:** silos, short-term funding/commissioning, paralysis by analysis and pilotitis
- **Lack of:** imagination, joined-up thinking and will (political, organisational and personal)

Serendipity Project Plan
(It's better to apologise than ask permission)

- Rule 1: have a clear ethos (there are no more rules)

- Labels = silos

- Get less organised/do less project planning
  (inhibits creativity, reinforces silos, misses opportunities, creates opportunities to excuse inaction)

- Trust people: listen and learn

- Synergy happens one conversation at a time

JUST DO IT.

Places Connect People

- **Universal Personalised Care**

    we are part of an essential multi-channel approach

- **Social prescribing**

    medical or social model of care?

- **'Supporting people to make good decisions':**

    'places' connect people with lived experience

- **King's Fund: A Vision for Population Health**

Your Cancer Café Nailsea

Why?

- Diagnosed with Stage 3 breast cancer February '18

- Breast Care nurse on diagnosis

- Nothing through chemotherapy or radiotherapy

- Lack of emotional support, yet research suggests that physical recovery is better if mental health is good

- People refusing to have treatment because their experience was so poor

- A need for mutual support – not talked to

How?

- Approached No 65
- Ensured no restrictions
- Found volunteers through social media
- Advertised event through social media and local press
- Put aside £100 to set it up
- Run tombola to raise funds
- Treatments, cakes etc donated by the local community

How is it going?

- About 70 people came to the first meeting

- Press are interested in promoting it – Radio Bristol

- People are contacting me to find out how to set one up in their area

- Local charities are running events for Your Cancer Café

- Numbers are growing and are from a wider area