

1. Community Meals Transition Survey Report

- 1.1. The contents of this paper can be shared with the general public
- 1.2 Date of Health & Wellbeing Board meeting 13th June 2017
- 1.3 Author of the Paper and contact details
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2. Summary

- 2.1 This paper summarises the background to and findings from a survey undertaken by Brighton and Hove Impetus (an independent organisation based in Brighton & Hove), who were commissioned in October 2016 to undertake interviews with a sample of people who had been affected by the ending of the council contracted Community Meals Service on 31/03/2016.

3. Decisions, recommendations and any options

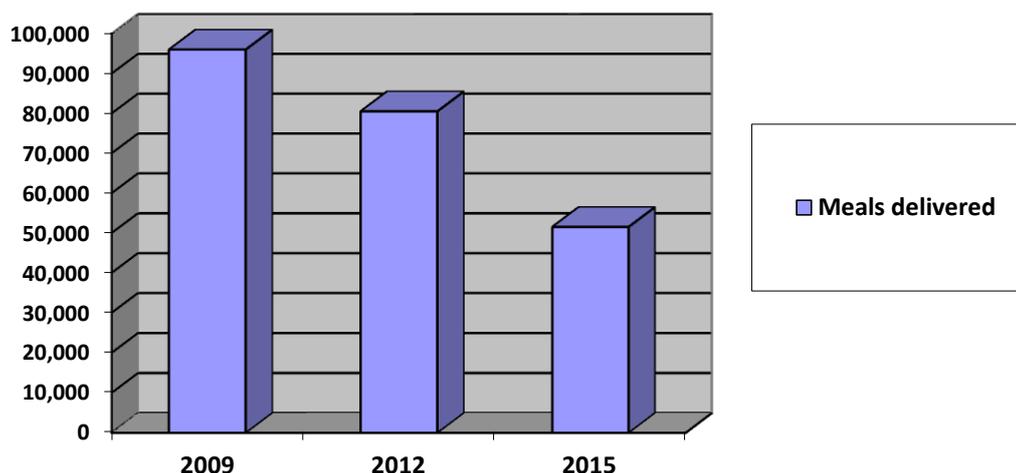
- 3.1 The paper is for noting although the report will inform any future plans regarding community food provision and reducing social isolation across the city.

4. Relevant information

4.1 Background to the Community Meals service

- 4.1.1 Brighton and Hove City Council formerly purchased its Community Meals Service via a contract with the Royal Voluntary Service ('The RVS'). The Contracted service was for the home delivery of hot and frozen meals, including variations for specific dietary requirements. The customer group included older people, people with dementia, adults with a learning disability or mental health issues and/or with a sensory impairment or other physical disability.
- 4.1.2 The service also provided a pragmatic well-being check, carried out by the delivery driver, which, when combined with the provision of meals, enabled vulnerable people to live in their own homes for longer, whilst maintaining their physical and emotional wellbeing and reducing pressure on other services.

4.1.3 The RVS had run the Brighton & Hove Community Meals Service since 1997 although the number of people requesting this provision had declined substantially over the years. The current three year contract was due to expire in March 2016 with a possible year extension available. The 2013 contract was the first time that a client contribution was required from those receiving meals although the decline in meal take-up predated the introduction of the contribution.



4.1.4 A targeted saving of £30,000 was under discussion within Adult Social Care for 2016/17 (from a total budget of £105,440 in 2015/16) but in October 2015 the RVS informed Brighton and Hove Council that they could not continue to provide meals without an increase in the council subsidy. This was due to the reduced number of meals being ordered which had substantially increased the average cost per meal. At a time of significant financial pressure the council concluded that there was no additional funding available to continue with the arrangement for a non-statutory service and the RVS concluded that they could not continue to provide the service; the current service would thus end on 31/03/2016.

4.1.5 In December 2015 the council looked into other meal delivery services and meal options for people in the community. As well as a range of lunch clubs there were a number of providers who were interested in applying to be on an Adult Social Care approved provider list to provide the following services:

- hot lunchtime meals to be delivered daily (a 365 day a year service);
- a menu that varied throughout the year;
- provide for special dietary requirements where possible;
- complete a 'safe and well' check (to assure the wellbeing of the client and follow agreed procedure, if any issues need flagging up);

- Ensure all meals met the National Association of Care Caterers (NACC) standards.

4.2 The transition from contract to an approved provider list

- 4.2.1 Throughout the transition all service users still in receipt of the RVS meals service were provided with information communicating the changes. The council did not distinguish between those who were assessed and in receipt of adult social care packages and those that did not satisfy the criteria or were self-funding.
- 4.2.2 In January 2016, all the 220 people affected were sent a letter advising them that the RVS meals were coming to an end. They were assured that there would be a smooth transition to the new-style service at the beginning of April 2016 and were provided with the phone and email details of the person in the council to contact if they had any concerns plus AccessPoint contact information.
- 4.2.3 In February 2016 the same people were sent another letter and a pack, updating them of the new meals providers (approved by the council with the support of the Brighton & Hove Food Partnership) with all relevant contact details. The providers were: License to Freeze (hot food), Mother Theresa (hot food), Oakhouse Foods (chilled ready meals). Included in the pack was a lunch club list, a list of shops that delivered meals for people in the community and guidance around accessing how to access them. A progress report on community meals was provided as a Chair's communication for the HWB held on 2nd February 2016.
- 4.2.4 In early March 2016 the vast majority of the service users were contacted by the council on the telephone, to explore if they required any support to make the change to a new provider or if they had already made other arrangements. In cases where the person was unreachable by telephone, the Commissioning and Performance Team sought assurance that individuals had found alternative solutions from a range of professionals including the Adult Social Care assessment teams, homecare providers delivering individuals packages of care, sheltered housing providers and mental health services. Everyone who was affected by these changes was contacted directly in one way or another during this period.
- 4.2.5 In April 2016 the contracted delivery of community meals ceased. AccessPoint, all social work teams and the home care providers were alerted to the change in case there were any issues arising. It would appear that there were only 3 contacts made to AccessPoint and these were quickly resolved.

4.3 Further review

4.3.1 In an earlier report made to the Older People's Council at their request it had been proposed that a follow-up survey was undertaken during 2016/17 to see how people were managing the change.

4.3.2 In September 2016 Impetus were commissioned to undertake an independent review by the Commissioning & Performance Team to seek assurances that the individuals had dealt with the changes and had a new meal provision in place or had made alternative arrangements.

Impetus was given a sample of 99 people to contact and managed to complete interviews on the telephone with 47 people in total over a period of 5 days (47.5%). The feedback from this work is outlined below:

4.3.2.1 After long commitment from RVS providing meals a number of the service users commented that they were sad to see RVS go.

4.3.2.2 Many of the service users who completed the survey expressed thanks and some stated that they would miss the delivery of hot meals.

4.3.2.3 Several people commented that the meals service suppliers suggested as alternative options by the Council were expensive in comparison to RVS and they had sought more cost effective solutions.

4.3.2.4 The majority of people responded well to the change and some had found inventive, alternative ways of getting access to meals, including the following:

Going shopping independently	2
Cooking independently	2
Putting own ready meals in the oven/microwave	4
Family members/friends providing meals.	5
Kosher meals from Golders Green for specialised meat	1
Homecare provider carers put meals in oven	4
Homecare provider carers preparing sandwiches for lunch	3
Going out for lunch (1 day or more per week)	1-6

4.3.2.5 Other service users organised their own choice of meal providers including Wiltshire Farm foods (frozen meals) (11), Coleman's Foods (hot food) (6), Iceland, Tesco and Sainsbury's supermarkets for ready meals and home deliveries, and the local greengrocers.



- 4.3.2.6 Some opted for a combination of support from carers visiting as part of a homecare package and ready meals.
- 4.3.2.7 There were a few reports of initial teething problems, for example, someone reported that they had tried food from one provider and not liked the food, and had then had to re-arrange to deliveries from another provider, which they were now happy with. A few people said they started with a meal provider but it proved expensive for them, so they had sought a more cost effective option.
- 4.3.2.8 A couple of people, who were relying on family or friends to support them or provide their meals, expressed their concern of the risk if this arrangement fell through.
- 4.3.2.9 The majority of people who took part in this review reported that once any initial issues were resolved, that they felt that their choice of meal provision had worked out well for them.
- 4.3.2.10 Some of the survey responses as written by the interviewers:
- Mr W (age 86): “has a car and is doing all his shopping himself. He is happy shopping and cooking for himself and says that he might as well while he still can”.
 - Mrs M (age 85): “Mrs M gets support from XYZ care, they cook her breakfast and dinner for her (toast) and she prepares her lunch herself with support. Mrs M ... feels she is lucky that she has a good group of people around her that she could call if she wanted to eat socially”.
 - Mr N (age 89): using Wiltshire Farm Foods: “finds it convenient having the meals delivered in bulk as it means that he is not time bound; his hobbies keep him busy and connected with a community of other like-minded people”.
 - Mrs G (age 91): daughter provides her with ready meals from Sainsbury: “This arrangement is working out very well, Mrs G has no trouble in preparing the meals, and says that they work out cheaper for her, she also feels she has more choice and control now about when she wants to eat her meal”.
 - Mr M (age 75): “is going out every day for lunch - very happy”.
 - Mrs C (age 87): “her friend buys her meals and she already attended St George’s Hall on a Thursday and the Bevy on a Friday” (lunch clubs).
 - Mr M (age 67): “Mr M’s daughter gets him meals from the supermarket that he prepares himself. The arrangement is going well but Mr M much preferred meals on wheels and he misses his puddings”.

- Mr I (age 79): “felt that he has little interest in attending a lunch club as he says that he is lazy and as he gets his meals delivered he has no desire to go out to eat; his daughter in law now provides meals to him and his carer puts them in the microwave for him”.
- One man was too busy to be interviewed as he was late leaving home to attend an activity.

4.4 Take Up of BHCC approved Meal Providers:

Meal provider	Take up (numbers)
License to Freeze (hot food)	9
Mother Theresa (hot food)	7
Oakhouse Foods (chilled ready meals)	3

4.4.1 As a percentage of the respondents to this survey this is a take-up rate of only 40% which is somewhat disappointing. However, this may reflect the higher cost of the meals from these providers; despite numerous efforts the locally based Coleman’s Foods (which were cheaper than the three providers above) did not come forward to be on the approved list.

4.5 Conclusions drawn from the survey and next steps

4.5.1 Having considered all the feedback provided by this review the Commissioning & Contracts Team are assured that the people affected by this change have managed to find alternative access to meals through a variety of means. This view is supported by ongoing communication with AccessPoint, the first point of contact for people with potential social care issues. There are five people requiring follow-up communication on the basis of this survey (two of which require the information on Lunch Clubs to be sent again).

4.5.2 People have not only taken up the meal providers suggested by the council, but they have also chosen a variety of independent solutions, which in a number of cases has seen them accessing the community and cooking for themselves.

4.5.3 However, it is recognised that if people choose independent solutions then it is not necessarily possible to guarantee nutritional values or quality of food. These issues are part of the general Public Health remit and the wider commitment to a healthy city as reflected in the city’s partnership vision, principles and priorities and the council’s Corporate Plan. The Corporate Plan priority for Health & Wellbeing is to achieve “healthy citizens and communities, who are active, protected and included in society” by “promoting healthy choices and lifestyles to



keep people well and prevent long term health conditions". See also 5.5.

- 4.5.4 The consideration of making healthy choices about food did take place as part of the process of supporting people to make changes at the end of the contract; Adult Social Care provided access to other information, including transport, lunch clubs, the Casserole Club and the Brighton and Hove Food Partnership. Food provision, quality and related services (such as lunch clubs) have also been the subject of the quarterly Age Friendly City meeting and links are in place to the Citywide Connect agenda of reducing social isolation for older people in the city. The list of lunch clubs has also been updated (February 2017) and will be available online via the Citywide Connect, the Brighton and Hove Food Partnership, the council and will be posted out on request.
- 4.5.5 Reflecting the ongoing commitment to food quality and nutrition within the city the Brighton and Hove Food Partnership and Age UK Brighton & Hove are launching a new booklet 'Eating well as you age to stay healthy' on 1st June 2017. The booklet is intended for older people living in the community, to raise awareness of malnutrition, how to spot it and what can be done to prevent it. Once launched, Adult Social Care will ask the Brighton and Hove Food Partnership and Age UK Brighton & Hove to attend the quarterly forums organised for the Care Home sector and the Home Care providers.

5. Important considerations and implications

Legal

- 5.1 There are no legal implications to this report.

Lawyer consulted: Elizabeth Culbert

Date: 06/03/2017

Finance

- 5.2 In 2016/17 there was a savings target of £0.030m for the Community Meals contract leading to a start of year budget of £0.074m. This allowed for the funding any unexpected consequences of ending the contracted service. The invoices that have been paid in 2016/17 total £0.009m. With no further identified expenditure the remaining £0.065m has been put forward as an underspend in 2016/17.
- 5.3 In 2017/18 £0.073m has been put forward as a saving against Community Meals.

Finance Officer consulted: Sophie Warburton

Date: 01/03/2017



Equalities

- 5.4 An Equalities Impact Assessment was completed prior to the changes being implemented. In addition the Impetus Lay Assessors undertook client engagement in November 2015 (done annually) to ascertain opinions of the current service. Over 30% of the meal clients were contacted and the overarching opinion was that there appeared to have been some deterioration in the service since the last annual survey. The key sources of dissatisfaction were the variety of food and the delivery time issues which it was believed should be addressed via a multiple provider and options market.

Sustainability

- 5.5 There are no specific recommendations but the Brighton & Hove Food Partnership were a key partner in the changes that were considered and made which are both fair and sustainable.

Health, social care, children's services and public health

- 5.6 Both Public Health and the Clinical Commissioning Group commissioners were aware of the ending of the contract as part of the broader Age Friendly City agenda and the Older People's commission to reduce social isolation (joint ASC/CCG/Public Health funding). Issues around food for vulnerable people remain on the agenda including a Hospital Discharge and Food half-day meeting organised in October 2016 by the Brighton & Hove Food Partnership to discuss how providers support vulnerable people returning home from hospital. This revealed a range of 'food to go' options although these operate somewhat inconsistently across wards/A&E. The Brighton & Hove Food Partnership has expressed interest in taking the issues raised at this event forward.
- 5.7 A further report on food-related topics across the entire population of Brighton and Hove is planned; this will include issues of food poverty, food partnerships, the use of food banks across the city etc. and will link with sustaining a healthy, happy and productive workforce and reducing sickness and hospital admissions. It is likely to be presented to the November 2017 Health & Wellbeing Board.

6. Supporting documents and information

- 6.1 None

