



Patient and professional experiences of using digital tools in primary care.

Year two report

healthwatch
Norfolk

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Who we are and what we do

Healthwatch Norfolk is the independent voice for patients and service users in the county. We gather people's views of health and social care services in the county and make sure they are heard by the people in charge.

The people who fund and provide services have to listen to you, through us. So, whether you share a good or bad experience with us, your views can help make changes to how services are designed and delivered in Norfolk.

Our work covers all areas of health and social care. This includes GP surgeries, hospitals, dentists, care homes, pharmacies, opticians and more.

We also give out information about the health and care services available in Norfolk and direct people to someone who can help.

At Healthwatch Norfolk we have five main objectives:

1. Gather your views and experiences (good and bad)
2. Pay particular attention to underrepresented groups
3. Show how we contribute to making services better
4. Contribute to better signposting of services
5. Work with national organisations to help create better services

We make sure we have lots of ways to collect feedback from people who use Norfolk's health and social care services. This means that everyone has the same chance to be heard.

Summary

Why we looked at this

This year two report looks at how patients digitally access primary care. Healthwatch Norfolk explored the introduction of the Norfolk and Waveney Shared Care Record and public awareness of the NHS app. Healthwatch Norfolk also looked at innovative uses of digital tools. This report is based on three outcomes:

Outcome One: Raising Awareness of Digital Tools

Raising awareness of the presence of the digital tools available to local people and providing opportunities for patient support and upskilling to be able to digitally access their GP surgery.

Outcome Two: Innovative Use of Digital Tools in Primary Care

The Norfolk and Waveney Integrated Care Board has knowledge and examples of GP Surgeries using digital tools innovatively in Norfolk and Waveney to support digital access for residents.

Outcome Three: Increasing Public Accessibility to Information About Digital Tools

Norfolk and Waveney residents can access information regarding the NHS app and Shared Care Record.

How we did this

Outcome One: Healthwatch Norfolk co-hosted an online event for GP Practice Managers and PPG members about the Digital Health Hub.

Outcome Two: Healthwatch Norfolk researched local GP surgeries that use digital tools in an innovative way to produce five Case Studies.

Outcome Three: Healthwatch Norfolk conducted four focus groups to find out what local people can or have accessed regarding the NHS app and Shared Care Record.

What this means

Utilising digital tools within primary healthcare and promoting their existence has the potential to raise public and healthcare professionals' awareness of the depth and breadth of digital tools available for: accessing primary healthcare services, managing and attending appointments, ordering and managing prescriptions, managing long term health conditions and aiding communication between patients and professionals.

Recommendations

Outcome One: Raising Awareness of Digital Tools

1. The NHS Digital Team should connect with local Primary Care Networks to link in with Peer Support Workers, Social Prescribers and Community Connectors to promote the Digital Health Hub.
2. Explore training and nominating a Digital Champion within each Primary Care Network, GP practice or Patient Participation Group.

Outcome Two: Innovative Use of Digital Tools in Primary Care

3. Encourage Primary Care Networks to share innovative examples of digital tool use.
4. Ensure that all digital innovation is independently evaluated, focusing on patient experience and satisfaction.

Outcome Three: Increasing Public Accessibility to Information About Digital Tools

5. Continuously liaise with Patient Participation Groups for feedback on the accessibility of communication materials
6. PPGs could be utilised more in research and feedback, especially if they are provided with knowledge, understanding and training.
7. Create a straightforward, accessible guide to the NHS app.

Why we looked at this

Introduction

Healthwatch Norfolk have been commissioned by Norfolk and Waveney Integrated Care System (ICS) to conduct a three-year piece of work investigating digital tools and digital access to primary care in Norfolk and Waveney.

This report is a continuation of the work conducted in year one to find out how patients have been digitally accessing and attending doctors' appointments.

In year one of the project, Healthwatch Norfolk were interested in finding out how the public have been using digital tools (e.g., the doctors' surgery website, NHS app and video consultations) to:

- make appointments.
- attend appointments at their doctors' surgery.
- seek information and advice about healthcare.
- order repeat prescriptions.
- access any other information, advice, or support from their doctors' surgery.

For year two, this report will be looking at the introduction of the Norfolk and Waveney Shared Care Record (launched in March 2023) and public awareness of the NHS app to digitally access healthcare. This type of work is important due frequent updates to digital tools used to access primary healthcare and to see how they have been transformed in line with national guidance and to keep up with patient demand. This report will explore examples of innovative uses of digital tools within GP surgeries to illustrate how primary care is evolving to improve access.

All the digital tools, facts and figures quoted in this report are correct as of March 2023 and may have changed since they were published.



Digital Tools in Primary Care



What are Digital Tools?

Millions of people use their mobile phone, tablet or other electronic devices every day to look up information, make reservations and to buy things online. Health and social care providers are following this trend by enabling members of public to access and book appointments for local health services online. The COVID-19 pandemic saw a fast increase in the adoption of digital tools being used as a digital front door for patients to receive information and communicate with their doctors' surgery.

Digital tools within the NHS and social care sector are items of technology, websites, apps or online resources that offer patients another way to access healthcare, including their doctors' surgery. Using digital tools within primary care should improve the quality and access to patient care. Please refer to appendix 2 for a diagram of the digital tools mentioned in this report.

Why are Digital Tools Important?

Access to support from a Doctor, Nurse or Healthcare Practitioner is becoming more difficult as the demand for support has reached an all-time high.

In October 2022 GP practices across England delivered a record 36 million appointments, the highest number since NHS Digital began publishing the number of appointments (including COVID-19 injections) since December 2020 (NHS Digital, 2022a). A recent report from the Office of National Statistics (ONS, 2022) revealed that nearly a third of survey respondents (29%) find it difficult to contact their GP practice and more than half (52%) of people who made an appointment in December 2023 reported that doing so was difficult or very difficult. Their report highlighted that 22% of respondents reported not being able to get a GP appointment at all and one-in-five (20%) adults reported managing their condition themselves because of barriers they experienced when making a GP appointment.

During general patient engagement at Norfolk doctors' surgeries, Healthwatch Norfolk noticed a rise in the number of patients telling us they were unhappy with waiting times on the phone to get an appointment, that they were unsure of the triaging processes and that patients were expressing general negativity with access to the primary care

services available to them. As a result, Healthwatch Norfolk (2022a) carried out targeted engagement between May and August 2022 to find out if patients are aware of the health service options available to them to see where misinformation or misunderstanding occurs. Many of the patients that Healthwatch Norfolk spoke to for this project did not use digital tools to book appointments very often. Some patients reported that they were unable to use the online system because they found it confusing or considered themselves to be “computer illiterate”. Patients who were able to use digital tools to access their surgery reported being happy with using the system and how it worked. Patients often received a response to their online query quickly, “I sent in a form last night and was in this morning for an appointment” (Healthwatch, 2022a).

The Department for Health and Social Care released a policy paper in June 2022 stating that using Digital Tools to access primary care could be a way to easing this pressure (DHSC, 2022a). The Government’s ‘Plan for Digital Health and Social Care’ is part of a long-standing NHS policy objective to support professionals within primary care to provide and encourage digital access to their services. The aim is to provide a health and social care system that will be much faster, more effective, and deliver more personalised care (DHSC, 2021).

Digital tools are transforming how patients and healthcare professionals can interact. They have the potential to offer patients holistic, patient-centred, and tailored care from primary care professionals, enabling higher quality care, faster healthcare access and more equitable care (Neves and Burgers, 2022).

Potential Benefits of Digital Tools for Accessing Primary Care

Digital tools offer patients the opportunity to:

- maintain independence and control over their own care
- manage long term health conditions
- access advice about self-care for minor ailments
- save time by accessing services digitally

Digital tools offer primary care professionals the opportunity to:

- extend the healthcare services on offer
- support patient wellbeing
- improve the quality, efficiency of care
- improve the patient experience
- support more integrated care

- facilitate a greater choice and flexibility in how primary care is accessed and delivered via online consultation systems and remote consultations
- support health and social care providers to plan, design and deliver services in a more personalised way while saving time for staff

Potential Limitations of Digital Tools for Accessing Primary Care

The growing demand for access to primary care services can also mean that digital tools can become a barrier to accessing healthcare appointments (Neves et al., 2020). Doctors' surgeries are using digital tools to try to improve access and efficiency, but Bondaronek et al. (2022) outlined the barriers that patients are facing when using digital tools, including:

- a lack of skills, knowledge, and training in how to use them.
- limited access to any digital tools.
- experiencing low levels of efficiency when using them to access primary care.
- a lack of access to technical support.
- a reduction in interpersonal communication with doctors.
- concerns about data privacy.
- having the confidence to use them.
- lack of belief in the usefulness of digital tools

Digital Transformation Strategic Plan and Roadmap

Norfolk and Waveney Integrated Care System (ICS) have created a "Digital Strategic Plan and Roadmap" that outlines their intended aims for digital healthcare transformation over the next three years. The Executive Summary can be seen in appendix 4. By engaging with over 250 staff and patients, the plan has been created and developed by Norfolk and Waveney ICS "to deliver better, more personalised and easier to access care for the people of Norfolk and Waveney" (Norfolk and Waveney ICS, 2023). The transformation will focus on investment in "key digital and data capabilities" (Norfolk and Waveney ICS, 2023), which will include access to the Norfolk and Waveney Shared Care Record, a single Electronic Patient Record across the county's three main hospitals and the creation of a digital front door to access healthcare via the NHS app.

The key aims for this strategy include:

- improving communication between different parts of the healthcare system so that people only tell their story once.
- delivering a single Electronic Patient Record (EPR) across all three acute Trusts (hospitals) so staff can access the same information about patients wherever they attend.

- expanding virtual services, so that people can be cared for in their own home, using the latest technology to monitor their progress remotely.
- expanding how healthcare staff store, interpret and use data to help the ICB plan services more effectively, focusing on the people who need the most help.

The next section of this report will explore the Norfolk and Waveney Shared Care Record and NHS app. Other examples of digital tools mentioned within this report can be found in appendix 2.



NHS App



Over 30 million people have downloaded the NHS app since April 2018 (NHS Digital, 2022a) and over 40 million people have an NHS login with over 65 million GP record views being recorded since it launched four years ago (DHSC, 2022b). In 2022, seven million new NHS app sign-ups were recorded and it was one of the most popular free health apps to be downloaded that year (DHSC, 2022b). Norfolk and Waveney were the first area in the East of England to launch the NHS app in April 2019. The UK government has already met its target to have 68% of people in England registered with the NHS app by March 2023 and is on track to meet its second target to have 75% of people registered with the app by 2024 (NHS Digital, 2022a).

The Department for Health and Social Care (DHSC), NHS England and NHS Digital have revealed plans for several new features to be added to the NHS app in 2023 through their Plan for Digital Health and Social Care (DHSC, 2022a).

In 2022 the NHS app allowed patients to view their GP record (personal health record) and test results and book their Covid-19 vaccination. More than 28,000 bookings for Covid-19 jabs were made via the app in the first four weeks since the feature was added to the NHS app in November (DHSC, 2022b). Over 22 million repeat prescriptions were ordered through the NHS app in the last 12 months (DHSC, 2022b).

The Department for Health and Social Care (DHSC) announced that the app will soon allow patients to book flu vaccinations, the ability to access letters and forms, for example: pre-consultation questionnaires and the NHS app will enable patients the ability to receive secure messages from their Doctors Surgery (NHS Digital, 2022a). The NHS app will also allow patients to view hospital referrals and appointments, book, change and cancel appointments and support them to find supporting information ahead of their appointments, (for example: hospital maps).

This is a full list of functions coming to the NHS app: (NHS Digital, 2022a)

- View upcoming and past appointments at a hospital or other appointments.
- View current and past medicines or add a record of their own.
- View test results from their hospital and other healthcare providers.
- View care plans from their hospital or other care provider or add their own.

- Record symptoms and add to their health journal.
- View links or documents shared by their health team or add their own.
- Choose and manage information they share with health teams.
- Fill in a consultation form.
- See details of visits and treatments.
- View clinical documents.
- Send messages to their health team.

The Government's 'Plan for Digital Health and Social Care' (DHSC, 2022a) reports that the NHS app will be at the heart of digital transformation plans in addition to £2 billion of funding to support electronic patient records to be in all NHS trusts and help over 500,000 people to use digital tools to manage their long-term health conditions in their own homes. The long-term plan for the NHS app involves turning it into a front door for the NHS, delivering on the NHS Long Term Plan (NHS Digital, 2022b) to make more patient access to care centred on the use of digital tools (DHSC, 2021).



Figure 1. A screenshot of the NHS app on a smartphone



Norfolk and Waveney Shared Care Record



The Department of Health and Social Care (2021 and Ellis, 2022) have stated that by March 2024, at least 80% of health and social care providers will have a digital care record system in place that can connect to a shared care record. The development of Shared Care Records formed part of the 2019 NHS Long Term Plan that called on health services to deliver more person-centred care (DHSC, 2021). This would mean that patients would have online access to their electronic health records.

What is the Shared Care Record?

The Shared Care Record is a way of bringing a person's health records together from the different organisations involved in their health and social care. The health records would then be visible to frontline health and social care professionals, but only at the point of care, in a read-only view. The Shared Care Record should allow the following organisations and professionals to view your health record, if necessary:

- Doctors Surgeries
- NHS 111/Out of Hours Service
- Social Care Providers
- Emergency Department
- Outpatient Departments
- Local Hospitals
- Maternity Service
- Mental Health Practitioners
- Care Practitioners

What information will be seen?

Only information that is appropriate for the health and social care professional to view will be available for the purpose of direct care. The type of information that will be available to view could include:

- Dates and outcomes of hospital visits
- Upcoming appointments
- Referrals
- Prescribed Medications

- Allergies
- Investigations & Diagnoses (e.g., blood tests & scan results)
- Care and Support Plans
- Reviews and review dates
- Correspondence exchanged between health and care organisations

The Norfolk and Waveney Integrated Care System (ICS) brings together local NHS organisations, councils, and wider partners to deliver joined up health and social care. The Norfolk and Waveney ICS is working on delivering a Shared Care Record for local people and communities of Norfolk and Waveney. This will involve making health and social care records available between the following organisations:

- Norfolk and Waveney GP practices
- NHS Norfolk & Norwich University Hospital
- NHS James Paget University Hospital
- NHS Queen Elizabeth Hospital
- Norfolk Community Health and Care
- East Coast Community Healthcare
- Norfolk County Council
- Norfolk and Suffolk NHS Foundation Trust
- Community Services (providers of health visiting services)
- Integrated Care 24 (111 and out of hours provider)

Norfolk and Waveney ICS are responsible for ensuring that all information available via the Shared Care Record is shared legally, safely, and responsibly according to the “My Care Record” Information Sharing Framework. This Framework outlines the conditions under which health and social care professionals can share a patient’s information for the purpose of their care. For more information, please visit:

<https://improvinglivesnw.org.uk/our-work/healthier-communities/digital/shared-care-record/>

Benefits of having a Shared Care Record

Health and social care workers do not already have access to people’s full health and care records. This means that patients can be asked to repeat their medical history when being seen by a different health or social care professional.

The idea behind bringing in a Shared Care Record to Norfolk and Waveney means health and social care professionals will be able to access information about the care and treatment a patient has received across all services. This should enable professionals to make a more informed decision and reduce the number of times a

patient has to recall their medical history. Other potential benefits from having a Shared Care Record in Norfolk and Waveney include:

- Reduced waiting times for health services. If health professionals have a patient's medical history to hand, it means they should spend less time contacting different settings and departments seeking information about the patient's treatment history.
- Reducing the number of times a patient may have to repeat sensitive, or uncomfortable details about their medical condition to multiple health professionals.
- More efficient diagnostic testing because better communication through the Shared Care record should avoid tests being repeated unnecessarily.
- Patients experience joined up, holistic care from multiple health and social care professionals.
- Providing patients with the reassurance and confidence that as a patient has a complex medical condition, the teams that are treating them are fully informed about their treatment and care needs.

Year One Report and Recommendations

In the Healthwatch Norfolk Year One report, 'Patient and professional experiences of using digital tools in primary care', the following recommendations were made to the NHS Digital Team at the Norfolk and Waveney Integrated Care Board, as shown in the table below.

Recommendation Number	Theme / Digital Tool	Recommendation
1A	Public Awareness	Consider production of one clear, concise, and accessible document to be available to patients detailing the types of digital tools available to them for accessing their doctors' surgery. This document should include where to go to for support accessing the digital tools.
1B		Map the digital tools available for the public and avoid phrases like 'online consultation system' including a brief, descriptive glossary which is also available in an easy read format.
1C		Publicise the different types of digital tools available to the public and where to access them through social media and advertising campaigns. Ensure that the public are aware of their choice to request a face-to-face appointment with a primary healthcare professional or to utilise one of the digital tools available to them.
1D		Ensure that all healthcare staff, have training or access to information regarding types of digital tools available to the public and knowledge of where to signpost if a patient asks for more support with them.
2A	Footfall	Consider the language and labelling used on Footfall. Survey respondents have reported that it takes a while to locate the right tab on Footfall to find the correct services or support for them. For example, the label 'consultation room' is confusing.
2B		Ensure the Footfall layout is optimised for assistive technology on smartphones.

2C		Assess how important messages and Covid related news banners could be less obstructive for Footfall users.
2D		Promote the website tour function.
2E		Create a downloadable and accessible user guide to accompany the Footfall website tour.
2F		Ensure that news and information on Footfall is up to date and relevant.
3A	NHS app	Publicise what the NHS app does (in addition to the creation of a Covid Pass) and explain how it is different from the NHS Test and Trace App.
4A	Airmid and Patient Access App	Raise awareness of the availability of these apps as an alternative digital tool.
5A	Video Consultations	Encourage primary healthcare professionals to offer the option of video consultations to patients. If primary healthcare professionals offer a patient a video consultation, ensure that clear instructions are given before the appointment explaining how to access it and if any software or apps need to be downloaded.

To ensure that these recommendations formed part of Healthwatch Norfolk's plan and outcomes for the Year Two work, these recommendations have been numbered to show how they correspond to each section of the project plan and outcomes. These can be found listed in full in appendix 1. We have also featured two of the digital tools being invested in over the next three years as part of the ICB's plan for digital transformation, the Shared Care Record and NHS app.

Project Outcomes

This report is based on three outcomes, which are listed below.

Outcome One: Raising Awareness of Digital Tools

Raising awareness of the presence of the digital tools available to local people and providing opportunities for patient support and upskilling to be able to digitally access their GP surgery.

Outcome Two: Innovative Use of Digital Tools in Primary Care

The Norfolk and Waveney Integrated Care Board (ICB) has knowledge and examples of GP Surgeries using digital tools innovatively in Norfolk and Waveney to support digital access for residents.

Outcome Three: Increasing Public Accessibility to Information About Digital Tools

Norfolk and Waveney residents can access information regarding the NHS app and Shared Care Record.

How we did this

Outcome One: Raising Awareness of Digital Tools

Raising awareness of the presence of the digital tools available to local people and providing opportunities for patient support and upskilling to be able to digitally access their GP surgery.

For Outcome One, Healthwatch Norfolk and the Norfolk Library Service co-hosted an online event for GP Practice Managers and Patient Participation Group members on 31st August 2022. This event provided attendees with information about the Digital Health Hub, which is run by the Norfolk Libraries and Information Service as part of the Healthy Libraries Connect scheme.

The Healthy Libraries Connect scheme involves local Norfolk libraries holding regular events to help support people's health and wellbeing and reduce social isolation and loneliness. Norfolk Library Service runs a range of activities from singing and colouring groups to a reading project aimed at people who are unable to leave their home.

Digital Health Hub

Norfolk Libraries Digital Health Hub supports people to gain digital skills to access reliable health information. This support can help people access online information about long term conditions, to access online GP services, search the NHS website and provides support with using the NHS app through a short one to one session with a Digital Health Champion. Support via the Digital Health Hub may be offered online but will normally take place in a Norfolk library during library opening hours.



Figure 2. Social Media Advert for the Online Digital Health Hub Event

The online event was promoted via the Healthwatch Norfolk and Norfolk Library Service's website, social media and local connections. The event was attended by 20 people and included GP Practice Managers and local Patient Participation Group members.

During the session Healthwatch Norfolk and the Norfolk Library Service talked about:

- what the Digital Health Hub is and what it can offer
- how the Digital Health Hub can upskill patients to digitally access their GP surgery
- how Patient Participant Group members and Practice Managers can become digital champions
- how patients can self-refer themselves to the Digital Health Hub

This online event ended with a question-and-answer session and all attendees were given contact details and further information about the Digital Health Hub from the presentation.

Outcome Two: Innovative Use of Digital Tools in Primary Care

The ICB has knowledge and examples of GP Surgeries using digital tools innovatively in Norfolk and Waveney to support digital access for residents.

For outcome two, Healthwatch Norfolk have researched local GP surgeries that use digital tools in an innovative way to produce five Case Studies. These were conducted through interviews with GP practice staff, local patients and Patient Participation Group members at the nominated five practices to find out more about their use of digital tools.

We wanted to find out:

- What type of digital tool or access they provide for their GP surgery?
- How it enables digital access to that GP Surgery?
- What makes their use of digital tools innovative?

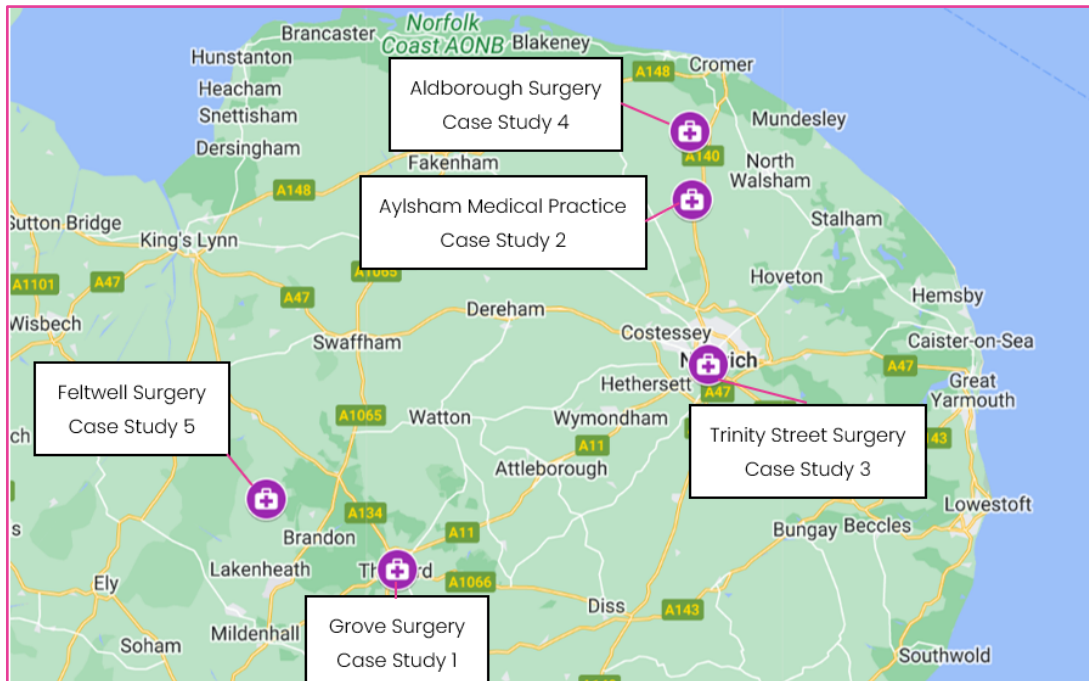


Figure 3. A map showing the location of the 5 GP Surgeries

Outcome Three: Increasing Public Accessibility to Information About Digital Tools

Norfolk and Waveney residents can access information regarding the NHS app and Shared Care Record.

For outcome three, Healthwatch Norfolk planned and conducted four focus groups with Patient Participation Groups and GP Practice Managers to find out what people living in Norfolk and Waveney can access or have accessed regarding the NHS app and Shared Care Record. Each focus group lasted about an hour and a half and was structured so that Healthwatch Norfolk could find out about their knowledge of the NHS app and Shared Care Record. The Focus Group Guide and structure can be seen in appendix 3. For the focus group section concentrating on the NHS app, we asked the following questions:

- Do you use the NHS app regularly?
- If so / If not, why is this?
- What would encourage you to use the NHS app more?
- Do you need any information or support to be able to use the NHS app more? If so, in what format? (1:1 training / video / leaflet)
- What do you like / not like about the NHS app?

For the focus group section concentrating on the Shared Care Record, we asked the following questions:

How aware are you of the Norfolk and Waveney Shared Care Record?

What do you know about the Norfolk and Waveney Shared Care Record?

What would you like to know about the Norfolk and Waveney Shared Care Record?

How would you like to find out more about the Norfolk and Waveney Shared Care Record? (For example: videos / leaflet / public events)

In addition to holding the focus groups, Healthwatch Norfolk shared information provided by Norfolk and Waveney integrated Care Board on our social media pages (including Instagram, LinkedIn and Facebook), our Healthwatch website and we worked with the NHS Digital team to make sure that the initial information about the Shared Care Record was clear and accessible.

The last part of this work involved Healthwatch Norfolk working with key members of Norfolk and Waveney ICB to create a video about the Shared Care Record, outlining what it will mean for people living in Norfolk (see figure 4).



Figure 4. A picture of the Shared Care Record Video created by Healthwatch Norfolk.

Our Head of Communication and Marketing interviewed Dr. Zac Blake and created the video (which was available for sharing by other health and social care providers) as a resource that answers some of the frequently asked questions the public may have. The video can be found on our website here: <https://healthwatchnorfolk.co.uk/healthwatch-norfolk-resources/shared-care-record/>

Since going live, the Shared Care Record page on the Healthwatch Norfolk website has been viewed over 200 people.

What we found out

Outcome One: Raising Awareness of Digital Tools

For outcome one, Healthwatch Norfolk has produced a case study highlighting what the Digital Health Hub is, the services that are provided and how to become involved with the Digital Health Hub. This case study was based on an interview with one of their Digital Health Champions.

Case Study: Norfolk Libraries Digital Health Hub



Norfolk Libraries started a Digital Health Hub pilot in their flagship Millennium library in Norwich 2019. What started as a pilot scheme has now become 'business as usual' in all 47 of their libraries.

Norfolk Libraries' Digital Health Hub supports people to gain digital skills, so they can access reliable health information for long term conditions and learn how to use online GP services, search the NHS website and look at the NHS apps library. People can go to their local library to access free Wi-Fi, use a computer for free and get assistance from a library assistant. For example, a member of the public can visit a Norfolk library if they need help with accessing their GP online (see figure 5).

"They do need to come to the local library, because where else are you going to be able to go to get free Wi-Fi or be able to use a computer for free, and get assistance from a library assistant as well, to be able to access your GP online?"

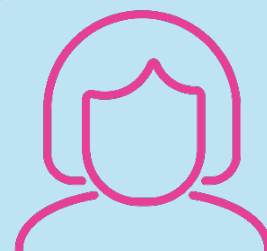
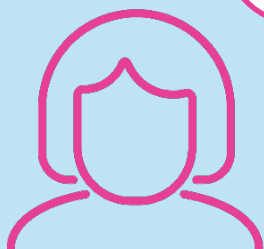




Figure 5. A Poster for the Digital Health Hub

Library staff emphasised the importance of Digital Health Hubs since the COVID pandemic, with people becoming concerned how they would access services, get hold of people or have online appointments.

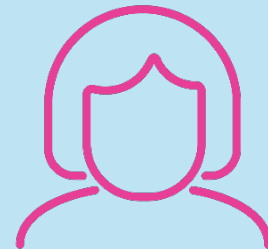
"I can't sort of emphasise enough how important it's been to be able to offer these services to people, because you do get a lot of vulnerable, elderly and digitally excluded people, and they do need help and support. If it wasn't here, then they would be struggling, which would be a real shame."



People can sign up to short one-to-one sessions to help them learn digital skills so they can use their GP services online or access the NHS website. One-to-one sessions are available in Norfolk Libraries or online over Zoom (staff can help people to get started with Zoom). Whilst support may be offered online, it would normally take place in a Norfolk library (and this would be during library hours).

Sessions are tailored to the individual, so if someone has never used a computer before but wants to learn how to use their GP website, the first step may simply be having a chat and getting them comfortable with using a computer.

“If you've got someone that's literally never used a computer before but wants to get started to be able to use GP services, is literally making them comfortable with a computer. So it might be making them a cup of tea and sitting them down and having a chat beforehand.”



People can go through the courses on an online learning website called 'Learn My Way', which is provided by the Good Things Foundation and helps people to develop their digital skills (see figure 6). The Learn My Way website can be found at: <https://new.learnmyway.com/>

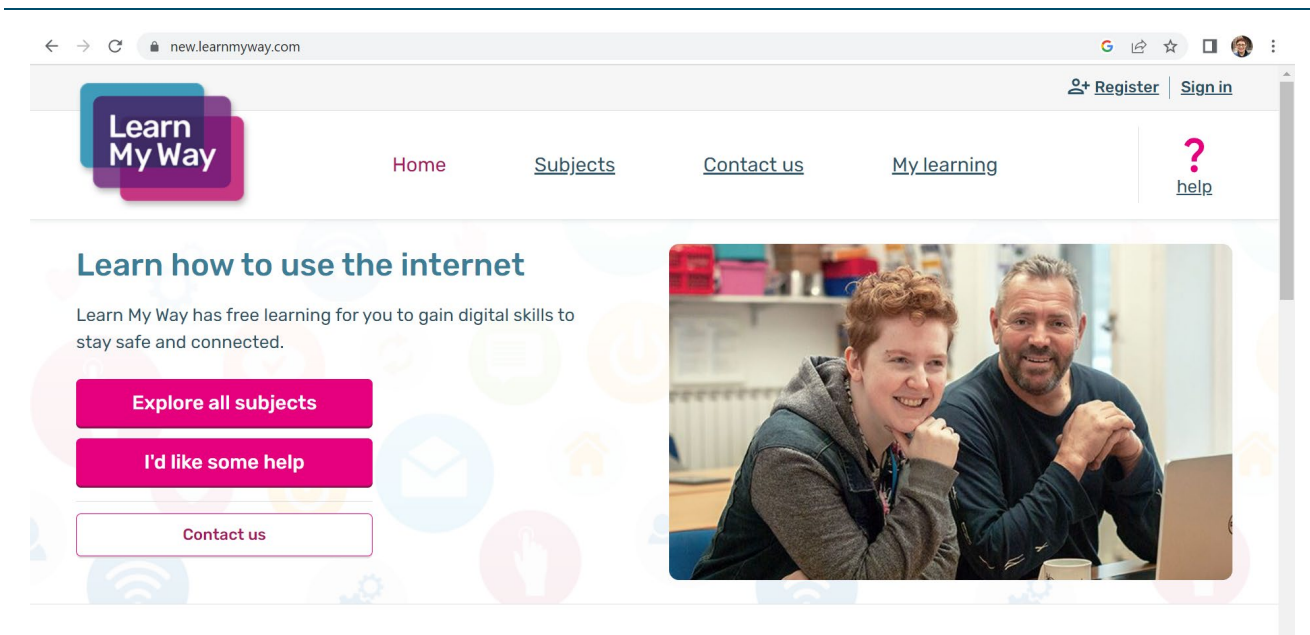


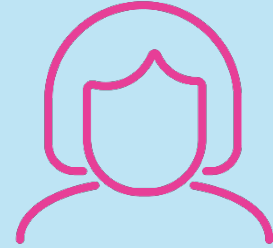
Figure 6. A Screenshot of the Learn My Way platform.

For example, there are courses on how to use a computer, internet skills, online safety and improving your health online.



Overall, there is no typical length of support as some people go through the modules quickly. However, others may lack confidence, so might go through the same module multiple times before they feel confident and comfortable enough that they have done it. This is why staff go at the person's pace.

"I think one of the key things when you do these sessions, is that you do just have to be very open with what you're doing and realise that not everybody is the same".

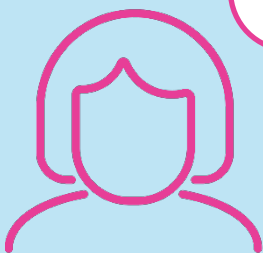


Digital Health Champions

Norfolk Libraries have Digital Health Champions across every library branch. A Digital Health Champion is a designated person in each library branch, who is responsible for helping with Digital Health Hub sessions. For example, they might help someone with Learn My Way, learning how to use GP services online or making a vaccination booking.

They also look out for different health campaigns during the year and put posts out on their social media outlets. Although libraries have a designated champion, any library assistant can help with the Digital Health Hub sessions, it does not have to be the person who is a Digital Health Champion as most library staff are familiar with the Learn My Way platform.

"Luckily you could literally pluck out any library assistant and they would be able to go through it. It's just that our Digital Health Champions might just have sort of a little bit more knowledge or a bit more emphasis."



Norfolk libraries also offer other digital support. For example, they have a job help club, where people can bring in their CVs and look at the job websites. They also help people who bring their devices in and need help with software on their laptop or tablet.

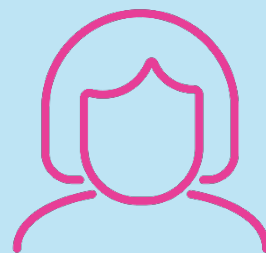
Digital Health Hub User Example

An elderly 92-year-old customer booked in at a Norfolk Library for a Digital Health Hub session to learn more about his online GP services, navigating the NHS website and other medical-related websites. The customer had two one-hour sessions with staff, going through the Learn My Way modules. Staff commented that *“he was phenomenal on the computer”*.

The customer went through the modules and is now planning on registering online with his surgery. He was very grateful to be able to go through it all with a library assistant rather than having to navigate it all independently.

Staff at the library encourage anyone who is digitally excluded or who may not feel confident with devices, to go to a Digital Health Hub for support.

“I think I'd say that anybody who's digitally excluded or doesn't feel confident with devices, that we can help and try and get you on the way there.”



Promoting the Digital Health Hub

For year two of this project, Healthwatch Norfolk worked in partnership with the Norfolk Library Service, the Digital Team at Norfolk and Waveney Integrated Care Board and Norfolk County Council representatives to create a plan to promote the Digital Health Hub. This involved looking at our understanding of what a Digital Health Hub is, the services that are provided and how to make sure that members of the public in Norfolk and Waveney know about the Digital Health Hub.

To illustrate the work that has been put into promoting the Digital Health Hub, Healthwatch Norfolk interviewed an NHS Digital Project Manager to show how this work has progressed.

“We've had collaborative meetings with Healthwatch Norfolk, Norfolk County Council and others in the library service and focused first on the Digital Health Hub.”

The Digital Health Hub is currently promoted on Footfall in the top left corner of the website, which is currently used by 85 doctors' surgeries in Norfolk and Waveney. One thing our research noted is that the Digital Health Hub tab:

- Is not easy to locate.
- Does not make it clear what a Digital Health Hub is.

“We've gone through, and we've collaboratively changed the wording [on Footfall] to try to make it more inclusive and representative of what it [the Digital Health Hub] actually does.”

The other issue with the current way the Digital health Hub was being promoted was a need to not only promote it online *“I think we've all recognized that you've got to have some sort of digital skills to actually get on the GP website which is a bit of an oxymoron”*. Therefore, the Digital Health Hub will be promoted in additional ways, which are illustrated in figure 7.

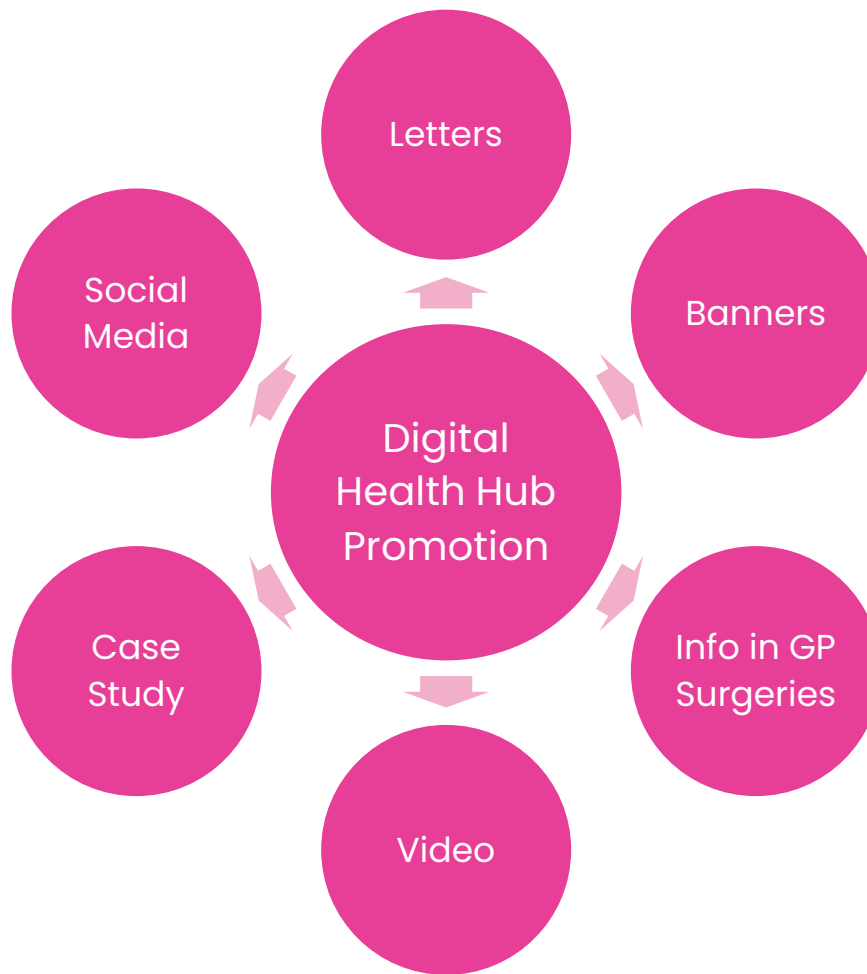


Figure 7. How the Digital health Hub will be promoted in the future.

There will also be a “small paragraph that will go on the outpatient paper letters” telling patients about the Digital Health Hub and a brief statement about where to go for health and digital inclusion support.

Healthwatch Norfolk also worked with the Norfolk Library Service to produce a video about the Digital Health Hub (see figure 8). This will be available as a resource to promote the Digital Health Hub via social media and Norfolk Library Service and Healthwatch Norfolk’s websites.



Figure 8. A still of the video that will be used to promote the Digital Health Hub.

Outcome Two: Innovative Use of Digital Tools in Primary Care

For Outcome Two Healthwatch Norfolk produced five case studies that demonstrate Norfolk GP surgeries using digital tools innovatively to support digital access for citizens. The case studies include Grove Surgery, Aylsham Medical Practice, Trinity Street Surgery, Aldborough Surgery and Feltwell Surgery. A map of the GP surgery locations can be seen in figure 3.

These case studies are examples of digital tools being used in a different way or new digital tools being introduced within a doctors' surgery. Please note that these are a summary of the digital tools and their success has not been evaluated.

Case Study One: Grove Surgery

Grove Surgery introduced QR Codes to signpost patients to useful information and make it more convenient for some patients to complete forms (e.g., blood pressure forms). Grove Surgery is part of a wider network of three GP practices which form the Breckland Alliance Primary Care Network (PCN). The surgery is located in Grove Lane in Thetford (see figure 9), although the practice also uses additional rooms at the Healthy Living Centre (also in Thetford). Grove Surgery serves a population of approximately 13,400 patients. A team of five GP partners work at the practice, as well as two nurses who provide nurse led clinics.

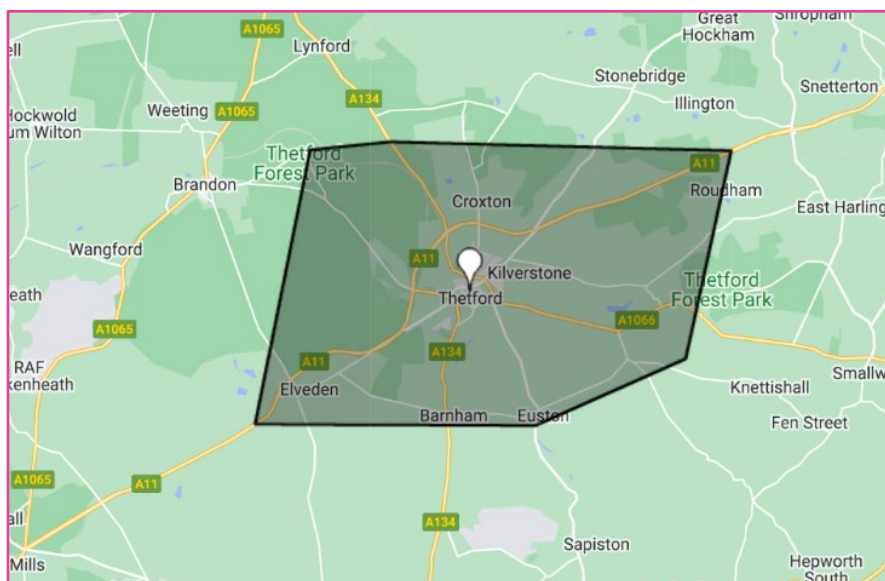


Figure 9. A map showing the catchment area for the Grove Surgery.

Before the Surgery introduced QR codes, staff would often send a text message to patients with preventative advice (e.g., information on cholesterol or lifestyle changes). However, the Surgery found that not all patients wanted to receive text messages or found that way of communicating helpful. This meant that some patients could miss out on information.

"I'll usually say to the patient, 'I'll send you some information about how to improve your cholesterol,' or whatever it might be. But then I've had it a few times where they've left the surgery, and then it says they don't sort of agree to have text messages sent. So then I've missed them."

Staff at the Surgery have found that QR codes are good way of getting information to the patient 'there and then' while they were still sat in the room.

"This all cuts out that they get home, they forget about it. So it's here, and all they do is get their phone out, hold it up. The QR code takes them straight to that page on the Grove website. And then, yeah, it's a lot easier for them."

Grove Surgery have also started putting leaflets back into their waiting area since they were removed due to COVID-19 regulations. However, they found that most of the places they sourced their information from previously, do not produce physical leaflets anymore. Therefore, Grove Surgery compiled a range of QR codes, so they could get information to their patients easily. For example, staff at the surgery said:

"I can't tend to sort of order leaflets from people. So yeah, trying to get that information to them in a more digital way, it just seemed to be easier for everyone, really."

The Surgery also has a range of self-help QR codes available (see figure 10). For example: If there is a patient needing wound care, a Doctor or Healthcare Practitioner can present them with a QR code, which will take them to some information about nutrition and ways that they can help heal the wound at home. The Surgery also uses QR codes to signpost patients to a range of useful information, including information on Warfarin diets, alcohol and drug behaviour changes.



Figure 10. An example of a variety of QR codes that patients can use.

As well as using QR codes to signpost patients to resources and information, Grove Surgery has also used QR codes to make it more convenient for some patients to complete online forms. For example, staff at the Surgery noticed that since the QR codes were introduced, some patients were even completing their pill review whilst they were at the Surgery for something else.

Patients are asked to scan a QR code, which takes them straight to the Grove Surgery website, where they can then fill in the sections they need to and the information goes to the surgery straightaway. This is shown in the 'Blood Pressure Diary' example below.

Blood Pressure Diary

One specific example of how Grove Surgery have utilised QR codes is by adding a QR code to the bottom of their Blood Pressure Form. Before the surgery introduced QR codes, they would ask their patients to take and record seven days' worth of blood pressure readings at home. These readings would be recorded on a form, which the patient would need to return to the surgery. However, they realised that patients do not always have the time to come back to the surgery, especially if they are working or have busy lives.



Home Blood Pressure Diary

Please read these instructions carefully.

Prior to starting HBPM, you should measure your blood pressure in both arms to determine which arm should be used for future measurements. The arm that gives the higher systolic reading (top number) should be used for all future readings.

You should place the cuff on your arm with the lower edge of the cuff approximately 2cm above the bend in your elbow.

No tight or restrictive clothing should be worn around the arm.

You should be seated, remain silent and be at rest for a minimum of five minutes before taking a measurement and should not have smoked, eaten, drunk a caffeinated drink or undertaken physical activity within the past thirty minutes. You should also avoid measuring their blood pressure with a full bladder.

Please monitor and record your blood pressure at home for seven consecutive days. On each day, monitor your blood pressure on two occasions, in the morning (between 06.00-12.00hrs) and again in the evening (between 18.00-00.00hrs). On each occasion take a minimum of two readings, leaving at least a minute in between readings. If the first two readings are very different, take a further reading.

Use the table overleaf to record all your blood pressure readings. The numbers you write down should be the same as those appear on the monitor screen, do not round the numbers up or down.

Once you have completed your readings, please scan the QR code below using your smartphone camera, and this will direct you to our website to record and submit your readings to the surgery. Please follow the on-screen instructions.



Figure 11. An example of the QR code for the Home Blood Pressure Diary

By adding a QR code to the Blood Pressure Form (see figure 11), patients can now scan the code, which directs them to the Grove website to record and submit their readings. The blood pressure readings then go through to the surgery by Footfall, so patients do not have to come back into the surgery to drop the form off. Not only is this more convenient for some patients, but it also saves the surgery paperwork as the readings go straight to the surgery.



Case Study Two: Aylsham Medical Practice

6 Aylsham Medical Practice have been using the Voice Connect automated telephone service created by Patient Partner, since May 2022. The automated telephone service is available 24 hours a day, 7 days a week. Reepham and Aylsham Medical Practice is a four partner GP practice in rural Norfolk (see figure 12 and figure 13), with surgeries in the market towns of Aylsham and Reepham. Both surgeries have a dispensary. Aylsham Medical Practice serves a population of around 4,200 patients. They operate a triage system in the mornings from 8 am to 10 am and this system has been in place since before the COVID pandemic hit.

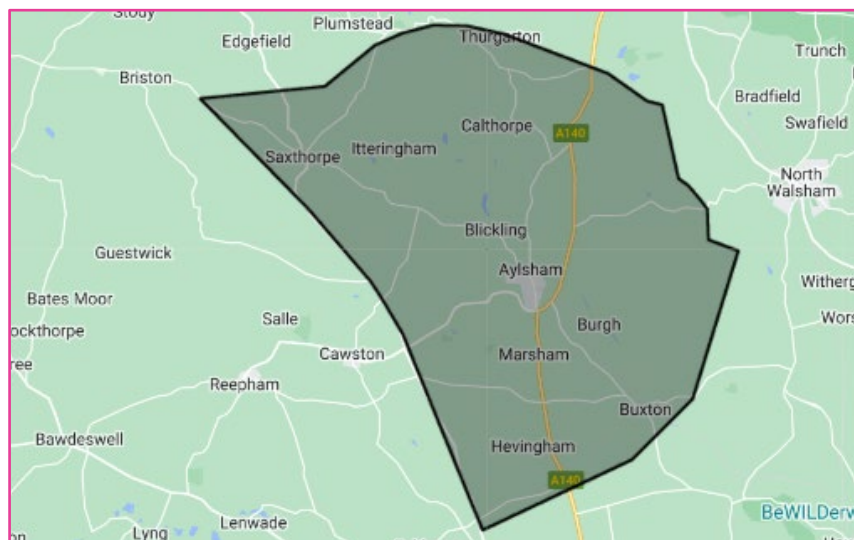


Figure 12. A map showing the catchment area for Aylsham Medical Practice.

With the automated telephone service patients can book or cancel appointments, order repeat prescriptions, or leave a message to request a call back from the team. Aylsham Medical practice have also linked the telephone system to booking an appointment.



Figure 13. A photo of the front of Aylsham Medical Practice

Voice Connect is an automated telephone system, so when a patient rings in they can leave a message on the system stating the reason for wanting an appointment. The recorded messages can be up to 59 seconds long and automatically go to the clinician for triage, so the call bypasses the reception staff completely. Expanding access to appointments within surgery can help reduce morning telephone congestion for reception staff. The system integrates with all current primary care appointment books, including the EMIS and SystemOne.

"It literally is a message, so it's 59 seconds, and the patient can say an awful lot in 59 seconds. We have now eight lines, so it's equivalent of eight receptionists, but it actually takes out the receptionist completely."

Patients put their date of birth or their telephone number in and then the system picks up their patient record. The message goes onto the surgery's clinical system as a complete record of what the patient has said (and stays on the patient record), rather than the receptionist having to put the information in a journal about what they have heard or what they feel is appropriate. This record can be helpful for the surgery to refer to as it is clear what patients have said.

The Aylsham Practice Manager said that using the Patient Partner- Automated Telephone Service has also saved the surgery clinical time, *"the process is much, much quicker, so it frees up significant clinical time for us."* Bypassing the receptionists, the system also benefits patients who do not want to speak to a receptionist.

“Before Patient Partner, the receptionist would sit for around five minutes with each patient on the phone and would put them on a list of people requesting to see a doctor or healthcare practitioner. A doctor or healthcare practitioner would ring back, which could take another five minutes.”

With the new automated phone system, the doctor or healthcare practitioner can listen to the message, look at the patient’s medical record and send a message back to the receptionist that decides whether they need to be seen that day or if there is another way to approach their issue.

There are a few patients that may struggle with this system and just want to speak to a receptionist. Therefore, there is an ‘option four’ on the phone, which allows a patient to speak to a receptionist after the automated message. The practice encourages patients to use the phone system first to save time and deal with as many incoming patient queries as possible.

Since the automated phone system was introduced, Aylsham Medical practice have taken around 17,070 calls through this service, saving the surgery an estimated 428 hours in total.



Case Study Three: Trinity Street Surgery



Trinity Road Surgery Patient Participation Group (PPG) works with the practice staff to maintain and improve the services available to their patients. They meet four or five times a year to discuss issues, concerns and opportunities which affect the community directly with the practice team.

Trinity and Bowthorpe Medical Practice is a two-site practice providing general medical services to around 11,029 patients overall (see figure 14), in the 4th most deprived decile. Trinity Street Surgery serves around 3000 patients. The surgery has been operating for over 100 years and employs a team of six GP partners, three salaried GPs, three practice nurses, one Health Care Assistant, two practice phlebotomists, four managers, three secretaries, four administrators and fourteen receptionists.

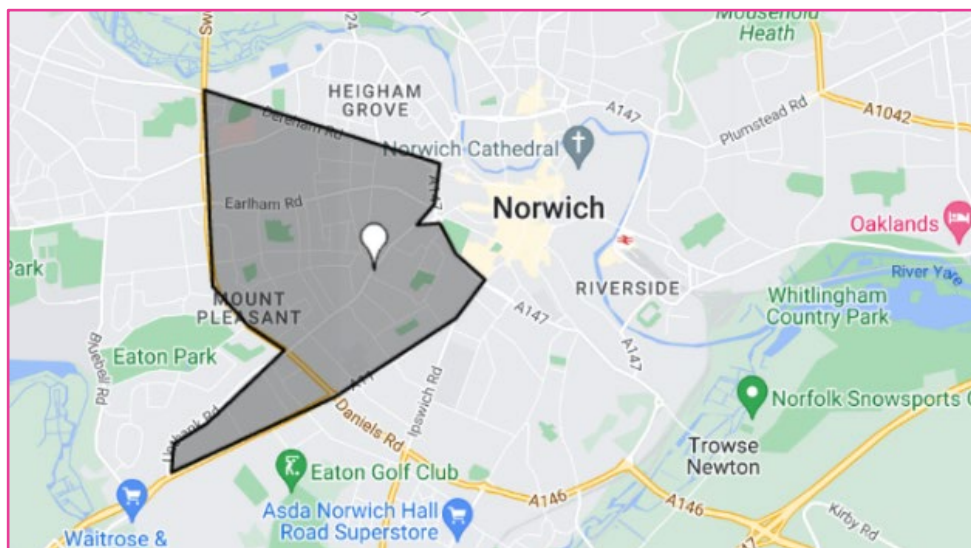


Figure 14. A map showing the catchment area for Trinity Street Medical Practice

Trinity Road Surgery (see figure 15) worked with their PPG to map the patient journey on Footfall, considering the accessibility of the language used and how easy Footfall is to navigate. They presented their findings to the Digital Team at the Integrated Care Board, who implemented the changes suggested by the surgery and PPG members.



Figure 15. A photo of the front of Trinity Street Doctor's Surgery

The Trinity Street PPG and Practice Manager spent a morning mapping the patient journey on Footfall, where they went through the wording and layout of the website.

"We put it [Footfall] up on the big screen in the meeting room. We put the website up, and we just went through every single button that was on there and they just gave me their honest feedback about what it was".

The PPG raised quite a few concerns about accessibility, being able to use the website and being able to navigate it. For example, there was a button for appointments which said, 'consultation room', but it was unclear to patients what this meant (see figure 16).

"They [PPG members] were like, "What is a consultation room?" And I was like, "Fair enough. What is it?" Why are we not just saying, "This is where you get an appointment?"



Figure 16. This is how Footfall looked previously. This is a screenshot of St. Stephen's Gate Medical Practice's Footfall page before the changes.

The Trinity Street PPG also discovered that it was unclear what the difference was between the 'reception' and 'admin' buttons on Footfall. The Practice Manager reported that, "picking a GP appointment wasn't clear and the Wellbeing advice centre didn't make much sense to them [the PPG members]".

From this feedback, the Digital Team at the Integrated Care Board has changed the 'Consultation Room' button to read 'Appointments' and renamed the 'Treatment Room' button, 'Health Advice', so it is clearer and easier to navigate for patients.

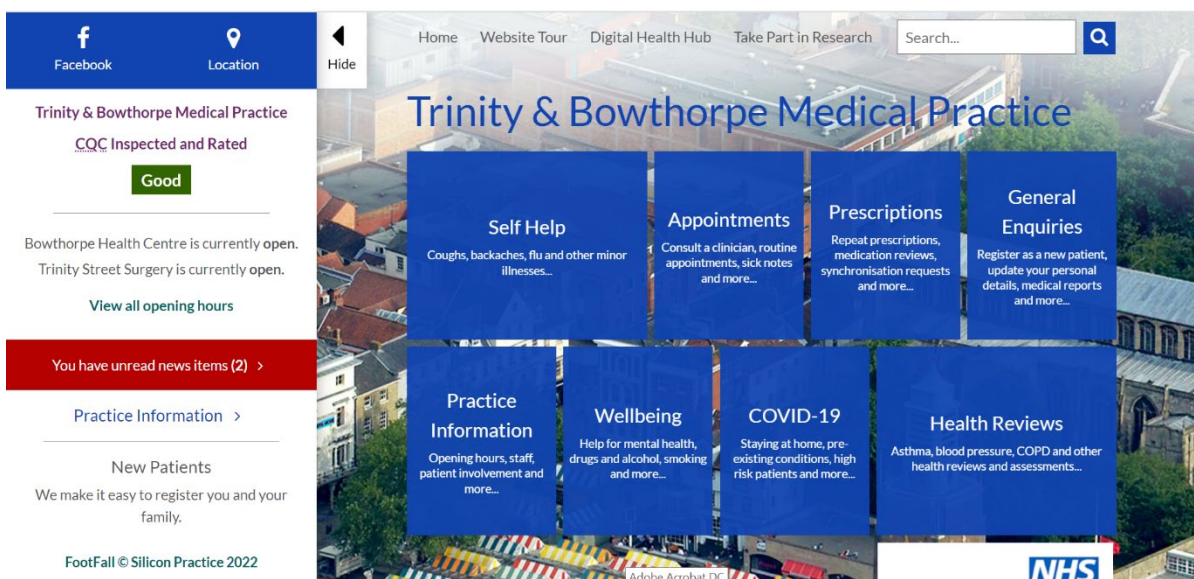


Figure 17. This is how Footfall looks as a result of Trinity Street PPG's work

The second part of the meeting focused on reviewing and editing the automatic responses sent to patients who complete forms on Footfall. This was to ensure that responses sent to patients were accessible, provided detailed, accurate advice and information and managed their expectations.

Following the PPG feedback, Trinity Road Surgery edited the automatic responses to ensure they were accessible, informative and clear. Staff made sure that replies sent to patients through Footfall referred to the specific form they had completed and didn't display a generic message e.g., "we'll get back to you in five working days" as this is not helpful to patients. The PPG members felt that having this generic phrase did the surgery a disservice because they were actually responding to patients much quicker than that, *"so the patient's thinking, "oh, gosh. No one's going to talk to me for five days. I'm now calling the practice as well as having done the form," when actually, we're getting back to them in a couple of hours."* The new look of the Footfall website is being piloted in Norfolk and will eventually be rolled out nationally.



Case Study Four: Aldborough Surgery



Aldborough Surgery serves Aldborough and the surrounding villages within a ten-mile radius (see figure 18). Historically, there has been some overlap with the neighbouring practices of Cromer, Sheringham, Aylsham and Holt. The surgery has over 3,500 registered patients and a team consisting of two doctors and nursing, administrative, dispensing, and managerial staff. The surgery is in a newly extended and refurbished custom built premises.



Figure 18. A map showing the catchment area for Aldborough Surgery

Healthwatch Norfolk spoke to the Aldborough Surgery Practice Manager regarding the digital evolution of their Patient Participation Group.

A Patient Participation Group (PPG) is a group of people who are patients of a surgery and want to help it work as well as it can for patients, doctors and staff. The NHS requires that every practice has one. The role of a PPG can differ between doctors' surgeries, but their core functions include:

- Giving local patients a voice in the organisation of their health care.
- Contributing to practice decision-making and consulting on service development and provision.

-
- Providing feed-back on patients' needs, concerns and interests and challenging the practice constructively (whenever necessary).
 - Assisting the practice and its patients by arranging voluntary groups/support within the community.
 - Communicating information about the community which may affect health care.
 - Promoting good health by encouraging and supporting activities within the practice.
 - Liaising with other PPGs in the area.

Due to the COVID pandemic, the ability for Aldborough Surgery PPG members to meet face to face became impossible. There has been a realisation that *"people don't necessarily want to come and sit in a committee room"*. The Aldborough Surgery Practice Manager noticed that *"people don't want to be tied down [to PPG meetings], although the community spirit was still very much there. People want to get involved when they want to get involved. But there's a difference between doing that as opposed to being, 'you are on this committee'"*.

As a result, the formal structure of the PPG was dissolved and Aldborough Surgery PPG now has a virtual presence, *"The whole purpose of the PPG is to link in with your community. They do but in a much more unofficial way."*

The Aldborough Surgery Practice Manager and Chair of the PPG devised a new way for keeping in touch with local patients and listening to their views about accessing care from the surgery. Their plan involved linking with Village Care, a registered charity that supports people living in Aldborough and links them to local community opportunities. Any health and social care feedback collected via the Village Care initiative is then fed back to the GP practice.

Aldborough Surgery have also developed a special area of their website called "Patient Voice" (see figure 19).



Figure 19. A Screen Shot of the 'Patient Voice' webpage.

"We have set up a, what I'm going to call, a virtual website which we're about to hit the button on". Photos of people working in the woods. There are updates of things going on in the surgery, there's loads of things for people to join. So it had all the details of what it is, where it is, what date it's on, and the contact details. Link to the community."

This part of the website aims to keep patients up to date about what's going on at the surgery, provide learning opportunities for the Surgery on patient needs and ideas, host surveys and receive feedback, provide health and wellbeing tips and links to all the local support and social opportunities available in Aldborough.

Patient Voice aims:

- Contribute to practice decision-making.
- Provide feed-back on patients' needs, concerns and interests and challenge the practice constructively whenever necessary.
- Assist the practice and its patients by arranging voluntary groups/support within the community.
- Communicate information which may affect health care.
- Give patients a voice in the organisation of their health care.
- Promote good health and wellbeing by encouraging and supporting activities within the practice and promoting preventive medicine.

“Aldborough Surgery sees its role as an integral part of the local community as important and works with their patients to make sure they really understand what matters to them.”



If you would like to visit the Patient Voice webpage, you can find it here:
<https://aldboroughsurgery.co.uk/practice-information/patient-voice/>

Case Study Five: Feltwell Surgery



In 2022, eight doctors' surgeries in Norfolk and Waveney participated in a six-week pilot that aimed to improve the patient experience of booking and attending appointments for Deaf patients and patients affected by hearing loss. One of the doctors' surgeries that took part was Feltwell Surgery.

Feltwell Surgery cares for over 5,000 patients in Feltwell (near Thetford) and the surrounding area (see figure 20). The practice is led by three GP Partners with the support of the practice manager and assistant practice manager. The clinical team includes one doctor, two nurses, one assistant practitioner, one advanced healthcare assistant and includes a team of nine administrative and reception staff. The dispensary team includes one manager and one assistant manager, seven dispensers and one assistant dispenser. The practice is open between 8am and 6.30pm Monday to Friday with extended hours on a Tuesday morning from 7.30 am and Thursday evening until 7pm.

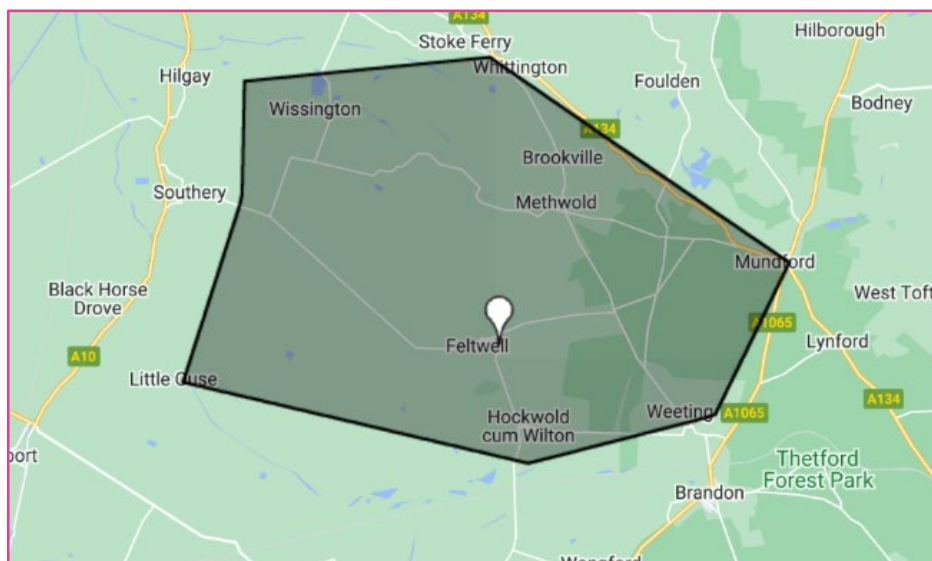


Figure 20. A map showing the catchment area for Feltwell Surgery

Between Monday 24th January and Friday 1st March 2022 Feltwell Surgery participated in a six-week pilot where they introduced digital technology to support Deaf patients and people affected by hearing loss to access and attend appointments. Feltwell Surgery had access to three pieces of digital technology: vibrating pagers, a portable induction loop and a personal listener device (see figure 21).



Figure 21. Images (Left to Right) of a Personal Listening Device, a stack of Vibrating Pagers and a Portable Induction Loop.

Healthwatch Norfolk and the Digital Team at Norfolk and Waveney ICB provided a suggested framework for the pilot and encouraged each practice to personalise the pilot for their surgery's needs.

Alongside the digital technology, a Patient Charter was created by consulting with people with lived experience of hearing loss, local British Sign Language interpreters and by considering information and advice provided by local organisations. The Patient Charter acted as guidance and information for healthcare staff at each participating doctors' surgery, advising them what they could do to improve accessibility for their patients.

A copy of the Patient Charter can be found here:

<https://healthwatchnorfolk.co.uk/report/hearing-loss-and-deaf-friendly-practice-charter/>

Ten members of healthcare staff at Feltwell Surgery also completed 'Hearing Loss Awareness Training' provided by local charity Hear For Norfolk. The training was condensed into an hour to make it easier for practice staff to attend and covered the following areas: hearing loss and Deaf friendly terminology, facts, figures and types of hearing loss, the psychosocial effects of hearing loss, the risks of developing dementia (due to untreated hearing loss), communication advice and information about assistive technology.

One of the healthcare team at Feltwell Surgery provided the following feedback once the pilot had ended:

“It has had a great impact on our patients and staff are able to communicate better with their patients. Feedback has been positive from both staff and patients. Patients felt it was quick and easy to use, and everyone asked said they would like to use again.”

The pilot provided a lot of positive feedback. This can be found in full within our May 2022 report “Improving the GP experience for those affected by hearing loss”. This is available to read in the report section of our website:

<https://healthwatchnorfolk.co.uk/report/improving-the-surgery-experience-for-patients-with-hearing-issues/>

As a result of the pilot, each participating doctors’ surgery was allowed to keep the digital technology and the NHS Digital team at Norfolk and Waveney Integrated Care Board agreed to extend the offer to any Doctors’ practice in Norfolk and Waveney that agreed to adhere to the Patient Charter.



Outcome Three: Increasing Public Accessibility to Information About Digital Tools

Norfolk and Waveney residents can access information regarding the NHS app and Shared Care Record.

In the Healthwatch Norfolk Year One 'Patient and professional experiences of using digital tools' report, we spoke to local patients and primary care professionals in Norfolk to hear their feedback and experiences of digital tools. For this report, Healthwatch Norfolk wanted to speak to Patient Participation Groups (PPGs) to hear their feedback about digital tools and digital access to primary care. Patient Participation Group members have a unique position as they are formed by patients from a particular GP surgery and act as a bridge between patients and primary care staff.

The purpose of Patient Participation groups according to the National Association of Patient Participation (NAPP, 2023) is:

- to advise their GP practice about the patient perspective.
- influence the GP practice or wider NHS systems to improve commissioning.
- communicating with the local patient population.
- carrying out research into the views of local people who use the practice and their carers.
- organising health promotion events.

PPGs have an increasingly important role to play in helping to give patients a say in the way services are delivered to best meet their needs, and the needs of the local community (NAPP, 2023).

During March 2023, Healthwatch Norfolk visited three Patient Participation Groups and held 3 focus groups to discuss how Norfolk and Waveney residents access the NHS app.

We spoke to a total of 39 people within the focus groups who were aged between 25 and 86 years old. The first question we asked was 'have you ever downloaded the NHS app?' Of the 39 focus group attendees, 21 (54%) people had downloaded the app and 18 people (46%) had never downloaded the app. One focus group participant who had not downloaded the app said *'I have never heard of the NHS app and I do not use it... what it is for... is it any use to me? How easy is it to use?'*

Healthwatch Norfolk asked the focus group members who had downloaded the app, 'do you use the NHS app regularly?'. We defined 'regularly' as using the NHS app more than once a month. Of the 21 focus group attendees who used the NHS app, 9 (43%)

used the app regularly, 7 (33%) used the app sometimes and 5 (24%) didn't use the app at all, despite having downloaded it at some point. During the focus groups, those that used the NHS app regularly mostly used it to order repeat prescriptions *'I use the app regularly for ordering prescriptions for myself and my son'*.

Other focus group participants reported that they used the NHS app for the following reasons:

- to order repeat prescriptions.
- to see all my information, hospital letters etc... and medications.
- Used since the start of covid for health information.
- For information to take to hospital appointments
- To sign up for research studies
- to download my COVID passport for travel purposes.

For the focus group attendees that have never used the NHS app, or who only access it sometimes (32, 82%), Healthwatch Norfolk wanted to know, 'what would encourage you to use the NHS app?'. There were a mix of responses to this question. Some focus group attendees were unaware of the app's existence, whereas others used it but did not know about all the app's available features. For example, some patients were unaware that they could book appointments via the NHS app and some of the focus group attendees mentioned that that they only discovered more of the NHS app's features whilst playing with it during the focus group, *"If I wasn't in this room, I wouldn't know about it"*. Another focus group attendee spoke about the benefit of being a Patient Participant Group member and being introduced to digital tools, like the NHS app.

"We know about the NHS app because we attend the Patient Participation Group. We had an open meeting about the NHS IT Policy and the NHS app as part of pre-Covid PPG Outreach."

There was confusion voiced from some focus group participants, who were not aware that the NHS app is available on computers and tablets (as well as smartphones) *"I was unsure whether the app was accessible on a laptop as I would not use it on my phone."* Other focus group members were asking *"what the difference is between using SystemOne, Patient Access and the NHS app?"* Another focus group member wanted to know more about the security of information on the NHS app, as that would encourage them to use it more.

After talking about the NHS app's functionality, a few focus group members mentioned that they use the app, but it doesn't always work as it should, *"I downloaded the app*

during covid to order prescriptions. I became frustrated as it suggests you can see things that you can't e.g., blood test results." Whilst technical faults cannot always be helped, another focus group participant who uses the app regularly wanted to know where to go for support, which would encourage them to continue using the NHS app.

"I have issues with viewing my medical records on the NHS app. My GP practice says its an NHS App problem 'you don't ask us' ... You never really know where to go for what thing on the NHS app."

A focus group participant reported that they would like *"clearer instructions on prescription ordering as the process can be a nightmare [on the NHS app]"*. Another focus group member mentioned that the NHS app is good for being able to access their medical record, and it could be improved for managing chronic health conditions if you could compare past and present test results (with a definition of a normal range) written in *"an easy read version with non-medical language"*.

The focus groups then discussed whether they would like any additional information to be able to use the NHS app more frequently and effectively. A few focus group members mentioned that they would like to find out more about what the app is for, if any of it would be useful for them personally and how easy is it to use.

"I would like an introduction to the app with a presentation to a group and handouts to read with a contact to help with any concerns/questions. I currently have very little understanding of what is on offer through the app so any education would be helpful."

Leaflets were the most popular suggestion to find out more information about the app. Including what it can be used for, *"a leaflet I think would be most useful in the first instance because everybody gets them"*.

There were several references from focus group members about the sign-up process to obtain an NHS login to access the NHS app being difficult, *"the sign-up process is not clear and can be a faff... it puts me off continuing to use the app. It seems like a hassle to go to the GP surgery to sign up after downloading the app"*. One of the suggestions from the focus group to support people to get an NHS login included *"an 'App Wizard', like when installing new software on computer."* During the focus groups, one PPG member called the app intuitive, but requested a 'how to guide' be produced to ensure that patients use the NHS app to its full potential.

“Whilst it is intuitive there isn’t an easy guide for how to use to its full potential. Anyone who is less tech savvy may struggle to find help guides/pages on what they can do with the app. Screen shots or videos with voiceover would be useful.”

One focus group participant talked about how they had *“never seen any advertising or information about the app other than on the surgery website”* and it was also mentioned that videos about the NHS app could be put on the screens in doctor’s surgeries. Another focus group member admitted that they had downloaded the app in the past but couldn’t remember why they downloaded it and remarked that if they could remember exactly what it’s for, they would consider using it *“to book appointments or to ‘check in’ to the GP surgery on arrival”*. Other questions from the focus group about the NHS app that could be communicated to patients include:

- Can I book GP appointments via the app?
- Where can I view test results? Are these GP only test results? Or can I view hospital results?
- If you can’t log in how do you find help?
- How does the NHS app connect to my surgery?
- Is our health information sold to insurance companies?

Several focus group members added that they would like to be reassured that patients don’t have to use the NHS app, but that it’s an added option, *“but I think the one thing you need is...you’d need that reassurance very upfront, you don’t have to use it...but you need to be told it’s there”*.

Outcome Three: Increasing Public Accessibility to Information About Digital Tools

The second part of the Patient Participation Group engagement focussed on participant's knowledge and awareness of the Norfolk and Waveney Shared Care Record. In total, 39 people aged 25 – 86 years old. took part in the focus groups. Healthwatch Norfolk started the focus group by asking who had heard about the Shared Care Record and knew what it is. There was a general lack of awareness about the Shared Care Record, *"I have no understanding at all about the above. I have never heard of it... I do not recognise it."* 35 people (90%) were unaware of what a Shared Care Record is and that it's coming to Norfolk and Waveney and only 4 people (10%) knew about its arrival this year. Some people had never heard of it and were confused as they thought this information was already shared, *"I already thought all health information was shared."*

Most of the focus group participants requested more information about the Shared Care Record, *"I didn't know about it really, we need more information public information, video, leaflet but again I thought it was already shared"*. Another focus group member stated that they would like more information in a clear and accessible format.

"As I have no knowledge about the system, some form of education highlighting the benefits to me and the doctors surgery would be helpful so I can assess if it would be useful to me. I also find the language used confusing and not very user friendly, either I require more education or the documentation needs to be clearer and shorter. I believe we all have busy lives or are not able to concentrate for periods of time, so it would be helpful and I would suggest more accessible if documents were more concise and less medical jargon."

There was also confusion at two of the focus groups where participants asked about the difference between the Shared Care Records and Summary Records, *"how are people going to understand the difference between Summary Record and Shared Care Record?"*

The next question concentrated on how focus group participants would like to find out more about the Shared Care Record and which format(s) would be their preference. Each focus group participant could choose more than one option for the format they would like information to be presented in.



Leaflet (25)



**Local and
National Press
(10)**



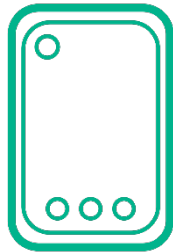
**Via my Doctors'
Surgery (7)**



Video (4)



**Doctors'
Website (3)**



Social Media (3)



Email (3)



Animation (1)

“How would you like to find out more about the Norfolk and Waveney shared Care Record?”



When asked about the format they would like more information about the Shared Care Record in, 25 people stated that they would prefer a leaflet, 10 people suggested publicising it in local and national press, 7 participants asked for more information to be shared via their Doctors' surgery, 4 participants requested a video, 3 participants stated via social media, email and their Doctors' surgery website and one suggested an animation.

The last part of the focus group focussed on any concerns that the participants might have about the Shared Care Record. Most of the participants had not seen the current information online (35, 90%) including the 'Public Stakeholder Brief' (see appendix 3) and 'Norfolk and Waveney Shared Care Record FAQs' (see appendix 3) but 4 participants had seen these documents and 2 had brought them along to the session.

These were the top concerns mentioned by the focus group members:

- Will I be able to view my hospital records?
- How safe will information be kept and what are the user policies for data security?
- Concerns about security level of relevant information joined up healthcare and knowledge of all relevant levels or detailed info.
- Is there an opt out option for the Shared Care Record?
- If the national data opt-out is a service that allows patients to opt out of their confidential patient information being used for research and planning, how is different to the shared care record? Do we need to be asked again for informed consent to join the Shared Care Record?
- Concerns about security who will be able to see it? What information will they be able to see and what will it look like?
- Can we block who / which healthcare providers can access it?
- What about accessing the Shared Care Record when out of county?
- There is only one Hospice listed on the briefing document. Will any other Hospices or Care Homes be included in the share list?
- Will a DNR order (Do Not Resuscitate) be listed on the Shared Care Record?
- What patient health record codes (e.g. SNOMED codes) are going to be used on the Shared Care Record?
- Will I be able to edit my health and social care information held on the Shared Care Record?

In between two of the focus groups dates held in early March 2023, it was announced that the Shared Care Record would be going live on 31st March 2023.



“The Norfolk and Waveney Shared Care Record will officially launch on Thursday 30 March 2023 for Phase One of implementation. It enables the secure, electronic sharing of health and social care data between health and care

professionals in partner organisations across the Norfolk and Waveney ICS. The system is part of our Connect-NoW programme which aims to improve the experiences you have with local health and care services, and ultimately helps you receive better care.”



Source: <https://improvinglivesnw.org.uk/new-health-and-care-record-system-to-help-improve-care-across-norfolk-and-waveney/>

What this means

Project Outcomes

Outcome One: Raising Awareness of Digital Tools

Raising awareness of the presence of the digital tools available to local people and providing opportunities for patient support and upskilling to be able to digitally access their GP surgery.

The Digital Health Hub is a free learning resource for people all over Norfolk to learn how to digitally access primary care services via Footfall, the Airmid and Patient Access apps, via SystmOne and Patient Access online or via the NHS app or to look up health information online. The Hub uses the Learn My Way platform and in addition to teaching people to access healthcare services online, it also teaches people to:

- Use electronic devices.
- Start using the internet.
- Send and access emails.
- Manage their money and health online.

The Digital Health Hub is a flexible service available in all Norfolk libraries and the course is delivered by trained Digital Health Champions on a one-to-one basis. There is no limit or typical length of time of support given making it a versatile and useful service for local citizens. To continue raising awareness of the Digital Health Hub, Healthwatch Norfolk have worked with Norfolk Library Service and the NHS Digital Team to widen the number of ways the Hub is promoted.

These methods include digital promotion through:

- Updating information about the Hub on Footfall.
- Creating video content about the service.
- Using social media to raise awareness.
- Discussing the Digital Health Hub through online meetings with primary care professionals.

They also include non-digital methods of promotion including:

- Raising awareness via word of mouth .
- Educating and informing healthcare professionals, GP practice managers and PPG members about the Digital Health Hub.

- Adding a paragraph to about the Hub to hospital outpatient letters.

This could be an opportunity for primary healthcare professionals, mental health practitioners and social prescribers based in GP surgeries to refer patients to the Digital Health Hub. This could help digitally upskill patients, reduce loneliness and isolation and empower patients to make a choice about how they access primary healthcare.

Outcome Two: Innovative Use of Digital Tools in Primary Care

The Norfolk and Waveney Integrated Care Board (ICB) has knowledge and examples of GP Surgeries using digital tools innovatively in Norfolk and Waveney to support digital access for residents.

There are a lot of exciting and innovative uses of digital tools in primary care happening across the county right now. The case studies include in this report a few examples of these. Creating these case studies has the potential to raise public and healthcare professionals' awareness of the depth and breadth of digital tools available for:

- Accessing primary healthcare services
- Managing and attending appointments
- Ordering and managing prescriptions
- Managing long term health conditions
- Communication between patients and professionals

Case studies are a valuable resource for sharing information and knowledge because they can easily be shared through in-person events, online forums or via social media outlets.

This reflects some of the themes found in our previous work with Norfolk based Patient Participation Groups (Healthwatch, 2022b). This project reported that people with experience of being part of a PPG forum pre COVID-19 told us how valuable these forums can be in terms of sharing knowledge.

In case study number 3 Trinity Street Surgery demonstrates how PPG members can make positive change and influence digital access to primary care. PPGs are often under utilised but have a unique position as connectors between a GP surgery and its patients. They can also be a great platform for raising issues with other PPGs and Integrated Care Board representatives as part of a larger meeting. In the Trinity Street Surgery example, the PPG identified that the language used within Footfall could be a barrier preventing patients from effectively accessing primary care services. This was then escalated to the NHS Digital Team within the Integrated Care System.

Another theme from the Healthwatch (2022b) Patient Participation Group report was that members who had no experience of larger meetings told us they felt they could benefit from being able to meet up regularly with other GP practices and PPGs with guidance and representation from the ICB.

One thing that the case studies doesn't do is evaluate the effectiveness, accessibility, or long-term benefits of each type of digital tool. It would be important to ensure that these types of digital tools are evaluated before being shared as examples of best practice.

Outcome Three: Increasing Public Accessibility to Information About Digital Tools

Norfolk and Waveney residents can access information regarding the NHS app and Shared Care Record.

Over the next few years, the NHS Digital team at Norfolk and Waveney Integrated Care Board are aiming to achieve key milestones (as shown in appendix 4) as part of their digital transformation. The aim of the transformation is to improve the health and wellbeing of people living in Norfolk and Waveney.

Norfolk and Waveney Shared Care Record

In line with the Digital Transformation Strategic Roadmap the Shared Care Record should increase the visibility of GP, community, social care, mental health, and acute electronic patient records for healthcare professionals and speed up the treatment process for patients. When Healthwatch Norfolk consulted the Patient Participation Groups as part of the focus groups, there was little awareness from members that the Shared Care Record would be coming to Norfolk and Waveney within the next few weeks. There were also concerns expressed about data security, the option to opt out of the Shared Care Record and how it differs from the Summary Patient Record. Many focus group participants also believed that patient data and electronic patient records were already visible across different healthcare providers. This is something that will need to be considered when the Norfolk and Waveney Shared Care Record is rolled out across all healthcare providers. Focus group members asked for information about the Shared Care Record to be shared as a leaflet and via local and national press.

NHS App

According to the Digital Transformation Strategic Roadmap, the NHS app will eventually become a digital, single front door and portal for patients to be able to access primary care (see appendix 4).

During the focus group some participants were unaware of the number of different digital tools available to them to access primary care or the full functionality of the NHS

app. The NHS app is due to be developed and have new features added over the next 12 months. Whilst the app is being developed and improved, it would be helpful for the Digital Team at Norfolk and Waveney ICB to create a straightforward, accessible guide about the NHS app in both a digital and paper (leaflet) format that encourages Norfolk citizens to start using it as a digital front door for accessing primary healthcare.

As shown in case study 1, Grove Surgery have been using QR codes to pass on healthcare information to patients and this could be an additional method that's used within GP surgeries to enable patients to access information about the NHS app. To further support raising awareness of the NHS app, it would be beneficial for the NHS Digital team to continue working the Digital Health Hub team. This would enable patients to access free support for setting up and accessing the NHS app.

Case study 3 highlighted how language and labelling within digital tools can become a barrier for patients digitally accessing primary care services. Therefore, it is essential that any guides created to support accessing the NHS app are accessible in terms of language and assistive technology (for example: screen reading software). It could be beneficial to liaise with PPG members or to form an accessibility panel to check that communication materials relating to digital tools are accessible whether in a paper or digital format.

As demonstrated in outcome 2, Patient Participation Groups are a valuable and unique connector between GP surgeries and patients. PPGs could be utilised more for research and feedback about digital tools if an adequate amount of knowledge, understanding and training is given to them. This could be shared by PPG members with healthcare professionals and patients to assist with raising awareness of the Shared Care Record and NHS app.

Recommendations

Outcome One: Raising Awareness of Digital Tools

Raising awareness of the presence of the digital tools available to local people and providing opportunities for patient support and upskilling to be able to digitally access their GP surgery.

1. The Digital Team within Norfolk and Waveney Integrated Care System should connect with local Primary Care Networks to link in with Peer Support Workers, Social Prescribers and Community Connectors to promote the free services provided by the Digital Health Hub. This will enable healthcare professionals to refer patients to the Digital Health Hub to learn about digitally accessing healthcare services and information.
2. Explore training and nominating a Digital Champion within each Primary Care Network, GP practice or Patient Participation Group to promote, refer and / or train people using the Digital health Hub via the Learn My Way platform.

Outcome Two: Innovative Use of Digital Tools in Primary Care

The ICB has knowledge and examples of GP Surgeries using digital tools innovatively in Norfolk and Waveney to support digital access for citizens.

1. Encourage Primary Care Networks to share innovative examples of digital tool use between them, potentially via a physical or online digital networking event including a presentation from the Digital Health Hub.
2. Ensure that all digital innovation is independently evaluated, focusing on patient experience and satisfaction. This is work that Healthwatch Norfolk have previously undertaken and could support the NHS Digital Team with.

Outcome Three: Increasing Public Accessibility to Information About Digital Tools

Norfolk and Waveney residents can access information regarding the NHS app and Shared Care Record.

1. Continuously liaise with Patient Participation Groups for feedback on the accessibility of communication materials and digital tools or form an

accessibility panel to check that communication materials relating to digital tools are accessible whether in a paper or digital format.

2. Patient Participation Groups are a valuable and unique connector between GP surgeries and patients. PPGs could be utilised more in research and feedback, especially if they are provided with knowledge, understanding and training. This could be useful for promoting access to the NHS app and the arrival of the Shared Care Record to both healthcare professionals and patients.
3. Create a straightforward, accessible guide to the NHS app that encourages Norfolk citizens to use it as the digital front door to primary healthcare.

Year 3 Recommendations for Healthwatch Norfolk

Outcome One: Raising Awareness of Digital Tools

Continue the work from year one by finding out how aware the public and healthcare professionals are about the different types of digital tools being used within primary care. This will include what is working well and what is not working well with the digital tools.

Outcome Two: Innovative Use of Digital Tools in Primary Care

Continue collecting examples of innovative use of Digital Tools in primary care.

Outcome Three: Increasing Public Accessibility to Information About Digital Tools

Follow on from the year 2 work on the public's awareness of the NHS app by engaging not only with Patient Participation Groups, but with healthcare professionals and members of the public.

Follow on from the year 2 work on the public's awareness of the Norfolk and Waveney Shared Care Record and relay any concerns or questions back to the ICB.

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Commissioner Response

Anne Heath

Associate Director of Digital ·

NHS Norfolk and Waveney Clinical Commissioning Group (CCG)

“There is some very valuable learning for my team in here, and a lot of inspiration. It’s fantastic to see examples of digital innovation being owned by practices, PPGs and others, all brought together in this exciting report. I feel that anyone picking this up and reading it would get an idea of something they too could do to move forward the adoption of digital technology in Norfolk & Waveney.

As a team, we often naturally have to focus on the large scale delivery of technology and tools, and I feel that this report is the human side of that work, showing the difference that technology can make to both staff and members of the public one step at a time.”

Appendix

Appendix 1: How this work fits with the Year One Healthwatch Norfolk Report Recommendations

Recommendation Number	Theme / Digital Tool	Recommendation
1A	Public Awareness	Consider production of one clear, concise, and accessible document to be available to patients detailing the types of digital tools available to them for accessing their doctors' surgery. This document should include where to go to for support accessing the digital tools.
1B		Map the digital tools available for the public and avoid phrases like 'online consultation system' including a brief, descriptive glossary which is also available in an easy read format.
1C		Publicise the different types of digital tools available to the public and where to access them through social media and advertising campaigns. Ensure that the public are aware of their choice to request a face-to-face appointment with a primary healthcare professional or to utilise one of the digital tools available to them.
1D		Ensure that all healthcare staff, have training or access to information regarding types of digital tools available to the public and knowledge of where to signpost if a patient asks for more support with them.
2A	Footfall	Consider the language and labelling used on Footfall. Survey respondents have reported that it takes a while to locate the right tab on Footfall to find the correct services or support for them. For example, the label 'consultation room' is confusing.

2B		Ensure the Footfall layout is optimised for assistive technology on smartphones.
2C		Assess how important messages and Covid related news banners could be less obstructive for Footfall users.
2D		Promote the website tour function.
2E		Create a downloadable and accessible user guide to accompany the Footfall website tour.
2F		Ensure that news and information on Footfall is up to date and relevant.
3A	NHS app	Publicise what the NHS app does (in addition to the creation of a Covid Pass) and explain how it is different from the NHS Test and Trace App.
4A	Airmid and Patient Access App	Raise awareness of the availability of these apps as an alternative digital tool.
5A	Video Consultations	Encourage primary healthcare professionals to offer the option of video consultations to patients. If primary healthcare professionals offer a patient a video consultation, ensure that clear instructions are given before the appointment explaining how to access it and if any software or apps need to be downloaded.

Outcome One: Raising Awareness of Digital Tools

Promoting the Digital Health Hub

Promote Digital Health Hub via Healthwatch Norfolk website and social media (How to access NHS app and GP Website).	<ul style="list-style-type: none"> 1C Public Awareness 1D Staff Awareness 2D Footfall 3A NHS app Awareness 4A Airmid and Patient Access App Awareness
Create video interview with Norfolk Library service to promote DHH and add BSL signing	<ul style="list-style-type: none"> 1C Public Awareness 2D Footfall 3A NHS app Awareness 4A Airmid and Patient Access App Awareness

Create a case study of DHH for promotion purposes.	1C Public Awareness 2D Footfall 3A NHS app Awareness 4A Airmid and Patient Access App Awareness
Host an online seminar with PPG members and GP practice managers to publicise DHH and invite to ask questions.	1C Public Awareness 1D Staff Awareness 2D Footfall 3A NHS app Awareness 4A Airmid and Patient Access App Awareness

Outcome Two: Innovative Use of Digital Tools in Primary Care

5 Case Studies about Innovative Use of Digital Tools in Primary Care

Grove Surgery: QR Codes for information leaflets	1C Public Awareness 1D Staff Awareness
Aylsham and Reepham Surgery: Patient Partner Phone System	1C Public Awareness 1D Staff Awareness
Trinity Street Surgery: mapping patient journey on Footfall and considering accessibility of language / content	2A Footfall 2C Footfall 2E Footfall
Aldborough Surgery: Online PPG presence	1C Public Awareness 1D Staff Awareness
Feltwell Surgery: Digital Assistive Technology to improve experience for patients with hearing loss.	1C Public Awareness 1D Staff Awareness

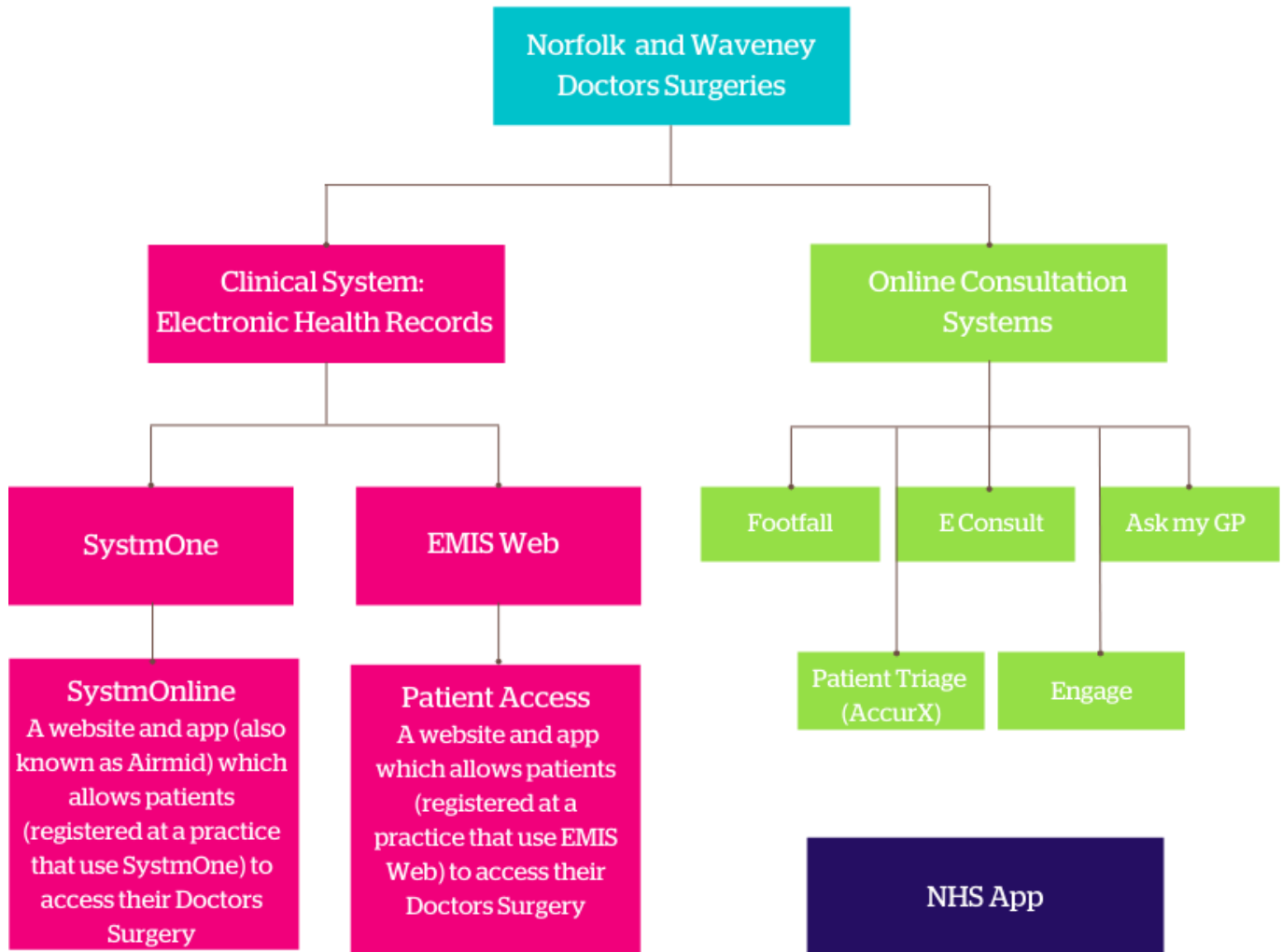
Outcome Three: Increasing the Public Accessibility of Digital Tools

Norfolk and Waveney residents can access information regarding the NHS app.

Focus Group to discuss what PPG members would like to know about NHS App and pass intelligence to ICB to create a template for how to guide.	3A NHS app
--	------------

Digital Health Hub promotion	1C Public Awareness 1D Staff Awareness 3A NHS app Awareness
Outcome Three: Increasing the Public Accessibility of Digital Tools	
Norfolk and Waveney residents can access information regarding the Shared Care Record	
Promote ShCR via HWN social media and Website	1C Public Awareness 1D Staff Awareness
Create video interview with Dr. Zac Blake to promote ShCR and answer questions.	1C Public Awareness 1D Staff Awareness
Focus Groups 'what would people like to know about ShCR'?	1A Public Awareness 1C Public Awareness 1D Staff Awareness

Appendix 2: Different Types of Digital Tools





Clinical Systems



Clinical systems are digital tools for primary healthcare professionals that support joined up working across healthcare settings. Clinical systems support both clinical and administrative functions and allow healthcare professionals to gather, store, and alter patient information within their electronic health record. There are two clinical systems currently used in Norfolk and Waveney called 'SystemOne' and 'EMIS'. These can be seen illustrated as part of a flowchart in the diagram shown in appendix 2.

Electronic Patient Records

When you visit an NHS or social care service, information about you and the care you receive is recorded and stored digitally in a health and care record. These are called 'electronic patient records' and they are available in all the places that you receive healthcare. A patient's information (including health checks, appointments, allergies, and medication) is uploaded securely into a clinical system so doctors will then be able to access this information instantly.

According to the NHS Digital Team (2022a) the information in your records can include your:

- name, age and address
- health conditions
- treatments and medicines
- allergies and past reactions to medicines
- tests, scans and X-ray results
- specialist care, such as maternity or mental health
- lifestyle information, such as whether you smoke or drink
- hospital admission and discharge information

Systemone

SystemOne is one of the clinical systems used in 86 doctors' surgeries in Norfolk and Waveney (as of March 2023) to store patient electronic health records.

SystemOnline

SystemOnline is a website and app that allows patients (or someone acting on their behalf) to manage access to their doctors' surgery and information about the healthcare they receive. If your doctors' surgery uses the SystemOne clinical system to store electronic patient records, then you will use the SystemOnline app and website to:

- view your electronic health record
- manage appointments
- order repeat prescriptions
- view test results
- explore local pharmacy services
- discover local health services
- messaging your doctors' surgery directly

Airmid App

The SystemOnline app has been replaced by a newer patient-facing app called Airmid. The Airmid app is powered by SystemOnline and is designed to allow patients contact their doctors' surgery to:

- book GP appointments
- order repeat prescriptions to their preferred pharmacy
- view their medical record and test results
- explore local pharmacy services
- discover local health services
- message their doctor's surgery
- attend video consultations

Patients can log in using their SystemOnline username and password if they have them. Otherwise, Airmid allows patients to log in using NHS Login details. An NHS Login can be created directly via Airmid.



A smartphone displaying the Airmid App
Source: www.pp-uk.com/products/airmid/

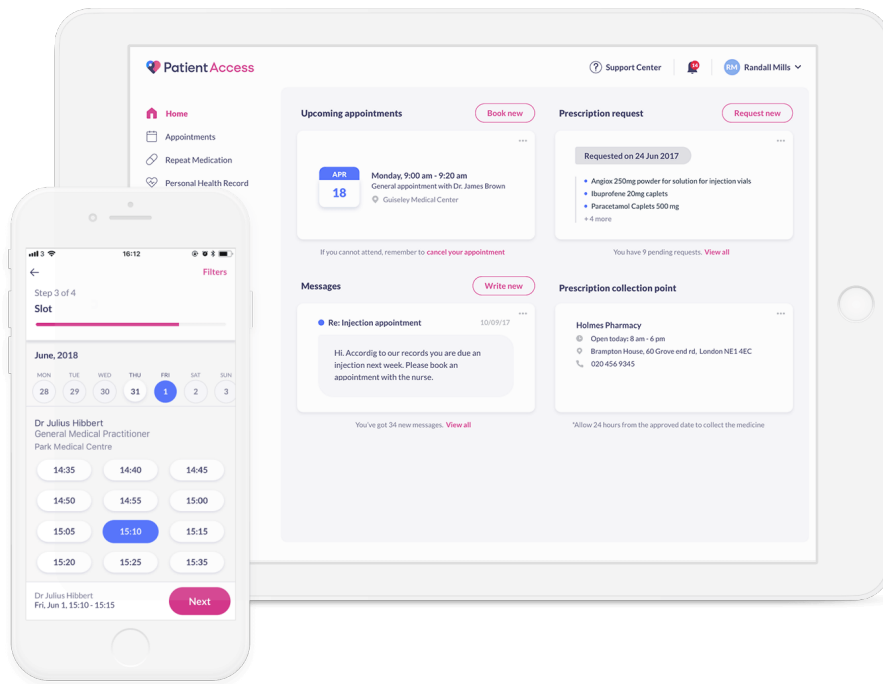
EMIS Web

EMIS is another of the clinical systems used in 19 doctors' surgeries in Norfolk and Waveney (as of March 2023) to store patient electronic health records.

Patient Access

Patient Access is a website and app that allows patients (or someone acting on their behalf) to manage access to their doctors' surgery, pharmacy and electronic health records. If your doctors' surgery uses the EMIS clinical system to store electronic patient records, then you will use the Patient Access app and website to:

- book and manage doctors' appointments
- order repeat prescriptions to your preferred pharmacy
- view your electronic health record and test results
- explore local pharmacy services
- discover local health services
- message your doctors' surgery directly



A smartphone and tablet displaying the Patient Access App

Source: www.patientaccess.com



Online Consultation Systems



Doctors' surgeries are increasingly offering more online access to their services, including the option to have an online consultation. Online consultation systems are a two-way messaging system that allow a patient to contact the practice about a particular health concern, receive information and advice about some health conditions and order repeat prescriptions. These can be seen illustrated as part of a flowchart in the diagram shown in appendix 2.

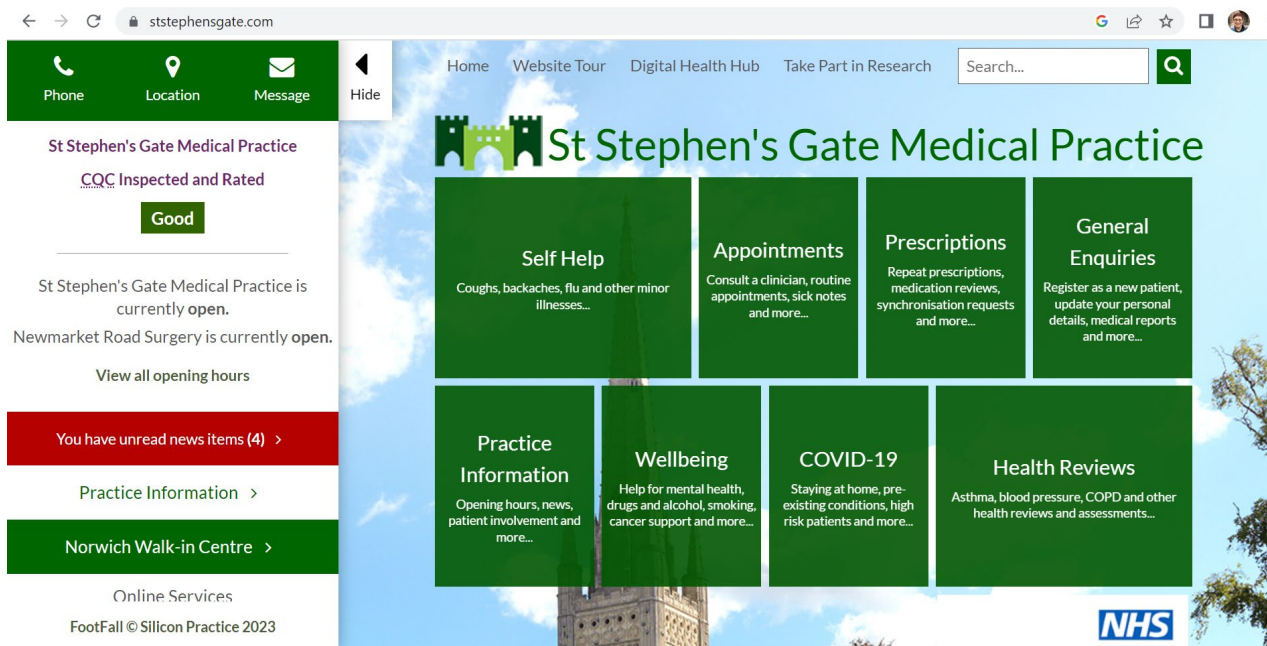
Online consultations enable patients to ask questions, report symptoms and upload photos. Specially trained triage staff in the doctors' surgery then look at the requests and respond by connecting the patient to the right healthcare professional, service, or support.

Footfall

FootFall is a type of online consultation system that enables patients to connect with their doctors' surgery online and is used by 86 doctors' surgeries in Norfolk and Waveney (as of March 2023). For the doctors' surgeries that use Footfall, it forms their surgery website, and it is the most widely used online consultation system in Norfolk and Waveney.

FootFall was designed to help patients:

- engage with all areas of their doctors' surgery online.
- communicate with receptionists, nurses, doctors, and other healthcare professionals.
- access advice about minor injuries.
- undertake online reviews for health conditions, e.g., Asthma.
- access video consultations with healthcare professionals.



A Screenshot of Footfall from St. Stephen's Gate Medical Practice (April 2023)

E-Consult, Ask My GP, Patient Triage (AccurX) and Engage

These four types of digital tools are online consultation systems and triage platforms. They collect a patient's medical or administrative request and send it through to their doctors' surgery via their doctors' surgery website and are used by some Norfolk and Waveney doctors' surgeries as an alternative to Footfall. These can be seen illustrated as part of a flowchart in the diagram shown in appendix 2.

Video Consultations

Some doctors' surgeries are offering patients the option to have an appointment with a doctor or healthcare professional via a video consultation. This is where a patient can speak to a doctor or healthcare professional using the video camera in their smartphone, tablet or computer. If a doctor or healthcare professional recommends that a patient has a video call, the patient will receive a text, email or letter with a date and time for the appointment.

Digital Access to GP Surgeries.

A Focus Group to discuss the

Norfolk and Waveney Shared

Care Record and NHS app.

Focus Group Discussion Guide

Project: Digital Access to GP Surgeries: Year Two

Focus Group Date:	
Focus Group Time:	
HWN Staff:	
Focus Group Priority Area:	Shared Care Record and NHS App

Question	Notes	Complete
Introduction (10 minutes)		
Welcome and ask for consent to start recording.	Confirm attendees are happy for session to be recorded for transcription purposes. Recording will be deleted once when the report is published, and any direct quotes will be anonymised. ◀ask each participant to complete consent form and demographics form (if permissible)▶	
Introduction to Healthwatch.	'Healthwatch Norfolk is the independent voice for patients and service users in the county. We gather people's views of health and social care services in the county and make sure they are heard by the people in charge. Our work covers all areas of health and social care. This includes GP surgeries, hospitals, dentists, care homes, pharmacies, opticians and more. We also give out information about the health and care services available in Norfolk and direct people to someone who can help.'	
Focus Group Participant Introductions.	◀Ask everyone to introduce themselves and talk about their role within the PPG▶	
Purpose of focus group	Healthwatch Norfolk are exploring digital access to Norfolk and Waveney GP surgeries. We are now in the second year of the project.	

	<p>This focus group will be discussing the Norfolk and Waveney Shared Care Record and the NHS app (not the test and trace app).</p> <p>During this focus group, we would like to hear what you know about the Shared Care Record and NHS app and what you would like to find out about.</p> <p>There are no right or wrong answers at this session, we are just really interested in hearing peoples' personal experiences and opinions.</p> <p>The information we take away from this focus group discussion will be anonymised and will be used in the Year Two report, which will be given to the Digital team at Norfolk and Waveney Integrated Care Board.</p> <p>Please can we ask that you share with us what you feel happy and comfortable doing with and respect the privacy of other attendees by treating information confidentially.</p> <p>A copy of the Year One report can be found here: https://healthwatchnorfolk.co.uk/report/patient-and-professional-experiences-of-using-digital-tools-in-primary-care/</p> <p>Thank you for your time today!</p> <p><Ask Focus Group Participants to work in pairs or teams of three and hand out Focus Group Question Sheet></p>	
Any Questions?	<p>If you have any questions about the focus group, the Shared Care Record or NHS app, please let us know and if we can't answer them today, we will reach out to the Digital Team at the ICB for clarification and feed the answers back to you.</p>	

Focus Group Discussion: Shared Care Record (30 minutes)		
Plan and Conduct Focus Groups to gather intelligence to guide Norfolk and Waveney ICB Comms Team with promoting Shared Care Record.	How aware are you of / what do you know about the Shared Care Record?	
	What would you like to know about the Shared Care Record?	
	How would you like to find out more about the Shared Care Record? For example: videos / leaflet / public events	
	Do you have any concerns or questions about the Shared Care Record?	
	What do you like about the Shared Care Record?	
Focus Group Discussion: NHS App (30 minutes)		
Plan and Conduct Focus Groups to gather intelligence for Digital Team at Norfolk and Waveney ICB to produce their own 'How to Guide'.	Do you use the NHS app regularly?	
	If so / If not, why is this?	
	What would encourage you to use the NHS app more?	
	Do you need any information or support to be able to use the NHS app more? If so, in what format? (for example: 1:1 training / video / leaflet)	
	What do you like / not like about the NHS app?	
Focus Group Wrap Up and Conclusion (20 minutes)		
Additional Feedback	Do any attendees wish to share any other experiences/views before the end of the session?	
Summary of Themes	Feedback main themes to group for Shared Care Record and NHS app.	
Thank you!	Thank you very much to everyone that has helped with this focus group today. If you would like to see a copy of the Year Two report, please let us know and we will send a copy out when it is complete (approx. date - May 2023).	

	<hand out information about Shared Care Record from Norfolk and Waveney ICB and field any questions to Project Lead>	
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Focus Group Question Sheet

Focus Group Discussion: Shared Care Record

Activity: In Pairs or Groups of Three please discuss your answers to these questions for 10 minutes.

- 1) What do you know about the Shared Care Record?
- 2) What would you like to know about the Shared Care Record?
- 3) How would you like to find out more about the Shared Care Record? For example: videos / leaflet / public events
- 4) Do you have any concerns or questions about the Shared Care Record?
- 5) What do you like about the Shared Care Record?

Activity: Feed Back your answers to the group (20 minutes), record the main themes discussed, give out information on the Norfolk and Waveney Shared Care Record and invite the group to ask questions.

Focus Group Discussion: NHS App

Activity: In Pairs or Groups of Three please discuss your answers to these questions for 10 minutes.

- 1) Do you use the NHS app regularly? If so, why not?
- 2) What would encourage you to use the NHS app more?
- 3) Do you need any information or support to be able to use the NHS app more? If so, in what format? (for example: 1:1 training / video / leaflet)
- 4) What do you like / not like about the NHS app?

Activity: Feed Back your answers to the group (20 minutes), record the main themes discussed, give out information on the NHS app and invite the group to ask questions.

Digital Access to GP Surgeries

Focus Group Consent Form

Project Lead: Rachael Green

Part 1: Information Sheet

About Healthwatch Norfolk

Healthwatch Norfolk is the independent consumer champion for anyone in Norfolk who uses health and social care services. Our role is to capture the views and experiences of local people and use this as evidence to influence the people and organisations who pay for and provide your health and social care.

About Digital Access to GP Surgeries

Healthwatch Norfolk are working on the second year of a project looking into digital access to GP Surgeries in Norfolk and Waveney. The project is exploring how the Norfolk and Waveney Shared Care Record is being rolled out across the county, how the Digital Health Hub is supporting members of the public with learning to access their GP surgeries online, what the public know about the NHS app and case studies of local GP surgeries using digital tools in an innovative way to support the patient experience.

A copy of the Year One report can be found here:

<https://healthwatchnorfolk.co.uk/report/patient-and-professional-experiences-of-using-digital-tools-in-primary-care/>

About your participation

Thank you for agreeing to be part of this Focus Group as part of your Patient Participation Group. The conversation will last about an hour and a half, and you will be asked to give permission for the conversation to be recorded to help with later analysis.

We aim to encourage all communities to take part in decision-making and influence the way that local health and social care services are planned

and delivered. As a result, you may be asked some personal questions regarding your age, gender, ethnicity etc. You do not have to answer these questions if you do not want to.

We are required by law to protect your privacy. Your personal details will be confidential and will not be shared outside of Healthwatch Norfolk, unless we feel that it is necessary to prevent harm to you or others. All recordings and notes will be kept on a secured system and will be destroyed once the project has been completed. We will be publishing a written report of our findings so that we can share the results with the people and organisations who pay for and provide your health and care. When this report is published you will remain anonymous, and we will take great care to ensure that nobody will be able to use your story to identify you.

Participating in this project is entirely voluntary. You may choose not to take part and you may change your mind at any time up to a month after the focus group takes place. Once this time has lapsed, it will not be possible for you to withdraw your permission. You will not receive a reward for participating and your participation will not affect the quality of any care or support that you are currently receiving. If at any point you are not happy with the questions that you are being asked, you would like to take a break or stop the conversation entirely, please let us know.

If you have any questions, please contact Rachael Green on: 01953 856029 or by emailing: rachael.green@healthwatchnorfolk.co.uk

What is the Norfolk and Waveney Shared Care Record?

The Shared Care Record is a way of bringing together a patient's electronic health records from the different organisations involved in a person's health and social care. These are then visible to frontline health and social care professionals, at the point of care, in a read-only view.

What is the NHS app?

The NHS app provides a secure way for people to access a range of NHS services on their smartphone or tablet. It allows people to:

- book and manage appointments at their GP practice.
- order their repeat prescriptions.

- securely view their GP medical record.
- check their symptoms using NHS 111 online and the health A-Z on the NHS website.
- register as an organ donor.
- choose whether the NHS uses their data for research and planning.

Part 2: Consent Form

Your initials and signature below mean that you have read the above information about this project, that you have had a chance to ask questions to help you understand how your story will be used, and that you give permission to allow your story to be used in this project.

Please initial each box:

	This project has been fully explained to me and all my questions have been answered to my satisfaction.
	I give my permission for this conversation to be recorded and shared with a GDPR compliant external organisation for transcription.
	I understand that my personal details will not be accessible to anyone outside of Healthwatch Norfolk, unless Healthwatch Norfolk feel it is necessary to share my details to prevent harm to myself or others.
	I understand that my (anonymised) story may be used in future reports, publications, articles or presentations by Healthwatch Norfolk.
	I have been informed of the risks and benefits, if any, of allowing my story to be used in this project.
	I have been informed that I do not have to participate in this project.
	I have read each page of this form.
	I have agreed to participate in this project.

Name of participant

Signature

Date

Name of Project Lead

Signature

Date

Demographic Information of Focus Group Participants

In this next section we will be asking you some questions about yourself and your life. All these questions are optional. Your answers help us make sure that we hear from people from different backgrounds and that we understand the needs of different groups in our community. Remember: all your answers are strictly confidential, and the survey is anonymous.

How old are you?

What is your gender?

- Male
- Female
- Non-binary
- Genderfluid
- Genderqueer
- Intersex
- Prefer not to say

Prefer to self-describe:

Please select any of the following that apply to you:

- I have a disability
- I have a long term health condition
- I am a carer
- None of the above
- Prefer not to say

What is your ethnic group?

Arab

- Arab

Asian / Asian British:

- Bangladeshi
- Chinese
- Indian
- Pakistani
- Any other Asian / British Asian Background

Black / Black British:

- African
- Caribbean
- Any other Black / Black British background

Mixed / Multiple ethnic groups:

- Asian and White
- Black African and White
- Black Caribbean and White
- Any other Mixed / Multiple ethnic groups background

White:

- British / English / Northern Irish / Scottish / Welsh
- Irish
- Gypsy, Traveller or Irish Traveller
- Roma
- Any other White background

Other:

- Any other Ethnic Group
- Prefer not to say
- If other, please specify:

Norfolk and Waveney Shared Care Record (ShCR)

The Norfolk and Waveney Integrated Care System (ICS) is proud to announce that we will be delivering a Shared Care Record (ShCR) for the people and communities of Norfolk and Waveney.

What is the Shared Care Record (ShCR)?

The Shared Care Record is a way of bringing together your most important records from the different organisations involved in your health and social care. These are then visible to frontline health and social care professionals, at the point of care, in a read-only view.

Benefits of having a Shared Care Record

There is a common misconception that health and care workers already have access to people's full health and care records. This is not always the case and often means that you are asked to repeat your medical history and social circumstance when seen by different health or care professionals. Having a Shared Care Record in place will allow them to see relevant information about the care and treatment you have had across all services so that they can make a more informed decision and support you to tell your story once.

Some key benefits of the ShCR are:

- **Improved experience for you:** from knowing that any health and care professional you see has the information they need to provide you with the best treatment and care or make the most informed decision for your wellbeing.
- **Reduced waiting times and repetition:** because having readily available information means less time contacting different settings and departments and less time repeatedly telling your story or sensitive, sometimes uncomfortable information.
- **More efficient diagnostic testing:** by avoiding duplication through better communication
- **More holistic care:** by taking a wider scope of information into account, health and care professionals can communicate easily and proactively, considering your overall health, care, and social circumstance where we are aware and not just considering your immediate condition – doing what is right by you.

- **Increased satisfaction:** and confidence that no matter how complex your condition, that you're in the right place, at the right time, and whomever you see for your direct treatment and care is more informed.

Our aim

Our aim is to help our frontline health and care services by providing important information about you and your care, from your interactions with the following professional care services:

- GP
- NHS 111/out of hours service
- community services
- emergency department
- outpatient appointment
- hospital stays
- maternity service
- mental health practitioner or care practitioners

Your information will only be made available when needed at the point of care and will only be used by staff members with a legitimate basis to do so.

The Norfolk and Waveney ShCR will help meet this aim by reducing the time needed to learn about important health and care information, particularly in a crisis. This can be particularly helpful when you, your family or carer may not be able to answer specific health and care questions.

Current status

The Norfolk and Waveney Shared Care Record (ShCR) Proof of Principle is now live following successful system testing by our appointed technology partner, Intersystems. The Proof of Principle means that our first ICS partner, Norfolk County Council, can use elements of the ShCR which will fully launch in Summer 2023.

All ICS partner organisations are signatories to the "My Care Record" Information Sharing Framework which describes our commitments to sharing information legally, safely, and responsibly. This framework also dictates the conditions under which we can share your information for the purpose of your care. The information held within the Norfolk and Waveney Shared Care Record will only be used for direct care.

Norfolk and Waveney Shared Care Record (ShCR) – FAQs

What is the Norfolk and Waveney Shared Care Record?

The Shared Care Record is a way of bringing together your most important records from the different organisations involved in your health and social care. These are then visible to frontline health and social care professionals, at the point of care, in a read-only view. This will allow them to see relevant information about the care and treatment you have had across all services so that they can make a more informed decision and support you to tell your story once.

Who does this affect?

Anyone registered with a Norfolk and Waveney Health and Social Care organisation. Who will see my information? Only health and social care professionals that are directly involved in your care will see your most important records. We set a very high bar for information security compliance within Norfolk and Waveney ICS. We will ensure that any organisation accessing your records has met the required data protection, confidentiality, and information security standards, before gaining access to your records. Access to your records is governed by role-based permissions and checked to make sure that a legitimate relationship exists between you and the health and care professional, so that we can ensure only those providing care access your record. Your details will be kept safe and only used for providing direct care.

Which organisations are involved?

The Norfolk and Waveney Integrated Care System brings together NHS organisations, councils, and wider partners in a defined geographical area to deliver more joined up approaches to improving health and care outcomes.

- Norfolk and Waveney GP practices
- NHS Norfolk & Norwich University Hospital
- NHS James Paget University Hospital
- NHS Queen Elizabeth Hospital

- Norfolk Community Health and Care
- East Coast Community Healthcare
- Norfolk County Council
- Norfolk and Suffolk NHS Foundation Trust
- Cambridgeshire Community Services (who provide our health visiting services) - Integrated Care 24 (our 111 and out of hours provider)

What information will be seen?

Only information that is appropriate for health and social care professionals to access for the purposes of direct care:

- Dates and outcomes of hospital visits
- Upcoming appointments
- Referrals
- Prescribed Medications
- Allergies
- Investigations & Diagnoses (e.g., blood tests & scan results)
- Care and Support Plans
- Reviews and review dates
- Correspondence exchanged between health and care organisations.

How will my records stay secure?

Your records will only be visible to frontline health and social care professionals, at the point of care, in a read-only view. They will not be made public, used for marketing, sold, or shared with any third party. The Shared Care Record will not alter your information rights under the UK General Data Protection Regulation (UK GDPR) and the Data Protection Act 2018 (DPA); therefore, you can still request access to all information that organisations hold about you and details of the organisations accessing your data. To facilitate this each health and care professional will use their own unique log in credentials to access the Shared Care Record, and we will keep a record of those

that have accessed your information, the time and date when it has been accessed and be ready for regular audit.

What benefit will this have?

- Improved experience for you: from knowing that any health and care professional you see has the information they need to provide you with the best treatment and care or make the most informed decision for your wellbeing.
- Reduced waiting times and repetition: because having readily available information means less time contacting different settings and departments and less time repeatedly telling your story or sensitive, sometimes uncomfortable information.
- More efficient diagnostic testing: by avoiding duplication through better communication.
- More holistic care: by taking a wider scope of information into account, health and care professionals can communicate easily and proactively, considering your overall health, care, and social circumstance where we are aware and not just considering your immediate condition - doing what is right by you.
- Increased satisfaction: and confidence that no matter how complex your condition, that you're in the right place, at the right time, and whomever you see for your direct treatment and care is more informed.

How does it work?

With the Norfolk and Waveney Shared Care Record, all your important information will be available to your care team, in most cases through the main computer system they already use. This will eliminate the administrative burden of chasing for your information from colleagues elsewhere and allow those providing care to see the most up-to-date details and progress on your health and care journey. At present, health and care professionals do not have access to the same set of information about your health and care, they rely on the information they hold within their own records but can make requests for further information by requesting copies of letters, or email or holding peer to peer conversations.

Sometimes they have access to a basic online summary of data from your GP, but use of this is not widespread. These methods can be slow and can delay the provision of care. Information for particularly sensitive patients (e.g. those in the witness protection programme, celebrities etc) will be handled using increased security controls and audit. There will also be restrictions on sharing

particularly sensitive clinical information in line with national guidance (e.g. the adoption status of minors, sexual health conditions, HIV etc).

What if I need treatment outside of Norfolk and Waveney?

The new way of sharing information is currently only accessible by Norfolk and Waveney ICS health and care professionals. If you need treatment or care in a different organisation outside of Norfolk and Waveney ICS, those organisations will continue to share your most important information in the traditional ways, adhering to all best practice guidelines. After we have launched in Norfolk and Waveney, we will work to link our Shared Care Records to those from other Integrated Care Systems, allowing care professionals to see your information if you receive care outside our geographical area (e.g. in Addenbrooke's Hospital Cambridge, or London).

When will my information start to be shared?

This journey has already started with the appointment of Intersystems Corporation as our Technology partner in bringing the Shared Care Record to fruition. We are hoping that our organisations described above will be able to contribute data and view the Shared Care Records in the next few months.

What if I do not want my information shared?

To receive the most timely and appropriate care possible, we recommend that you allow our health and care partners to view information through the Norfolk and Waveney Shared Care Record. Because of the due diligence undertaken and secure nature of the Shared Care Record, all partner organisations are signatories to the My Care Record Information Sharing Approach and as such, information already held by our partners will be uploaded to the Norfolk and Waveney Shared Care Record unless you tell us otherwise. If individuals do not wish for their information to be accessed for the purpose of their direct care in this way, you may opt out by emailing nwhcp.igpeergroup@nsft.nhs.uk but please be aware that this may create clinical risks as health and care professional will not see your records as easily. Opting out of the Shared Care Record means that your information will be hidden from view and will not be accessible by health and care professionals in this way, even in an emergency.

What does a shared care record mean in real terms?

Use case: Betty, aged 82, has had a fall.

Betty is brought to the Emergency Department (ED) by a neighbour who witnessed her fall in the garden one Sunday afternoon. The fall resulted in a minor head injury. She has a history of dementia. She speaks to the triage nurse and then is seen by the doctor and must repeat the information again. She can remember some of the drugs she is on but not all of them. She remembers having a Social Care Referral in place – But cannot remember the discussion. Betty feels overwhelmed spending her time being asked repeatedly for details she can't remember, by a long series of people. Betty feels ignored when she is talking about her family and grandchildren.

At present: The triage nurse first assesses Betty with the little information provided. She requests the ED Clerk to contact Betty's GP to locate recent medical history and medication list. The ED receptionist has also been tasked to contact Local Government to find the Social Care worker who has recently assessed Betty. Betty is seen by the ED Consultant who cleaned and dressed Betty's wound. Unfortunately, as the above information cannot be located as it is late on a Sunday afternoon. Betty has been unnecessarily admitted because the care team are unsure what social care package she has in place. Betty was discharged early Monday morning after an uncomfortable night on Medical Assessment Unit (MAU) for a social admission she did not need.

With a Shared Care Record: Following the introduction of the Shared Care Record, the hospital will be able to view the medication lists / recent GP visit. This will save Betty having to remember her medication and will save her having to repeat her story. With this information available, in addition to healing Betty's wound – the ED consultant would have been able to do a medication review and ask her GP to change the medication that was causing the falls. The Shared Care Record will also show the Social Care history – so the Hospital will be able to review what social care Betty receives. With this information, the Hospital could feel confident in discharging her as they could see that Betty has carers visit 3 times a day. Once Discharged, the Social Care team will be able to access the Shared Care Record and see the discharge letter, without the needing to chase for the information – this will enable them to plan the care needed from the start of the intervention and liaise with Therapy colleagues about what equipment / adjustments could support Betty at home. This will save Betty having to repeat what happened (potentially struggling to remember the events of the fall).

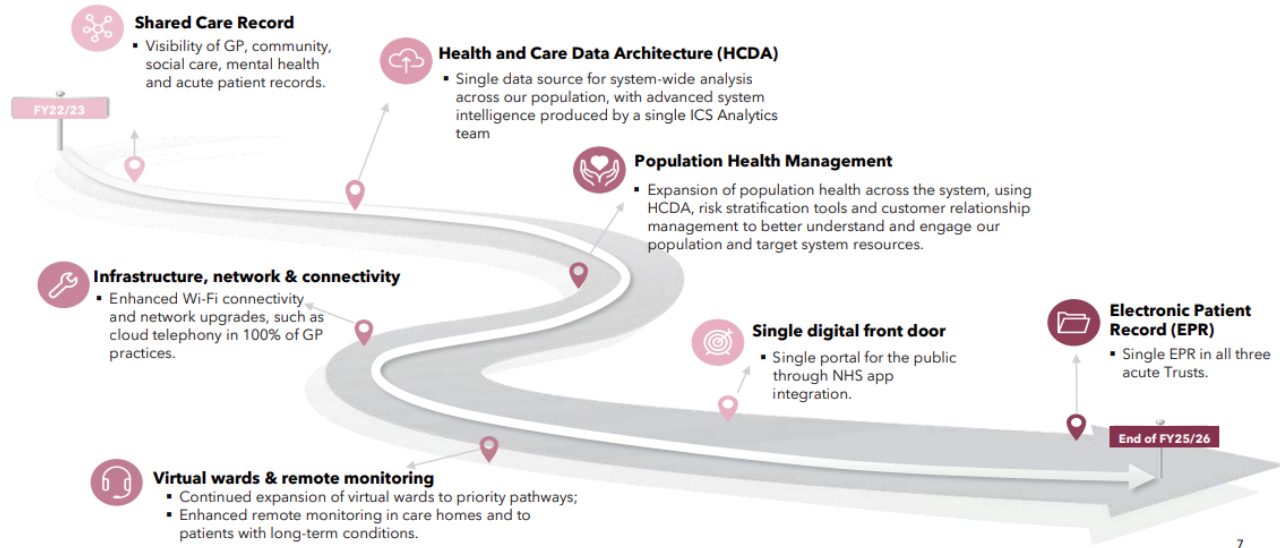
Appendix 4: Digital Transformation Strategic Roadmap

Executive Summary

Over the next few years, we will achieve key milestones on our digital transformation strategic roadmap as we work together to improve the health and wellbeing of people living across Norfolk and Waveney.

Digital Transformation Strategic Roadmap

Digital will enable transformation across all care settings, including outpatients.





healthwatch

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