From pillars to practice

Developing a framework for embedding digital inclusion in health and social care
The world around us is expanding into the digital space. It is where many of us now spend a lot of our time as part of our everyday interactions. Although we may talk about ‘real world’ versus the digital world, they are not different realities, they are two different spaces where it is possible to do the same activities. They should not be seen as distinct or separate but are becoming more interwoven as we interchange between online and offline engagement. Digital is an enabler to how many of us live our lives now. However, in a world where not everyone has the access to this space, how do we shift the narrative to create equal opportunity and address issues of inequality for people to be included and have access to the opportunities digital has to offer?
Most models articulate digital inclusion as having access to a device, connectivity, and the skills and confidence to navigate the online world. Digital inclusion therefore has a financial implication, as well as a skills requirement. However, this approach is often framed as actions an individual must take to be online, placing responsibility with the person. Benefits of digital inclusion extend beyond the individual where everyone benefits from a digitally inclusive society. It is therefore important to consider how responsibility for digital inclusion can be shared beyond individuals to wider services and organisations. Those who provide digital services/platforms (primarily private and public sector) now need to assume their share of responsibility for the digital inclusion journey given the mutual benefit to both the provider and the individual. This can include designing simple interfaces and user journeys, as well as the creation of resources to help someone with low digital literacy to navigate their platforms. Often community groups spend time and resource creating such materials to help their users build their skills and confidence as no such support has been supplied by the body that provides the service.

All digital services should be designed for inclusion. This approach aligns with the human rights principles for digital health and care, highlighting the need for 'digital inclusion, not just widening access' and 'digital as a choice'. The importance of a human rights based approach to digital is also reinforced in the recently published second national human rights action plan for Scotland.
In this paper, we share a refined approach to digital inclusion that will develop as an evolving framework. We propose the framework as a concept towards practical implementation of digital inclusion in health and social care, supporting the priorities of the Digital Health and Care Strategy in Scotland. The framework involves five pillars of:

1. Motivation
2. Devices
3. Connectivity
4. Skills and confidence
5. Inclusive design
The five pillars can represent a digital inclusion journey. Each pillar building on the previous, and each pillar an essential component of a digitally inclusive nation. Only by understanding the individual journey, needs and requirements, can organisations/services begin to deliver digital services that are genuinely inclusive.

The Scottish Government launched the Connecting Scotland programme in response to the pandemic to provide devices, data, and training to address the impact of lockdown restrictions. Some 60,000 people have benefited to date with a focus on people at a high clinical risk of Covid-19, young care leavers, families with children, socially isolated and older people, people with disabilities, and people seeking employability support.

In addition, the Digital Health and Care Directorate has been working on digital inclusion across different health and social care contexts including Care Homes (supporting digital inclusion for residents and staff), and Digital Lifelines (improving health outcomes for people who use drugs). A new Digital Inclusion programme launched in March 2023, delivered in partnership with the Scottish Council for Voluntary Organisations and Connecting Scotland, focuses on two areas: digital inclusion in Mental Health (supporting people with a mental health condition (s)) and digital inclusion in Housing (supporting customers or tenants in social housing, the private rented sector or owner-occupied housing who are most at risk of digital exclusion).
The programme will develop, test and implement a range of digital inclusion models that enable people to access mental health and housing services and supports, feel empowered, digitally confident, and experience improved wellbeing through the wider opportunities and connections to communities that digital inclusion brings. Through the programme we will also seek to harness the learning about ‘what works’ in digital inclusion across these contexts to understand the transferable and bespoke models that can support people to be digitally included more broadly to benefit their health, wellbeing and the way they experience care and support.

This paper is our starting point to developing a framework for how we can understand digital inclusion in health and care contexts. We will evolve the framework throughout the programme, drawing on the learning from wider digital inclusion work across health and care contexts. We aim to develop models of digital inclusion that can be scaled and applied in other areas through identifying transferable practice and learnings that emerge.

Motivation >
## Motivation

<table>
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<tr>
<th>As someone that’s digitally excluded I need...</th>
<th>As part of the workforce I need...</th>
<th>As an organisation or service we need...</th>
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<tr>
<td>to understand how being online is of benefit or of interest to me</td>
<td>to be mindful of digital inclusion and promote the benefits and opportunities that being online can bring</td>
<td>to prioritise digital inclusion across organisational strategy/policy and promote across all levels of the organisation to create knowledge and awareness</td>
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In some Digital Inclusion models, ‘motivation’ is included alongside skills and confidence, while in other models this is seen as a distinct component.

We have included motivation as a distinct pillar in the framework given that at an individual level, if someone who is offline is not motivated to get online then the subsequent pillars are redundant.

**Motivation cont. >**
Motivation to be digitally included is about two things:

1. **Understanding what being online can offer that is of personal interest, which is often referred to as the ‘hook’**

2. **Being able to address any individual fears or perceived barriers to being online**

Motivation is the first step on the journey to digital inclusion. If the benefits of being online are not clear, people will be less likely to take that first step. As a starting point, finding someone’s ‘hook’ is a good way to introduce what being online can offer. A ‘hook’ is something that connects their interests or hobbies to the digital world, taking a person-centred approach. This could be looking up recipes or video tutorials, staying in touch with family/friends, playing games or listening to music. At an individual level, using a digital public service is not likely to be a primary motivation for getting online. Therefore, how do services accommodate the digital inclusion journey in a person-centred way?

It is important to consider the other side of the motivation - fears, perceived barriers and being safe online. Many of us have our own anxieties about the risks posed by the digital world. One of the most common fears for people who are not online is data privacy. This can be the risk of having our identity taken, money stolen or being subjected to abuse.
These fears are all things that we can take steps to mitigate, but a certain level of knowledge is required to navigate digital spaces safely. In addition, people may feel embarrassed or worried about not being able to use technology to get online and this can be a barrier to people having the motivation to want to be able to be digitally included.

At a **workforce** level, those providing digital skills support should have pre-existing trusted relationships with people they are supporting, which is the key to understanding individual motivations and fears. This should be enabled at an **organisation/service** level through a clear commitment to digital inclusion, rooted in the understanding that it is of benefit to the organisation/service to empower people to access their services digitally where they choose to.

**Device**

<table>
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<td>access to a device in a place I feel safe and that is suitable for my needs so I can do the things I want to do</td>
<td>to work with the person to understand what device would work best for their needs and situation and identify how the device can be provided</td>
<td>to create pathways and networks for the workforce to identify and access appropriate devices for the people they support</td>
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Devices can be a significant one-off cost. Different people will have different requirements for devices e.g. smartphones, tablets or laptops. The device needs to meet people’s individual needs including both the purpose for use and any accessibility requirements. Simply giving someone access to a device does not necessarily meet the needs of that person. Different devices can be more appropriate depending on activities of use and this can often be determined by what the person is looking to achieve by being online.

For a meaningful digital inclusion experience, consideration should be given to what the person needs at an individual level. As a starting point, this could be a decision around whether a smartphone, tablet, or laptop is the most appropriate device dependent on a person’s situation including where and how they wish to use the device. Smartphones can be a useful device for someone who is not in settled accommodation, or where a more expensive device might increase their personal risk. A tablet may be better suited to someone for entertainment and learning purposes, or to be used within the family. A laptop can be a better choice for job searching and education. Understanding what is important to the individual can help build a picture of what kind of device will meet this need.

Device cont. >
A range of factors impact how useful a device will be, e.g., is the screen size large enough for the task at hand? Does it have suitable accessibility features? Is it robust enough or does it need a protective case? Is the operating system familiar to the person using it? Is it affordable and easily replaced? Does the value of the device increase personal risk in any way?

For the workforce, having an understanding of the different devices and their functions will be beneficial in helping someone identify what type of device may best meet their needs. It’s also important to have problem-solving skills, supporting people to navigate and troubleshoot devices when things go wrong. This may also include helping someone understand how accessibility features can make the device easier to use, or showing them how to install updates so the device works with certain apps.

At an organisational level, ensuring there are pathways in place for device access will support the workforce to identify how devices can be supplied. There may also be decisions required around how devices are procured, managed or repaired/replaced if damage occurs. There are a variety of models used across Scotland to help people access appropriate devices e.g. individual gifting models, lending libraries and access via community hubs.
A device will have limited use without connection to the internet. This involves cost and can exclude people on lower incomes. For anyone with unlimited data or home broadband, thinking about data usage is not likely to be a problem. For anyone on a limited or pay-as-you-go data package this is a conscious financial decision about how they use their resources. Connectivity can often be determined by the type of device a person is using. A smartphone will require a sim card, whereas a tablet or laptop will need another way to connect to the internet. Connectivity needs to be considered alongside providing someone with a device.

<table>
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<td>As someone that’s digitally excluded I need...</td>
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<tr>
<td>affordable and reliable connectivity in a place I feel safe</td>
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<td>As part of the workforce I need...</td>
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<tr>
<td>reliable connectivity in my place of work and to signpost/offer appropriate connectivity options to the people I support</td>
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<tr>
<td>As an organisation or service we need...</td>
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<tr>
<td>to ensure reliable connectivity across the organisation and widespread information for signposting options</td>
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Recent research by NESTA into data poverty in Scotland found that one in seven adults are experiencing data poverty and are struggling to afford sufficient, private, and secure access to the internet. The research also highlights that one in ten people with monthly mobile contracts regularly run out of data before the end of the month and larger households struggle to meet their higher data needs.

For individuals, connectivity will vary depending on their own circumstances. Pay-as-you-go data is often less cost-effective, but the only viable option for many people. Arguably, the best way to enjoy the benefits of the digital world is not being restrained by having to ration your data allowance. This requires unlimited data or an ability to understand how much data is being used by different online activities.

Beyond affordability, there are further factors affecting connectivity, especially in rural areas where this can be more challenging e.g. 4g ‘not-spots’. In such areas a digital service is not accessible for many people.

How and where people want or need to access connectivity is another consideration. For some people, home connectivity is the best option for many tasks, but for others they may lack privacy at home for some activities e.g. health appointments via NearMe. As is the case for devices, connectivity is best understood through a person-centred approach that takes account of all the wider factors that are involved in a person’s life situation.
For the **workforce**, reliable internet connectivity is also essential in order for them to work in digital spaces. When supporting people to be digitally included, the workforce need to have reliable connectivity so that the quality of their support is not compromised. **Organisations** should not assume that all their workforce has this access at home, or that the people they support have the means to pay for data to access services and support.

### Skills and confidence

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<td>the skills and confidence to do things for myself and know where to get support if I need it</td>
<td>the skills and confidence in my ability to digitally engage and to support others to be digitally included</td>
<td>to provide opportunities for the workforce to build skills and confidence in using technology and supporting digital access for others including creating safe spaces to explore barriers and fears</td>
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In Scotland, 15% of people don’t have ‘Foundation Digital Skills’. These are the basic skills around turning on a device, opening an internet browser and connecting to the internet. These skills are the first steps any individual needs to be able to take before they can access digital services. People can feel embarrassed by their lack of digital skills, or become frustrated with services when they are unable to use them due to the design being overly complex and difficult to navigate.

Digital skills are not static, and they need to keep pace with how technology evolves. As technology advances, so too does our need to develop new skills. This applies to anyone using technology and has specific implications for the workforce who are often the people who may provide support to others to become digitally included.

A key factor in developing digital skills and confidence is informal support through trusted pre-existing relationships. This can be through friends and family, or from someone working in a service. Developing digital skills should be seen in the wider context of a person’s life, not only drawing on the ‘hook’ to get them motivated, but also understanding what they want to achieve by being online.

Skills and confidence cont. >
Building digital skills and confidence requires a digitally confident workforce. The term ‘Digital Champion’ is often used to describe someone who, as part of their core role, embeds digital practices in their support. This does not require a level of expertise akin to someone in an IT team, but it does require patience and the ability to explore some basic tasks together e.g. creating an email account, demonstrating video calls.

A digitally confident workforce needs to be enabled and supported at an organisational level. Organisations should have an understanding of the current levels of digital skills across their workforce and be taking active steps to help address any gaps. This in turn will benefit the people the organisation aims to support.
Inclusive design

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<tr>
<td>platforms and digital services that I can easily access and navigate</td>
<td>platforms and digital services that I can easily access and navigate, and knowledge of a range of trusted digital resources that I can recommend to the people I support</td>
<td>to ensure that the digital resources, services and supports recommended or used by the organisation meet the requirements of inclusive design and any related digital service standards</td>
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Involving people in the design of services and support (digital and non-digital) is critical to ensuring people can access, interact with and experience services which meet their needs. Everything a person does online is facilitated through an app or a website, which have been designed by the providers of those products or services. If these apps or websites are not accessible to the needs of the people who will use them, the potential of the online world will not be fully realised. Ensuring digital services are designed ‘inclusively’ to meet the needs of individuals is critical.
The inclusive design pillar represents the intersection of the **individual** needs and journey (including motivation, device, connectivity, skills and confidence), **workforce** and **organisation** actions and priorities. It involves addressing how services are actively considering motivation, devices, connectivity and skills/confidence in the design of services and embedding digital inclusion as part of this process.

The following questions provide examples to articulate these requirements: How has the need for mobile data been minimised? Is the service accessible on all device types? Is the navigation simple? Is the user interface accessible and easy to use? How do you provide support to someone who does not know or is not confident in how to access this service? Who provides digital support? How do you understand the needs of the people who use your services? How have you alleviated any fears about what data is collected and how it will be used? What alternatives do you provide for people who choose not to engage digitally?

At the **organisation** level, this also requires review of how digital inclusion is prioritised across organisational policy, strategy and implementation plans and the organisations leadership that is required to ensure the inclusive design of digital service delivery.
Looking back and looking forward: a framework for digital inclusion in health and care

The Pillars for Digital Inclusion provide a framework that can be used to consolidate learning from previous digital inclusion work and can support and guide future developments in this area. Reflecting on the pillars in the context of digital health and care helps to contextualise implications for digital inclusion in practice in the design, development and delivery of digital services.

The Digital Health and Care Strategy (2021) highlights the need to address digital exclusion to ensure people have the opportunity to access technology, and develop the skills they need. It also states the importance of people being involved at every stage of the innovation, design and delivery process. Digital choice is emphasised as key to a person-centred approach to digital health and care.

Digital choice relates closely to all of the pillars through the individual, workforce and organisation perspectives. For example, ensuring people have awareness of what options are available to access services digitally and to make an informed decision on engaging digitally will be impacted by their individual motivation and means of access to digital. This will be further influenced by the workforce and organisations ensuring that they offer digital choice and can signpost to ways of enabling the access required (e.g., devices, skills support, connectivity options).
Individual needs and situation are also important to consider where digital services may or may not be appropriate to the type of conversation or intervention in question. There are also implications for the type of connection (at home, in a community hub etc.) and the skills/confidence support required to access the service. Services should also be mindful of how much data is used accessing their support, as this will represent a cost for many people. For example, video calls will use a lot more data (increased cost) than an online resource.

Supporting digital inclusion in health and care settings also requires consideration of how support for digital skills and confidence will be provided when needed - whether this is through the immediate workforce or through partnerships with the local community. Learning pathways for building digital inclusion knowledge, skills and confidence for the workforce are also important.

In digital health and care settings, consideration should also be given to how trust is embedded and communicated given that this strongly relates to motivation to engage digitally. For example, do individuals trust how their data will be used in relation to the digital service or intervention they are offered?

Finally, inclusive design of digital health and care services is paramount – designing services with the people who will use or be impacted by them will support accessibility and engagement.
These points are not intended to be an exhaustive set of implications for the pillars in digital health and care, but provide some starting points for future exploration and dialogue for how we can enable digital inclusion in practice.

**Now, near and next: progressing digital inclusion in health and care settings**

We intend to review previous digital inclusion work in contexts related to digital health and care to draw on this learning to deepen and refine the ‘definitions’ of the pillars and how these are reflected in practice. We will take all of this knowledge and translate this into tools and resources that demonstrate the application of digital inclusion in practice and that can benefit people looking to apply this in their own work.

We are also using the Pillars for Digital Inclusion as an evolving framework in the development of the new programme focusing on digital inclusion in mental health and housing. This will provide the opportunity to explore the framework as a foundation and guide to support the development of this work alongside wider engagement. Emerging learning from the programme will continue to evolve the framework as we progress and we hope to find ways to share learning at key stages throughout the programme to benefit wider digital inclusion work across digital health and care settings.
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