

Advice for digital inclusion

Digital tools and telehealth service delivery can widen access to healthcare, if they are accessible and optional. It may not be possible to support everyone to get online, however there may be options to improve access for some individuals.

Digital exclusion may be experienced by people who have limited experience with using technology and developing this skillset, Digital exclusion is often intersectional. Special consideration should be taken for populations who:

- Are in low-income groups or experience poverty
- Live in rural locations
- Have limited written language or first language not English
- Live with a disability or multiple disabilities
- Are migrant
- Are mobile or part of travelling communities
- Specific age groups (i.e. older people)

Barriers that can influence digital inequity

- **Access:** Limited or no device, shared devices, broken phones, no data or access to Wi-Fi.
- **Skills and confidence:** Low digital literacy, fear of “getting it wrong,” cognitive impairment, neurodiversity.
- **Communication:** Limited English, need for BSL, Easy Read, Braille.
- **Disability:** Visual, hearing, motor, language & cognitive impairments, inaccessible interfaces.
- **Privacy and safety:** No private space at home, unsafe relationships.
- **Trust and motivation:** Low trust in technology or technology institutions, concerns about data use, previous poor experiences, preference for in-person service provision.
- **Processes:** Complex sign-up for videoconferencing platforms, multi-factor authentication barriers, forgotten login emails and passwords.

Considerations for equitable care

- **Choice:** Offer service users online, telephone, and face-to-face options without it affecting their care.

- **Normalise support:** Acknowledge that it's common for people to find it difficult and offer the support they need. This may involve personalised and targeted support for those with greater need.
- **Prioritise accessibility:** Involve service users in changes to your service, reduce steps involved in accessing telehealth, provide accessible information (see [NHS Accessible Information Standards](#)) including cutting jargon, providing clear visuals.
- **Trauma informed practice:** Prioritise consent, service user control, and psychological safety in remote interactions.

Practical suggestions

- **Access**
 - Investigate whether local libraries or community spaces have free Wi-Fi and quiet spaces to use
 - [Good Things Foundation](#) provide signposting to local community hubs who provide free wifi and/or device provision
 - Check if a device can be loaned from the service user's network (i.e. friend or family member)
 - Liaise with the social prescriber associated with the service user's GP surgery to explore local digital access or interventions in their area
 - Consistently offer choice of service delivery
- **Skills and confidence:**
 - Collaboratively agree upon the goals/reasons for your service user to access online sessions
 - Train digital champions who can support service users
 - Provide support to get ready for online appointments
 - Practice being online with the person before therapeutic sessions start
 - Decide with the service user what activities you will and will not do online
 - [Refer to Ability Net](#) for free IT support at home
- **Communication:**
 - Provide access to interpreters during set up sessions and therapeutic online sessions
- **Disability:**
 - Offer practice online sessions
 - Suggested wearing headphones to support with hearing loss and reducing distractions
 - Connect hearing aids to device (if hearing aids are Bluetooth enabled)
 - Consider which device is easier to access due to mobility changes, i.e. smartphone leant against a glass, using laptop with mouse

- Offer shorter sessions
- Use easier to access videoconferencing platforms (i.e. with one-click link). This includes changing your video conferencing settings to enable embedded passcodes and keeping your service user logged into their videoconferencing account
- **Privacy and safety:**
 - Check who will be present for online sessions and check this at the start of every session
 - Explore if there are private spaces in community settings free to access
- **Trust and motivation:**
 - Provide opportunities for positive online experiences, for example, spending time building rapport online and getting to know the person, practicing new skills, taking breaks, shorter sessions
 - Provide information about the benefits of telehealth and its acceptability to those living with aphasia
- **Processes:**
 - Use videoconferencing platforms with one-click link to access meetings
 - Offer support to get ready for online appointments
 - Practice processes which they have found challenging
 - Save sign in details to reduce login demands later
 - Explore whether a helper could join them for online sessions

References

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