

Signposting by public libraries to health information and the NHS Account, via the NHS website and NHS App: Evaluation of activity Oct 2024 to Feb 2025

1. Summary

This partnership aimed to drive down digital health exclusion by supporting public library services to signpost members of the public to high-quality health information and the NHS account via the NHS website or NHS App.

The scope of the activity was considerably larger than originally planned, owing to the scale of interest from public library services. This meant that the NHS Knowledge and Library Services team and NHS App team adapted the support offer to provide a model of: group-based knowledge exchanges, for libraries to share learning and tips with the national team and each other; and drop-in sessions for any questions about the NHS Account and NHS App. The development of short training videos on the NHS Account and the NHS App remained the same.

The training resources and communications were well received and surveys at the start and end of the initiative showed an increase in the confidence of public library staff and volunteers to signpost to high-quality health information.

The number of people helped was low in most libraries, with higher numbers where the initiative built on previous health activity. A retrospect on 30 April demonstrated a disconnect between public libraries expecting greater NHS promotion and the national project team not wanting to overwhelm the public libraries by promoting the activity too widely. Public library staff felt that the idea was good and wanted to find ways to increase local NHS engagement.

2. Background

During initial work by the [National Health Literacy Partnership](#) with [14 pilot sites](#) (of which 13 were in public libraries), it was clear that members of the public trust the staff in public libraries and see libraries as a non-judgemental environment in which they can access health information and learn relevant skills. One of the findings from the initial 14 pilot sites was that many people were not aware that the log-in functionality on the NHS.uk website mirrors the NHS App and can be used by members of the public who may not have an individual mobile phone or when people would prefer to use a larger screen.

This report covers follow-up activity by participants from within the National Health Literacy Partnership (notably Libraries Connected and the national NHS Knowledge and Library Services team at NHS England) with colleagues within NHS England working on NHS App engagement/training, digital citizenship policy and communications. It covers the period from 27 October 2024 to the end of February 2025.

3. Planned activity and shift in focus

The teams within NHS England worked with public library colleagues to collate and develop training resources on the NHS App and signposting to health information. They also produced new communications tools to be used by the public libraries. The aim was that public library staff would use these materials from 27 October 2024 (as a soft launch in the last week of Health Literacy Month) and collect data on activity to the end of February 2025. The plan was to work with one public library service in each of the nine public library regions, so just nine in total. Whilst there was no money attached to the work, 64 public library services approached the NHS England teams following promotion of the opportunity by Libraries Connected. Two of the library services pulled out when they realised that there was no funding associated with the activity, but it was still a considerably larger cohort than anticipated.

With the planned nine public library services, members of the project team would have had discussions with the individual services about how they planned to shape the activity and talked through the data collection. With a much larger group, the project team moved to group training sessions and group support sessions: monthly knowledge exchanges; and monthly NHS App drop-in sessions. This change of approach meant that there will have been richer learning for the library services that participated fully, but less support for library services that did not have the capacity to get involved in the knowledge exchanges, the NHS App drop-in sessions or the retrospect event held on 30 April.

4. Resources developed for the public libraries

The project team brought together existing resources and created new resources for a toolkit. New resources were needed in particular for usage of the log-in functionality on the NHS.uk website, referred to as the NHS Account. Bite-sized video training resources were developed, following feedback from Libraries Connected and from public libraries on what would be useful. In the absence of budget, members of the NHS England team created and appeared in the videos.

The [toolkit](#) covers:

- Setting up an NHS Account
- Video guidance on the NHS Account
- Video guidance on the NHS App
- Promotional materials for libraries
- Promotional materials on using the NHS Account and the NHS App
- Useful websites with trusted health information – linking to: the [NHS.uk website](#); the [directory of organisations producing health information](#) to the Patient Information Forum's PIF TICK quality standards; and [Your Health Collection](#) compiled by the national NHS Knowledge and Library Services Team and The Reading Agency.

5. Communications

The Communications campaign within the project led on the development of the training resources, a webpage specifically for library staff, customised communications materials for public library services and promotion of the activity nationally.

The following outputs were produced through the Communications activity:

- A soft announcement of the partnership at the CILIP annual conference (2 July)
- NHS England press releases (24 August and 1 November)
- Libraries webpage and toolkit developed and shared with library services
- Health Ambassador webinars and knowledge exchange sessions
- Training resource videos and NHS Account walkthrough videos
- Communications toolkit cascaded to Integrated Care Board communications leads
- FAQ webpage
- Joint blogpost on tackling digital exclusion (23 January)
- CILIP interview in *Information Professional*

This activity generated 18 news items. The web resources have been well received and well used, with 1,960 views of the Libraries Toolkit webpage and 2,747 views of the video for setting up an NHS Account.

The overall response to the initiative from all stakeholder groups was positive, providing a strong foundation for future developments. As part of the review of the impact of the communications, the sentiment analysis showed strong positive engagement by senior stakeholders.

6. Impact for public libraries staff and volunteers

Public library staff and volunteers were asked to complete a survey when they started activity in late October and again late in February. Whilst the data on library staff who completed the survey at the start of the activity are not directly comparable to those who completed the survey at the close, the percentage changes show some increases in confidence of public library staff. Notably, 47.3% respondents were confident or very confident to signpost to high-quality health information at the start of the project, rising to 57.7% confident or very confident to signpost to high-quality health information at the end of the project.

The importance of experience of using the NHS App in building the confidence of public library staff is reflected in freetext responses to the survey:

“Having watched the training videos, I have a much better understanding of what information is available and how useful it could be. It has enthused me to use the app personally and hopefully this would build my own confidence in using it. Until I have practical experience I wouldn't feel confident in helping others, but I would definitely encourage people to investigate it further and explain possible uses and benefits.” - Anon survey response

Limited staff time had an impact on the ability of members of public library staff to respond to requests for help, such as an example of where a digital buddy was not available and a staff member needed to help a member of the public to open the messages from her GP Practice that had been sent through the NHS App:

“The largest challenge was that it was a very busy morning with just two members of staff (which is fully staffed) and to help the lady I had to ignore others for a while, leading to a backlog in tasks.” – Case study from Molesey, Surrey

Public library staff also expressed concern over data privacy in public spaces and asked whether “dummy” accounts would be possible in which they could practice using the NHS App and demonstrate it to library users without risking viewing personal data.

Public library staff who attended the retrospect on 30 April indicated that there was more public engagement when activity was linked to wider awareness events, such as Health Information Week and Get Online Week. In localities where there was greater local NHS engagement, there was greater footfall. Some GP Practices in the localities in which the public libraries were based were not linking service access to the NHS App, which limited local functionality and the role that libraries could play. For public libraries delivering outreach work in the community, even if they had good engagement with community groups, this did not necessarily translate into footfall within the physical library. Public library staff emphasised that website clicks and footfall tell only part of the story, but there are other ways to measure the reach e.g. social media and case studies. There needs to be an emphasis on the social value of libraries as a metric for success.

7. Impact for members of the public – quantitative

Staff and volunteers in busy public library services struggled to count the number of people who had been helped. Some of the services mentioned at knowledge exchange sessions that they had had large numbers of attendees at events, but they were unable to capture the details on the data returns. Of the 64 public library services engaged in the project, only 17 were able to complete data returns. Some services indicated in knowledge exchange discussions that they had had large numbers of individuals taking part in activities, but proved unable to provide data returns. In the 17 services that were able to complete data returns, just over 1,300 members of the public were helped between 27 October and the end of February. Peaks in activity coincided with the wider general promotion of health information and the NHS App during Health Information Week in the third week of January.

The services that worked with significant numbers of people were building on existing health information activity, most notably in Stockton on Tees, which has a dedicated health information service within the public library service. Some services struggled to set up arrangements or to promote activity. The lack of a budget for posters and printed flyers was cited by several public libraries as having a negative impact on the promotion of the activity.

To test low-input data collection, the project team worked with 7 of the library services to test out collection using unique URLs. These were set up to indicate when signposting from a specific library service had resulted in accesses to the NHS.uk website or to download details about the NHS App. Whilst this was a good approach in principle, in practice there were issues with duplications on allocations and the data returns proved complex to interpret.

8. Impact for members of the public – qualitative

Where the public libraries were able to provide individual case studies, these demonstrate that the sessions in a trusted environment provide members of the public with new skills in relation to the NHS App and in accessing health information to equip them to make health choices.

In this example, D is a woman in her 80s who uses a wheelchair and the library is one of the few places that she visits without her husband. The library staff were able to show her how to set up and use the NHS App:

“The outcome is that D is now able to order her own prescriptions from the doctors, instead of queuing on a long phone call. It means that she can do something important for herself, instead of asking her carer-husband.” – Case study from Virginia Water, Surrey

Whilst working with the NHS App was time-intensive for public library staff and volunteers, it provided digitally excluded members of the public with greater control over their access to health services.

9. Models for delivery in public libraries

On the basis of discussions in the knowledge exchange sessions, several different models for activity emerged. This included library services operating a mixture of models, particularly where there were community managed libraries alongside local authority public library services.

Delivery models included:

- **Digital signposting** – focussing on promoting links to resources through screensavers, posters or social media posts.
- **Drop-in sessions run by the library** – this was particularly a model used in Health Information Week as a focus for promotion of group activities.
- **Booked sessions with NHS volunteers or digital volunteers within the library** – as an example, there are “NHS Angels” in Staffordshire who provide digital skills support through public libraries and took on part of the NHS App and health information signposting role.
- **Tiered delivery** – signposting from most library services, with bookable sessions within a specific subset of public libraries.

10. Learning

The knowledge exchanges and NHS App drop-in sessions were valued by library staff for sharing ideas and asking questions. These provided a core for the more actively involved public library services and those who were interested in learning for the future.

Through the group sessions, retrospect and individual communications, a number of concerns and suggestions were raised by public libraries:

- **Local NHS engagement:** There is a need to focus on building relationships with NHS partners.
- **Confidentiality:** Several public libraries raised issues in relation to confidentiality and asked whether it would be possible to have “dummy accounts” for demonstrating the NHS App. There was also a request for a standard confidentiality note or guidance to use with staff and volunteers.

- **Time:** The intention with the activity was that this would mostly be a case of signposting to resources, but library staff and volunteers became involved in helping people who were very anxious to set up NHS Accounts and use the NHS App. This took a considerable amount of time; one example was of 90 minutes to help an individual.
- **Funding:** Staff and volunteer time is very tight in public libraries, so some services that expressed interest did not feel able to take part unless funding was provided. The specific lack of funding for posters, flyers and other assets reduced promotion opportunities.
- **Measures of success:** There needs to be more thought given to how we consistently measure the success of the project, including social value - which was felt by participants in the retrospect to be key for showing the contribution of public libraries. Any data collection needs to be very simple to complete. There was a suggestion of asking on the NHS App where people have heard about it, to see where public libraries have had impact.
- **NHS volunteers:** Where NHS volunteers use public libraries as a venue for awareness raising around the NHS App and health information, this supports both the NHS and public libraries – increasing capacity and footfall for public libraries.
- **Refresher training:** There is a need for (yearly?) refresher training to keep public library staff skills and confidence current.

11. Next steps

The National Health Literacy Partnership Board has agreed that next steps should combine: light-touch national coordination; and seeking potential funding for more detailed work, including considering research into social value.

The light-touch national coordination will cover: updating training resources, plus briefings for all public library staff on NHS App developments and health information signposting tools; and providing less frequent knowledge exchange sessions. Alongside this, the partnership project group will explore:

- Integration of this activity into the universal health offer for public libraries, which is one of the four [universal offers](#) in public libraries
- Developing mechanisms for setting up local partnerships between NHS organisations and public libraries
- Light-touch data collection (for public libraries who wish to collect data)
- Exploring an NHS volunteering model, with NHS volunteers in public libraries, increasing local service integration and releasing capacity for public libraries

Email the national NHS Knowledge and Library Services team at NHS England with any queries: england.kfh@nhs.uk.

Disclaimer: This report was compiled by staff at NHS England: Ruth Carlyle, Joanne Naughton, Jo Stead, Jo McKibben and Emma Halliday. Whilst we undertake every effort to ensure that the information within this document is accurate and up to date, CILIP does not accept any liability for direct, implied, statutory, and/or consequential loss arising from the use of this document or its contents.

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