Digital Health and Care Directorate

'Digital Front Door'
Users and Stakeholder Engagement Strategy

2022/23 – 2023/24

Version 1.0

Approved at Digital Front Door Programme Board

3rd November 2022

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Contents

Definitions

> **Users:** A person who uses, operates or consumes something.
>
> **Stakeholder:** An individual, group, or party with an interest or concern that either affects or is affected by an organisation, policy, programme, or decisions.
>
> **Engagement:** An active and participative process by which people can influence and shape policy and services that include a wide range of different methods and techniques.

Executive Summary

Strategic context

In 2021/22 key Scottish Government policy and strategy documents highlighted a key commitment to developing a safe and secure digital App as part of a 'Front Door' (working title). Specifically, the refreshed Digital Health and Care Strategy published in October 2021, made a commitment to:

"Develop a fully interactive 'Front Door,' both online and via mobile, into a range of different services across health and care."

This new service will be built on a common approach to online identity where personal data is controlled by the individual and people are able to authenticate their identity. It will enhance access and convenience, providing a better, consistent service experience to users. It will also reduce the administrative workload on staff and service.

Engaging with users and wider stakeholders has been identified as an obvious priority. It is also highlighted that any existing insights from recent and related work including Covid-19, Public consultation on Scotland's first Data Strategy for Health and Care; Scotland's Digital Identity Service, developing the National Care Service; Social Security Scotland work on co-design, Near Me National Public Engagement and relevant research and surveys will inform the Programme.

A central tenet of the approach will be to actively work with partner organisations and across Scottish Government departments for shared engagement opportunities for common purposes. This will combine insights and reduce multiple approaches to the same stakeholders. In addition, in discussions with stakeholders there was a strong theme that the Programme is not '*starting from scratch'* and the critical need to consider '*existing infrastructure.'*

Based on engagement to date, examples of the types of services which might be facilitated through a digital front door (transactional and information) are summarised:

- Accessing and/or downloading personal health and care records.
- Accessing dependable information online.
- Accessing online services and tools (mental health, self-management).
- Appointment letters.
- Asynchronous consultations and communications.
- Book and manage health and care appointments including Near Me.
- Choosing communication preferences (letter, email, phone, braille, language).
- Choosing access to services (online, email, video, in-person, phone, Apps)
- Electronic access to Vaccination status.
- Manage who can access data on another person's behalf.
- National Screening.
- Placing orders (e.g., repeat prescriptions).
- Providing feedback on services.
- Registering for and enrolling in services.
- Updating personal information, contact details etc).

Scope of engagement

This strategy covers User and stakeholder engagement. Further work is required to develop a communication and marketing strategy and plan to promote the work of the Digital Front Door, facilitate dialogue and promote engagement opportunities. This requires further work to assess any resource requirements.

Purpose of engagement

To build strong foundations, support, and understanding to develop the Digital Front Door that will deliver benefits for both citizens and service providers.

Objectives of engagement

To achieve positive collaboration to gain insights to inform the phasing of different Releases. To impact what gets made, developed and experienced.
To co-design the service in terms of usefulness, functionality, acceptability and priorities

Engagement framework and approach

A range of engagement approaches will be deployed depending on the specific purpose and are set out.   Some commitments, constraints and assumptions are also described.

What will we engage our stakeholders?

The strategic direction, as set out by the Scottish Government (section one), together with outputs from initial discussions, governance meetings, ongoing engagement (externally and internally) and existing user insights shape the content and priorities for engagement. The importance of choice and understanding the need for digital and non-digital options is thought to be fundamental to overall acceptability. Understanding what people need, want and why is critical. Gathering insights for such themes will be part of the ongoing engagement.

Who will we engage with?

The Digital Front Door has the potential to impact everyone in Scotland. This strategy covers both internal and external stakeholders including citizens, carers, service providers, suppliers, policy and decision-makers. It also specifically highlights the importance of having 'Users' as a distinct profile who will be involved in the co-design and testing of applications and services being part of the Front Door.

To target engagement, stakeholders have been broken down into broad categories and these are set out the strategy. Further work is required on stakeholder mapping, which will be informed by the scope, and initial release. It is highlighted that the engagement strategy will be guided by the agreed scope and phasing of different releases

Commitments, Standards and Principles

The intentions as to how we propose to approach engagement is set out with a series of commitments. This builds on the work summarised in the Directorate-wide Digital Health and Care Engagement Strategy.

Work is ongoing on agreeing what standards we are working to; what compliance will be expected from Digital Health and Care Directorate and of our partners (e.g., Digital Identity Scotland; service providers and any procured supplier).

Initial activities

Specific deliverables and milestones to support strategic engagement include:
- Scope out requirements to conduct user research and co- design.
- Scope Digital Panels and Digital insights, grants.
- Launch Digital Panels initially with exploratory sessions.
- Appoint or commission co-design capability and capacity.
- High-level stakeholder mapping, development and maintain stakeholder database.
- Review findings from Data Strategy Public Consultation and other insights.
- Scope out and prepare Equalities Impact Assessment (EQIA).
- Report on outcomes from Digital Panels.
- Design and Implement Engagement Plan for Release 1.
- Scope out any dedicated requirements for national public consultation

Governance and resources

Strategic delivery of the User and Engagement Stakeholder Strategy and Plan work will be overseen by the Senior Responsible Officer and coordinated by the Core team. The work will be accountable to the Programme Board and report to other groups and committees as set out in the Programme Board Terms of Reference.

Further discussions are required to agree on how the Board can be assured that agreed standards have been met. This will be referenced in the Programmes Board's Terms of Reference. The implications (cost, time and capability) of compliance with different standards need to be understood).

Delivering the Users and Stakeholder Engagement Strategy and Plan will require some dedicated resources including co-design expertise and capacity, funding digital panels and supporting wider citizen engagement including public consultation. The requirements for co-design will also inform the work of digital panels and wider engagement. The resources required for any dedicated support or commissioned activities will be proposed by the Senior Responsible Officer and approved by the Executive Group within the approved budget for the Programme.

The strategic approach to engagement will be reviewed annually with updates on the implementation of the action plan provided at each board meeting and other governance structures as appropriate.

1   Strategic context and background

- In 2021/22 key Scottish Government policy and strategy documents highlighted a key commitment to developing a safe and secure digital App as part of a 'Front Door' (working title).

- Specifically, the refreshed Digital Health and Care Strategy published in October 2021, made a commitment to:

  "Develop a fully interactive 'Front Door,' both online and via mobile, into a range of different services across health and care.

- The specific commitment as described in the Terms of Reference adopted from The Programme for Government (Scotland) (September 2021) was:

  "Develop a fully interactive 'Front Door', both online and via mobile, into a range of different services across health and care. This will be a way in to both digital and physical services across the statutory, third and independent sectors, making it more convenient to access timely services across a choice of channels."

- Other related Scottish Government strategies and plans published in 2021 and 2022 (at the time of drafting this document) are summarised (Box 1)[1]

Box 1 | Scottish Government-related strategies and plans 2021 and 2022
- **NHS Scotland** Climate Emergency & Sustainability Strategy 2022-2026 (August 2022).
- New legislation to transition towards a new National Care Service.[2]
- Public Consultation: Data Strategy for Health and Care (16th May – 12th Aug 22).
- Digital Health and Care Delivery Plan (April 2022).
- The Digital Health and Care Strategy (October 2021).
- Scottish Government Recovery Plan (5th October 2021).
- NHS Recovery Plan: 2021-2026 (August 2021).

- At a meeting with the Cabinet Secretary for Health and Social Care and his officials on 22nd September 2022, the proposed framework and approach for user and Stakeholder engagement was shared.

1.1   What is the Digital Front Door?

- The Digital Health and Care Strategy commits to developing a new streamlined approach to how people navigate their way through services, which will include a safe, simple and secure digital app. This will support people to access information and services directly – like a

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[1] A desk-top exercise to map out all government commitments has been completed.
[2] Bill before Parliament on 21st June 2022; to be introduced before the next Parliament.
National Care Service (Scotland) Bill – Bills (proposed laws) – Scottish Parliament | Scottish Parliament Website

'digital front door' – as well as self-manage, and access and contribute to their own health and care information.

- This new service will be built on a common approach to online identity where personal data is controlled by the individual (or as delegated) and people are able to authenticate their identity. It will enhance access and convenience, providing a better, consistent service experience to users. It will also reduce the administrative workload on staff and service.

- The Front Door is seen as a way into both digital and physical services across the statutory, third and independent sectors, making it more convenient to access services in a timely way. Non-digital approaches will also be available.

- The Vision is that by January 2026, people will be able to access and use a range of health and care services through a single point of entry and using a single and secure login. However, there will be various developments and releases prior to this starting in 2023.

  - Based on the engagement with stakeholders there was a strong theme in discussion that the Programme is not '*starting from scratch'* and the critical need to consider '*existing infrastructure'*.

1.2   Strategic dependencies

- There are various key dependencies including the Scottish Government Care and Wellbeing Portfolio, Recovery Plan, Data Strategy for Health and Care, Information Governance Review, and National Care Service. The need for a single and secure login built on a common approach to secure online digital identity, digital Inclusion, choice, and the financial context are also key dependencies.

1.3   Services which potentially could be included as part of the Digital Front Door

- Based on engagement to date, and experience from other countries, examples of the types of services which could be facilitated through a digital front door (transactional and information) are summarised in alphabetical order (Box 2).

Box 2| Services which potentially be included as part of the Digital Front Door
• Accessing and/or downloading personal health and care records.
• Accessing dependable information online.
• Accessing online services and tools (mental health, self-management).
• Appointment letters (i.e stop printing and posting).
• Asynchronous consultations and communications.
• Book and manage health and care appointments including Near Me.
• Choosing communication preferences (letter, email, phone, braille, language).

- Choosing access to services (online, email, video, in-person, phone, Apps)
- Electronic access to Vaccination status.
- Manage who can access data on another person's behalf.
- National Screening.
- Placing orders (e.g., repeat prescriptions).
- Providing feedback on services.
- Registering for and enrolling in services.
- Updating personal information, contact details etc).
- Viewing test results and waiting times.

- Initial engagement with stakeholders has highlighted that it is important to get started. Criteria are being developed which will assess priorities for which service(s) will be included in the initial release. The 'Go-live' and 'State of Readiness' processes will be underpinned by appropriate Governance including assurance around meeting agree digital standards.

2   Engagement framework and approach

2.1   Scene setting

- Building effective relationships is essential to the co-design, co-producing, delivery, and uptake of new services. There is no point in developing a Digital Front Door if people do not want to use it; if it has not been designed with users in mind; and citizens are not aware or offered the option.

- Initial discussions have highlighted the need to be specific over terms such as 'user', 'stakeholder' and 'engagement' and to understand the distinct types of engagement such as user-centered design and consultation.

- To provide clarity and consistency a suite of definitions will be further developed and available on the Digital Health and Care website.

- A distinction has intentionally been made between users and wider stakeholders. The general purpose of user-centred design is to understand people, their lives, their needs and their behaviour and using that understanding to make good design decisions about how services and products are organised and experienced. Therefore, the relationship between design work and software development is key (Box 3).

> **Box 3 | The purpose of user-centered design**
>
> The specific purpose of the design work for the Digital Front Door is to ensure that the service and its associated products are good for people, good for the teams running the health and social care services.
>
> User-centred design is an umbrella term for a range of specialist disciplines and the Digital Data and Technology (DDaT) aligned disciplines most relevant are:
> - User Research
> - Service Design
> - Interaction Design
> - Content Design
>
> User-centered activity including co-design practice will generate insights and user needs which will then be used as the basis for the creation of user journeys, service blueprints and product prototypes. These design outputs will then be translated into formats ready to be used in software development: user stories, a definition of 'done', and a definition of 'good'.

- To ensure the importance and support to invest in user-centered design, the Programme Board considered a paper on the benefits at their first meeting held in September 2022. More generally the approach to developing this User and Stakeholder Engagement Strategy is described (Appendix 1).

2.1 Scope and timeline

- This strategy covers user and stakeholder engagement**.** Further work is required to develop a communication and marketing strategy and plan. This will be key to promoting the work of the Digital Front Door, facilitating dialogue and engagement opportunities. This requires further work to assess any resource requirements and range of approaches (section six).

- The programme will require continuous engagement and co-design and this work is already underway. The Programme is expected to run until January 2026 with various releases getting underway starting in 2023.

2.2 Purpose of the engagement

- To build strong foundations, support, and understanding to develop the Digital Front Door that will deliver benefits for both citizens and service providers.

2.3 Objectives of engagement

- To achieve positive collaboration to gain insights to inform the phasing of different Releases.

- To impact what gets made, developed and experienced.

- To co-design the service in terms of usefulness, functionality, acceptability and priorities to ensure it meets expectations.

2.4 Engagement Commitments

- Engagement is an overarching term to cover all types of engagement including user-centered design.

- We have set out our intentions as to how we propose to approach engagement with a series of commitments (Box 4). These incorporate relevant guidance, standards and principles, and build on the work summarised in the Directorate-wide Digital Health and Care Engagement Strategy[3].

Box 4 | Engagement commitments
Accessibility and being inclusive: we will provide any information needed to participate in engagement, in a range of formats and languages.   **Assumptions**: we will strive not to make assumptions but where we do (for any reason) we will state these and be open to challenge. Equally, we will challenge others who make assumptions which we believe cannot be backed up.   **Feedback**: we will strive to demonstrate how users and stakeholder inputs have informed and influenced design, decisions and actions.   **Honest and transparent:** we will make it clear and easy for people to be involved in the co-design process and wider engagement.   **Learning:** Initial users/services will be supported to build in learning including collecting and reflecting on post-go-live reviews.   **Open to influence and building consensus**: we will seek views and provide opportunities for stakeholders to influence the design and scope of the Digital Front Door.   **Planned and timely**: as far as is within our gift, engagement will be planned and delivered in a timely and appropriate way, which is respectful of stakeholders' circumstances, needs and priorities.   **Understanding users needs and behaviours**.

- Work is ongoing on agreeing on what standards the board is working to, what compliance will be expected internally and of our partners (e.g. Digital Identity Scotland, service providers and any procured supplier) such as Digital Scotland Service Standard as published by Scottish Government

- Adherence to these standards should not be underestimated. If fully adopted it should fundamentally change the way services are designed and will have resource implications including taking time.

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[3] Citizen Engagement - Digital Healthcare Scotland (digihealthcare.scot)

- Distinct types of engagement will be deployed depending on the specific purpose as summarised (Appendix 2).

2.5 Assumptions and constraints around engagement

2.4.1 Assumptions

- A service has a higher chance of being good for the people who use it if decisions about how the service and its associated products work take people – their needs and their behaviour – into account.

- The process considered to be best practice to deliver service that people want and will use is user-centred design.

- There will be a commitment to using a range of engagement approaches to test out understanding and uptake across the general population.

- There will be support and collaboration from partner organisations to share insights and resources (if appropriate).

- Effective leadership, sponsorship and buy-in are vital to the successful embedding of the design and must be in place from the beginning and be visible across the end-to-end process.

2.4.2 Constraints

- Notwithstanding our commitment to being open to influence, we will need to think carefully about whether there are any elements where this might not be possible and explain why.

- Similarly, while it is our intention to do co-design with users and service delivery stakeholders (i.e., the teams who run the services) this may not always be practical. For instance, there may be some existing services which are considered in scope that have not been co-designed and going forward this may need some adjustments.

- The amount, type and intensity of the engagement will depend on the level of resources and time available including capability and capacity.

3 THE WHAT: will we engage our stakeholders on

- The strategic direction as set out by the Scottish Government (section one) together with outputs from initial discussions and ongoing engagement (externally and internally) and existing user insights shape the content and priorities on what we need to engage our stakeholders.

- Early discussions with citizens highlighted specific requirements and the benefits of user-centred design to ensure accessibility, security and addressing multiple logins and having to repeat information.

- Emerging themes based on a Thematic analysis for a Vision Workshop held in January 2022 are provided (Appendix 3).

- Discussions with strategic partners revealed the need to be clearer on the scope and distinction between the App and the wider Digital Front Door; and the balance between 'Once for Scotland' versus some local flexibility and will include technical architecture.

- Therefore, starting points and deployment will be a balance between priorities including responding to dependencies, pressures, opportunities, the state of readiness of service providers and willingness to participate. Any testing and piloting will be initially narrow in scope and aligned to a particular service within a local/regional area delivered through a continuous quality improvement and co-design approach.

- Other broad themes emerging from engagement to date are summarised (Box 5).

Box 5 | Themes emerging from engagement in 2022

- Being able to clearly describe the **problem to be addressed and the potential benefits** for service users and providers.
- How any new service/application will fit into people's lives, how it will be valuable, what would make people use it, functionality, design and branding (service and product level).
- Process for agreeing on **scope and priorities and phasing** of different releases.
- Relationship with other programmes including **Digital Identity, Data Strategy for Health and Care and Information Governance.**
- Ongoing engagement and collaboration to ensure appropriate positioning and language regarding **National Care Service** including how Digital Front Door may support delivery.
- How can the Digital Front Door support the NHS **'recovery'** agenda?
- How the Digital Front Door might deliver some of the **wider service and inclusion considerations:** customer support, non-digital alternatives (telephone, paper and face-to-face) and onboarding[4].
- Further clarification is needed with our partners on **governance** including risk appetite and accountability across the end-to-end processes and assurance around compliance with standards.
- **Validation** of existing definitions of what a valuable experience looks like, and how the service will overcome any barriers to access.

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[4] The act or process of familiarizing the service user with new approaches such as accessing services via an App

4 THE WHO: Our users and other stakeholders

- The Digital Front Door has the potential to impact everyone in Scotland (and beyond, to a lesser extent). For this strategy, we have made a distinction between users and wider stakeholders. The rationale for this is that engagement approaches deployed will vary especially around our commitment to user-centred design.

- We will continue to use stakeholder mapping, based on insights and evidence to determine whose input to prioritise. This will be ongoing and iterative (Box 6).

Box 6| Five broad groupings of Stakeholders
1 Users (service users).
2 Strategic partners for service design and/or delivery.
3 Stakeholders who own components that Digital Front Door will be reliant on.
4 Stakeholders who have valuable opinions, influence, and insights including National and International bodies that have developed a similar App / Digital Front Door.
5 Citizens.

- We recognise that some of the third and independent sector landscape had been impacted on during Covid-19 and will be further challenged with 'cost of living crisis' including cost of heating. Therefore, stakeholder mapping will need to be ongoing and in close collaboration with partners including Health Improvement Scotland Community Engagement, Health and Social Care Alliance Scotland (including ALLIS – a Local Information System for Scotland), and local engagement contacts across partner organisations.

- To further target engagement, stakeholders have been spilt into 'categories'[5]. These are not set in stone and which organisations fit within each category is open to some interpretation. The categories are listed in alphabetical order (Box 7).

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[5] This is expanded on in Appendix 4

Box 7 | User and Stakeholder Categories
1 Citizens (public, carers, and their representatives).
2 Community services and social care sector including Independent Care sector[6].
3 Digital and Data.
4 Elected representatives and local authority officials.
5 Health and care professionals and their professional bodies (including regulatory bodies and trade unions).
6 Housing sector.
7 Media (Broadcast, print and social).
8 NHS Scotland territorial health boards (x14) and other national NHS organisations
9 Organisations working in digital academia, design, education sectors, improvement, Research, Development, and Innovation including academia.
10 Primary care.
11 Scottish Government including relevant roles, departments, policy, programmes and ministers
12 Suppliers and contractors.
13 Third sector bodies.
14 Users (service users).

- Categories will be further broken down by profiles and sub-profiles to reflect the range of 'hierarchies' and roles within each organisation. While some of the engagement will be generic across the lifetime of the Programme other activities will be specific to the scope of each release.

- An assessment of influence and interest will be ongoing. It is important to acknowledge that there is an element of subjectivity and therefore interest and influence should not be static; engagement activities should be seeking to impact both interest and influence from differing perspectives. This will be subject to ongoing review and refinement (Appendices 4a, 4b and 4c).

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[6] Early engagement and review of various reports, discussions, and stakeholder interviews have highlighted the need to have a special emphasis on social care stakeholders including third and independent sector with a clear and purposeful intent to strike an appropriate balance across social care and health

5 THE PLAN: Developing and delivering user and stakeholder engagement

1   A User and Stakeholder Engagement Plan has been drafted to reflect initial priorities and will be subject to ongoing development and review.

Users and Stakeholder Engagement Milestones
Summary timeline | Q1 (2022/23) to   Q2 (2023/24)

Version 0.2,   24 Oct 2022

Notes
- There will need to be an ongoing engagement exercise
- Develop and maintain a stakeholder database
- Appoint or commission co - design capability and capacity
- What is required regarding communications and who is leading?
- An EQIA will need to be co produced
- National engagement / consultation exercise at some point:?
- Understand overlap and resources across Digital Front Door, Data Strategy, and Information Governance

Jul-Sep 22/23
- Promote digital insights grants
- Design considerations events
- Preparatory work for Digital Panels
- High-level stakeholder mapping
- Expression of interest Citizen Panel

Jan-Mar 22/23
- Forward Plan 23/24
- Communications strategy and plan
- Digital Panels (Ongoing)
- Approve and publish EQIA
- Understand user insights (ongoing)
- Design Engagement Plan for Release 1 (this might be = public engagement)

Jul-Sep 23/24
- Report on outcomes from Digital panels
- Report on outcomes digital insights grants
- Forward Plan

| Q1 2022-3 | Q2 2022-3 | Q3 2022-3 | Q4 2022-3 | Q1 2022-3 | Q2 2023-4 | Q3 2023-4 |

START

Apr-Jun 22/23 (*)
- Engagement sprints with strategic partners so support Business Case
- Stakeholder Interviews
- Scope and Fund Digital Panels
- Design -consideration events
- Terms of Reference Equalities and Inclusion
- Visioning Events
- Overarching Engagement Strategy for Digital Health and Care

(*) Includes activities from January to March 2022
.

Oct-Dec 22/23
- Award digital insight grants
- Stakeholder mapping for initial release
- Launch Digital Panels
- Commission Digital Insights projects or user research
- Review findings from Data Strategy engagement
- Start EQIA Process
- Appoint or commission co - design capability and capacity
- Agree approach to communications and marketing

Apr-Jun 23/24
- Digital Panels (Ongoing)
- Implement Engagement Plan for Release

Oct-Dec 23/24
- etc

6 Governance and resources

6.1 Governance

- Strategic delivery of the User and Engagement Stakeholder Strategy and Plan work will be overseen by the Senior Responsible Officer coordinated by the Core team. The work will be accountable to the Programme Board and report to other groups and committees as set out in the Programme Board Terms of Reference. Further work is required to agree appropriate assurance levels around compliance with standards.

  - Further discussions are required to agree on how the Board can be assured that agreed standards have been met. This will be referenced in the Programmes Board's Terms of Reference. The implications (cost, time and capability) of compliance with different standards need to be understood.

- The strategic approach will be reviewed annually with updates on the implementation of the action plan provided at each board meeting and other governance structures as appropriate.

- Process measures (when did we engage, what about, who with, how and with what frequency) will be assessed. Critically, however, there will need to be an assessment of impacts, such as what changed because of engagement and the influence over uptake. This is not without challenges and needs to consider accountability across the end-to-end processes with service delivery partners.

6.2 Resources

- Support for strategic engagement (development of strategy, plan, stakeholder mapping and designing engagement) is currently being provided by the Engagement Manager who supports the Technology Enabled Care Team across several portfolios for three days per week.

- To deliver the Users and Stakeholder Engagement Strategy and Plan will require some dedicated resources including co-design expertise and capacity, funding digital panels and supporting wider citizen engagement.

  - The resources required for any dedicated support or commissioned activities will be proposed by the Senior Responsible Officer and approved by the Executive Group within the approved budget for the Programme.

- Additional work is required to determine whether there is sufficient capacity including when formal public consultation is required. This is likely to require some dedicated resources albeit for a limited period.

- Funding to support the two Digital Panels has been secured for 2022/23. It is likely that the panels will need to be in existence for the duration of the programme and will need to be funded.

- Nine Discovery and Enabler Grants to facilitate engagement with a focus on groups with protected characteristics have been secured for 2022/23. These were awarded in October 2022.

- There is also a need to develop a communication and marketing strategy and plan to promote the work of the Digital Front Door, facilitate dialogue and promote engagement opportunities. This requires further work to assess any resource requirements and develop the key messages.

Appendices

Appendix 1 | Methodology: developing the engagement strategy

Definitions

- Initial discussions have highlighted the need to be specific over terms such as 'user', 'stakeholder' and 'engagement;' and to understand the distinct types of engagement such as co-production, co-design and consultation. To provide clarity and consistency a suite of definitions has been prepared.

- Best practice in terms of engagement has also been reviewed and highlights that different approaches will be relevant for different purposes and stages in the development of the front door.

Gathering insights

- Understanding user needs and requirements is a central tenet of the strategy. Some insights will be collected directly by the Programme Team while others will be commissioned through independent partners. Using external organisations will assist with reach, credibility, capacity, and expertise.

- There is also a considerable body of relevant work and where it is prudent to do so we will re-use insights from user research to inform our work on design and attitudes or barriers to change.

- Public engagement and co-design will be required throughout the duration of the programme. As the Digital Front Door is a new Policy area it will also include a period of formal public consultation.

Users and citizens

- From a service user and citizen perspective, dialogue is ongoing with User Groups. Digital Panels facilitated through Health and Social Care Alliance Scotland and Young Scot have been established, as one component of our Users and Engagement Strategy.

- Investment is also proposed to ensure there is the capacity and capability to lead, coordinate and conduct public engagement and user research and design. This might be by appointment or secondment of people to the Programme Management Office, procuring expertise or both. Initial discussions are also underway to understand any synergies with work carried out by extensive work with Social Security Scotland and emerging work on developing the National Care Service.

- There is a commitment to carry out public engagement on the Digital Front Door. The work will determine the scope and timing of formal public consultation. It will build on some of the insights from the National Public Consultation on the Data Strategy for Health and Care.[7]

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[7] Data Strategy for health and social care - Scottish Government - Citizen Space (consult.gov.scot)

Leaders, Service providers

- Early activities have included consolidating related findings in Scotland and beyond, including work over an 18-month period by NESTA on Data Dialogues[8], and ongoing engagement with strategic partners and citizens around use and views on digital approaches.

- More generally work is being progressed through the Scottish Government and NHS Education for Scotland linked to leadership and workforce programme to help raise the importance of digital majority and digital skills.

- Other preparatory work includes an exercise underway on Landscape Mapping across health boards which are being led by Digital Health and Care Innovation Centre.

- Pre-Programme activities such as visioning events, review of existing insights and research and an understanding of critical dependencies also inform the development of the strategy and our strategic approach. This was directed by Steering Group made up of a wide range of strategic partners.

- To further develop the Engagement Strategy and Action Plan key strategic partners were interviewed about their views on the emerging vision, scope, opportunities for collaboration, starting points, and priorities for the Front Door.

- Discussions on the draft strategy have also taken place with Health Improvement Scotland, and Health and Social Care Alliance Scotland. Digital Identity Public Engagement Programme.

Stakeholder maps

- Reflecting on insights, to better target our engagement, stakeholders will be mapped on a grid showing their known or predicted level of interest and influence. Stakeholders will be broken down into 'profiles' and 'categories' and further described in the section. As the process develops different maps will be developed for key stakeholder groups, aligned to different releases and geographical areas.

Equalities and inclusion

- There is an established Equality and Inclusion Group who are participating in regular engagement sessions. The Programme will work with the Group and others to co-produce an Equalities Impact Assessment. This process and document will evolve using feedback from a range of engagement activities and any other research and evidence. This work is underway.

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[8] Data Dialogues | Nesta

Branding and communications

- The term 'Digital Front Door' is a working title and will change based on feedback. Products and services will have an identity that builds on recognised national brands without the need to create a product-specific identity.

- The communication elements relate to promoting the planned engagement activities and opportunities.

- A wider plan will need to be prepared to communicate more generally about the Digital Front Door including benefits and alternative options for accessing services.

- A Frequently Asked Question and answers document has been drafted and will be continually refreshed as the programme evolves and responds to feedback.

- More generally further work is required to develop a communications and marketing strategy and plan to promote the work of the Digital Front Door and facilitate dialogue and feedback.

Appendix 2 | Levels and distinct types of engagement

Type	Description	Range of activities and tools[9]
1 Empowerment	Authority or power given to someone to do something. The process of becoming stronger and more confident, especially in controlling one's life and claiming one's rights	
2 Co-production, Co-design and co-create	**Co**-**design** is an attempt to define a problem and then define a solution; **co**-**production** is the attempt to implement the proposed solution; co-creation is the process by which people do both.	Small face to face e**vents and** workshops. On-line using ??
3 Collaboration	This is where we work together on common objectives in the manner of co-production but retain all decision-making rights.	Equality and Inclusion Group?
4 Partnership	Analysing and addressing problems and implementing improvements together and with shared responsibilities.	Sharing insights and knowledge through virtual sessions, workshops and existing governance structures
5 Participation	There are many ways in which people might participate in health and care. Various mechanisms can be used to facilitate this and will very much depend on preferences and circumstances.	Digital Panels Citizen Panels
6 Involvement	Working directly with stakeholders to ensure that concerns and hopes are consistently understood and considered. This is usually more structured and linked to groups and forums. This process listens to stakeholder views and acts on them if possible. It might include involving people in designing proposals for change.	Engagement with existing structures and groups. Enabler and Discovery work

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[9] The range of activities and tools will be assessed to support each release and will form the basis of the supporting engagement plan.

7	Consultation	A targeted process to seek advice from subject matter experts or to test an idea or a proposal with a target audience to understand views and the potential impact on proposals. Formal consultation processes on proposals for major service change are governed by	A mixed approach utilising range of methods in accordance with statutory guidance.
8	Advocate	To enlist support for a specific effort where there is an imbalance or implication of power/influence affecting relationships, options, and preferences.	EQIA process
9	Dialogue	Initiate or respond in a two-way dialogue focused on mutual learning. Often the forerunner to moving into other types of engagement.	Existing structures Digital Panels Surveys 1:1; 1 to few
10	Informing	Providing stakeholders with balanced, accurate information. This is to assist in understanding problems, challenges opportunities and solutions. This might be through meetings and events but could be through other channels (media, newsletters, or online forums).	Range of approaches; digital and not digital; existing communication structures; national, local and social media

Monitor and sense check	Pay attention to the actions of stakeholders through an appropriate range of approaches through media scans and dialogue with other parties, individuals or partners who may have knowledge, experiences, or connections (personal or professional) of positions, history, and motivations.	Well-managed stakeholder database with active and ongoing contacts. Range of approaches; digital and not digital; existing communication structures; national, local and social media

Appendix 3 | Digital Front Door Vision: Emerging themes

The Digital Front Door is a service available across web and mobile app which allows people to access a range of difference services across health and care.
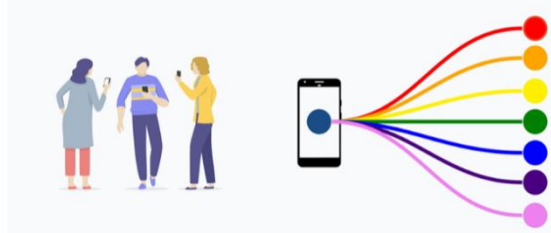
The front door is a 'service of services,' a single point of entry from where you get started on getting done what you need to get done.

While some of the services you can access via the front door will involve viewing and interacting with specific elements of your health and care data, the front door is primarily about access to and usage of services, with an emphasis on those you can complete by yourself.

By the end of 2025, the front door will be in active usage across Scotland and in ongoing development, with a focus on improving the user experience and new services becoming available on a regular basis. The work and priorities will be transparent to the public and alongside good user support, people will have a range of ways to be involved in sharing their views and insights into making it better for everyone.

People can do a range of things via the front door. These are likely to include but are not limited to requesting access to a service; booking; communication; understanding what to do when an issue arises; viewing, making sense of, adding to, and sharing information about their health and care.
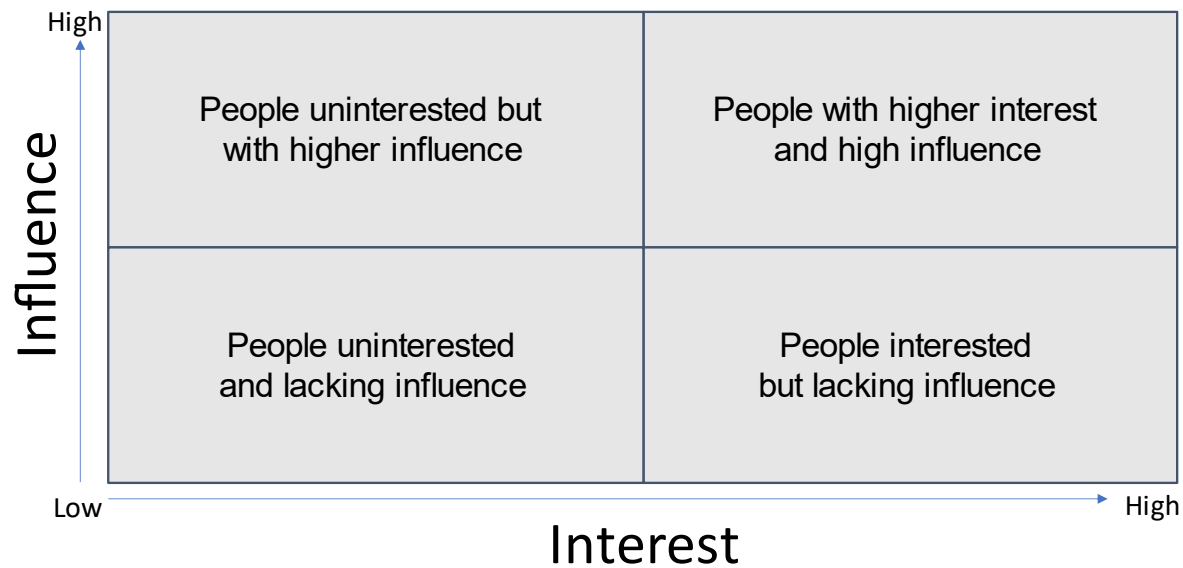
The front door represents a new way of interacting with health and care services and will result in new behaviours, and new demands in some parts of the system and fewer demands on others. As with all public services, there are decisions which had to be made balancing the demands of people, professionals, the wider system, and available resources but understanding accessibility in all its forms and ensuring existing inequalities were not exacerbated nor new ones created has been a key theme of the work.

This 'service of services' is not possible without deep collaboration with teams running health and care services. Those with existing national digital services were the first to become available to the public via the front door with clear processes and support for local digital services and non-digital services on how they could become 'front-door ready.'

While much of what is available through the front door to people is commonplace in other contexts and industries, the reality is that there is a lot of complexity in delivering good and future-proofed national public digital services at scale. As such, the front door work balances its ambition with pragmatic delivery and places emphasis on clarity, transparency, and collaboration.

Appendix 4a| Stakeholder grid for mapping profiles

Stakeholders are allocated to 'quartiles' (below) based on their degree of interest and influence. This may be based on evidence or assumptions at a point in time.

Influence High	People uninterested but with higher influence	People with higher interest and high influence
	People uninterested and lacking influence	People interested but lacking influence

Low ————————————————→ High

Interest

Appendix 4b | Example of Stakeholder grid for mapping profiles

(b) High Power – Low Interest (Keep Satisfied)	(a) High Power – High Interest (Manage Closely)
- *Which of your stakeholders have high power but low interest?* *These might be professional and their representatives who do not fully support the move to digital delivery of services*	- *Which of your stakeholders have high power and high interest?* *Cabinet Secretary around pace, positioning, profile, and funding for digital* *Chief Executives around scope, pace and priorities*
(d) Low Power – Low Interest (Monitor)	**(c) Low Power – High Interest (Keep Informed)**
- *Which of your stakeholders have low power and low interest?* *Citizens who have no interest in accessing digital services*	- *Which of your stakeholders have high interest but low power?* *Citizens who experience digital exclusion in all guises* *Citizens who wish for the option of digital services but are not offered them*

Appendix 4c | Template for strategic mapping of stakeholders

Group	Job Title	Level of influence ie Very High / High / Medium /Low / Very Low)	Level of interest ie Very High / High / Medium /Low / Very Low	Key Interests and Issues (What key interests and issues does this stakeholder currently have?)	Strategic priorities (Priorities and how often will you engage)	Topics for engagement (Strategic, digital, general information, inclusion, accessibility, recovery scope)	Level and Types of Engagement Empowerment Co-production, co-design and co-create Collaboration Partnership Participation Involvement Consult Dialogue Informing Advocate Monitor Sense check)

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