

Access to Food Proposal

From desktop research/mapping exercise and numerous conversations/online meetings/workshops within and across DEA Covid 19 Response Teams in the city and with city/district/regional wide partner organisations such as Foyle Food Bank, Fare share, APEX Social Supermarket, Churches Voluntary Trust etc. an number of key lessons/concerns/challenges have been highlighted.

Summary of lessons/concerns/challenges

- a) Covid 19 has shone a light on the vulnerabilities of households across the city/district and the number of people experiencing or at risk of food poverty/insecurity.
- b) The latest economic outlooks and food poverty studies/campaigns/evaluations report a substantial increase in food poverty/insecurity with all forecasting a sharp rise in demand for emergency food aid.
- c) Several reports from organisations such as Trussell Trust, Fare share and the Independent Food Aid Network (IFAN) state that the most likely groups to require assistance with food include single person households, families with children, single parents, newly unemployed and waiting for universal credit, low income families, self- employed waiting for income support, disabled people and people dealing with an illness.
- d) Addressing food insecurity '*when all people at all times have physical, social and economic access to sufficient, safe and nutritious food which meets their dietary needs and food preferences for an active and healthy lifestyle*' (FOA 1996). is resource (staff / volunteers / transport / storage / coordination /administration etc) intensive at neighbourhood level. Localised, targeted and collective community led responses at DEA level are effective but not sustainable.
- e) Nutritional food packages are essential and the continued delivery/safe storage and distribution of fresh food through the Fare Share Programme at £0.45 per kilogramme is required to ensure individual/families in need do not just receive tinned/packaged food.
- f) There is a need to ensure appropriate food parcels that match family size/need. The independent Food Aid Network (IFAN) reported that over a third of their organisations have had to increase the size of their parcels to support people with a food supply for a longer time period than usual. We also need to ensure individuals/families have access to cultural appropriate food parcels and food parcels suitable for individuals with pre-existing special dietary requirements e.g. food allergies/gluten free etc.
- g) Additional WRAP around support packages in the community are required to address underlying issues of food insecurity/poverty and to help move individuals/families out of poverty.
- h) We collectively utilise and strengthen the centralised food supplies available in the city at Foyle Food Bank/Fare Share Depot at Apex Healthy Living and support Apex safe collection/storage and delivery of fresh foods.
- i) There is a need for a more joined up/collaborative/co-ordinated response across the city/district with clear eligibility criteria/messaging and more joined up monitoring/evaluation so to report/track need/demand.
- j) There is a risk of individual/families in the city/district becoming over reliant on foodbanks which in turn risks institutionalising emergency food aid within the city. It is critical that we must also work together and focus on a long- term sustainable approach to tackling food insecurity in the city/district.
- k) Need to improve accessibility to food support and reduce stigma-maximise dignity of those accessing food aid.

Project proposal/Short term Plan (1st November 2020 to March 2021) DC&SDC Access to Food/Linked Support Project

The four city based NRP's (Waterside, Triax, Outer West, and Outer North)/DEA Strategic Growth Partnerships (Waterside, Moor, Foyleside, and Ballyarnett) and Faughan DEA in partnership with APEX, Foyle Food Bank, Fare Share and Churches Voluntary Trust will deliver a co-ordinated/collaborative WRAP around 'Access to Food' project in the city and Faughan DEA.

The project will bring together all the current assets/resources/knowledge/expertise available by each community/organisation to provide a centralised, accessible, more sustainable infrastructure to address the current/future food insecurity/poverty in the city.

Each of the 3-city side NRP's/ Strategic Growth Partnership DEAs will appoint a facilitator for 16hrs per week and the Waterside NRP/DEA will appoint a facilitator 20hrs per week who will be responsible for both Waterside and Faughan DEA's. Each facilitator in each of the DEA's will be responsible for contacting/following up with all individuals/families referred to the project, assessing their need over the phone and processing the referrals based on their professional judgement and those of the referral partners within their respective neighbourhoods. The key assessment of need/eligibility criteria will be

A) Individuals/families living in poverty- This will be determined by either

Recent financial hardships as a direct impact of the coronavirus such as

- Change to employment and reduction in income (job terminated/furlough/reduced hrs etc including self-employed work
- Child/caring responsibilities impact ability to work
- Bereavement impact ability to work or income
- Ill health/Disability impact ability to work income

OR

Individual/family meet the low-income threshold and are receiving at least one of these specified benefits:

- Universal Credit (Including pending application)
- Child Tax Credit
- Employment & Support allowance
- Job Seekers Allowance
- Working tax Credit
- Income Support
- No Recourse to Public Funds

B) Individual/families at risk of food insecurity/poverty

- Determined by referral partners/DEA facilitator using their professional judgement.

C) Location.

- The individual/family must live in the respective DEA

These referrals will not only be self-referrals (referrals from individuals who themselves ring the helpline) but also referrals from a wide range of individuals/organisations who in utilising their professional judgement indicate/believe the individual/family are at risk of food insecurity such as staff within the C/V sector, schools, Churches, Council, social services, GP's, PSNI, NIHE, Housing Associations, Advice NI etc. The facilitators within each of the DEA's will take the referrals through a central DEA Community Helpline (those previously operating in each DEA from mid-march to the end of July 2020) which will be reopened and promoted locally to all partners/general public through existing networks/steering groups, newsletters, websites, social media channels, posters etc.

Appendix 1

In addition, the facilitators will be responsible for placing food parcel orders with APEX/Churches Trust, administering/keeping up to date the central database (See monitoring/evaluation framework below), and following up/signposting individual/families to additional support available within their respective neighbourhoods and/or city.

All 4 lead partner organisations will provide office accommodation and purchase IT equipment/telephone for each facilitator, provide ongoing supervision/support, continuously inform, engage and support local C/V groups/partners/agencies to refer in potential individuals/families at risk of food insecurity/poverty within their respective DEA's, regularly attend update meetings, continue to build upon/strengthen and create new referral pathways of support, prepare/submit regularly reports to DC&SDC and continue to work collectively to develop a long term strategy to address poverty/food insecurity in the city/district.

APEX/ Foyle Food bank will prepare all food parcels referred by each of the 3 DEA's in the city side and due to accessibility Churches Voluntary Trust will prepare all food parcels referred by the Waterside/Faughan DEA's. Options will exist for individuals/families to collect either their food parcels at Foyle foodbank, at convenient venue within their neighbourhood or have them delivered to their home. In addition, APEX will be responsible for the order, purchase, collection and delivery of all fresh food on a weekly basis from the Fare Share depot in Belfast for all five DEA's to ensure all food parcels distributed have fresh food/nutritional.

To reduce a dependency culture, we would anticipate that there is a cap placed on the no. of emergency food parcels individuals/families can access e.g. Maximum 5 in any 6 month period, however if they require more long term, regular, weekly support with food they could then referred on to the APEX Social Supermarket which will enable them to access food supplies weekly up to 6 months.

Funding Requirements

ITEM	Breakdown	Costs
DEA Facilitator Fees-Central referral process in each DEA/co-ordinate WRAP Around Service/Follow Up with clients /administration	16hrs per week/20 weeks/£15 per hr =£4800 x 3= £14,400 (Moor/Foyleside/Ballyarnett DEAs 20hrs per week/20weeks/£15 per hr=£6000 (Waterside/Faughan DEA's)	£20,400
Office set up-IT equipment /telephone	£600 per Lead partners x 4	£ 2,400
Transport Costs	£500 per DEA X 3 city side £1500 X 1 Waterside/Faughan	£ 3,000
Management Fee	£200 per month x 6 months x 4 DEAs	£ 4,800
Foyle Food Bank (Upscale) Staff Additional Ambient/Toiletries		£20,000
Churches Voluntary Trust Equipment Costs/Refrigeration	£2000	£ 2,000
Total Cost		£52,600
Total Requested		£52,600

Monitoring/Evaluation Framework

Appendix 1

From a review of existing monitoring/evaluation templates including the Foyle Foodbank, Apex Social Supermarket, ETHOS Family Support Hub, Ballyarnett DEA Covid 19 Community Support helpline and the proposed DfC 'Outcome Based Accountability' (OBA) Scorecard we would proposed the following data to be collected by each of the DEA facilitators.

Data Collection on ENTRY

Organisation/Client Unique Reference Code	
Date:	
Source of Referral: Single Point of Entry (Referral Gateway) Family Support Interventions Team GPs/Nurse Paediatrician Health Visitor Sure Start CAMHS School Education Welfare Service/EA PSNI Youth Justice NIHE/Housing Association Voluntary organisation Community organisation Adult Mental Health Services Self-referral Re-Referral Other Social Work Services Other (please state) e.g. Skills North West, Mental Health Practitioner, Welfare Rights Group, Local Councillor/MLA Local counsellor	
Referral Agency Full Name:	
Referral Agency Contact Tel:	
Client Full Name	
Address	
Postcode	
Contact Telephone No.	
Email *	
Employment Status	Employed PT Employed FT Self Employed Economically Inactive Unemployed
All adults in Household & Gender	18-24 yrs. M/F 25-64 yrs. M/F 65+ yrs. M/F
Children in Household & Gender	0-4 yrs. M/F 5-11 yrs. M/F 12-17 yrs. M/F
Ethnicity	White

Appendix 1

	Chinese Indian Irish Traveller Pakistani Bangladeshi Black Caribbean Black African Black Other Eastern European Mixed Ethnic Group Other Ethnic Group (Please specify) Roma Traveller Not Stated
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Note: Under GDPR- Each lead partner would read out their GDPR Policy for the 'Access to Food' Project/ Seek Consent and provide all clients with info on how they can access a copy of the policy.

Client Unique Reference Code	
Main Reason for Referral Benefit Change Benefit Delay Refused Short Term benefit Advance Debt Low Income Delayed wages Made redundant Sickness/Ill Health Homeless Domestic Abuse Family Breakdown Mental Health Disability Housing Other Please Specify	
Secondary Reason for Referral Benefit Change Benefit Delay Refused Short Term benefit Advance Debt Low Income Delayed wages Made redundant Sickness/Ill Health Homeless Domestic Abuse Family Breakdown Mental health Disability Housing Other Please Specify	

Appendix 1

<p>Overall, on a scale of 0-10 where zero is not satisfied at all and 10 is completely satisfied, how satisfied are you with your life nowadays?</p> <p>0 1 2 3 4 5 6 7 8 9 10</p>	
<p>Linked Referral Activity/Support</p> <p>Food Parcel-No of weeks required? Listening Ear Family Budgeting Debt Counselling Benefit Advice Family Support Hubs Essential skills Training/employability skills NIHE/Housing Association Medical/GP Counselling Service Volunteering Healthy eating Complementary Health Fuel Poverty Supported Housing Other Please Specify (name specific referrals to C/V groups/services in their neighbourhood)</p>	
<p>Timescale</p> <p>1 week from referral to intervention achieved 1 week from referral to intervention not achieved 2 weeks from referral to intervention achieved 2 weeks from referral to intervention not achieved 3 weeks from referral to intervention achieved 3 weeks from referral to intervention not achieved 4 weeks from referral to intervention achieved 4 weeks from referral to intervention not achieved 4+ weeks from referral to intervention achieved</p>	

Appendix 1

4 + weeks from referral to intervention not achieved	
Data Collection on Exit /Evaluation	
Organisation/Client Unique Reference Code	
How satisfied are you with the quality of engagement you received? Extremely satisfied Very Satisfied Satisfied Not Satisfied	
To what extent do you feel that you were treated well/with dignity? Extremely Well Very Well well Not at all well	
How would you rate the range and quality of food you received? Excellent Good Fair Poor Very Poor	
To what extent to you agree that the additional linked/support services helped you? Strongly Agree Agree Neither Agree/Disagree Disagree Strongly Disagree	
To what extent has the support you received reduced food insecurity in your household? Very Much Somewhat A little Not at all	
Overall, on a scale of 0-10 where zero is not satisfied at all and 10 is completely satisfied, how satisfied are you with your life nowadays? 0 1 2 3 4 5	

Appendix 1

6	
7	
8	
9	
10	

Note: At present we would not recommend including the self-efficacy/locus of control on entry/exit sheets (See below). This information is best asked at a face to face meeting with a client whom you have built up a relationship with. Due to Covid there will be very little if any face to face contact and most assessments will be done over telephone. We would need a simpler way to track with minimum pre & post questions

Self-efficacy is an individual's belief in his or her innate ability to achieve goals & Locus of control is the degree to which people believe over their relationship with the outcomes of the events

	Strongly Agree	Agree	Neither Agree/Disagree	Disagree	Strongly disagree
I can always manage to solve difficult problems if I try hard enough					
If someone opposes me, I can find means and ways to get what I want					
It is easy for me to stick to my aims and accomplish my goals					
I am confident that I could deal efficiently with unexpected events					
Thanks to my resourcefulness I know how to handle unforeseen situation					
I can solve most problems if I invest the necessary effort					
I can remain calm when facing difficulties because I can rely on my coping abilities					
When I am confronted with a problem, I can usually find several solutions.					
If I am in a bind, I can usually think of something to do					
No matter what comes my way, I'm usually able to handle it					

Note Each DEA /Lead Partner would agree to submit one case study per quarter.