North East and North Cumbria Health & Care Partnership

Digital Inclusion Strategy
2024 - 2026

Foreword

"There is a lot of incredible work going on across the North East and North Cumbria, but what we want to understand as a system are the key issues, insights and to find best practice we can learn from in addressing digital inclusion."

"We want to ensure that we consider and implement digital inclusion in the design of new solutions, otherwise we could make the situation worse. Our population has a greater likelihood of health inequalities so we can make accessing services even harder by introducing digital technology.

This strategy outlines why we can't put ourselves in this position and why it is imperative that we leave no one behind. It will need to be an ongoing effort, which will adapt to the changing needs of our population, emerging technologies, employees and our health and care system."

"I am delighted that across our Integrated Care System, partners are coming together to tackle digital exclusion.

The growth in digital care (especially over recent years) has been excellent, providing some real opportunities to improve the experience of people who use health and care services, and to support our valuable workforce."

"However, we know that a significant number of people aren't digitally connected, and we don't want these developments to create a further barrier/inequality. Working at scale we can learn from each other, identify what works well, what can be adopted and adapted at individual place level, and use our collective resource and influence to improve the digital health and care offer across the North East and North Cumbria."

"This strategy is essential for ensuring that our health and care services are inclusive and accessible to all who choose to interact in their care through using digital technologies."

Professor Graham Evans

Chief Digital and Infrastructure Officer/SIRO, NHS North East and North Cumbria Integrated Care Board

Steph Downey

Strategic Director Integrated Adults and Social Care Services, Gateshead Council.
North East ADASS Digital Policy Lead.

Our Region

North East and North Cumbria Integrated Care System (ICS) is the largest ICS area in England, serving a population of around 3.1 million people and covering a physical geography approximately the same size as Wales.

An ICS includes all of the organisations responsible for health and wellbeing, working together across a region to plan and deliver services for our communities. It is not an organisation but, it works through the NHS North East and North Cumbria Integrated Care Board (ICB) and North East and North Cumbria Health and Care Partnership.

NHS North East and North Cumbria ICB, is a statutory NHS organisation with responsibility for developing a plan for meeting the health needs of the population, managing the NHS budget and arranging for the provision of health services.

ICBs were legally established on 1st July 2022, replacing Clinical Commissioning Groups (CCGs), taking on the NHS planning functions previously held by CCGs and some of the functions held by NHS England.

Our Area

An Integrated Care Partnership (ICP) is a joint committee of the ICB and local authorities in the ICS area, plus other invited partners, responsible for developing an integrated care strategy for the ICS.
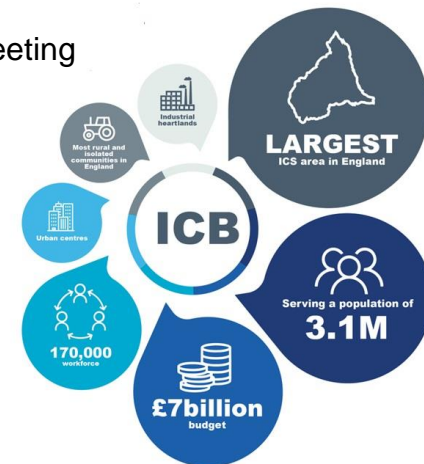
North East and North Cumbria Health and Care Partnership (*our regional ICP*) has a broad focus, covering ICS-wide strategy, public health, social care, and wider issues impacting the health and wellbeing of the local population.

Through sharing resources, developing our workforce and making better use of technology, our ambition is to significantly improve the health and wellbeing of people in all our communities.

Throughout this document, terms like 'we' and 'our' refer to our collective organisations, that make up the ICS and Health and Care Partnership:

Local Context

In December 2022, North East and North Cumbria Health and Care Partnership published our integrated care strategy – Better health & wellbeing for all. The strategy, which is our direction for the region, sets out four key goals, eight supporting goals and five key enablers. One of these enablers is 'Harnessing new technology and making best use of data, however, digital, data and technology essentially underpins all enablers, supporting goals and our four key goals.

North East North Cumbria Health & Care Partnership

Better health & wellbeing for all...

Our integrated care strategy for the North East and North Cumbria

Our four key goals...

Longer & healthier lives — Reducing the gap between how long people live in the North East and North Cumbria compared to the rest of England

Fairer outcomes for all — As not everyone has the same opportunities to be healthy because of where they live, their income, education and employment

Better health & care services — Not just high-quality services but the same quality no matter where you live and who you are

Giving children and young people the best start in life — Enabling them to thrive, have great futures and improve lives for generations to come

Our supporting goals...

- Reduce the gap in life expectancy for people in the most excluded groups
- Halve the difference in the suicide rate in our region compared to England
- Reduce smoking rates from 13% of adults in 2020 to 5% or below by 2030
- Increase the number of children, young people and adults with a healthy weight
- Reduce alcohol related admissions to hospital by 20%
- Reduce drug related deaths by at least 15% by 2030
- Reduce social isolation, especially for older and vulnerable people
- Increase the percentage of cancers diagnosed at the early stages

We will do this by...

- Supporting and growing our workforce
- Harnessing new technology and making best use of data
- Making the best use of our resources
- Being England's greenest region by 2030
- Listening to and involving our communities

In January 2024, the North East and North Cumbria ICB/ICS Digital, Data and Technology Strategy 2023-26 was published.

The Strategy is an enabler to the Better health & wellbeing for all Strategy, which sets out our regional Digital, Data and Technology vision: **To enable the delivery of high quality, easily accessible and efficient health and care services, to people of the North East and North Cumbria through digital solutions.**

Digital, Data and Technology Strategy 2023 – 2026
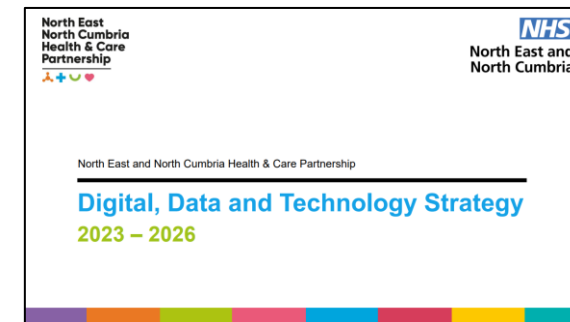
Our key areas of focus are grouped into five 'themes', which interlink to deliver our vision:

- **The essentials -** *Getting the basics right.*
- **Improving** - *Continuing to advance and innovate.*
- **Connecting** - *Linking the region and beyond.*
- **Empowering -** *Bringing personalised care closer to home*
- **Insight -** *Using data in context to deliver action.*

Digital inclusion is woven throughout our Digital, Data and Technology Strategy, our Digital Inclusion Strategy will be key to achieving our regional goals and vision.

National Context

In September 2023, NHS England published the Inclusive digital healthcare: a framework for NHS action on digital inclusion.
The framework builds on previous NHS Digital guidance on digital inclusion for health and social care.

It is to be used to design and implement inclusive digital approaches and technologies, which are complementary to non-digital services and support.

Digital inclusion for health and social care

A guide to help healthcare providers, commissioners, and designers ensure that services delivered digitally are as inclusive as possible, meeting the needs of all sections of the population.

The adoption of digital technologies by both patients and staff has significantly increased over recent years.
Around 10 million more people in the UK used NHS websites or digital applications in 2021 compared with pre-pandemic 2020.
NHS App registrations increased from 2 million people in 2021 to 30 million people in 2023.

The framework highlights that the benefits of digital technologies are not yet accessible for everyone, research has found:
- Around **6% of households** still do not have home internet access.
- Around **one million people** cancelled their broadband package in the last 12 months due to rising costs.
- Around **10 million adults** are estimated to lack foundation-level digital skills.
- Around **30% of people** who are offline feel that the NHS is one of the most difficult organisations to interact with.

The framework for action on digital inclusion, identified five domains where action is needed:

Access to devices and data — Accessibility and ease of using technology — Skills and capability — Beliefs and trust — Leadership and partnerships
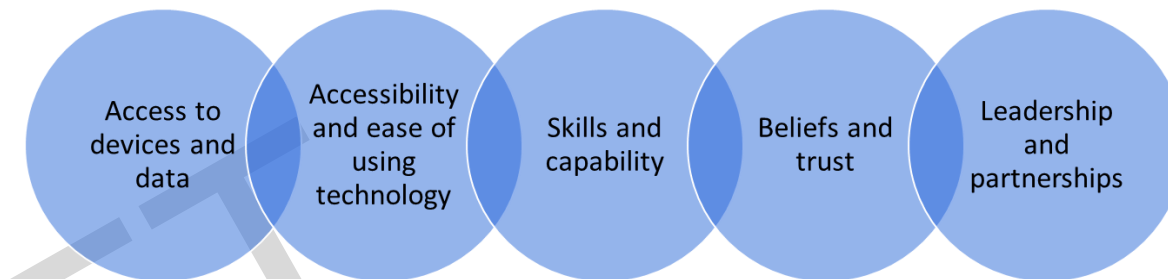
1. **Access to devices and data** so that everyone can access digital healthcare if they choose to and experience the benefits.

2. **Accessibility and ease of using technology,** so that user-centred digital content and products are co-designed and deliver excellent patient outcomes.

3. **Skills and capability** so that everyone has the skills to use digital approaches and health services respond to the capabilities of all

4. **Beliefs and trust** so that people understand and feel confident using digital health approaches.

5. **Leadership and partnerships** so that digital inclusion efforts are coordinated and help to reduce health inequalities.

Application of the framework is reinforced in the NHS England 2025/26 priorities and operational planning guidance: In making the shift from analogue to digital, expecting that 'all systems mitigate against digital exclusion, including by implementing the framework for NHS action on digital inclusion'.

Barriers to Digital Inclusion

Aligned to the five domains, some the of the barriers and challenges our population may face to digital inclusion

Access to devices and data

- **Access**: not everyone has the ability to go online.
- **Social and Economic Exclusion**: People may face barriers to digital inclusion due to a lack of access to resources.
- **Geographic Barriers**: In some parts of the UK, particularly rural areas, access to digital technologies is limited due to a lack of connectivity.
- **Affordability**: Many people in the UK cannot afford to purchase devices, such as computers and smartphones.

Accessibility and ease of using technology

- **Language and Cultural Barriers**: People from non-English-speaking backgrounds or different cultural backgrounds may face barriers to digital inclusion if technologies are not available in their language.
- **Disability**: Disabled people may face barriers to digital inclusion due to a lack of accessibility in digital technologies, such as websites and software.

Skills and capability

- **Skills**: Not everyone has the ability to use the internet and online services.
- **Digital Skills and Literacy**: Digital literacy and skills are essential for people to effectively use digital technologies.
- **Educational Attainment**: People with lower levels of educational attainment may face barriers to digital inclusion due to a lack of digital skills and literacy.

Beliefs and trust

- **Confidence**: Some people fear online crime, lack trust or don't know where to start online.
- **Motivation**: Not everyone sees why using the internet could be relevant and helpful.

Leadership and partnerships

- **Resource Constraints**: Limited financial and technological resources can hinder efforts to promote digital inclusion.
- **Resistance to Change**: Some leaders and employees may resist changes due to comfort with existing processes or fear of the unknown.

Healthcare Inequalities

The North East and North Cumbria region encompasses some of the most deprived areas within England.

The seven main types of deprivation are:

- Income
- Employment
- Education
- Health
- Crime
- Access to housing and services
- Living environment.

On a scale of 1 to 10, (1 being the most and 10 the least deprived), almost 65% of the population across our region is within the most deprived (1-5).

Across our region, health inequalities data shows that there are significant disparities in health outcomes between different population groups:

Mental health: Higher rates of common mental health illnesses and suicide compared to the national average.

Population groups, such as young people, people living in deprived areas, and certain ethnic groups, are more likely to experience poor mental health outcomes.

Disease prevalence: Higher rates of certain diseases, such as cancer, heart disease, and respiratory disease, compared to the national average.

Population groups, such as people living in deprived areas and certain ethnic groups, are more likely to experience poor health outcomes.

Life expectancy: Overall life expectancy in the region is lower than the national average, with significant variations between different areas and population groups.

For example, the gap in life expectancy at birth between the least and most deprived areas is 12.2 years in males and 9.7 years in females.

Poverty: During 2021/22, 35% of children in our region were living in poverty.

Access to health and care: Disparities in access to health and care services in the region, with certain population groups, such as people living in rural areas, facing barriers to accessing services.

We are working to address health inequalities through a range of initiatives, including targeted public health interventions, investment in community-based services and efforts to improve access to health and care services for all population groups.
This strategy will support and focus that ongoing work.

Digital inclusion is vital for ensuring that all members of society have access to the benefits of technology, including improved health and care.

North East North Cumbria Health & Care Partnership

Addressing Healthcare Inequalities

The Core20PLUS5 is a national NHS England approach to inform action to reduce healthcare inequalities at both national and local level.
The approach defines a target population – the 'Core20PLUS' – and identifies '5' clinical priority areas requiring targeted action and improvement: This supports the NHS to ensure that all digital inclusion work and policies focus on ensuring that the work is targeted toward the most in need.

Target population

CORE20 PLUS 5

20%

The most deprived **20%** of the national population (as identified by the Index of Multiple Deprivation)

ICS-identified population groups experiencing poorer-than-average experience and/or outcomes, who may not be captured within CORE20.

Clinical Priorities:

1 MATERNITY – Ensuring continuity of care for women from Black, Asian and minority ethnic communities and from the most deprived groups.

2 SEVERE MENTAL ILLNESS (SMI) – Ensure annual Physical Health Checks for people with SMI to at least, national set targets.

3 CHRONIC RESPIRATORY DISEASE – A clear focus on Chronic Obstructive Pulmonary Disease (COPD), driving up uptake of Covid, Flu and Pneumonia vaccines to reduce infective exacerbations and associated emergency hospital admissions.

4 EARLY CANCER DIAGNOSIS – 75% of cases diagnosed at stage 1 or 2 by 2028.

5 HYPERTENSION CASE FINDING –Optimal management and lipid optimal management.

The North East and North Cumbria Core20PLUS5 for Children and Young People framework has been developed to complement the national framework by applying a regional lens.
Please click here for further information.
We will respond to this framework through digital enablement and in alignment with key principles.

The responsibilities around digital inclusion in health and care are rooted in the legal framework held within the NHS Constitution, the Health Acts, the Equality Act and wider accessibility standards and guidance.

Why Digital Inclusion?

Digital inclusion can help to break down barriers to accessing health and care, through providing options for those who choose to use digital services.

Through addressing barriers such as digital skills gaps, lack of access to technology, or lack of understanding of how to use digital services, we can enhance availability of service offerings to our citizens and workforce.

Access to health and care: Digital inclusion can enable disadvantaged groups, such as people living in poverty, disabled people, and people living in remote or rural areas, to access health and care services that they may not have been able to access otherwise.

This can include remote consultations, online prescription ordering, self-management of chronic conditions, as well as and accessing voluntary care and local authority services.

Improved health and care outcomes: Digital inclusion can lead to improved health outcomes for disadvantaged groups by providing them with the tools and resources they need to manage their health and care more effectively.

For example, by providing people with digital devices and training them on how to use them, they can better manage their conditions; reducing the need for hospital visits as well as accessing services to improve their wellbeing.

Cost-effective: Digital inclusion can be cost-effective for our citizens, NHS, local authorities and the voluntary care services, through more efficient use of resources and reducing the need for face-to-face consultations and hospital visits when necessary for those people.

Data-driven approach: Digital inclusion can also help to address health inequalities by providing data and digital technologies to identify and target specific groups that are at a higher risk of health disparities and develop targeted interventions for them.

Digital inclusion is important for addressing health inequalities in the NHS, local authorities and voluntary, social care enterprise organisations.

It can enable disadvantaged groups to access health and care services and improve their health and care outcomes.

It also provides an effective and cost-efficient way of delivering health and care services whilst enabling for data-driven approaches to target health disparities.

10 million
people in the UK are lacking basis digital skills

6%
of people in our region have no home internet connection, equating to around **30,000** households

9%
of adults in our region have never used the internet, compared to **6%** nationally

Our Vision

Our strategy and vision aims to provide everyone who is able and interested, with the choice to access and interact with digital technologies and services.

In partnership across our region, we have set our vision for digital inclusion and are developing our approaches to continuously measure, learn and adapt to the changing and complex needs of the people we serve.

Our digital inclusion strategic vision for the North East and North Cumbria is:

To ensure that all people and employees have equitable access and understanding of digital technologies, allowing for a more accessible, efficient, and effective health and care system.

The goal is to provide the best possible care for all people, regardless of their background or circumstances.

We acknowledge that for this strategy to be successful:

- It cannot be delivered in isolation of other health and wider inclusion work.
- We need to focus on designing and delivering accessible services enabled by digital options, as well as supporting people to use digital technologies to access them, if they choose to.
- We need to recognise that digital is not a choice for some people and ensure our services are delivered equitably for those who need to access them.
- It needs to continuously evolve.
- It always needs to be informed by people with lived experience and those who support and care for them.

A Policy Context Review on Digital Inclusion states that if we are to tackle some of the systemic issues contributing to people being digitally excluded from health and care, this strategy needs to:

- Ensure legal duties are being met.
- Prioritise digital inclusion in health and care services by focusing on improving groups most digitally excluded.
- Align with broader social well-being and health outcomes.

North East North Cumbria Health & Care Partnership

Engagement

Some of our ICS organisations, partners and engagement activities to date

In 2023, we distributed questionnaires to all digital inclusion partners, to gather insights into regional need.

In 2023, we held a workshop with partners from across the ICS with the aim to help shape the strategic plan for digital inclusion across the North East and North Cumbria.

An NENC ICS Digital Inclusion Steering Group was established in 2022, with more than 30 representatives from across health and care, providing a community of practice and support.

In 2024, we held a workshop for the NENC ICS Digital Inclusion Steering group, to contribute to this strategy and develop the roadmap and aims for digital inclusion across the region.
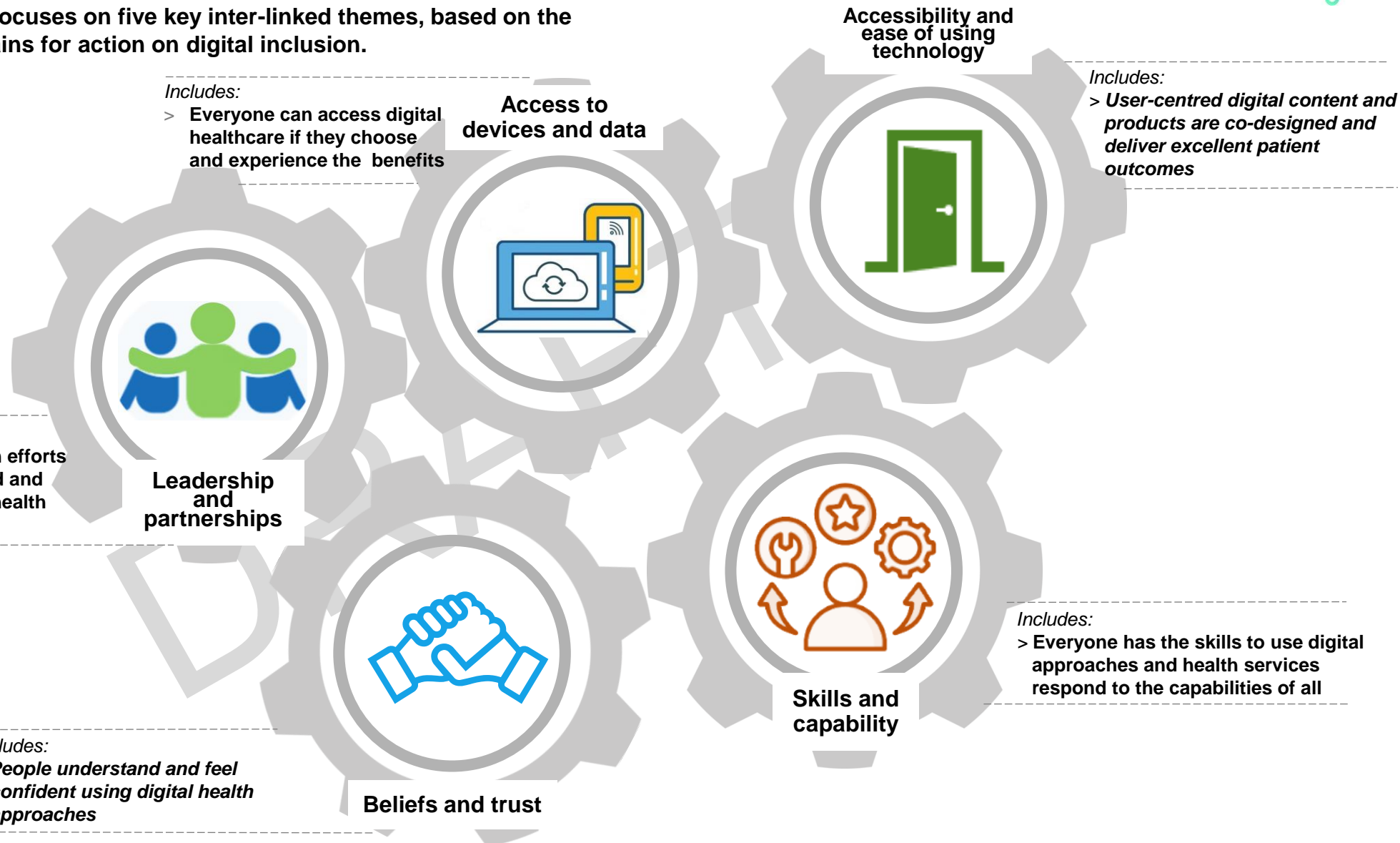
Themes

Our Strategy focuses on five key inter-linked themes, based on the national domains for action on digital inclusion.

Includes:

> **Everyone can access digital healthcare if they choose and experience the benefits**

Access to devices and data

Accessibility and ease of using technology

Includes:

> *User-centred digital content and products are co-designed and deliver excellent patient outcomes*

Includes:

> **Digital Inclusion efforts are co-ordinated and help to reduce health inequalities**

Leadership and partnerships

Skills and capability

Includes:

> **Everyone has the skills to use digital approaches and health services respond to the capabilities of all**

Includes:

> *People understand and feel confident using digital health approaches*

Beliefs and trust

Access to devices and data

Aiming to ensure that everyone who chooses to, can access a suitable device with sufficient connectivity to the internet so that they can use digital healthcare.

We will….

Work with partners, to understand the impact of energy costs and poverty proofing

Planned activities should not identify, exclude, treat differently or make assumptions about people whose household income or resources are lower than others.

We will pay particular focus to support for increasing energy costs and the impact of the cost-of-living Crisis, working with industry partners including the energy sector, in aiming to ensure our residents have access to all available additional financial support and affordable tariffs.

Identify and target local device and data needs

Working with our partners within the Voluntary, Community and Social Enterprise Sector, we will aim to identify local need for devices and data. We will develop a process to signpost, to support residents to access devices and data quickly and of the required quality.

Provide accessible digital services, designed for inclusivity

We aim to developing and implementing digital health and care services that are accessible to all, including those with disabilities, older people and those where English is not their first language.

This will involve designing services with accessibility in mind, including multilingual platforms and tools as well as providing support and assistance for those who need it.

Continue to develop our North East and North Cumbria device repurposing programme

Being designed, delivered and developed in regional partnership. The programme aims to create a region-wide ,self-sufficient bank of digital devices and a way to provide those devices to those most in need.

Aim to provide free data and access to high quality, affordable broadband

Working with partners from industry, we will aim to maximise schemes around social tariffs and free data to ensure our residents have access to reliable data and internet access.

We will work with providers to encourage better broadband coverage in rural areas and offer alternatives where possible

Provide free device charging facilities at all healthcare settings

We will encourage and support all healthcare settings across the region to provide cost free charging facilities to patients and service users.

Access to devices and data

Aiming to ensure that everyone who chooses to, can access a suitable device with sufficient connectivity to the internet so that they can use digital healthcare.

We will continue to….

Promote National Opportunities and schemes for access to free and reduced cost digital devices and data such as the Good Things Foundation. ✓

Learn from the opportunities and challenges presented to date accessing health and care digitally, listening to our patient's and staff's experience and feedback. ✓

Provide our residents and patients with clear, easily understood information on data security and privacy concerns. ✓

Utilise opportunities for collective procurement of devices working with local businesses to build on opportunities for donation of devices, data and support. ✓

Ensure that devices are of the required condition and standard required to access the most up to date health and care apps. ✓

Ensure that all donated and repurposed devices meet stringent, high levels of security and NHS standard. ✓

We will engage patients and users and staff to understand the **benefits** and **impact** of the regional device repurposing scheme.

Think **system** not just organisation
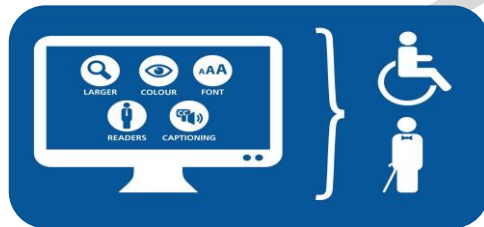
Accessibility and ease of using technology

Promoting accessibility and supporting people who may face physical, communication or cognitive barriers, to use digital solutions and have positive experiences.

We will….

Design for Accessibility

- Start with user needs design health and care services and systems around the needs of people and other users, to ensure that their experiences are positive and that the services provided are effective and efficient.
- Design with, not for, people and carers.
- Design for well-being: the importance of designing health and care services and systems that support the physical, mental, and emotional well-being of people and other users, as well as health and care employees.

Put Innovation at the heart of all we do

Make the most of the latest innovations within health and care, in particular, assistive technology to support accessibility (e.g. screen reader, hearing aids) and support (e.g. advocacy, accessibility support, translation, interpretation) utilise the potential of AI in Health and Care to support accessibility.

Explore current use of video consultations

We will review how this can be improved to enable better outcomes for patients, addressing the demand on both GP practices and hospitals, supporting further uptake where possible.

Consider Digital Inclusion as a Legal Duty

There is a legal framework around equitable access to health and care which underpins digital inclusion policy.

Integrated care systems are legally required to meet the obligations in the NHS Constitution, the Health Acts and the Equality Act in addition to the wider accessibility standards and guidance.

Recognising the importance of the Great North Care Record (GNCR) and the Patient Engagement Platform (PEP).

Understand how we need to work with citizens, primary, acute, and mental health and learning disability providers to improve the access and usage of staff giving more efficient outcomes for patients. Work with partners to establish an improvement plan.

Accessibility and ease of using technology

Promoting accessibility and supporting people who may face physical, communication or cognitive barriers, to use digital solutions and have positive experiences.

We will continue to….

Offer our patients and users a choice in how they access health and care services, including non-digital methods. ✓

Provide a support network for patients and users when new, digital services are offered, including access to training, devices, and support for any additional needs. ✓

Listen to user feedback on digital health and care methods, learning from user experience and changing and adapting services where required. ✓

Support compliance with the Accessible Information Standard and implementation of the reasonable adjustments flag, to ensure that we have accurate information on patients' accessibility requirements. ✓
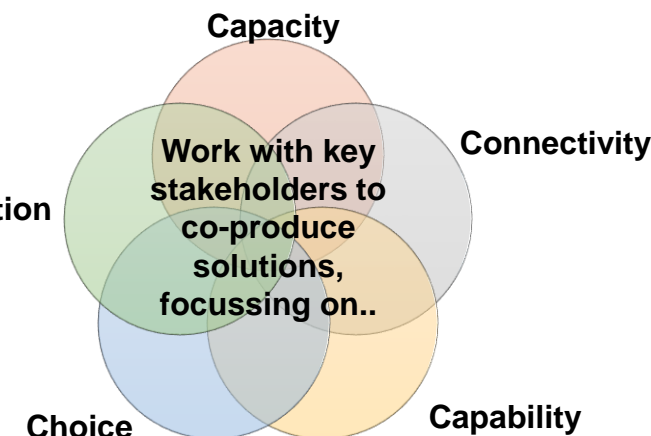
Have digital champions and advocates from across various sectors, leading from the front and breaking down barriers in perceptions around digital health and care. ✓

Support and use inclusive language when implementing digital health and care methods. ✓

Consideration

Capacity

Connectivity

Work with key stakeholders to co-produce solutions, focussing on..

Choice

Capability

"The power of the Web is in its universality. Access by everyone regardless of disability is an essential aspect." – *Tim Berners-Lee*

Skills and capability

Aiming to ensure staff and members of the public can access resources to develop their digital skills, and that health and care services respond to the capabilities of members of the public.

We will….

Provide digital skills training

We will explore how we can provide access to digital skills training to employees and members of the public, to ensure they are able to access and use digital services effectively, should they need to and choose to. This will include training on how to use digital devices, as well as how to access and use digital health and care services.

We will maximise the opportunities to utilise existing, and embrace new technologies, and invest wisely in maintaining and improving contemporary estates, facilities and equipment.

Create digital champions
We will develop digital champions across our system and support them to create a digitally inclusive culture.

Include digital skills support in all new work.
Create and prioritise work streams which enable our residents to gain and grow the skills to be able to use and navigate the digital systems in place

Create a skilled, sufficient, compassionate and empowered workforce
We will improve recruitment and retention and enable people to work in positive cultural environments

Develop a regional programme for digital inclusion studies

This programme will be a module within the emerging Healthier and Fairer Workforce Academy, focused on embedding digital inclusion awareness, knowledge, skills, and leadership across the North East and North Cumbria.

This will provide a collaborative space for all health and care staff to learn about Digital Inclusion and how to implement it within their work.

Develop a Digital Inclusion Community of Practice
We will create a community of practice to learn, share, and create opportunities for digitally inclusive approaches across the North East and North Cumbria.

Skills and capability

Aiming to ensure staff and members of the public can access resources to develop their digital skills, and that health and care services respond to the capabilities of members of the public.

We will continue to….

Develop a digital skills health assessment tool to support users and staff to assess digital literacy and identify levels of support required.

Build on existed and trusted partnerships with VSCE Partners and Local Authority networks to provide training and access to Digital Learning

Grow the Digital Inclusion Online Training & Information Hub on Boost Learning Academy

Support Digital Inclusion Peer Support Programme within health and care settings including supporting the growth of the HINENC Digital Champions Programme

Utilise existing training networks from other industries such as banking and academia

Enhance clinical use of tools and technology.

Key to supporting digital Skills and Capability is that we Start with the patient/service user needs and work back from there

Form strategic partnerships – and work together

Beliefs and trust

Creating positive beliefs about the benefits of digital health and building trust among members the public and NHS staff.

We will….

Promote and foster an environment of trust and accountability in all digital inclusion work Trust, accountability and openness and transparency are key issues around data driven and digitally enabled health and care services.

Develop a communication and engagement strategy for digital inclusion
This will support the promotion of current and future works and support trust and engagement

Inclusion of Health inequalities
We will support reducing health inequalities by using data and digital technologies to identify and target specific groups that are at a higher risk of health disparities.

CORE20 PLUS5

Work together with partners from across the ICS
To strengthen our places and neighbourhoods: we will support social and economic wellbeing and enabling services to work together.

Create an exemplar pathway for digital inclusion
This will demonstrate and promote the benefit and impact of digital inclusion

Engage with people with lived experience
Using the Healthier and Fairer working together framework to gain a full understanding of:
• People's experience of accessing and engaging with health and care services.
• Where digital currently plays a role for them.
• How they find and engage with support to access and use digital to access and engage with health and care services.
• Developing digital inclusion champions in the community.
• Work with the Healthy Communities and Social Prescribing workstream to further develop digital community champion approaches.

Normalise digital health by promoting the use of universal healthcare technology NHS App using trusted community leads, faith leaders and known organisations. Provide information on the tangible benefits of utilising digital in health and care.

NHS App

Beliefs and trust

Creating positive beliefs about the benefits of digital health and building trust among members the public and NHS staff.

We will continue to….

Do no harm: avoiding harm to people and other users, by ensuring that health and care services and systems are safe, reliable, and effective. ✓

Be transparent: the importance of transparency and openness in health and care using inclusive language to build trust, facilitate learning, and ensure accountability. ✓

Listen to user's' needs and continually offer communication routes and translation to support improving and building on skills and capability. Going to where patients are to offer support and information. ✓

Work with other areas of industry to utilise all digital skills and training available and make this an option for our residents and patients. ✓

Build a bank of patient stories detailing how digital has worked and communicate the changes it has made and have these case studies available on the Digital Inclusion Learning Academy on Boost. ✓

Alleviate concerns about patients' private data being lost/stolen or shared. ✓

Think like a patient and act like a taxpayer

Build trust in Digital - and maintain it

Digital inclusion is defined as "equitable, meaningful, and safe access to use, lead, and design of digital technologies, services, and associated opportunities for everyone, everywhere". - *The United Nations*

Leadership and partnerships

Ensuring there is clear leadership in place, with an emphasis on partnership working to progress through using the expertise and assets across our region and communities.

We will….

Understand digital inclusion data
Working with organisations and teams who hold data, to explore how their data can be integrated to build a richer picture of the challenges of digital exclusion and the opportunities for digital inclusion.

Develop a Digital Inclusion Checklist Toolkit
We will develop a version for the ICS and partner organisations across the ICS to benchmark themselves against, gather evidence and develop short- and medium-term objectives to move to improve their digital inclusion maturity.
We will support organisations to embed digital inclusion by design at the inception of all work and throughout its development.

Empower employees
We acknowledge the importance of empowering health and care employees to make decisions, collaborate, and innovate, to improve the quality and effectiveness of health and care services and systems.
Utilising the Digital Inclusion areas of the Boost learning academy, we will develop a glossary of language to improve understanding around digital inclusion

Complete a digital inclusion stocktake
across the five strategy themes, building these into a framework published on the Digital Inclusion area within the Boost Learning Academy

Improve digital inclusion for disadvantaged groups
We will work to improve digital inclusion for disadvantaged groups, such as people living in poverty, disabled people, and people living in remote or rural areas. This will involve providing support and assistance to these groups to help them access digital services.

Work in partnership
We will work with our partners, such as local authorities, Voluntary, Community and Social Enterprises (VCSE) to deliver digital inclusion initiatives.

This will involve sharing resources and knowledge, as well as working together to deliver support and assistance to disadvantaged groups.
We will create a COMPACT? that has shared partnership goals and aims.

DRAFT

North East North Cumbria Health & Care Partnership

Leadership and partnerships

Ensuring there is clear leadership in place, with an emphasis on partnership working to progress through using the expertise and assets across our region and communities.

We will continue to….

Work as a system, designing health and care services and systems that work seamlessly together, to provide a cohesive and integrated health and care experience for people and other users.

Continuously learn and improve: the importance of continuous improvement in health and care services and systems, through ongoing learning, evaluation, and adaptation.

Trusted Touchpoints: Working with people and organisations who already have relationships of trust with people who are digitally excluded is a well-established approach to building digital skills and confidence.

Continue to work with our wider peer support network across North East and North Yorkshire, sharing information, learning and developing shared solutions

Continue to foster cross-sector partnerships in the design and delivery of digital inclusion strategies is a key factor of success. It takes time to build relationships of trust and governance infrastructure. It requires shared understanding, respect, responsibilities, trust and valuing all the different strengths, knowledge, resources and networks partners bring to the table.

Work with key stakeholders to co-produce solutions

Stop reinventing the wheel, share, learn, continually improve (data→insight→action)

Digital Inclusion by Design Principles

North East North Cumbria Health & Care Partnership

NHS England produced a set of design principles, to be used when starting any digital project and to guide decision making along the way:

Put people at the heart of everything you do

- Patients, family, carers, staff. Design things that understand and respect people's needs. Take the time to learn about the whole person – their emotional, physical and technical needs.
- Design with compassion.

Be inclusive

- NHS services are for everyone. Make sure people with different physical, mental health, social, cultural or learning needs can use your design.

Design for the outcome

- What will good look like? What are the health, wellbeing or other measurable outcomes that your work will impact? Your work should improve lives, either directly or indirectly.
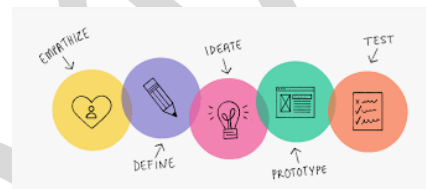
Design for trust

- People trust the NHS. Take care not to jeopardise that.
- Design things that are reliable and secure.

Design for context

- Don't just design your part of a service. Consider people's entire experience, and the infrastructure and processes involved.
- Think about how people begin and end their time with what you are designing.

Make, learn iterate

- Start small. Experiment with different ways of doing things. Make prototypes to improve your understanding. Test and refine.
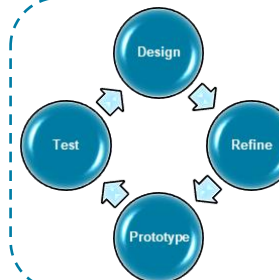
Test your assumptions

- Design and test your work with real people.
- Observe behaviour and gather evidence.
- Work with subject experts and existing research.
- Do not rely on hunches.

Make things open: it makes things better

- Share your learning.
- Share your work.
- Be transparent in your design decisions.
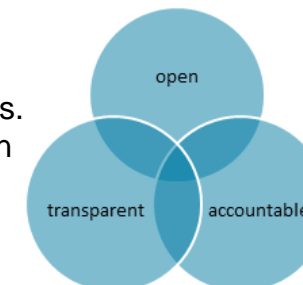- Be accountable and have confidence in your solutions.

Do the hard work to make it simple

- Healthcare journeys can be complex. Take the time to understand what you are trying to solve. Do not push complexity onto the people using what you are designing.

The Digital Inclusion Checklist Tool

We aim to fully embed the digital inclusion by design principles across the North East and North Cumbria.

We are working in partnership to create our Digital Inclusion Checklist tool.

The tool is being designed to assist organisations, by providing an assessment to guide health and care professionals on the impact of digital services, both existing and new, on those who may be digitally excluded.

This assessment will offer a clear, step-by-step approach to identify issues and challenges related to digital inclusion and determine the best course of action to address these issues, whether through support or non-digital alternatives.

Developed in collaboration with health and care colleagues and individuals with lived experience from our region, alongside thorough research from partners, this tool should always be used in conjunction with organisational Equality and Quality Impact Assessments..

Our ICS Digital Inclusion Checklist Tool will ensure the following key factors are always considered:

- **Access to affordable broadband internet and devices**: Essential for enabling everyone to participate in the digital economy.

- **Digital literacy and skills training**: Providing individuals with the necessary training and support to use technology effectively.

- **Inclusive design**: Ensuring digital tools and services are accessible to all, regardless of abilities or disabilities.

- **Content availability**: Making digital content available in multiple languages and formats to ensure accessibility for all.

- **Community engagement**: Encouraging collaboration and engagement to support inclusive digital practices.

- **NHS Design Principles**: Ensuring adherence to these principles.

- **Impact assessment**: Collecting and analysing data to determine improvements in digital inclusion.

North East North Cumbria Health & Care Partnership

Foreword

Our Region / Local Context

National Context

Healthcare Inequalities

Why Digital Inclusion?

Our Vision

Themes

Digital Inclusion by Design Principles

Our Roadmap and the Future

What this means

Governance and Accountability

Policy, Research and Data

Supporting and Related Strategies

Back Start Next

Page 24

The role digital plays in health and care

Digital becomes an environment in which an interaction takes place, a person must feel like they are included in that environment and that they are included by how an interaction takes place in that environment.

These three key areas should be considered to digitally include people:

To understand how being digitally excluded can affect someone's ability to access health and care, we need to look wider than individual digital interactions.

An example is remote consultations where the digital platform being used and a digital device are the only resources considered, however, we need to look more holistically at all the resources needed by someone throughout their journey along a care pathway that gets them to the point of being offered a remote consultation.

1

The accessibility of the digital channel, tool or touchpoint that a person is required to engage with.

The channel used to deliver health or care services and the digital tools that the patient has easy access to enable them to effectively engage with that service

For example: GP practice website – A user would require access a computer or mobile device with Wi-Fi internet access or data and adequate power supply.

2

The impact of using that digital tool for a particular task, activity or interaction.
How much more inclusive and accessible does that task, activity or interaction become, due to the digital channel or digital tool which is being used

3

The resources and preparation that are required to enable someone to engage with digital services.
The digital channel, tool or touchpoints should consider the interaction, task and activity being required to be undertaken. Other important considerations are the support to access, resources and training.

There will be many touchpoints where digital will play a role including but not limited to:

- Telephony and Interactive voice response (IVR) systems
- Online booking systems
- Digital triage and assessment forms
- Text Messaging (SMS) confirmation and notifications
- Email confirmation and notifications

Each of these touchpoints may require different resources to be able to access them including but not limited to:
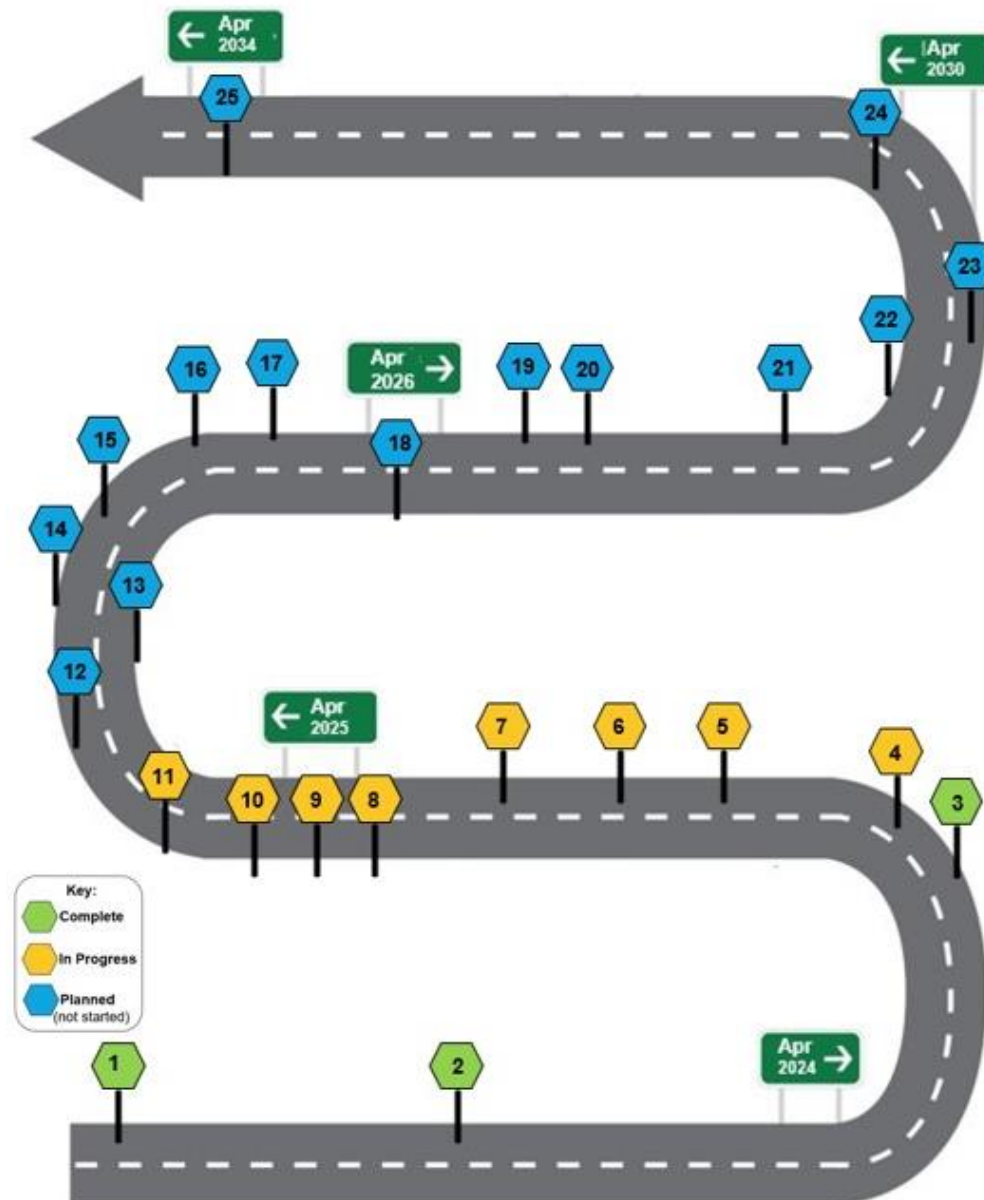
- An internet enabled device
- A reliable internet connection (broadband, Wi-Fi or data)
- Adequate training and knowledge
- The desire to use digital – there should always be alternative options for those unwilling or unable to utilise digital options

Our Roadmap and the Future
Some of our key Milestones & Measurements

Key:
- Complete
- In Progress
- Planned (not started)

No	Date	Deliverable
1	Oct-24	Continue to work with partners to create 'Digital Champions'. We will develop 'Digital Champions' across our system and support them to create a digitally inclusive culture.
2	Oct-24	Continue to develop a Digital Inclusion Community of Practice (via the NENC ICS Digital Inclusion Steering Group) to learn, share, and create opportunities for digitally inclusive approaches across the North East and North Cumbria.
3	Nov-24	Completion of draft NENC Digital Inclusion Strategy, for socialisation, input and approval.
4	Dec-24	Refine the Digital Inclusion Checklist Toolkit, develop a version for the ICS and partner organisations across the ICS to benchmark themselves against, gather evidence and develop short- and medium-term objectives to move to improve their digital inclusion maturity.
5	Jan-25	Complete a Digital inclusion Stocktake across the 5 strategy themes, building these into a framework to be published on Digital Inclusion area within the Boost Learning Academy.
6	Mar-25	Recognising the importance of the Great North Care Record (GNCR) and the Patient Engagement Platform (PEP). Understand how we need to work with citizens, primary, acute, and mental health and learning disability providers to improve the access and usage of staff giving more efficient outcomes for patients.
7	Mar-25	We will review the use of video consultation and how this can be improved to enable better outcomes for patients, addressing the demand on both GP practices and hospitals, supporting further uptake where possible.
8	Apr-25	Continue to implement a North East and North Cumbria regional Device Repurposing Programme.
9	Apr-25	Develop the NENC Programme for Digital Inclusion Studies (via learning academy in Boost).
10	Apr-25	Work with the deaf community to increase access to digtial healthcare.
11	May-25	Engage with people with lived experience. Using the Health and Fairer working together framework gain a full understanding of Digital Inclusion needs and impact.
12	May-25	Via the regional Device Repurposing Programme, work towards providing free data and access to high quality, affordable broadband & Provide free device charging facilities at all healthcare settings.
13	May-25	Link in with Local Authorities to understand how free public digital hotspots can be accessed and share this information.
14	Jul-25	Develop a communication and engagement strategy for Digital Inclusion.
15	Jul-25	We will work with our partners within the Voluntary, Community and Social Enterprise Sector to identify local need for devices and data and provide process to signpost to support residents to access devices and data quickly and of the required quality.
16	Sep-25	Normalise digital health by promoting the use of universal healthcare technology NHS App using trusted community leads, faith leaders and known organisations.
17	Dec-25	Work with industry partners in the energy sector to ensure that our residents have access to all additional financial support and affordable tariffs. Partner with energy companies to improve low cost connectivity
18	Dec-25	Create digital health hubs within gp practices, hospitals, pharmacies shopping centres and other high traffic areas specifically for help and advice with digital health apps. Including Stand up a regional referral programme for staff to refer users for devices and digital support.
19	Mar-26	We will create an exemplar pathway for Digital Inclusion This will demonstrate and promote the benefit and impact of digital inclusion
20	May-26	Adopt a digital inclusion impact assessment
21	Jul-26	System wide mandatory digital inclusion training awareness
22	Oct-26	Digital inclusion standards to be included in all NHS and LA contracting agreements
23	May-27	Personalised digital offer based on user preference
24	Apr-30	Digital Health Switchover - fully captured the opportunities brought from digital switchover
25	Apr-34	10 years of learning and impact of digital inclusion

What this means…

I now have a better understanding of digital inclusion and the terminology that goes with it.

My patients will have more opportunities to interact in their health and care pathways through the use of digital tools.

I have quick and easy access to my health record online via the NHS app.

I will have the choice to use digital solutions.

I will have the confidence that health and care services have been designed with my needs in mind.

I can quickly and easily see the digital inclusion work happening in my area and can make connections with the relevant contacts.

I will have access to an online knowledge base with a wealth of information on digital inclusion.

I know I have access to a device that can run all the apps needed for me to manage my appointments.
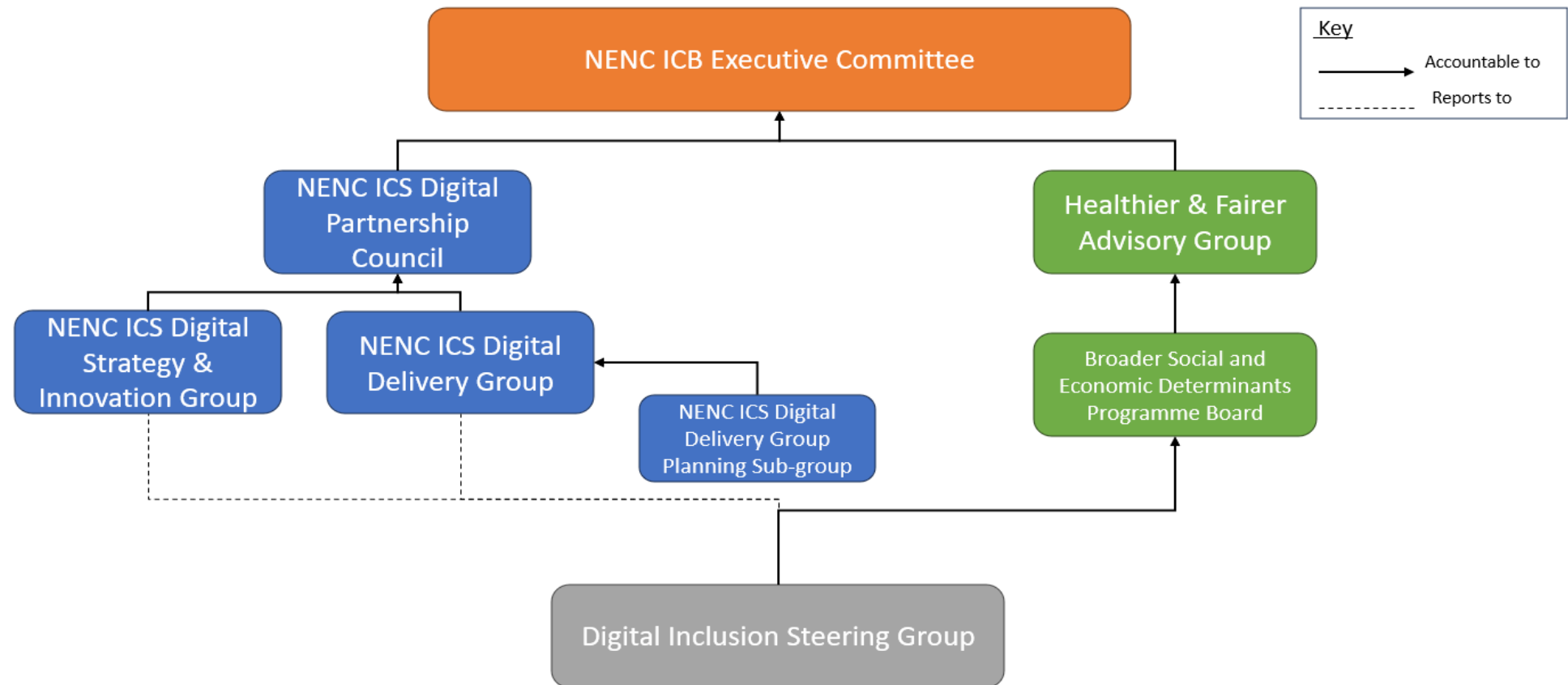
I can apply to have free data and social tariffs for my broadband.

Digital tools can help my patients manage their long-term conditions and support their independent living.

Governance and Accountability

The chart below illustrates the governance and accountability for the NENC ICS Digital Inclusion Steering Group

Key

Accountable to →

Reports to - - - - -

NENC ICB Executive Committee

NENC ICS Digital Partnership Council

Healthier & Fairer Advisory Group

NENC ICS Digital Strategy & Innovation Group

NENC ICS Digital Delivery Group

NENC ICS Digital Delivery Group Planning Sub-group

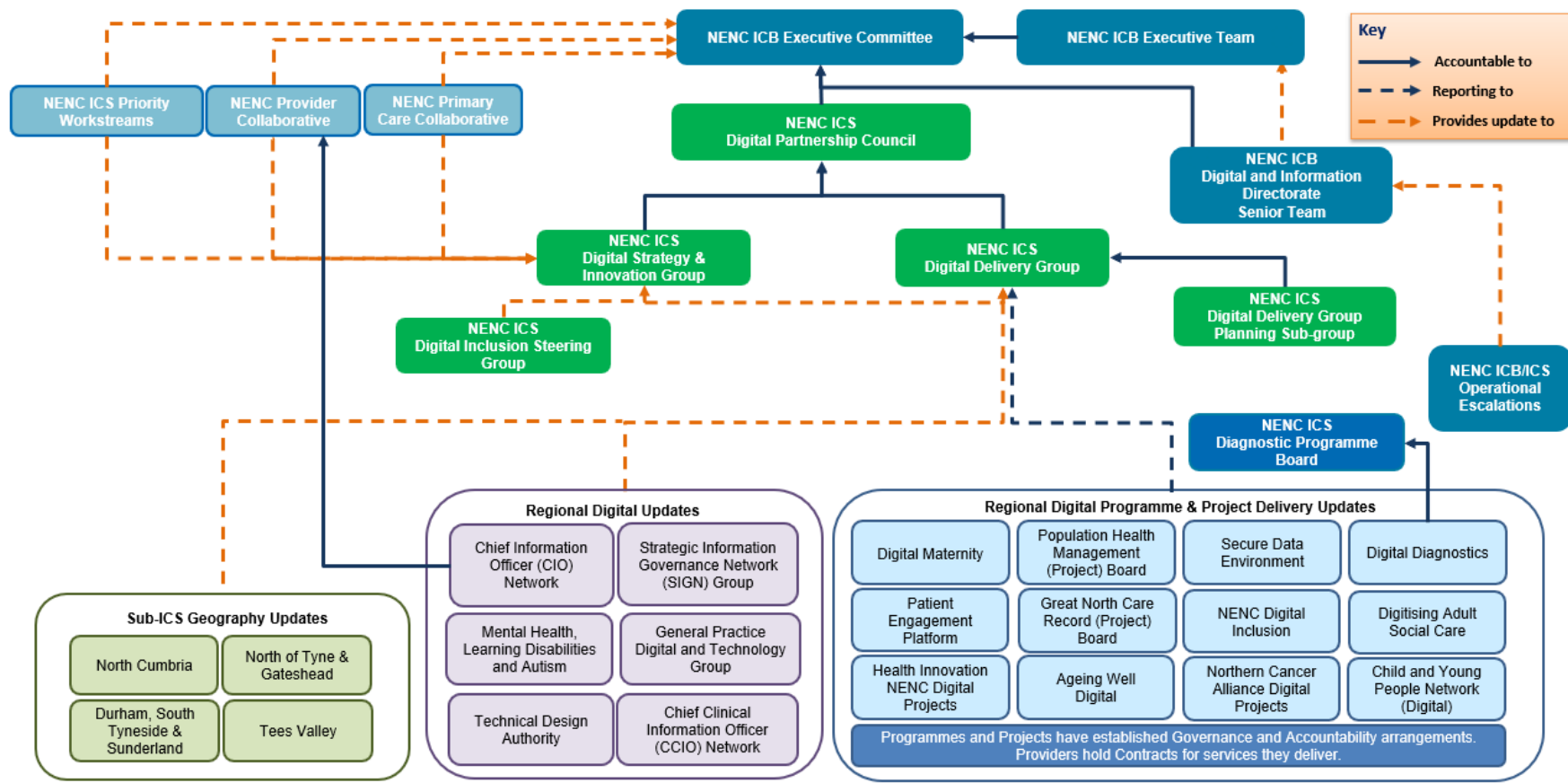Broader Social and Economic Determinants Programme Board

Digital Inclusion Steering Group

Governance and Accountability

Where the NENC ICS Digital Inclusion Steering Group fits within the wider regional digital governance

Policy, Research and Data

To develop this strategy and understand the digital inclusion needs of North East and North Cumbria, we implemented several key actions and carried out research:

Established a NENC ICS Digital Inclusion Steering Group: This group brings together digital inclusion leads and subject matter experts from across the ICS, to share knowledge and collaborate on improving digital inclusion.

The Group now has over 30 members from health and care organisation across our region.

Digital Inclusion Assessment : We engaged Thrive by Design to assess the current state of digital inclusion in the region, identify needs and desired outcomes, and determine the necessary actions to achieve our goals. This initiative included stakeholder engagement events (both in-person and remote), the creation of an outcomes document.

Access the NENC Digital Inclusion Assessment HERE

Digital Inclusion Heatmap: The North East and North Cumbria Inclusion Heatmap is an interactive tool aimed at enhancing access to digital services for individuals who are, or are at risk of becoming, digitally excluded.

Access the NENC Digital Inclusion Heatmap HERE

Policy, Research and Data

Some key regional findings from digital inclusion assessment

Digital Inclusion as a Human Right

In a world where every part of life is affected by digital technology, digital inclusion is framed as an essential to life, a human right. Integrated care systems could use this frame and the related Sustainable Development goals to highlight the importance of digital inclusion.

Increased use of digital health & care tools

The introduction of digital tools and applications within health and care pathways is described as a positive and necessary step to improving access. Efforts must be made to help people who are excluded by this catch up and become digitally included.

These efforts focus mainly on:

- Helping people to have access to a reliable digital device.
- Helping people to have access to a reliable and affordable internet connection.
- Supporting people to learn digital skills to be able to use digital tools and applications.
- Helping people to become confident in using digital technology.

People having equitable access to health and care

Learning — Adapting — Measuring — System — People

Building sustainable and equitable partnerships with voluntary and community sector organisations

Meeting the baseline legal standards of accessibility

Taking a service design approach to understanding people's experience and how digital does and could play a role in enabling access

Building awareness of and signposting to existing, local and accessible support available

Supporting equitable access to resources (directly)

Gathering, visualising and sharing data to help inform understanding of risk and capacity

Understanding wider socio-economic factors

Understanding and developing organisation level maturity

Knowledge and Outcomes Driven Approaches

There is a wealth of data linked to digital exclusion both at a national and local level and there are also methods for asset mapping. Integrated care systems can utilise existing tools to create customised dashboards and mechanisms for understanding local needs and assets and for monitoring and reporting progress.

Digital exclusion is not just a digital problem to solve.

This strategy recognises and sets out the responsibility that we have as service providers to focus on fixing the system. The services and pathways we provide need to ensure they are designed and made available in an equitable and accessible way, using digital as a choice and an enabler to access and not as a default way for everyone to gain access and engage with the health and care they need.

Digital Exclusion and Health Inequalities

Health inequalities and digital exclusion have a close relationship. Integrated care systems are required to take action to reduce health inequalities. There is a wealth of evidence to show that digital exclusion compounds pre-existing health inequalities.
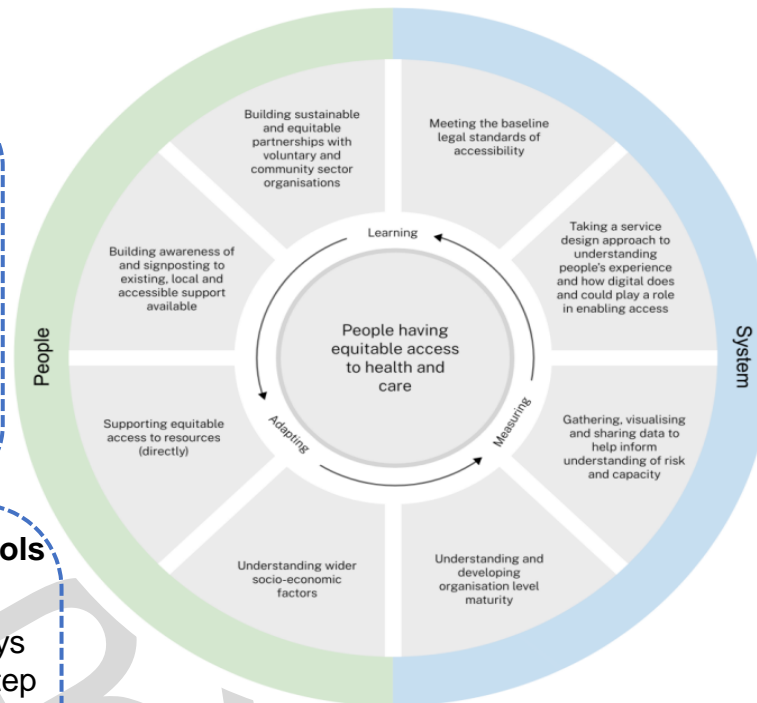
An Adaptive Approach in a Changing Context

The context for digital exclusion and inclusion changes for individuals and for systems over time. Integrated care systems need to take an adaptive approach to digital inclusion. At an individual level this means being able to track and respond to changes in circumstances. At a system level continual review and development mechanisms need to be in place to take advantage of opportunities and overcome new and changing issues.

Digital Inclusion Heatmap

This interactive tool was co-created with Thrive by Design and representatives from primary and secondary care, local authorities, and third sector organisations across the region.

It uses local and national data sets to predict the likelihood of digital exclusion within the region.

Understanding the levels of digital exclusion in our area will enable health and care colleagues across North East and North Cumbria to take practical steps and implement activities, to increase access to digital services for specific groups or locations.

This tool has supported the development of this strategy by supporting the understanding of digital exclusion across the North East and North Cumbria.

The Digital Exclusion Dashboard tool maps the risk of digital exclusion against the existing assets and capacity to support people.

There are gaps in the data, that if filled, will give a richer picture of the risk or digital exclusion for people living in the North East and North Cumbria.

This will help us to continue to identify areas to focus on as well as generate more specific questions about digital exclusion that need to be answered.
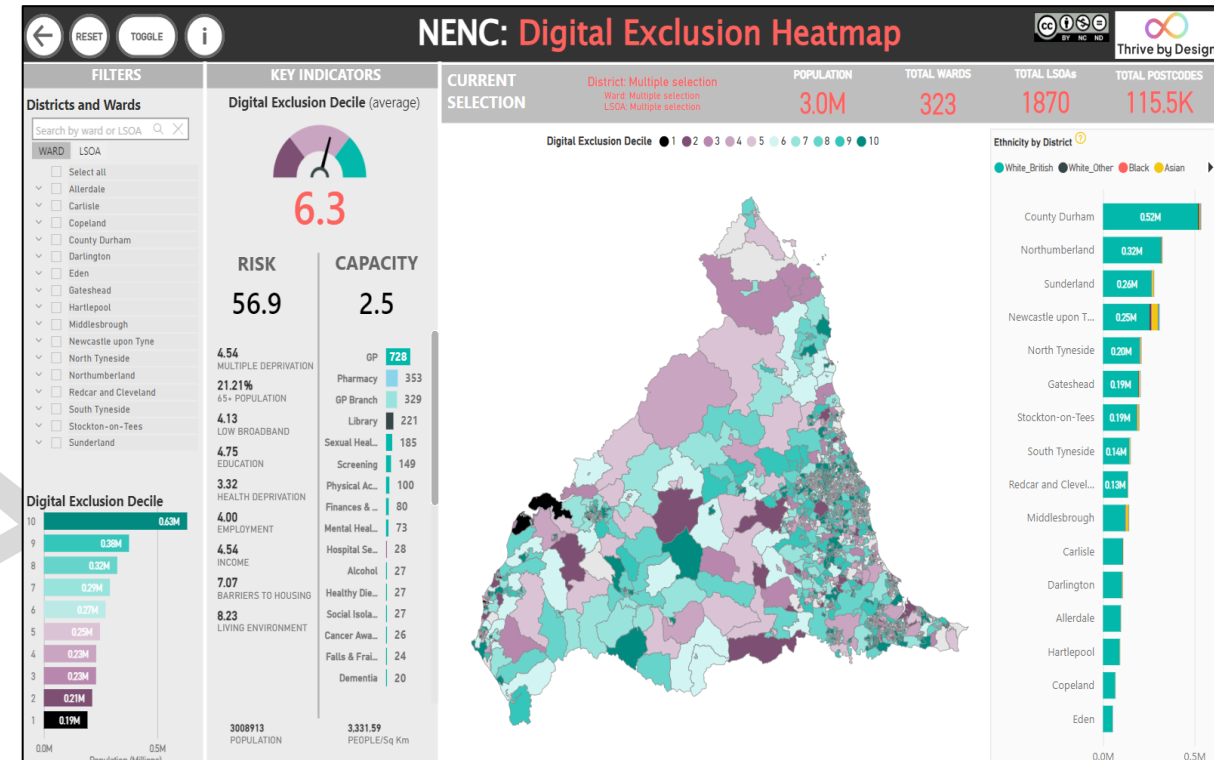
We will make the Digital Exclusion Dashboard tool available to people working across health and care in the North East and North Cumbria for them to explore, provide feedback on and identify questions they have e.g. the data may be able to help them answer.

North East North Cumbria Health & Care Partnership

Supporting and Related Strategies

Supporting, complimentary and related Digital Strategies.

Please see the links below:

North East and North Cumbria Digital, Data and Technology Strategy
North East and North Cumbria Better Health & Wellbeing for All Strategy
North East and North Cumbria Digital Primary Care Strategy
North East and North Cumbria Community Health Services Strategy
North East and North Cumbria Cyber Security Strategy

Some of the core initiatives and programmes…

Inclusive digital healthcare: a framework for NHS action on digital inclusion
Great North Care Record
Digitising Social Care
[more to add]

DRAFT

Foreword
Our Region / Local Context
National Context
Healthcare Inequalities
Why Digital Inclusion?
Our Vision
Themes
Digital Inclusion by Design Principles
Our Roadmap and the Future
What this means
Governance and Accountability
Policy, Research and Data
Supporting and Related Strategies

References

Below are links to information referenced within this document and research links which may have informed development:

- NHS digital guidance: https://digital.nhs.uk/about-nhs-digital/corporate-information-and-documents/digital-inclusion

- NHS website use: https://digital.nhs.uk/news/2023/nhs-app-hits-over-30-million-sign-ups

- Disease prevalence: cancer: https://digital.nhs.uk/data-and-information/publications/statistical/cancer-registration-statistics/england-2019/north-east-had-the-highest-rate-of-cancer-incidence-for-males-and-females

- Poverty: https://www.actionforchildren.org.uk/blog/where-is-child-poverty-increasing-in-the-uk/

- Life expectancy: https://fingertips.phe.org.uk/static-reports/health-profile-for-england/regional-profile-north_east.html

- Digital inclusion definition: https://ahsn-nenc.org.uk/new-review-examines-digital-inclusion-in-health-and-care-to-focus-efforts-in-the-region/

- Understanding Digital Exclusion across North Tyneside: https://researchportal.northumbria.ac.uk/ws/portalfiles/portal/92647842/Executive_Summary_Understanding_Digital_Exclusion_across_North_Tyneside.pdf

- Identifying and understanding digital exclusion: a mixed-methods study: https://www.tandfonline.com/doi/full/10.1080/0144929X.2024.2368087