

# **EIA Form – About your EIA**

### **About your EIA**

Reference Number:	EIA001110
Subject of EIA:	Review of Care Centres



This equality impact assessment is part of the Council's ongoing consideration of equalities impacts of its proposals on the future of the Council's internally operated Care Centres. A 10-week public consultation was held between the 14<sup>th</sup> of October 2024 and the 20<sup>th</sup> of December 2024, followed by a further 4 week consultation held between 31 March and 30 April. A range of possible future options were consulted on; the preferred option being for the Council to stop operating these Care Centres and to support each long-term resident to find a new home in a suitable independent care home. Following consultation feedback an alternative option has been identified and will be shared during the Phase 3 consultation which will take place between 30<sup>th</sup> June and 25<sup>th</sup> July 2025.

Birmingham City Council currently provides long-term residential care for 50 older adults from three Care Centres. These Care Centres are also used to provide other services including Intermediate Care, when people stay on a short-term basis until support can be put in place to meet their long-term care needs. There are 96 discharge to assess beds in total.

Description:

The Care Act 2014 places a duty on the Council to meet the assessed eligible care and support needs of individuals and their carers (assessed against the National Eligibility Framework). The Council is enabled to meet needs in a range of ways, including providing services itself through to providing funding to allow citizens to self-direct their care and support. It must however ensure sufficiency of provision – of both capacity and capability – to meet anticipated needs for all eligible people in their area.

A review of the Council's internally operated Care Centres concluded that the services provided by the Care Centres are valued by citizens who live there and by those who may need short-term care whilst they recover from a stay in hospital. However, it also identified that the cost to the Council of running these services is expensive when compared to other residential care homes run by independent care providers and that they don't currently provide value for money to the Council or to people of Birmingham.

The Council is facing a significant financial challenge. In February 2024, Cabinet agreed to a savings proposal of £6.4m, this was split over three financial years - £ 0.346m in 2024/25, £3.921m in 2025/26 and £2.133m in 2026/27.

A 10 week public consultation was launched on the 14.10.24, supported by the Council's Public Participation Team, to gather



views on the options identified relating to the future of this service. A second consultation took place from 31.3.25 to 30.4.25 which provided further financial information on each of the options being considered. The approach to each consultation was inclusive and included a Be Heard online consultation open to anyone to share their views, targeted sessions with residents and with family members at each of the three Care Centres as well as separate online sessions with other Care Centres users, partners and with the public. An Advocacy Service and Care Centre staff attended sessions with residents to ensure one to one support was provided, and all consultation documents used were produced in an Easy Read format. Hard copies of the documentation were made available at the Care Centres. The Phase 3 consultation will focus on residents, their families and staff and dedicated consultation meetings will take place for them. There will be an online consultation on the Be Heard website for the general public to share their views...

This further EIA focuses on an alternative option following the consultations and reflects consultation feedback. The alternative proposed option is for the Council to retain the three care centres, deliver long term residential care and respite care from Kenrick Centre and deliver Integrated Intermediate Care at Ann Marie Howes and Perry Tree in line with NHS Neighbourhood Health Guidelines 2025.

There is sufficient capacity at Kenrick to provide a home to the current permanent residents of Ann Marie Howes and Perry Tree, as well as delivering respite care provision.

The current market is made up of 280 independent care homes providing over 6500 care home beds, with 72% of independent Birmingham care homes rated as 'Good' by the Care Quality Commission. There are currently around 180 of these care homes that specifically provide residential or nursing care to older adults, similar to those operated from the Council's Care Centres.

Citizen contributions to costs of care are based on their ability to pay not the cost of the care provided. There may then be a financial impact on residents that currently pay the full cost of their care should they opt to be relocated to an alternative provision in the independent market (current rate of £990.39 as part of the Council's fees and charges). Residents, however will have choice and control over their care provider, and some may choose to move into the independent sector.



	Short-term care provision is unlikely to be adversely affected by the preferred option.	
In support of:	["Amended service"]	
Reviewing Frequency:	Quarterly	
First review date:	16.8.25	

## Directorate, Division & Service Area

#### **Directorate, Division & Service Area**

Directorates:	["Adults Social Care"]
Division:	Operations
Service Area:	Care Centres

## **Budget Savings**

**Budget Savings Information** 

Related to budget savings?	Yes
Budget proposal ref. no:	ASC 126

## **Officers**

#### **Officers Information**

Responsible Officer Email: timsey.deb@birmingham.gov.uk	
Accountable Officer Email: shazia.a.hanif@birmingham.gov.uk	

## **Data Sources**

#### **Data Sources Information**



Data sources:	The Council's care records system – Eclipse - and other locally held data.
Data sources Details:	Eclipse. Some of the metrics, such as data relating to gender reassignment, has not been obtained as citizens have been in the system for a number of years and many have not been in receipt of an annual review for some time.

## **Initial Assessment**

Impact Age:	Yes
Impact Disability:	Yes
Impact Sex:	Yes
Impact Gender Reassignment:	No information is held on this characteristic so we are unable to say whether it will be impacted or not.
Impact Marriage and Civil Partnerships:	No information is held on this characteristic so we are unable to say whether it will be impacted or not.
Impact Pregnancy and Maternity:	No
Impact Race:	Yes
Impact Religion or Beliefs:	Yes
Impact Sexual Orientation:	No information on this characteristic is held for 69.81% of residents so it is difficult to say whether it will be impacted. Birmingham's LGBT population is estimated to be approx. 45,000 adults so there could be a small impact.
Impact Care Experience:	No

## **Initial Assessment Summary**



Initial Assessment Summary:	The alternative proposed option will impact on the long-term residents of the Care Centres. The majority of long-term residents are over 70 years of age with health conditions so there is the potential for the age and disability protected characteristics to be significantly impacted. A full assessment is needed to explore the potential impact in more detail.
Is a full EIA Required?	Yes

# **Protected Characteristic – Age**

### **Age Impact**

Impact Age:	Yes		
	Eclipse information residents are aged	n shows that just over 90% d 70 and over.	% of current long-term
	Age group	Long term residents	
Age Group	100+ years	2%	
Impacted:	90–99 years	25%	
	80-89 years	40%	
	70-79 years	25%	
	60-69 years	4%	
	50-59 years	4%	1



The preferred option will necessitate all long-term residents at Ann Marie Howes and Perry Tree moving to Kenrick Centre or alternative accommodation operated by private care providers. This change in provision may be unsettling to residents given their age, and has the potential to cause stress and adverse effects on their health and wellbeing. A Health Impact assessment has been completed with a particular focus on the consideration of the health and wellbeing of both residents, their family members and/or carers.

There is extensive academic research in relation to the relocation of citizens when care homes close and how this can be detrimental to residents' health and well-being, and can be associated with increased mortality. A study by the University of Birmingham into Birmingham City Council's closure of a number of Care Homes in the late 2000s found however that outcomes for some of the older people who took part often stayed the same, and sometimes even improved, up to a year after the closures.

Age Impact Details:

Consultation feedback shows this potential impact is of concern to residents and family members. Comments included 'These are elderly and vulnerable people. To consider moving them would have a severe detrimental impact on both their mental and physical wellbeing', 'The residents will be scared and stressed when leaving', '...moving them would simply cause stress and often they pass away when they are moved it's too much for them..'

Concerns were also expressed about the quality of private care provision 'I have visited private homes that are on the BCC list, and I can say that what I saw was at best upsetting and at worse, frightening. There is no comparison to the facilities and care they currently receive', 'The private sector homes that BCC are suggesting the current residents are moved to, are not to the standards that these homes provide.', and whether a move to private provision would result in an increase in costs.

Fears about the safety and security of residents if they had to move were raised 'The Center is safe, he is fed and secure.' 'Because the most vulnerable people in society deserve protection and have their needs met. They need to feel safe and not be at risk of exploitation and abuse, which is more likely to happen when services are understaffed and stretched.'



Some feedback reflected on the adverse impact that losing their relationships with other residents and with care staff in their existing homes might have. '..the citizens will be negatively impacted and their health and wellbeing would suffer if they were to be disrupted at this time of their lives, as they have formed friendships and trust the staff with daily routine in a family surrounding and friendly atmosphere', 'We are talking about some of the most vulnerable people in the community who see AMH as their home with staff and residents regarded as friends / neighbours and family'.

The alternative proposed option will go some way to mitigating those concerns as all current residents can be accommodated at Kenrick Centre if that is what they wish. There will also be an impact on family members and carers who will need to support residents during the transition to a new location. There were a few comments that reflected on this, 'These changes will also burden the staff and families who have to help residents navigate the changes and deal with the impact that this will have on themselves as well (including mental health)'.



There are many blueprints on how citizens can be supported to transition well to alternative Care Homes which will help mitigate the potential impact on and risks to residents. The Council is committed to supporting the transition for residents, families and staff and will apply the principles of good practice in its approach, working in tandem with the Care Quality Commission.

The study referred to earlier by the University of Birmingham entitled 'Achieving Closure, Good practice in supporting older adults during residential care closures', included a study of the outcomes of older people's services in Birmingham, commissioned by the Council and highlights the significant experience and good practice applied by Birmingham Council within this context.

The Council will ensure that our duty under the Care Act 2014 will continue to be met. Care needs for each person will be robustly assessed and addressed in their individual care plan which will focus on their needs and interests. Advocacy support will be provided to those residents who require it during these assessments. We will take a care management approach when considering any alternative provision to ensure it is suited to individual care needs including those age-related issues.

Age Impact Mitigation:

The Council will also continue to fulfil its obligations under the Care and Support and Aftercare (Choice of Accommodation) Regulations 2014 providing residents with a choice over their future accommodation. Social workers will ensure that residents and their families and carers have access to information, advice and guidance throughout any moves, to support them to make informed choices and decisions about their future care needs and any new care home.

Additional appropriate one to one, wrap around support from trained staff familiar to those residents will be provided throughout the process including access to appropriate health interventions, as and when required. A social worker will be assigned to each individual and advice and support will be taken from specialist organisations e.g. Age UK.

We will keep residents and family members informed at all stages of the transition.

## **Protected Characteristic – Disability**

**Disability Impact** 



Disability:	Yes	
	Eclipse records the primary support reason Data shows that long-term residents have	
	Care needs	Long term residents
	Long Term Access and mobility only	7%
	Long Term Mental Health Support	7%
	Long Term Personal care support	53%
	Long Term Support with Memory and	
	Cognition	24%
	Not Recorded	9%
Disability Impact Details:	Research tells us that moving older adult with dementia may cause trauma, which severe, including mood, behaviour and plant with studies have been contradictory, so that older people who relocate may have mortality, particularly those with dementia. As well as those detailed under the age of feedback shows particular concern for the Alzheimer's and dementia 'Extremely characteristics."	can range from mild to hysiological symptoms. come research suggests increased morbidity and a. characteristic, consultation ose residents with allenging for resident with



The approaches to mitigation for impacts on disabled people affected will be similar to those for elderly people affected.

The Council will ensure that our duty under the Care Act 2014 will continue to be met. Care needs for each person will be robustly assessed and addressed in their individual care plan which will focus on their needs and interests. Advocacy support will be provided to those residents who require it during these assessments. We will take a care management approach when considering any alternative provision to ensure it is suited to individual care needs including those age-related issues.

Disability Impact Mitigation: The Council will also continue to fulfil its obligations under the Care and Support and Aftercare (Choice of Accommodation)
Regulations 2014 providing residents with a choice over their future accommodation. Social workers will ensure that residents and their families and carers have access to information, advice and guidance throughout any moves, to support them to make informed choices and decisions about their future care needs and any new care home.

We will take account of national best practice when preparing residents for and during their move to their new home. Support will be given to existing residents throughout any changes in care home, to mitigate the risk in relation to the impact of a move on their health and wellbeing. Appropriate one to one, wrap around support from trained staff familiar to those residents will be provided throughout the process including access to appropriate health interventions, as and when required. A social worker will be assigned to each individual, and arrangements will also be made with the Alzheimer's Society to provide bespoke support on a referral basis when required.

We will keep residents and family members informed at all stages of the transition.

## Protected Characteristic - Sex

### **Sex Impact**

Impact Sex: Yes



## Sex Groups Impacted:

Eclipse data shows that there is a significantly higher number of female residents than male. This is not unexpected given the overall demographics of Birmingham.

Gender	Long term residents
Female	71%
Male	29 %

The alternative proposed option will necessitate long-term residents at Ann Marie Howes and Perry Tree moving to Kenrick Centre or alternative provision operated by private care providers. This change may be unsettling to residents and has the potential to cause stress and adverse effects on residents' health and wellbeing.

## Sex Impact Details:

While it is not known whether there would be any impact specific to female residents, the mitigation measures described in relation to other protected characteristics, would also apply here. We will continue to monitor throughout the transition on whether any particular issues arise that need to be mitigated.

No issues specifically linked to sex have been raised in the consultations.

The Council will ensure that our duty under the Care Act 2014 will continue to be met. Care needs for each person will be assessed and addressed in their individual care plan which will focus on their needs and interests. Advocacy support will be provided to those residents who require it during these assessments.

# Sex Impact Mitigation:

The Council will also continue to fulfil its obligations under the Care and Support and Aftercare (Choice of Accommodation) Regulations 2014 providing residents with a choice over their future accommodation. The resident and if appropriate family members will be fully involved in decision making, allowing any preferences related to their sex to be considered. Existing residents currently have private ensuite rooms at the care centre, if this is a preference for alternative provision then residents and/or family members can advise on this during the decision-making process.



# Protected Characteristic – Gender Reassignment

### **Gender Reassignment Impact**

Impact Gender Reassignment:	No information is held on gender reassignment amongst residents, so we are unable to say whether this characteristic is impacted or not.
	No information is held on gender reassignment amongst residents, however in the 2021 Census 7,826 people in Birmingham identified that their gender identity was different from their sex registered at birth (0.85% of the total population), so there could potentially be a small impact.  The alternative proposed option will necessitate long-term residents at Ann Marie Howes and Perry Tree moving to Kenrick Centre or alternative provision operated by private care providers. This change in provision may be unsettling to residents and has the potential to cause stress and adverse
Gender Reassignment Impact Details:	effects on residents' health and wellbeing.  Public Health's trans community health profile shows 33% of trans people self-report as having a disability, 36% have accessed mental health services in the last 12 months and 70% experienced depression or anxiety in the last 12 months. Given these issues, this change in provision may be unsettling to any trans resident and has the potential to cause stress and adverse effects on residents' health and wellbeing.  No issues specific to this protected characteristic were raised
Gender Reassignment Impact Mitigation:	in the consultations.  The number of residents affected is expected to be either nil or exceedingly small in this characteristic. If a resident is identified in this characteristic, then a bespoke approach to that person's care needs will be taken when considering the new care home.

# **Protected Characteristic – Marriage** and Civil Partnership



**Marriage and Civil Partnership Impact** 

Impact Marriage and Civil Partnership:	
Marriage and Civil Partnership Groups Impacted:	
Marriage and Civil Partnership Impact Details:	
Marriage and Civil Partnership Impact Mitigation:	No information is held on numbers of residents who are married or are in civil partnerships, so we are unable to say whether this characteristic is impacted or not. There are no married couples where both are residing at any of the care centres currently (May 2025).
	According to 2021 Census information, 40% of Birmingham's population is either married or in a registered civil partnership so there is likely to be some impact.
	The alternative proposedoption will necessitate long-term residents at Ann Marie Howes and Perry Tree moving to Kenrick Centre or alternative provision operated by private care providers. Kenrick Centre is not close to Ann Marie Howes or Perry Tree and so, if residents are married or in a civil partnership, this could impact on their partners' ability to visit them. If visits are limited as a result, then the well-being of the resident could be further impacted.
	Issues were raised in the consultations about possible impact on visits to loved ones, it's not known whether these comments were from partners or relatives more generally. Comments included 'Concerns regarding transport as does not drive', 'Moving care homes could have negative impacts on how frequently family/carers are able to visit, particularly if the distance increases and is harder to get to', 'Sometimes family need to visit urgently (e.g. to help with a crisis). Being nearby helps to manage this effectively. If moved to a care home further away, this will be harder to do and have a negative impact on everybody concerned'.



# **Protected Characteristic – Pregnancy and Maternity**

### **Pregnancy and Maternity Impact**

Impact Pregnancy and Maternity:	No information is held on this protected characteristic. It is unlikely that any long-term resident will fall within this characteristic, as care provision at these centres is designed for older people (see age profile of long-term residents).
Pregnancy and Maternity Impact Details:	None.
Pregnancy and Maternity Impact Mitigation:	Not applicable.

# **Protected Characteristic – Ethnicity** and Race

**Ethnicity and Race Impact** 

Impact Ethnicity and Race:	Yes
Ethnicity and Race Groups Impacted:	Eclipse data shows majority of long-term residents are white. Amongst minority ethnic groups the largest numbers are from the Black/Black British/Caribbean or African group.



		thnicity	Long term residents	
		White	84%	
	Black/l	Black British/		
	Caribbe	an or African	7%	
	Asian/	Asian British	2%	
	Mixed	l or Multiple		
Ethnicity and	Ethr	ic Groups	2%	
Race Impact Details:	Not	Recorded	5%	
	The alternative proposed option will necessitate all long-term residents at Ann Marie Howes and Perry Tree moving to Kenrick Centre or alternative provision operated by private care providers.  No issues specific to this protected characteristic were raised in the consultations.			
Ethnicity and Race Impact Mitigation:	- I CIDIONIVIDA GECLIMATIONE AND MAININGUICINA FACINANTE AN THE NA			sessed s on ed to ne basis
	The Council will also continue to fulfil its obligations under the Care and Support and Aftercare (Choice of Accommodation) Regulations 2014 providing residents with a choice over their accommodation. The resident and if appropriate family members will be fully involved in decision making.			

# **Protected Characteristic – Religion**

## **Religion Impact**

Impact Religion:	Yes
Religion Groups Impacted:	Eclipse data shows that the religion of a large number of long-term residents is not recorded. Where it is recorded the main religion amongst residents is Christian.



Religion or beliefs	Long term residents
Christian	47%
No Religion	9%
Other Religion	9%
Sikh	2%
Not Recorded	33%

#### Religion Impact Details:

Arrangements to accommodate residents' and visitors' religious beliefs are made at the existing Care Centres. There is a multifaith room at each centre and visits from faith leaders to residents or groups of residents are facilitated through, for example, use of activity/meeting rooms for communal worship. The alternative proposed option will necessitate long-term residents moving to Kenrick Centre or alternative provision operated by private care providers, some of which may not be able to accommodate residents religious beliefs so easily. Those who move to Kenrick Centre will not be impacted because there is provision available for taking care of religious beliefs.

No issues specific to this protected characteristic were raised in the consultations.

The Council will ensure that our duty under the Care Act 2014 will continue to be met in each option considered. Care needs for each person will be assessed and addressed in their individual care plan which will focus on their needs and interests. Advocacy support will be provided to those residents who require it during these assessments. We will be inclusive in our approach, taking care to ensure residents needs relating to their religion are taken into account.

#### Religion Impact Mitigation:

The Council will also continue to fulfil its obligations under the Care and Support and Aftercare (Choice of Accommodation)
Regulations 2014 providing residents with a choice over their accommodation. The resident and if appropriate family members will be fully involved in decision making so that requirements relating to the resident's religion can be considered.

Recent research shows that there are circa 700 admittable care home beds in Birmingham currently vacant, easily enough to meet the needs of the current Care Centre residents and future residential care needs, and that 70% of private care providers are rated as Good. There is a wide range of care homes within Birmingham including those that cater to a variety of religions.



# **Protected Characteristic – Sexual Orientation**

### **Sexual Orientation Impact**

Impact Sexual Orientation:	No information on this category is held for c72% of long-term residents so it is difficult to say whether this protected characteristic will be impacted. Birmingham's LGBT population is estimated to be approx. 45,000 adults so there could be a small impact.			
Sexual		Sexual orientation	Long term residents	
Orientation		Heterosexual/ Straight	27%	
Groups		Prefer not to say	9%	
Impacted:		Other	2%	
		Not Recorded	62%	
Sexual Orientation Impact Details:	The alternative proposed option will necessitate all long-term residents from Ann Marie Howes and Perry Tree moving to Kenrick Centre or an alternative Care provision operated by private care providers.  There is strong epidemiological evidence that members of the lesbian, gay, bisexual and trans (LGBT) community face significantly worse physical and mental health than their heterosexual and cis-gender counterparts. Health inequalities throughout their lives include an increased risk of developing depression and anxiety. Any change in the provision of care is likely to be unsettling to any LGBT resident and could adversely impact their mental health.			
	No issues specific to this protected characteristic were raised in the consultations.			



The Council will ensure that our duty under the Care Act 2014 will continue to be met in each option considered. Care needs for each person will be assessed and addressed in their individual care plan which will focus on their needs and interests. Advocacy support will be provided to those residents who require it during these assessments. Any alternative provision considered must be suited to their care needs including any linked to sexual orientation.

Sexual Orientation Impact Mitigation: The Council will also continue to fulfil its obligations under the Care and Support and Aftercare (Choice of Accommodation) Regulations 2014 providing residents with a choice over their accommodation. The resident and if appropriate family members will be fully involved in decision making.

Recent research shows that there are circa 700 admittable care home beds in Birmingham currently vacant, easily enough to meet the needs of the current Care Centre residents and future residential care needs, and that 70% of private care providers are rated as Good. There is a wide range of care homes within Birmingham, with some badging themselves as LGBT friendly.

We will take account of national best practice when preparing residents for and during their move to their new home. Appropriate one to one, wrap around support will be given to residents throughout the process, including support from social workers to ensure their transition to their new home is well-managed.

# **Protected Characteristic – Care Experience**

### **Care Experience Impact**

Impact Care Experience:	No - see age range of long-term residents.	
Care Experience Impact Details:		
Care Experience Impact Mitigation:		

### **Other**

### Other Risks or Impacts



Any other risks or impacts:

See full assessment details

## **Full Assessment Summary**

#### **Full Assessment Summary**

Full Assessment Summary:

See full assessment details. We will continue to review the impact on residents and amend the EIA as required.

## **Monitoring**

### **Monitoring Details**

Monitoring Details: The impact of the alternative proposed option will continue to be monitored throughout the phase 3 consultation period and a review of this EIA will take place following analysis of the consultation feedback being received.

Monitoring Officer Email: timsey.deb@birmingham.gov.uk