

Equality Impact Assessment (EIA)

Directorate: Adult Wellbeing
Service : Adult social care
Name of Officer/s completing assessment: Mike Fry.
Date of Assessment: 12.11.2013
Name of service/function or policy being assessed: Royal Voluntary Service, Meals On Wheels

<p>1. What are you assessing? Is it a policy, function service?</p>	<p>The Meals on Wheels (MoW) service provides either hot or frozen meals for people in their own homes. This service is delivered by the Royal Voluntary Service (RVS), and is a county wide provision. RVS are currently contracted to provide 100,000 meals a year, and is funded through individual contributions (currently £4.40 per meal) and a payment of £60,000 p.a. from Adult Social Care which currently subsidises the service to end users.</p> <p>Two alternative models of provision to replace the current service are explored in this assessment. Option 1 is for RVS to continue to be the primary home meals provider, using a different financial, product and service design. Option 2 presumes RVS will cease to be the primary provider, and the service will be reshaped to make use of a range of universal and bespoke community resources.</p>
<p>2. Are you making changes to what is already happening? (starting something new, stopping something, changing something?) What is the purpose of the new change?</p>	<p>The proposal is that the current direct funding of MoW cease from 01/04/2014. From this date a full cost recovery model will be introduced.</p> <p><u>Option 1 :</u></p> <p>RVS will reconfigure their services to develop a full cost recovery provision based on the existing service model. This will mean that service users will move from the current charge of £4.40 per meal to £5.40 - £5.50 per meal once the current subsidy has been removed.</p> <p>At the same time that the increase in charges is introduced RVS propose to move to a new model of meal provision using a higher quality product. This new product has been trialled in West Sussex</p>

	<p>where RVS report universal satisfaction with the new product and acceptance of a higher charge for higher quality meals and service.</p> <p>As part of the new service, RVS propose to offer users value added extras as part of the package within the higher fees. These are detailed in the RVS document Royal Voluntary Service proposal for Hereford Meals on Wheels December 2013 – March 2014, Appendix 1.</p> <p><u>Option 2:</u></p> <p>RVS will cease to provide a county wide home meals service. In its place a model of provision based on individuals utilising a mixture of universal and bespoke community services will be developed. This fits with the Adult Wellbeing Directorate intent to: “Encourage individuals, communities and organisations do more for themselves and for their local area.”</p>
<p>3.1 Why are you making this change? (what are the drivers – budget, resources, duplication, legislation)</p>	<p>In 2011 the Herefordshire Council made the decision to operate a full cost recovery model for adult social care provision in line with its Fairer Charging policy.</p> <p>Other services have already been transferred to a full cost recovery model. This was delayed for a year in the case of MoW to ensure a smooth transition to the new structure and to allow the Herefordshire Council and RVS time to set up the best possible new provision for the service users, with an improvement to the service while causing minimum disruption to current users. However, RVS now express some concerns that they will not be able to design a financially viable county wide service that meets user needs for a hot meal at a realistic cost. This being the case a viable alternative option needs to be developed</p> <p>Both local and national government policy advocate a move away from traditional service models where service users are presented with a single provider option to one where individuals are given a budget to meet assessed needs, from which they can purchase provision from a range</p>

3.2 Wider contextual issues

of providers operating in a vibrant market. This proposal supports this policy and gives users a more powerful voice in directly determining local services through being given the choice accessing one or several options from a range of possibilities, financially supporting only those which meet their needs and preferences.

It has to be acknowledged that budgetary pressures on the council are a driver in this change as the new funding structure will mean that support with meals may only be subsidised for those with an assessed need for those with support with preparing or eating food, while the subsidy will be removed from those not meeting eligibility conditions under Fair Access to Care Services (FACS) criteria.

In November 2013 the Herefordshire Council decided that Adult Social Care would no longer include meals in its Resource Allocation System (RAS). This means that the council would no longer include an amount for food/meals in any personal budget. However, financial assistance with paying for help with food preparation and/or eating may still be provided.

The older cohort of citizens has aged through a social context that has resulted in individuals now expecting higher standards of food and food preparation than previous generations. Equally, they have experienced the development of a range of meal options that are of high quality while being quick and easy to prepare through the use of the now ubiquitous microwave ovens. A number of supermarkets now offer home delivery of high quality frozen/chilled microwave meals at competitive prices. This now gives individuals access to a wide range of nutritious foods that can be delivered to the door at competitive prices. People with mobility or other health limitations can thus access commercial pre-prepared home meals at reasonable costs, negating, in many cases, the need for traditional home meals services. MoW needs to compete both in quality and price with these options.

Governmental intent, both nationally and locally, is to develop a society where individuals are as

	self-supporting as possible and where the community takes an increasingly active role in supporting vulnerable people.
4. What evidence / sources of information have you used to make your decision? (surveys, employee groups, user groups, statistical data)	<p>Herefordshire Council Research Team, Adult Social Care proposed new charging policy consultation survey report, September 2012.</p> <p>RVS service user data.</p> <p>RVS Impact Assessment report (07/02/2013).</p> <p>RVS, Royal Voluntary Service proposal for Hereford Meals on Wheels December 2013 – March 2014 report</p> <p>Herefordshire Council financial data.</p> <p>Fair Access to Care Services (FACS) guidance.</p>
<p>5. Have you identified who will be affected by your proposal? (users, partners, customers)</p> <p>Are there any gaps in the information you have collected?</p> <p>How many people will be affected?</p> <p>How many users are there of the service currently?</p>	<p>Option 1:</p> <p>RVS Staff: RVS have 17 staff (WTE 8) who contribute to the delivery of MoW. RVS have stated that these jobs would end if the service ceased (RVS Impact Assessment 07/02/13). These job losses, however, are predicated on cessation of the service, not a remodelling of funding streams. It is envisioned that take up of the new improved service from April 2014 will be of a level to sustain current staffing levels</p> <p>Volunteers: Approximately 400 volunteers provide 275 hours of input into the service on a weekly basis, though only 167 of these are active on a weekly basis as part of the MoW service. RVS have stated that 80% of these volunteers would no longer be required if the MoW service ceased (RVS Impact Assessment 07/02/13). The loss of these volunteering opportunities is, however, predicated on cessation of the service, not a remodelling of funding streams. The new improved service designed to go live in April 2014 is expected to require the same or greater level of volunteer input as the current service. Of the 167 volunteers, 155 are over the age of 60, 120 are</p>

female and the remaining 47 are male.

Service Users: There are approximately 500 people registered with Meals on Wheels. Of these approximately 200 have been identified as needing assistance with preparation of meals in a social work assessment.

Option 2:

RVS Staff:

Option 2 would reduce the demand for staff time to support a meals service at RVS. This may have the impact of making some of those posts unviable in their present configuration. RVS have suggested that up to 8 WTE posts may be lost if their meals service was to completely cease. However, option 2 still leaves room for RVS to provide a slimmed down service which would allow for the retention of some of these posts.

RVS Volunteers:

The RVS MoW service relies heavily on volunteer input, and reduction or cessation of the service would reduce or remove the need for this volunteer input. Many displaced volunteers may find alternative volunteering opportunities, but some may withdraw from the sector. RVS use 167 volunteers on a weekly basis to deliver the MoW service. Of the 167 volunteers, 155 are over the age of 60, 120 are female and the remaining 47 are male.

Service Users:

This option seeks to make use of and develop universal community resources to provide access to meals through and within the local community. A wider range of options will be available to service users, where home meals will be supplemented by access to meals in community settings, including commercial venues such as pubs, enhancing social opportunities for individuals.

However, there are a number of individuals currently having MoW how live in isolated rural settings where access to public transport is limited. Where these individuals have mobility

	<p>limitations there will be difficulties in accessing some of the community services.</p> <p>RVS, as part of their MoW delivery service undertake wellbeing checks on the people they see. This function can be critical in identifying problems at an early stage, particularly where people have little or no other daily contact with people, to ensure preventative measures are employed through reporting the issues to relevant health and social care agencies. The loss of this function would be of particular detriment to the most vulnerable of service users.</p> <p>Social Care Staff: Option 2 may lead to the reduction of wellbeing monitoring of some vulnerable people. Social care staff will either have to work with reduced levels of monitoring of vulnerable people or they will have to be involved in establishing alternative support systems for some people.</p> <p>Partner Agencies: Option 2 relies on a wider pallet of provision locally drawing on resources from a range of providers. This will require the development of new partnership arrangement s with local agencies and businesses.</p> <p>Local Private Sector Businesses: This option would stimulate demand for provision of meals from local businesses, whether retail outlets or businesses that prepare and serve meals. By supporting local business, this option would help to protect or increase paid employment in the county at a time of economic depression and high unemployment. Arguably, there would be a move to greater support for peoples’ nutritional needs from people in paid employment rather than the current reliance on volunteers used by RVS.</p>
<p>6. Have you identified that one group of people may be more affected than another (for example, disabled people)</p>	<p>Both of the potential options will impact most heavily on the same group of individuals. Neither option will have any significant positive impact on the constitution of the population of people in either a positive or negative fashion compared to the other option.</p>

	<p>95% of MoW users are over the age of 70.</p> <p>Approximately 80% of MoW service users have or have had a social work assessment: this would indicate that the majority of MoW service users have some additional limitation as a consequence of health/care needs. However, only about 40% of current MoW service users have a social work assessment detailing the need for support for individuals via MoW.</p> <p>Those people who meet critical or substantial FACS eligibility criteria following a social work assessment may be able to get financial assistance with the purchase of assistance preparing food where this is done by the individual herself/himself or eating meals through a personal budget, though not with the cost of the food.</p> <p>A number of the MoW recipients live alone and are socially isolated, the MoW delivery volunteer being the only social contact that the person has each day. These are some of the most vulnerable of Social Care service users. For these individuals the loss of daily human face to face contact may have significant practical and/or psychological consequences.</p> <p>Adult Social Care staff: The change to a full cost recovery model may prompt requests for additional social work assessments/reviews. A request has been made for a social work practitioner to be nominated as a liaison point for RVS/Adult Social Care Commissioning to help manage any demand for additional social work activity and identify possible mitigating actions that may be taken to minimise any difficulties for social work teams. This would also mitigate any difficulties service users might have in accessing social care assessments/reviews where the need for this has been generated by this proposed change.</p>
<p>7. Have you consulted with the people that will be affected? (what did they tell you? How did you consult with them?)</p>	<p>All service users of a social care provision delivered in the home, including MoW, were surveyed between May and August 2012 when the Herefordshire Council proposed a full cost recovery model for social care provision in the</p>

	<p>county. The results of this consultation are included as Appendix 2 to this document.</p> <p>There have been on-going discussions with RVS about the proposed changes to funding of MoW. RVS have been actively included in discussions on future modelling of the MoW service, and are of the opinion that the proposed changes to funding are manageable without significant detriment to MoW, as the proposed model already operates successfully in other areas of the country. The proposed change fits with RVS's business model for the forthcoming years and would be implemented with the support and agreement of RVS.</p>
<p>8. Have you identified any potential positive impacts?</p>	<p><u>Option 1:</u></p> <p>RVS have identified that there is likely to be a cost increase to service users as a consequence of changed funding arrangements. However, they are in the process of reviewing their product, and believe that the quality of meals will be improved as a consequence of higher service user expectation with increase user costs.</p> <p>The full cost recovery model will bring funding of home meals in line with other social care provision. By withdrawing a subsidy of MoW, the council will be developing a level playing field allowing other potential providers of a similar service to compete on a financially equal basis, potentially opening the way to greater competition and choice, which is believed to deliver improved provision for the end users.</p> <p>The full cost recovery model and improved meal specification will allow RVS to offer to provide food for luncheon clubs run by small local organisations, particularly in rural areas, without the facilities to produce their own meals. This potentially allow for a development of local luncheon clubs in more remote areas of the county.</p> <p><u>Option 2:</u></p> <p>By moving from a largely volunteer based</p>

	<p>provision to a greater use of local universal resources this option will support and stimulate economic activity in the county, helping to protect local employment at a time of economic difficulty.</p> <p>Encouraging the use of local community resources will also support integration of vulnerable people into the local community and enhance social opportunities for service users.</p>
<p>9. Have you identified any negative impacts?</p>	<p><u>Option 1:</u></p> <p>There will be some current service users who will face a 23% increase in meal costs without being eligible for any support in meeting the additional amount from Social Care. Some of these individuals may seek alternative suppliers or opt not to have support with meals provision.</p> <p><u>Option2:</u></p> <p>While this option will support paid employment in the county, there will be a corresponding decrease in the need for volunteer opportunities in the MoW service. However, this may be mitigated by the policy intent, both national and local, to stimulate community support of vulnerable people which will stimulate the development of volunteering opportunities in other areas of activity.</p> <p>MoW provides daily human contact for some of the most vulnerable citizens living in the community. Should these people be unable or unwilling to access alternative community options their social contact could be significantly reduced, potentially leading to psychological and/or practical problems.</p>

Appendix 1

Royal Voluntary Service proposal for Hereford Meals on Wheels December 2013 – March 2014

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Royal Voluntary Service, have been asked to submit a document outlining the proposals to continue the Meals on Wheels Service from December 2013 until the end of the financial year, March 2014. We have been asked to submit a proposal for full cost recovery for the meals on wheels service for the financial year 2014 – 2015.

We are currently reviewing our suppliers to propose the full cost recovery, we are aware if costs are to increase then our users of the service will want to see a significant change in the quality and provision of the meals.

Whilst we are preparing costs we will be working closely with our suppliers to arrange a tasting of the new menus, and to discuss the new service which we will be offering to replace the existing service which we currently offer to the people of Herefordshire.

This interim proposal will continue the service to the older people of Hereford until March 2014; during this period we will be able to propose a new type of service and costs to meet the demands of the council and the older people in Herefordshire.

1. Delivery of Meals on Wheels

Delivery of MOW is very important for nutrition and well-being of the older person. Whilst delivering a meal, Royal Voluntary Service volunteer complete a Safe & Well-being check. This check is considered to be as important as the meal as our volunteer may be the only person that is seen during the day. Our users look forward to the meal and the interaction with the volunteer, whilst delivering the meal our volunteers carry out and complete a safe and well check

2. Safe and Well check

The Safe & Well checks take the form of a meals on wheels staff member or volunteer who has been fully trained as part of their induction and carry a clipboard that is pre-printed with a check-list of what to look for to ensure the wellbeing of the customer (please see below).

The safe and well check is carried out at every visit and includes checking that meals have been eaten, the customer is dressed, there are no obvious concerns within their accommodation, and they seem well in themselves.

Whilst in a customer's home, the deliverers observe any nutritional risk factors applicable to that person and report these back to the office who will liaise with the relevant department in the council. The following is a non-exhaustive list of nutritional risk factors which if observed will be reported:

Changes in eating habits

Weight loss

Difficulties in eating / chewing or swallowing

Communication difficulties

Confusion, apathy and lethargy

Anxiety or depression

Royal Voluntary Service will also encourage customers to take a soft drink or water with their meal as this will help with their hydration and the swallowing of food. The deliverer can also prompt the customer about the need to take any medication.

These procedures are in line with national hydration and nutritional guidelines which reinforces the NACC campaign 'Nobody should go hungry' and closely follows the NACC guide '10 steps to good nutrition'.

Any concerns are reported back authority and recorded on the service database to ensure there is a record/history of the customer. In the event of a serious issue, an ambulance would be called and the deliverer would stay with the customer until help arrived. This would also be recorded, and if necessary, additional personnel would be deployed to continue the round.

Safe and well – in the home

To ensure that all our service users are safe and well, ask how they are – social contact is as important as food and you may be the only person they see all day.

1. Is there any deterioration?
2. Did they respond normally to your greeting?
3. Are they getting dressed?
4. Are they more confused than usual?
5. Does the gas fire burn yellow or orange instead of blue?
6. Are there sooty stains on or above gas or solid fuel appliances?

Note: If the answer to 5 or 6 is 'yes', this may be an indication of carbon monoxide fumes.

Glance around the room, is anything unusual or out of place e.g. uneaten meals. Try and touch the hands. Some common problems are listed below with symptoms to look for.

Hypothermia

Skin cold to the touch, drowsiness, face pale and puffy, lips blue, slow responses, mental confusion, slurred speech, unsteady movements.

Heart Attack

Pale skin, blue lips, breathless, 'severe indigestion' or pains in the chest or arms.

Stroke

Severe headache, confused and emotional, may appear 'drunk', slurred words, droopy mouth, weakness and problems moving arms and legs.

Diabetes

High blood sugar – deep laboured breathing, faint smell of 'pear drops' on breath, dry skin

Low blood sugar – faintness, hunger, muscle tremors, strange behavior (confused or angry etc.), sweating, pale skin, shallow breathing, deteriorating responses

If the recipient has fallen or is unconscious, **do not** attempt to move them unless you have been trained to do so.

Call an ambulance immediately if the recipient is showing any of the above symptoms, has fallen or is unconscious and inform your project organiser (or Social Services if it is local practice).

Note: If you have a mobile phone be aware that it can affect a pacemaker signal temporarily if used too close. If practical, try and use the phone in another room.

REMEMBER - your regular contact gives you the opportunity to spot problems earlier than others. Do not be afraid to pass your concerns on to your service team or to call an ambulance if you feel it necessary. It is better for it to be a 'false alarm' than nothing to be done at all.

YOUR INTERVENTION MIGHT MAKE ALL THE DIFFERENCE

3. Introduction of Breakfast and Tea Time Packs

We will offer both a breakfast pack and/or a tea pack. The breakfast packs will include: cereal, breakfast pastry and juice. Tea time packs: consists of a nutritious sandwich and cake or yoghurt. These will be delivered with the hot lunch time meal if the service user wishes. The cost will be in line with current market prices. This will be available from November 2013.

4. Royal Voluntary Service Provision

As with all Royal Voluntary Service services, robust quality controls and legislation compliance, including food safety, will be in place to ensure the safety and wellbeing of local residents when accessing the meals service. All staff and volunteers will be trained in the relevant food safety, health and safety, safeguarding, equality and diversity and safe and well checks, which will form part of the induction and on-going personal development.

Royal Voluntary Service provides so much more than just a meals service, as the interaction with the customer is seen to be as important as the meal itself. The delivery drivers are able to provide assistance to the customer, such as posting a letter, informing and signposting them to other Royal Voluntary Service and local services. However, should the customer require additional support we can arrange that they be visited by a fully trained Royal Voluntary Service Customer Support Volunteer who will engage with the customer to identify and action a personalised support plan that is led by the customer, focussing on social inclusion.

5. No Response Calls

If there is no reply when delivering the meal to the customer, every effort is made to try and contact them. This can involve telephoning the customer, speaking to neighbours, checking the home, leaving a 'no reply' card with details on how to contact the office.

 <p>your meals delivery service called today</p>	<p>AS00762</p> <p>Hello. We called today.....</p> <p>at with your meal but received no reply.</p> <p>Owing to food hygiene regulations, meals cannot be left if you are not in to receive them. Please call us on the telephone number below so we know you are all right.</p> <p>Telephone.....</p> <p>www.wrvs.org.uk Registered Charity 1015988 & SC038924</p> 
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The situation will be reported back to the WRVS office by the delivery driver to carry out further checks, such as trying to call the customer again, checking their file for any further information including whether next of kin should be contacted, and contacting the Adult Social Care's Access Point.

Wherever possible, a second delivery visit is made on the same day and the customer records will be updated, as appropriate. The priority is to ensure that every person who requires a meal is provided with one.

6. Temporary Service Cessation

Customers may need to change their meal arrangements at short notice due to hospital appointments, days out and other situations that mean they will not be at home on their usual days. The delivery drivers are experienced at taking the instructions from the customer and reporting back to the office.

If the customer has stated a re-commencement date, this will be added to the system and the meals delivered on the agreed day. For times when the customer is not clear on their return date, either they or a third party can contact the service up to 9.30am on the day of the required meal and they will be included in the meal rounds.

However, no meal will be cancelled for customers without contacting the agreed third party where the service has been notified of a mental capacity concern.

1. New Customer Process

Referrals can be received direct from the customer (self-referral) or through a third party, such as family, friends or support worker. The introduction to the service starts from the first contact with the customer or their representative. Customers will receive a Welcome Pack, which includes an introduction letter describing what they can expect from the service and who to contact if they have any questions. This is accompanied by a service leaflet, menu and meal order form. Customers will be offered support to understand the information and complete the order form, with on-going support as required.

All staff and volunteers are given training to ensure they identify risk and report back as appropriate.

Once the order form is complete, it is either collected or sent to the service for inputting onto the database. If for any reason their choice is not available on their start day, an alternative will be offered that is suitable for their dietary requirements. Any change to their selection will be communicated via telephone prior to delivery of the meal.

Royal Voluntary Service endeavours to address any communication issues between customers, volunteers and staff. This covers a range of circumstances, such as hard of hearing, language barriers through cultural differences, illness or learning and physical disabilities. Our staff and volunteers are trained to be patient and understanding at all times.

2. Disaster recovery communication planning

Local authorities receive advance warning of serious weather conditions and arrangements will be made with the relevant department to update the local Royal Voluntary Service office when they receive such notice. In addition, Royal Voluntary Service will endeavour to keep updated on local weather conditions. If extreme weather is forecast, Royal Voluntary Service would plan ahead to ensure rounds are accessible and, if possible, to consider delivering frozen/additional meals to clients who live in remote locations.

Whilst receiving a hot nutritious meal 5 days a week there are many other services that we can offer to the older people in Herefordshire and this information is given regularly to the users.

3. Winter Preparation

Royal Voluntary Service have a link with Western Power Distribution, where their control centre contact our call centre to take refreshments to older or vulnerable people during power cuts, in addition we assist with the distribution of emergency packs should the power cessation be a longer duration. Royal voluntary Service work closely with other agencies during this time.

4. Additional Services available in Herefordshire

Transport - we operate two transport schemes in the county. Ross Area Transport operates throughout postcode area HR9 and is part of the councils Community Transport Forum. Working closely with the forum we can signpost and help arrange transport through our hubs based at Ross on Wye and Hereford.

Additionally we receive funding through the People's Health Trust Lottery and this gives us the ability to operate a scheme county wide to all residents of Hereford over the age of 55, this is particularly useful for keeping hospital appointments and Doctors appointment which is so important for the well-being of older people. These services are chargeable but in the case of the People's Health Trust Lottery we do have a hardship scheme available.

Good Neighbours – is a countywide service that is again open to residents over 55. A volunteer is assigned to the service user dependant on their need. Areas covered can be assisted shopping, reminding of appointments, arranging transport, attending lunch clubs or other social activities, even popping round for a cup of tea and a chat. We can help them arrange handyman and gardening through our partners in Herefordshire.

Telephone Befriending – we offer a weekly telephone call to service users who find themselves isolated at home. We have received fantastic feedback from our current service users who really look forward to their weekly call.

Glenton Lodge – runs Monday to Thursday and offers the eligible people the chance to meet up out of the house with planned activities and lunch. There is gentle exercise, hairdresser, chiropody and reminiscence on offer.

Afternoon Clubs – there are 10 clubs in Herefordshire which offer a variety of activities ranging from raffles, speakers, trips out & about dependant on the members interests.

Lunch Clubs – We have 24 lunch clubs operating in Herefordshire where over 800 people attend our weekly clubs enjoying a hot meal and other activities this reduces isolation.

5. Finance

Royal Voluntary Service recognise the restraints that councils are working to in the current climate, whilst we reduced our costs in this financial year, to allow us to prepare a full proposal for full cost recovery, we are willing to reduce quarter payment (January 2014 – March 2014) to £13,500 from the original £15000, a reduction of 10% this will avoid having to administer two different prices for any new users from November.

Appendix 2

RNIB Talking Books – Herefordshire Service User Consultation

Introduction:

Talking Books provide audio recordings of a wide range of books for people with serious visual impairments which are played on specialist equipment also provided through the service. Titles and regular catalogue updates are sent to subscribers through the post: there are currently about 20,000 different books available.

The Herefordshire Council currently funds the Talking Books Service in Herefordshire, paying approximately £13,000 per annum for a current user group of 173 people. The Herefordshire Council is reviewing its funding of the service with a view to withdrawing the direct subsidy of the service. People who meet FACS criteria would receive funding to allow them to individually purchase the service from RNIB (Royal National Institute of Blind People).

The Herefordshire Council was required to undertake a consultation with people who access the RNIB's Talking Books Service as part of its review.

Methodology:

People who use Talking Books have difficulty in accessing printed material. Consequently any method requiring consultees to respond to a written questionnaire would be inappropriate. A telephone survey of service users would allow all service users to personally answer questions that would not require anyone other than the individual and researcher to know of the person's responses.

A short survey of five questions, one with a subsidiary question was devised (Appendix 1). Only one question was formatted to allow respondents to give open ended responses. All the questions were formatted to give quantifiable answers based on a predetermined coding structure (Appendix 2). Answers were recorded directly onto an Excel spreadsheet.

The survey was conducted by one interviewer in a one week period. Each service user was called a maximum of three times for a response, each of the calls at a different time on different days: this restriction was imposed to allow the survey to be completed within a one week period. The phone was allowed to ring for a long time to allow people with mobility problems time to be able to get to the phone.

As only 84 people responded to the survey as simple analysis of the questions was undertaken. No multivariate analysis was used as the numbers involved would not produce statistically robust data.

Survey Responses:

Of the 173 service users, 42 were not able to be contacted either because their telephone number was unknown, they had recently died, or were unable to respond for medical reasons.

29 service users did not answer the phone on any of the three calls they were each given.

Responses from an additional 18 individuals were not recorded as they either no longer used the service, were not prepared to respond, or had only just registered with the service and so were not able to provide answers based on their own experiences.

Responses from the remaining 84 people were recorded and used to provide the survey results data.

Survey Results:

There was a significant variation on the number of books people took out from Talking Books each year. Some only had a new book every two months or so, while one respondent said she had over 1,000 books a year. Nine people said they had over 200 books a year, with an additional eight people saying they had over 100 books a year. Ten more people said they had on average at least one book a week (50 plus books a year). Nine people said they had up to six books a year, six more had up to 12 books a year, ten people had between 12 and 24 books a year, and the remaining 32 people had between 25 and 50 books a year.

All of the respondents stated that they took out Talking Books for leisure purposes. Six people said they accessed 'How To' books, usually recipe books. One responded was a student who used Talking Books for study purposes, and 3 people accessed books supporting their religious faiths through the service.

31 respondents said that they would be prepared to pay the current full cost of the service (£7 per month) if need be, while an additional three people actually said that they would pay up to £10 a month for the service. 11 people were prepared to pay between £3 and £5 a month, and seven people said they would pay up to £3 a month. 14 people said they would not pay for the service, some for financial reasons, while others stated that they thought it should be a free

service as a matter of principle. The remaining respondents, 20 people, were undecided as to whether or not they would pay and if so how much they would be prepared to pay.

48 of the respondents (57%) said they either did, or could, access audio or print materials from sources other than Talking Books. The main additional sources of reading material were libraries, talking newspapers/magazines, Calibre (free audio book service) and privately bought materials (either by the individual or her/his family).

Six of the 84 respondents did not answer the final question about why they used Talking Books. Of the 78 people answering the question, 51 said they used Talking Books to continue a previously held pleasure of reading, 50 said they used Talking Books for enjoyment, 22 to occupy time, 12 for intellectual stimulation, while 19 described Talking Books as being a lifeline/invaluable. Five people said that not having Talking Books would make little difference to them in their lives.