



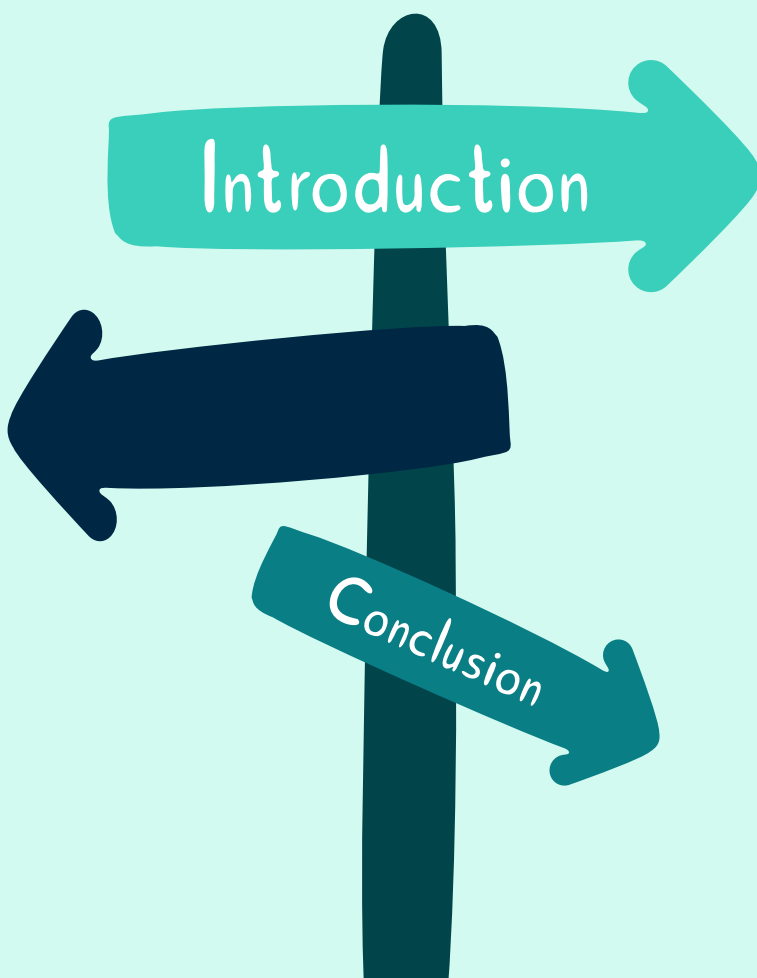
# Tackling health inequalities:

5 ways digital healthcare can help

**livi**

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# Introduction

Addressing health inequalities and variation in experience of care is a foundational pillar to improving population health. As a core aim of the NHS Long Term Plan and priority across health and care, it's been referred to as the "greatest social challenge of our age."

For integrated care systems, primary care networks and other NHS organisational structures, it will be pivotal in not only helping people stay healthy, but also managing demand within the NHS, now and in the years to come. At Livi, we believe digital technology has a major role to play to further health inclusivity for today and tomorrow's generations.

Here, in our latest short report, we take a look at some of the ways digital healthcare can support efforts to reduce health inequalities. And along the way, we present just some of the ways we're working with NHS partners to meet this aim, with recent data from our services.



# The current state of play

Over the past few years, the gap in life expectancy has grown between the least deprived and most deprived parts of the UK. Populations living in less affluent areas often unfairly face the prospect of worse health outcomes and longer waits for treatment.<sup>1</sup>

The pandemic has exacerbated matters further taking a heavy toll on these groups. Indeed, the Kings Fund reports COVID-19 mortality rates in areas of deprivation to be more than double that of the least deprived.<sup>1</sup>

Everyone should have the same opportunities in healthcare. That's why we're working across the NHS to further inclusion health at both a system and local level. From our experience, there are 5 key areas we believe digital can lend support.

## 1. Increasing access in underserved areas

There is significant variation in availability of GPs between regions in the UK. With fewer GPs per head in the most deprived localities, working to understand specific access challenges at a local level is vital. That very pursuit of "understanding" is one the key ways we work with our partners.

Analysis from Nuffield Trust estimates 53 GPs per 100,000 patients in the least deprived fifth of CCGs, compared to 47 in the most deprived fifth. While one in seven people living in deprived areas are unable to get a GP appointment vs one in ten in the richest.<sup>2</sup>

There is an immediate need to target resource in these underserved areas. We're working to do just that, providing support to individual practices where there is unequal access to GPs in a given patch.

Indeed, recent data from our services shows that Livi serves more patients from economic areas of deprivation in each of the 12 regions in the UK. And taking just one of our services as an example, 75% of Livi users come from the 50% least privileged areas.\*

\*In terms of median disposable income. Based on Office for National Statistics gross disposable household income.



## 2. Enabling system-wide working

Beyond a need for additional clinical capacity, the speed, agility and flexibility at which it can be provided will be just as important to addressing health inequalities through place-based systems of care.

NHS England and NHS Improvement's Integrating Care paper highlighted a need for "a frictionless movement of staff across organisational boundaries."<sup>3</sup> That movement can apply to the clinical workforce thanks to the borderless nature of digital.

A readily available digitally-supplied clinical pool can be shared across borders and Livi is working with a number of ICS partners to deliver shared clinical provision in that very sense. The potential to redeploy workforce around the country and provide support where and at what times it is needed most will be integral to managing population health.

Where services experience fluctuation in demand, digital services underpinned by data can provide the tools to anticipate, predict and plan for supply shortages in a given footprint. We use data insights to gain a deeper understanding of patient demographics and demand patterns through that very lens, to pinpoint gaps and identify underserved patient populations.

Furthermore, as referred to in the NHS Confederation's Tackling Health Inequalities briefing, integrated care systems have the potential to impact wider health determinants that may have traditionally been outside of the scope of the NHS in the past.<sup>4</sup>

Adoption of holistic approaches that take into account an individual's overall mental health and wellbeing are possible. And multidisciplinary team working spanning organisations can be supported through digital channels. Indeed, Livi offers online therapy services in addition to digital clinical capacity we supply to ICS, PCNs, GP practices and urgent care providers.

## 3. Freeing face-to-face clinical resource

In areas where digital exclusion is more prevalent, digital clinical resource will conversely free capacity for patients who do not use digital.

The Future of Healthcare policy paper notes: "Some people will never use digital services themselves directly but will benefit from others using digital services and freeing resources to help them."<sup>5</sup>

We must recognise here the paradoxical benefit of digital to increase access for those who experience unequal access to face-to-face care at present.

The role of digital should always be to supplement and lend a helping hand to the system, rather than replace traditional care channels. The goal is to provide patients with more choice, so they can access not just the care they need, but the type of care they want. And digital can have a positive benefit for those who prefer to see GPs face-to-face.



#### 4. Managing long-term conditions and elective waiters

Research has shown that people living in deprived localities are more likely to develop long-term conditions.<sup>6</sup> Digital can support prevention and management, from helping care providers drive increased uptake of digital health checks through to remote monitoring. Digital platforms may also be used to disseminate timely health information in support of self-management and adoption of healthy lifestyle choices.

Regarding the latter, Livi is working to increase health literacy producing curated patient content on a range of conditions, alongside healthy living, mental and physical wellbeing. And our GP practice platform, Mjog, enables primary care teams to share patient questionnaires and health content with patients at speed.

Digital health information will also assist in the management of the estimated 6.4 million people waiting on elective waiting lists. Under the Elective Recovery Plan, systems will prioritise patients according to health inequality outcomes, who have been more likely to face longer waits for treatment traditionally. And the NHS My Planned Care app will see patients receive health content and personalised plans to prepare for treatment and aid recovery.



## 5. The benefits of digital inclusion

Finally, we must also recognise that digital exclusion is a form of inequality in itself. Here at Livi, we fully support NHS Digital's ongoing work to further digital inclusion of patients who are unable to access such platforms, have limited or no internet access or need help to build online skills.

Today, Ipsos estimates around a fifth of UK adults lack the foundation level of digital skills and are more likely to either be aged 75+, not in work, living alone, have no formal education or a sensory impairment that affects their day-to-day living.<sup>7</sup>

While programmes such as the NHS Widening Digital Participation Programme report "a clear correlation between the socio-economic status of a ward and both the levels of basic digital skills of its inhabitants and their average life expectancy, with people in deprived areas tending to be more digitally excluded and in worse health."<sup>8</sup>

Results from the programme,<sup>8</sup> targeted at vulnerable patients who use NHS services more frequently, show the positive impact of supporting individuals to build digital health skills.

Of individuals who learnt to use digital platforms through the programme...

59%

felt more confident in using online health information

52%

felt less lonely or isolated

54%

would go to the internet first for non-urgent medical advice

51%

have used the internet to look for ways to improve mental health and wellbeing

Impacts at a system level show:

21%

made fewer calls or visits to their GP

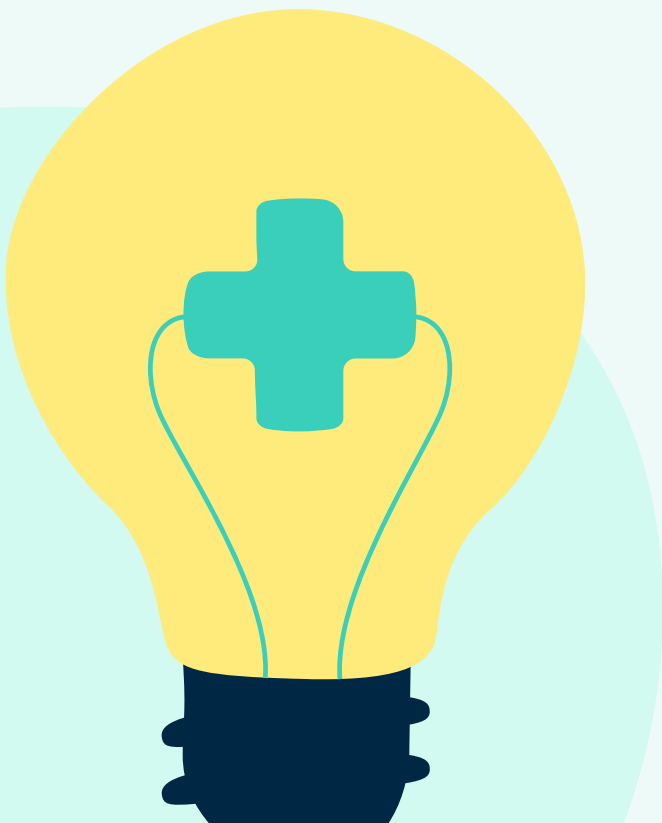
10%

made fewer calls to NHS 111

6%

made fewer visits to A&E

The programme's evaluation estimates £3.7m in saved GP visits, £2.3m saved in A&E visits and savings of £6 million in just 12 months, representing a return on investment of £6.40 for every £1.00 spent by the NHS on digital inclusion support.



# Conclusion

Reflecting on areas outlined in this report shows a two-fold benefit of digital healthcare in the battle against health inequalities. Firstly, in delivering greater access and choice to patients. Secondly, in driving system-wide benefits.

Those benefits in the latter context will support demand management, while enabling new models of working envisioned for integrated care systems and primary care networks to come to fruition. These models have the potential to realise better care experiences and population health outcomes at reduced cost.

The aim of this report is not exhaustive, but points to some potential areas of focus. One of those areas will be becoming more digitally inclusive as a society. As we have seen, patients who may be in most need of help may be prevented from accessing it due to lack of digital skills. And providing access to digital health platforms will be a fundamental part of any endeavour to reduce health inequalities.





# How Livi is working to make a difference

Livi has a proven track record of increasing access in areas of deprivation and is supporting NHS partners to do so in primary care networks, integrated care systems, urgent care and mental health.

Recent data from our services shows:

- Livi serves more patients from economic areas of deprivation in each of the 12 regions in the UK
- Taking just one of our services as an example, 75% of Livi users come from the 50% least privileged areas\*

If you'd like to learn more about how Livi can support you, contact us at: [partnerships-uk@livi.co.uk](mailto:partnerships-uk@livi.co.uk) or visit: [www.livi.co.uk/nhs-partners](http://www.livi.co.uk/nhs-partners)



\*In terms of median disposable income. Based on Office for National Statistics gross disposable household income.

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or visit: [www.livi.co.uk/nhs-partners](http://www.livi.co.uk/nhs-partners)

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