

BSOL ICS: System Prioritisation Framework – Healthwatch Birmingham's Comments

Healthwatch Birmingham welcomes that Birmingham and Solihull Integrated Care System (BSOL ICS) are setting out their System Prioritisation Framework. Healthwatch Birmingham's key role is to make sure that patients, the public, service users, and carers (PPSuC) are at the heart of service improvement in health and social care.

Public Involvement

Healthwatch Birmingham are pleased that the ICS are engaging with stakeholders to strengthen the framework and consider if there are any areas that have not been addressed. However we believe that PPSuC have a role to play in scrutinising and informing systems at all levels, especially in how well they meet the needs of the local population. The framework as a working document should be publically available following this engagement. We will be interested to see how the framework develops over time based on feedback. Any such changes should be made clear to stakeholders and the public so they can appreciate how feedback is listened to and acted upon.

System Prioritisation Framework

Healthwatch Birmingham commend the ICS for including criteria 2, Tackling Inequalities, in the framework and recognising the high level of deprivation in Birmingham. We recognise that the score for the criterion is based on two very important aspects of IMD and Ethnicity, which are clearly greatly important to consider. We would like to suggest that inequalities around Disability are also considered. As the pandemic has shown us, people living with a disability have faced some of the worst inequalities in health and life expectancy.

We understand that analysis of PPSuC experiences will be considered as an operational measure and not factored into the impact score for this criterion. We would like to ask the ICS to consider giving greater status to the use of experiences and other qualitative data as a measure, including consideration of this measure being used as part of the impact score. Sharing their experiences of a service is the most direct way PPSuC can effectively feed into a system, giving a system the opportunity to ensure a service best meets the needs of the public it serves.

Healthwatch Birmingham notes with interest section 7 of the framework on Patient and Public Participation. The language of this section should be strengthened around the expectation that effective engagement with the public will have already taken place prior to the proposal being received by the Prioritisation Group. We would like to suggest that a section is outlined in Appendix 2, for inclusion in the Business case on Patient and Public Participation. This would ensure that consideration is given to whether additional public engagement is needed for a proposal, and completed, prior to a proposal reaching the Prioritisation Group.



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Healthwatch Birmingham are pleased to be a member of the Prioritisation Group, however would like to make clear that our role is that of ensuring that effective engagement with the public has taken place, and that the needs of all patients in Birmingham are considered by decision makers. We are not able to act as a direct representative of the public, but can share intelligence we have on services within Birmingham.

We look forward to seeing the updated framework.

Yours Sincerely,



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