

EIA000845 Review of Care Centres

About your EIA

Reference Number:	EIA000845
Subject Of EIA:	Review of Care Centres
EIA Approval Status:	Approved



Description:

Birmingham City Council currently provides long and short-term residential care for c114 older adults from 3 care centres. These care centres are also used to provide other services including Intermediate Care.

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 is being undertaken of the Council's internally operated care centres. The review considers future options for how the services can be delivered as efficiently as possible to support citizens to live a quality life. Savings are expected to be delivered from this review.

The review has 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. They don't currently provide value for money to the Council or to people of Birmingham.

Three main categories of future options have been identified:

- 1 - The Council retains all the current Care Centre services
- 2 - The Council retains some of the current Care Centre services
- 3 - The Council doesn't retain any of the current Care Centre services

Option 1a) - The Council continues to operate services from each of the current three Care Centres but develops these into more specialist or complex care. Existing residents would be given the choice to either remain in their current Care Centre or to move to another independent care home. They would be offered a choice of care home using the Council's existing arrangements for identifying providers.

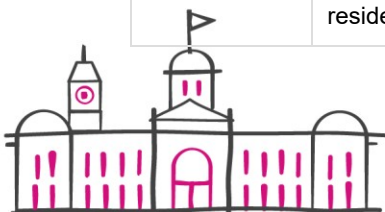
Option 1b) - Due to the short-term nature of P2 services, the turnover of residents within such beds and the high number of visiting professionals, this type of service may be disruptive for existing long-term residents. Existing residents would be given the choice to either remain in their current Care Centre or to move to another independent care home. They would be offered a choice of care home using the Council's existing arrangements for identifying providers.

Option 1c) - The Council continues to operate long term care services but charges for services at the rate they cost to deliver. Existing residents could remain in their current Care Centre subject to affordability; residents who could not afford the fees would be given a choice of alternatives homes.

Option 1d) - The Council continues to operate long term care services but makes a wide range of efficiencies. Existing residents could remain or be given a choice to move. Those remaining may experience some change to service standards eg numbers of staff, but minimum safe standards would be adhered to.

Option 1e) – Do nothing. No direct impact on current residents, however savings would have to be identified and delivered elsewhere and may impact on a different or wider group of citizens.

Options 2a), 2b) and 2c) - The Council continues to operate long term residential care services as currently, but from a single Care Centre. The 61 long term residents remaining could be accommodated into a single Care Centre (as each one can accommodate 64 residents) but this would mean some citizens would have to move from their existing Care



	<p>Centre. Residents not wishing to move to the single Care Centre would be given a choice to move to an independent care home.</p> <p>Option 2d) - This option would see the Council continuing to operate long term residential care services as currently, but from two Care Centres. Existing residents at Ann Marie Howes and Perry Tree could remain in their current Care Centre. Residents at Kenrick Centre not wishing to move to another Care Centre, would be given a choice to move to an independent care home.</p> <p>Option 3a) – Existing residents would be able to remain at least in the short-term. The new care provider might however introduce changes which alters standards/provision of care and might need residents to move at a later date.</p> <p>Option 3b) and 3c) – Existing residents would have to move to another independent care home, they would be offered a choice of care home using the Council's existing arrangements for identifying providers.</p>
In Support Of:	["Amended service"]
Reviewing Frequency:	Quarterly
First Review Date:	1/31/2025

Directorate, Division & Service Area

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

Budget Savings

Related to Budget Savings?:	
Budget Proposal Ref. No:	ASC 126

Officers

Responsible Officer Email:	tracey.murray@birmingham.gov.uk
Accountable Officer Email:	alison.malik@birmingham.gov.uk

Data Sources



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 transgender, 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

Initial Assessment Impacted Characteristics	Age: , Disability: , Sex: , Gender Reassignment: , Marriage and Civil Partnership: , Pregnancy and Maternity: , Race: , Religion or Beliefs: , Sexual Orientation: , Care Experience/Care Leaver:
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Initial Assessment Summary

Initial Assessment Summary:	Many of the future options being considered will impact on the residents of the Care Centres, the long-term residents in particular. The majority of long-term residents are over 70 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?:	YesSee full assessment details. The EIA will need to be reviewed once a decision is made on which of the future options will be adopted.



Full Equality Impact Assessment

Age

Impact Age:																																	
Age Group Impacted:	Occupancy rates held on Eclipse show that just over 85% of those currently using this service are aged 70 and over.																																
Age Impact Details:	<table border="1"> <thead> <tr> <th>Age group</th> <th>Long term residents</th> <th>Short term residents</th> <th>Total</th> </tr> </thead> <tbody> <tr> <td>100+ 0.53%</td> <td>1.67%</td> <td>0%</td> <td></td> </tr> <tr> <td>90 – 99 years 20.86%</td> <td>25%</td> <td>18.9%</td> <td></td> </tr> <tr> <td>80-89 years 44.39%</td> <td>46.67%</td> <td>43.31%</td> <td></td> </tr> <tr> <td>70-79 years 19.79%</td> <td>18.33%</td> <td>20.47%</td> <td></td> </tr> <tr> <td>60-69 10.7%</td> <td>5%</td> <td>13.39%</td> <td></td> </tr> <tr> <td>50-59 years 2.67%</td> <td>3.33%</td> <td>2.36%</td> <td></td> </tr> <tr> <td>40-49 years 1.07%</td> <td>0%</td> <td>1.57%</td> <td></td> </tr> </tbody> </table> <p>Options identified could result in care being delivered by an alternative provider in the same location or residents having to move to alternative locations. Should any of these options be implemented, all age groups may be impacted.</p> <p>Any change in provision may be unsettling to residents given their age and consideration will be given on how to support them and their families during the transition to minimise stress and the potential for adverse effects on residents' health and wellbeing.</p>	Age group	Long term residents	Short term residents	Total	100+ 0.53%	1.67%	0%		90 – 99 years 20.86%	25%	18.9%		80-89 years 44.39%	46.67%	43.31%		70-79 years 19.79%	18.33%	20.47%		60-69 10.7%	5%	13.39%		50-59 years 2.67%	3.33%	2.36%		40-49 years 1.07%	0%	1.57%	
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<p>Age Impact Mitigation:</p>	<p>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. Any alternative provision considered must be suited to their care needs including those age-related issues.</p> <p>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 although changes to service provision are likely to be necessary. The resident and if appropriate family members will be fully involved in decision making.</p> <p>Appropriate support will be given to existing residents throughout the process, including support from social workers at the appropriate time to ensure any transition is well-managed. Emotional support will be provided during the consultation by a range of professionals.</p> <p>The above mitigation should help alleviate family concerns around the impact of any change on their loved one's wellbeing including; the quality of alternative provision; location of alternatives; visiting arrangements; and affordability.</p> <p>The consultation has been designed to ensure each resident can meaningfully engage in it, ensuring they understand the options being considered and are given the opportunity to share their views. We will carefully consider the methods of communication and consultation used to ensure it allows each resident to participate and takes into account the likely lower rates of digital literacy amongst residents. Family members will also have the opportunity to put forward their views in the consultation. The consultation will ask respondents to tell us the impact each option will have on them and any support they will need.</p> <p>Recent research shows that there are circa 700 admissible 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.</p> <p>Should any of the options result in a reduction of short term care home bed provision, this may result in significant delays in hospital discharge. The NHS and the Council will work together to develop alternative solutions should this be necessary, however the preferred option does mitigate this risk.</p> <p>The EIA will be updated as the project progresses towards a formal decision by the Council to ensure that any individual impacts are mitigated where possible.</p>
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Disability

<p>Impact Disability:</p>	<p>Yes</p>
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Disability Impact Details:

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.

Care needs	Short term residents	Total	Long term residents
Personal care support	39.37%	43.32%	51.67%
Support with memory & cognition	3.94%	10.70%	25.00%
Mental Health Support	2.36%	5.35%	11.67%
Access and mobility only	2.67%	6.67%	0.79%
Support for Social Isolation or other support	0.53%	1.67%	0.00%
Not Recorded	53.54%	37.43%	3.33%

Options identified could result in care being delivered by an alternative provider in the same location or residents having to move to alternative locations. Should any of these options be implemented, all those with disabilities may be impacted.

Any change in provision may be unsettling to residents given their disability and consideration will be given on how to support them and their families during the transition to minimise stress and the potential for adverse effects on residents' health and wellbeing.



Disability Impact Mitigation:

For the current care home residents there is often a close relationship between their age and their care needs/disability so mitigation is the same.

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. Any alternative provision considered must be suited to their care needs including those related to their specific disability.

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, although changes to service provision are likely to be necessary. The resident and if appropriate family members will be fully involved in decision making on accommodation most suitable to the resident's disability and care needs.

Appropriate support will be given to existing residents throughout the process, including support from social workers at the appropriate time to ensure any transition is well-managed and takes account of the resident's care and disability needs. Emotional support will also be provided by a range of professionals.

The above mitigation should help alleviate family concerns around the impact of any change on their loved one's wellbeing including; the quality of alternative provision; location of alternatives; visiting arrangements; and affordability.

The consultation has been designed to ensure each resident can meaningfully engage in the consultation, ensuring they understand the options being considered and are given the opportunity to share their views. We will consult with residents in a way tailored to their disability needs, so that their views can be factored into decisions on the future service delivery. Family members will also have the opportunity to put forward their views in the consultation. The consultation will ask respondents to tell us the impact each option will have on them and any support they will need.

Recent research shows that there are circa 700 admissible care home beds in Birmingham currently vacant, catering for a wide range of disabilities and care needs, easily enough to meet the needs of the current and future Care Centre residents, and that 70% of private care providers are rated as Good.

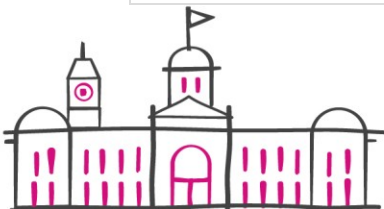
Should any of the options result in a reduction of short term care home bed provision, this may result in significant delays in hospital discharge. The NHS and the Council will work together to develop alternative solutions should this be necessary, however the preferred option does mitigate this risk.

The EIA will be updated as the project progresses towards a formal decision by the Council to ensure that any individual impacts are mitigated where possible. Emotional support will also be provided.

Sex

Impact Sex:

Yes



Sex Groups Impacted:	Eclipse data shows that there is a significantly higher number of female residents than male, particularly in the long-term residents. This is not unexpected given the overall demographics of Birmingham.												
Sex Impact Details:	<table border="1" data-bbox="566 353 1300 515"> <thead> <tr> <th>Gender</th> <th>Long-term residents</th> <th>Short-term residents</th> <th>Total</th> </tr> </thead> <tbody> <tr> <td>Female</td> <td>65.00%</td> <td>55.91%</td> <td>58.82%</td> </tr> <tr> <td>Male</td> <td>35.00%</td> <td>44.09%</td> <td>41.18%</td> </tr> </tbody> </table> <p>Options identified could result in care being delivered by an alternative provider in the same location or residents having to move to alternative locations. Should any of these options be implemented, all genders may be impacted.</p> <p>Any change in provision may be unsettling to residents and consideration will be given on how to support them and their families during the transition to minimise stress and the potential for adverse effects on residents' health and wellbeing.</p>	Gender	Long-term residents	Short-term residents	Total	Female	65.00%	55.91%	58.82%	Male	35.00%	44.09%	41.18%
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Female	65.00%	55.91%	58.82%										
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Sex Impact Mitigation:	<p>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.</p> <p>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, although changes to service provision are likely to be necessary. 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 consultation.</p> <p>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.</p> <p>The EIA will be updated as the project progresses towards a formal decision by the Council to ensure that any individual impacts are mitigated where possible.</p>												

Gender Reassignment

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.
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<p>Gender Reassignment Impact Details:</p>	<p>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.</p> <p>Options identified could result in care being delivered by an alternative provider in the same location or residents having to move to alternative locations. Should any of these options be implemented, all genders may be impacted.</p> <p>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, any change in provision may be unsettling to any trans resident and consideration will be needed on how to support them and their families throughout any changes to the service to minimise stress and the potential for adverse effects on residents' health and wellbeing.</p>
<p>Gender Reassignment Impact Mitigation:</p>	<p>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 any change of care home.</p>

Marriage and Civil Partnership

<p>Impact Marriage and Civil Partnership:</p>	<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.</p>
<p>Marriage and Civil Partnership Groups Impacted:</p>	<p>No information is held on numbers of residents who are married or are in civil partnerships. There are no married couples where both are residing at any of the care centres currently (September 2024). 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.</p>
<p>Marriage and Civil Partnership Impact Details:</p>	<p>Options identified could result in care being delivered by an alternative provider in the same location or residents having to move to alternative locations. If residents have to move location, and they are married or in a civil partnership, this could impact on their partners' ability to visit them. If this places limitations on visits then the well-being of the resident could be impacted.</p>



<p>Marriage and Civil Partnership Impact Mitigation:</p>	<p>It is not anticipated that there will be a significant impact on this characteristic.</p> <p>The Council will 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, although changes to service provision are likely to be necessary. The resident and their spouse/partner will be fully involved in decision making and their preferences and needs will be considered.</p> <p>Under the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014: Regulation 9A, all residential care homes (including the Care Centres) must ensure they have policies and practice that ensures that people staying in a care home can receive visits from people they want to see. The Care Quality Commission regulate and enforce these requirements and any issues with this element of service provision is likely to be clear in any CQC inspection reports.</p> <p>The above mitigation should help alleviate family concerns around the impact of any change on their loved one's wellbeing including; the quality of alternative provision; location of alternatives; visiting arrangements; and affordability. They will have an opportunity to further share their views during the consultation.</p> <p>The EIA will be updated as the project progresses towards a formal decision by the Council to ensure that any individual impacts are mitigated where possible.</p>
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Pregnancy and Maternity

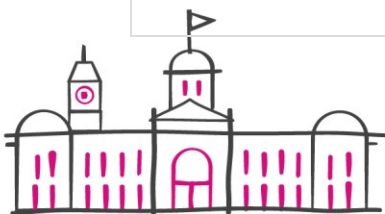
<p>Impact Pregnancy and Maternity:</p>	<p>No information is held on this protected characteristic. It is unlikely that any resident will fall within this characteristic, as care provision at these centres is designed for older people and they could not accommodate mothers with children.</p>
<p>Pregnancy and Maternity Impact Details:</p>	<p>Alternative options in relation to the provision of residential care are currently being explored. This could result in care being delivered by an alternative provider in the same location or residents having to move to alternative care centres.</p>
<p>Pregnancy and Maternity Impact Mitigation:</p>	<p>It is considered highly unlikely that this characteristic will be impacted.</p>

Race

<p>Race:</p>	<p>Yes</p>
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Race Groups Impacted:	Eclipse data shows majority of residents are white. Amongst minority ethnic groups the largest numbers are from the Black/Black British/Carribbean or African group.		
Race Impact Details:	Religion or beliefs Total	Long-term residents	Short-term residents
	Christian 43.32%	48.33%	40.94%
	Muslim 0.53%	0.00%	0.79%
	Sikh 0.53%	1.67%	0.00%
	Hindu 0.53%	0.00%	0.79%
	Other Religion 9.63%	13.33%	7.87%
	No Religion 10.70%	11.67%	10.24%
	Not Recorded 34.76%	25.00%	39.37%
Race Impact Mitigation:	<p>Alternative options in relation to the provision of residential care are currently being explored. This could result in care being delivered by an alternative provider in the same location or residents having to move to alternative care centres.</p> <p>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. 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.</p> <p>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 although changes to service provision are likely to be necessary. The resident and if appropriate family members will be fully involved in decision making.</p> <p>The consultation has been designed to ensure each resident can meaningfully engage in the consultation, ensuring they understand the options being considered and are given the opportunity to share their views. We will carefully consider the methods of communication and consultation used, including alternative language requirements, to ensure all residents can fully participate.</p> <p>The EIA will be updated as the project progresses towards a formal decision by the Council to ensure that any individual impacts are mitigated where possible.</p>		



Religion or Belief

Impact Religion or Belief:	Yes		
Religion or Belief Groups Impacted:	Eclipse data shows that the religion of a large number of residents is not recorded. Where it is recorded the main religion amongst residents is Christian.		
Religion or Belief Impact Details:	Religion or beliefs Total	Long-term residents	Short-term residents
	Christian 43.32%	48.33%	40.94%
	Muslim 0.53%	0.00%	0.79%
	Sikh 0.53%	1.67%	0.00%
	Hindu 0.53%	0.00%	0.79%
	Other Religion 9.63%	13.33%	7.87%
	No Religion 10.70%	11.67%	10.24%
	Not Recorded 34.76%	25.00%	39.37%
<p>Alternative options in relation to the provision of residential care are currently being explored. This could result in care being delivered by an alternative provider in the same location or residents having to move to alternative care centres.</p>			



<p>Religion or Belief Impact Mitigation:</p>	<p>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. We will be inclusive in our approach, taking care to ensure residents needs relating to their religion are taken into account.</p> <p>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 although changes to service provision are likely to be necessary. 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.</p> <p>Recent research shows that there are circa 700 admissible 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 specific religions.</p> <p>The consultation has been designed to ensure each resident can meaningfully engage in the consultation, ensuring they understand the options being considered and are given the opportunity to share their views.</p> <p>The EIA will be updated as the project progresses towards a formal decision by the Council to ensure that any individual impacts are mitigated where possible.</p>
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Sexual Orientation

<p>Impact Sexual Orientation:</p>	<p>No information on this category is held for 72.7% of 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.</p>												
<p>Sexual Orientation Groups Impacted:</p>	<p>Eclipse data shows that there is a significantly higher number of female residents than male, particularly in the long-term residents. This is not unexpected given the overall demographics of Birmingham.</p>												
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Sexual Orientation Impact Mitigation:	<p>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.</p> <p>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, although changes to service provision are likely to be necessary. 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 consultation.</p> <p>Recent research shows that there are circa 700 admissible 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.</p> <p>The EIA will be updated as the project progresses towards a formal decision by the Council to ensure that any individual impacts are mitigated where possible.</p>
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Care Experience / Care Leavers

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

Other Risks or Impacts

Any Other Risks Or Impacts:	See full assessment details
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Full Assessment Summary

Full Assessment Summary:	See full assessment details. The EIA will need to be reviewed once a decision is made on which of the future options will be adopted.
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Monitoring



Monitoring Details:	The EIA will be reviewed once a decision is made on the option to be taken forward. The aim behind each of the options is to provide the best care possible and improve the health of our residents/citizens.
Monitoring Officer Email:	

