

Designing digital health services with people and communities

The role of national and ICS leaders

Context

Digital technologies play an increasingly important role in health and care services. The Darzi review has emphasised the importance of a 'tilt towards technology' as a route to transform health care in England, and moving from analogue to digital is one of the government's 'three shifts' in health and care, promising a more modern NHS that provides more control for patients and time savings for staff.

These signals come as no surprise as technology is a key driver of change. Technology already allows us to receive the care from home instead of in hospital or order medications using our phones. And this is just the start. With exciting developments in technologies such as virtual reality, artificial intelligence and miniaturisation of diagnostics, alongside the government agenda to tilt to technology, the increased use of digital technologies and data is inevitable.

Digital technologies also unlock a step change in the richness of data and patient behaviour insight to better understand and tailor services for particular groups of patients – including those facing the worst health outcomes. With technology it becomes possible to move away from surface-level data to use sophisticated insights based on behaviours and usage of different groups of patients. But to achieve this, services need to be trusted and inclusive, and this can only be achieved if people are involved in the design of digital services.

Why does designing services with people matter?

People with lower digital literacy, trust or who are digitally excluded struggle with digital services. This can include people in more socio-economically disadvantaged groups, socially excluded groups, or

Key findings

Digital health and care services have huge potential to transform care and provide data insights on patients' needs. But to realise this they must be truly inclusive, with local NHS leaders and staff working with users to co-develop digital solutions. Through our research, supported by the Health Foundation, and conversations with systems leaders, we understood what is needed to successfully embed this work.

The NHS needs to avoid tick-box engagement and make it meaningful, balance the power dynamics, support staff to do engagement well, not let a constrained system stop good engagement and make engagement a sustainable reality. Senior leaders in provider organisations and integrated care systems and national leaders have a role to play alongside policy-makers to embed patient voice in the work to develop a digital NHS, build up the capability and set out a vision for data-rich insights explored through vanguard and trailblazer-type initiatives.

older adults. 8.5 million adults lack the most basic digital skills, and 2.4 million households struggle to afford their mobile contract.

Digital technologies have the potential to tackle health inequalities, with inclusive design enabling sophisticated insights to allow services to be better tailored to support particular groups. But often those who are already experiencing the worst health outcomes are also digitally excluded, and there is a risk digital services could widen the health inequalities gap. And the digitally confident

can also struggle with digital services – often due to how the services are designed and lack of user involvement.

Digital services must work for all groups. The starting point for improving digital services is to listen and respond to patient's voices, focusing on the challenges from services users and taking the approach of deep engagement to understand and develop solutions. Services that are designed without user involvement do not work well and can be frustrating, wasting time and resources for both patients and staff. This happens all too often; it is critical that we get these services right by listening and acting upon the voice of patients and communities.

Actions for national and ICS leaders

National leaders – across the Department of Health and Social care and NHS England – and ICS leaders have a role to play in creating the conditions to allow staff designing digital services to embed user involvement in their work.

Support staff with leadership and skills

- **National leaders** should support and fund the development of staff skills and leadership training to listen and work with people and communities.
- **ICS leaders** should support leaders of providers and team leaders with resources and guidance to develop the knowledge, skills and expertise that will empower staff to engage with the public, enabling progress even in the currently constrained environment. Leaders of providers and service delivery also need to be supported to actively prioritise participation in public engagement as part of their leadership role.

Ensure resources are available

- **National leaders** should ensure that funding for digital initiatives includes at least 10% protected for public engagement and that procurement practices require engagement.
- **ICS leaders** should provide and protect funding for patient and community engagement for digital service design and improvement, and ensure commissioning and procurement includes public engagement and use outcomes-based metrics to measure progress.

Ensure engagement happens within communities

- **National leaders** should facilitate the creation of networks, or leverage existing networks, and approaches to spread best practice across local systems.

- **ICS leaders** should co-ordinate networks of collaborative leadership across NHS, social care, local authorities and voluntary organisations to enable local engagement. They should encourage provider staff to work within communities to inform on service needs, scoping requirements from the outset and encourage the use of existing insights.

Support prioritisation of engagement and improvement

- **National leaders** should set strategic and national priorities for transformation and digitalisation that require engagement with people and communities.
- **ICS leaders** should support staff leading transformation initiatives to identify which demographics, patient and community groups, and services and tools to focus on, in order to direct effort towards where it will have the greatest impact on service quality.

Enable a future health and care system that is rich in digital insight

- **National leaders** should conduct cross-sector explorations to understand how marketing and consumer insight approaches could inform NHS service improvements and build this into digital transformation plans, including the development of analysis tools and establishing the necessary workforce. Make it a pre-requisite for any trailblazer programmes supported through national initiatives and working with digital tools to incorporate activity to continue to develop better approaches to improving patient and community voice and generating data-rich insights.
- **ICS leaders** should incorporate these findings into future strategies to build leadership and staff development.

Further reading

Wills E, Mistry P, Gower C (2025). 'Designing inclusive and trusted digital health services with people and communities'. The King's Fund website. Available at: www.kingsfund.org.uk/insight-and-analysis/long-reads/inclusive-digital-services-people-communities.

Mistry P, Jabbar J (2023). 'Moving from exclusion to inclusion in digital health and care'. The King's Fund website. Available at: www.kingsfund.org.uk/insight-and-analysis/long-reads/exclusion-inclusion-digital-health-care.