healthwatch
Tower Hamlets
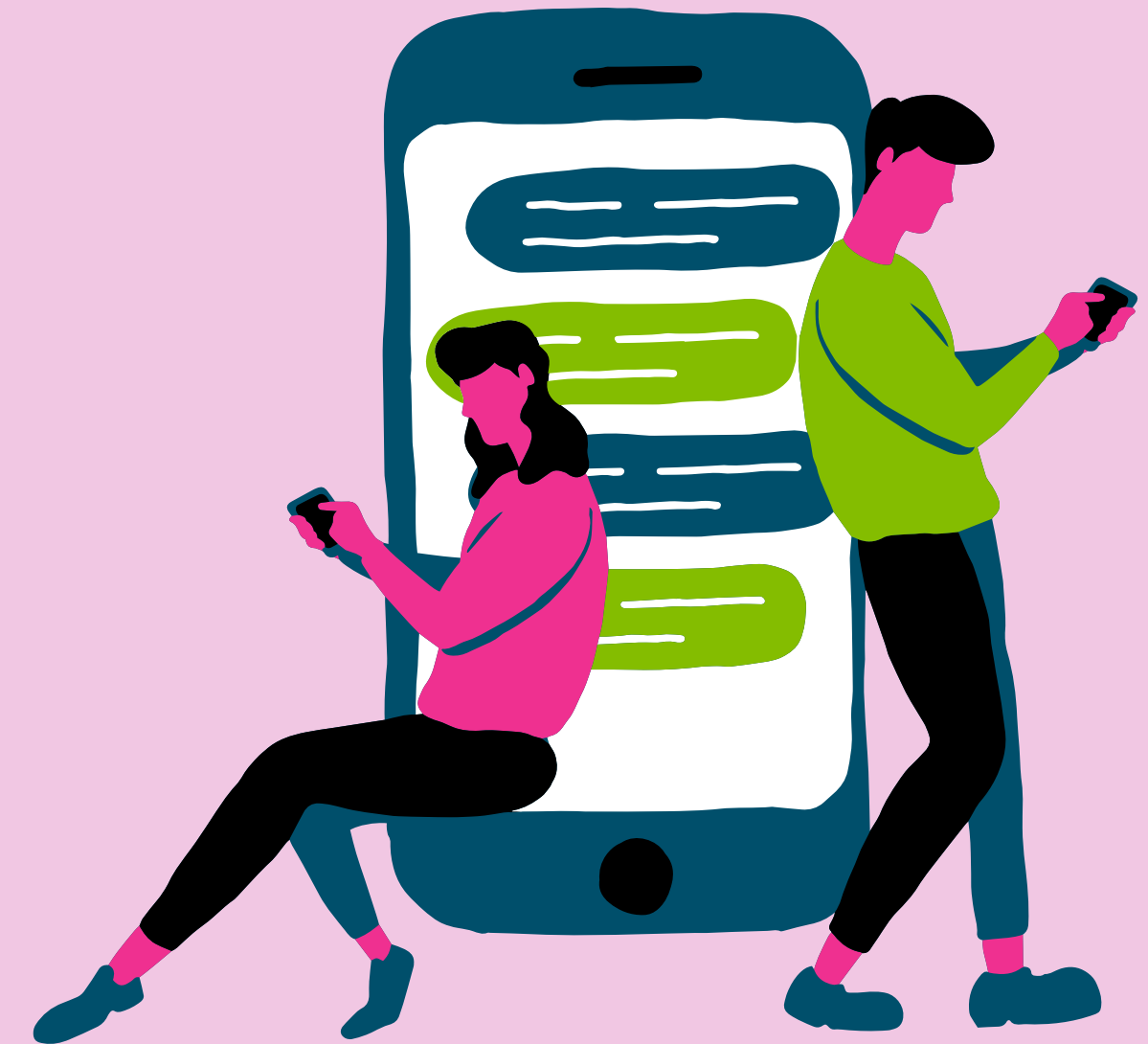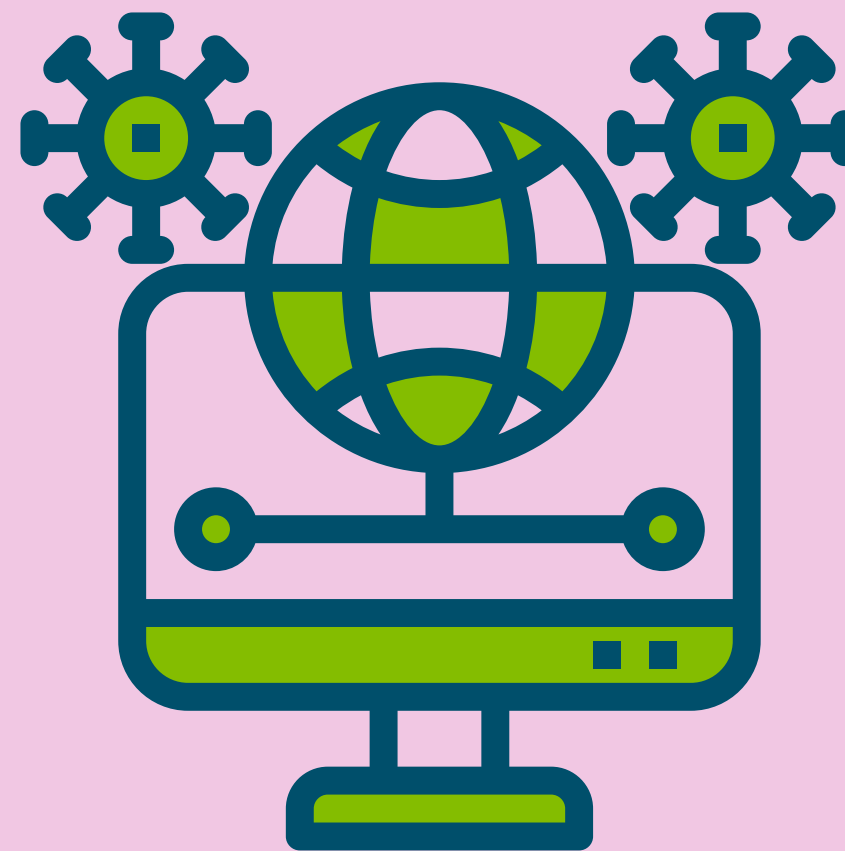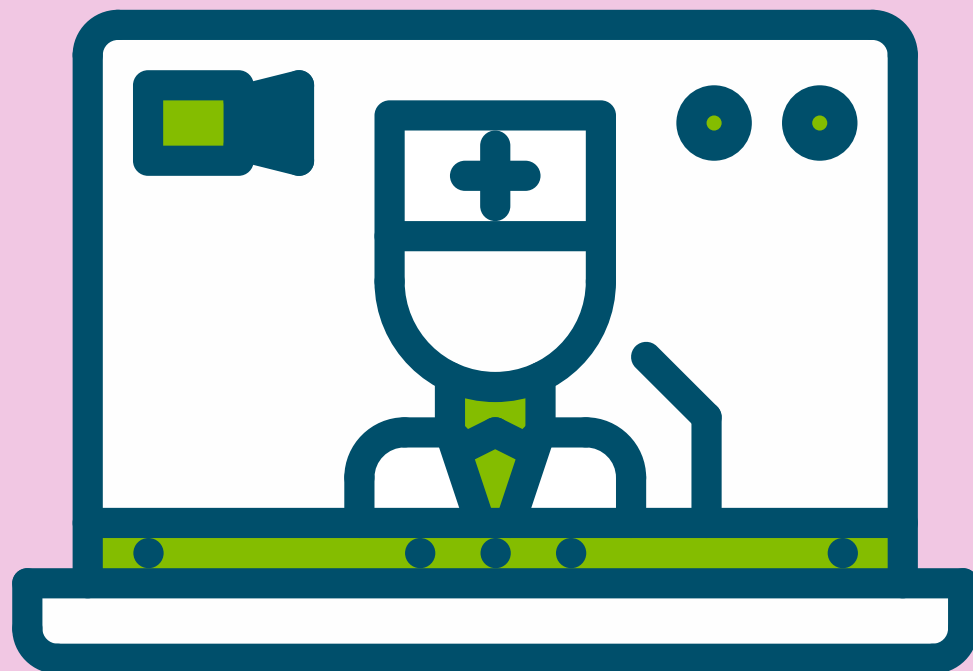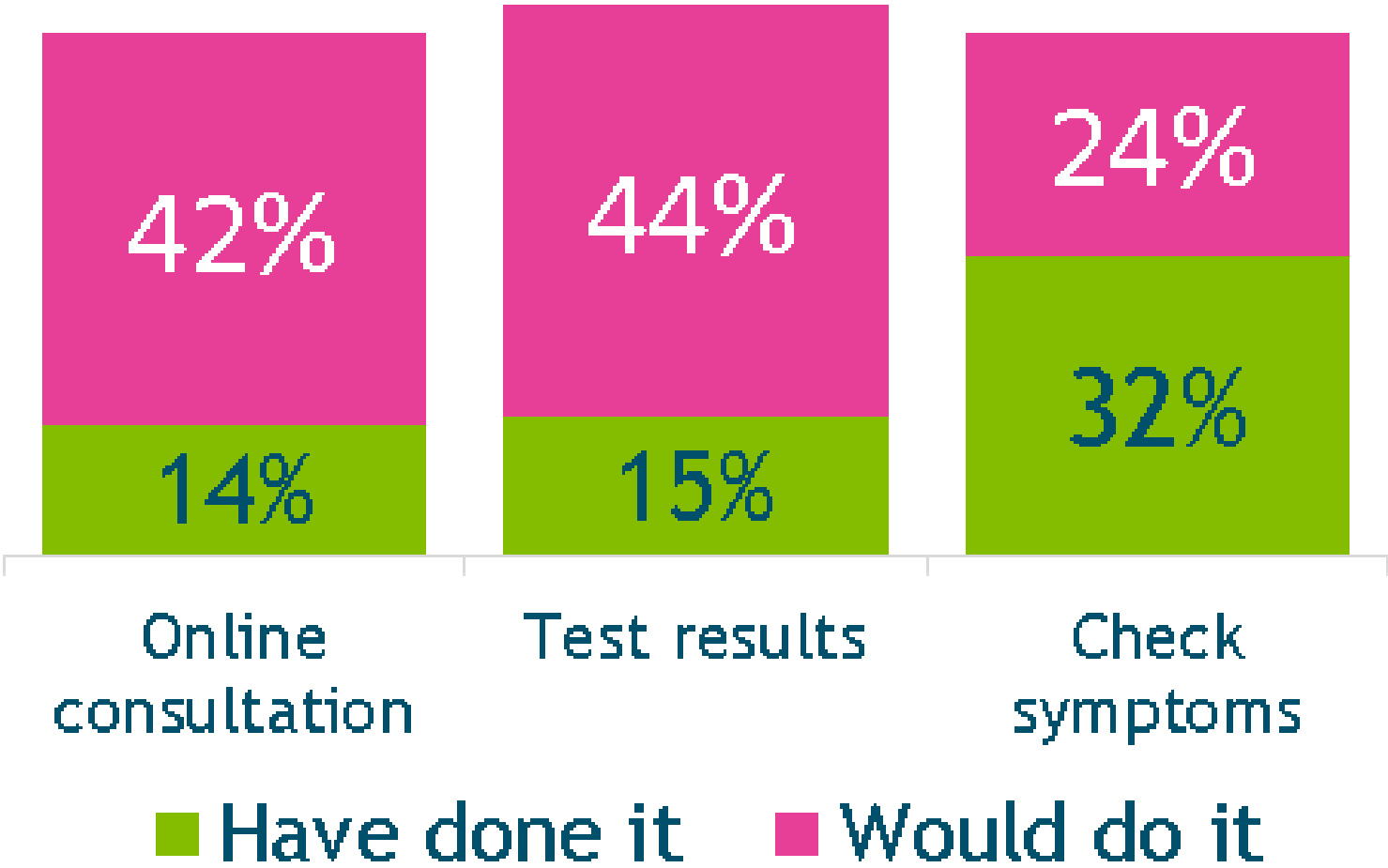
Community insights
on digital inclusion

Using NHS services online

In December 2019, we asked 240 local people if they would consider using online tools to access NHS services.

67% would consider using an NHS app to access NHS services.

56% would have an online consultation with a GP

59% would access their test results online

56 would look up their symptms online

	Online consultation	Test results	Check symptoms
Would do it	42%	44%	24%
Have done it	14%	15%	32%

■ Have done it ■ Would do it

Digital Inclusion

Using NHS services online-how Covid changed things

In March-June 2020, we asked 354 local people whether they had accessed NHS services online

5% filled in an E-consult form to receive a call back from their GP

3% had an online consultation with a GP or practice nurse

7% communicated with another medical professional online

13% used the NHS 111 online website

20% looked up their symptoms online elsewhere

10% ordered a repeat prescription online

1% accessed their test result or referrals online

The groups of people most likely to say that they would use NHS services online in 2019 were similar to those who did use them in 2020

- In work
- Middle class
- Aged under 50
- Parents

... with one exception

People in poor health were less likely to say in 2019 that they would use online NHS services and more likely to have done so in 2020 than their healthier peers. This may be simply because people in good health may not have needed any NHS services, or because those in poor health accessed online services despite their reluctance.

Digital Inclusion

Using NHS services online during Covid-patient experience of online tools

Patients who used e-consult or other forms of online consultations in their GP surgeries found it easy and efficient.
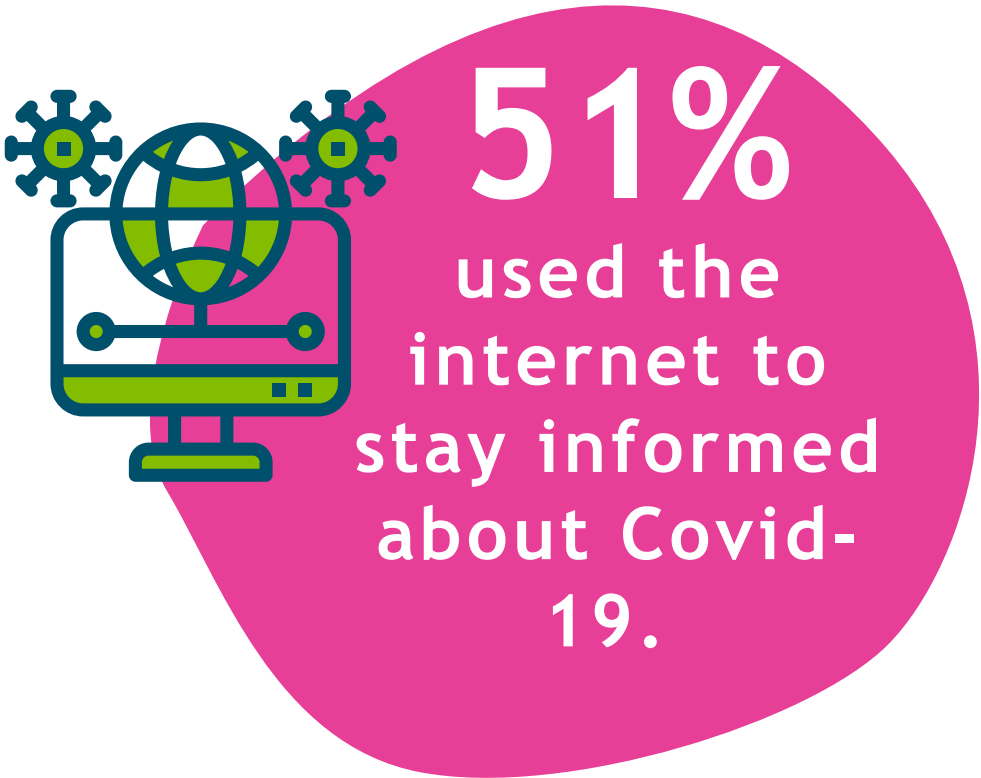
Medicine reviews and other less complex appointments can often be done by telephone or teleconferencing with the same results as in person.

Online or telephone appointments are less likely to be suitable for patients with complex needs or those with new, unexplained symptoms.

Digital Inclusion

Using online tools to stay well during Covid-19

32% kept in touch with friends and family online.

51% used the internet to stay informed about Covid-19.

26% joined a local support group online

10% used a website or app for staying physically active

17% used a website or app for their mental health

Digital Inclusion

Who is excluded?

38%
of November 2019 neighbourhood conversation participants

14%
of 2020 Covid-19 survey respondents

were digitally excluded

(had no internet access, no devices to access the internet on or no IT literacy)

Compared with other respondents they were:

More likely to be of Black ethnicities.

More likely to be older.

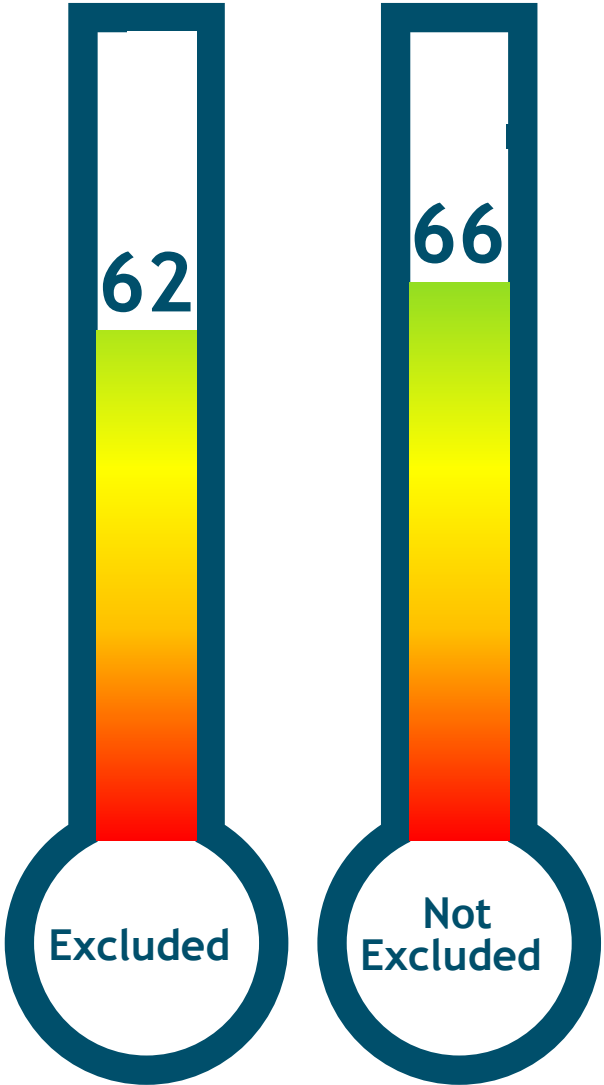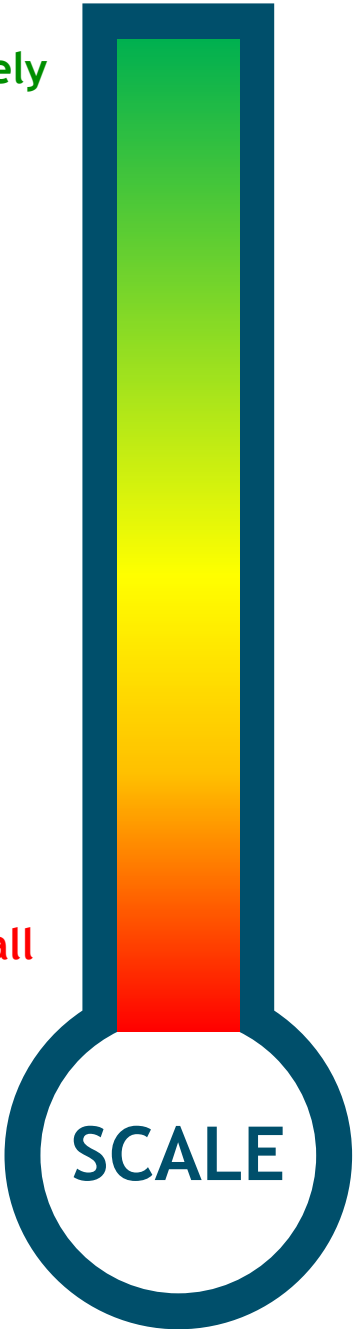More likely to be in poor health or disabled.

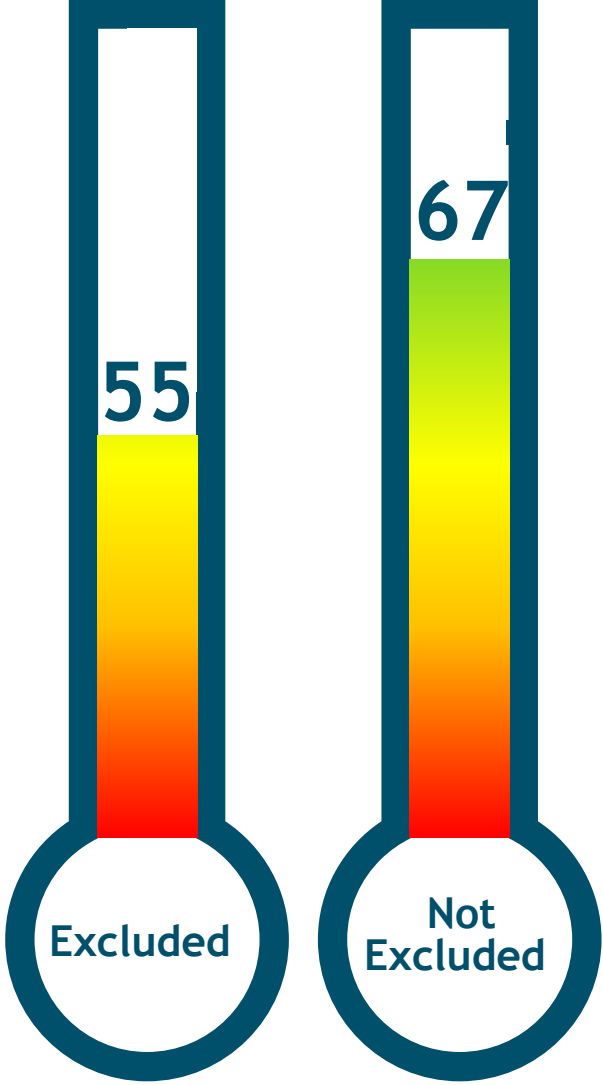Less likely to be working or financially secure

Digital Inclusion

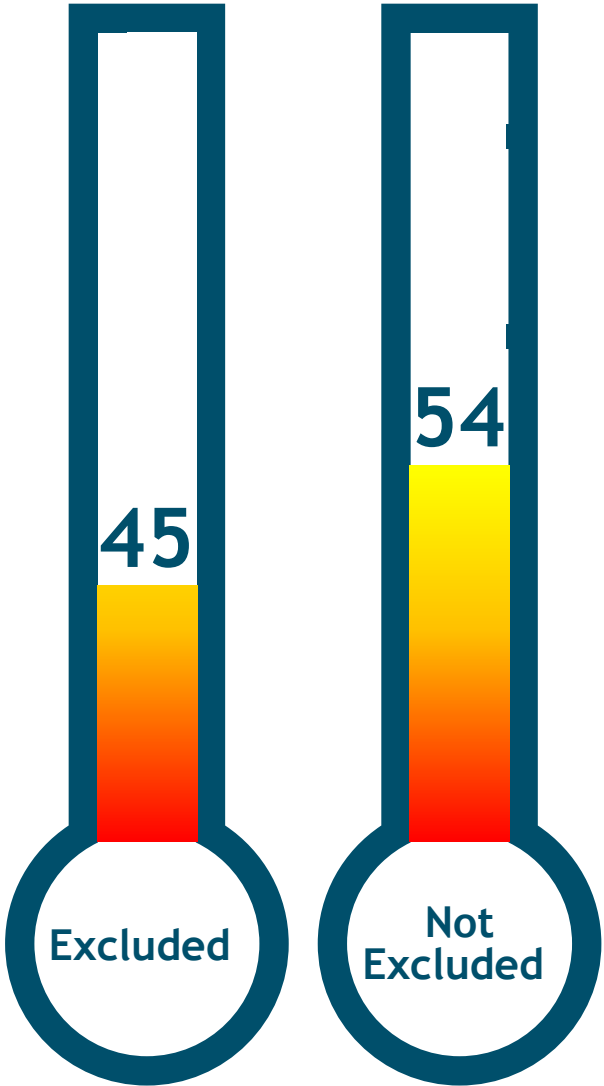## Digitally excluded people in their community

Scale thermometer:
- 100 Absoutely (😃)
- 0 Not at all (☹️)

SCALE

Do you think your local area is a good place to live?
- Excluded: 62
- Not Excluded: 66

Are you able to support yourself and your family financially?
- Excluded: 55
- Not Excluded: 67

Do children in your area get the best start in life?
- Excluded: 45
- Not Excluded: 54

Digital Inclusion

Digitally excluded people in the Covid-19 pandemic

Digitally excluded people relied on TV news and on friends and family members to **stay informed about Covid-19.**

Older people's charities and ethnicity-based local charities reached out to digitally excluded older people to offer **practical support and befriending.**

People who **needed medical advice** and could not use the 111 online service faced long waits when using the telephone service.

Digital Inclusion

Key findings

In December 2019, opinions of GP services were mixed; while hospital services, psychotherapists, and social services supporting recovering addicts and the homeless were positive.

During the Covid-19 pandemic, multiple services, including GP surgeries, hospital consultants and psychotherapists have started providing more services remotely (online or via phone). In some cases, the change has been welcome, but the scope of what is doable remotely is limited.

People from BAME backgrounds and those with complex healthcare needs were less likely to have a positive experience with services and to find them accessible.

Patients waiting for routine dental treatment, elective procedures or consultant-led outpatient treatment have experienced delays and cancellations because of Covid-19. Mental health patients are also affected.

Digital Inclusion

Recommendations and questions

Recommendations

1 Identify whether patients are digitally exlcuded on their patient record and prioritise them for face to face appointments if possible.

2 Work with social prescribers, care navigators, advice/advocacy charities to support digitally excluded people and those with poor English to access digital services.

3 Invest in centralised, patient-controlled technological solution for sharing records between health professionals.

Further questions

1 Are people using the NHS Test and Trace app, and if not, why not? Are the obstacles about distrust/data concerns, technical difficulties, digital exclusion or reluctance to be tested?

2 Do digitally excluded people face longer waiting times and more obstacles when accessing health and social care services?