



# Designing digital skills interventions for older people

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Good Things  
Foundation

# Contents

<b>Chapter 1</b> Executive Summary	3
<b>Chapter 2</b> Policy Context	6
<b>Chapter 3</b> Pathfinder Context	9
<b>Chapter 4</b> Insights from the Sunderland Pathfinder	11
<b>Chapter 5</b> Insights from the Thanet Pathfinder	19
<b>Chapter 6</b> Conclusion	20
<b>Chapter 7</b> Useful Resources	21

## Chapter 1

# Executive Summary

Digital inclusion for health and wellbeing can become more important as we get older.

Older people with long-term conditions or who are going through life transitions (such as bereavement, the onset of illness or impairment, increased caring responsibilities) may benefit from easier access to online health and care support. The internet and digital technologies can play a valuable role in enabling older and disabled people to get more out of life, keep in touch with friends and family, and make life easier.

Although the generation gap is narrowing, internet use is still lowest among the oldest age groups. Over 65s – and particularly over 75s – are far more likely to be ‘offline’ (either never online or not recently online) in comparison to other age groups. Almost half of those over the age of 75 have never been online, and almost a fifth of people with a disability have never been online. Digital exclusion<sup>1</sup> is strongly correlated with low household income, living in social housing, and lower levels of educational attainment.<sup>2</sup>

Despite this, there is currently no national provision in England specifically to support older people’s digital inclusion and ensure equal access to online health services.

This report brings together recommendations for designing digital skills interventions for older people with care and support needs. It draws on insights from two pathfinders, which were funded by NHS Digital and supported by Good Things Foundation as part of the Widening Digital Participation programme. The pathfinders generated insights on:

- Small system-level changes that can embed digital inclusion in social care support.
- Factors influencing digital inclusion within social housing schemes.

The recommendations also build on previous work in this area, including practice-oriented research funded by the Centre for Ageing Better<sup>3</sup> and TalkTalk<sup>4</sup>, and an external evaluation of the Thanet pathfinder by the University of Sussex<sup>5</sup>. A list of useful resources are provided at the end of this report and on the Good Things Foundation’s Digital Health Lab website<sup>6</sup>.

<sup>1</sup>ONS (2019), Adult Internet Users.

<sup>2</sup>Good Things Foundation, The Real Digital Divide, 2017. <https://www.goodthingsfoundation.org/research-publications/real-digital-divide>

<sup>3</sup>Good Things Foundation and the Centre for Ageing Better, Your Guide to Helping Older People Use the Internet, 2019. [https://www.onlinecentresnetwork.org/sites/default/files/a6\\_your\\_guide\\_to\\_helping\\_older\\_people\\_use\\_the\\_internet.pdf](https://www.onlinecentresnetwork.org/sites/default/files/a6_your_guide_to_helping_older_people_use_the_internet.pdf)

<sup>4</sup>Good Things Foundation and TalkTalk: Doing Digital Exclusion with Older People, 2018. <https://www.onlinecentresnetwork.org/resource/doing-digital-inclusion-most-excluded-older-people>.

<sup>5</sup>Hiteva, R & Ates, A (2019), “The future is digital. We might as well learn it now”: Digital Inclusion Pilot Report, University of Sussex (unpublished report shared with the authors).

<sup>6</sup>Good Things Foundation (2019), Digital Health Lab. <https://digital-health-lab.org/>

## Recommendations

- **Embed digital inclusion into care planning and pathways**
  - Any personalised needs assessment for care and support in later life should include digital inclusion, if it is to be genuinely needs-led and holistic. A simple, scalable step is to include questions about digital (internet access, use, confidence) as part of an initial assessment of individual care and support needs. In Sunderland, this was done by local authority social care teams.
  - Establish 'warm' referral routes to local, trusted providers of digital inclusion. This is a practical way to embed digital inclusion into health and care partnerships (e.g. Integrated Care Systems, Sustainability and Transformation Partnerships). In Sunderland, this enabled staff to feel confident about integrating digital needs into assessing support needs; and also makes the most of community assets.
- **Recognise the social aspect of group sessions**
  - The social aspect of digital inclusion classes can be equally or more important to older people, helping to reduce loneliness. In Sunderland, outreach classes were held in community settings in more deprived areas to reduce travel barriers that can prevent participation. Home visits were offered where this was more appropriate. In Thanet, digital inclusion classes brought residents together from across different housing schemes, and this was valued.
- **Harness the power of peer mentors**
  - Peer-to-peer digital inclusion can be very effective, if the commitment to supporting and sustaining those involved is in place. In Thanet, the housing association set up a peer support network, with older people as peer mentors (digital champions). Patience and relatability of peer mentors were valued, contrasting favourably to past experiences of being 'done to'.
- **Respond to anxieties and access needs**
  - Digital champions require ongoing support to help them help others. In Thanet, (where many people had physical disabilities and some had learning difficulties), people valued support with managing their anxieties about using the internet, learning to stay safe online, and finding the right devices and assistive tools.
- **Providers of health, housing and care can remove more barriers**
  - Awareness is still limited about online health services, including the NHS App. Online health and care services need to be designed with and for people with limited digital skills. In Thanet, a few older people used the NHS App; most had not heard of it. Some used WaitLess: a regional App which gives waiting times for A&E.
  - Housing associations have a growing and important role in enabling digital inclusion of older people with care and support needs. In Thanet, older people felt their housing association could: (1) improve internet access and Wifi in communal areas and individual apartments; (2) improve their own website, especially log-ins; (3) find ways to bring down the costs of devices and data packages for residents.



## Chapter 2

# Policy context

The population of people over 65 is growing in the UK. There are almost 12 million people aged 65 and over in the UK, with 3.2 million aged 80 and over, and 1.6 million aged 85 and over.<sup>7</sup> According to the International Longevity Centre, by 2030 there will be 20 million older people living in the UK.<sup>8</sup>

The Centre for Ageing Better's 2019 report on 'The State of Ageing' reminds that although "public health, nutrition and medical science have given us the gift of longevity, so far this century we have failed to respond with sufficiently radical action to ensure everyone enjoys these extra years".<sup>9</sup> For many of us, later life brings reductions in independence and mobility; "more than half of people over 65 have at least two chronic health conditions, and many have health problems that affect their daily lives".<sup>10</sup>

The NHS Long Term Plan sets out bold ambitions for mainstreaming digitally-enabled health services, extending social prescribing, and integrating health, community health and care.<sup>12</sup> Such ambitions are echoed in some local transformation plans, like Sunderland Clinical Commissioning Group's [local digital roadmap](#).<sup>13</sup> However, these ambitions are set against a worrying picture of digital exclusion in the UK.<sup>14</sup>

The challenge is how to realise these ambitions, nationally and locally, and across both health and social care systems.

<sup>7</sup>Office for National Statistics, (2017), Estimates of the population for the UK, England and Wales, Scotland and Northern Ireland, mid-2017 based.

<sup>8</sup><https://ilcuk.org.uk/>

<sup>9</sup><https://www.ageing-better.org.uk/sites/default/files/2019-04/The-State-of-Ageing-in-2019.pdf>, p.4.

<sup>10</sup>The State of Ageing in 2019, p.11.

<sup>11</sup>UK Industrial Strategy, p.53. [https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/664563/industrial-strategy-white-paper-web-ready-version.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/664563/industrial-strategy-white-paper-web-ready-version.pdf).

<sup>12</sup>NHS Long Term Plan: <https://www.longtermplan.nhs.uk/>

<sup>13</sup>Sunderland CCG, Local Digital Roadmap.

<sup>14</sup>Digital Nation 2019: <https://www.goodthingsfoundation.org/research-publications/digital-nation-2019>

## Chapter 3

# Pathfinder Context

### The Widening Digital Participation Programme

Widening Digital Participation is a three-year partnership between NHS Digital and Good Things Foundation. The programme aims to ensure more people have the skills, motivation and means to access relevant health information and services online. In line with recommendations from the National Information Board, the programme focuses on those who are socially excluded and most likely to experience health inequalities.

Widening Digital Participation works through local consortia - including Clinical Commissioning Groups, local authorities, and community groups - to find points in health and care systems and processes which can be improved through digital technology interventions. Each consortium is known as a 'pathfinder'. Pathfinders have devised a range of approaches, from improving the digital skills of citizens, to communications, local partnerships and staff training. Information about other pathfinders in the programme can be found on the Digital Health Lab website.<sup>15</sup>

### The Challenge

How to improve the ways in which older people use digital technologies for health and wellbeing.

### Designing Solutions

Through the programme, Good Things Foundation used service design methodologies to support two pilot projects to improve older people's experience of learning how to use digital for health.

In Sunderland, Age UK Sunderland provided free digital skills classes to older people in deprived locations across the borough (community venues, sometimes in people's homes). The value of this skills support offer was recognised by Sunderland City Council's Community Therapy service, part of social care at Sunderland local authority. The social care teams recognised the opportunity to build support for digital skills at the start of a person's care journey, as digital technologies can help people maintain independence and reduce isolation.

**84 older people with care and support needs received in-depth support** to improve their digital skills, confidence and motivation. **Around 600 people were reached** through local communication and engagement activities about digital inclusion and health.

**71 older people with care and support needs received in-depth support** to improve their digital skills, confidence and motivation. **Around 5,000 people were reached** through communications and engagement activities about digital inclusion and health.

In Thanet, Orbit Housing Association designed a community-based project to build the digital skills of disabled older people living in supported accommodation. They set up a thriving peer support network which reached almost 50% of residents. Peer mentors (trained to be digital champions) enabled people to test and take-up innovative technologies, including voice activation and Apps, which helped older and disabled residents to use the internet in ways which worked best for them.

<sup>15</sup>Good Things Foundation (2019), Digital Health Lab. <https://digital-health-lab.org/>

## Chapter 4

# Insights from the Sunderland Pathfinder

### Age UK Sunderland and Community Therapy Services

This pathfinder funded Sunderland Age UK to improve the digital skills of older people in the city. Funding enabled Age UK to develop a digital skills training programme with significant reach across the city, extending to rural and disadvantaged areas. The intervention model was to engage people where they are, and provide needs-led learning as a route to older people becoming empowered to use digital to improve their lives, including for health and wellbeing. Where this pathfinder was innovative was in strengthening the local infrastructure: identifying practical ways to integrate digital inclusion into social care planning and pathways - engaging people at a key contact point.

#### Engage people where they are

In Sunderland, Age UK developed a pilot intervention which offered digital skills training to older people across the borough. They offered:

- Regular classes at five locations across the borough. These were held at Age UK and other community spaces, including libraries, Mind, and a dementia service.
- Home visits for people who wanted to access the service, but were unable to travel to community locations.

This enhanced offer provided the impetus for the Community Therapy Services team to start identifying and referring clients with low digital skills to Age UK. This led to further measures, including:

- Training 57 staff to be advocates for digital skills, to understand how to talk to older service users about the benefits of digital technology, and assess their digital skills. Digital champions ranged from customer services staff to occupational therapists.
- Integrating digital skills questions into assessments for care and support needs during a home visit. Assessments already covered issues which affect people's ability to be independent, including mobility and social networks. Questions on digital access and use were added. People with barriers to using digital were referred to Age UK for skills support.

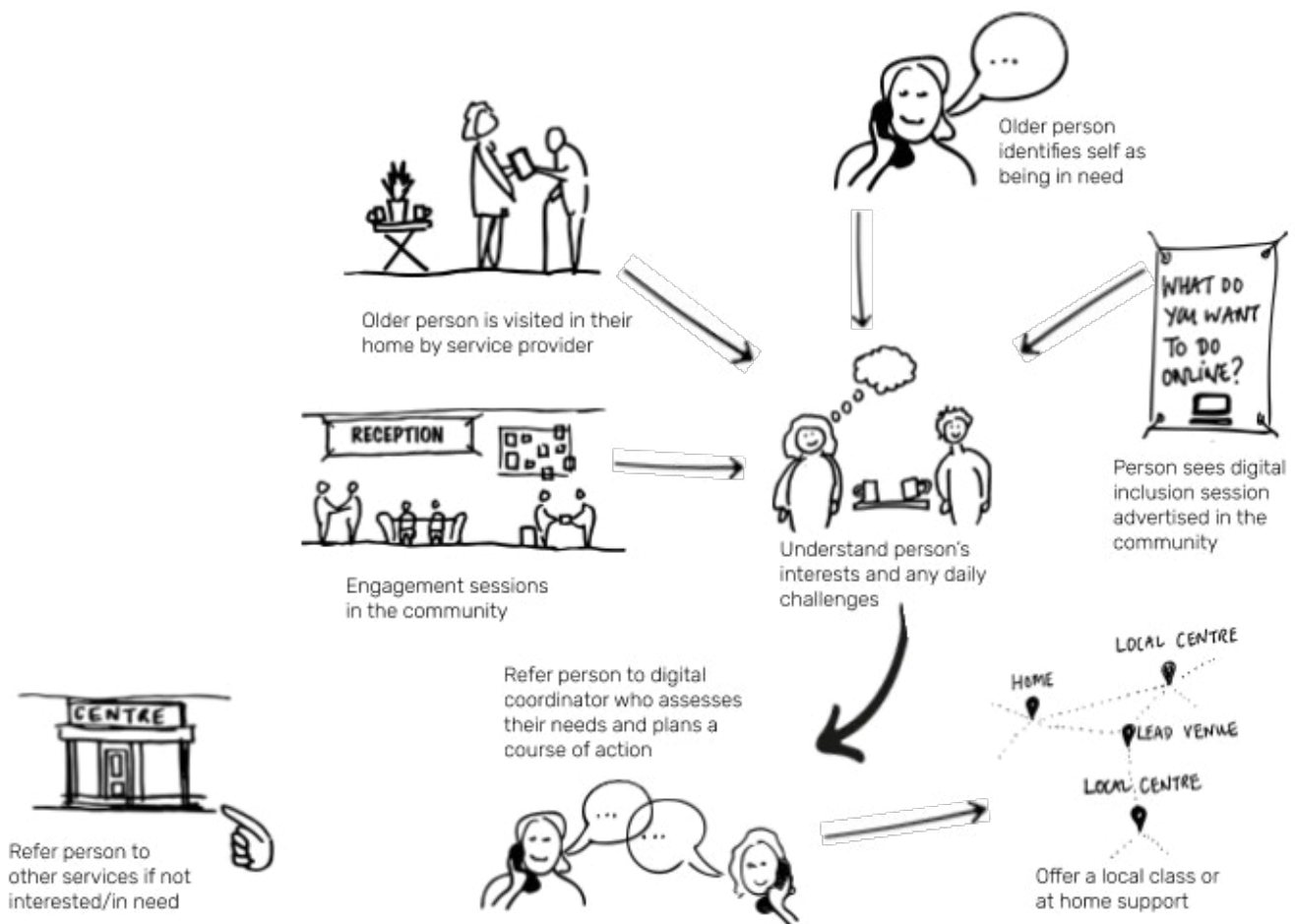
Users found out about digital skills classes in a number of ways, through the Community Therapy Service, through advertising at outreach locations, through telephone enquiries made to Age UK and in engagement sessions run by Age UK.

#### Needs led learning

Digital skills classes were led by a coordinator, employed by Age UK. but over time he recruited a number of digital champions who regularly volunteer with Age UK. This improved his ability to provide ongoing 1-1 support for people who required home visits.

Age UK developed a 13 week syllabus which introduced users to digital skills in the context of health. By supporting small groups or offering 1-1 help, the sessions built in enough flexibility to follow the interest and goals of learners.





Embedding digital inclusion into local health and social care pathways is not easy. Evidence on health and care integration more generally identifies funding and workforce challenges as barriers to systems change.<sup>16</sup> Where integration has been successful, local relationships and shared purpose have been found to be pivotal.<sup>17</sup> This is evident in the Sunderland pathfinder. Partners recognised the benefits of digital skills for independent living, recovery and health. They tested new ways to strengthen the link between social care and digital skills provision, and trained their teams to deliver this.<sup>18</sup> In so doing, social care services also made better use of community assets. Establishing warm referral routes also enabled social care staff to be more confident in introducing older people to how digital technology might help them get more out of later life.

“ It’s about the first point of contact, when they’re just starting to experience issues that affect their independence, and helping them to help themselves to stay connected to their community, to start plugging in to internet resources that are out there, and to everything Age UK have in their digital offer” **(Service Manager)**

<sup>16</sup>House of Commons Health and Social Care Committee (2018), Integrated Care: organisations, partnerships and systems. <https://publications.parliament.uk/pa/cm201719/cmselect/cmhealth/650/650.pdf>

<sup>17</sup>House of Commons Health and Social Care Committee (2018), Integrated Care: organisations, partnerships and systems. <https://publications.parliament.uk/pa/cm201719/cmselect/cmhealth/650/650.pdf>

<sup>18</sup>It was beyond the scope of this pathfinder to measure the impacts of the digital inclusion provision.

## Things to remember

### **Partnership work between social care services and community-based providers of digital skills support can work.**

Community digital skills infrastructure needs to be in place for this to happen, and resourced for this to be sustained. Being able to refer to trusted providers of digital skills support gives local health and care staff more confidence to talk about digital inclusion with older service users. It also offers a practical way to embed digital inclusion into integrated care systems, or sustainability and transformation partnerships.

### **Engage people at the point when they need help.**

Provide help when people feel the motivation to learn about digital technology. The pilot in Sunderland demonstrated the possibilities for aligning the start of a social care journey with the offer of digital skills support. Life changes can impact older people's wellbeing and social resources. At times like these, when life isn't the same as it was, the internet can be an important way to maintain independence.

### **Small system changes can have an impact.**

The pilot in Sunderland found that a simple, scalable step is to include questions about digital technologies (internet access, use and digital confidence) as part of the initial assessment of individual care and support needs.

### **Older learners need classes to be accessible and flexible.**

Ensure community digital skills classes are flexible and accessible to older people. This may mean providing outreach or home visits to remove travel and other barriers to participation.



## Margaret's story

Margaret is 86 years old and joined the digital inclusion sessions at Age UK because she required support with using her laptop. It was purchased by her son on her behalf. She had had it for a year, but had not managed to use it.

First, the Age UK Digital Inclusion Officer, Mike, resolved a few technical issues for Margaret - slow internet speeds and laptop updates. After supporting Margaret for the first few sessions, Mike introduced Margaret to a volunteer Digital Champion, Janet.

Janet is 72 and has volunteered with Age UK for 10 years on various projects. The pairing with Margaret was very successful, however during the learning, Margaret had a spell of several weeks where she couldn't use the laptop (due to an eye infection, and then a fall when visiting a friend).

Things improved and Margaret completed her sessions at home.

Margaret can now use her laptop independently. She reads the local Sunderland Echo newspaper online, and can also keep in touch with her son via email.

Margaret got interested in and learnt to do online shopping, as well as learning about the importance of keeping passwords safe and being aware of bogus telephone calls and emails.

“ Modules on Learn My Way helped build my confidence to use the internet on my own and health websites were very useful. I used NHS.uk to look up my medication as I was concerned about some side effects of one of my new medications...

“ Although I can see how this [registering for GP appointments online] is useful for some people, I prefer to phone or visit my GP or chemist.”

As Margaret lives on her own, Mike could see that she would miss Janet's weekly visits so they encouraged Margaret to sign up to other activities with Age UK Sunderland when her digital skills sessions came to an end.

She found the one to one support at home very helpful, and is pleased she now has the confidence to use her laptop and carry on learning on her own, with a bit more practice.



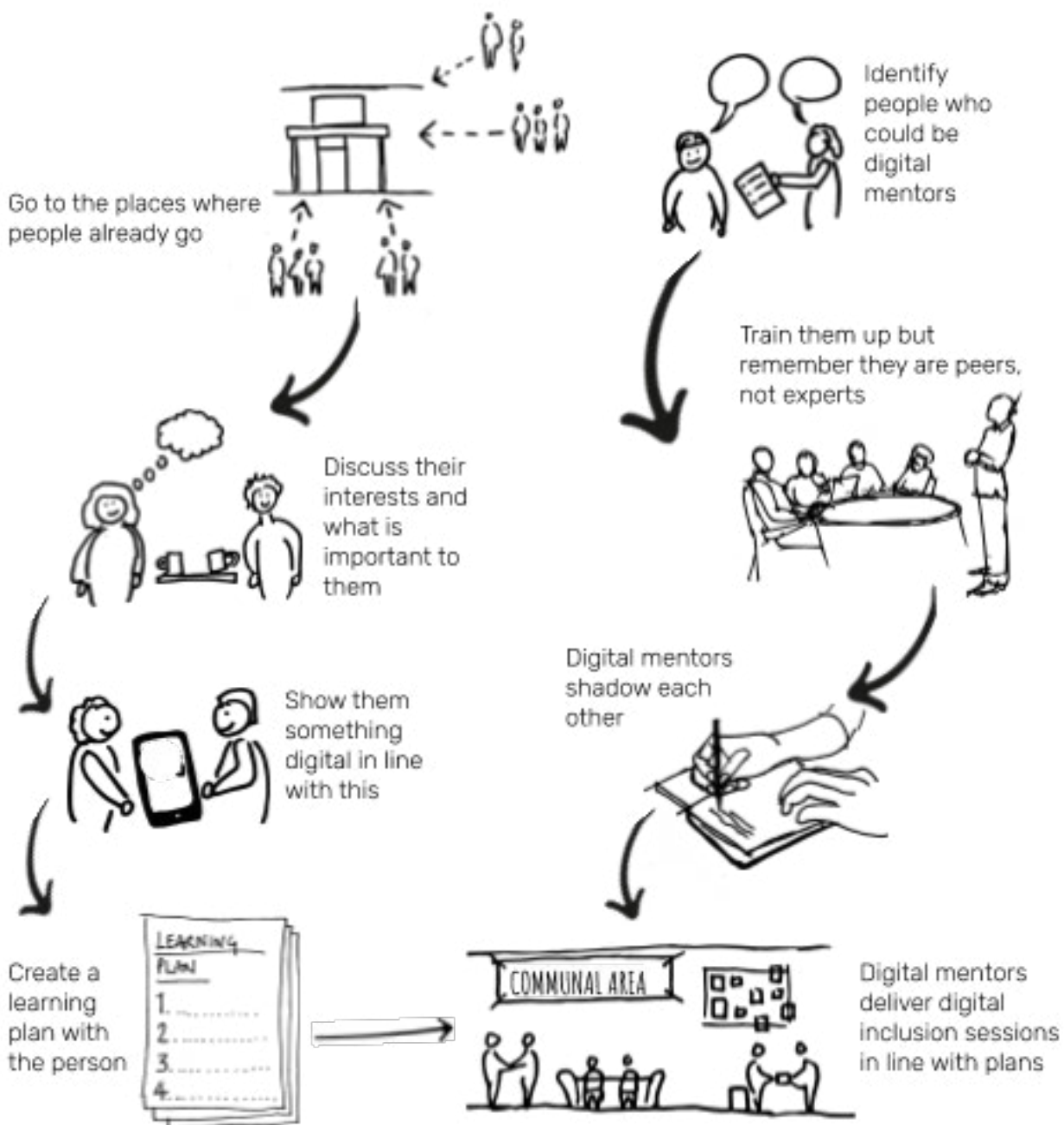


## Chapter 5

# Insights from the Thanet Pathfinder

### Orbit Housing Association, Thanet

The pilot in Thanet used a peer-led model to provide basic digital skills workshops to people in supported living schemes. This pilot was run by Orbit Housing, who aimed to develop a sustainable digital skills intervention to support improved use of technology by their residents. This project was assessed by researchers from Sussex University, whose findings form the basis of this section.<sup>19</sup>



<sup>19</sup>Hiteva, R & Ates, A (2019). "The future is digital. We might as well learn it now": Digital Inclusion Pilot Report. University of Sussex (unpublished report shared with the authors).

The intervention was coordinated by a full-time employee of Orbit Housing, whose role was enabled through grant funding of the programme. As digital skills coordinator, he developed the curriculum, organised workshops, ran workshops, and supported 19 older people to be digital champions (peer mentors). These digital champions then supported older people living in Orbit housing schemes, both through structured workshops and unstructured help outside workshops. Key elements of the intervention model were to engage people where they are, and to provide digital inclusion learning which responds to people's personal interests and needs. In this model, the needs-led learning was provided by trained digital champions - who, importantly, were themselves older residents in the scheme (peer mentors).

### Engage people where they are

Over a year, the pilot established fortnightly workshops across 7 assisted living schemes, providing in-depth training to 84 residents with low digital skills. The workshops took place in communal areas in each assisted living scheme. This made them very easy to access for people living in those schemes.

### Needs-led learning

Older residents were recruited, trained and supported to be digital champions. This was a key factor in the success of the pilot. Because digital champions live in the same housing schemes as the people they support, they provided continuity between sessions, engaged with participants outside workshops, and reminded participants to attend sessions.

The external evaluators found that digital champions provided an important role in translating the workshop curriculum to participants - enabling it to be needs-led (relevant and responsive to people's personal interests). They trialled the curriculum, familiarising themselves with the websites and services in question. This meant they were able to provide first hand experience to other participants. This was particularly helpful in relation to accessibility issues.

A high proportion of digital champions and workshop attendees were disabled people (72 of 84 participants identified themselves as disabled - mainly physical disabilities, some had learning difficulties). Accessibility was therefore a priority, both in relation to:

- Accessibility features of websites and assistive technology for disabled people
- Unlocking the benefits of the internet to save time and travel (e.g. online shopping).

Digital aids and accessories became a big part of the workshops and the experience of using the internet. Some described regularly using the Alexa 'ask' option and talk apps to complete emails and spell check. This was especially important for those who found typing difficult. Alexa was regularly used for reading books, shopping and as an alarm. This high-usage reflects the success of digital champions in demonstrating technologies which they used in their everyday lives.

## Things to remember

### **Peer-led digital inclusion worked in Thanet.**

The patience and relatability of mentors was valued. A co-ordinator (employed by the housing association) trained and supported the peer mentors. This played an important role in supporting and legitimising them, so they felt able to take the lead.

### **Recognise the social aspect.**

Older people valued coming together in and across different housing schemes. This social aspect - alongside the use of peers mentors- helped to generate longer-term sustainability of the group, and led to extending its reach into the wider community.

### **Make the internet work for people.**

Digital champions were instrumental in shaping sessions to be more interesting and useful to other participants. They did this by prioritising the things that would improve people's access and day-to-day experience of the internet. For example, sharing digital health resources that they'd found useful, such as a local App giving A&E waiting times.<sup>20</sup>

### **Co-design online services with people with low digital skills.**

Social housing schemes benefit from residents being capable internet users. However, older residents were critical of poorly-designed online services. This is important feedback for housing associations and other providers.

### **Pay attention to disability and diversity.**

Many older disabled people had struggled to use the internet without accessibility features. Digital champions brought accessibility to the fore in sessions. Older people wanted to experiment with tools and devices (such as voice activation, tablet pens) to find what suited them best.

### **Provide good and affordable internet access.**

This is a prerequisite for developing online skills. New (or returning) older internet users can feel nervous, and are likely to lose interest if it is hard to get on the internet, or if they experience technical failures (such as Wifi dropping). Housing providers can provide internet as standard in assisted living schemes - in communal and individual areas.

<sup>20</sup>WaitLess App: <https://www.nhs.uk/apps-library/waitless/>.

## Roy's story

Roy, who is retired, started with virtually no confidence in using the internet. Roy took part in digital skills classes, offered by Digital Champions at Orbit housing. Through this, he covered the basics and was motivated to keep on developing his digital skills.

Roy was supported to access a range of digital tools, some are specific to his health and others make his life easier in other ways.

“ I've found two health apps - one is a patient access app which I've joined, which means I can manage my medication which I need every month, and manage my appointments online. My medical records, I currently don't have access to them, but I will get them. That way I can go anywhere and my medical records are easily accessible for anyone who needs to see them, such as GPs and other hospitals.

“ I even have an app that tells me how many people are in the waiting room of each hospital in the area. I used it on Boxing Day, as I needed to go to A&E. There was one hospital with 34 people waiting and another hospital with only 1. So I went there and went straight through to see the doctor.”

Roy's not just managing his physical health more effectively with digital, but his financial health too.

“ I am also able to do my banking online too. I can't use the branches any more, so I do everything online and my bank gives me 5% interest - so it's actually quite good for me.”

Roy is also enjoying the social aspect that comes from the classes and the skills learned there.

“ I can now use Messenger and WhatsApp to keep in touch with my daughters. I am a great believer in the potential for the social aspect of these courses, now we are all able to email each other, so we could arrange parties, get everyone involved.”





## Chapter 6

### Conclusion

Both pilots are based on a belief in the value of helping older people with care and support needs to use digital technologies which can support their everyday lives, so they get more out of later life.

The pilots show how digital skills support can be provided in different ways and at different points in a 'user journey'. In both pilots, active steps were taken to make it easier to identify older people who might benefit from digital skills support and to ensure a positive experience of learning how to use digital skills. Evidence shows that getting this right is especially important with older people, who may feel less motivated and more sensitive to set-backs or technical mishaps.<sup>21</sup>

While many people develop digital skills through their work or social groups, digitally excluded older people are likely to need a compelling reason to find relevance and value in technology.<sup>22</sup> It is important to identify the right moment when someone might be interested, and be ready to provide appropriate support at that point. For older people with care and support needs, any introduction to digital skills is likely to include discussion of accessibility, ways to keep in touch with friends and family, staying safe online, and being supported to manage anxieties about using digital.

In Sunderland, social care teams recognised the valuable role they could play in engaging older people in digital skills support. Often, older people come into contact with their services at a time when they are likely to be reflecting on how to maintain independence and live well. By integrating questions around digital inclusion into needs assessments and establishing referral routes to digital skills support, the social care teams developed practical and replicable steps.

In effect, the social care teams acted **as social prescribers**<sup>23</sup>, harnessing community assets. While simple and scaleable, such change still relies on relationships and resources. Since the pathfinder ended, this has been a challenge. More positively, the relationship between Sunderland City Council and Age UK has continued through **Age UK's Front Door Service**.

The pilot in Thanet highlights the value of peer mentors, and the benefit of introducing new technologies to older people, such as voice-activation and appropriate Apps that help them to find or manage information in ways useful to them. Older people wanted to test out new things. They valued peer recommendations relevant to their lives and they also valued the social aspect of digital inclusion workshops. Since the pathfinder ended, the peer-led group has continued to thrive. One of the older people trained in the pathfinder to be a peer mentor (digital champion) is now leading the local group of peer mentors. Orbit Housing supported the group to become an independent entity. The group has extended their reach beyond scheme residents into the wider community. They have secured a £1000 community investment grant to sustain their work and have since joined the **Online Centres Network**.

Pathfinders create opportunities and challenges for sustainability. Even so, both pathfinders succeeded in designing practical changes to improve digital health skills for older people with care and support needs - generating ideas that others can adopt or adapt.

<sup>21</sup><https://www.ageing-better.org.uk/news/i-am-connected-new-way-think-about-ageing-and-digital>

<sup>22</sup><https://www.ageing-better.org.uk/news/i-am-connected-new-way-think-about-ageing-and-digital>

<sup>23</sup> The King's Fund (2017), What is social prescribing. <https://www.kingsfund.org.uk/publications/social-prescribing>

## Chapter 7

# Useful Resources

This report draws on and references a range of resources. These provide a useful starting point when thinking about how to develop digital inclusion support that works for older people.

Learn My Way | [Using GP Services, a how to guide](#)

Learn My Way | [The NHS Website, a how to guide](#)

Good Things Foundation and the Centre for Ageing Better | [Your Guide to Helping Older People Use the Internet](#)

Good Things Foundation and TalkTalk | [Doing Digital Exclusion with Older People](#)

NHS Widening Digital Participation | [Digital Inclusion for Older Isolated People, a how to guide](#)

NHS Widening Digital Participation | [Digital Inclusion for People in Assisted Living Schemes, a how to guide](#)

Good Things Foundation and GIRDA | [Your Guide to Using Games to Teach Tablet Skills](#)

Age UK | [Helping older people gain digital confidence](#)

Centre for Ageing Better | [Digital inclusion](#)

Independent Age | [Factsheet: Technology to help you at home](#)

Social Care Institute for Excellence | [SCIE Report 73 \(2015\) Technology Changing Lives](#)

Think Local Act Personal | [Directory: Innovations in Community Support](#)





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