Digital Literacy in Health and Social Care

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Introduction

Increasingly, the use of technology is an essential part of everyday life: both personally and professionally. For many of us, entertainment at home, shopping, fitness and connecting with friends relies on a degree of digital confidence and competence. Digital literacy has been defined by HEE (2016), drawing on work by Jisc (2015), as ‘those capabilities that fit someone for living, learning, working, participating and thriving in a digital society.’ With the emergence and development of Technology Enhanced Learning (TEL) and Technology Enhanced Care (TEC), the need for digital literacy is fast becoming a core requirement for both students, academics, patients and everyone working in health and social care. The growth of technology has resulted in a significant and continuing culture change within health education and higher education requiring authentic and effective leadership.

Drivers of improved digital literacy to support TEC and TEL include:

- National Information Board (NIB) Personalised Health and Care 2020 (In particular the Building a Digital Ready Workforce Programme)
- Wachter Review and recommendations (2016)
- Student and public expectations
- The requirements of employers and professional bodies
- Quality measures

(Quality Assurance Agency, 2014)

It should be noted that the introduction of technologies in care or education should be to enhance or enable the individual or student experience. TEL and TEC may be cost effective, but it is the care and pedagogy that should be the essential drivers of change.

Benefits of TEL in Health Education

Enhancing care and education:

Care and education can and should be enhanced through the increasingly wide and varied technologies available. Social media is just one form of digital that has been used to enhance care and health education and this is exemplified perfectly by the ‘hello my name is…’ campaign founded in August 2013 by Dr Kate Grainger. Kate was a GP, who was also terminally ill with cancer. During one of her hospital stays, she noticed how poor staff were at introducing themselves to her and began to use social media to raise awareness of this situation and to improve care. Since then over 1 billion people have seen her campaign on
Twitter and Kate's legacy continues with pledges still arriving from healthcare professionals who want to improve their patient communication.

Other health professionals have used social media to develop and support communities of practice. A leader in this area is Teresa Chinn (MBE), founder of ‘WeNurses’ and ‘WeCommunities’. The regular Twitter chats facilitated by WeCommunities provide a unique platform for student nurses, patients, senior health professionals and policy makers and many others to connect and discuss contemporary issues. These interactions help develop users’ digital identity and create an opportunity for participants to influence health care.

**Accessibility:**
TEL and TEC can greatly impact on widening participation agendas by increasing accessibility for those who would otherwise struggle to access traditionally delivered health care or education. TEL and TEC can be appealing to people who live in geographically remote locations and to those who have health issues that make it difficult to travel. The inclusivity of TEL and TEC can empower and enable both everyone working in health and social care and individuals.

**Flexibility:**
A clear benefit for many students who choose to study using technology to enhance their learning is that it can be flexible. Students can access learning materials at a time and location to suit them. Increasingly, learning is accessed via mobile devices. Additionally, students can choose to study in bite-sized chunks rather than in longer traditional ‘blocks’ of time.

**Development of professional digital identities and behaviours:**
The digital identities of those working in health and social care can be developed to connect and network, to develop collaborative partnerships, to aid more effective communication and these professional identities can subsequently impact on employability. Academics/teachers/supervisors, through the development of sound and appropriate digital capabilities and behaviours, can support students and learners in flexible, innovative, more efficient and more formative ways. They can support students and learners in their online learning both synchronously and asynchronously using both formal and informal vehicles. Nevins and Smith (2016) discuss how giving students permission to access social media, experiment with it and harness its energy and power can enhance their education.

Examining one’s digital footprint can be enlightening. If you haven’t tried it already, just type your name into Google and see what web information, images and videos might be there for patients, colleagues and prospective employers to see. By creating and developing a professional presence during their professional programme of study, Nevins and Smith (2016) identify how students can effectively use TEL to develop their careers. The National Midwifery Council (NMC) and other professional guidelines are readily available to encourage professional use of social media.

**Competency and confidence**
It’s no longer possible to think about digital literacy as either purely about technical proficiency or as the preserve of only a few. With regard to health and social care particularly, the workforce must have sound digital capabilities in order to provide the best care and to ensure effective personal and professional development. Building confidence, as well as competence, is key and there is a significant degree of anxiety and even resistance from some.

Healthcare has traditionally been slow to adopt new digital tools and technologies. By building excellent digital skills and the right attitudes and behaviours, the up-take and
adoption of new digital tools and technologies can be dramatically improved. It is by building the necessary capabilities, including confidence, that these improved outcomes can be achieved.

Online educational resources and tools

There is a multitude of resources available yet too frequently these can be difficult to find, hard to access, of varying quality or prohibitively expensive. There can be unnecessary, costly and wasteful duplication of resources across health and social care. The Health Education England (HEE) TEL Programme is working on solutions to these problems and the Digital Literacy Project is specifically identifying existing resources to support improved digital literacy in order to highlight and signpost as well as to identify gaps where resources may need to be commissioned.

Online packages such as NHS Elite are designed to support the digital novice and it is in everyone’s best interest to have a competent and confident health workforce. The Health Education England e-Learning for Healthcare (HEE e-LFH) Programme provides a wealth of free materials and resources and will be developing packages to support digital literacy specifically.

Digitally-enabled, individual-centric care

Empowering citizens to become digitally-enabled in respect to health, wellbeing and care through wearable technologies, online tools and apps is already an established and fast-growing part of our health and care landscape. Technology is enabling increased and improved collaboration between individuals and those who care for them with an urgent need for both, those being cared for and those caring for them, to be sufficiently digitally literate to maximize the potential of this kind of personalized care. With this in mind, the development of digital literacy capabilities needs to be inclusive.

HEE’s digital literacy definition and capabilities

The digital literacy work by HEE is supporting building awareness about those capabilities that make up sound digital literacy, increasing motivation to further develop those capabilities and to support people in accessing and using tools and resources that can help.

The TEL Programme team is working with and supporting the Building a Digital Ready Workforce (BDRW) programme of the National Information Board to support the digital literacy work stream.

HEE defines digital literacies as ‘those capabilities that fit someone for living, learning, working, participating and thriving in a digital society.’

They have described six key domains of distinct digital capabilities. Each domain has its own capabilities to help improve the health and social care workforce.

1. Communication, collaboration and participation
2. Teaching, learning and self-development
3. Information, data and media literacies
4. Creation, innovation, scholarship
5. Technical proficiency

As part of the digital literacy work six papers have been produced:
1. The **Towards a definition of digital literacy** paper describes building on the work of experts in the field of digital literacy to develop the HEE definition: Digital literacies are the capabilities which fit someone for living, learning, working, participating and thriving in a digital society.

2. **A literature review of research into digital literacy** looks at the challenges across sectors in improving digital literacy in the workforce.

3. **A desktop study of digital literacy in practice** and looking at potential solutions and best practice in improving digital literacy in the workforce.

4. **A Barriers to Accessing Technology Enhanced Learning** paper explores both the challenges and potential solutions in accessing digital and technology.

5. **A desktop study looking at existing digital literacy frameworks and standards** and how these align with HEE’s work

6. **A review of existing educational tools and resources** that support improved digital literacy

The next steps are around developing a capability framework covering all who work and train in the NHS and social care. The framework is intended, in the first instance, to support a self-diagnostic tool for all.

A summary document is also being published in June 2017 outlining the reasons for the work on digital literacy and why it is so important in providing the very best health and social care for all.

The Digital Literacy Project has drawn on five case studies of organisations which appear to be successfully developing a digitally-literate workforce and the following approaches have been identified as significant factors contributing to this success:

- **Leadership**: there needs to be proper buy-in at all levels of leadership and management with clear articulation of the importance of digital literacy, encouragement to develop/improve digital literacy and the appropriate access and learning opportunities provided.

- **Strategy**: organisations need, at the macro level, to demonstrate clear strategic intent with regard to improving the digital literacy of their workforce.

- **Organisational culture**: this needs to be open and trusting with an ethos of information sharing. Decentralised control over digital working needs to become business as usual.

- **Digital ecosystem**: a systemic approach should be adopted that sees multiple partnerships involved. Using local data to shape strategies and initiatives, the digital ecosystem should take a holistic approach towards communities, rather than simply focussing on individuals.

- **Talent management**: organisations need to be recruiting for digital skills, recognising skills within and identifying skills gaps. Organisations should also identify existing, transferable skills that can be transitioned into a digital work context.

- **Informal learning**: organisations need to learn from how digital literacy skills and behaviours are acquired informally and utilise these existing and transferable skills, as well as employ similar methodologies in encouraging learning at, and for, work.

- **Developing digital skills digitally**: there is a wide range of online/digital resources and tools for learning that should be curated and made easily available to the workforce.

- **Reward learning**: learning can and should be rewarded to aid motivation, e.g. open badges, certification and increased autonomy in using digital technology.

- **Partnership in learning**: increasingly, there is recognition that the acquisition and development of appropriate skills is a partnership, although it should be emphasised that employers should certainly not abdicate responsibility for training but should provide, resource and signpost good quality training and learning.
It should be noted that, whilst the above have been offered as successful approaches to the development of good digital literacy skills and competence, wide-scale evaluation of such methods has not been undertaken.

The most significant success factor identified across all sectors is the role of digital champions. There can be different approaches towards this type of role; formal roles, informal or simply recognising and rewarding those who offer spontaneous, ad hoc championing of digital, but all appear significant in seeing higher levels of digital literacy developed.
Work with the Royal College of Nursing

HEE is delighted to be working in partnership with the Royal College of Nursing who has endorsed the definition and domains and who will be using this as part of their ‘Every Nurse an e-Nurse’ strategy.

As part of the joint summary document, they too will be explaining why improving the digital literacy capabilities of all in nursing is so vital.

Conclusion

Effective development of digital capabilities is essential to personal and professional development, participation and wellbeing in the delivery of contemporary health and social care. This may be a vulnerable process for some and sensitive support will enhance changes in practice. Development of digital championing and resilience will inevitably be required as technology and innovation move at an ever swifter pace.

Effective leadership and change management is required to create the strategic intent regarding digital literacy. Ideally workforces and organisations should aim to contribute to a wider digital ecosystem.

It is essential that developing digital literacy is not seen as a one-off initiative, but rather an ongoing process and should be integrated into everyday life and working. Nonetheless, digital capabilities need to be acknowledged and embedded within curricula to ensure learners enter the workforce with both the necessary skills and attitudes/behaviours. Non-professionals also need to be recruited for digital literacy and/or inducted, orientated and developed going forward in digital literacy capabilities.

Organisations will benefit from an audit of existing digital capabilities in the workforce and digital champions should be supported fully to work with staff and individuals/patients. Ultimately, it is in all our best interests to provide the best care we can for individuals. In the case of TEL and TEC, many of us will need to embark on the development of new skills. Being digitally literate is a developmental and empowering process, moving through different levels of expertise. Whether we are a teacher, learner, student, patient, a carer, a lay person, a member of the health or social care, or indeed any workforce, we are all far more likely to lead healthier, happier, more productive and empowered lives if we are truly digital citizens who are confident and competent in the widest range of digital capabilities.

Links

Building a Digital Ready Workforce (BDRW) programme of the National Information Board
https://hee.nhs.uk/our-work/developing...workforce/building-digital-ready-workforce

HEE’s TEL programme: https://www.hee.nhs.uk/our-work/research-learning-innovation/technology-enhanced-learning

Hello my name is… http://hellomynamesis.org.uk/

e-Learning for Healthcare: http://www.e-lfh.org.uk/home/


NMC Social Media Guidance
https://www.nmc.org.uk/standards/guidance/social-media-guidance/
We Communities http://www.wecommunities.org/

References

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Digital_capabilities_six_elements.pdf, accessed 22/2/2017

