

## **Healthwatch Birmingham and Solihull's response to Sandwell and West Birmingham NHS Trust and Dudley Group NHS Foundation Trust Group Strategic Plan Feedback Survey (Draft 2026–2031)**

1. Vision. Do you agree with our vision statement?

**Yes**

**2. If yes: What do you value most about the vision?**

Healthwatch Birmingham and Solihull commend the commitment shown in the vision to tackle health inequalities and make a difference to the health and wellbeing of your communities.

**3.Strategic Objectives. Do you agree with our strategic objectives?**

**Yes**

**4.If yes: What do you value most about them?**

We value that consideration of patient experiences has led so many of the objectives. We are happy to see that attention to less duplication is likely to reduce confusion for patients. Joined up services reduce delays in patients receiving the care they need. The listed care pathways appear to focus on specific local need which we are pleased to see. We also value that support to digital inclusion has been considered, to ensure as many people as possible can access services where appropriate.

**5.Multi-year Commitments. Do you agree with our multi-year commitments?**

**Yes**



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**6.If yes: What do you value most about them?**

We are happy to see that as part of the Community First commitment there is a clear drive to reduce inequality. Health outcomes across the area rely on accessible provisions that are available to all, and we hope to see that improvements to outpatient services allow this to happen easily. With an ageing population, we are pleased to see focus directed to that of care in the community and an acknowledgment of pathway improvements to residential care.

The commitment to improving staff culture is encouraging to see, and we are hopeful that this targeted focus will ensure that patient outcomes are improved knowing that the NHS workforce feel valued, respected, and listened to. It is pleasing to see mention of staff wellbeing and retention however the plans do not seem to refer to the pressures staff are already under, and we feel that this could be acknowledged more. With suggestion of new roles, rotas, and new ways of working, there is a risk that staff reading these commitments feel overwhelmed by more incoming change.

In the commitment to better use of resources, it is encouraging to see that reduction of duplication has been considered, which would mean a more seamless experience for users of the NHS App, and other digital services. We would like to see more attention to how patients will be included in these service alterations, and if their input is going to provide key decision making in areas that previously may not have asked for public insight (for example, administrative functions).

**7.“What matters to you” summary (pages 10–11). This section reflects what we’ve heard from our communities, including feedback from the Shaping the Future workshops. Do you agree with this summary?**

Yes

**8.If yes: What stands out as most important or meaningful?**



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We are pleased that feedback directly from community workshops has been included in the summary, and hope that in line with the Trusts vision, patient experience continues to be at the heart of the Trusts work. Some of the themes reflect common concerns that we hear from local people. As independent champions of the patient voice, we support the attention that has been taken to the inclusion of community investment as it highlights whole-system approaches needed to better support patient outcomes.

We note that attention to improving access to digital services has been considered in the summary, and awareness is being taken to prevent exclusion. We would add that there should be some recognition of those who do not wish to engage with digital services, and commitment into exploring how services could still be provided using non-digital routes

**9. Involvement Vision. Do you agree with our involvement vision statement?**

**Yes**

**10. If yes: What do you value most about it?**

We are pleased to see that a specific approach to heightening community involvement is being developed, and that inclusivity is a main priority mentioned in the involvement vision. As the independent voice for people living in Birmingham and Solihull, we also welcome the acknowledgement that the Trusts will work with us and other local Healthwatch to support meaningful patient involvement.

It is good to see that consideration has been taken in the strategy toward barriers that may prevent people from engaging with the Trusts. We are grateful to learn that the involvement team will focus on ensuring the public can provide their insight in a variety of ways, however we would add that more emphasis could be placed on attention to removing jargon from NHS resources, for example, public consultation documents.



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We welcome the acknowledgement of the importance of creating safe, welcoming, inclusive spaces for people to comfortably share their experiences. It is often overlooked when gathering lived experience about potentially sensitive experiences for patients, and we are happy to see attention being taken to this.

**11.Principles of Involvement. Do you agree with the proposed principles?**

**Yes**

**12.If yes: Which principles do you find most important?**

Building a culture of co-design and working together across the system seems most pertinent to our purpose in supporting patient outcomes and improvement to service delivery. With inclusion of community collaboration, we hope that the NHS can better support those that previously may have felt excluded across health and social care. We would encourage that attention is drawn to making sure that the public are provided with a wide range of ways to take part in service design, in easy-access formats, and in a space that feels tailored to specific needs.

**13.Our Involvement Role. Do you agree with the role we have set out for ourselves?**

**Yes**

**14.If yes: What do you value most about this role?**

The approach to early and ongoing public involvement is a good reflection of what we would expect from local Trusts, and we welcome the commitment to establish true public involvement. Our role is to ensure that the views and experiences of patients, communities, and the public, influence service improvement, therefore we are pleased that the strategy centres on patient insight. It is good to see that involvement with the public is not being treated as an 'add-on',



We would expect to see more caution around some of the language used in the approach to Involvement document, specifically the Trust's commitment to act as a "critical friend". Independent scrutiny cannot be replicated at an internal level, and we would welcome clarification on how the role of "critical friend" will remain objective.

**15. How easy were the documents to understand?**

1 2 3 4 5

**16. Do you have suggestions to improve accessibility or clarity?**

While the Group Strategy document is comprehensive, we do not feel it is clear who the primary audience is, and how much detail different audiences are expected to read. We would suggest a consideration toward plain-English summaries of each section to ensure that any technical language can be understood by audiences who are not familiar with the Trust strategies. Additional media could be used to disseminate key messages such as videos or animations.

**17. Are there better ways we could share this information?**

The Approach to Involvement Strategy PDF provides a clear and summarised version of the Trusts intended improvements, and we are pleased by its engaging design. We feel that use of short videos would be even more engaging for those who do not feel comfortable reading larger documents like the Group Strategy.

