Lancashire ORCHA – Phase 1 Pilot – Evaluation as at 17th July 2017
1 ORCHA and Lancashire – Phase 1 Pilot Evaluation Report as at July 2017

1.1 Executive summary

Phase 1 effectively went live in January 2017. Although the platform was live before this, this was still in the early testing phase and initial project mobilisation period and as such the platform wasn’t truly active.

Between January to July 2017, the platform:

- **Attracted over 3,000 visits.** With average visitor numbers moving towards 1,000 visits per month in June 2017.

This resulted in:

- **Over 1400 App searches being undertaken**
- **110 Professional and Patient user registrations with a final quarter average of 27 registrations per month and**
- **88 App recommendations**

The Phase 1 pilot identified a huge number of lessons learnt as we hoped it would and has led to a significant shift in user acquisition and conversion strategies alongside significant improvements in the overall platform features and performance.

We approach Phase 2 armed with a substantial array of tangible initiatives that we are confident will significantly accelerate the wider adoption and dissemination of the platform and the consequential wider digital activation of the Lancashire and South Cumbria clinical teams and population.

1.2 User interest across Lancashire and South Cumbria

1.2.1 Key findings:

Throughout Phase one – the Platform was effectively live between January to mid July - the platform was visited in excess of 3,000 times. Between April and mid July it was visited 2,816 times. This involved 2,130 individual user sessions and the average session time was 1 minute and 25 seconds.

The diagram below illustrates the geographic distribution of platform users:

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1 Note: This figure is definitive but we are aware that between January and April there were on average 100 visitors per month.

2 Note: London is often a catch all ‘location’ for many providers so it is not likely that these numbers actually emanate from London itself.
The majority of end users accessed the platform via mobile, as illustrated below:

This user activity resulted in over 1400 site searches. The most popular search areas were:

- Diabetes,
- Mental Health,
- Anxiety,
- COPD and
- Asthma.

In addition, 110 Lancashire and South Cumbria users created registered ORCHA accounts over the following time frames, split across the following recorded user types.
The gender split across Registered users for the site was as shown above, with significantly more female users than male ones.

There were 88 App recommendations made in Phase 1 by Lancashire and South Cumbria Professionals. The Top 10 Apps in terms of recommendations are as follows:

<table>
<thead>
<tr>
<th>App Name</th>
<th>No. of Recommendations</th>
</tr>
</thead>
<tbody>
<tr>
<td>My Health UK</td>
<td>20</td>
</tr>
<tr>
<td>Pacifica - Stress &amp; Anxiety</td>
<td>11</td>
</tr>
<tr>
<td>ESC Student</td>
<td>6</td>
</tr>
<tr>
<td>Zephyr Guide</td>
<td>5</td>
</tr>
<tr>
<td>Smoke Free - Quit smoking now and stop for good</td>
<td>3</td>
</tr>
<tr>
<td>Back to Action</td>
<td>3</td>
</tr>
<tr>
<td>Cognitive Diary CBT Self-Help</td>
<td>3</td>
</tr>
<tr>
<td>Sleepio - the sleep improvement app</td>
<td>2</td>
</tr>
<tr>
<td>Shoulder Pain</td>
<td>2</td>
</tr>
<tr>
<td>D-Life Diabetes NSW App</td>
<td>2</td>
</tr>
<tr>
<td>SmallTalk Dysphagia</td>
<td>2</td>
</tr>
<tr>
<td>Gout</td>
<td>2</td>
</tr>
<tr>
<td>MyLupusTeam Mobile</td>
<td>2</td>
</tr>
<tr>
<td>Arthritis Physio</td>
<td>2</td>
</tr>
</tbody>
</table>

2 User Activity and Lessons Learned

The following diagram shows the trend in site visits over the Phase 1 period:
As this demonstrates, there was a very slow start in terms of gaining end user traction but this ramped up significantly over the last quarter. This was due to a number of factors set-out below.

2.1 User Acquisition Background

Our original User acquisition strategy/hypothesis envisaged three primary channels:

- The first was based on what we term the ‘piggy back’ approach. This assumed that the Lancashire ORCHA Platform would be publicised via Lancashire and South Cumbria partner organisations through promotion on their digital assets - initially web and subsequently including social media.
- Direct physical promotional materials including bus stop signs, car park signs, leave behind postcards and posters.
- The third was based on the direct targeting of patients by Lancashire and South Cumbria clinicians through the ‘recommendation’ feature of the ORCHA Pro-Account.

During the initial phase, we also added in an additional channel namely:

- Targeted Social Media campaign

Moving forward into Phase 2 we envisage a re-vamp of all these channel approaches plus the addition of one other channel namely:

- Direct Patient emailing

2.2 User Acquisition – Channel Assessment

2.2.1 Piggy Backing Strategy:

This strategy has had its challenges during Phase 1 in terms of gaining traction with all partners and getting the platform exposed on their assets. For most of the Phase 1, the platform was only advertised on one or two partner websites. It was meant to be promoted on over 25 sites and this challenge was never properly overcome during Phase 1.
There was an additional challenge in that the ‘click through’ link on the websites that did promote the platform was to an intermediary platform (Healthier Lancashire) and this will have also led to a degree of attrition in terms of onward ‘click through’.

Because of these challenges, the scale of user traffic derived from the piggy backing approach was very limited and we can’t at this stage form a proper view of the effectiveness of this method as a means of user acquisition.

2.2.1.1 Phase 2 Approach

As we move forward, we are now re-visiting the piggy back strategy with a more direct approach to the partners. This seems to be bearing fruit in terms of promised platform exposure over the next few weeks and months. We have also moved our piggy back focus beyond the pure website links and have explored social media options and also direct marketing options that are available via partner organisations.

Over the next month these interventions will be the primary acquisition approach and we should start to gain a much better feel for the real effectiveness of this prior to the re-instatement of the social media campaigns (referred to further below) and the expansion of the clinician account roll out (also referred to below).

2.2.2 Direct physical promotion

We had originally planned to use direct physical promotional materials as part of the overall strategy. This approach also suffered from execution challenges over the period of Phase 1 and - other than the bus stop campaign - we were unable to distribute the physical materials effectively.

2.2.2.1 Phase 2 Approach

For Phase 2 we are re-visiting the roll out of these materials alongside other elements of the campaign to achieve maximum exposure in targeted sites.

2.2.3 Social Media Campaigns

As noted above, although social media campaigning wasn’t part of the initial User Acquisition approach, we decided to test user engagement through this mechanism to gain some greater user traction and to therefore build a more valuable dataset upon which to evaluate the wider platform utilisation.

We used Facebook as the social media campaign platform. We developed 4 specific Facebook campaigns to test different approaches and these were focussed as follows:

- Overarching General Ad Campaign
- Diabetes Campaign – 2 versions
- Mental Health Campaign – 2 versions
- Asthma Campaign – 2 versions

Overall the campaigns reached over 173,951 Lancashire and South Cumbria residents. Over 2823 clicked through to the site as a result.

We have set out in Appendix A the detailed findings for all of these campaigns. What was most striking was that the ‘general health’ campaign was by far the most effective at driving
user click-through and this generated a very healthy click through rate of 25p. The more focussed campaigns were less effective in terms of click trough’s and had a higher cost per click as a result. The total spend on this campaign was c£1,200.

2.2.3.1 Phase 2 Approach

For Phase 2 we intend to re-run the Facebook campaign and to still look at a mixture of general and targeted ads. What we will then be looking at will be the different conversions rates we see from users visiting the platform via different prompts. This will be augmented by the creation of campaign specific landing pages which ensure that someone who has responded to a specific condition prompt will land immediately in an environment that is relevant to that condition or health challenge. What we are looking to ascertain is whether more targeted use of this media can drive uptake in ‘high priority’ groups within Lancashire and South Cumbria and thus support the alignment of the platform to the wider health needs of the area.

2.2.4 Pro-Account Recommendations

In total there are currently 46 ‘Pro’ accounts activated across Lancashire and South Cumbria. The total number of recommendations made over the initial phase was 88.

Clearly the number of deployed Pro-Accounts is lower than we aspired to achieve and also the corresponding recommendation rate is also lower. In reality, the Pro-Account roll out has been a bit stop start and as with the user acquisition approaches, we have been testing a number of different strategies and approaches through the initial phase.

Our initial plan for rolling out Pro Licenses across Lancashire and South Cumbria was via pockets of enthusiasm and energy towards digital activation; targeting the easier to reach areas of East and South Lancashire. The intention was to build success stories that would then allow for the rapid escalation of Pro Licenses across the region (ie Pros ‘selling’ ORCHA to each other).

Engaging those easier to reach areas, via Blackburn Council, resulted in the sign up of c40 Pros, plus positive engagement sessions with leads from other bodies with a view to them trialling before rolling out to their teams.

There were then two main reasons for a drop off in activity:

- Initially, sign up included the circulation of a template for Pros to complete with their
details. The circulation, completion by teams, and then loading of this template took longer than anticipated, at which point ORCHA was no longer forefront in potential Pros’ minds and many accounts were not engaged – and ‘success stories’ fell away.

- The balance of engaging with a new way of working, whilst doing the current ‘day job’ meant that the influencing (intended to come from success stories) was vital. The enthusiasm is there and the commitment is there, there is however a need for ‘permission’ from a strategic level to find time.

As we come to the end of Phase 1 we are working on three approaches to increasing roll out, all of which are gathering momentum:

- Via connections piggybacking on the LDP’s Facebook support for GP Practices: This has resulted in introductions to 8 GP practice in the last 4 weeks.

- Through ‘deep dives’ we are carrying out within a selection of GP surgeries to ensure our messaging and functionality are targeted at the problem Pros need us to help them solve (i.e. providing an engaging and sticky solution to offering the best health and care apps as part of care pathways).

- Via Practice Manager meetings, initially focusing on the Lancashire North locality before engaging South Cumbria/Furness.

2.2.4.1 Phase 2 Approach

Having tested the incremental roll out approach – and it has been of huge value in ‘Product testing’ the platform with clinicians as noted above – we have however, concluded that this will ultimately take up too much resource and time and there is little evidence that significant face to face engagement materially changes a professional’s likely engagement and use of the product beyond that face to face activity.

In addition, through the deep dive sessions referred to above, we have gained insights into how to better target and activate clinicians. This has led to a number of platform improvements. We have for example significantly revised the ‘Pro-Account’ sign up process which now is as simple as clicking on an email link and adding a password and selecting the relevant practice/group. We have re-designed the ‘landing pages’ that a Pro first sees based on feedback and we have re-designed the search and App Card features to provide more intuitive searches and more detailed and clearer information about each App.

Our revised strategy – building on the insights we have gathered and the improvements made – is to provide ORCHA Pro-Accounts to as many Lancashire Clinicians who are in the boundaries of the partnership (initially primary care based), via a targeted email campaign. We would expect from this a normal distribution of engagement and activation to follow and a significant upturn in Pro-Account activations to result over time assuming we are able to target clinicians at suitable scale.

It will be a crucial element of Phase 2 that this roll out at scale is able to happen to ensure that we can significantly increase the rate of User Acquisition from the Pro-Recommendations Channel. It should be noted that energising this channel is considered to be the single best way to activate end users. In a recent survey we conducted with a wide range of end users, 100% said that they would automatically respond to a recommendation to use an App by a professional.
2.2.5 Patient List – Direct Mailing

The opportunity to consider a campaign based on ‘digital’ practice lists was not part of the Phase 1 work. During our engagement with practices however, we have discovered a willingness to consider using their practice lists to target and promote the platform generally and specifically in terms of groups within the practices who have particular conditions. This is a huge opportunity to drive activation and also to again target the platform on specific areas of health challenge at a practice, CCG or wider Lancashire and South Cumbria level.

2.2.5.1 Phase 2 Approach

We will continue to look for opportunities, practice by practice and through the wider communications teams to utilise this channel more effectively. We are currently designing an appropriate email campaign to test this out on the initial practices at the end of August.

2.2.6 User Acquisition Conclusions

Given the challenges outlined around the various acquisition strategies (save perhaps the social media campaign), it is clear that we can make significant improvements on user acquisition on all fronts. We would expect to both improve headline user numbers but also to start to really tune the acquisition approach to target specific cohorts or conditions to meet local or regional needs. This was always the ultimate vision for the platform.

2.3 User Conversion

Our understanding and focus on ‘conversion’ metrics has also been heavily informed and influenced as a result of the Phase 1 pilot. Our initial focus on User Acquisition, logically switched to converting users to ‘active’ users on the site as soon as we had sufficient volumes of site visits to gather meaningful data.

For us the key conversion metrics should be:

- Ratio of site visitors to App Searches – the App search is the first level of engagement for public and patients
- The Ratio of Searches to App Card Views – this is the next level of activation and indicates that an individual progressed into a more detailed assessment of an App
- The Ratio of Searches to Downloads/app store click through – this is the next level of activation and engagement and indicates that an individual is likely to have progressed to downloading an App
- The Ratio of Downloads to App Shares (via social media)
- The Ratio of site visits to Registered Users
- The Ratio of Pro-Accounts activated v clinicians contacted
- The average recommendation per Pro-Account

During Phase 1 the conversion rates – that we can measure – were as follows:

- Site visits to searches – c50% overall

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3 This metric hasn’t been available until we implemented recent changes into our analytics engine but will be part of the metrics for Phase 2
4 This is a new feature that will be available for Phase 2
5 This metric is a new metric that will be available for Phase 2 and reflects the new strategy for Pro-Account roll out.
• Searches to downloads – c7% overall\(^6\)
• Visits to Registered Users – 3.9% overall
• Avg Recommendations per Pro – 2 over the period

It is difficult to benchmark these conversion ratios as there are no comparable publicly available metrics to assess against. From our user testing and end user engagement with both public/patients and professionals, we identified a number of ‘conversion’ barriers that we have built into the platform development plan. These ranged from the fact that at certain points through the platforms evolution, the mobile view (by the far the most popular access device), was not optimised and it was not clear enough what the platform was for and how to use it in this view. In addition, we have also repeatedly tested some of the key site components and review features and this has highlighted confusion around the concept of risk and reward amongst both end users and clinicians (for quite different reasons). In terms of gaining user registrations and improving response rates to Pro-Account Recommendations, we have also – based on user feedback – fundamentally re-designed the sign-in, login or view recommendation processes to take significant steps out of this and aid a much slicker end user experience.

2.3.1 Phase 2 Approach

As noted above, as we move into Phase 2, our focus on conversion is critical. Building on the feedback outlined above, which we believe has contributed to a higher user attrition rate than we would hope to achieve going forward, we have identified a number of key improvement tasks. These include:

• Improved ‘landing pages’ that more directly engage end users in the idea of ‘App Search’ - this includes tailored ‘landing pages’ to support more targeted campaigns
• Improved mobile interfaces to reflect the scale of end user involvement via these devices
• Re-vamped and scaled Pro-Account roll out and activation process
• Improved and streamlined Pro Recommendation process
• Enhanced user interactions within the platform such as ‘share app’ and ‘review app’ in addition to ‘download’.
• Simplified ORCHA scoring and App card design and layout.

These improvements are in development now and will all be available by the end of August and we plan at this stage to instigate a Phase 2 campaign on both the Professional and Patient/Public fronts to drive significantly improved user acquisition and conversion at the beginning of September 2017.

3 Wider Engagement Achievements arising from Phase 1

Engagement achievements in Phase 1 extend beyond these planned activities, as we sought to support the wider dissemination of mHealth/digital health solutions in Lancashire and South Cumbria.

We’ve delivered presentations to a variety of bodies/teams across the region with a view to raising awareness and influencing policy, ranging from, for example the East Lancashire Communications Steering Group, to Our Health Our Care, and Public Health in Blackburn, et al.

Similarly, we have delivered focused activities with relation to specific care pathways and

\(^6\) This data has a degree of extrapolation due to some early data capture challenges
how health Apps could be used for both treatment and prevention, e.g. presentations for University Hospitals of Morecambe Bay NHS Foundation Trust with respect to mental health related mHealth in Paediatrics, Diabetes at the North West Diabetes Group (and inclusion in the East Lancashire Hospitals Trust Diabetes Newsletter), and we continue to progress with Rheumatology at Lancashire Care Foundation Trust.

In terms of the wider publicity of mHealth and ORCHA within the Lancashire and South Cumbria region, we have also circulated press releases and are pursuing regional initiatives with a view to raising our collective profile. For example, we have agreement from the Councils in Blackpool and Fylde and Wyre for ORCHA to be the point of mHealth reference in their new online directory of health services; a directory that will replace separate CCG and Council directories to become the ‘go to’ resource for their communities.

This activity, and the engagement of this rich variety of stakeholders has also contributed to our identified Phase 2 strategy. Interestingly, it has highlighted regional priorities that may well support the embedding of ORCHA; for example, with smoking cessation support being withdrawn in Blackpool, all GP Practices that we have engaged with in the area want to be recommending supporting apps as part of their care delivery.

4 Conclusion

We believe that the Phase 1 Pilot has been a success. We set out to test a number of hypotheses around the use of the platform and we learnt a huge amount that has contributed to its significant improvement.

Alongside this, we achieved a significant level of awareness raising and digital health activation across the Lancashire and South Cumbria Area with both Clinicians and Patients and the Public.

Nearly 3,000 citizens accessed the site and over 1,400 became activated at one level or another.

Phase 2 offers huge opportunities to drive even greater levels of activation building on these valuable lessons learnt, and places/retains Lancashire and South Cumbria at the forefront of digital health innovation.
5 Appendix 1 – Detailed Facebook campaign findings

5.1 General Ad Campaign
The overarching generic campaign reached 76,739 people, with 25 posted reactions. There were 1602 link clicks of which 1448 were unique. 58% (41,913) of the people reached were female, with 42% (33,866) men reached through the campaign. Women between the ages of 18 to 24 accounted for the biggest sub-group, with 7,823 women falling into this category accounting for 10% of all users.

27.3% of users viewed the video related to this campaign. Of the users who clicked on the relevant links, 58% (932) of users were female and 41% (657) were male. Women aged over 65 had the highest click through rate with 10% of this group (16 out of 165) utilising ORCHA features.

The average cost per click through was 25p which was the lowest cost per click of all of the campaigns run in this phase. This general ad campaign has highlighted that there is an initial audience interest in this area, but that more work needs to be done to understand what can be developed or adapted to drive conversion from casual visitor into registered user.

5.2 Diabetes Specific Facebook Campaign – Campaign 1

This clinical condition focussed campaign reached 28,820 people, with 10 posted reactions.

There were 408 link clicks of which 369 were unique. 55% (15,766) of the people reached were female, with 44% (12,750) men reached through the campaign. Women over the age of 65 accounted for the biggest sub-group, with 2,960 women falling into this category accounting for 10% of all users.

27.64% of users viewed the video related to this campaign. Of the users who clicked on the relevant links, 65% (265) of users were female and 34% (139) were male. Women aged over 65 had the highest click through rate with 19% of this group (16 out of 78) utilising ORCHA features.

The average cost per click through was 50p, which is in the mid-range of all the campaigns run during this phase.

This targeted Facebook campaign has again suggested that there is initial audience interest in this area, but that more work needs to be done to understand what can be developed or adapted to drive conversion from casual visitor into registered user and to provide a better rate of return from each click.

5.3 Diabetes Specific Facebook Campaign – Campaign 2

This clinical condition focussed campaign reached 10,232 people, with 20 posted reactions.

There were 168 link clicks of which 152 were unique.

74% (7,525) of the people reached were female, with 25% (2,597) men reached through the campaign. Women between the ages of 45 and 54 accounted for the biggest sub-group, with 1,702 women falling into this category accounting for 17% of all users.

34.9% of users viewed the video related to this campaign. Of the users who clicked on the
relevant links, 74% (124) of users were female and 23% (38) were male. Women aged over 65 had the highest click through rate with 30% of this group (15 out of 51) utilising ORCHA features.

The average cost per click through was 74p, which is a costlier return for this campaign than its parallel Diabetes Campaign 1. Work is ongoing to understand the underlying causes of this differential to inform future campaigns.

5.4 Mental Health Campaign – Campaign 1

This Mental Health focussed campaign reached 5,742 people, with 1 posted reactions.

There were 40 link clicks of which 39 were unique.

54% (3,100) of the people reached were female, with 25% (2,597) men reached through the campaign. Women between the ages of 13 and 17 accounted for the biggest sub-group accounting for 16% of all users.

27% of users viewed the video related to this campaign. Of the users who clicked on the relevant links, 43% (17) of users were female and 57% (23) were male. Men aged between 25 and 34 had the highest click through rate with 18% of this group utilising ORCHA features.

The average cost per click through was 77p, which was a high return value.

5.5 Mental Health Campaign – Campaign 2

This Mental Health focussed campaign reached 12,650 people, with 10 posted reactions.

There were 119 link clicks of which 103 were unique.

80% (10,151) of the people reached were female. Women between the ages of 25 and 34 accounted for the biggest sub-group accounting for 18% of all users.

Of the users who clicked on the relevant links, 76% (91) of users were female and 16% (23) were male. Women aged between 55 and 64 had the highest click through rate with 29% of this group utilising ORCHA features.

The average cost per click through was £1.04, due to the small number of users reached converting into click throughs.

5.6 Asthma – Campaign 1

This Asthma focussed campaign reached 28,770 people, with 15 posted reactions.

There were 391 link clicks of which 365 were unique.

51% (14,789) of the people reached were female, but Men between the ages of 18 and 24 accounted for the biggest sub-group accounting for 10% of all users.

Of the users who clicked on the relevant links, 50% (194) of users were female and 50% (194) were male. Women over the age of 65 had the highest click through rate with 12% of this group utilising ORCHA features.
The average cost per click through was 50p, which provided one of the best cost per click rates seen in these campaigns.

5.7 Asthma – Campaign 2

This Asthma focussed campaign reached 10,998 people, with 7 posted reactions.

There were 95 link clicks of which 88 were unique.

80% (8,790) of the people reached were female, and women between the ages of 25 and 34 accounted for the biggest sub-group accounting for 17% of all users.

Of the users who clicked on the relevant links, 81% (77) of users were female and 19% (18) were male. Women between the ages of 45 and 54 and those over the age of 65 both saw high click through rates, with 21% of each of these groups utilising ORCHA features.

The average cost per click through was £1.32, which provided the worst cost per click rate seen in these campaigns.