

# EIA001110 Review of Care Centres

## About your EIA

Reference Number:	EIA001110
Subject of EIA:	Review of Care Centres
Description:	<p>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 14th of October 2024 and the 20th 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 30th June and 25th July 2025.</p> <p>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. 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 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 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</p>

	Intermediate Care at Ann Marie Howes and Perry Tree in line with NHS Neighbourhood Health Guidelines 2025
In support of:	["Amended service"]
Reviewing Frequency:	Quarterly
First review date:	17/08/2026

## Directorate, Division & Service Area

Directorates:	["Adults Social Care"]
Division:	Community Services Equality, Diversity and Inclusion
Service Area:	Service Operations and Partnerships

## Budget Savings

Related to budget savings?:	ASC 126
Budget proposal reference number:	ASC 126

## Officers

Responsible Officer Email:	Timsey.Deb@birmingham.gov.uk
Accountable Officer Email:	shazia.a.hanif@birmingham.gov.uk

## Data Sources

Data sources:	["Eclipse, consultation responses"]
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:	Don't Know
Impact Marriage and Civil Partnerships:	Don't Know
Impact Pregnancy and Maternity:	No
Impact Race:	Yes
Impact Religion or Beliefs:	Yes
Impact Sexual Orientation:	Don't Know
Impact Care Experience:	

## 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

Impact Age:	Yes
Age Group Impacted:	["50-59 years", "60-69 years", "70-79 years", "80-89 years", "90 years or over"]
Age Impact Details:	<p>Eclipse shows just over 90% of current long-term residents are aged 70 and over. Age group Long term residents 100+ years 2% 90-99 25% 80-89 40% 70-79 25% 60-60 4% 50-59 4%</p> <p>The preferred option means all long-term residents at Ann Marie Howes and Perry Tree moving to Kenrick Centre or alternative accommodation in the private sector. This change in provision may be unsettling to residents given their age, and has 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 health and wellbeing of both residents, their family members and/or carers. There is extensive research into 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 several Care Homes in the late 2000s found that outcomes for some older people who took part often stayed the same, and sometimes even improved, up to a year after the closures. 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 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 worst, 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 Centre 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</p>

	<p>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 new proposed option will go some way to mitigating those concerns as all current residents can be accommodated at Kenrick Centre if they so wish. There will be an impact on family members and carers who 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)'. Additional appropriate 1-2-1, wrap around support from trained staff familiar to those residents will be provided throughout including access to appropriate health interventions, 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.</p>
Age Impact Mitigation:	<p>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. 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.</p>

## Protected Characteristic – Disability

Impact Disability:	Yes
Disability Impact Details:	<p>Eclipse records the primary support reason rather than disability. Data shows that long-term residents have a range of care needs. 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% 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. 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. As well as those detailed under the age characteristic, consultation feedback shows particular concern for those residents with Alzheimer's and dementia 'Extremely challenging for resident with Alzheimer's as they thrive in familiarity and so unsettling them with changes could have a big negative impact (e.g. distress and 'escaping' because they forget that they have moved)', 'They are concerned that the vulnerable citizens in the Care Centres would lose valuable relationships they have built over many years, especially those who experience moderate dementia and this would be detrimental to their health and wellbeing and lead to further health and cognitive deterioration'.</p>

Disability Impact Mitigation:	<p>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. 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.</p>
-------------------------------	---

## Protected Characteristic – Sex

Impact Sex:	Yes
Sex Groups Impacted:	["Male","Female"]
Sex Impact Details:	<p>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. 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.</p>
Sex Impact Mitigation:	<p>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. 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.</p>

## Protected Characteristic – Gender Reassignment

Impact Gender Reassignment:	No
Gender Reassignment Impact Details:	<p>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</p>

	<p>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 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 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.</p>
Gender Reassignment Impact Mitigation:	

## Protected Characteristic – Marriage and Civil Partnership

Impact Marriage and Civil Partnership:	No
Marriage and Civil Partnership Groups Impacted:	
Marriage and Civil Partnership Impact Details:	<p>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 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. 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'.</p>
Marriage and Civil Partnership Impact Mitigation:	

## Protected Characteristic – Pregnancy and Maternity

Impact Pregnancy and Maternity:	No
---------------------------------	----

Pregnancy and Maternity Impact Details:	No
Pregnancy and Maternity Impact Mitigation:	

## Protected Characteristic – Ethnicity and Race

Impact Ethnicity and Race:	Yes
Ethnicity and Race Groups Impacted:	
Ethnicity and Race Impact Details:	Ethnicity Long term residents White 84% Black/Black British/ Caribbean or African 7% Asian/Asian British 2% Mixed or Multiple Ethnic Groups 2% 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:	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. We will be inclusive in our approach, taking care to avoid stereotyped assumptions and marginalising residents on the basis of their ethnicity or race, and ensure that any alternative provision considered is suited to their actual care needs. 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

Impact Religion:	Yes
Religion Groups Impacted:	["Christian", "No religion", "Sikh", "Other religions"]
Religion Impact Details:	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% Arrangements to accommodate residents' and visitors' religious beliefs are made at the existing Care Centres. There is a multi-faith 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.
Religion Impact Mitigation:	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.
--	--

## Protected Characteristic – Sexual Orientation

Impact Sexual Orientation:	Yes
Sexual Orientation Groups Impacted:	["Straight or heterosexual", "Gay or lesbian", "Bisexual", "Pansexual", "Asexual", "Queer", "All other sexual orientations"]
Sexual Orientation Impact Details:	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 orientation Long term residents Heterosexual/ Straight 27% Prefer not to say 9% Other 2% Not Recorded 62% 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.
Sexual Orientation Impact Mitigation:	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 orientation Long term residents Heterosexual/ Straight 27% Prefer not to say 9% Other 2% Not Recorded 62% 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.

## Protected Characteristic – Care Experience

Impact Care Experience:	No
Care Experience Impact Details:	See age range of long term residents
Care Experience Impact Mitigation:	

## Other

Any other risks or impacts:	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
-----------------------------	---

	<p>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.</p>
--	--

## Full Assessment Summary

Full Assessment Summary:	
--------------------------	--

## 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

