

<b>Subject:</b>	<b>Commissioning for Community Meals</b>		
<b>Date of Meeting:</b>	<b>June 25<sup>th</sup> 2012</b>		
<b>Report of:</b>	<b>Director of Adult Care and Health / Lead Commissioner People</b>		
<b>Contact Officer:</b>	<b>Name:</b>	<b>Philip Letchfield</b>	<b>Tel: 29-5078</b>
	<b>Email:</b>	<b>Philip.letchfield@brighton-hove.gov.uk</b>	
<b>Key Decision:</b>	<b>Yes</b>		
<b>Ward(s) affected:</b>	<b>All</b>		

### FOR GENERAL RELEASE

#### 1. SUMMARY AND POLICY CONTEXT:

- 1.1 The Council currently provides a well established Community Meals service through a contract with the Women's Royal Voluntary Service (WRVS).
- 1.2 Further to a waiver put in place to extend current arrangements this contract comes to an end in September 2012.
- 1.3 The Council has been considering the future commissioning plans for this service, and a report on the principles that should guide future commissioning of meals was approved by the Adult Social Care and Health Cabinet Meeting in March 2012. This report had been informed by a review undertaken by the Adult Social Care and Housing Scrutiny Committee and in line with the agreed principles commissioners have focused on the ways future arrangements can:
  - Extend service user choice and control over the arrangements they make relating to meals in line with the Personalisation agenda.
  - Improve the signposting, information and advice that is available to people on the opportunities for them to access healthy and nutritious food locally.
  - Develop the Market and support new providers to offer appropriate services where gaps may be presenting themselves, and where sustainable local options may be secured.
  - Safeguard a reliable, effective 365 day a year service for those for whom it is necessary.
  - Ensure revised arrangements are cost effective.

The Director of Adult Care and Health / Lead Commissioner, People was asked to bring back a further report in June outlining a recommended way forward

## **2. RECOMMENDATIONS:**

- 2.1** That the content of the report is noted and the actions recommended below agreed.

### **Recommendation 1**

**The Adult Care and Health Committee agree a Waiver to extend the current contractual arrangements with WRVS from September 2012 until 31<sup>st</sup> March 2013.**

### **Recommendation 2**

**The Adult Care and Health Committee agree that a Community Meals Service is secured by a competitive tendering process to operate from April 2013 for an initial three year period with an option to extend for a fourth year.**

### **Recommendation 3**

**The Adult Care and Health Committee agree that from 1 October 2012 and thereafter every six months the charge for Community Meals in Brighton will be raised by 20p until the point of no subsidy being required by the Council is reached.**

## **3. RELEVANT BACKGROUND INFORMATION/CHRONOLOGY OF KEY EVENTS**

Commissioners have focused on five key strands of activity to take forward work on community meals. The information below provides the detail of the work that is now in hand relating to these areas.

### **3.1 Extending Choice and Control**

Previous work including that undertaken by the Scrutiny Review established that there are a number of options regarding meals that recipients of a community meals service may simply not be aware of. In 2011 the Department of Adult Care and Health established the 'Embrace' initiative, a project operating within the voluntary and community sector under the auspices of the Federation for Disabled People Centre for Independent Living. This project has undertaken an audit of the range of community activities across the city that do or may play a part in supporting people stay independent for as long as possible. Amongst the three to four hundred activities we now know are taking place across the city in any one week we understand that at least sixty are food related and include for instance supper or lunch clubs.

To support existing and potential service users exercise choice and take more control over the decisions they make regarding meals the Embrace Initiative will facilitate a stakeholder event in July 2012. This event will provide an opportunity for the groups mentioned above and any other interested parties to participate in a workshop aimed at improving our knowledge of the options available locally and affording those interested to network more formally, share ideas and stimulate new ways of thinking. It is proposed that the information gathered at this event will be held by the Embrace Project and made available on the data base they are developing for wider dissemination.

### **3.2 Improving Signposting, Information and Advice**

Whilst the establishment of a comprehensive web based information system by the Embrace Initiative will be of enormous benefit, we continue to be mindful of the difficulties those most vulnerable in the community may face in either accessing or practically using computer systems to find solutions to their needs. We intend to explore with partners in the voluntary and community sector the introduction of a new and innovative programme of volunteer involvement to further support the promotion of independence and wellbeing. At its core this new approach will entail using the information generated by the network event to pilot an approach wherein individuals who come to the attention of either the voluntary or community sector or the NHS or Council because of meals related issues are visited by a volunteer armed with the specific meal related options available to that individual within their local communities in the East, West or Central Brighton.

This information may include details of nearby community cafes, residential, nursing homes, schools or colleges offering lunches as well as information on day or evening activities and social events involving meals run by community or faith groups. As well as ensuring that this approach is more personalised than web based it also affords us the opportunity to test whether for some people adopting a new approach will only become a reality if they are given practical help to do so. For instance we know that families can become concerned about the increased social isolation or health of a recently bereaved parent, often citing a failing appetite, loss of interest in eating as a real cause for concern. With this new venture we would strive where possible to use volunteers to 'buddy' people to new activities for a short time to ease their way into managing their needs proactively.

### **3.3 Developing the Market**

For those already engaged or interested in providing or promoting the availability of healthy nutritious food locally we believe the Network event referred to in 3.1 will create a good opportunity for consulting with a wide range of interested parties, improve awareness of business opportunities and will support potential local suppliers to raise their profile.

WRVS as the current provider of the established community meals contract will be presenting at the event, and will describe their model of provision and what they perceive are ways to work in new and creative ways. Whilst as discussed elsewhere in the report the core 'hot' meal service they provide is currently reliant on national suppliers who meet stringent food safety requirements, local suppliers can still benefit from being made aware of the existing business model and any future tendering opportunities, for instance the WRVS service provides for a lighter sandwich and salad option which in the past was supplied from West Sussex.

### **3.4 Safeguarding a reliable 365 day a year service**

During 2011 a group of seven Local Authorities across the South East Region (The South East 7) brought together representatives to discuss ways that those Authorities might share good practice or work in closer collaboration to achieve efficient and effective service delivery. The seven Authorities comprise Kent, Medway, East Sussex, Brighton and Hove, West Sussex, Surrey and Hampshire.

The provision of meals in the community has been one of the topics under consideration and at a recent network event it was confirmed that all authorities considered the continuation of a core meals service in their communities as essential. This was in terms of supporting those most vulnerable and therefore dependent on a statutory package of care that would include a meals service and or as a central plank to their health and wellbeing agenda's. This recognises that a meals service singly or in place alongside other voluntary and community sector responses can act as a key preventative service enabling people to manage without statutory interventions for longer.

Locally the WRVS supplies hot and frozen meals to those people assessed as needing them. Meals are delivered to people in their own homes supporting them to live as independently as possible for as long as possible. Meals are provided to a wide range of individuals with differing needs, and the service supports adults across all age ranges. Younger adults with mental health needs, physical or learning disabilities account for about 40% of the meals delivered whilst approximately 60% of meal recipients are aged over 75 years and of these 38% are aged 85 years and over.

The service operates 365 days per year and the contract has a requirement that a 'safe and well' check is made for each person who has a meal delivered.

The WRVS are responsible for ensuring that meals weights and nutritional values comply with the latest recommended standards for community meals developed by the national association of care caterers. The delivery time and temperature of the first and last meal delivered on each round are recorded daily.

Since October 2009 the WRVS have been leasing 4 hot vans to deliver meals in the BN1 and BN2 districts of the city. Volunteers using private cars with insulated thermo boxes deliver in other areas of the city.

The service provides a choice based menu and is able to cater for customers with a range of health or religiously based dietary requirements including providing, kosher and vegetarian options and supporting the needs of those who are diabetic. The meals are sourced from a company in a Wales and arrive frozen at the WRVS centre. There are currently only 3 national providers who provide meals that fit the WRVS delivery model i.e. that can be delivered meeting stringent quality requirements.

The number of meals provided has fluctuated with some decrease in recent years but this decline appeared to plateau in 2011. The number of meal provided in 2007 /08 was 96,362 in 2010/11 81,864 and in 2011/12 was 84,770. This decline in numbers was not unique to Brighton and Hove and is reflected at a national level. There is no evidence to suggest one common cause for the current position but locally it is thought to be a combination of two interlinked factors, the emphasis that continues to be placed on individuals adopting more personalised approaches to their care and the improved ease with which individuals or their carers can for instance organise delivery of frozen meals via the large supermarket chains. It would seem likely therefore that those individuals who can manage with this latter option are diverting themselves from the traditional model of service, whilst the group that remains have needs that require a different input.

We conclude that those continuing to benefit from the WRVS meals service will be experiencing a broad range of challenges in remaining independent including for many and in particular for those growing older increased physical frailty. However for many people remaining in their own homes will also mean experiencing social isolation and an increased risk of loneliness. In 2010 The Annual Report of the Director of Public Health noted that Brighton and Hove has a higher percentage of single pensioner households (16%) than the national average (14.4%) it appears that once they get to 75 years and over most people in the city have been widowed and the majority of people over this age live alone. Recent figures produced by WRVS showed that locally on Christmas Day 69% of service users needed a meal to be delivered whilst on Easter Sunday this figure had risen to over 90%. For those individuals the WRVS volunteer input and 'safe and well check' provides a vital service.

The service is monitored through the Adult Social Care Commissioning Support Unit and there are regular contract reviews during the year. The Council funds a lay assessor's scheme to interview service users each year and the WRVS also regularly gather feedback from people that use the service. The satisfaction levels with the current service are broadly high.

For those who will continue to need a specified meal delivery service it is proposed that the current Waiver allowing the WRVS Contract to continue is extended to the end of March 2013 and that a tender exercise is entered into to secure ongoing provision of this model of service as recommended in 2.1.

### **3.5 Cost Effectiveness**

Whilst the consensus across the seven authorities in the South East was that a contracted meals service was needed, all Authorities were also clear in identifying as their goal the operation of such a service requiring little if any financial subsidy.

This position reflects that arrived at in Brighton and Hove through the scrutiny review and the proposal to introduce a phased reduction of the subsidy agreed as a guiding principle in the March 2012 report to the Adult Social Care and Health Cabinet.

At £3.10 a meal our Brighton and Hove charge is the lowest amongst the seven authorities. Our colleagues in West Sussex have concluded that by raising their prices by 30p this April (12012) from £3.70 to £4.00 a subsidy will no longer be required. All Authorities are aware of the evidence that suggests steep increases (over 50p) have a detrimental impact on the take up of meals and this is not desired, however smaller regular increases have been seen to achieve the same end point without destabilising the service.

It is therefore recommended in 2.1 that from 1 October 2012 and thereafter every six months the charge for meals in Brighton and Hove will be raised by 20p until the point of no subsidy being required is reached. This means that all recipients whether accessing a meal because they have a wider package of care or require the input as a stand alone service (self referrals) will be affected in the same way. The impact of this will be monitored closely and the Adult Care and Health Committee will be advised of progress in achieving a non subsidised position.

## **4. COMMUNITY ENGAGEMENT AND CONSULTATION**

- 4.1 The Adult Social Care Housing & Overview Scrutiny Committee have undertaken a pre policy scrutiny on this matter. See Appendix 1
- 4.2 The network event described in 3.1 will provide for further engagement and consultation

## **5. FINANCIAL & OTHER IMPLICATIONS:**

### Financial Implications:

- 5.1 The net spend for 2011/12 was £0.233m (this includes the client income collected on behalf of the Council by WRVS). The net unit cost per meal was £2.75 (based on the annual number of approximately 84,770).

The future commissioning plans will seek to reduce the net unit costs and offer improved value for money, in line with the latest budget strategy.

*Finance Officer Consulted: Name Mike Bentley*

*Date: 8/05/12*

#### Legal Implications:

- 5.2 Whilst the Local Authority does not have a duty to provide Community Meals it chooses to exercise its statutory power to do so. In exercising this power and delivering this service the Local Authority must have regard to the national and local personalisation agenda, individual's Human Rights as enshrined in the Human Rights Act 1998 and its duty to the public purse. Under the section 47 of the National Health Service and Community Care Act 1990 the Local Authority has a duty to undertake an assessment of the care needs of an individual where it appears to that authority the individual may be in need of services; recipients of community meals may trigger this duty and it is therefore important the referral pathway ensures the Local Authority is able to identify such individuals.

*Lawyer Consulted: Sandra O'brien Date: 31/5/12*

#### Equalities Implications:

- 5.3 A full Equalities Impact Assessment will form part of the retendering phase and will be reported back to the Adult Care and Health Committee.

#### 5.4 Sustainability Implications:

The service provider is not able to access locally sourced meals that can meet stringent quality requirements to enable their appropriate reheating en route to a service user's home and these are currently delivered from Wales.

One of the proposed principles in relation to future commissioning is that it promotes the opportunities to source healthy nutritious meal options locally.

#### Crime & Disorder Implications:

- 5.5 There are no specific implications for crime and disorder.

#### Risk and Opportunity Management Implications:

- 5.6 The approach outlined above both promotes the opportunities available in the city for people to access local healthy, nutritious and well balanced food with the need for a strictly specified service to meet the needs of those who are most vulnerable. It ensures that a statutory response is in place where required whilst in tandem promotes increased choice and control and fosters the further roll out of the Personalisation agenda.

#### Public Health Implications:

- 5.7 The current service provides nutritionally balanced meals which meet industry standards. Access to community meals is an important element in the health and well being of people.

The steps outlined in this report seek to develop this service so that it is more accessible and more personalised.

### Corporate / Citywide Implications:

- 5.8 The community meals service and its delivery are directly linked to the Councils priorities of supporting vulnerable adults to live healthy independent lives and creating a sustainable city.

### **6. EVALUATION OF ANY ALTERNATIVE OPTION(S):**

- 6.1 This report has been based on further consideration of the principles outlined in the March 2012 report and has focused on our understanding of the current local market, the needs of those currently being supported by the existing service model and our aspirations for the future in further developing the Personalisation agenda.. We have looked closely at the models in place across the South East, mindful of the work of the South East 7 and are aware that this as an arena that will be subject to further review over time.

### **7. REASONS FOR REPORT RECOMMENDATIONS**

- 7.1 The contract for this service is coming to an end and this is an opportunity to enter into new arrangements for a community meals service whilst recognising and further promoting the personalisation agenda.

## **SUPPORTING DOCUMENTATION**

### **Appendices:**

1. Scrutiny Workshop Notes

### **Documents in Members' Rooms**

1. None

### **Background Documents**

1. Report to Adult Social Care and Health Cabinet Meeting March 2012

[http://present.brighton-hove.gov.uk/Published/C00000151/M00003308/\\$\\$ADocPackPublic.pdf](http://present.brighton-hove.gov.uk/Published/C00000151/M00003308/$$ADocPackPublic.pdf)



## Appendices 1

### **ASCHOSC Community Meals Workshop: Meeting Note**

**Present:** Cllrs K Norman (Chair), A Norman, Gilbey, Peltzer Dunn, Buckley; Avril Fuller (LINK co-optee)

Philip Letchfield (ASC)

PL introduced the workshop, explaining that the community meals contract (currently held by WRVS) is due to finish in April 12. The contract can be extended to October 12, with an option to extend for a further 6 months, at relatively low risk of challenge, but beyond this it will be necessary to re-tender (or meet demand by other means).

There are a range of options for the service in the future, all of them in use by local authorities across the country. These include:

- A 'sign-posting/ model where the LA does not provide or contract a community meals service, but simply publicises the range of commercial options available to residents.
- A 'framework' contract where the LA contracts with a number of providers, but does not guarantee any provider a particular volume of work – customers are free to choose the provider they prefer, or to make their own arrangements.
- Re-tendering for a similar contract to the one currently in place (i.e. a single provider which makes its own arrangements with suppliers)
- Re-tendering, but splitting the contract between several suppliers (with each supplier responsible for a particular area etc)
- Re-tendering, but stipulating that the provider(s) must work together with local suppliers, so as to ensure the use of local produce/encourage the local economy etc.

PL told members that there were some very positive aspects of the current contract with WRVS: the service is of a good and consistent standard, customer satisfaction is relatively high. However, the service is subsidised by BHCC, the food provided is not locally sourced or prepared, and the service is not personalised (customers have no choice of providers).

Moreover, there has been a significant fall in demand for community meals over the past few years (although this has recently plateaued). This trend is likely to continue, with the move to personalisation of care seeing more people choosing to develop their own care solutions rather than being reliant on a bulk provider, and the increasing availability of a range of commercial products (supermarket ready-meals etc).

Members were informed that, whilst increasing consumer choice was desirable, it might also have drawbacks, as the cost of community meals provision is typically predicated on having a very large volume of sales: the unit price is kept relatively low by the size of the overall contract. Since providing greater choice will inevitably see a reduction in

activity for any single provider, it may inevitably lead to a significant increase in the unit price. It may also be the case that the current provider, WRVS, would be unable to function with greatly reduced volumes, as it has considerable fixed costs.

Members agreed that they would ideally like to see community meals provided locally from locally sourced fresh produce. They would also like to see the quality of community meals improved.

It was recognised that there was no locally based provider currently able to manage a contract of this size – particularly as provision needs to be absolutely guaranteed and available 365 days a year. However, members thought it might be feasible for a contractor to make much more use of local producers and providers. Members specifically mentioned City College in this context.

Members discussed the issue of subsidising community meals. BHCC currently provides a considerable subsidy, but plans to reduce this, potentially by restricting its subsidy to customers who meet the social care eligibility threshold – currently customers who do not have severe/critical need may still receive subsidised community meals - and increasing the charges for the meals to closer reflect actual costs. Members agreed that there were sound reasons for reducing this subsidy, although any action needed to be phased.

### **Conclusions:**

- Members agreed that, in the long term, the community meals service should provide people with locally sourced and provided nutritious, tasty meals.
- This long term aim may not be achievable in the short term, but the re-tender of the community meals contract should require bidders to work with local producers and providers in order to grow local capacity.
- Subsidies for community meals should be reduced, but this must be phased in so as to minimise the impact upon local residents.
- The possibility of a pilot scheme involving local producers/providers should be explored by ASC.