

PUBLIC

Author: Andrea Barber and Vicky Smyth

Phone Number: 07799 038061

DERBYSHIRE COUNTY COUNCIL

CABINET MEMBER FOR HEALTH AND COMMUNITIES

22 July 2021

Report of the Director of Public Health

PUBLIC HEALTH APPROACH TO ADDRESSING THE DIGITAL DIVIDE (Health and Communities)

1. Purpose of the Report

To seek approval from the Cabinet Member for Health and Communities to commence a procurement exercise to secure specialist provider support to develop and initiate implementation of a public health digital inclusion strategy for Derbyshire over a period of 18 months and up to a value of £0.150m.

2. Information and Analysis

It is estimated that approximately 1.9 million households in the UK do not have access to the internet and are digitally excluded and, according to the Good Things Foundation (2020), 9 million people struggle to use the internet independently. The COVID-19 pandemic has further highlighted the digital divide and there is a growing recognition of the importance of internet access within our family and social networks, our communities and our economy which is accelerating the need to address the digital divide.

According to ONS 2019, in Derbyshire 10.4% of people in East Derbyshire (Chesterfield, Bolsover and North East Derbyshire) and 8.9% of people in South and West Derbyshire (South Derbyshire, High Peak, Derbyshire Dales, Erewash and Amber Valley) do not use the internet. This equates to 62,000 people in the County who have never used the internet and many more will lack basic digital skills.

There is a strong correlation between digital exclusion, financial exclusion and social exclusion. COVID -19 has led to a widening of this digital divide, as more products and services move online and become 'digital by default'. Additionally, those facing digital exclusion are likely to have other challenges and factors that make it difficult for them to access and engage with services and/or get support and information. Digital inclusion is essential to reduce health inequalities and help tackle financial and social exclusion.

Further local studies by both Healthwatch Derbyshire (2020) and Citizens Advice Chesterfield (2021) have highlighted that digital approaches are transforming society and is at the heart of how public, social and economic life is configured. However, those who are excluded can find themselves disadvantaged and the pandemic has widened this pre-existing and important gap and is exacerbating health inequalities.

In April 2021 the Public Health Investment Panel received and supported an application for investment to initiate the development of a public health approach to address digital exclusion. This proposal, based on a review of the evidence, discussions with partners, mapping and current good practice, put forward a strengths-based collaborative effort to tackle and break down barriers to creating a digitally inclusive Derbyshire. It included the following key elements:

1. Commissioning of an external organisation to provide expert professional services for the first 18 months of the project. The organization will be responsible for developing a Derbyshire digital inclusion strategy, including through building a coherent and coordinated network of digital inclusion activity across Derbyshire. Activities will include:
 - Communication and engagement,
 - Developing bespoke digital skills training and strategies to target provision to those with greatest need,
 - Evaluation tools to evidence impact and models for demonstrating return on investment.

In addition, the organization appointed will build and embed sustainability across all strands of digital inclusion, accelerate and maximise the opportunities of the programme and provide expert advice across the digital inclusion agenda.

2. Subject to the recommendations that come from the strategy (outlined above), consider establishment of a dedicated project team to co-ordinate, and provide linkage across the system for existing and emerging digital services.
3. Establish a small grants scheme to kickstart digital inclusion project innovation at a local level.

The proposal and costings have been informed and benchmarked by examples of good practice including the successful model adopted by the '100% Digital Leeds' programme. We have spoken to project leads and officers in Leeds at length, to benefit from their experience and knowledge in setting up and developing their digital programme and have used this to

inform the proposal outlined in this report. Further background information can be found in Appendix 1.

Investment in digital inclusion will drive two types of economic return:

1. Direct savings to the investor (i.e. DCC) by encouraging and enabling beneficiaries to use online public services which have a lower delivery cost. Customers completing online transactions costs an average of 17p a time; in comparison, doing the same transaction face to face costs £14 (from 100% Digital Leeds).
2. Indirect savings and economic benefits relating to the wider effects of digital inclusion on behaviour: these include personal cost savings e.g. better financial products available online, potential gains from earning, impact on employment rates, savings to the NHS (through reduced face to face dependency on Primary Care).

According to the Centre for Economics and Business Research, there is £15 of growth for every £1 invested in digital inclusion (CEBR, 2018 The Economic Impact of Digital Inclusion in the UK).

This will be a Countywide, universal project with a specific focus on cohorts identified as disproportionately affected by digital exclusion including people with a long-term health condition, older people, the homeless, those with low literacy levels and/or a learning disability.

Key stakeholders have already demonstrated a significant appetite to be involved in partnership work around this agenda. These include Derbyshire County Council (Public Health, Adult Care, Childrens Services, Economy and Transport, Commissioning, Communities and Policy), the Community Sector, NHS organisations and Joined up Care Derbyshire. Additionally, we have a well-established Public Health locality programme that offers the opportunity to connect with local people, supporting and empowering them to influence the project planning and development. This mechanism allows our communities to convey their 'felt' priorities and needs. This will be an essential part of the programme moving forward and will provide a vehicle to really understand the needs and wants of local communities.

A wide variety of work is underway in our communities and digital work streams are emerging in many areas, but additional capacity is needed to strengthen, build, identify, engage and link partners across this complex system. Upon doing so elements developed as part of this programme will add value to existing projects, services and interventions that are proving successful at locality level. Increased linkage and partnership working via networks will allow the sharing of best practice and resources, reduce duplication and maximise impact. Work will also align to key Council priorities such as Channel Shift.

This report seeks approval for part one of the plan to be activated. Further reports will follow later, to seek approval for implementation of the plans that arise from the strategy.

3. Social Value Considerations

Increasing digital skills is essential for stimulating the economy, employment opportunities and local businesses. Evidence suggests that over 80% of jobs require digital skills (Department of Culture Media and Sport, 2019) and it is possible to stimulate the economy by boosting the digital skills of workers who have digital skills for life but not yet for work (Lloyds Bank UK consumer Digital Index, 2020). Manual workers with high level digital skills earn approximately £2,160 per annum more than those with low digital skills (Lloyds Bank UK Consumer Digital Index, 2020).

4. Finance Considerations

This report seeks approval to award up to £0.150m to cover specialist provider support for a period of 18 months from award of contract. Finances will be met from the Public Health ring fenced grant budget.

5. Legal Considerations

The procurement of this work will be carried out in accordance with Protocol 5 of the Council's Financial Regulations and the Public Contracts Regulations 2015.

The Council's standard contract paperwork shall be used to set out the terms and conditions for which the procurement is made.

6. Other Considerations

In preparing this report the relevance of the following factors has been considered; financial, legal, prevention of crime and disorder, equality of opportunity, human resources, environmental, health, property and transport considerations.

7. Background Papers:

Public Health Investment Panel – April 2021 (Held by Public Health)

8. Key Decision

No

9. Call-in

Is it required that call-in be waived for any decision on this report?
No

10. Officer's Recommendation

The Cabinet Member for Health and Communities is asked to approve commencement of a procurement exercise, to secure specialist provider support to develop and initiate implementation of a public health digital inclusion strategy for Derbyshire, over a period of 18 months and up to a value of £0.150m.

Dean Wallace
Director of Public Health