

Agenda Item:

Joint Public Health Board

14

Bournemouth, Poole and Dorset councils working together to improve and protect health

Date of Meeting	3 February 2015
Officer	Director of Public Health
Subject of Report	Public Health Dorset Online Strategy
Executive Summary	<p>The online strategy sets out the plans for developing online and digital tools to support Public Health Dorset's work and communications strategy.</p> <p>It highlights the need to develop tools that channel people to the appropriate services commissioned by Public Health Dorset and for staff, professionals and academics to have access to information and intelligence.</p>
Impact Assessment:	Equalities Impact Assessment: Equality screening completed.
	Use of Evidence: External professional advice sought
	<p>Budget: £30,000 for development of online tools.</p> <p>Ongoing maintenance and hosting costs of about £3,000-£5,000 a year.</p>

	<p>Risk Assessment:</p> <p>Having considered the risks associated with this decision using the County Council's approved risk management methodology, the level of risk has been identified as: Current Risk: LOW Residual Risk LOW</p>
	<p>Other Implications:</p> <p>None</p>
<p>Recommendation</p>	<p>To note and agree content of the strategy</p>
<p>Reason for Recommendation</p>	<p>Protect and enrich the health and wellbeing of Dorset's most vulnerable adults.</p> <p>Provide innovative and value for money services.</p>
<p>Appendices</p>	<p>Appendix 1: Public Health Dorset Online Strategy</p>
<p>Background Papers</p>	
<p>Report Originator and Contact</p>	<p>Name: Paul Compton, Senior Communications Officer Tel: 01305 225896 Email: paul.compton@dorsetcc.gov.uk</p>

1. Background

- 1.1 Public Health Dorset set up a website development group to tackle the issue of what online presence the partnership needs to carry out its work.
- 1.2 A set of temporary webpages were set up on the dorsetforyou.com website to make sure there was no gap while plans were drawn up for a permanent solution.

2. Development of strategy

- 2.1 The strategy was developed recognising the need for specific solutions for the different needs of each of our audiences: the public, professionals, and staff.
- 2.2 The website development group drew upon expertise initially from local developers and the dorsetforyou.com team.
- 2.3 Engagement with the public about how they would access online health information was carried out as part of the work around the Health Improvement Hub.
- 2.4 Engagement with professionals and with the wider public health team is planned to help shape the development of the tools.
- 2.5 Further expert advice was sought from a specialist company to develop the tender specifications.

3. Next steps

- 3.1 Despite being under the procurement threshold for the need to tender, in order to stimulate a good response from the market, a tender exercise is planned.
- 3.2 Appointment of the preferred supplier will take place in early March with development starting soon after.
- 3.3 Work will then take place with service providers to make sure that all online platforms complement each other.



Public Health Dorset online strategy
January 2015

1. Background

- 1.1 Technology has become an integral part of our everyday behaviour.
- 1.2 Eighty-three per cent of homes in the UK have access to the internet, while roughly half the country has access to the internet through smartphones.
- 1.3 73% of adults access the internet every day. Access to the internet using a mobile phone more than doubled between 2010 and 2013, from 24% to 53%.
- 1.4 There are 31 million Facebook users in the UK and almost half of 18-24 year old internet users and more the 40 per cent of 35-44 year olds in the UK have a Twitter profile.
- 1.5 The website development group was formed to look at the online needs of Public Health Dorset and the people we work with.
- 1.6 The group is made up of representatives from across Public Health Dorset with co-opted members from the Dorset for You team and Dorset County Council's IT department.
- 1.7 Currently, Public Health Dorset has branded pages hosted on the Dorset for You website, which can be found at www.publichealthdorset.org.uk

2. Principles

- 2.1 The principles for a public health website have been defined as:
 - user-focused
 - accessible
 - inclusive
 - interactive
 - engaging.
- 2.2 Any solution will need to be able to adapt to future changes in need and developments in technology and online tools.
- 2.3 The solution should complement and not repeat tools and information that already exists. The plan is to make the user experience easier and quicker.

3. Audiences

- 3.1 The group has identified three audiences that would benefit from online information and technology.

They are:

- public
- professionals
- public health staff.

Each of these audiences has differing needs to be catered for.

3.2 Public:

- Unlikely to go to Public Health Dorset website without prompt.
- Emphasis on drawing them to the webpages using social media, campaigns, promotional materials etc.
- Lots of information out there on websites and searchable through Google.
- Public split into categories for reasons why they would come to the website:
 - Actively seeking advice or information.
 - Curious.
 - Research.

3.3 Professionals:

- Need good quality information quickly.
- Want good representation of data.
- Professionals use of the webpages categorised as:
 - research
 - looking for best practice
 - looking at performance
 - looking for information to use in some other way.

3.4 Public health staff:

- Are based across three sites.
- Need access to shared information.
- Require platform to discuss and share ideas.

4. Research

4.1 Research work has been carried out as part of the integrated health improvement project to assess how members of the public would like to use digital solutions for health improvement.

4.2 A summary of the results shows that:

- Most people would use a health improvement service for information and practical support to improve their lifestyle.
- People are generally happy to share information with their health with the hub, but many would like to be guaranteed confidentiality.
- People would prefer to contact using a website, in person or using a smartphone app.
- On a website people would like
 - Information
 - Local healthy opportunities, such as leisure centres, walking groups etc
 - Online booking for local services such as health checks, specialist stop smoking services
 - Interactive tools, such as drinking or smoking calculators and online assessments
 - Ability set own goals, tasks and track progress
 - Online chat with health improvement advisor
- The least-favoured function was interactivity with people's social media accounts with a quarter of people expressing an interest in this.

4.3 Research will take place with professionals who may use the site to see what information they would like, how they would use such a site, and how often they would use the site.

- 4.4 Further research will take place to segment and profile audiences of the website to better tailor the information towards them. This will be done throughout the development phase.

5. Proposed solutions

It is clear that there needs to be three separate solutions to suit each of the audiences.

5.1 Public

The best use of the public part of the website given our role as a commissioner of public-facing service is to provide routes to digital solutions used by providers.

It will need to do three things:

- Act as the front-end for the health improvement hub, which will be produced by the hub provider organisation.
- Provide people with easy access to local services, such as sexual health.
- Provide local information and signposting around health protection issues.
- Interact with social media channels.

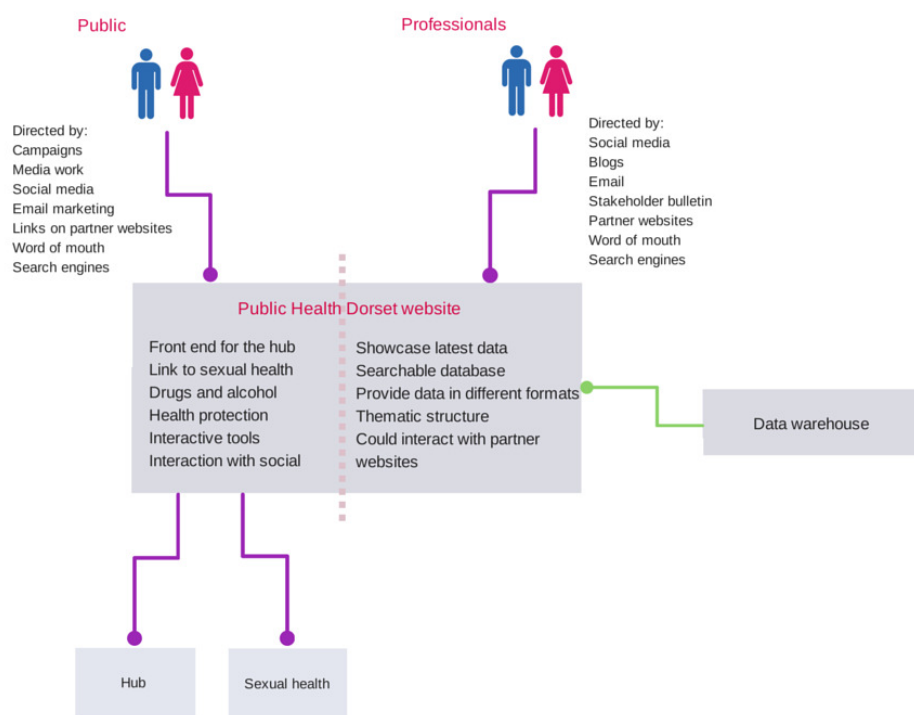
5.2 Professionals

The part of the website for professionals will need to be used as a resource for public health information and data:

- It will have a changeable visual panel to highlight recent data releases, newly uploaded reports or relevant topic area, e.g. sexual health data or recent national report.
- It needs a good search function and database capabilities best way for people to find information.
- It needs a good underlying structure for people to read through the different levels of data available.
- It could be sorted into themes, such as alcohol, sexual health etc., or by people, such as adults and children, depending on user preference.
- It needs to have the ability to cross-reference data with narrative reports and products that will provide a summary and interpretation of the data.
- It could develop in the future to be able to pull data from internal datastores in partner organisations - Bournemouth, Poole and Dorset councils, Public Health Dorset, NHS Dorset Clinical Commissioning Group - in line with appropriate access controls and agreements to be put in place.
- Data representation should be available through a number of different applications, examples include:
 - Prezi, for more presentation and storytelling uses: prezi.com
 - InstantAtlas, for more geographic information: www.instantatlas.com
 - Tableau, for graphical and tabular information: www.tableausoftware.com
 - Kumu – a web-based data tool: kumu.io
 - Uses of other data representation, such as infographics, textual and raw data also to be available.
- The data stores may contain a mix of some individual level data and aggregate or collated data, so there will need to be access controls and systems in place to make sure there's appropriate control of individual data items.
- Metadata should be accessible so that users can understand the data source, including appropriate links.

- As well as being able to access these two areas through the front page, there should be the ability to access both data and narratives through theme based pages that should also include relevant external links relevant to that theme area.
- Key links to partner sources of information and data, particularly Public Health England.
- Needs to hold resources for providers to be able to carry out public health work, such as guidance and forms, as well as training opportunities. This is currently being done on the temporary website through the GP and pharmacy portals.

This image shows the possible interactions between audiences and the digital platforms:



5.3 Staff

Rather than host information for staff on the online platform accessed by public and professionals, it is proposed that a separate closed environment will give public health staff a chance to share ideas and collaborate.

A possibility could be Dorset County Council’s Microsoft Sharepoint roll-out, which will provide each area with a team site that can be accessed in all three public health offices and tailored.

It will:

- be a place for sharing information and ideas
- allow blogging and showcasing work
- have handy information for staff and a portal to other sources of information
- link to training and professional development opportunities and resources
- highlight latest news and alerts to Public Health Dorset staff.

6. Social media

- 6.1 With the increasing use of social media channels, a presence needs to be built to use these to draw people to web-based resources.
- 6.2 Currently, Public Health Dorset uses the Dorset for You social media channels. However, this does not reflect the partnership and some messages, particularly around sexual health, do not sit well with the general local authority messaging displayed by these channels.
- 6.3 Proposals for social media are to:
- develop the @healthydorset Twitter account, which was previously used for health improvement messages by primary care trusts in Dorset
 - develop a YouTube channel to display videos produced by Public Health Dorset
 - develop a Facebook page to use as basis for public health campaigns and to use to support campaigns by provider services
 - continue to adapt with changes to social media and audience use of new social media channels.
- 6.4 A social media protocol will be drawn up to decide which messaging will be created, shared, promoted or endorsed by these channels.

7. Development

- 7.1 Development of the web presence will be done in partnership with the selected developer but will also need to involve service providers, such as the health improvement hub and sexual health services, as well as public health analysts.
- 7.2 User groups will be formed from each of the audiences to make sure each function meets their needs during development.
- 7.3 There will be continuous engagement and adjustments to meet audience needs once the tools are launched.