

York Information and Advice Strategy

Executive Summary

Introduction

The Care Act (2014) definitions were used to inform this work;

- **Information** is defined as the communication of knowledge and facts regarding care and support.
- **Advice** is helping a person to identify choices and / or providing opinions or recommendations regarding a course of action in relation to care and support.

The Care Act (2014), states that councils' should provide information to the entire population, not just those using social care. The NHS acknowledges the need to support people, particularly those with long term conditions to manage their condition themselves.

Purpose

Information and advice is a key building block for the future and aims to provide increased choice and control for the citizens of York. As such, it is fundamental in helping people to stay healthy, safe, well and connected within their community. Information and advice is also critical in supporting the prevention agenda and demand management, particularly in the context of an ever reducing amount of money available to local authorities and their partners.

Health and Social Care Population

- People diagnosed with multiple long-term conditions are the most intensive users of health and social care services.
- Most people aged 65 plus have multi-morbidity which increases with deprivation.
- The likelihood of having a mental health problem increases as the number of physical morbidities a person has increases. It is therefore important to ensure that information about different health conditions and strategies for staying well are available to people.
- Understanding self funders is important as once this group of people have spent their available savings they become the responsibility of the local authority or continuing health care to fund. The effect of this on local authorities' budgets has been estimated at 3.5% of their care home budgets, though this may be more for York.

Digital Context

- York as a city has 95% broadband coverage, with the intention to reach 98% by 2018. Whilst this is helpful, channel shift at the level Socitm and many local authorities are focused on also needs to consider media literacy and device ownership.
- More than 60% of people aged 55 and over have a below average 'Digital Quotient' score. For York this means upwards of 5,818 people that are currently using adult social care may have poor DQ levels.
- The lack of skills is now known to be a more significant barrier to domestic Internet use than equipment or access costs.
- Eight in ten households now have fixed broadband access at home, however this falls to 50% among those aged 65+. For York, this means that 4,849 people over the age of 65 and using adult social care may not have the pre requisite broadband coverage required to access online information.
- At the lower end of the age range 98% of 16-24year olds say they use the Internet, compared to 30% of those aged over 75. In York, this would equate to 2,087 people over the age of 75 out of a total of 6,957 social care customers.
- Device ownership and Internet usage is higher within the wealthier populations (A, B and C1) and those under the age of 54. This is significant for the City of York council as 63% of the active adult social care population is over the age of 65.
- Google is still the most visited search engine for UK Internet users with a digital audience in March 2015 of 39.6 m. This underlines the importance for City of York Council and its partners, of ensuring a presence on any Google search results. Typical online activities of the general public include the following;
 - General browsing (85%) is the most popular online activity followed by sending and receiving email (83%).
 - Accessing social media (56%) and watching TV or video online (54%) were also popular activities.
 - Approximately 20% search for health information.
 - Only one in four Internet users (24%) say they have used a website or an app related to their local area.
- People over 55 are more likely than all Internet users to describe themselves as 'not confident' (16% for 55-64s, 21% for 65-74s and 30% for over-75s, vs. 8% for all adults), as are DEs (13% vs. 8%). Of the number of people aged 65 – 74 (total 2,741) living in York and using adult social care 576 people would be described as 'not confident'. For the 75+ (total 6,957) age group the respective figure is 2,087 people. This means that at least 2,500 people over 65 that are customers of adult social care are not confident enough to go online.
- A significant number of people remain uninterested in completing government processes online. Worryingly, this figure has increased from 16% in 2014 to 22% in 2015 (Ofcom 2016).
- Harris and Gilchrest (2015) completed a study in Tang Hall, Derwenthorpe and Osbaldwick, in this study they found that

approximately 20% of respondents seem to experience digital exclusion. For example;

- 18% stated they are 'not very' or 'not at all' comfortable trying out new digital technologies.
- 22% say they lack confidence in their online digital skills.
- 1 person in 5 (20%) do not expect that the Internet could help them to keep in touch with friends or social contacts.

Using York social care Experian data in conjunction with Ofcom, 2016 data provides the following 'guesstimates' for social care users that are unlikely to use the Internet.

Group	A - F	L - O	% of social care group	Totals
Carers	638	157	40%	795
Frail, disabled etc.	2869	989	38%	3858
Learning Disability	118	101	39%	219
Mental Health	118	93	25%	211
Other Vulnerable Group	200	62	42%	262
Total			38%	5345

Fig 8: Social care users who are unlikely to use the Internet based on Experian categories and Frameworki data.

Health Literacy

- It is known that the levels of functional health literacy are low in England. Health information in current circulation is written at too complex a level for 43% of working age adults (16-65 years); this figure rises to 61% if interpretation requires a good level of numeracy skills.
- In England, older people with low health literacy have higher mortality.
- Health literacy affects people's ability to;
 - Navigate the health care system, including complex forms and locating providers and services.
 - Share personal information, such as health history with providers.
 - Engage in self care and chronic disease management.
 - Understand mathematical concepts such as probability and risk.

What we found

The following key themes were identified from the project:

- **What people want**
 - Comprehensive content.

- Personalised, bespoke and trusted information.
 - Signposting to local groups and peers, directories, national websites, care and support agencies, financial and legal advice, safeguarding and keeping safe.
 - Information to be accessible and in a variety of formats.
 - Gaps in the system included financial advice and information for people funding themselves.
- **Effective delivery of Information and Advice across York requires a focus on;**
 - Digital skills and equipment availability.
 - Co-production with citizens.
- **Joined up approaches and products across York;**
Issues included;
 - A lack of connection between the different elements of the information and advice provision.
 - A lack of connectivity between people and their community infrastructure.
- **Finding Information and Advice in York;**
Issues included;
 - People found it difficult to know where to start.
 - A lack of signposting and the need for an enabling infrastructure that can become the 'go to' place.
 - The need for One Stop Shop facility to assist people to know where to go for help.
 - Connect to Support is not well known about and there are challenges with its functionality.
 - Inadequate access to peer support.
- **Delivering Information and Advice to the people of York;**
Issues included
 - The culture of delivery is face to face.
 - A reliance on what people know in their heads.
 - The need for a blended approach to information delivery.
- **Quality and satisfaction;**
 - People did not feel able to trust all the information they accessed online.
 - The City of York website was identified as challenging for deaf people, those with a visual impairment and people who have a learning disability.

The Current Model for Information and Advice in York

The current model operating in York has the following component parts;

- A range of websites.

- People to people provision across statutory organisations and contracted providers e.g. The City of York Council, Vale of York Clinical Commissioning Group, North Yorkshire Police, community venues.
- Peers offering support to one another e.g. Lives Unlimited.

Each of these component parts is provided separately, with no real connectivity from the experience of respondents to this project. This is demonstrated in the diagram below;



A Future Model for Information and Advice in York

The following design principles were agreed as the basis for the project;

- Being **personalised**: recognising that everyone’s needs and assets are different, and that while many people are able to research things for themselves, others need more in-depth help including advocacy.
- Being **preventative**: giving people early advice about how to manage their own health, and help them plan ahead.
- Being **asset-based** and geared to **promoting people’s independence**, building people’s capacity to access and use information, and to manage their own care and support.
- Being **joined up**: so information and advice provision is coherent, and people can access support easily, without being passed from pillar to post.
- Ensuring **high quality**: so people have their queries resolved well, and experience information and advice as easy to understand, accessible, timely, comprehensive and accurate.
- Being **efficient**: maximising the potential of the Internet, streamlining the processes for producing information, reducing duplication, pooling resources, and making the most of our informal assets.

What needs to exist is;

- An effective website that is current and trusted that delivers the information people require and signposts to other places where that exists, this can then become the 'go to' place for the people living in York.
- An effective local authority website that focuses on the information people need and want rather than what the authority believes it is important for people to know and understand. Including information designed to keep people healthy, safe, well and connected.
- Collaborative approach to providing information across the statutory organisations in the city, local authority health and the police where the resources that each organization has are able to focus on providing the wider links to other services.
- Joined up use of the community connectors, social prescribers, Local Area Co-ordinators and health champions.
- Better use of libraries and community hubs to provide information and advice and build community assets across the area, including volunteering.
- Effective use of the community venues to provide information on a local basis to the people of that area. Each organisation providing information and support in a way that works for them and the citizens they support.
- Effective peer support structure to help those people who are happy to help others and be a point of contact as someone with lived experience.

This model builds on the skills and assets across the city as well as providing an online resource as a key source for those able to use the internet. This approach utilises connections across all areas and parts of the system. This is demonstrated in the diagram below;

Information and Advice – Future State



Improvement Outcomes

In order to deliver an effective information and advice infrastructure it is important to establish the principles that will underpin any design activity. The following Improvement Outcomes are based on TLAPs Information and Advice Toolkit (Undated) and were agreed with the steering group. These are useful as they will enable the City of York to measure their progress to delivering an information system that is Care Act compliant, meets the needs of citizens & helps them stay healthy, safe and well, supports channel shift and is an effective use of scarce resources. The Improvement Outcomes are;

- Information is easily available and trusted.
- Information is dynamic, responsive, evidence based and current.
- Information is accessible and inclusive e.g. Easy Read, BSL.
- People searching for information are provided with the same information irrespective of where they start their enquiry.
- Partners who are involved in delivering information and advice know and understand the local provision.
- Websites are customer facing.
- More people in York are capable and confident to use online resources.

TLAP, (Undated).

What York Needs To Do

In order to achieve this model, this report suggests a number of solutions that require the local authority and its partners to come together to complete a range of actions. These solutions and relevant actions are presented under the headings that created the key themes from this project, these include;

A. What People Want

Solution 1: Develop and implement a dynamic and responsive online Presence.

Solution 2: Provide comprehensive accessible information.

B. Effective delivery of Information and Advice across York

Solution 3: Establish effective information partnership and governance Arrangements.

Solution 4: Develop and implement a coproduction framework.

Solution 5: Develop and implement a social media function.

Solution 6: Develop and implement a social marketing approach.

C. Joined up approaches and products across York

Solution 7: Use community venues to deliver information to local people.

Solution 8: Develop and implement a Digital Inclusion Strategy.

Solution 9: Develop Connect to Support as a shared platform.

D. Where to go to find Information and Advice in York

Solution 10: Establish a lead website to signpost people to information

E. Approaches to delivering Information and Advice to the people of York

Solution 11: Establish peer to peer networks and support structures.

Solution 12: Integrate the work of asset based workers.

F. Quality and satisfaction

Solution 13: Develop and implement a local Information Standard.

Solution 14: Implement a curated knowledge approach.



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