Telford & Wrekin Co-operative Council

Protect, care and invest to create a better borough

Shropshire Council

Borough of Telford and Wrekin

Joint Health Overview & Scrutiny Committee

Monday 30 November 2026

3.00 pm

Council Chamber, Third Floor, Southwater One, Telford, TF3 4JG

Democratic Services:	**Alfie Rees-Glinos**	**01952 380354**
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Committee Members: **Cllr F Doran (Co-Chair), Cllr B Bentick (Co-Chair), Cllr D Husemann, Cllr C Stanford, Cllr N A Dugmore, Cllr D R W White, L Cawley, A Mitchell, D Sandbach, D Saunders and J Suckling**

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NHS Shropshire, Telford and Wrekin
NHS Staffordshire and Stoke-on-Trent

Shropshire, Telford and Wrekin ICB Digital

An update to the Joint Health Oversight Scrutiny Committee

Craig Kynaston - Associate Director of Data, Digital and Analytics

Digital exclusion challenges

Digital inclusion means 'ensuring that everyone has the access, skills, support and confidence to participate in and benefit from our modern digital society, whatever their circumstances'.

https://www.gov.uk/government/publications/digital-inclusion-action-plan-first-steps/digital-inclusion-action-plan-first-steps

Digital skills
Being able to use digital devices (such as computers or smart phones and the internet. This is important, but a lack of digital skills is not necessarily the only, or the biggest, barrier people face.

Connectivity
Access to the internet through broadband, wi-fi and mobile. People need the right infrastructure but that is only the start.

Accessibility
Services need to be designed to meet all users' needs, including those dependent on assistive technology to access digital services.

Digital exclusion challenges

Some groups of people are more likely to be digitally excluded than others. These are:

- people in **lower income groups**
- people **without a job**
- people in **social housing**
- people with **disabilities**
- people living in areas with **inadequate broadband and mobile data coverage**
- **older people, especially 75 and over**
- **Socially excluded groups** – people seeking asylum, experiencing homelessness, and people in contact with the justice system
- **people whose first language is not English**

Only 76% of people with any kind of impairment (such as visual) and **72% of people with a learning or memory impairment** specifically have Foundation Level digital skills, compared to 91% of people with no impairment (Lloyds Bank, 2024)

People with an impairment are **1.5 times more likely** to struggle to interact with the NHS than those with no impairment (Lloyds Bank, 2024)

46% of **Gypsy, Roma & Traveller** people reported that they had no access to digital primary care services (Roma Support Group, 2024)

https://digital.nhs.uk/about-nhs-digital/corporate-information-and-documents/digital-inclusion/
https://www.goodthingsfoundation.org/policy-and-research/research-and-evidence/research-2024/digital-inclusion-datasets

Digital exclusion challenges

Research for the UK digital strategy suggests that there are a number of important barriers, and more than one may affect individuals at any one time.

They are:

- **access** - not everyone has the ability to connect to the internet and go online
- **skills** - not everyone has the ability to use the internet and online services
- **confidence** - some people fear online crime, lack trust or don't know where to start online
- **motivation** - not everyone sees why using the internet could be relevant and helpful

As access, skills and confidence improve, it is increasingly important to tackle other barriers, including:

- **design** - not all digital services and products are accessible and easy to use
- **awareness** - not everyone is aware of digital services and products available to them
- **staff capability and capacity** - not all health and care staff have the skills and knowledge to recommend digital services and products to patients and service users

Good Things Foundation has produced an informative report on motivations of non-users of the internet.

https://digital.nhs.uk/about-nhs-digital/corporate-information-and-documents/digital-inclusion/

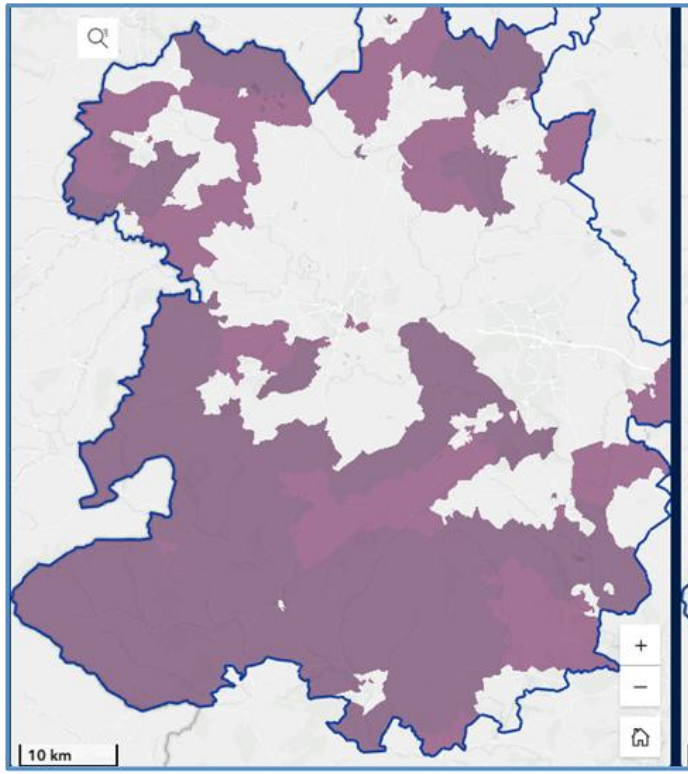
Digital exclusion challenges

Data from the National Digital Exclusion Risk Atlas (DERA) highlights two key challenges for our local population:

1. **Digital infrastructure** and lack of connectivity disproportionately impacts those living in **rural areas.**

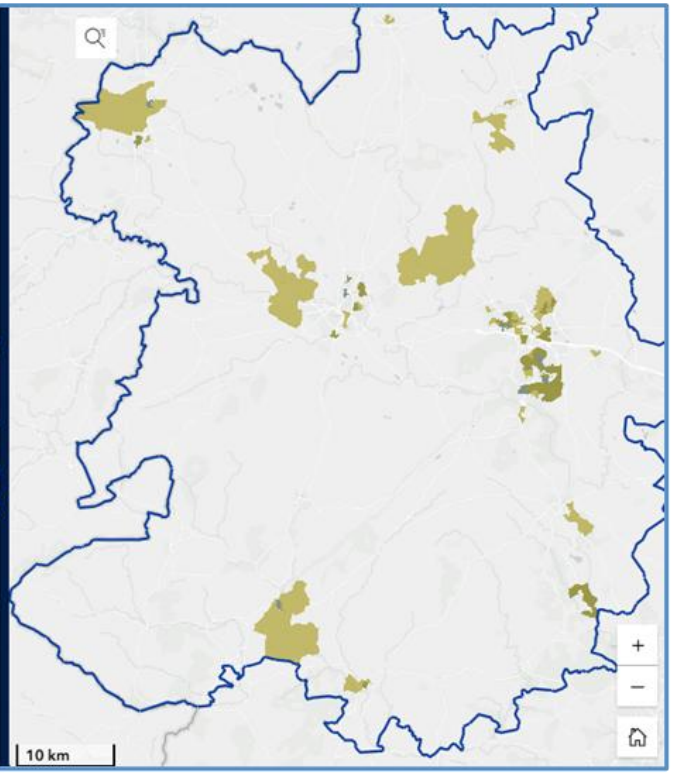
2. **Ability and Skills** to use digital disproportionately impacts those living in **areas of higher deprivation.**

Digital Access
access to essential digital infrastructure



Rural Infrastructure – Long term National challenge

Ability and Skills
population level characteristics that influence people's ability



Ability and skills – most challenged population and greatest opportunity

Digital Inclusion – Measuring What Really Matters

NHS Shropshire, Telford and Wrekin
NHS Staffordshire and Stoke-on-Trent

We have the insight – now we need to make a difference.

UNDERSTAND

Use our data to identify people and communities at risk of digital exclusion.

SUPPORT

Target training and practical help for those who want to use digital services.

PROTECT CHOICE

Keep telephone and face-to-face access available for those who cannot or choose not to go digital.

MEASURE IMPACT

Judge success by better access and outcomes for everyone – **not just** digital uptake.

Digital inclusion is not about getting everyone online. It is about making sure everyone benefits from digital transformation, without leaving anyone behind.

Measures in place to support Digital Inclusion

Leadership and Accountability

- Identified leads across NHS organisations
- Established Digital Inclusion Steering and Working Groups



Improved Data and Intelligence

- Agreed consistent baseline measures for digital inclusion and exclusion, including Digital Risk, Service Access and KPIs



Increasing Access to Devices and Data

- Developed signposting resources to existing offers
- Piloting Trusts and PCNs as Data Hubs
- Establishing local device repurposing schemes



Improving Skills and Confidence

- Increased staff awareness of digital exclusion barriers
- Targeting NHS App support to Core20PLUS groups
- Partnership projects with local Councils

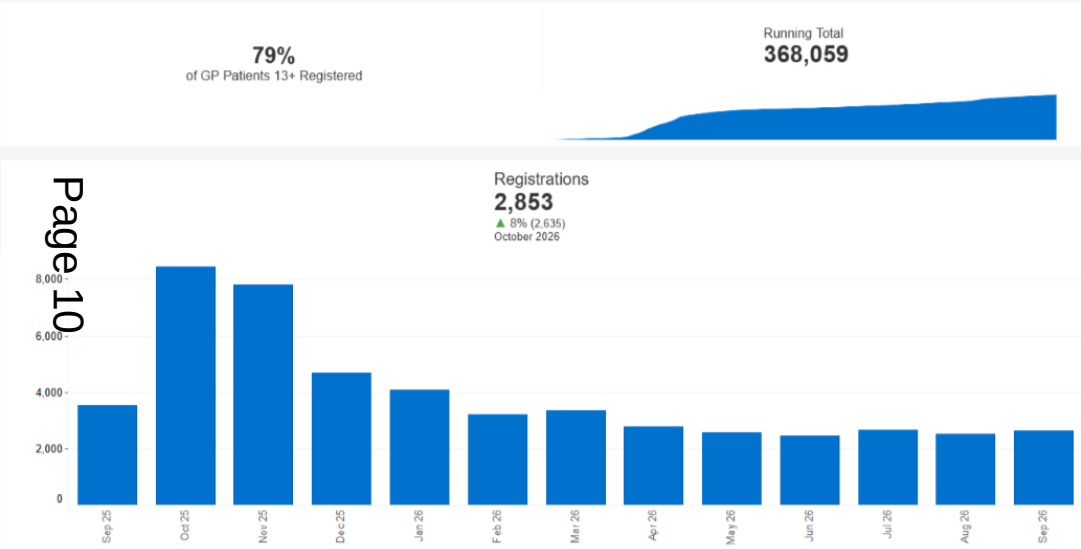


Inclusive Design of Services

- Embedding Digital Inclusion within Equality and Health Inequality Impact Assessments and tender processes



NHS app uptake



Across Shropshire, Telford and Wrekin **79%** of the **registered population** have signed up to the NHS app, increasing on average of **4k a month** throughout 2026.

An average of **270k primary care appointments** are booked each month

Within the Midlands region, Shropshire, Telford and Wrekin have the most **monthly logins** at **23.8k** as at 8/9/26, followed by Staffordshire, Stoke on Trent at 21.3k

Nationally, the highest ICB has 26.5k logins resulting in Shropshire, Telford and Wrekin being **ranked 5** in monthly logins.

MPFT Digital Joint Health Overview and Scrutiny Committee

November 30th 2026 – 15:00 – 17:00

Agenda Item 4b

MPFT Digital Inclusion

THE MPFT Footprint

Lead MH provider for Shropshire, Telford and Wrekin



Map of localities

1 **North Shropshire**
Community Mental Health Service

2 **Central Shropshire**
Community Mental Health Service

3 **Telford & Wrekin**
Community Mental Health Service

4 **South Shropshire**
Community Mental Health Service

Team Bases

The MPFT Digital Inclusion Approach

MPFT's approach recognises that digital skills, affordability, devices and data, confidence, accessibility requirements and wider geographical and social inequalities can all affect whether somebody can use digital healthcare.

Our response combines devices and connectivity, individual skills support, community outreach and referral/signposting routes.

There is substantive delivery behind this:

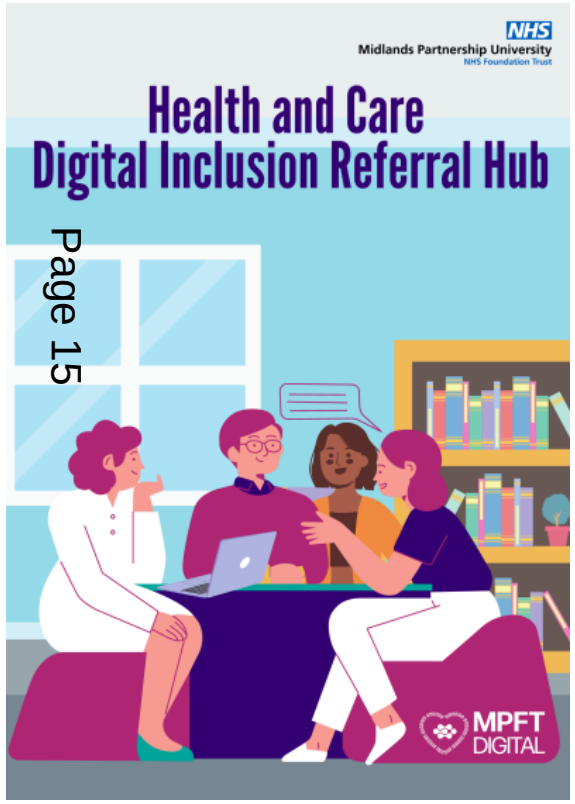
- By October 2026, MPFT had recorded **3,393 people supported in communities**, **878 SIM cards gifted** and **624 mobile phones/tablets gifted**, a total of **1,502 connectivity items**.
- Support includes **one-to-one help, community drop-ins, Digital Angels, NHS App and Patients Know Best support**, together with outreach through libraries, GP practices and community settings.
- MPFT currently has **173 Digital Staff Champions**, five digital skills/training roles and one dedicated Digital Community Outreach Advisor, with a Train the Trainer approach intended to extend capability through staff, volunteers and community partners.
- In Shropshire specifically, MPFT's service-user resources signpost people to **Shropshire Libraries**, where computers are available and people aged 65+ can access weekly one-to-one digital skills support.

Next Steps:

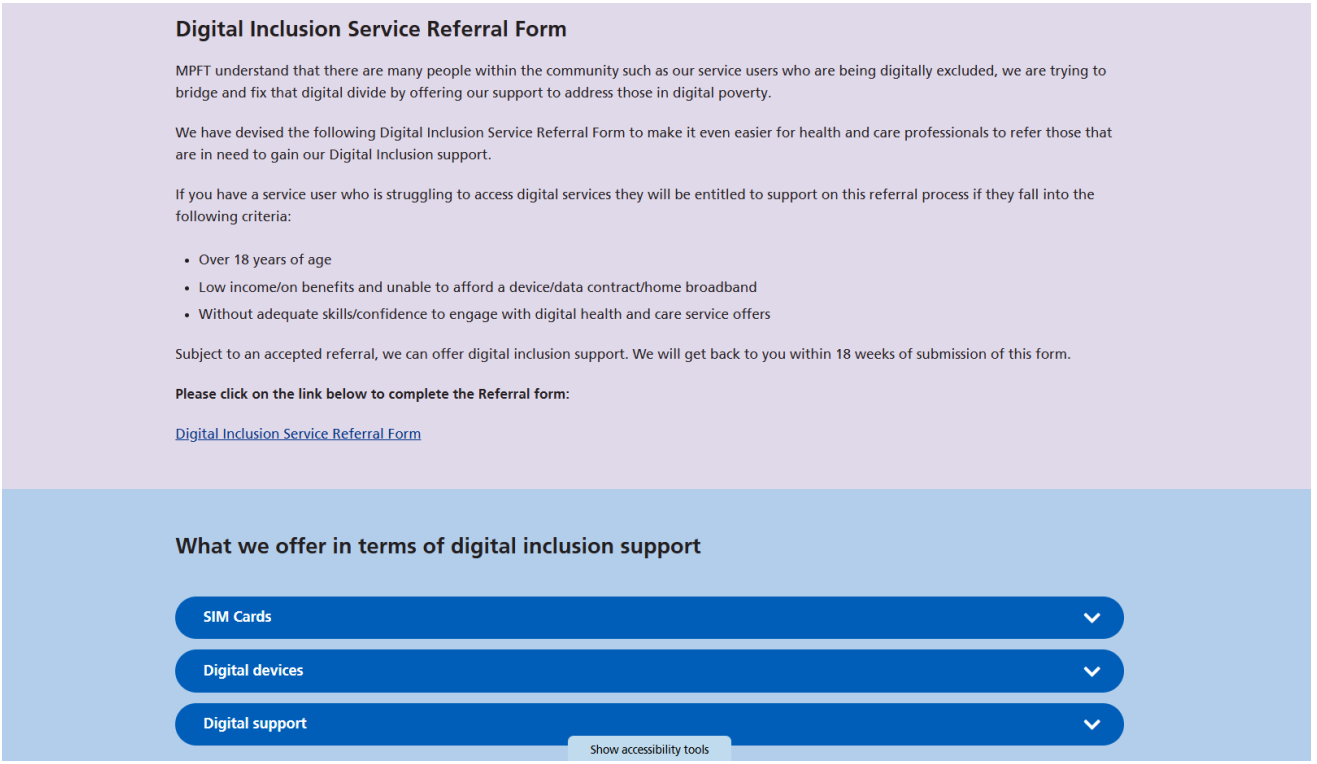
- Build and strengthen our relationships with LAs, Education and VCSE partners to sign-post and collaborate on digital inclusion across the region
- Strengthen our staff training to highlight and support those service users that are digitally excluded and to improve both staff and service user awareness for more accurate and timely sign-posting to digital inclusion support offers within their community

For more information search:

“MPFT digital inclusion”







Digital Inclusion Service Referral Form

MPFT understand that there are many people within the community such as our service users who are being digitally excluded, we are trying to bridge and fix that digital divide by offering our support to address those in digital poverty.

We have devised the following Digital Inclusion Service Referral Form to make it even easier for health and care professionals to refer those that are in need to gain our Digital Inclusion support.

If you have a service user who is struggling to access digital services they will be entitled to support on this referral process if they fall into the following criteria:

- Over 18 years of age
- Low income/on benefits and unable to afford a device/data contract/home broadband
- Without adequate skills/confidence to engage with digital health and care service offers

Subject to an accepted referral, we can offer digital inclusion support. We will get back to you within 18 weeks of submission of this form.

Please click on the link below to complete the Referral form:

Digital Inclusion Service Referral Form

What we offer in terms of digital inclusion support

SIM Cards

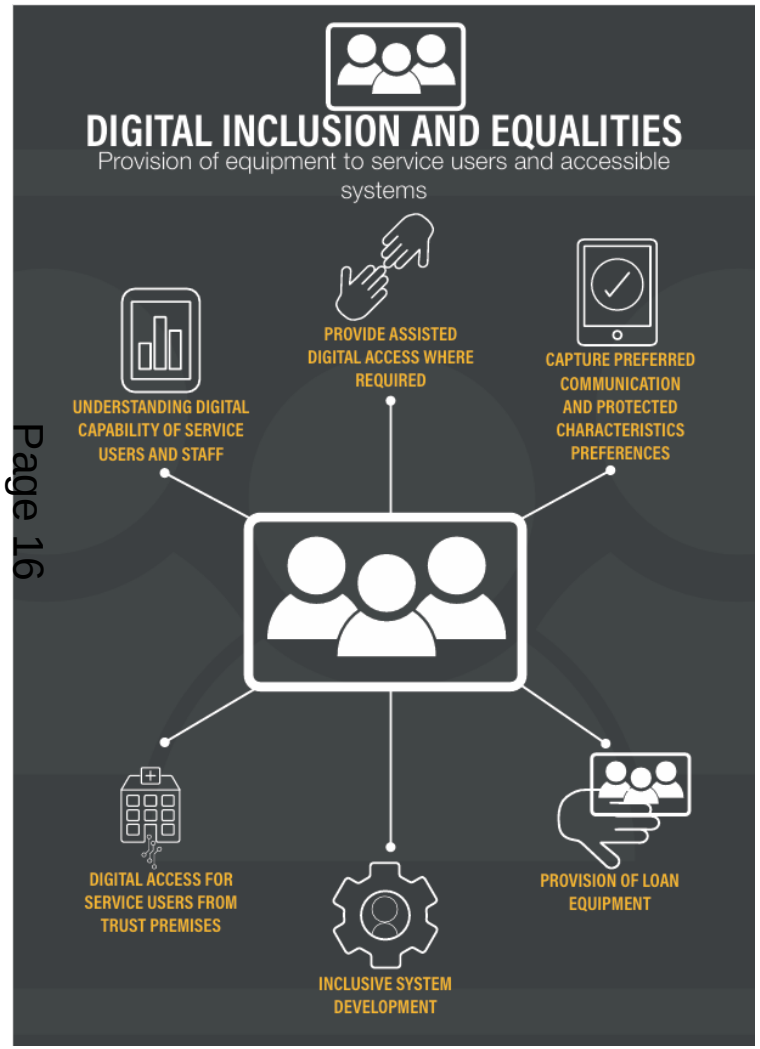
Digital devices

Digital support

Show accessibility tools

https://www.mpft.nhs.uk/service-users-and-carers/digital-training-and-support/health-and-care-digital-inclusion-referral-hub

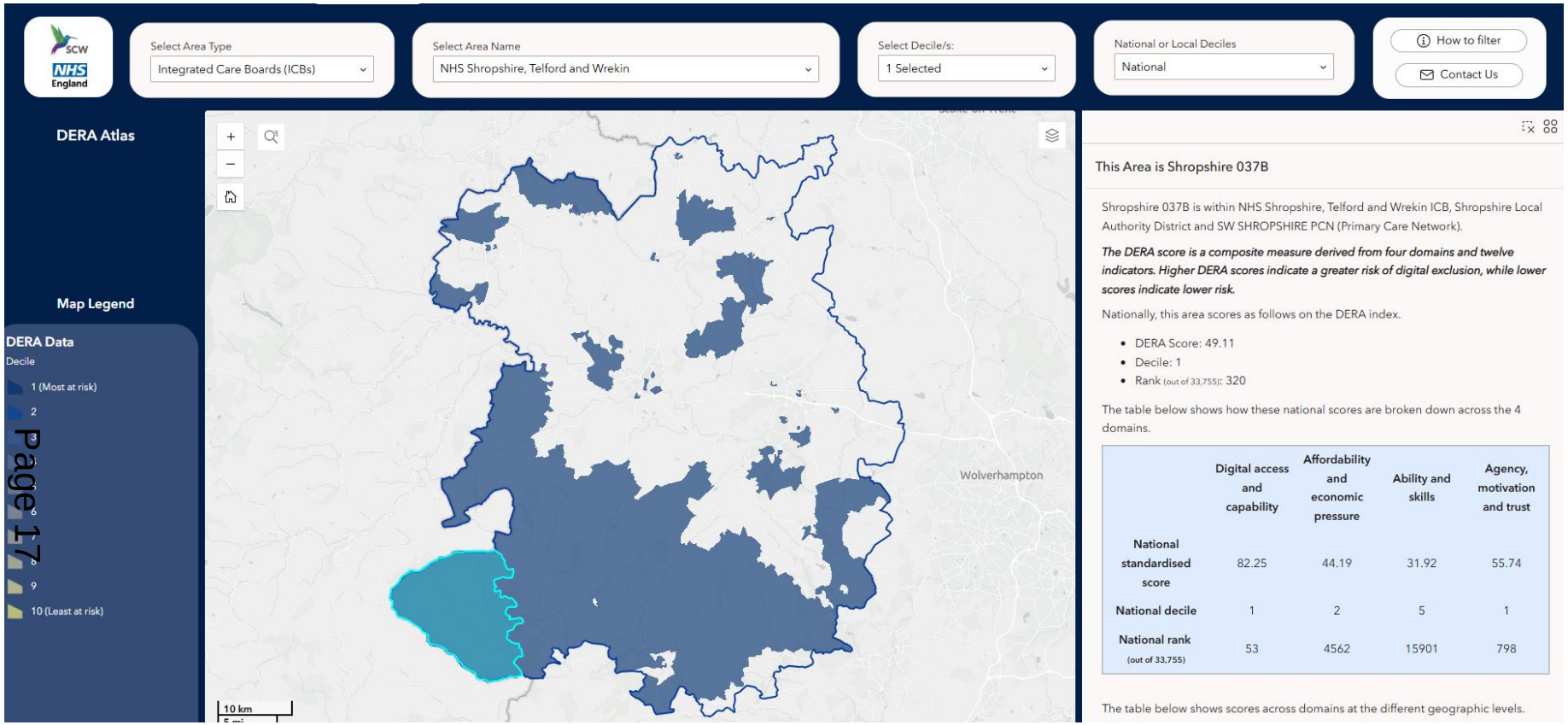
The MPFT Digital Inclusion Strategy





https://www.mpft.nhs.uk/application/files/7517/3737/3736/MPFT_Enhanced_Digital_Strategy_21-26.pdf

MPFT Population Health Intelligence for Digital Inclusion



https://experience.arcgis.com/experience/e990bec3d90f4a0dbb15e56dd58da5e7/page/DERA#data_s=id%3AdataSource_12-19c89e7eae9-layer-2%3A8983

- The NHS England-commissioned DERA tool
- provides an estimated composite risk score for digital exclusion. It ultimately uses metrics relating to digital access (mobile coverage, broadband), economic pressures (housing, IMD), ability & skills (qualifications, English proficiency, disabilities), and age/motivation to estimate where digital exclusion is most likely

Digital Uptake Examples

Fewer unnecessary journeys

Digital access and local care across MPFT



Blended consultations

Talking Therapies uses video and telephone consultations to save unnecessary trips. Face-to-face care remains available where needed.



Digital access to records and care

Patients Know Best (PKB) and the NHS App increasingly give people access to letters, appointments and care-plan information without a trip.



Remote and preventative care

Home monitoring and virtual reviews could support long-term conditions, frailty and care at home, rehabilitation, complex care, children and families, community mental health, and learning disabilities and autism.

Future opportunities subject to clinical validation

> "Every journey avoided can matter in a large rural county, but our objective isn't to replace journeys with technology indiscriminately. It is to remove journeys that add no clinical value while retaining local and face-to-face care where that is the right option."

The NHS App

- **Consistent experience:** PKB patient portal is fully integrated records access into the NHS App “front door”, you log into the NHS App to get your records, letters and latest appointment information

- **Uptake:** 145,000 registered service users for PKB/NHS App Trust-Wide

- **What it is used for:** allowing people to access appointments, correspondence and care plans, with some questionnaires flowing back into RiO (our main EPR)

- **Next Steps:** expand appointment management, self-referral and patient access, but importantly assisted and non-digital routes remain part of the model, with accessibility and support built alongside digital self-service.

MPFT's **Electronic Prescription Service (EPS)** is in use across all MPFT care groups and 23 services, with **more than 600 prescribers and over 250,000 electronic prescriptions generated**. Prescriptions can be sent electronically to a patient's nominated community pharmacy rather than relying on handwritten prescriptions being collected or posted. The business case specifically identifies reduced patient travel alongside time, security and paper/cost benefits.

MPFT's approach to electronic prescribing allows prescriptions to flow directly to the patient's nominated local community pharmacy, removing un-necessary journeys, delays and use of paper with **no** digital experience, skills or devices required for the patient to collect the prescription.

Virtual Access to Care

Shropshire, Telford and Wrekin NHS Talking Therapies reported that in October 2026 its assessment and treatment activity was approximately:

- **41% video**
- **36% telephone**
- **19% face-to-face**
- **3% SilverCloud**.

The service also holds **five KOMP devices**, which staff can set up in people's homes where someone would otherwise be unable to access treatment by video. The person keeps the device for the duration of treatment and it is subsequently collected.

Crucially, digital access has not meant centralising face-to-face provision. The service describes clinics across **five Telford locations, three Shrewsbury locations, Bridgnorth, Ludlow, Craven Arms, Church Stretton, Whitchurch, two Market Drayton locations and Oswestry**.

For MPFT, virtual care isn't replacing local physical services. We are deliberately operating a blended model. In Talking Therapies, for example, video is now a substantial part of delivery, but telephone and face-to-face remain available and we have clinics distributed across Shropshire and Telford & Wrekin.



Talking Therapies use 5 devices and have recently deployed 3 devices to service users unable to access digital consultations with their own device, data or skills

Digital and AI Strategy Update

The Big 7 and our shared digital foundations

Seven transformation programmes, supported by the capabilities, services and assurance that underpin all digital delivery.

The Digital Transformation Big 7

What we are transforming



01

Digital front door and self-service

Easier access.
More choice.



02

Remote and preventative care

Support closer to home.



03

Enhanced triage and waiting lists

Appropriate support.
Active waiting.



04

EPR optimisation, shared care records and clinical pathways

Better information.
Coordinated care.



05

Data and predictive intelligence

Earlier insight.
Better decisions.



06

AI-enabled productivity

Less administration.
More time for care.



07

Referral and admin automation

Connected pathways.
Less repeated work.

SHARED BY ALL SEVEN PROGRAMMES AND BY DAY-TO-DAY DIGITAL SERVICES

Shared digital foundations

What enables and sustains delivery

People and partnerships

- **Capability, culture and co-production**
  Workforce, service users and carers
- **Digital inclusion, accessibility and choice**
- **Supplier assurance and partnership working**

Safety and resilience

- **Cyber and information security**
- **Clinical safety, IG and responsible AI assurance**
- **Resilience, business continuity and sustainability**

Infrastructure and data

- **Digital capital and infrastructure**
  Lifecycle management
- **Data quality and performance reporting**
  Mapping, standards and interoperability
- **SSHIS Service Review**
  Balanced Scorecard monitoring

Governance and value

- **Digital governance and service optimisation**
  Prioritisation and BAU performance
- **Digital Maturity Assessment and benchmarking**
- **Benefits realisation, evaluation and value**

We are MPFT

The MPFT Digital Hierarchy of Needs

NHS
Midlands Partnership University
NHS Foundation Trust



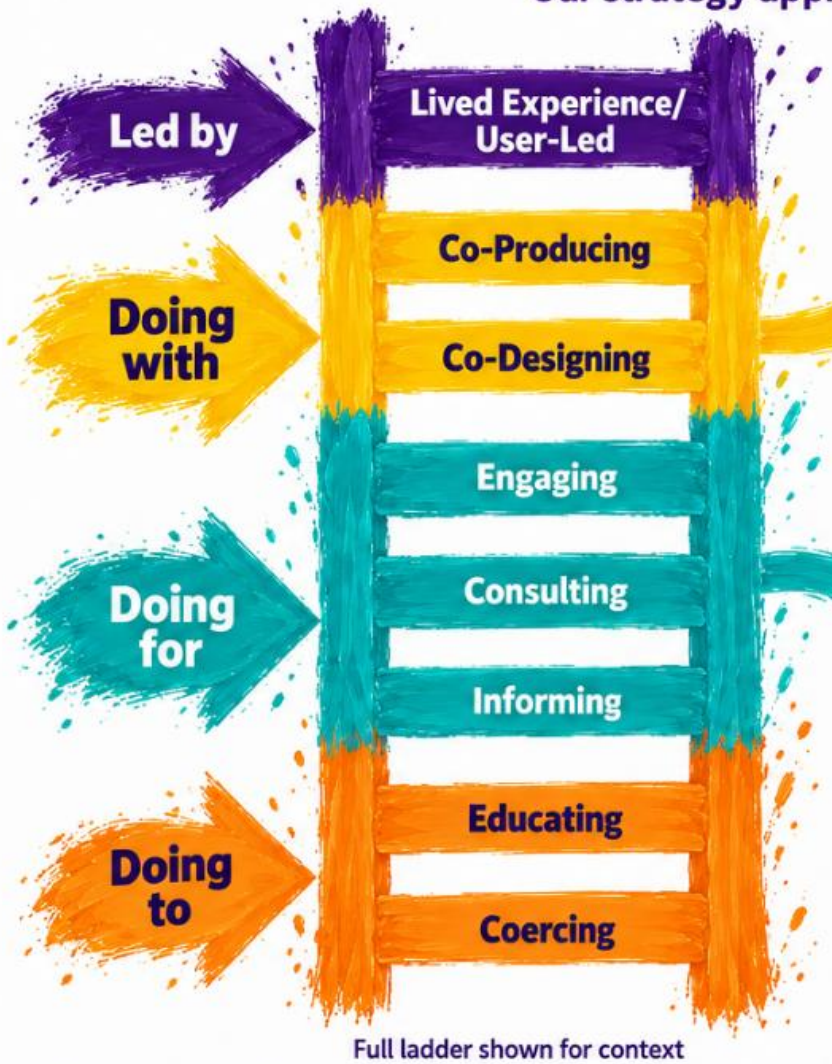
A Proportionate Approach to Co-production

Developing MPFT's new Digital Strategy

Our strategy approach focuses on Doing For and Doing With

We are MPFT

NHS
Midlands Partnership University
NHS Foundation Trust



Full ladder shown for context

Doing With

Priorities we can shape together

- Targeted outreach and co-design with communities, people with lived experience, carers and staff.
- Direct influence on what matters most and how digital improves access, experience and outcomes.
- Where appropriate, priorities progress into co-production during design and delivery.

Doing For

Requirements we must deliver

- National 10YHP requirements, the Trust-wide CLEAR strategy and standards, and safe, secure, resilient digital services.
- Meaningful engagement shapes how these requirements are delivered.

Our ambition: meaningful co-production on as many digital transformation projects as possible

We are MPFT

NHS
Midlands Partnership University
NHS Foundation Trust

Culture for Digital Strategy Success

The shared behaviours that turn digital, AI and data into better care



1 Learning and adaptability

Build digital skills, confidence and readiness for change.



2 Safe adoption of AI

Use AI responsibly, with human oversight and clear benefits.



3 Data-enabled health and care

Use trusted data to improve care and inform decisions.



4 Cyber, information security and safety

Protect information and embed safety in everyday practice.



5 Continuous improvement and innovation

Test ideas, reduce waste and scale what works.



6 User-centred design and co-production

Shape inclusive solutions with staff, patients and carers.

Why this matters

- Better care
- Safer services
- Greater confidence
- Improved productiivity
- Inclusive innovation
- Stronger outcomes

MPFT DIGITAL STRATEGY

Digitally Enabling Our Communities

Remote care opportunities across MPFT community services



Long-term conditions

Heart failure · Diabetes · Respiratory

Home monitoring and virtual reviews



Frailty & care at home

Community nursing · Falls · HIU

Home sensors and care-home data links



Rehabilitation & therapies

Stroke · Neurology · MSK · Therapies

Digital exercises and recovery tracking



Complex & supportive care

Complex care · Cancer · Palliative care

Symptom tracking and carer support



Children & families

Health visiting · Children's nursing · CAMHS

Virtual support and connected care plans



Community mental health

Community teams · Talking therapies · Crisis care

Virtual therapy and relapse monitoring



Learning disability & autism

Community teams · Autism · Social care

Accessible support and shared care planning



Specialist community care

Specialist Drug and Alcohol
Gambling Harm · Health and Justice

Pre-assessment questionnaires and waiting well

Remote monitoring

Virtual consultations

Digital self-management

Shared care coordination

More care at home. Earlier intervention. Greater independence.

To support the MPFT Digital Strategy Refresh and engage with further questions/suggestions contact:

MPFTDigital@MPFT.NHS.UK

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Barriers to Accessing Healthcare

Practical & geographic

Distance, transport, rurality, unsuitable times, work and caring responsibilities.

Financial

Travel, parking, childcare, prescription or dental charges, and loss of income.

Information & health literacy

Unclear or inaccessible information, language, limited understanding of services or entitlements.

Digital

Digital exclusion, inaccessible platforms, account creation or identity checks, and digital-by-default routes.

Service availability & navigation

Long waits, limited capacity, fragmented pathways, referral thresholds and difficulty knowing where to go.

Physical, sensory & communication access

Buildings, equipment, sensory environments, communication support and reasonable adjustments for individuals with intellectual or physical disability.

Social & cultural

Stigma, cultural relevance, social norms, isolation, competing priorities and limited support.

Trust, experience & discrimination

Previous poor experiences, fear, confidentiality concerns, racism, ableism or other discrimination.

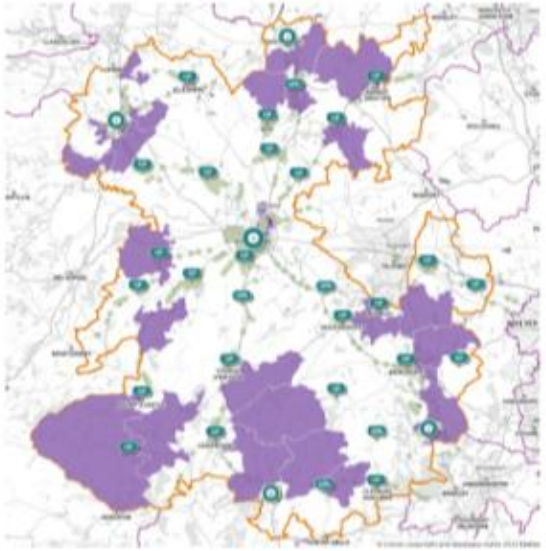
Key point: barriers are not simply “patient choice” or “non-attendance”. They often reflect a mismatch between people’s circumstances and how healthcare is designed or delivered.

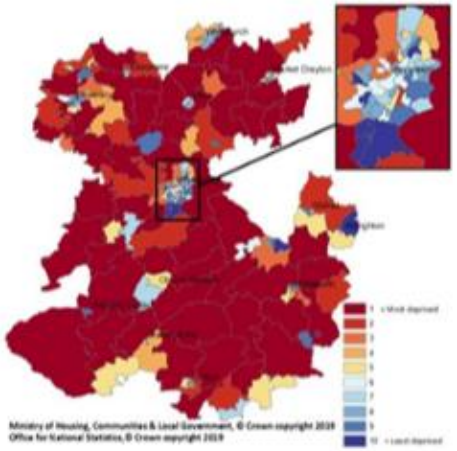
How the Council with TWIPP partners are tackling barriers to access

- Live Well Hubs
- Family Hubs
- Independent Living Centre and Autism Hub
- Here to Help and Healthy Hearts Bus
- Vaccination education and pop up clinics
- Health Checks
- Neighbourhood Health

Transport and Access Exclusion

Map 5: Access to General Practice within 15 mins





Source: IMD 2019 and SHAPE

Access to services provides a particular challenge in rural areas. The index of multiple deprivation contains a measure for the physical and financial accessibility of housing and key local services. In 2019 Shropshire has an average score of 25.4 and is ranked 68th most deprived local authority in England out of a total of 317 lower tier local authorities. In addition, Map 5 specifically identifies those who cannot access a GP practice within 15 mins using public transport

Challenges

Rural populations in Shropshire may experience barriers to accessing health care services due to distance, transport and waiting times. Data identifies that 37% of Shropshire's population cannot access a GP within a 15-minute journey on public transport. This may be more detrimental for more deprived populations which make up 1.6% of the total 37% figure.

Opportunities and Action

Transport and access to services features in several strategic plans within Shropshire, which include actions to implement. Collective plans include:

- The Shropshire Inequalities Plan
- The Shropshire Plan – Healthy People
- Shropshire Health and Wellbeing Board's Joint Health and Wellbeing Strategy
- The Local Transport Plan (LTP4) which considers and prioritises the mobility needs of people, places, and activities in promoting and maintaining healthy, equitable and sustainable communities. This includes the Local cycling and walking infrastructure plan (LCWIP) to encourage and enable sustainable physical activity in daily life for all population groups
- Integrated Care Strategy priority – Primary Care access, Urgent and Emergency Care access, inequality of access to preventative care.

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