

## **Review of Meals on Wheels Arrangements in Thurrock**

Thurrock Council would like people who use our services; carers, staff; partners and the interested public in Thurrock to comment on the attached proposal.

Large print, translations, text-only, and audio formats of this information pack can be produced on request. Please call 01375 366392 or email [social.care@thurrock.gov.uk](mailto:social.care@thurrock.gov.uk) for these alternative formats.

### **1. Why are we asking you to take part in this consultation?**

Thurrock Adult Social Care is having to review our current arrangements for Meals on Wheels services. This is because;

- If the reduction in demand for this service continues the current service will become financially unviable.
- Our current arrangements do not offer choice to people
- The amount of central government funding to Council's has reduced and we need to make efficiencies.

All future options are considered. Prior to consultation this was shared with the Health and Wellbeing Overview and Scrutiny Committee to find out their preferred option. We want to seek your feedback on this and all other options.

### **2. How does Thurrock do things now?**

At the moment Thurrock Council commissions meals on wheels from the Royal Voluntary Service (Formerly WRVS – Women's Royal Voluntary Service). We have a contract and pay on a volume basis (i.e. the more meals we buy the cheaper each meal costs). This contract ends on 31/03/15.

Currently, somebody would get a meals on wheels service if they have been assessed as having either a critical or substantial need under the FACS (Fair Access to Care Services) criteria.

### **3. Options**

As at September 2013 there are 146 people in receipt of meals on wheels.

This service is very important and delivered to our most vulnerable people in the community. The proposed change is to ensure that we can continue to deliver meals on wheels in the future and to offer clients a choice in provider.

The demand for meals on wheels has significantly reduced over the last few years (In 2009/10 56,535 hot meals were provided, it is estimated in 2013/14 this will be down to 33,000 meals). As meals on wheels are purchased on a volume basis (i.e. the more meals we buy the cheaper each meal costs) this is becoming financially unviable: This service cost the Council approx £140k per annum in addition to client contributions of £4 per meal.

## **What is the preferred option?**

Overview and Scrutiny Members preferred option is a combination of option 3 and 6 (please see table below);

- To let the current contract end. To provide a subsidy (in the form of a Direct Payment) to eligible service users and provide support and advice to arrange a meals service.

This option provides:

- Choice to service users – they can use their subsidy to purchase a meal from any provider
- The ability to continue to afford a meal – By providing a subsidy, service users will not have to experience an increase in their contribution
- Support and advice – so that vulnerable people are helped to access a meals service that suits them
- Significant financial savings for the Council to be reinvested in other services

The subsidy will be set at £1.25 per meal. The reason for this amount is because the meals service operating in both Havering and Barking and Dagenham without contract can deliver a two course hot meal at a cost of £5.25 (service users currently contribute £4). This organisation currently operates our school meals (and delivers frozen meals) and is willing to deliver hot meals in the area. However, the existing provider or any other local provider e.g. café, pub, casserole club etc can provide a meal under this approach as people can use their subsidy to buy a meal from a provider of their choice. This should result in a more diverse market and give people greater choice.

Anybody with dementia/cognitive impairments who are unbefriended will be fully supported through the change.

## What are the other options?

Option	Pros	Cons
1. Continue with current service delivery model (although this will be retendered during 2014).	<ul style="list-style-type: none"> <li>Vulnerable people receive a hot meal, welfare check and medication prompt (where appropriate).</li> </ul>	<ul style="list-style-type: none"> <li>If the drop in level of demand continues we will be paying a higher unit price making the service financially unviable.</li> <li>This does not offer the service user choice.</li> </ul>
2. Continue with current service delivery model but implement full cost recovery	<ul style="list-style-type: none"> <li>The council would save between £120k and £150k per annum (dependent on volume).</li> <li>Vulnerable people continue to receive a hot meal and welfare check.</li> </ul>	<ul style="list-style-type: none"> <li>Based on current demand and prices, service users would have to pay £7.78 per meal. An increase of £3.78 in addition to the £4.00 they currently contribute</li> <li>This would result in an addition £1,380 cost per year. This may put people in a position where they could not continue to meet the cost of provided meals.</li> <li>This could also result in a significant drop in demand, resulting in an even higher unit price and the service becoming financially unviable or extra cost to the individual.</li> </ul>
3. Stop providing a meal service and provide support and signposting information.	<ul style="list-style-type: none"> <li>The council would save between £120k and £150k per annum (dependent on volume).</li> <li>Able to secure a reputable provider to work in the area without a contractual relationship with the Council.</li> <li>Greater choice for service user</li> </ul>	<ul style="list-style-type: none"> <li>Could place vulnerable people at risk if insufficient alternative provision in the market.</li> <li>Council may need to replace this service with additional home care calls for those people (approx 4) in receipt of a medication prompt.</li> <li>Possible increased cost to service users.</li> <li>May result in redundancies of RVS employees</li> </ul>
4. Provide only a frozen meal service.	<ul style="list-style-type: none"> <li>The council would save between £120k and £150k per annum as the cost of the meal would be met by the service user.</li> </ul>	<ul style="list-style-type: none"> <li><b>This is not a viable option as our current recipients are either unable to stand to heat a meal or alternatively are unable to remember to heat and eat a meal.</b></li> </ul>

<p>5. Provide a frozen meal service plus 15 minute call from a home carer to reheat the meal.</p>	<ul style="list-style-type: none"> <li>• Ensure that vulnerable person's nutritional and welfare needs are being met.</li> <li>• May provide more choice to service users.</li> <li>• May be better for service users with dementia as they can receive a visual prompt.</li> </ul>	<ul style="list-style-type: none"> <li>• Without subsidy it could result in significant cost to people as they would be paying for both the cost of the meal and a 15 minute visit.</li> <li>• Capacity issues in home care contracts (and the care sector as a whole) may make it difficult for this amount of additional calls to be met. May take trained carers out of the system to prepare meals when non-care staff is able to meet this need.</li> </ul>
<p>6. Stop providing a meal service and provide a subsidy (in the form of a direct payment) to the services user.</p>	<ul style="list-style-type: none"> <li>• Council could save money depending on the level of subsidy offered.</li> <li>• Council meets identified need.</li> <li>• May provide more choice to service users and their families.</li> <li>• Service users can afford a meal service.</li> </ul>	<ul style="list-style-type: none"> <li>• Could place vulnerable people at risk if insufficient alternative provision in the market.</li> </ul>

#### 4. Next Steps

The consultation will start on Friday 17th January 2014. All questionnaires should be submitted to the Council by Friday 11<sup>th</sup> April 2014.

A public consultation event will be held on Thursday 13<sup>th</sup> March 2014. People can drop-in between 14.00 and 17.00 at the Main Hall, Beehive - Voluntary and Community Resource Centre, West Street, Grays, RM17 6XP to get more information, ask questions about the proposal, and give us their views in person.

You can respond to this consultation by completing the questionnaire provided online at <https://consult.thurrock.gov.uk/> or by returning a paper copy to the freepost address below:

Monitoring Officer  
Performance, Quality and Information Team  
Thurrock Council  
FREEPOST ANG1611  
Civic Offices  
New Road, Grays,  
Essex, RM17 6SL

Thurrock Coalition who are an independent user-led organisation, separate from Thurrock Council can help you in completing the questionnaire should you require it. They can be contacted on 01375 389864 between 10am-12pm and 2pm-5pm.

Alternatively if you would like to speak to someone from Thurrock Council or need someone to come and help you complete the form in your home then please call 01375 366392.

If you do not wish to complete a questionnaire but still wish to give us your views, you can write to us at:

Joint Commissioning Officer (Older People and Dementia)  
Adults, Health & Commissioning  
Thurrock Council  
FREEPOST ANG1611  
Civic Offices  
New Road  
Grays Essex  
RM17 6SL

Once the consultation is complete we will summarise the feedback received and use this to inform our final recommendations to the Cabinet in June. The final decision will be shared and published on Thurrock Council's website

## **Appendix 1 – Demographic Information**

As at September 2013 there are 146 people in receipt of meals on wheels

- Although there are people as young as 46 using meals on wheels, the average age of user is 84 years old.
- 94 (64%) recipients are female and 52 (36%) male.
- 123 of the 146 people in receipt of meal on wheels live alone.
- Of the 23 people who live with others, 14 people are partners (i.e. 7 couples both with care needs, often one partner also has dementia), the remaining 9 live with a family member who are either at work during the day or they are in a co-dependent relationship e.g. elderly father and son who has learning disabilities who both require a meal.
- 30 people (21%) receive meals on wheels because they have a cognitive impairment (this is largely dementia or short term memory loss but does include younger adults with enduring mental health issues). Typically they require a meal as they are unable to remember to eat.
- 75 people (51%) receive meals on wheels for physical issues. This is largely people with restricted mobility who are unable to stand to heat a frozen meal. This is due to a number of health conditions but most commonly osteoporosis, arthritis or Parkinson's (although a number of these are combined with sensory impairments).
- 41 people (28%) of people have both physical and cognitive impairments i.e. unable to mobilise and have dementia/short term memory loss.