

SEL Digital Inclusion Workshop

Purpose of Workshop

South East London is running two Digital Inclusion accelerator projects over the next 12 months:

- Bexley are focusing on improving access and engagement with patients with severe mental illness and/or learning disabilities.
- Lambeth is developing a PCN Digital Inclusion toolkit.

The collaborator workshop heard from key stakeholders that will help shape our current and future plans for digital inclusion in SEL



Hear from our expert voices



“There is no one size fits all but there are some key principles”

(Minal Bakhai, Deputy Director and Clinical Lead for Digital First Primary Care NHSEI)

- Due to COVID19 and the competing priorities there has been limited opportunity to design change with patients and adapt technology for local needs. There is now a great opportunity to re design services and pathways in a way where digital tools can be used to reduce inequality and support a hybrid approach of digital, physical and MDT, empowering users and building confidence
- The importance and power of using data to visualise the extent of inequalities



“Focus on people before tech”

(Omar Din, Managing Director Primary Care Services, AT Medics & Operose Health)

- AT Medics worked with the Good Things Foundation, setting up a space within their practice receptions, staffed by Digital navigators to humanise the digital solution and talk to patients on how to use the app on a day to day basis.

- The work went beyond digital health, supporting their patient population with basic digital skills, such as how to use a web browser and how to use an e mail.



“Focus on people first not tech”

(Emma Stone, Director of Design, Research and Comms, Good Things Foundation)

- COVID has accelerated the pace of digitalisation in all essential areas of our lives- to digitally connect has become essential for wider health and wellbeing
- We need to support the development of wider digital skills and confidence. Involving community-based organisations to respond to local need where people want to build digital skills and confidence
- Scale and spread across an ICS to create a network of community and digital health hubs to respond to the needs of the local population building better relationships between community and primary care



“Digital is an enhancement not a replacement”

(Folake Segun, South East London Healthwatch Director)

- Due to the lack of co-production with the public on digital tools there is an expectation that services will resume as before. Highlighting the importance of bringing patients along on the journey and ensuring they are part of these conversations.
- Opportunity to use platforms people are already using rather than creating new platforms. Filtering information through apps such as WhatsApp, an application that many patients use but services and providers are not



“Use as a choice and not an expectation”

Savannah Fishel, Policy and Engagement Officer and Charlotte Augst, Chief Executive for National voices

- Digitalisation is a major opportunity for the health and care sector but only when it is used as an added choice and not as an expectation which can risk embedding inequalities further
- Top tips for getting most out of virtual healthcare for patients and healthcare staff – [consistent quality of tone and messaging](#)



Workshop Recording

Please contact us to receive a recording of the workshop: selccg.digitalfirst@nhs.net



Workshop Slides

Access the slides presented by our key speakers and Bexley and Lambeth pilot teams, click [here](#)



Links

Link to speakers' organisation websites for further reading, click [here](#)

Break out Room Discussions

Q1 What does good look like?

Involve patients at every step of the design process

Identify use cases for each specific cohort of patients

One size does not fit all

Use metrics such as reduction in number of GP appt. to assess patient empowerment

Quantitative Measures

Baseline projects to understand current data available and current position

Utilising dashboards from digital tools

Collect qualitative data on confidence of staff before and after the intervention

Collect feedback from social prescribers and practice staff e.g. effect of upskilling

Staff Engagement

Project Sustainability

Measuring long term sustainability of digital beyond the project

Softer, flexible approach ensuring gradual change that allows the interventions to be embedded

Q2 How are borough projects adapted and scaled across an ICS?

Wider Impact of Digital Inclusion

Look at digital inclusion as a key factor in the Digital Front door and embedded in all pathways

Reflect local need and focus on how to build assets in the community, not just Primary Care

Co design with patients and providers

Champions and Patient Participation Groups to be involved and work more closely with patients

Build communication groups and channels with hard to reach groups designing solutions with these people in mind

Partnership with local teams

Partnership with local councils to understand similar work being undertaken across the board

Understand digital tools already being used in the community e.g. [Homeless Health Needs Audit](#)

Identify the interface between the Bexley and Lambeth pilots and identify where there can be co design

Pilot sites to link in to get external challenge and build these solutions quicker

Co design with patients and providers

Champions and Patient Participation Groups to be involved and work more closely with patients

Build communication groups and channels with hard to reach groups designing solutions with these people in mind

Generating blueprints, embedding peer to peer support and using social networks and buddying

Involve the ICS from the beginning to help build the pilots and support scaling

Training and Change Management

We need to ensure that practice staff help patients

Ensure there are champions and practice staff who are engaged

Ensure the 'why' is clearly communicated

What's Next?

Understand: As a programme, it was important for Digital First to hold this collaborator workshop. It gives us an opportunity to listen to those directly impacted by the areas of digital that we are looking to explore.

Scale: At a wider scale, this now enables OHSEL to develop plans for direct patient engagement across all workstreams, not just limited to Digital First, and to ensure digital inclusion is the common thread that runs through everything we do.

Sustained Collaboration: Our two digital accelerators will allow us to focus on two areas in particular over the coming 12 months and we are looking forward bringing you with us on that journey.