# **Dorset:** Digital inclusion for those who are excluded

# **Maternity Matters**





# Introduction

The Dorset pathfinder was set to coincide with the launch of the Dorset CCG <u>Maternity Matters</u> 'single front door for maternity services'. There seemed an obvious need to create a digital health inclusion pathfinder in this area to run parallel with this.

There is a significant proportion of the Dorset population that are excluded from digital services for a number of reasons e.g

- 1) Low or no literacy
- No access to digital hardware (smartphones, tablets, computers)
- 3) Lack of infrastructure (wifi not universally accessible)
- 4) Cultural mistrust of 'faceless' services

Taking into account these barriers to accessing digital services we tried to answer the question

# "How can digital help young expectant and new parents access the health support they need?"

Each of our pathfinders are structured so that we can test and learn what works. This pathfinder provided us with valuable insights, lessons to be learned and successes. This report will endeavour to explain what each of these are and, more importantly, why they happened. The initial theory of change for the pathfinder was:

#### **Current situation**

Excluded people are not accessing the information and support they need in their maternity journey.

#### Intervention

Supporting existing maternity health professionals, peers and Digital Champions to use digital technology to reach excluded people.

#### **Outcome**

Excluded people accessing the support and information they need and engaging with offline support.

# Reframing - From Maternity to Broad Digital Health

The Dorset pathfinder's aim was to develop interventions that helped a specific group i.e. new or expectant mothers who were socially and/or digitally excluded. This pathfinder worked for some in this group, but not for all - for reasons we will explore within this report.

Helpfully, however, this pathfinder has provided a blueprint of how to create a digital champion network in the most effective places for people who are excluded and wanting low level support in their health journey. E.g. finding trusted information, symptom checkers, useful digital tools.

<u>From</u>: in depth interventions with new and expectant mothers from socially excluded groups <u>To:</u> broad support for everyone

People engaged or supported	5,658
Digital Champions trained	84
Organisations involved	21

## **Design insights**

Design Session 1 - <u>User Insights</u>

Design Session 2 - Stakeholders

Design Session 3 - Recommendations

# Pathfinder reach and impact

The Dorset pathfinder's aim was to develop interventions that helped a specific group i.e. new or expectant mothers who were socially and/or digitally excluded. This pathfinder worked for some in this group, but not for all – for reasons we will explore within this report. However, this pathfinder has provided a blueprint of how to create a digital champion network in the most effective places for people who are excluded and wanting low level support in their health journey. E.g. finding trusted information, symptom checkers, useful digital tools.

**Digital Champions training**: This took place at various locations including: Dorset Council Gypsy and Traveller Liaison meeting; Dorset Race Equality Council (DREC); Dorset Council's Boscombe Children's Centre. Digital Champions included 52 new champions working in another organisation; 22 digital champions in the Superfast Dorset team; 10 health champions in GP surgeries.

Stakeholders engaged	5,658
Digital Champions trained	84
Organisations involved	21
People supported in surgeries	42
People supported - helpline	17



# Things we've learned

## Developing a new digital health service

The pathfinder was designed to coincide with the launch of a new Maternity Matters digital service. There were initial issues with the site and the launch was delayed by over 3 months. Issues included: difficulties using it from a laptop; women not receiving an email confirmation or copy of submission; telephone numbers only available once the form is submitted. A workaround was created when women didn't have an email account. Also, the Superfast Dorset helpline team got medical queries (which they couldn't answer), not digital queries.

#### Lesson

Co-design with women from the target audience, including women who face additional barriers, in designing the platform from the outset would have identified issues sooner. Digitalisation and development of digitally-enabled care pathways always need to be seen as part of a service or solution; not as the whole solution. Digital services can amplify existing barriers to accessing health care, unless action is taken to reduce these.

## **Agility and Dependencies**

Test and learn approaches are valuable at a local level. It allows for local context to be taken into consideration and larger lessons to be scaled across the wider NHS footprint. However, one drawback from this approach is the rigidity of larger public sector organisations (such as Clinical Commissioning Groups or NHS Trusts). Some of this is inevitable and necessary – given the scale of programmes public sector bodies deal with, but it does pose problems when trying to iterate or adapt to 'on the ground' learnings. Alongside this, the dependency of the digital inclusion programme on the platform's launch meant that the delays made it harder to build momentum among health and community sector professionals.

#### <u>Lesson</u>

Consider involving larger bodies as steering group members/advisers and funders, and using smaller, more agile organisations to deliver the 'test-and-learn'. Consider the risks and dependencies when attaching digital inclusion initiatives to a specific digital platform or tool.

# Things we've learned

## The makeup of Digital Champions

For the Digital Champion model to be effective, excluded groups need to recognise themselves in the person that is helping them. This could be cultural, social, ethnicity or gender related. The role of digital champions (where champions aren't health professionals) in a maternity-focussed programme felt more difficult for men to do. The digital champions in Dorset were conscious of this, and did a commendable job of mitigating issues where possible.

#### Lesson

We did the user research to understand the context and barriers of the people who are excluded but need to be more conscious of the makeup of the people delivering the interventions. Specifically, pregnancy is an extremely vulnerable time for women (and even more so for those who are excluded) and so there needs to be careful consideration on who helps. Right person at the right time.

## Digital Champions as a name

We tried to train digital champions to be able to support with digital tools specifically for maternity. However, the term 'Digital Champion', means people will ask lots of broader digital questions ranging from "how do I access email" to "Where do I look for these symptoms?"

#### Lesson

There is a difference between Health Professionals being 'digital experts' and Digital Champions being 'health experts'

- Digital Champions don't need to be experts in one health condition or service area (e.g. diabetes or maternity services).
  They need to be able to confidently support /guide people to trusted information - 'broad and shallow'
- Health professionals need to be experts in their own area and help people with tools that pertain to their specific specialism -'narrow and deep'

# Things we've learned

## **GP Surgeries**

GP surgeries can be challenging places to do digital health inclusion. Issues include: being overworked with no time for 'extras'; lack of space for people to use computers in private; security setting barriers where people had their own device; some surgeries have poorly designed websites; some have poor internet connection. GP Surgeries were used in this pathfinder because our early User Research suggested that the traveller community near Puddletown had a trusting relationship with the local practice. The rurality of certain areas in Dorset meant that even NHS Wifi and accessible infrastructure were a challenge.

#### Lesson

We need to make sure that when we find the 'right place' i.e. where people from excluded communities feel comfortable. We then need to make sure that those places are suitably equipped for digital access as well as digital skills support.

## Funding

We recognise that funding is always tight. Although Dorset CCG and Dorset Council worked collaboratively within the small pot of funding we provided, it can become difficult when their own priorities didn't quite match – for example <a href="Maternity Matters">Maternity Matters</a> (CCG) vs <a href="Superfast Dorset">Superfast Dorset</a> (Council). Additionally, there was lots of enthusiasm for Digital Champions in various surgeries, but no funded agreement was in place to support collaborative working.

#### Lesson

Programme outputs need to be more specific, taking competing priorities into account. Programme outcomes may well be able to satisfy both. Being able to get the right commissioning and collaboration agreements in place is important, as enthusiasm alone is unlikely to be sufficient – especially for longer-term sustainability.



# **Case Studies**

#### **Alice**

**Location** – Weymouth – Alice was homeless and living in a shelter in Weymouth. She was accompanied to the session by a member of the shelter staff. The session took place in Weymouth Library.

**Learning need** – to be able to register her pregnancy online.

**Approach taken** – Alice was confident using her mobile phone for online tasks, but wasn't confident using a PC. The Digital Champion guided Alice through the form, indicating where entries needed to be made and how to use the drop-down menus.

**Learner outcomes** – Self referral pregnancy form complete by Alice

**Next steps** – Alice was offered further help to improve her digital skills and told that if she needed any future help she could attend the sessions again.

**Comment from the Digital Champion** – "I had no problem with doing this process, it's a shame that more ladies don't feel that they could see a DC for help with completing the form and then go on for more digital skills training".

#### **Barbara**

**Location:** Puddletown Surgery

**Learning need**: learner has an underused iPad. Wanted general internet help

**Approach taken** by DC: discussed specific needs. Drew up a weekly plan, but, almost every week, Barbara had more urgent specific needs eg applying for Council Tax Single Person Discount, Shell Driver Club discount scheme, holiday insurance refund and things to do with her husband's funeral. The DC was happy to address learning issues important to the learner, whilst ensuring each issue was used as a learning opportunity.

**Learner outcomes**: Barbara is much more confident with email, both sending and receiving. She has been able to print attachments. She has the skills to use the Internet for buying online, but she is reluctant to do so. The Digital Champion worked with her practicing taking photos and video in preparation for an important trip to Borneo she will make in October 2019.

# **Case Studies**

### Sara and Mohammed

**Location** - Queen's Park area of Bournemouth.

**Learning need** – To complete the MM self referral form, but also to improve digital skills.

Approach taken – Call to the helpline being run by the Superfast Dorset team. Mohammed and Sara had found out that she was pregnant and that they needed to register her pregnancy. Sara did not speak English confidently enough to give details to complete the form, so Mohammed liaised. Neither have internet access or strong English language skills. The Superfast team used the NATO alphabet to ensure all details were correct. Time taken to ensure all necessary parts of the form were completed and that the correct information had been collected.

**Learner outcomes** – Self referral form completed via mediated access over the telephone.

**Next steps** – Mohammed was informed of the name and session times of his local Digital Champion, so that Mohammed and Sara could see a DC and improve their digital skills.

Comment from Superfast Team – We developed this way of completing forms (mediated access) as a number of women we spoke to had a medical need to get the form done, and we were concerned that any delay in them seeing a DC might cause stress. Equally we have spoken to women, whose first language isn't English, who wanted to see a DC, as that was an easier way for them, than explaining complex medical matters over the 'phone.

#### People supported by the Superfast Dorset Team:

Of the 17 hotline calls made to the Superfast Dorset team:

4 were from people who had no access to a computer

3 people were not confident to complete the form themselves

5 had medical queries rather than digital queries

5 were able to complete the form themselves after the call

# **Case Studies**

## **Digital Champion - Mike**

**DC Experience** - The Patient Participation Group was very positive about the offer of digital champion support. The Group invited Mike to one of their meetings to explain the programme, Digital Champions and Maternity Matters. The PPG gave approval to run a pilot. This started with limited publicity, but picked up a few people at once.

**Location** - The session was run in the waiting room, on a table. It was a public setting, and worked well, as several people asked what it was about, enabling Mike to talk to them and give more information.

**What happened** - Only one person wanted to register for the surgery app. All others have been requests for general internet help. All were women and used their own devices (laptop, tablet, etc). The main challenge was poor internet connection at the surgery; very slow speeds. Internet dropped out 5 times during a session to support someone to fill out an online form. Although Mike was prepared to continue running sessions, the poor WiFi made this impractical - as it risked damaging people's confidence in using the internet.

**Lessons learned** - Getting the basics of free, secure, reliable and fast broadband right in a location makes a huge difference - both to the experience of giving, and receiving, support to build digital skills.

# **Our Thanks**

We would like to thank both Dorset County Council and Dorset CCG for their work on this pathfinder. They have been fantastic partners to work with and have provided wonderful insight into the challenges and successes in a programme like this.

