

Connected Care Questions

Referral and location questions

Please select the geographical area

- Bedfordshire Luton Milton Keynes
-

Please select your site (Luton)

- Chaul End Lane Farley Hill Marsh Farm
 Liberty team Gemini Team Park Town
 Hockwell Ring Central
-

Please select your site (Bedfordshire)

- Beehive Childrens Centre Leighton Buzzard - West Daisy Hill
 Cherry Trees Central Bluebells
 Eastcotts Stotfold hub Queens Park Family hub
 Pine Cones Family Hub
-

Please select your site (Milton Keynes)

- Conniburrow and Pebbles Daisychain Hedgerows
 Hummingbird Moorlands Rainbow
 Rowans Saplings Sunshinhe
-

Have you been signposted to the Family Hub/Centre from Maternity services?

- Yes No
-

Is the Pocketalk device being used to support this dicussion?

- Yes No

Maternity Services Referrals

Was the resident provided by maternity services with either of the following:

Mobile Phone

Yes

No

SIM Card

Yes

No

Do we now think that they may require a:

Mobile Phone

Yes

No

SIM Card

Yes

No

Connected Care Questions - SIMs

We encourage people to access information on the internet, are they able to access the internet on their mobile device whilst away from their home?

Yes

No

When at home, do they have reliable access to the internet?

Yes

No

This individual is eligible to receive a SIM card. Please follow the procedure to procure a SIM card for them.

Was a SIM Card accepted by the individual?

Yes

No

What reason was given for refusing the SIM card? If any

Connected Care Questions - Devices

Do you have your own smart device that you do not have to share that can download apps, make calls, and send text messages?

Yes No

Do you share this device with another friend or family member?

Yes No

This individual is eligible to receive a mobile phone. If one is available please provide them with this and provide support and guidance if needed.

Was the mobile phone accepted by the individual

Yes No Not available

What reason was given for refusing the mobile phone? If any

Informed Consent

Study ID (Last 6 digits of IMEI Number) Please also write this number on the Participant Information Sheet and give to the participant

Digital Equity Project Evaluation: Participant Information

You are being invited to take part in the evaluation of the Digital Equity Project. This document explains why the evaluation is being carried out and what it will involve.

What is the Digital Equity Project?

The Digital Equity Project provides mobile phones, SIM cards, and digital skills support to eligible participants. These tools help you access health information, including maternity and family services.

We have invited you to take part because your answers to the Connected Care screening questions suggest that you might benefit from support with digital access.

Why are we doing this evaluation?

We want to understand:

- how well the project is being delivered
- who is benefitting from it
- whether access to devices and data helps people with their health

Your experiences will help improve services for other families.

Do I have to take part?

No. Taking part is voluntary. You can withdraw at any time without giving a reason. Your care and the support you receive will not be affected. You can still receive the device and data without taking part in the evaluation.

What will taking part involve?

If you take part, you will be asked to:

- Complete a short survey now** with a staff member (about 3–5 minutes).
 - Receive any digital support** you are eligible for (e.g. SIM card, phone).
 - Complete a follow-up survey** near the end of the project (sent to you online or by text).
 - (Optional) **Take part in a short interview** about your experience (30 minutes).
-

What are the risks and benefits?

There are no known risks. Taking part will not affect the support you receive.

Benefits may include increased access to online health information and services. You will be helping us understand what helps people to access digital health care.

How will my data be used?

All information you provide will be kept confidential and stored securely. Your name will not appear in any report. Data will be pseudonymised using a study ID. Only the evaluation team will analyse your responses. The data will be securely stored for up to 5 years and only accessed in relation to this study.

Who is running the evaluation?

The evaluation is being carried out by Health Innovation East on behalf of the Bedfordshire, Luton and Milton Keynes Integrated Care Board.

Who can I contact for more information or to withdraw from the project?

Cathy McCabe, Associate Evaluation Lead, Health Innovation

East on cathy.mccabe@healthinnovationeast.co.uk (<mailto:cathy.mccabe@healthinnovationeast.co.uk>)

Please direct any project concerns or complaints to Dr Sarah Robinson (Head of Delivery)

at sarah.robinson@healthinnovationeast.co.uk (<mailto:sarah.robinson@healthinnovationeast.co.uk>).

The Data Protection Officer at Health Innovation East is Claire Bisset.

Please keep this Participant Information Sheet for your information.

Translations for consent

For translations for the participant information sheet please email: luke.natali@healthinnovationeast.co.uk

I agree to take part in the evaluation of the Digital Equity Project. I will complete one survey now and one in a few weeks.

Yes

No

I understand that my answers will be used in reports. My name will never be used and I will stay anonymous.

Yes

No

I understand that Health Innovation East will hold my data securely for up to five years. It will only be used for work related to this project.

Yes

No

I understand that I can stop taking part at any time without giving a reason by contacting Cathy McCabe.

Yes

No

Digital Access

Where do you get health information from? Tick all that apply

- GP
- Other health professionals/services
- Friends and family
- Online
- Prefer not to say
- Other (Please specify)

Do you currently use the NHS App

- Yes
- No
- Prefer not to say

Do you currently use the family hub/centre app or website?

- Yes
- No
- Not Applicable
- Prefer not to say

Demographics

Age:

Sex at birth

- Male Female Prefer not to say
 Other (Please specify)

Is the gender you identify with the same as your sex registered at birth?

- Yes No Prefer not to say

What is your gender?

- Man Woman Non-Binary
 Prefer not to say
 Other (Please specify)

How well can you speak English?

- Not at all well Very Well Prefer not to say
- 1 2 3 4

What is your ethnicity?

- Asian or Asian British
- Black, Black British, Caribbean or African
- Mixed or multiple ethnic groups
- White
- Other (Please specify)

Asian or Asian British:

- Indian
- Pakistani
- Bangladeshi
- Chinese
- Other (Please specify)

Black, Black British, Caribbean or African:

- Caribbean
- African
- Other (Please specify)

Mixed or multiple ethnic groups

- White and Black Caribbean
- White and Black African
- White and Asian
- Other (Please specify)

White:

- English, Welsh, Scottish, Northern Irish or British
- Irish
- Gypsy or Irish Traveller
- Roma
- Any other White background
-

Employment status (if you are on maternity leave, please tell us your usual employment status)

- Employed full-time
- Employed part-time
- Self-employed
- Unemployed
- Student
- Homemaker
- Retired
- Unable to work
- Prefer not to say
- Other (Please specify)

Do you consider yourself to have a disability?

- Yes
- No
- Prefer not to say
-

Postcode

Number of dependants

Pregnancy Status

- Pregnant
- Not-pregnant
- Prefer not to say
-

Are you a single parent?

Yes

No

Other (Please specify)

Close

We will send you a short follow up survey by text in a few weeks. Please complete this when you receive it

Can we contact you by phone or text for towards the end of the project to talk about your experiences?

Yes

No

Please input the mobile phone number here. This will either be your current mobile phone number if you have not received a SIM or are planning to retain your mobile phone number or the mobile phone number of your new SIM