

## **Adult Social Care Centre Consultation Phase 3**

### **Frequently Asked Questions**

This Frequently Asked Question (FAQ) is designed to provide additional information in addition to that which is already published on the council website at: [ASC - Care Centres Consultation | Birmingham City Council](#).

It has been developed in response to questions that the consultation team have received during the consultation process that took place between 14<sup>th</sup> October 2024 to 20<sup>th</sup> December 2024 and 31<sup>st</sup> March 2025 to 30<sup>th</sup> April 2025. This document has been updated to reflect the position in June 2025. This FAQ document will be kept updated, throughout consultation Phase 3, however, should you have any further queries that are not included please email us at: [CareCentreConsultation@birmingham.gov.uk](mailto:CareCentreConsultation@birmingham.gov.uk)

### **Resident care and location**

#### **Q1 What support will residents get if they need to be rehoused?**

A: All proposals are currently subject to consultation and no decisions have been made. The feedback received from the phase 1, phase 2 and phase 3 consultations will inform a final proposal and report to the Council's Cabinet for decision in September 2025. If the alternative proposed option were to be agreed which would see Kenrick Centre becoming the Council's Residential and respite provision and Ann Marie Howes and Perry Tree becoming integrated intermediate care beds, this would mean residents from Ann Marie Howes and Perry Tree would need to move, the City Council would fully support the residents and their wider family to make an informed decision.

To confirm, no decisions have yet been made. This will happen at the Cabinet meeting in September 2025.

If the decision selected means a move to a different Care Home, the support to residents will include a social worker working with each resident affected to identify suitable care homes with vacancies that would meet the residents care needs.

If the decision selected means a move to a different Care Centre, then the support would be planned in a way to cause least distress to the residents impacted.

#### **Q2 Does Birmingham City council understand how much impact it would have on residents, their families, and carers if they had to move care centre?**

A: All proposals are currently subject to consultation and no decisions have been made. The feedback received from the phase 1, phase 2 and phase 3 consultation will inform a final proposal and report to the Council's Cabinet for decision in September 2025. If the preferred option were to be agreed, then the City Council

would fully support the residents, families, and carers at Ann Marie Howes and Perry Tree to help them make an informed decision.

As a part of the consultation, we recognised the benefits of conducting a Health Impact Assessment which helps evaluate any potential health effects of a proposed change. (See question 8 for more information on health impact assessments).

Prior to the consultation, An Equality Impact Assessment (EIA) was completed as part of the care centre review process and is publicly available on our website [Equality Impact Assessment - Review of care centres | Birmingham City Council](#) This EIA will be reviewed throughout the consultation and ahead of any formal decision by the council. The initial and final EIA will be provided to Cabinet along with the report to support them to make an informed decision.

However, we do appreciate that it is a difficult time for residents and their families. If you have any immediate concerns about a resident at any of the care centres please contact in the first instance Delroy Bonnitto, the multi-disciplinary Team Manager for advice and support: [Delroy.G.Bonnitto@birmingham.gov.uk](mailto:Delroy.G.Bonnitto@birmingham.gov.uk)

### **Q3 How do you move everyone out and ensure they are settled?**

A: No decision has been made to move citizens out of Ann Marie Howes and Perry Tree Centre, the final recommended option will be further informed by the analysis of responses received from the consultation and will be subject to decision, by the Councils Cabinet in September 2025. Dependent on the decision made by Cabinet, all residents will receive the required support, pertinent to the decision.

### **Q4 Is BCC aware of the massive impact this will have on citizens and families?**

A: The Council has completed an Equality Impact Assessment which will be updated following the close of the consultation and published on the Council website. The initial and updated EIA's will be included in the report to Cabinet in September 2025, to ensure when considering their decision, they are aware of any potential impacts and their mitigation. In addition, a Health Impact Assessment has been completed during the consultation and will be updated following the close of the consultation and the analysis of responses received. The Health Impact Assessment will also be included in the Cabinet Report to ensure the Council's Cabinet is sighted on the potential impact of any decision and the mitigation.

### **Q5 What support will be provided to residents during the transition. Will costs such as transporting belongings be covered and how much space will residents have in a new place?**

A: No decision has yet been made. If the decision by Cabinet in September 2025 was to move residents, financial support would be considered on an individual basis and determined by the unique circumstances of each resident. If the decision were made to move citizens, each resident and their family/advocate/representative would be supported to make the most appropriate choice for them.

**Q6. I don't live in Birmingham and if my relative has to move I'd like them to be moved closer to where I live. Will BCC support moves out of the area?**

For any residents impacted, support will be in place through our Social Workers.

**Q7. What are you doing to lessen the impact of uncertainty on residents now, while we are waiting for the decision to be made?**

Care home staff have been briefed on the proposals and will support residents throughout the process. They have been given additional training and we have also engaged with PoHwer who work with people who are unable to speak through disability, brain injury illness or dementia.

**Q8. Will you be doing new Care Act Assessments prior to the move? How will those assessments affect your plans for my relative?**

All residents will have the support of a social worker as well as any specialist help that may be needed.

**Q9. Some of the proposed homes on your list would not let us look around. How can we make the right decision if we don't know what we will be moving to?**

We will work with the other care homes in Birmingham to encourage them to allow relatives of our residents to visit. It is in their interests to be open and welcoming to secure additional occupants.

**Q10. Some people may deteriorate or even die as a result of being moved. What steps will you take to make sure this doesn't happen?**

Recommended options are subject to consultation and a cabinet decision. If approval is received at cabinet in September 2025 best practice guidelines will be followed, including partner agency support should any citizens be required to move from their current care home.

**Q11. Have you considered the impact on individuals? Can I see that information?**

An EIA and HIA has been completed and forms a part of the consultation pack which is available on BCC website.

**Q12. Many residents do not have the capacity to understand what is being proposed. How can you consult them on their views?**

We are working with POhWer who provide independent advocacy for people who are unable to express themselves through disability, illness, brain injury or dementia.

**Q13. Residents with capacity are afraid, upset and angry at these proposals. How will you take their views into consideration? What weight will their views carry?**

We appreciate this is a very difficult time, the consultations that have been conducted have provided valuable feedback which has been taken on board and informed a revised proposal which will be presented during the phase 3 consultation.

**Q14. Which care homes are currently contracted with Birmingham City Council?**

A: Please see link to the directory of Care Homes currently contracted with Birmingham City Council  
[https://www.birmingham.gov.uk/directory/55/care\\_homes\\_home\\_support\\_and\\_supported\\_living/category/1102](https://www.birmingham.gov.uk/directory/55/care_homes_home_support_and_supported_living/category/1102)

**Staff Implications**

**Q1. Have the staff been told to look for new jobs?**

A: The staff have not been told to look for new jobs. Staff have received a briefing on the public consultation, as have their Trade Union representatives. Depending on the option approved, subject to consultation, at the Cabinet meeting in September 2025, any staffing implications, which would be subject to staff consultation at this point.

**Q2. What would the proposed changes mean for staff at the three care centres?**

A: Until a decision has been made by the Councils Cabinet in September 2025, following the phase 3 public consultation, at present there are no planned changes for staff. When the decision has been made, if there are staffing implications a formal staff consultation will be launched.

**Q3 What analysis has been carried out to measure the impact on the NHS? Would the closure of care centres result in a delay in patients being released from hospital beds?**

A: All proposals are currently subject to the consultation and no decisions have been made. The feedback received from the consultation will inform a report to the Council's Cabinet for decision in September 2025. If the preferred option were to be agreed, then the City Council would work with our Health Partners to mitigate any identified risks associated to the Cabinet decision.

The NHS have been invited to provide a response to the consultation as one of our partner organisations.

**Decision making process.**

**Q1. If the decision is made to close the Care Centre, what will be the timescales for rehousing the residents and where would they go?**

A: All proposals are currently subject to consultation and no decisions have been made. The feedback received from the consultation will inform a report to the

Council's Cabinet in September 2025. If the final proposals were to be agreed the planning for implementation of the proposals would begin.

### **Costs and financial implications**

**Q1. Circumstances have changed now in light of the BCC update in the news in relation to the equal pay settlement and the pension fund. If you get a cash injection will the consultation stop?**

A: The consultation will inform the report to Cabinet in September 2025 and currently the savings proposal remains unchanged.

**Q2. The financial information provided in the consultation document is not sufficient to make a meaningful contribution to the consultation. What is the detail behind the different options and the shortfalls in the savings for why the preferred option is to close all three Care Centres:**

A: The table below details the additional cost to implement each option.

Option	Service Overview	Additional Investment
Option 1a- Retain & Increase Complex Care- 128 beds	The Council would keep the current services but provide more complex care beds	£8.1m
Option 1b Retain and Increase Short Term Care- 128 beds	The Council would keep the current services but provide short term residential care for those ready to leave hospital but require more time to recover or to have an assessment of their needs	£5.0m
Option 1c Retain & Full Cost Recovery- 128 beds	The Council would keep the current services, but all services would be charged at the full amount they cost the Council to operate.	0*
Option 1d Retain and Reduce Cost- 192 beds	The Council would keep the current services but would reduce the cost and make them more efficient.	£3.5m

Option 1e Do Nothing	The Council would keep the current services and ot make any changes	£5.9m
Option 2a Retain Ann Marie Howes Only – 64 beds	The Council would close the other services and only keep Ann Marie Howes	£3.4m
Option 2b Retain Perry Tree only – 64 beds	The Council would close the other services and only keep Perry Tree Centre	£3.0m
Option 2c Retain Kenrick Centre only – 64 beds	The Council would close the other services and only keep Kenrick Centre	£2.4m
Option 2d Retain Ann Marie and Perry Tree – 128 beds	The Council would close the Kenrick Centre and only keep Ann Marie Howes and Perry Tree Centres	£4.9m
Option 3a Sell and Transfer to a New Provider	The Council would sell the current services, and all residents and staff would transfer to the new provider.	£4.6m
Option 3b Close Services and sell the empty buildings	The Council would close the current service and sell the empty buildings	£0.8m
Option 3c Close Services and Rent the Buildings	The Council would close the current services and rent the empty buildings	£0.6m

\*Please note option 1c is not financially viable as citizen contributions are based on their ability to pay not the cost of the service they receive.

The alternative proposed option: Kenrick Centre to deliver Residential Care and Respite Care and for Ann Marie Howes and Perry Tree to deliver integrated intermediate care will currently make a minimum saving of £2.8m towards the £6.4m savings target. The remaining savings would be released over a longer period of time by building on existing efficiencies and the reduction of care that would need to be delivered by the independent market.

**Q3. The February decision date is too short and does not give residents and their families sufficient time to fully consider their options.**

A: Thank you for all your views at the consultation events and through the Online consultation platform. The views and comments you share will be considered and analysed for a report which will be presented to the Council's Cabinet.

As a result of the participation and feedback we have received, a decision was for a further period of consultation, which took place between 31<sup>st</sup> March 2025 and 30<sup>th</sup> April 2025. The views and comments you have shared will be considered and analysed for a report which will be presented to the Council's Cabinet.

The report is to be presented at the Council's Cabinet meeting in the September 2025. This will allow a thorough review and analysis of all the responses received from the three consultation periods.

**Q4 How will you keep residents, and their families informed?**

A: Citizens, relatives, and advocates will be kept fully informed throughout the entire consultation process, post consultation and following the Cabinet decision in September 2025.

**Q5. Have you included all the costs for each proposal eg costs of support, moving people to a new location?**

A. Yes, these are all factored in.

**Q6. What ideas for income generation have been considered?**

A. We have considered all options for income generation and have a revised proposal which we will be sharing during the phase 3 consultation.

**Q7. If BCC is paying towards care and moves people into private homes where costs are typically higher, will this option over the years end up costing the city more money?**

A. The Council has agreed rates for cost of care being delivered by providers on BCCs framework.

**Q8. Will people end up paying more for poorer service?**

A. All new providers joining the BCC provider framework are required to be good or outstanding, internal commissioning services closely monitor all providers on the framework agreement who are paid an agreed rate.

**Q9. Can we see more detail about how you have arrived at the figures?**

A. Financial details were provided in relation to each option of the initial 12 options and were presented during the phase 2 consultation.

**Consultation Process**

**Q1. Many residents do not have the capacity to understand what is being proposed. How can you consult them on their views?**

A. We have been working with relatives and representatives to confirm if they would like their family member who resides at one of the Care Centres to take part in any planned meetings and have respected the wishes being made. For those citizens that will be attending any targeted meetings we are working with PoHwer who provide independent advocacy for people who are unable to express themselves through disability, illness, brain injury or dementia.

**Options**

**Q1. Are there other options which you have considered but not proposed?**

A. All options considered have been presented, a further consultation period is due to take place between 30th June 2025 and 25th July 2025 which will detail revised option following feedback that has been received.

**Q2. All the options proposed seem to point to your preferred option. Is this a genuine consultation?**

A. Yes this is a genuine consultation. No decisions have been made and we will be asking Cabinet for a final decision in September 2025. We are grateful to everyone who has given their time to respond to the consultation.

**Q3. Have you done a feasibility study to see how the care homes could remain open?**

A. A thorough review of the Care Centres has taken place and feedback received from the two consultations conducted has identified a revised proposal which is being presented in the phase 3 consultation for comments and views prior to a cabinet decision in September 2025.

**Q4. Is this just a short term cost cutting exercise?**

A. Any decision being taken to Cabinet will be to provide long term financial efficiencies.

**Legal**

**Q1. If I have LPOA can I say no to any decision you make that directly affects my relative?**

A. A formal decision in relation to the Care Centres will be taken at cabinet in September 2025, which will be subject to scrutiny call.



## **Decision Making**

### **Q1. When will we know what is going to happen?**

A. The consultation will run from 30 June to 25<sup>th</sup> July. The results of this consultation will form the basis of a paper to be considered by Cabinet at its meeting on 9<sup>th</sup> September. The decision will be made then.

We have been working with relatives and representatives to confirm if they would like their family member who resides at one of the Care Centres to take part in any planned meetings and have respected the wishes being made. For those citizens that will be attending any targeted meetings we are working with POhWer who provide independent advocacy for people who are unable to express themselves through disability, illness, brain injury or dementia.