Report recommendation	ICS Action	Lead organisation	Responsible owner	Timescale	Actions	Linking to Digit	al Inclusion Pr	ogramme
					Workstream 1 - Intervention coordination and population support	Workstream 2 - Workforce Development	Workstream 3 - Analytics and Evaluation	Workstream 4 - Public communications & engagement
Accessing & Using the Internet  Health services should consider, as part of the development of the Herefordshire and Worcestershire Integrated Care System, how work streams including the Digital Inclusion Programme and Inequalities and Prevention Collaborative will ensure -								
may face health inequalities due to age, housing situation, income, disability and long-term health conditions.	a. We will continue to support Healthwatch and Age UK device loan schemes, including access to funding and support for scheme evaluation b. We are building a commmunications and engagement programme to increase awareness across patients and staff of available device loan schemes and mobile data schemes as they become available c. We have a programme in place focused on raising awareness and skills within GP Wellbeing teams and Library Digital Champions so that those staff can support signposting people to these services to support digital inclusion challenges. d. We will then work to develop and expand the network of digital champions across community and voluntary groups across the ICS to help signpost people to digital skills training, device loan and mobile data schemes locally and nationally. e. We have developed and will continue to iterate on our digital inclusion heatmap so the programme team and wider workforce can more easily, pro-actively identify relevant communities and their specific challenges to target personalised support and services more effectively f. We will work with Local Authorities to ensure that Here2Help (Worcestershire), Talk Community (Herefordshire) and Wellbeing hub resources signpost to available programmes and support g. We will continue to engage with and work with 3rd sector, community and voluntary groups to introduce additional interventions to support specific	NHS Herefordshire and Worcestershire	SRO- Digital SRO - Communications	2022/2023	$\bigcirc$	$\odot$		<b>⊘</b>
	communications and groups.  h. We will continue to engage with providers across the ICS and community and voluntary groups to bid for funding to support interventions to support communities with digital access.  a. We have a programme in place focused on raising awareness and skills within GP Wellbeing teams and Library Digital Champions so that those staff can	NHS Herefordshire and	SRO- Digital	2022/2023				
understanding and confidence of using the internet and electronic devices, such as phones	b. We will work to develop and expand the network of digital skills training. b. We will incorporate health literacy standards in any training and support offers. d. We will work more closely with community and voluntary groups to help and support people in the use of the technology and/or signpost to available services for digital skills training. c. We will incorporate health literacy standards in any training and support offers. d. We will work more closely with community and voluntary sector partners to identify additional opportunities to engage hard to reach groups with training and ongoing support to get online and develop their skills. e. We will work with Local Authorities to ensure that Here2Help (Worcestershire), Talk Community (Herefordshire) and Wellbeing hub resources signpost to available programmes and support	Worcestershire	SRO - Communications	2022/2023	$\bigcirc$	$\odot$		$\bigcirc$
3. Funding, initiatives and support are long term and sustainable.	a. All Transformation programmes, including digital programmes, are required to have an equalities impact assessment, which includes the Public Health England Health Equity Assessment tool with specific focus on health inequalities, as well as an financial assessment to ensure that initiatives are financially suitable in the longer term which will include understanding of ongoing revenue costs of any capital schemes  b. All schemes are monitored to ensure benefits are being delivered and value for money is being delivered, which includes demonstrating an impact on reducing digital inclusion and health inequalities. If positive return on investment is demonstrable, ongoing financial support from relevant ICS partners will identified as appropriate. Community Groups & Healthwatch will be engaged in supporting these evaluations to inform ongoing investment decisions and	NHS Herefordshire and Worcestershire	SRO- Digital SRO - Communications	2022/2023	$\bigcirc$		$\otimes$	
Online Information	prioritisation.							
4. How to ensure there is a system to identify those who need to receive information in a non-digital format and that this is always clear and available in a variety of formats and languages e.g. leaflet, letter etc	a. All services within H&W Health & Care Trust should complete an 'accessible information' form on patient records to identify communication challenges with alerts automatically generated. Records are regular reviewed to ensure all patients have this form.  b. We will include, within the Digital Inclusion Programme, a review into how ICS health and social care organisations record and share information relating to communication needs of citizens and patients. We will then make recommendations for improvement.  c. We will then agree put in place a programme of work to consistently record and share this information, including workforce and citizen awareness.	NHS Herefordshire and Worcestershire	SRO- Digital SRO - Communications	2022/23	$\bigcirc$	$\bigcirc$		$\bigcirc$
simple layout, use of clear language, translation function	a. The NHS.uk site and NHS App will be promoted in our communications as the main sources of health information and digital services for patients, as these sites have been created with a high level of web accessibility in their design. This will help provide common platforms for patients and include the capabilities to utilise accessibility tools and translation functions.  b. We will promote Here2Help (Worcestershire), Talk Community (Herefordshire) and Wellbeing hub as Trusted sources of information for signposting to services and have been designed as accessible websites.  c. We will work with developing a network of Digital Champions, starting with GP Wellbeing teams and Library Digital Champsions, to upskill those staff in understanding the accessibility options available to people (such as screen readers, translation functions, voice activation) in order to support people in the use of these accessibility options.  d. Provider Trust and Council websites already work to Web Accessibility and NHS guidelines for web accessibility. We will commission a further accessibility review and work with Trust communications leads on any recommended improvements.  e. GP websites, via a regional programme under Digital First Primary Care programme and funding, will be reviewed during 2022/23 including accessibility standards. HWCCG will work with practices via the Digital team to support improvements where identified. This plan has already been agreed by regional digital primary care leads.  f. H&W Health and Care Trust provide accessibility training for staff who write public facing documents and internet pages.		SRO- Digital SRO - Communications	2022/2023	$\bigcirc$	$\bigcirc$		<b>⊘</b>
6. Reviewing websites to ensure they meet disability accessibility standards, including being compatible with screen readers		NHS Herefordshire and Worcestershire	SRO - Digital	2022/2023	$\bigcirc$	$\bigcirc$		<b>⊘</b>

Report recommendation	ICS Action	Lead organisation	Responsible owner	Timescale	Actions Workstream 1 - Intervention coordination and population support	Workstream 2 - Workforce	tal Inclusion Pr Workstream 3 - Analytics and Evaluation	Workstream 4 - Public communications & engagement
	<ul> <li>a. The ICS has a Communications Group across Provider Trusts who meet on a regular basis to coordinate communications activities across the NHS in Herefordshire and Worcestershire. Accuracy of information will be raised with and taken forward with this group (GP Practice websites is out of scope of this group).</li> <li>b. We will include accuracy of information within the website reviews for General Practice we undertake and make recommendations to individual providers as required, as highlighted in section 5 above.</li> </ul>	NHS Herefordshire and Worcestershire	SRO - Communications	Ongoing				$\bigcirc$
alternatives available	a. We are working with communications and engagement teams across providers to create a programme of communications to support with building general population awareness of the sources of safe sources of information and safe digital solutions (e.g. NHS.uk and NHS App, Health and Wellbeing portals) available to them to use.  b. We intend for this content to be available in a number of formats, including posters and leaflets, and to be widely distributed across health and care settings and in community and public spaces. We intend for this information to signpost to sources of support.  c. We will work with partner and voluntary sector organisations and community groups to help increase reach of these messages and understand the preferred formats for delivery.  d. H&W Health & Care Trust include an Accessible Information Standard notice on all patient literature advising patients how to request information in alternative formats if required.	NHS Herefordshire and Worcestershire	SRO - Communications	2022/2023	$\bigcirc$	<b>⊘</b>		
Online systems for GP Access								
setting up and using online systems, based on feedback from patients about their experiences. Ensuring that the process is user friendly and simplified where possible, including —  a) Clear use of language, lack of repetition, easy navigation and accessible layout of information e.g. font size within the system  b) Simple and accessible process for confirming identity  c) Functions are enabled e.g. booking appointments  d) Information e.g. test results is added / updated in a timely way  e) Systems for actioning requests e.g. prescriptions are working efficiently	a. As highlighted in section 5 above, a review of GP practice websites will be undertaken during 2022/2023 financial year and the CCG will work with practices on implementing suggested changes in relation to accessibility including ease of use with a screen reader and translation services.  b. As part of the work the CCG do with Primary Care during 2022/2023, we will look to engage with practice Patient Participation Groups in relation to accessibility of services and look for recommendations on where this can improve.  c. We are working with the national NHS Digital team on getting some of our main digital systems integrated with the NHS Login as a common way of accessing digital health services to make it easier for patients to access them. This would mean they could use NHS Login for a wide range of services including the NHS App.  d. We will promote NHS.uk and NHS app as core digital sources of information and for accessing digital health through our communications campaign with the public. Both NHS.uk and NHS App have been developed for Accessibility with translation features and compatibility with accessibility software.  e. We work with practices to promote Here2Help (Worcestershire), Talk Community (Herefordshire) and Wellbeing hub resources signpost to available programmes and support	NHS Herefordshire and Worcestershire	SRO- Digital SRO - Communications	2022/2023	$\bigcirc$	$\otimes$		<b>⊘</b>
in digital and non-digital format, including - a) The benefits of using the system for the patient b) Security and privacy of the system and data storage d) How to set up and access online systems e) How to access support with using the system	a. Our communications and engagement workstream within the Digital Inclusion Programme includes plans to create further support material for patients in relation to the digital services available to them, simple guides/animations showing how to use the systems (e.g. simple leaflet on how to get access to NHS App), where to get support and additional supporting information in relation to digital system safety. This will include information about where to find privacy policies about how we and system suppliers manage people's information. b. Our plan is to use the digital champions we develop (refer to sections 1 and 2) and raise awareness of this materials across the workforce, as well as a public awareness campaign. c. We will also focus on engagement campaigns with key community groups and voluntary sector organisations to spread awareness and distribute support materials we made available.	NHS Herefordshire and Worcestershire	SRO- Digital SRO - Communications	2022/2023		<b>⊘</b>		$\bigcirc$
11. Providing support for individuals to help them set up and use systems on an ongoing basis e.g. point of contact at the practice or drop in opportunities to have a demonstration or raise queries	a. We have a programme in place focused on raising awareness and skills within GP Wellbeing teams and Library Digital Champions so that those staff can support signposting people to these services to support digital inclusion challenges.  b. We will then work to develop and expand the network of digital champions across community and voluntary groups to help signpost people to digital skills training, device loan and mobile data schemes and any other support needed depending on the individual's need  c. We will work with community and voluntary groups to identify where support can be provided to help individuals get online  d. We will work with local authorities to promote Here2Help (Worcestershire), Talk Community (Herefordshire) and Wellbeing hub to signpost patients to available programmes and support	NHS Herefordshire and Worcestershire	SRO - Communications	2022/2023	$\bigcirc$	$\bigcirc$		<b>⊘</b>
12. How to ensure that there is always a non-digital option available, that patients are aware of this and that those using this option are not disadvantaged.	ADD in raise awareness of additional services run by the voluntary sector and community sectors to support individuals to get online. See Here2Help and Talk Communities links  a. There is and always will be a non-digital option available to patients, and we will ensure that communications programme continue to highlight this.  The current public communication programme highlights the different methods of accessing Primary Care (for example) including digital and non digital means.  b. We have a programme underway to create staff awareness material in relation to digital inclusion, to help raise awareness of the challenges and barriers that digital channels can introduce. The aim is to support staff to better under stand a patient's needs and to ensure that members of the public are supported if they choose not to use digital means of access or support.  c. We are working with Provider Training leads and equality leads to set up additional digital inclusion awareness training for our health and social care workforce and/or to include this within Equality and Diversity training.	NHS Herefordshire and Worcestershire	SRO- Digital SRO - Communications	2022/2023		$\bigcirc$		$\bigcirc$

Report recommendation	ICS Action	Lead organisation	Responsible owner	Timescale	Action	ns Linking to Dig	ital Inclusion Pr	ogramme
					Workstream 1 - Intervention coordination an population	Workstream 2 - Workforce Development	Workstream 3 - Analytics and Evaluation	Workstream 4 - Public communications & engagement
13. Reviewing appointment systems within GP practices, based on feedback from	a) to e) Significant work is underway within the Primary Care progress to support practices to return to pre-pandemic levels of appointment activity and to re-	NHS Herefordshire and	SRO - Primary Care	2022/2023	support	$\bigcirc$		
Including consideration of –	focus on face to face appointments where necessary. This programme is led by the CCG Primary Care team and is supported by place-based GP Federations and PCN Clinical Directors.	Worcestershire				•		$\otimes$
<ul> <li>a) Ability for patients to contact practice by phone when needed and cost e.g. introduction of free phone number across the County</li> <li>b) Ability for patients to book online e.g. enabling this via online system used</li> </ul>	Practices will continue to triage patients, by phone or online according to patient communication method, to the correct service which may not be a GP in the first instance. Patients are also able to submit requests online for appointments or advice, but this is as well as contact in person and on the telephone, not instead of.							
c) Providing an option for people to visit the practice in person to book an appointment	Practices are required to offer appointments for booking online, as part of the GP contract and will be reviewed and monitored throughout 2022/23.  A public communications campaign is underway and will continue throughout the year about the methods of access to Primary Care and the different roles within community pharmacies and general practice to support a patient's needs.							
a specific GP  e) How the practice makes decisions about whether appointment offered is remote or face-to-face, based on clinical need and flexibility in relation to	f) and g) How a clinical system can identify individual need and how we can identify patient preference is answered in response to question 30 below.  h) Specific timeslots are already provided for planned telephone and video call appointments in primary and secondary care. Triage telephony appointments are given a timescale for call back.							
individual need and circumstances e.g. communicationneed due to disability, limited English language, caring responsibilities, need for support at appointment, availability of private space for remote appointment.	i) An animation to support patients with video consultations has been produced and will be included with the public communication and enagement campaigns.							
population of protection of protection of the protection of the point of booking appointment e.g. flagging systems as required by the Accessible Information Standard.								
g) Enabling patient preference of appointment choice where possible h) Providing specific time slots for telephone and video call appointments to help patients to prepare for the call and find somewhere private to hold the								
conversation.  14. How to ensure reasonable adjustments are in place for people with a	a. See section 30 below for information about how we will work to record reasonable adjustments	NHS Herefordshire and	SRO- Digital	2022/2023				
disability, including – face-to-face appointment, BSL interpreters and availability of support	b. We will work with provider Trusts, Local Authorities and GP practices on ensuring that each organisation has an up to date plan for addressing the needs of patients and the public who require British Sign Language or foreign language interpreters to support their care.  c. We will work with health and social care organisations to ensure that information about how the public can access foreign language and BSL support to access	Worcestershire	SRO - Communications	2022/2023				$\bigcirc$
15. How to ensure all staff have an understanding of communication difficulties	health and social care services is easy to find and visible.  a. As per 12 above, we are working with Provider Training leads and equality leads as part of the Digital Inclusion Programme to set up additional digital	NHS Herefordshire and	SRO - Quality	2022/2023				
people with a learning disability, Autism, hearing or visual impairment, mental health or long term health condition may experience when contacting the practice and having an appointment by telephone or video call.	inclusion awareness training for our health and social care workforce and/or to include this within Equality and Diversity training.  b. All Provider Trusts and NHS organisations have Equality and Diversity training in place for all staff groups within mandatory training.  c. We will work with Local Authorities on making digital inclusion awareness training available to social care providers for them to access for their workforce.	Worcestershire	SRO - Health Inequality			$\otimes$		$\bigcirc$
16. How to ensure that initiatives to reduce health inequalities, such as health checks and requirement to provide accessible information and support for	a. The specification of health check services are currently being altered to account for several methods of engaging with hard to reach groups as part of addressing health inequalities.	NHS Herefordshire and Worcestershire	SRO - Quality SRO - Health Inequality	2022/2023		<b>⊘</b>		
people with a disability or additional communication needs are being implemented and that the effectiveness and quality is not impacted upon due to digital access.	b. The CCG has a quality improvement plan for 2022/23 which includes auditing the quality of Annual Health Checks and patient experience feedback. In the training, face-to-face checks are promoted as this is the expectation of the Royal College of GPs.  c. Healthcare Access Support Workers to work closely with Primary Care Networks Annual Health Check / Learning Disability leads to review a core group of individuals who did not access Annual Health Checks during 2021/22  d. Those with learning disabilities who failed to attend their Annual Health Check in 2021/22 will be supported to engage in 2022/23 through the work of a							
	Healthcare Access Support Worker. This will aim to engage at least 40% of those during 2022/23  e. GP Learning Disability Registers to be re-validated to ensure recognition of those eligible for an Annual Health Check-this will include a focus on those aged 14-							
	25 years.  f. Awareness training and an increase in availability of sensory friendly environments will support engagement of autistic people with mild/ moderate learning disability who have been reluctant to attend for health checks, screening and vaccinations.							
	g. Any new initiatives launched through the ICS Digital Inclusion programme will incorporate a variety of methods of information delivery tailored to meet the needs of the communities being supported.  h. The programme team will also present the information and methodology to the Digital Inclusion Advisory Group (voluntary sector expertise and CCG patient							
	engagement colleagues) and once established, a patient reference group, to ensure everything is fit for purpose before being disseminated							
17. How to ensure photographs sent by patients are stored securely and deleted as appropriate and that patients are aware that their data is secure.	a. The NHS has high standards when it comes to the management and security of patient data. Every digital system or solution purchased has to reach a minimum set of information governance and cyber security standards. These standards are embedded into how we procure and implement digital systems. The solution in place within Primary Care, Accurx, for the exchange of photo messaging, meets all of the required standards and these standards are embedded into	NHS Herefordshire and Worcestershire	SRO- Digital SRO - Communications	2022/2023				$\bigcirc$
	the contract held with the supplier. This applies for any SMS text message between a GP practice and patient, digital document, patient triage request or photo message.  b. We will include messages about the security of digital platforms, patient data security, where to find privacy notices and information about security within the							
10. Device ving platforms used for video calling to ensure consistency, case of	public communications campaign as part of the overall awareness building of digital systems.	NUC Harafardshire and	CRO Digital	2022/2024				
18. Reviewing platforms used for video calling, to ensure consistency, ease of access for patients and data security.	a. The ICS Digital Group is working to reduce the number of video consultation solutions in place within the ICS to reduce complexity. Our principles are to utilise video consultation solutions that do not require the patient or service user to download an app. Our intention is to integrate video consultation platforms into the ICS wide patient portal to simplify use for patients into the future.  b. All solutions currently in place meet the required data security standards. Every digital system or solution purchased has to reach a minimum set of	NHS Herefordshire and Worcestershire	SRO- Digital	2023/2024	$\bigcirc$			
	information governance and cyber security standards. These standards are embedded into how we procure and implement digital systems.							
Online Access and Support for Mental Health  19. How to ensure that all staff have an awareness and understanding of mental health issues and the possible impact on patients' ability to communicate and	a. As per 12 above, we are working with Provider Training leads and equality leads as part of the Digital Inclusion Programme to set up additional digital inclusion awareness training for our health and social care workforce and/or to include this within Equality and Diversity training.	NHS Herefordshire and Worcestershire	SRO - Quality SRO - Health Inequality	2022/2023		$\bigcirc$		
have appointments remotely	b. Mental Health First Aid training is also being made available for all staff across the ICS.							
20. How to identify patients who may find it more difficult to engage in appointments by phone or video call due to mental health and anxiety, so that	a. As per 30 below, we will work to roll out the Reasonable Adjustments Flag to record this information.  b. We will also work to encourage the public to flag these needs with their health or social care providers when interacting with them so that their needs are	NHS Herefordshire and	SRO - Quality SRO - Health Inequality	2022-2024				$\bigcirc$
face-to-face can be offered.	b. We will also work to encourage the public to flag these needs with their health or social care providers when interacting with them so that their needs are understood and adjustments made.	Worcestershire	SNO - Health inequality					
People with Learning Disabilities and Autism								

Report recommendation	ICS Action	Lead organisation	Responsible owner	Timescale	Action	s Linking to Dig	Linking to Digital Inclusion Programme		
					Workstream 1 - Intervention coordination and population support	Workstream 2 - Workforce	Workstream 3 - Analytics and Evaluation	Workstream 4 - Public communications & engagement	
21. How to ensure all staff have an understanding of anxiety and communication difficulties experienced by people with a learning disability and Autism	a. As per 12 above, we are working with Provider Training leads and equality leads as part of the Digital Inclusion Programme to set up additional digital inclusion awareness training for our health and social care workforce and/or to include this within Equality and Diversity training.  b. All staff working in patient facing or operational teams within H&W Health & Care Trust complete 'Learning Disability Awareness' training and all staff in Mental Health in-patient settings complete "Autism Spectrum Matters" training.  c. Autism Awareness training is being made available to all ICS staff.  d. Awareness training is planned for the workforce and an increase in availability of sensory friendly environments will support engagement of autistic people with mild/ moderate learning disability who have been reluctant to attend for health checks, screening and vaccinations.	NHS Herefordshire and Worcestershire	SRO - Quality SRO - Health Inequality	2022/2023		$\bigcirc$			
22. Flagging systems are in place to enable face-to-face appointments for people with a learning disability and Autism	a. As per 30 below, we will work to roll out the Reasonable Adjustments Flag to record this information. b. We will also work to encourage the public, via our public communications campaign, to flag these needs with their health or social care providers when interacting with them so that their needs are understood and adjustments made.	NHS Herefordshire and Worcestershire	SRO- Digital SRO - Communications	2022-2024	$\bigcirc$			$\bigcirc$	
23. How to ensure Annual Health Checks for people with a learning disability are of a good quality, carried out face-to-face where possible and enable the individual to fully engage in the process.		NHS Herefordshire and Worcestershire	SRO - Quality SRO - Health Inequality	2022/2023	$\bigcirc$				
	d. Those with learning disabilities who failed to attend their Annual Health Check in 2021/22 will be supported to engage in 2022/23 through the work of a Healthcare Access Support Worker. This will aim to engage at least 40% of those during 2022/23 e. GP Learning Disability Registers to be re-validated to ensure recognition of those eligible for an Annual Health Check-this will include a focus on those aged 14 25 years.  f. Awareness training and an increase in availability of sensory friendly environments will support engagement of autistic people with mild/moderate learning disability who have been reluctant to attend for health checks, screening and vaccinations.	1-				$\bigcirc$			
Carers  24. How to ensure that flagging on systems identifies carers	a. GP Practice systems are already able to identify carers where a patient identifies their carers to the practice and to set carers to have access to a patient's record to support key functions such as ordering medications and making appointment bookings on their behalf as a proxy (on behalf of) the patient. We will include information about this within the public communications and engagement campaign to build public awareness.  b. We will work with other providers across the ICS on how it might be possible to identify carers and flag this within systems - for instance, through the Shared Care Record  c. The patient portal will allow patients the ability to nominate a range of people they wish to have involved in their care including carers.  d. We will be undertaking public communications campaigns and campaigns to raise awareness in the workforce as these capabilities become available.	NHS Herefordshire and Worcestershire	SRO - Digital	2022-2024	$\bigcirc$	$\bigcirc$		<b>⊘</b>	
25. How systems for booking and attending appointments can meet the needs of carers e.g. flexibility about appointment type and specific time slot	a. This is already possible as any patient or carer can ask for an alternative appointment to fit in with their requirements. b. We will be working with ICS providers on increasing the ability of patients to be able to book their own appointment slots from those made available. This is in development but we do not have a timeframe yet as to when it will be fully available across all providers. This will be communicated to patients and staff as it becomes available. This will be available by digital means and patient's carers (as nominated as a proxy) will be able to book on their behalf.	NHS Herefordshire and Worcestershire t	SRO - Digital	2022-2024	$\bigcirc$	$\otimes$		$\bigcirc$	
Communication of key messages and building trust									
26. NHS services are available and should be accessed when needed	(including A&E), 111, Minor Injury Units and Mental Health services.	Worcestershire	SRO - Communications					$\bigcirc$	
<ul><li>27. Patient choice about appointment type and use of online systems</li><li>28. The confidentiality and security of systems used, including the storage and</li></ul>	b. Communications programme January - March 2022 and will be repeated throughout 2022/23 to support messaging around GP Access.  See 17 and 18 above.	NHS Herefordshire and Worcestershire NHS Herefordshire and	SRO - Communications SRO - Digital	2022/2023					
retention of photos sent to aid diagnosis		Worcestershire	_					$\bigcirc$	
29. Systems are in place to ensure that patients receive safe diagnosis and treatment via remote consultation	a. We have a programme of work across the ICS to restore and recover services to pre-pandemic levels which will see an increase in face to face appointments. b. H&W Health & Care Trust have robust governance processes in place for use of digital health solutions (such as he Digital Clinical Assurance Group and Digital Clinical Reference Group) as well as systems for monitoring any clinical incidents associated with digital healthcare and then addressing any risks raised. Guidance has been written for staff about adapting to online consultations.  c. Standard operation procedures are in place within provider Trusts in the use of remote and digital consultations to support diagnosis and the introduction of new technology is subject to a number of reviews within provider Trusts which includes a clinical Safety review. Additionally, use of remote consultations within pathways should be informed by a Quality Impact Assessment and an Enhanced Equality Impact Assessment.		SRO - Quality	2022/2023		$\otimes$		$\bigcirc$	
30. Reasonable adjustments will be made to ensure that people with a disability and additional communication needs are able to access services	a. HWCCG is working closely with NHS Digital on a national pilot for a Reasonable Adjustments Flag, which is a flag within a care record, to contain key adjustment information required to support a patient's specific needs. Initially this will be rolled out around Learning disabilities but is expected to incorporate wider needs and support the Equality Act 2010 and attainment of Accessible Information Standard. b. The Reasonable Adjustments Flag will highlight to administrative and clinical staff where an adjustment is needed, such as in communications channels. We plan to make this available within the ICS Shared Care Record when it is available to do so. c. When available we will undertake a programme of workforce awareness campaigns and public awareness communications to support usage.	NHS Herefordshire and Worcestershire	SRO- Digital SRO - Communications	2022-2024	$\bigcirc$	$\bigcirc$		$\bigcirc$	

## Healthwatch Digital Access to Health Care Report January 2022 - ICS Action Plan

Report recommendation	ICS Action	Lead organisation	Responsible owner	Timescale	Actions Workstream 1 - Intervention coordination and population support	Workstream 2 - Workforce	tal Inclusion Pr Workstream 3 - Analytics and Evaluation	Ogramme Workstream 4 - Public communications & engagement
a further disadvantage due to use of digital and online services.	a. We will continue work with key communities and agencies such as Healthwatch and Community First to engage with patients with known health inequalities and disadvantaged groups to evaluate how our action plan is impacting on their ability to access care.  b. We will continue to evalute progress through surveys and reports such as the report for which this action plan has been produced.  c. We will work with Place-based Health and Wellbeing Boards, Equality leads and patient engagement groups, as well as the Health Inequalities and Prevention Board, to monitor the programme of work and align with other programmes of work to support reducing health inequalities.  d. We will continue to work with regional and national digital inclusion groups and expert organisations (e.g. Good Things Foundation) to continue to develop and iterate our programme of work.  e. We will continue to work with voluntary sector groups, often via the Digital Inclusion Advisory Groups, to develop and iterate our digital inclusion programme of work.  g. Core20PLUSS anaylsis will be undertaken for the ICS and this will be overlaid on to the digital exclusion maps as a way of monitoring impact of digital and online services and ensure health inequalities are not further excerbated.  h. We will continue to work with community and voluntary sector partners to identify how we can further develop and deliver plans to reduce digital exclusion.		SRO- Digital SRO - Health Inequality	Ongoing		<b>⊘</b>	<b>⊘</b>	$\bigcirc$
Wider Expansion of Digital Services								
32. How the findings, issues raised and recommendations within this report will	a. We will share this report with the clinical and programme leads for this programme and request an action plan for how Shared Care Record and Patient Portal	NHS Herefordshire and	SRO- Digital	Ongoing			$\bigcirc$	
be taken into consideration when developing and implementing the wider rollout	can use the findings in this report to improve digital services for patients and service users.	Worcestershire	SRO - Health Inequality					
of digital services, including Shared Care Record Patient Portal, transformation of	b. The Patient Portal has been developed with issues of digital inclusion in mind and linked closely to the needs around accessibility and design, including							
	language, functionality, aesthetics with videos/ literature being developed, and in some specialisms where people struggle particularly, face to face support. c. The Mental Health Collaborative comprises a number of workstreams around mental health service provision. There is extensive involvement of people with lived experience in these workstreams and work to develop patient experience initiatives, both of which will ensure the work considers digital access as part of developments.  d. We will share this report and action plan with wider ICS provider digital, equality and communications leads to incorporate into planning and action at Place and Provider level.  e. We will continue to have a ICS Digital Inclusion programme that reports into a number of ICS and provider boards and continues to evolve it's work programme to evaluate action taken and plan further support. This will be supported by the Digital Inclusion Forum and Digital Inclusion Advisory Group.  f. We will ensure that our Digital Inclusion programme is closely linked to the Core20PLUS5 programme to reducing Healthcare Inequalities.  g. We will work with PCNs to ensure that digital inclusion is linked to their local plans for population health management and heath inequalities.  h. We will continue to work with community and voluntary sector partners to identify how we can further develop and deliver plans to reduce digital exclusion together.  i. We will support evaluation of digital inclusion programmes across health, social care and voluntary/community sectors so that benefits and progress can be reported and success measured.							