Putting Citizens at the Centre

10 Principles for Designing Digital Care Pathways for People with Low Digital Literacy

A practical guide for Integrated Neighbourhood Teams

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Foreward

Neighbourhood health represents one of the most significant shifts in healthcare delivery for a generation.

Across England, Integrated Neighbourhood Teams (INTs) are bringing together primary care, community services, mental health, local authorities, voluntary organisations and citizens themselves to create more joined-up, preventative and person-centred models of care.

Digital technology has a critical role to play in making this possible.

However, if neighbourhood health is truly going to be built around people, digital pathways must work for everyone, not just those who are confident using technology.

Many of the people who stand to benefit most from neighbourhood health are also those most likely to face barriers to digital access and engagement. Older adults, people living with multiple long-term conditions, individuals with disabilities, people experiencing deprivation, communities whose first language is not English, and those with lower health literacy can all encounter challenges when using digital services.

The question for neighbourhood teams is therefore not whether care pathways should be digital.

The question is whether they are designed so that everyone can use them.

This guide sets out ten evidence-based principles that can help neighbourhood teams create digital pathways that are accessible, inclusive and centred around the needs of citizens.

Digital inclusion matters

The NHS Neighbourhood Health Implementation Programme is built around a fundamental shift: moving care closer to home and enabling more proactive, coordinated support within communities.

To achieve this, neighbourhood teams must engage citizens earlier, support self-management, reduce unnecessary appointments and connect services around the individual rather than organisational structures.

Yet research shows that lower digital literacy is associated with lower engagement with digital health services, reduced confidence in self-management and poorer health outcomes.[1][2]

Digital inclusion is therefore not simply a technology challenge.

It is a health inequalities challenge.

Every digital pathway should be designed with this in mind.

Principle 1:

Design With Citizens, Not For Citizens.

The most successful digital services are designed with the people who will use them. Research consistently demonstrates that co-designed services achieve higher levels of engagement, satisfaction and usability.[3] Citizens often identify barriers and opportunities that professionals may overlook because they experience services differently.

Neighbourhood teams should:

- Involve citizens from the earliest stages of pathway design
- Include carers and community representatives
- Test pathways with intended users
- Continuously gather feedback and refine services

The best neighbourhood pathways are not designed around organisations. They are designed around people's lives.

Principle 2:

Use Plain Language.

Health literacy and digital literacy are closely connected.[4]

People are far more likely to engage with digital services when information is written clearly and simply.

Neighbourhood teams should:

- Avoid jargon
- Avoid acronyms
- Use short sentences
- Explain medical terminology
- Focus on everyday language

For example, Instead of: "Please complete your PROM questionnaire." Consider: "We would like to understand how you are feeling. Please answer these questions about your health." Simple language improves understanding for everyone.

Principle 3:

Support Multiple Languages.

Language barriers remain one of the most significant obstacles to accessing healthcare information.

Research shows that people are more likely to engage with health services and follow advice when information is provided in their preferred language.[5]

Neighbourhood teams should consider:

- Multi-language digital pathways
- Translated educational content
- Multi-language reminders
- Translation support within assessments and forms
- Culturally appropriate content

Supporting multiple languages is not simply an accessibility feature. It is an important tool for reducing health inequalities.

Principle 4:

Guide People Step-by-Step.

Many people with lower digital confidence become overwhelmed when presented with too many options. Research suggests that reducing cognitive load improves usability and engagement.[6]

Neighbourhood teams should:

- Break activities into manageable stages
- Present one decision at a time
- Clearly explain next steps
- Show progress through a pathway
- Avoid complex navigation structures

People should always know where they are and what happens next.

Principle 5:

Use More Than Text

LNot everyone learns in the same way.

Research has found that multimedia approaches can improve understanding and engagement, particularly among individuals with lower literacy levels.[7]

Neighbourhood teams should consider using:

- Video
- Audio
- Images
- Visual prompts
- Interactive content
- Demonstrations

Digital pathways should communicate in the way people naturally consume information.

Principle 6:

Design Mobile First

Many digitally excluded individuals are not disconnected from the internet. Instead, they primarily access services through smartphones.[8]

Neighbourhood teams should therefore assume that mobile devices will be the main route into digital services.

This means:

- Mobile-responsive design
- Fast loading pages
- Minimal data requirements
- Large buttons and touch-friendly interfaces
- Simple navigation

A pathway that works well on a desktop computer but poorly on a smartphone is unlikely to achieve widespread engagement.

Principle 7:

Reduce Form Filling

Every additional question creates another opportunity for someone to disengage. Research consistently identifies effort and complexity as barriers to digital participation.[6]

Neighbourhood teams should:

- Pre-populate known information
- Reuse existing data where appropriate
- Avoid duplicate questions
- Use simple answer formats
- Remove unnecessary fields

The easiest form to complete is the one that asks only what is genuinely necessary.

Principle 8:

Build Accessibility In From The Start

Accessibility should never be treated as an afterthought. Studies suggest that usability barriers often create greater exclusion than access barriers themselves.[9]

Neighbourhood teams should ensure pathways support:

- Screen readers
- Adjustable text sizes
- High contrast modes
- Keyboard navigation
- Alternative formats
- Cognitive accessibility considerations

Good accessibility improves the experience for everyone.

Principle 9:

Use Reminders and Prompts

LaMany people do not disengage because they are unwilling to participate. They disengage because life gets in the way. Research shows that reminders can improve participation and engagement in digital health programmes.[10]

Neighbourhood teams should consider:

- SMS reminders
- Push notifications
- Appointment prompts
- Progress updates
- Follow-up communications

Small prompts can have a significant impact on completion rates.

Principle 10:

Connect Services Around People

Citizens should not need to understand organisational boundaries to receive joined-up care. One of the core ambitions of neighbourhood health is to bring services together around the individual.

Digital pathways should therefore connect:

- Primary care
- Community services
- Mental health services
- Local authorities
- Voluntary sector organisations
- Neighbourhood teams

The most effective pathways feel like one service from the citizen's perspective, regardless of how many organisations are involved behind the scenes.

Conclusion

Digital inclusion is not achieved by providing access to technology. It is achieved by designing technology around people.

As neighbourhood health develops across England, the most successful teams will be those that place citizens at the centre of pathway design, reduce barriers to participation and connect services around the people they serve.

Because neighbourhood health is not ultimately about technology.
It is about helping people access the right support, in the right place, at the right time.

To achieve that, neighbourhood teams need two complementary capabilities: engaging citizens in ways that work for them, and coordinating care across organisations. The following page illustrates how these capabilities come together to turn inclusive pathway design into connected neighbourhood care.

From Principles to Practice.

One Neighbourhood Pathway. Two essential capabilities.

Great care happens when citizens are engageged and neighbourhood teams are connected.

Engage the citizen

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Digital experiences citizens love to use.

- Digital front doors
- Self-assessments
- Education & information
- Self-management tools
- Behaviour change sypport
- Persomalised care plans
- Reminders & notifications
- Community & local support

Citizen information and events flow securely

Coordinate the neighbourhood

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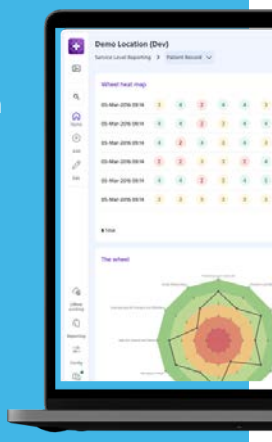
The operating system for neighbourhood care.

- Pathway orchestration
- Workflow automation
- Referral management
- MDT coordination
- System integration
- Data sharing & governance
- Reporting & analytics
- Population management



The connected care pathway

Assess · Triage · Refer · Coordinate · Deliver care · Monitor · Improve

Built for the NHS · Interoperable · Secure · Compliant · Configurable · Scalable

Together, Cogniss and Aire Innovate help neighbourhood teams design services people want to use and care pathways professionals can deliver, creating connected, personalised neighbourhood care at scale.

Find out more: cogniss.com aireinnovate.com

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