

**INFORMATION PRESCRIPTION
PILOTS**

DECEMBER 2006

INFORMATION PRESCRIPTION PILOTS

1. Background to information prescriptions

The Department of Health is developing information prescriptions to meet its commitment as set out in the most recent White Paper '*Our health, our care, our say*'. Details of this commitment are set out in Annex A.

The Department of Health is seeking pilots to help develop information prescriptions that:

- direct people with a long term condition or social care need to relevant and timely information about care, services and health;
- are offered to patients, service users and their carers who have a long term condition or care need;
- are given to people in both health and social care settings (and can be accessed directly by people themselves);
- contain key national sources of information and local information about things that matter to people, including services outside of health and social care – like benefits information;
- help people to access information when they need it and in ways they prefer – for example, either through the internet, phoning helplines or face to face;
- give anyone with a long term condition or care need information on where to get advice, where to get support and where to network with others with a similar condition;
- ensure that people get the information they need at key points in the patient/user/carer journey including diagnosis, discharge planning, at the point of assessment, care planning;
- are in formats that are easy to use and understand and support people least likely to access information and services independently.

- will be nationally recognised as a source of key information on services and care which is seamlessly and formally integrated into the care process; and
- make service provision more transparent.

2. Why are we piloting information prescriptions?

Information prescriptions are a relatively new concept that have been used in some clinics, practices and services to help people find the information that they need about their care and condition.

The aim of the information prescription pilots is to develop a systematic approach to information prescriptions that ensures that anyone with a long-term condition or social care need and their carer can access information for their well-being, health and care. Building on the results of the pilots, information prescriptions will be rolled out across England in 2008.

The pilots will develop, test and implement information prescriptions so that they become an integral part of the delivery of health and care services.

Pilots will collect data for the evaluation organisation and record their approach, learning and results to inform the development of policy and contribute to national roll-out.

3. What will information prescription pilots do?

It is expected that all the pilots will take the following steps to develop, test and implement information prescriptions:

- Identify content – decide which information content patients, social care users and carers should be given and pointed to;
- Establish directories of content – compiling the links which will point to the content (eg telephone numbers, web addresses);
- Generating a template – the process by which a personalised information prescription is created to contain specific items listed in the directory for a specific point on a care pathway;
- Issuing process – how the information prescription is given to the patient or social care user, by whom and at what point in the care pathway;

- Format of information prescription – how the information prescription is received eg hardcopy printout, healthspace account, NHS Direct delivery service;
- Ensure that the process is inclusive so that anyone with a long term condition or social care need can access information prescriptions – eg people with learning disabilities, visual impairment, non-english speakers

To do this, individual pilots will be expected to:

- Work in partnership with patients, carers, service users, local trusts and services, professionals and IT departments to develop information prescriptions. Applications developed in partnerships with voluntary organisations will be welcome.
- Work with the evaluation team to ensure that the work of individual pilots contributes to the overall purpose of the pilots to inform national policy and implementation
- Work with other pilot sites and the evaluation team to share learning and contribute to problem solving
- Collect and provide data for the evaluation team;
- Provide regular progress reports to the evaluation team;
- Participate in regular meetings convened by the evaluation team;
- Share experiences of developing and giving people information prescriptions.

In addition, pilots should work collaboratively with each other and the evaluation organisation to identify activities that would benefit from developing and agreeing a common approach.

4. Evaluation

The Department of Health will appoint an independent organisation to co-ordinate the work of the pilots, liaise and communicate with the pilots and the Department of Health and evaluate the benefits and impact of information prescriptions.

The evaluation organisation will work with pilots to ensure that the range of options and settings for people to receive information prescriptions are covered – for example to ensure that arrangements for information prescriptions can be introduced

into primary, secondary and social care. In particular, the pilots will contribute to the evaluation through:

- developing and test the process for people to receive information prescriptions;
- evaluating patients, social care users and carers and professional's satisfaction with information prescriptions;
- evaluating the outcome for people of receiving information prescriptions;
- providing an analysis of the costs of implementing information prescriptions to services, including the voluntary sector
- identifying further action needed at a local and national level to make information prescriptions a success from a patient, social care user and carer user and professional perspective.

5. Questions to answer

A list of questions is attached at Annex B which lists examples of the issues that we would like to address within the pilots. This list is not exhaustive but provides an illustration of the types of issue that will underpin policy development and implementation.

Some of these questions (*in italics*) we expect to be covered by all the pilots and other questions will be addressed by one or more of the pilots. The evaluation team will work with the pilots sites to ensure a balanced approach to covering these issues.

The questions relate to the **process** needed for people to get information prescriptions and the **impact** of information prescriptions for people's health and care and for professional practice.

6. Governance arrangements

Prospective pilots should secure their Chief Executive's agreement to their participation in the pilot.

The evaluation organisation will establish a board that will include membership from DH, each of the pilots and other key organisations. This board will agree arrangements for:

- agreeing resources for common activities;

- reporting arrangements between the evaluation team, the Department of Health and key stakeholders;
- an agreed procedure for escalating problems
- arrangements to ensure that pilots are contributing to the strategic objectives of the pilots;
- developing information prescriptions including process and impact.

7. Information prescription pilot proposals

Prospective pilots should e-mail a written pro-forma, agreed by their Chief Executive, covering the proposed scope of their pilot work. The proposal should include:

- proposals for developing information prescriptions, including the proposed areas that will be covered from the list below:
- an overview of proposed local governance arrangements;
- proposals for data collection for the evaluation;
- an outline of anticipated costs;
- working with stakeholders, information prescription process and developing content;
- proposed timescales.

Within their proposal, pilots should indicate which areas from the suggested list below they plan to include within their proposals.

Setting for giving information prescriptions

- Social Care
- Voluntary Sector
- Primary Care
- Secondary Care

Developing the content for the information prescription

- process to identify and assure content.
- process for establishing standards

The process for issuing an information prescription

- process for issuing an information prescription

- integration into care pathways
- managing the production of a template for an information prescription.
- ensuring that people from “hard to reach” groups can access information prescriptions
- optional use of technology

The long-term conditions/care needs that you are proposing to cover

- complex conditions covering more than one point on a care pathway
- rarer long term conditions
- more prevalent long term conditions and care needs

Delivering information prescriptions

- The cost of providing information prescriptions

The impact of giving people information prescriptions for

- patients
- social care users
- carers
- professionals

Support for people to use information prescriptions

- for hard to reach groups
- information in accessible formats.

8. Funding

The Department of Health will fully fund the evaluation and the costs of the individual pilots. It is anticipated that each pilot will receive funding of around £80k.

9. Timing

An invitation to bid will be launched in the Department of Health Chief Executive’s Bulletin on 18th December requesting expressions of interest through completing a short pro-forma.

Applications will be forwarded to interested pilots within one working day of receiving the expression of interest

Full applications should be received by 5pm on Wednesday 31st January 2007. Proposals should be sent to the information prescriptions mailbox at

informationprescriptions@dh.gov.uk using the application form. Paper copies of the proposal signed by the Chief Executive should be sent to:

Clare Macdonald
Room G23B
Department of Health,
Richmond House
79 Whitehall.
London.
SW1A 2NS

Successful pilots will be notified of the result of their application by 9 February, and will be expected to start in mid February.

10. Queries

For any queries please contact Clare Macdonald:

Clare Macdonald
Room G23B
Department of Health,
Richmond House
79 Whitehall.
London.
SW1A 2NS

020 7210 5575

clare.macdonald@dh.gsi.gov.uk

Our health, our care, our say commitment

The need to improve the information available to people was confirmed through the national consultation and the recent White Paper, *Our health, our care, our say: a new direction for community services*. This echoed the result of the *Choosing Health?* consultation on public health. Everyone should have access to the high quality information and support they need to make choices. To address this, a new strategy was launched in December 2004. *Better information, Better choices, Better health* strategy is a three-year programme of action, at both national and local level, designed to improve equitable access to the quality information people need and want to exercise choices about their personal health and healthcare.

The White Paper states:

5.24 ...We propose that services **give all people with long-term health and social care needs and their carers an 'information prescription'**. The information prescription will be given to people using services and their carers by health and social care professionals (for example GPs, social workers and district nurses) to signpost people to further information and advice to help them take care of their own condition.

5.25 **By 2008, we would expect everyone with a long-term condition and/or long-term need for support – and their carers – to routinely receive information about their condition and, where they can, to receive peer and other self care support through networks.**

QUESTIONS TO ANSWER

The questions relate to the **process** needed for people to get information prescriptions and the **impact** of information prescriptions for people's health and care and for professional practice.

Questions *in italics* maybe be covered by all the pilots whilst others could be addressed by one or more of the pilots.

To develop and test the process of giving people information prescriptions:

1. Questions about accessing information prescriptions so that people receive information prescriptions as part of the delivery of their care
 - *What steps and/or triggers are needed to ensure that people with long term conditions and/or social care needs are routinely offered an information prescription?*
 - What steps are needed to ensure that people from 'hard-to-reach' groups are given information prescriptions?
2. Delivering information prescriptions to individuals
 - *Who gives people information prescriptions?*
 - What type of environment is best for people to receive information prescriptions in different health and social care settings?
 - *What time is needed at a consultation/meeting to give an information prescription?*
 - Are different approaches needed for patients, users and carers to receive information prescriptions?
 - How should information prescriptions be offered in different care settings?
3. Content of prescriptions
 - *What principles/standards should underpin decisions about the content for information prescriptions?*

- *How are decisions reached about the content of information prescriptions for different individuals, conditions and points in care pathways?*
 - How can information be captured quickly for information prescriptions?
 - How can the purpose of information prescriptions for patients, social care users and carers be communicated clearly?
 - How can information prescriptions be available in formats that enable people to access information in ways that suit them best?
 - How can details of local health and social care information be included?
 - How is relevant non-health or social care information included eg benefits information?
 - How are local health and social care support networks incorporated into information prescriptions?
 - How can consistent delivery of standardised Information be achieved by different health and social care organisations?
4. Delivering information prescriptions within the system of care
- *What is the impact and benefit of giving people an information prescription on professional practice in health and social care and in motivating staff to provide relevant, trustworthy and timely information using jargon-free explanations?*
 - *What are the costs of giving patients, social care users and carers information prescriptions in different settings?*
 - How can information prescriptions be integrated into care pathways, care management, Single Assessment Process and the Common Assessment Framework?
 - How do information prescriptions support people to make choices about their care and treatment?
 - How can partnerships between information providers and services support the delivery of information prescriptions?

- What training and education is needed for professionals to give people information prescriptions?
- What is the role of users in designing the information prescription?

An evaluation of the impact of information prescriptions.

These questions concern the benefits and impact on information prescription on other parts of the care system and for patients, users and carers. It includes the impact of giving prescriptions on how information is provided.

1. Access to information and support to use information
 - What is the impact of giving people information prescriptions on providers of information, including the voluntary sector, NHS Direct and other non-statutory providers?
 - Where can people go to get the information that they need for example, VCS, SCIE, PALS, nurses, pharmacists and what is the impact on their services?
 - How will people get support to use the information they have been prescribed?
 - How can information prescriptions support people from 'hard-to-reach' groups to find the information that they need?
 - How will information prescriptions signpost people to information in other languages and alternative formats?
2. Behaviour changes
 - How are professionals supported to use information prescriptions as part of the two way process with people to provide information?
 - What is the impact of the information prescription on patients, users and carers' ability to find and use information?

3. Satisfaction with information prescriptions

- Do patients, social care users, carers and professionals find information prescriptions useful and do they help people get the information that they need?
- *Are information prescriptions clear and straightforward? What are the different ways to present information prescriptions for example using symbols and photos from the image bank of Change People?*
- How can an information prescription help people navigate through the health and social care system?
- Have people the skills to interpret and use information they have been prescribed?

4. Benefits of information prescriptions

- What is the impact of information prescriptions on making service delivery more transparent?
- What is the impact of information prescriptions on helping people to get the interventions and services that they need when they need them?
- How will information prescriptions help people get interventions and services at an earlier stage to access preventative treatments sooner?
- How do information prescriptions support people to live with a condition including self care and managing their lives and condition?
- How can information prescriptions help audit the information that people are given about care options?

5. Questions about the IT support for information prescriptions:

Where IT has been used to support the development of information prescriptions, describe the approach taken and the benefits derived including:

- How has IT facilitated the delivery of the information prescription?
- How has IT minimised the cost/time impact on delivering an information prescription?
- How has IT maximised the benefit to patients, social care users, and staff alike?
- Where IT was deployed, how did you ensure that it met the requirements of patients, social care users, and staff?