

# A digital inclusion framework for health and social care

## Creating a digital inclusion framework to enable everyone, to benefit from digital health and care.

Digital health and care has the potential to not only enable people to manage their health and care better, but also improve clinical outcomes, and effectiveness and efficiency across the health and social care system. A primary objective in the digital transformation of health and care is to empower people to better manage their own health and wellbeing, and to provide improved health and care out-of-hospital including in people's homes when that is appropriate.

Yet, despite its potential benefits, the introduction of digital health and care solutions risks excluding the most vulnerable and highest need population(s) and perpetuating or exacerbating health inequalities. This includes populations that may most benefit from digital health and care and who may ultimately find this a more accessible way to access support, but are currently excluded through challenges presented by service design, technology, and digital first access.

Inclusive digital health and care is essential if health and care is to deliver on its commitment to digital transformation ([NHS Digital](#)); meet the goals of health and social care policy ([NHSE](#)), ([gov.uk](#)); deliver national and local health and care priorities, improve health and care outcomes, enable people to better manage their health and care, and reduce health inequalities ([NHSE](#)); ([gov.uk](#)). Digital inclusion is essential if the health and care system is to deliver exceptional health and care to all the population by facilitating equitable access, excellent experience, and optimal outcomes ([NHSEI](#)).

To ensure its population is enabled to benefit from digital health and care, Kent Surrey Sussex AHSN supported NHS Sussex to work with the University of Sussex to develop a digital inclusion framework for health and care which aims to **enable everyone that can benefit from digital health and care to do so, when they need to, and to ensure that inaccessible pathways and technologies are not creating barriers and causing un-engagement in digital health and care.**



### Evidence

A diverse set of evidence and an integrative review of barriers and enablers to digital inclusion was used to develop the framework and the practical implications and recommendations for health and care settings.

This review captured a variety of sources including academic research, national reports providing an overview of the state of digital exclusion, and local and national evaluations of digital health and care and digital inclusion-related pilots and programs.



### Collaboration

A working version of the framework was then tested, further developed, and validated with NHS Sussex collaborators: clinicians, support workers, digital teams, commissioners, voluntary and community sector organisations, library services, local authority colleagues, and public representatives through digital transformation development and engagement activities, community of practice events, and workshops. Interviews with various health and care, digital inclusion, and accessibility related organisations were also conducted with experts on topics such as cognitive accessibility.

Even though I live with this condition every day, I don't always understand the information the app is telling me

The in-person help was really helpful- I couldn't have done this on my own

All technologies need to interoperate with assistive technology or I can't use them

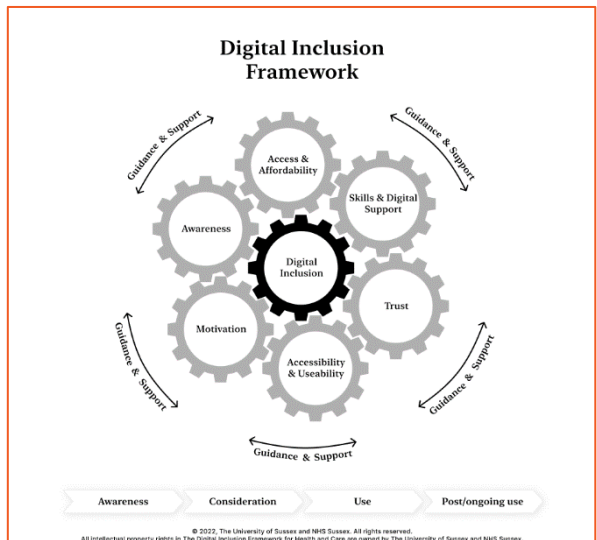
It's already too complicated- I have 4 different apps in place just to access my GP

Touch screens are really tricky, my tremor means I press the wrong button

Can I really trust this- I want feedback that someone has looked at the data?

(Above – example feedback we heard in our interviews)

The **digital inclusion framework for health care** recognises that for individuals to be digitally included they need:



- To be aware of digital services, pathways and technologies that would benefit them
- Have access to, and be able to afford the technology, and any associated requirements for access.
- Have the skills, and/or support needed to access the technology/pathway
- Believe the effort required to engage will be worth it (motivation) recognising some people will have more barriers to overcome than others.
- Trust that the service, pathway and technology is clinically safe, and protects and uses their information appropriately.
- To have access to accessible and useable pathways, services, and technologies- that are easy to understand and interact with, and work alongside other pathways and assistive technologies, are interoperable, and require minimal effort.
- To have confidence that appropriate guidance and support will be available and people know how to access this.

**Application of the framework**

The digital inclusion framework for health and care is unique because it considers digital inclusion **from the perspective of the service user**, revolving around an individual's journey with digital health and care services, pathways, and technologies: including an individual's awareness, consideration, use, and post use experience. It provides an opportunity to tackle a variety of reasons why people are or could be excluded from digital health and care services – recognising the likelihood and the nature of exclusion will differ in accordance with the stage of their journey.

Impact assessments		
Health Equality Impact Assessment	Quality Impact Assessment	Digital Inclusion Assessment

To support implementation of this framework, a practical design tool was developed to support the design of digitally inclusive pathways, services and technologies. In NHS Sussex these have been applied as part of an impact assessment portfolio, to be completed alongside Quality and Health Equality Impact assessments. In Sussex this will be used for all new programmes with widespread interest to also use retrospectively on established pathways.

**Understanding impact**

Key recommendations from the development of this framework include the need to collect data that enables identification of those most at risk of digital exclusion, and those being excluded, as well as the impact of that exclusion. Lack of data is a challenge recognised by other stakeholders working in this space including in the [Access Denied: Assessing the Impact of Digital Health Inequalities Health Innovation Network's report](#) on the impact of digital exclusion on healthcare inequalities. Lack of data is a barrier to both understanding the true impact of digital exclusion, and will be a barrier to understanding the impact of frameworks like this.

For more information find the [news story and framework HERE](#)

For implementation resources please contact: [katherine.sykes@nhs.net](mailto:katherine.sykes@nhs.net)

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