

Health Impact Assessment

Adult Social Care

Care Centres

Date:27/06/2025

1.What is your name?

2. What is your job title?

3.What is your email?

4.Who is the Senior Responsible Officer (SRO) for this saving?

Shazia Hanif

5.Which Directorate Budget does this saving relate to?

Adult Social Care

6.Saving Title

Review of Care Centres

7.Equality Impact Assessment Reference Number: EIA001110

8. The Council runs 3 Care Centres in Birmingham:

The Kenrick Centre	Mill Farm Road, Harborne, Birmingham B17 0QX
The Perry Tree Centre	Dovedale Road, Kingstanding, Birmingham B23 5BX
The Ann Marie Howes Centre	20 Platt Brook Way, Sheldon, Birmingham B26 2DU

The Care Centres are home to 50 residents. The annual cost to the Council of the Care Centres is approximately £14 million per year.

The Care Centres are regulated by the Care Quality Commission and currently have the following ratings:

Care Centre	CQC Rating	Date of Inspection
The Kenrick Centre	Requires Improvement	December 2019
The Perry Tree Centre	Overall Good	March 2022
The Ann Marie Howes Centre	Overall Good	March 2021

The Care Centres also play a wider role in supporting people with care and support needs. There are 96 Discharge to Assess beds delivered from the Care Centres, some by the Council and some by the NHS. These are beds where people can go when it is safe and appropriate for them to leave hospital. People stay in these short- term beds to continue their care and assessments, so that any support required can be put in place to meet their long- term care needs.

There are 2 Day Centres operating from the Care Centres which are provided by organisations independent from the Council.

The Care Centres also provide an office base for the Early Intervention Community Team, which is a multidisciplinary team of professionals from across health, social care and the independent care market. This service supports people to go home from hospital and to increase their independence after a hospital stay. This is within the wider health and wellbeing offer to Birmingham residents and works closely with the Discharge to Assess bed services.

9.Which of the following best describes the service user population or population impacted by the service?

City wide

10.Which of the following communities of identity are the focus of the service/provision?

Older Adults Communities

11. Which of the following communities of experience are the focus of the provision/service?

- Citizens who are older with specific health conditions
- Family Members
- Carers

12. Total Budget Value prior to saving: £14 million per year.

13. Saving Value

The total proposed saving for this service area is £6.4m

14. When will the saving come into effect

The savings proposal is £0.346m in the 2024/2025 financial year, £3.921m in 2025/2026 and £2.133m in 2026/2027

15. Please explain the impact of the saving on the service/provision?

The alternative proposed option, subject to consultation, would mean existing permanent residents at Ann Marie Howes and Perry Tree Centre would need to move either to Kenrick Centre or to a new care home in the independent sector if that is what they/their family choose. Residents will be supported with those decisions. Kenrick Centre will provide BCCs provision of long-term residential care and respite care. There is sufficient capacity and choice in the independent market to provide a home to any citizens that do not wish to move to Kenrick Centre.

For long-term residents at Ann Marie Howes and Perry Tree, it is recognised that these Care Centres are their home and any move maybe unsettling for them and their families, particularly for those older, frail residents, and or those with dementia. Research tells us that moving older adults, particularly those living with dementia, may cause trauma, which can range from mild to severe, including mood, behaviour and physiological symptoms. Whilst studies have been contradictory, some research suggests that older people who relocate may have increased morbidity and mortality particularly those with dementia. To mitigate such an impact, subject to consultation and final recommendations and decision, one to one support will be provided to all residents, including from health colleagues and the Alzheimer's Society.

Subject to consultation and the final recommendations and decision, support will be given to existing residents throughout the process to mitigate the risk of the impact of a move on their health and wellbeing. This will include social worker support at the appropriate time to ensure transitions are well managed. Wrap around support from trained staff familiar with the residents will also be provided, including access to appropriate health interventions, when required.

Social workers will ensure that residents and their families and carers have access to information, advice and guidance throughout the process, to support them to make informed choices and decisions about their future care needs and any new care home.

This new option means that the Council will retain all three Care Centres Kenrick Centre will be the base for the delivery of residential and respite care while Ann Marie Howes and Perry Trees will be used to provide intermediate care delivered through an integrated health and Social Care Model, in line with the Government Neighbourhood Health Guidelines 2025/26.

This option meets the Integrated Care Systems ambition to make better use of these services to support people being discharged from hospital. This ensures the buildings

are put to ongoing public use and supports delivery of the Council and NHS duties under the Health and Care Act 2022 to deliver better integrated services.

16. Which of the following public sector services will the saving impact on directly or indirectly?

- Adult Social Care
- NHS

17. Positive Impacts of the Savings (can you describe how the saving may lead to positive impacts on other public sector services (including Council services) and which specific services will be impacted)

The proposal may have a positive impact on some residents who may have had a change in their care needs or where they have been unhappy at their current care home or where they wish to move closer to their family.

The proposal may create further opportunities to strengthen the discharge to assess service with NHS colleagues driving improvements, strengthening clinical interventions and support, and increasing the number of intermediate care beds in the city.

18. Negative Impacts of the Savings (can you describe how the saving may lead to negative impacts on other public sector services (including Council services) and which specific services will be impacted)

This alternative proposed option may not align with the original planned proposal by the NHS, who were identified as the preferred lessee of the Centres. 19. What mitigations are being put in place to reduce any negative impact on public sector partners (including other Council services)?

The current proposal, subject to consultation, mitigates the negative impact by working with the NHS to create Integrated intermediate care beds within two of the Care Centres for the residents of Birmingham to access. Effective communications between health and social care partners would further mitigate the risks together with joint planning in relation to the timing and approach to the development of the Integrated intermediate care beds subject to consultation and the decision by the Council's Cabinet. Further mitigation would be the continued alignment to integrated community care within local communities and neighbourhoods.

20. What steps are being put in place to maximise any positive impacts from the saving on public sector partners (including other Council services)

Collaborative working will be key, ensuring that our centres continue to be used as multidimensional hubs where services linked to prevention and health are offered to citizens and carers while still providing residential and respite care to Birmingham residents. These measures will alleviate pressures from public sector partners including NHS waiting lists. The impact of these services is interlinked and can have a negative or positive effect on the health of citizens.

21. Are there any other comments you wish to include on the impact of the saving on other public sector organisations, including other Council departments, and their ability to support citizens?

No

Impact on Wider Determinants of Health

The potential negative impact of the savings on the wider determinants of health may be in relation to the health and wellbeing of citizens and their families caused by the relocation to a different care home in Birmingham. This will be mitigated by the Council continuing to offer long term residential services from Kenrick Centre as well as fulfilling its obligations under the Care and Aftercare (choice of accommodation) Regulations 2014, providing residents with a choice over their accommodation. The resident, and where appropriate, family members will be fully involved in decision making. The Council will ensure that our duties under the Care Act 2014 will continue to be met and care needs for each person will be assessed and addressed in their individual care plan.

Wrap around support will be provided to residents, their carers and families, by trained staff with whom they are familiar, and wellbeing assessments will be considered for carers as and when required.

22. Which of the following wider determinants of health will the saving impact on directly or indirectly?

As above.

23. Positive Impacts of the Savings (can you describe how the saving may lead to positive impacts on the wider determinants of health and how they will be impacted)

A new care home may benefit some residents: there may have been a change in care needs, they may be unhappy at their current care home, they may wish to move to be nearer to family. For some the proposal may provide an opportunity to address these issues and in so doing mitigate the risk of an impact on their health and wellbeing.

24. Negative Impacts of the Savings (can you describe how the saving may lead to negative impacts on the wider determinants of health and how they will be impacted).

See response to Q21.

25. What mitigations are being put in place to reduce any negative impact on the wider determinants of health?

Stakeholders will work together to ensure services are far reaching, diverse and appropriate. Data monitoring of citizens and carers is key in understanding trends and themes. Regularly reviewing of the HIA is imperative to ensure that any potential negative impacts are identified and dealt with accordingly.

26. What steps are being put in place to maximise any positive impacts from the saving on the wider determinants of health?

Stakeholders will work together to ensure services are far reaching, diverse and appropriate. The continuing provision of residential and respite care by BCC means there will be more choice for Birmingham citizens who require this kind of support.

27.Are there any other comments you wish to include on the impact of the saving on the wider determinants of health and the impact on citizens lives?

No

Impact on Individual's from Specific Communities of Identity or Experience

The proposal impacts people in relation to the protected characteristic of age and in particular older adults. In relation to the residents of the Care Centres the occupancy rates held on Eclipse and as reflected in the Equality Impact Assessment June 2025 are reflected in the Table below:

Age Group	Long term residents % Total
100+	2%
90-99 years	25%
80-89 years	40%
70-79 years	25%
60-69 years	4%
50-59 years	4%
41-49 years	0%

This shows that 92% of residents are aged 70 and over.

The proposal potentially impacts people in the protected characteristic of Disability in relation to the residents of the Care Centres. Eclipse records the primary support reason rather than disability. Data shows that residents have a range of care needs, these are more readily identified in long term residents, as reflected in the Table below:

Care Needs	% of long term residents
Personal care and support	53%
Support with memory and cognition	24%
Mental Health support	7%
Access and Mobility only	7%
Not recorded	9%

This shows that the highest percentage of residents as of June 2025 had a support need in relation to personal care.

Ethnicity	Long Term Residents %
White	84%
Black/Black British/Caribbean or African	7%
Asian/Asian British	2%
Mixed or Multiple Ethnic Groups	2%
Refused	0%
Not recorded	5%

The option identified, subject to consultation and decision could result in care being delivered by an alternative provider, or at the Kenrick Centre.

28. Which of the following communities of identity do your comments relate to?

- Disabled communities
- Ethnic communities
- Older Adults

29. Which of the following communities of experience do your comments relate to?

- Carers
- People with specific Health conditions

30. Positive Impacts of the Savings (can you describe how the saving may lead to positive impacts on health and wellbeing in specific communities of identity or experience and how they will be impacted)

- Disabled communities/ Health Conditions/Adults

Should this option be adopted, enabling all residents to move to Kenrick Centre means that friendship groups will not be split up which will be beneficial for residents social and emotional well-being. The provision of additional intermediate care beds at Ann Marie Howes and Perry Tree will support winter pressures in the NHS, which will have a

positive impact on the wider community. The provision of Integrated intermediate care beds will mean that more services can be delivered closer to the community.

With many of our residents having a long-term disability and or health conditions, together with 60% of those who died from covid in the first year of the pandemic were disabled, increased integration within local communities will lead to targeted and personalised services. ICS and place-based partnerships will offer streamlined and intensive opportunities in tackling health inequalities of disabled communities.

- Ethnic communities

Birmingham is a minority majority City. With 80.75% of our citizens accessing our services with white heritage, makes this not representative. Targeted health services and a diverse service offer with further integration at local level should enable more citizens to access care and support within their local communities.

People from ethnic minority groups particularly Bangladeshi and Pakistani are more likely to report long term illness and poor health in comparison to their white counterparts, it is imperative to work with local communities and carers to encourage the uptake of screening programs, health checks, immunisations.

31. Negative Impacts of the Savings (can you describe how the saving may lead to negative impacts on health and wellbeing in specific communities of identity or experience and how they will be impacted)

There is potential for a broader impact on health and wellbeing such as the emotional and social experiences of residents. The changes proposed could cause barriers for carers and families through having to travel further resulting in additional costs and extended journey times to visit their relatives. Citizens may experience a sense of exclusion from what is deemed as familiar i.e. their local community and access to services. These changes could have an adverse effect on the mental and physical disabilities of citizens.

32. What mitigations are being put in place to reduce any negative impact on health and wellbeing in specific communities of identity or experience?

Any change in provision may be unsettling to residents given their age, and their family members. Full consideration of how to support them will be given during any transition, to minimise stress and the potential for adverse effects on their health and wellbeing.

To mitigate impact the appropriate support will be given to existing residents and families. Enhanced support will be provided during the consultation by a range of professionals this will include advocacy and specialist dementia services.

The mitigation should help alleviate family concerns and the impact of any change on their loved one's wellbeing.

The consultation will ask residents to tell us the impact the alternative proposed option will have on them and any support they may need. The Equality Impact Assessment and the Health Impact Assessment will be updated as the project progresses towards a formal decision by the Council to ensure that any individual impacts are mitigated where possible.

Stakeholders will work together to ensure services are far reaching, diverse and appropriate. Data monitoring of citizens and carers is key in understanding trends and themes. Regularly reviewing the HIA is imperative to ensure that any potential negative impacts are monitored and dealt with accordingly.

33. What steps are being put in place to maximise any positive impacts from the saving on health and wellbeing in specific communities of identity or experience?

Working with local leaders and community assets is key in maximising the positive impact on ethnic and older disabled communities. Regular reviewing and monitoring of our EIA by senior leaders is key in advancing equity and its indirect impact on health.

34. Is there any other comments you wish to include on the impact of the saving on health and wellbeing in specific communities of identity or experience?

No

35. Do you have any other comments you want to add about the health and wellbeing impacts of the savings on citizens in Birmingham?

No