

Partnership working to promote digital inclusion for health: a toolkit for local authorities and primary care providers working together

A report by Good Things Foundation
with Better Places

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By working together, local authorities and primary care partners can help to ensure that everyone has the digital access they need to live healthier lives.

This toolkit provides local authorities and primary care providers with practical guidance on how to promote digital inclusion for health in partnership with primary care.

The toolkit is based on research conducted by [Good Things Foundation](#) with [Better Places](#), in partnership with [NHS England's Primary Care and Community Transformation and Improvement team](#) and the [Local Government Association \(LGA\) Digital Inclusion Network](#).

The research was conducted on behalf of the [Voluntary, Community and Social Enterprise \(VCSE\) Health and Wellbeing Alliance](#) a partnership between voluntary sector representatives and the health and care system.

Action: Use this model to assess the maturity of your local authority's partnership journey with primary care.

How to use this toolkit

The toolkit aims to support digital inclusion leaders in local authorities and primary care by providing:

- A maturity model to help identify where you currently are in your partnership journey, and plan for long-term success.
- Practical advice to help you get started with – or further develop – shared action on digital inclusion in partnership with primary care.

Why digital inclusion matters for health

Digital tools can make it easier to access primary care services, improve patient experience, give people greater control over their own care, and play a part in reducing health inequalities. But unless these benefits are shared by everyone, they can also deepen existing health inequalities by improving experiences of primary care for some while creating additional barriers for others.

Local authorities and their primary care partners play vital and complementary roles in promoting digital inclusion for health. Together, they help to address barriers such as cost, skills, trust and accessibility that prevent many people benefiting from digital tools and services.

Assessing your current position: A maturity model for shared action on digital inclusion for health

The different ways that local authority and primary care partners work together can be understood as a maturity model for shared action on digital inclusion for health. This can be categorised into four stages of maturity: **emergent**, **engaged**, **established** and **embedded**.

A maturity model for shared action on digital inclusion for health

	Emergent	Engaged	Established	Embedded
Activities	• Appetite for working together, but no projects currently delivered in partnership • There may be awareness of each other's work and communication about how to work together in future	• One or more digital inclusion projects involving local authority and primary care partners	• Co-designed and delivered digital inclusion work programme(s) • Time-bound and targeted	• Long-term approach, embedded across a variety of initiatives delivered by local authorities, primary care and other providers
Reach	• LAs and primary care both reaching into the community via their own activities and networks, but no established approach to agreeing priority need	• A combination of universal and targeted provision • Balance of priorities and practicalities	• A combination of universal and targeted provision • Increased focus on at-risk groups	• Initiatives delivered across a broad geographical area • Community-based, informed by evidence and community knowledge
Governance	• Some informal, individual relationships in place and/or awareness of complementary roles • Principally focused on information-sharing rather than delivery	• Typically characterised by individual working relationships • Limited formal reporting arrangements	• Programme boards and working groups • Responsibility for digital inclusion owned by specific local authority and NHS teams • Reporting in context of programme priorities	• Proactive and visible system leadership, with clarity about who has overall responsibility and accountability • Responsibility for digital inclusion embedded across local authority and NHS teams • Reporting in context of wider local authority and NHS priorities
Funding	• No funding allocated for partnership working • Funding streams not yet identified	• Shorter-term, project-based funding • Strong reliance on external sources of funding (e.g. grants)	• Medium-term funding, often with a lead funder (either local authority or primary care) who has overall responsibility and accountability • Digital inclusion becoming business as usual	• Long-term, evidence-led funding • Pooled resources across local authorities and primary care • Digital inclusion established within business as usual
Impact	• Individual approaches to measuring and understanding impact, but at varying degrees of maturity and not aligned as a partnership	• Emerging use of data to determine priorities • Often focused on measuring community reach	• Structured use of data to determine programme priorities and measure outcomes • Often focused on improving quality of provision	• Systematic, shared use of data to determine population priorities and measure outcomes • Often focused on improving quality of life and wider social outcomes
Stakeholders	• Either limited VCSE or other stakeholder involvement, or LAs are working with VCSE and other stakeholders without the involvement of primary care	• VCSE sector and other stakeholders help to raise awareness of provision	• VCSE sector and other stakeholders help to identify at-risk groups and make referrals	• VCSE sector and other stakeholders are partners in delivering digital inclusion provision

Activities

	Emergent	Engaged	Established	Embedded
Activities	• Appetite for working together, but no projects currently delivered in partnership • There may be awareness of each other's work and communication about how to work together in future	• One or more digital inclusion projects involving local authority and primary care partners	• Co-designed and delivered digital inclusion work programme(s) • Time-bound and targeted	• Long-term approach, embedded across a variety of initiatives delivered by local authorities, primary care and other providers

Top Tips

- **Getting started – Identify who will coordinate your partnership efforts:** While relationships between local authority and primary care teams do not necessarily need to be held by just one person, a coordinating role is often helpful. Sometimes, this is a dedicated position, and at other times part of a team member's wider remit. Coordination will help you to ensure effective use of resources, make connections between individual projects and initiatives, and ensure that teams are well supported to deliver their objectives.
- **Making progress – Collaborate and share:** In the early stages of working in partnership, take time to share information and best practice, and gain an understanding of each other's work. This will help you spot opportunities to work together, while ensuring that any new initiatives complement your existing activities.
- **Leading with purpose – Connect the strategic and operational aspects of partnership working:** Building a network of people who are passionate about promoting digital inclusion can strengthen your efforts. Consider how people in different roles, and at different levels of your organisation(s), could help to make the bridge between the operational and strategic aspects of working in partnership.

Reach

	Emergent	Engaged	Established	Embedded
Reach	LAs and primary care both reaching into the community via their own activities and networks, but no established approach to agreeing priority need	- A combination of universal and targeted provision - Balance of priorities and practicalities	- A combination of universal and targeted provision - Increased focus on at-risk groups	- Initiatives delivered across a broad geographical area - Community-based, informed by evidence and community knowledge

Top Tips

- **Getting started – Don’t reinvent the wheel:** Go out and talk to partners and the communities you support, find out what they need and what’s already happening in your area. Seek opportunities to support and build on the work of others to promote digital inclusion for health.
- **Making progress – Start with the person:** Consider the ‘user journey’ for people who are digitally excluded – what are their barriers when it comes to accessing support with their health? Focusing on individual experiences of people and communities, and the specific challenges they face, will make it easier for you to translate your learning into action.
- **Leading with purpose – Use your learning to continuously improve:** Get comfortable with ‘learning by doing’. Especially with emerging partnerships, you won’t have all the answers on day one. By making space for experimentation, trial and error, you can adapt and improve as you go.

Leadership & governance

	Emergent	Engaged	Established	Embedded
Governance	- Some informal, individual relationships in place and/or awareness of complementary roles - Principally focused on information-sharing rather than delivery	- Typically characterised by individual working relationships - Limited formal reporting arrangements	- Programme boards and working groups - Responsibility for digital inclusion owned by specific local authority and NHS teams - Reporting in context of programme priorities	- Proactive and visible system leadership, with clarity about who has overall responsibility and accountability - Responsibility for digital inclusion embedded across local authority and NHS teams - Reporting in context of wider local authority and NHS priorities

Top Tips

- **Getting started – Prioritise what matters most:** Partnerships take time to embed, and you don't have to tackle everything at once. Instead, identify the most important goals you'd like to achieve through working in partnership, clearly communicate them, and use these priorities to focus your collaborative efforts.
- **Making progress – Find a senior leadership champion:** Local authorities and primary care networks should each designate a strategic leader to drive digital inclusion initiatives. Local authorities might choose someone adept at building relationships with primary care and other stakeholders, ensuring that digital inclusion aligns with priorities like public health or adult social care. Likewise, primary care partners may appoint a senior leader who can liaise with local authorities and advocate for integrating partnership initiatives within NHS priorities.
- **Leading with purpose – Establish a clear governance framework:** By integrating your partnership efforts into a governance structure, you can ensure that the right stakeholders are involved and accountable for the success of your digital inclusion initiatives. This might be a group focused specifically on digital inclusion, or one that already exists. For example, within local authorities this might be the Health and Wellbeing Board, and for primary care it might be your integrated care board. Consider what makes sense within your own local context and start from there.

Funding

	Emergent	Engaged	Established	Embedded
Funding	- No funding allocated for partnership working - Funding streams not yet identified	- Shorter-term, project-based funding - Strong reliance on external sources of funding (e.g. grants)	- Medium-term funding, often with a lead funder (either local authority or primary care) who has overall responsibility and accountability - Digital inclusion becoming business as usual	- Long-term, evidence-led funding - Pooled resources across local authorities and primary care - Digital inclusion established within business as usual

Top Tips

- Getting started – Build on each other’s digital inclusion priorities:** Within an NHS context, there is a strong focus on the uptake of the NHS App and other digital tools such as online consultation systems (digital access). General Practices and primary care networks are focused on establishing ‘digital front doors’ alongside telephone and in person contact routes, with parity across access channels, to support more inclusive access. Likewise, local authorities have their own priorities. Consider how you can bring the best of your expertise to maximise your impact.
- Making progress – Align digital inclusion with broader public service objectives:** Ensuring that digital inclusion is seen as a key element of broader public services is a strategic lever for sustainable funding. This means aligning to strategic priorities for both local authority and health partners (for example, health inequalities and creating more digitally capable communities).
- Leading with purpose – Align with government priorities:** Senior leaders should stay attuned to emerging governmental priorities and funding opportunities, particularly as devolution continues to evolve. Aligning digital inclusion efforts with changes across the external landscape can help you to secure additional resources and amplify your impact.

Impact

	Emergent	Engaged	Established	Embedded
Impact	Individual approaches to measuring and understanding impact, but at varying degrees of maturity and not aligned as a partnership	- Emerging use of data to determine priorities - Often focused on measuring community reach	- Structured use of data to determine programme priorities and measure outcomes - Often focused on improving quality of provision	- Systematic, shared use of data to determine population priorities and measure outcomes - Often focused on improving quality of life and wider social outcomes

Top Tips

- **Getting started – Build on existing insights:** Use a variety of tools to build an understanding of which people and communities are at highest risk of digital exclusion. The [Digital Exclusion Risk Index \(DERI\) for England, Scotland and Wales](#) is a good place to start, and you can gain further insights by talking to partners and people who have lived experience.
- **Making progress – Continuously assess and measure outcomes:** To ensure that digital inclusion initiatives are delivering value for public investment, leaders must continuously assess the outcomes of their efforts. Use data strategically to track your progress, measure your impact, and communicate it to others.
- **Leading with purpose – Use data to inform strategic interventions:** Data-driven decisions help leaders focus on areas with the greatest potential for impact. With the right data, you can strategically target interventions, ensure your resources are allocated effectively, and deliver digital inclusion initiatives that are responsive to community needs.

Stakeholders

	Emergent	Engaged	Established	Embedded
Stakeholders	Either limited VCSE or other stakeholder involvement, or LAs are working with VCSE and other stakeholders without the involvement of primary care	VCSE sector and other stakeholders help to raise awareness of provision	VCSE sector and other stakeholders help to identify at-risk groups and make referrals	VCSE sector and other stakeholders are partners in delivering digital inclusion provision

Top Tips

- **Getting started – Engage VCSE organisations:** Support and encourage the involvement of VCSE organisations, as they have vital connections to communities and can help to promote digital inclusion among people and communities who might otherwise be excluded.
- **Making progress – Build place-based networks:** Foster networks in your local area that bring together people and organisations working on digital exclusion. Share insights, best practice, and collaborate on common challenges to drive progress.
- **Leading with purpose – Support VCSE organisations to deliver:** VCSE organisations bring invaluable assets to your partnerships, but they need adequate resources to do so effectively. Consider ways to build capacity within these organisations, to ensure your approach is sustainable in the long term.

Skills, capabilities and attributes for successful partnership working

The local authorities we interviewed identified a range of skills, capabilities and attributes that they and primary care partners require to work successfully together.

There is a high degree of overlap between the qualities required of digital inclusion programme leads and senior leaders, reflecting the collaborative nature of many digital inclusion initiatives. However, local authorities considered that some qualities are particularly important for senior leaders (for example, setting the vision and influencing others) and others for programme leads (for example, securing funding and effectively using data).

The ability to build trusted relationships with partners and communities was considered equally important for both programme leads and senior leaders, underpinned by a personal commitment to tackling digital inclusion.

Action: Use the diagram below to consider the skills, capabilities and attributes of your local authority teams when it comes to partnership working with primary care. Consider your strengths as well as the areas where you might want to develop.



Useful links and resources

100% Digital Leeds, [Digital Health Hubs](#)

Digital Unite, [Digital Health Champions Network](#)

Department for Work and Pensions (2024) [Digital skills, channel preferences and access needs: DWP customers](#)

Department for Work and Pensions (2024) [Digital skills, channel preferences and access needs: PIP customers](#)

Good Things Foundation (2024) Exploring the relationship between deep poverty and digital exclusion

Good Things Foundation (2024) Developing AI Literacy with People who have low or no digital skills

Good Things Foundation (2024) [Digital Nation 2024](#)

Good Things Foundation (2024) [Health inequalities and mitigating risks of digital exclusion](#) (2nd edition – guide for policy makers and practitioners with an extensive list of research and resources)

Good Things Foundation (2023) [Designing for Digital Inclusion in Healthcare](#) (webinar series)

Good Things Foundation (2023) [Top Tips: Supporting Digital Inclusion in Practice](#) (case studies)

King's Fund (2023) [Supporting digital inclusion in health care](#)

Local Government Association (2023) [The role of councils in tackling digital exclusion](#)

NHS England [National General Practice Improvement Programme](#)

NHS England (2025) [Step-by-step guide to improving general practice website online journeys](#)

NHS England (2025) [How to improve care navigation in general practice](#)

Useful links and resources

NHS England (2023) [Inclusive Digital Healthcare: Framework for NHS action on digital inclusion](#)

NHS England (2023) [Supporting Digital Inclusion in Practice: Ten Top Tips](#)

NHS England (2023) [GP website benchmarking and improvement tool](#)

NHS England (2022) [Creating a highly usable and accessible GP website for patients](#)

NHS England (2022) [Working in partnership with people and communities: statutory guidance](#)

NHS Digital (2019) [Digital inclusion for health and social care](#)

WSA Community Consultants (2020) [Digital Health Hubs Evaluation](#)

Yates, S et al (2024) [Minimum Digital Living Standard for Households with Children](#)



About Good Things Foundation

Good Things Foundation is the UK's leading digital inclusion charity. [Good Things Foundation](#) is the charity behind the [National Databank](#), [National Device Bank](#), [National Digital Inclusion Network](#) ('online centres'), and [Learn My Way](#). For more information, email hello@goodthingsfoundation.org

Good Things Foundation has undertaken this work in its role as a member of the VCSE Health and Wellbeing Alliance. The Voluntary Community and Social Enterprise (VCSE) Health and Wellbeing Alliance (HW Alliance) is a partnership between sector representatives and the health and care system. It enables the sector to share its expertise at a national level with the aim of improving services for all communities. The HW Alliance is jointly managed by the Department of Health and Social Care (DHSC), NHS England, UK Health Security Agency and Office for Health Improvement and Disparities and is made up of 18 VCSE Members that represent communities who share protected characteristics or that experience health inequalities and a VCSE coordinator.

