

Written evidence submitted by Newcastle City Council (COV0052)

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Introduction

Newcastle upon Tyne is a vibrant and historic city, with an estimated population of 300,196 at the 2018 mid-year estimate¹. Newcastle is a university city with high numbers of students. This is demonstrated by the large proportion of young residents, with 37% of people being aged under 25 years. The working age population, aged 16-64 years, accounts for 68%, with the over-65s comprising 14.4%. Newcastle's population is ageing, with the over-65 population estimated to increase by almost 17% by 2027.

In common with other local authorities across the North East, Newcastle residents experience higher levels of deprivation than the rest of England. Deprivation impacts on life expectancy and worsens health inequalities. Life expectancy in Newcastle is 13.1 years less for men and 8.8 years less for females compared to the England average².

Evidence exists for risk factors which increase the probability of food insecurity in a household³. Newcastle residents suffer disproportionately from the three main risk factors for food insecurity. Unemployment, as a percentage of the working age population claiming out of work benefits, is 3.3% for Newcastle compared with 1.9% for England⁴. The rate of long-term disability or health problems is 18.8% in Newcastle compared with the England average of 17.6%. Low income as defined by the English Indices of Deprivation, is 19.4% in Newcastle compared with England at 14.6%⁵. Newcastle entered the COVID-19 pandemic at greater risk from food insecurity on average than the rest of the country.

¹ Office for National Statistics 2018 Mid-year estimate, 2019 LA boundaries

² Figures calculated by Public Health England using mortality data and mid-year population estimates from the Office for National Statistics and Index of Multiple Deprivation 2010, 2015 and 2019 (IMD 2010 / IMD 2015 / IMD 2019) scores from the Ministry of Housing, Communities and Local Government.

³ Loopstra R, Reeves A, Tarasuk V. The rise of hunger among low-income households: an analysis of the risks of food insecurity between 2004 and 2016 in a population-based study of UK adults. *J Epidemiol Community Health* Published Online 2019

⁴ NOMIS Labour Market Statistics

Newcastle has a significantly higher rate of children living in poverty (24.7%) than the England average (17.0%)⁶. Over a quarter of Newcastle’s children receive free school meals compared with only 13.5% nationally⁷. Newcastle’s children suffer with significantly higher rates of overweight and obesity than the England average, representing 40.4% of year 6 children (England 34.3)⁸. Families in Newcastle already faced challenges in providing children with healthy food and lifestyles before the introduction of measures to control COVID-19.

Executive summary

- While the government shielding programme is gratefully received in Newcastle, people suffering from food insecurity either caused or exacerbated by COVID-19 represent a far

⁵ *Ministry of Housing, Communities & Local Government*

⁶ *HM Revenue and Customs (Personal Tax Credits: Related Statistics - Child Poverty Statistics)*

⁷ *Department for Education school census*

⁸ *National child measurement programme*

broader group than those defined as medically extremely vulnerable. Formulating health policy on a medical model and identifying food support needs by clinical criteria risks disregarding the wider social determinants of health.

- People who are already suffering from inequalities are most likely to suffer from food insecurity during and after the COVID-19 containment measures, with far-reaching health consequences. Newcastle began this pandemic with worse inequalities than the England average and is likely to experience disproportionately negative health outcomes as a result. COVID-19 control measures resulting in higher food bills and lower incomes are likely to increase the number of households unable to afford food. For many, these problems are exacerbated by delays in accessing Universal Credit payments. Evidence suggests more Newcastle residents are now accessing free food support than previously.
- Voluntary and community services providing food support in Newcastle have been impacted by COVID-19 control measures, and many have had to reduce, adapt or close services due to staffing and volunteers own vulnerabilities or social distancing limitations. This has caused particular problems for people who were already experiencing precarious food security and were reliant on these services.
- Newcastle City Council has undertaken significant organisational change and drawn on council funds to support residents experiencing COVID-19 related food insecurity. The council has also been required to augment the government shielding programme where food parcels have been unsuitable or delayed. While this has created a strain on services, working together to tackle the challenges of food supply has resulted in

improved communication and collaborative action across agencies which will benefit future activity.

- Barriers exist within the current structure and process of food supply, resulting in worsening food inequalities. Such barriers include; difficulties for people who are shielding in accessing priority online shopping, issues around methods of payment for food including access to cash, supermarket restrictions which prevent food banks from purchasing in bulk, and lack of council powers to procure specific goods. Local solutions are being trialled, but government and industry action on these issues would be welcomed.
- Many food support services require residents to have telephone or online access and the capacity, agency and motivation to request help. Older people, those with sensory impairment or with limited ability to read or understand English face additional barriers to accessing food support or having access to information about changes to services. Food support services from government and business should strive to be as accessible as possible using multiple communications approaches.
- Access to food does not necessarily mean access to a healthy diet. Individuals require skills, knowledge and facilities to turn ingredients into a meal. Multiple barriers exist to meal preparation including housing, utility supply issues and physical and mental health problems. Complex solutions to these issues are required in order to address underlying causes and satisfy urgent demand. Government should consider how it wishes to manage these problems within the shielding programme.

- Families with babies and toddlers experience specific difficulties accessing infant foods and essential items during COVID-19 control measures. Local solutions have proved successful and have provided services with points of contact with vulnerable families not otherwise known to services. Work in this area has highlighted an increased demand for help in accessing other essential items including sanitary and incontinence products, which should not be forgotten in discussions around food supply, as they will be impacted by the overall household budget. Breastfeeding rates at the time of discharge from hospital have increased in Newcastle during COVID-19. Lessons learned from health promotion successes during this time should be reviewed and used to improve services.
- While Newcastle welcomes the free school meals (FSM) payments, concerns exist around children's access to meals and changes are required to the e-gift card/voucher system to maximise equity of access to food for children. In particular, government and supermarkets are urged to restrict use of FSM funds to food and drinks for children only. Local advice has been produced around budgeting and recipes but national support for this would be helpful to families.
- People with no recourse to public funds, including those whose claim for asylum has been rejected, are at significant disadvantage during this time. Emergency review of benefits and revision of ASPEN card systems and processes are encouraged.
- As the economic impacts of COVID-19 are anticipated to be long-lasting, agencies involved in free and low-cost food supply expect demand on services to increase and are concerned that some people will become dependent on their support. Government is

advised to consider the impact of the future cessation of the shielding programme to ensure this does not create further burden for voluntary services and local authorities.

- There is a risk that evaluation of food supply issues will give a biased account of food security by focusing on access to shops, supermarkets and statutory support and ignoring the significant demand and provision at the level of local voluntary services. Monitoring and evaluation of food supply interventions should be comprehensive in scope and rigorous in methods. Sharing of government information on the reach and effectiveness of the shielding programme will help councils to monitor and respond to food insecurity at a local level more effectively.

Call for Evidence response

1. Have the measures announced by the Government to mitigate the disruptions to the food supply chain caused by the pandemic been proportionate, effective and timely?

Proportionality

- 1.1. **Inclusion criteria:** Government action to protect those most vulnerable from COVID-19 through the shielding programme is warmly welcomed by Newcastle. Inclusion criteria for the extremely vulnerable group are clearly and rationally defined and have been enhanced by the pragmatic addition of people deemed most vulnerable by their own General Practitioner.
- 1.2. **Risk factors:** Evidence exists for known risk factors for food insecurity, including unemployment, long-term health problems or disability and low income. Newcastle entered the COVID-19 pandemic with higher than average levels of these risk factors and measures to reduce the spread of infection including lockdown, school closures and decreased levels of employment are likely to precipitate, perpetuate and worsen food insecurity across our city.
- 1.3. **Food insecurity:** This hypothesis of worsening food insecurity during COVID-19 is supported by data from the council's 'Information Now' web site, which demonstrates that the number of hits for the 'Food banks and free emergency food' page in the two weeks from 9th April 2020 was greater than for the whole of the year up to that date. To focus food support solely on the defined extremely vulnerable group is likely to exclude many people at risk of food insecurity either caused or exacerbated by measures designed to contain COVID-19.

- 1.4. **Local action:** Government has chosen to delegate the responsibility for supporting people outside of the shielding programme who are experiencing food insecurity to local authorities. Due to the large and increasing scale of this problem, Newcastle City Council has allocated £50,000 of council funding to establish a comprehensive COVID-19 food support system. The council, in collaboration with VCO partners, has established a charitable 'GoFundMe' fundraising initiative to support emergency food supply, resulting in generous donations from the general public thus far of over £30,000. Access to council food support is through 'Citylife Line', a newly established COVID-19 telephone and online service staffed by council officers redeployed from other teams. Requests for food support are triaged based on urgency and need and directed to appropriate sources of help. Protocols for assisting specific groups, including asylum seekers and those making same day requests serve to ensure support is timely and effective.
- 1.5. Collaboration with the local voluntary and community organisations (VCO) body, 'Connected Voice' has allowed the council to work with multiple third sector agencies in responding to residents' needs. Existing strong links forged by the council's Active Inclusion team between voluntary food providers across the city have served as a foundation for this activity during COVID-19. Logistical support for food distribution has been drawn from other areas of the council and storage has been provided to contain the government bulk offer and extra purchased supplies. Partnership working between the council, voluntary groups and the Newcastle upon Tyne Hospitals NHS Foundation Trust have enabled the provision of food support for those who need it around the time of discharge from hospital.

Effectiveness

1.6. **Barriers to access:** The shielding programme registration process requires people to be able to open, read and understand a government letter, then actively opt in to the service by telephone or internet. Multiple barriers to access exist, including having a registered address, language skills, access to telephone or internet, cognitive capacity and psychological wellbeing among others. Of the approximately 9,000 residents of Newcastle classified as extremely vulnerable, 3,827 have registered for food support through the government scheme (at the time of preparing this report). Others will have been actively followed up and contacted by the central outbound helpline, although the council has not been advised on the effectiveness of this follow up process. According to an interim analysis of Citylife Line food requests on 07/04/20, only 2 out of 136 requests sampled (1.5%) were from people meeting the criteria for the extremely vulnerable group stating that they had not been offered central food support⁹. This low number should however be interpreted with caution, as many people experiencing barriers to using the central government system will encounter the same problems with access with Citylife Line. Newcastle City Council are concerned that, while government retain accountability for ensuring those eligible for the shielding programme have access to it, the council has a duty of care to the city's residents in ensuring their food security.

Recommendation: Government should supply local authorities with up to date information on the effectiveness of the outbound call centre in improving access to

⁹ *Citylife Line: COVID-19 food support requests interim analysis Newcastle City Council 07/04/20*

the shielding programme and advise councils on any action needed to prevent vulnerable people from missing out on food parcels.

- 1.7. **Emergency bulk offer:** While gratefully received, foods supplied in the emergency bulk offer were not sufficient to provide a nutritionally balanced food parcel. Newcastle City Council used its own funding to purchase supplementary content. The analysis of Citylife Line data revealed 11 out of 136 (8%) of all food related calls were from residents requesting local authority support to top up their centrally provided food supply including fresh produce¹⁰.
- 1.8. **Food parcels:** Anecdotally, the quality of the government shielding programme food parcels is reported to be good, with high levels of satisfaction from residents.
- 1.9. **Evaluation and monitoring:** Evaluation of effectiveness of food support during COVID-19 should be wide-reaching. Data from statutory sources including Newcastle City Council's Citylife Line give only a partial picture, representing those residents with the resources, capacity and language to use telephone or online services. Many vulnerable residents are reported to be contacting local voluntary organisations directly and these services are bearing a significant burden of demand for food supply. Comprehensive data from all food support providers should be considered when monitoring trends and allocating resources.

Timeliness

¹⁰ *Citylife Line: COVID-19 food support requests interim analysis Newcastle City Council 07/04/20*

1.10. **Emergency response:** Households can rapidly find themselves without food and a timely response is essential. The entire Newcastle City Council food support process was implemented at speed, which is to the credit of the teams responsible, but therefore required iterative updates over time in some key areas. Delays were noted in the provision of effective support; for example, providing information to supermarkets took time and supermarkets were slow to set up their systems. Analysis of Newcastle Citylife Line data for completed emergency (within 24 hours) food support requests revealed 5% were from residents registered with the shielding programme who were waiting for their food parcel.

2. Are the Government and food industry doing enough to support people to access sufficient healthy food; and are any groups not having their needs met? If not, what further steps should the Government and food industry take?

2.1. **Deprivation:** Newcastle residents are shown to suffer disproportionately from poor health outcomes compared with the England average¹¹. Opportunities for residents to exercise have been limited during lockdown and leisure facilities may struggle to reopen even after the pandemic has passed, potentially risking increased rates of inactivity and obesity. The economic impact on residents of the COVID-19 containment measures is likely to affect disproportionately those people already in the most deprived groups and lower income may restrict their agency to make healthy life choices into the future.

¹¹ Figures calculated by Public Health England using mortality data and mid-year population estimates from the Office for National Statistics and Index of Multiple Deprivation 2010, 2015 and 2019 (IMD 2010 / IMD 2015 / IMD 2019) scores from the Ministry of Housing, Communities and Local Government.

Recommendation: Particular government and industry attention should be paid to the nutritional needs of the most deprived groups in the population, and not restricted to those with specific health needs. This should include a holistic view of the factors which influence a healthy weight for adults and children.

2.2. **Food pricing and availability:** Government and food industry measures currently focus on the assumption that households access their food from shops and supermarkets. Many Newcastle residents are unable to afford commercial prices and instead rely upon free and low-cost food supplies. These include community 'pay as you feel' arrangements, food banks and hot meal provision. Several of the provider organisations in the city have closed due to COVID-19 containment measures and residents who were in precarious food security now find themselves in need. Travel and transport restrictions mean that some residents have reduced access to fresh foods and are reliant on local convenience stores which often have higher prices.

Mitigation: Newcastle City Council has developed a free and low-cost food protocol and online advice. The council and voluntary providers supply residents with emergency food parcels or meals where needed.

Recommendation: Greater government and industry attention should be paid to the needs of people already in precarious food security, with an emphasis on improving access to fresh foods and affordable meals for those unable to cook.

2.3. **Ability to prepare food:** Supply of ingredients to those experiencing food insecurity assumes the individual will have the skills, knowledge, facilities, equipment and physical and mental capacity to turn them into a meal.

Mitigation: As part of Newcastle's Citylife Line food triage process, ability to prepare food is considered, with support provided to access paid or free hot meals where required. Recipe and budgeting advice have been developed for families.

Recommendation: Government should include an assessment of ability to prepare food as part of the shielding programme.

2.4. **Utilities:** Some Newcastle residents have experienced difficulties maintaining connection to gas and electricity supplies necessary for cooking and refrigeration of food during COVID-19. Many people depend on prepayment energy meters, topped up with a 'key' which can be loaded with funds at local shops. Where residents are self-isolating, it may not be possible for them to top up their key cards, resulting in cessation of utility supply. Prepayment meters are more common in deprived households, creating further inequalities in accessing basic facilities for food preparation¹².

Mitigation

Newcastle City Council has produced a protocol for advice for residents, recommending they contact their supplier in the first instance to arrange remote top ups or a credit arrangement. Further support is offered by the council: if a resident is able to pay for fuel, volunteer assistance can be arranged for a fuel

¹² *Paying to be poor: Uncovering the scale and nature of the poverty premium; Davies, S et al, 2016, University of Bristol personal finance research centre*

payment top up. If the resident has no means to pay, assessment is undertaken for local authority crisis support. Should the resident not be eligible for this, hot food and an emergency food parcel is provided via the volunteer network. Residents are also assessed for social care needs in the context of unheated accommodation.

- 2.5. **Babies and toddlers:** Food support needs differ across the life course and flexibility is required to respond appropriately. Some families with infants and toddlers have experienced difficulty in accessing infant formula and essential baby care items due to self-isolation/ shielding, lack of funds or scarcity of some products in local shops. Encouragingly, rates of breastfeeding on discharge from hospital in Newcastle saw a 9% increase from February 2020 to April 2020. Local breastfeeding coordinators have attributed this welcome increase to health promotion of breastfeeding in the context of COVID-19, as mothers become more aware of the importance of human milk in protecting their baby's immunity to infection.

Mitigation: Newcastle City Council Community Family Hub staff have coordinated the council's purchase, packaging and distribution of essential baby items. Demand was initially found to be high, necessitating further emergency purchase of supplies. Health visitors, schools and voluntary organisations were engaged to aid with distribution. Senior child services staff liaised with UNICEF UK to ensure standards complied with current guidelines, ensuring 'follow on' milks and foods marketed for infants under 6 months of age were excluded from parcels.

Monitoring and evaluation were introduced at the beginning of implementation. Families requesting support who were not known to children's services previously have been actively followed up by to assess for any further needs. In addition to

satisfying residents' immediate needs, several positive outcomes of the intervention were identified. These include improved collaboration with schools around Early Help assessments, the development of links with local sexual health services and improved intelligence sharing with Citylife Line to better understand families' difficulties during the pandemic. Data from residents' requests have been used to improve the quality of outbound communications.

Recommendation: Government should consider the promotion of similar COVID-19 family support models nationally. Further research into rates of breastfeeding and COVID-19 should be undertaken, and opportunities to promote breastfeeding as the best choice for natural immunity should be capitalised upon.

- 2.6. **School aged children:** Supporting families to provide healthy nutritious low-cost meals to their children in any circumstances is a priority for Newcastle City Council. This is a particular concern during COVID-19, especially for those entitled to a free school meal (FSM) and those newly qualifying for one due to the pandemic.

At the start of school closures, pupils not attending school were provided with a FSM by their school's catering provider. In Newcastle the local authority provider produced a packed lunch which met the national School Food Standards. Other providers, however, chose to offer ingredients to prepare meals, relying on parental skill and facilities to do this. Many packed meals and food boxes were not collected, resulting in children not receiving the meal. To reduce this risk, some Newcastle schools linked up with community and voluntary organisations to arrange deliveries to every eligible child.

Whilst the introduction of the government e-gift card/voucher scheme for free school meals is welcomed and helps to address some of the issues above, barriers exist. Parents may lack the skills to budget, prepare and cook meals. Parents with low literacy or language barriers may struggle to use the e-gift card or understand the new scheme. As no age restrictions exist on FSM e-gift card purchases, some adults may choose to spend them on alcohol, tobacco or lottery tickets, leaving their children without a meal that would otherwise be provided in school.

Mitigation: Newcastle City Council produced and disseminated an information guide with supporting short 'Biteable' film¹³ on feeding your child when on a low budget. Simple evaluation methods are being used to capture feedback on the resources. The Q and A resource for parents and carers about the gift card scheme is being translated locally into several languages and ways of supporting BAME communities to feed their children when on a low budget are being explored with the community.

Recommendation: Government should work with industry to protect children by placing appropriate restrictions on FSM e-gift cards. Central advice on budgeting and recipes for families would be useful and government information on access to FSM should be provided in inclusive formats. The DfE should work with the supermarkets to collect data on how the gift cards and vouchers are being spent to provide useful information on the diet of children and young people during the pandemic.

¹³ <https://biteable.com/watch/top-tips-for-feeding-your-child-on-a-low-budget-2510488>

2.7. **Asylum seekers:** Asylum seekers already face substantial challenges of living on £37.75 (those on Section 95 support) or £35.39 (those on Section 4) a week and these are exacerbated in the current crisis. ASPEN cards, through which people receive asylum support, are uploaded with subsistence support only weekly, making it very difficult for people in the asylum system to buy food and other essentials in sufficient quantity to minimise trips or prepare for self-isolation.

Some people seeking asylum may be housed a significant distance away from larger supermarkets and local shops, requiring the expense and risks associated with a long journey for each shopping trip. This is an increased issue for single parent families who need to take their children shopping with them. The ASPEN card does not allow online purchases and those in receipt of Section 4 (cashless support) experience further limitations as to how and where they spend their weekly allowance as they cannot withdraw cash from ATMs.

On 20 March 2020, the Chancellor confirmed that Universal Credit will be increased by £20 a week for 12 months to protect the most vulnerable and “strengthen the safety net” during the COVID-19 pandemic. There has been no increase in asylum support rates during this time, leaving this group at risk of food insecurity.

People with 'No Recourse to Public Funds' (NRPF), including refused asylum seekers are extra vulnerable due to the crisis and are often destitute, with no income whatsoever. Some temporary migrants with NRPF may feel compelled to continue working to earn money for food and risk exposing themselves and others to COVID-19

Mitigation Newcastle City Council has been working closely with VCS providers and workforce to tailor food supplies and provision to asylum, refugee and Black, Asian

and Minority Ethnic (BAME) charities to enhance their offer of support where it has been reduced, hindered or halted due to the current pandemic.

The council has developed a protocol for asylum seekers and refugees for call handlers as part of the Citylife Line triage process. It is working to develop a sustainable approach and robust solutions for this group, specifically creating a new pathway between a VCS food provider and those on S4 support who may be symptomatic or self-isolating.

Recommendations: Bi-weekly or monthly funds should be offered so that people can stock up more easily and reduce the number of shopping trips as per social distancing guidelines. The ASPEN card should be made suitable to be used for cash withdrawals for S4 and be enabled for online shopping for both S4 and S95. Additional support should be provided from asylum accommodation providers for those known to be in geographically isolated areas or vulnerable. Asylum support rates should be increased in line with the increase to Universal Credit to help reduce inequalities within this targeted, vulnerable population. Government should consider the temporary suspension of NRPF conditions so that all migrants living in the UK can access benefits during COVID-19 control measures.

- 2.8. **Drug and alcohol addiction and recovery:** Clients within addiction services or those accessing mutual aid and fellowship groups (such as Alcoholics Anonymous, Narcotics Anonymous) are likely to have a range of needs, including financial and food insecurity, and are more likely to face social isolation. People who have suffered addiction often do not have the life skills to ensure a good diet, and this

can result in poor choices of foods which, along with low income, results in poor quality or processed meals, further undermining their health conditions.

Mitigation: For those clients self-isolating, addiction services have been delivering food parcels and exploring ways to sustain access to food for their clients. In Newcastle, the Road to Recovery Trust run George Street Social, an abstinence based dry café and social space. The Trust have created a large number of online and social media networks and groups to enable peer support and recovery meetings to continue, recognising the importance of connectivity. Responding to a need from their networks, the Trust have developed a process with volunteers to deliver good quality, fresh hot food each Friday (up to 400 parcels) for people who are in recovery and need access to food. People living in temporary accommodation such as hostels (the majority of which are now self-catering) are also included in this support.

Recommendation: Government and industry should be mindful of the food needs of those suffering with, or in recovery from, addiction and additional benefit of this to their mental wellbeing as a protective factor in their treatment. In particular, consideration should be given to ensuring equity of access to the shielding programme for people who are not registered with a GP or are experiencing homelessness.

- 2.9. **Homelessness:** People experiencing homelessness are at particular risk from COVID-19 due to difficulties in compliance with social distancing, self-isolation and shielding. People who are homeless are at increased risk of food insecurity due to poverty and lack facilities for food storage and preparation.

Mitigation: Newcastle’s homeless accommodation providers have a range of measures in place to provide free food to their residents where assistance is required. This includes arrangements with supermarkets and Fare Share, foodbanks, private companies and other voluntary and community groups. Agencies provide hot meals and/or food parcels containing non-perishable and fresh foods, as well as beverages. Accommodation providers are also supplying goods to help residents with storage and preparation of food, including items such as microwaves, fridges and kettles, along with hygiene and cleaning products, to assist residents who are required to shield or self-isolate.

To support these aims, Street Zero (Newcastle’s citywide partnership to end rough sleeping by 2022) has also provided £57,000 to homeless accommodation providers to provide essential isolation packs and other items to support wellness and diversionary activities to support people to socially distance.

Recommendation: Government and industry attention should be paid to the needs of people experiencing homelessness during COVID-19. Extra efforts will be needed to support people who are eligible for the shielding programme and are homeless.

- 2.10. **Access to cash:** Not all households requiring food support lack the means to pay. A high proportion of calls to Citylife Line (43%) were from residents requiring help to shop¹⁴. Significant difficulties are experienced by those who are unable to access their cash or to use online payment methods when arranging for food deliveries. Individuals who are reliant on cash are frequently those already experiencing disadvantage¹⁵.

¹⁴ Citylife Line: COVID-19 food support requests interim analysis Newcastle City Council 07/04/20

¹⁵ Access to Cash Review March 2019 <https://www.accesstocash.org.uk/>

Mitigation: Multiple and varied solutions have had to be sought for the complexity of shopping payment problems and a shopping support algorithm has been developed in Newcastle to aid decision making and signposting. Newcastle City Council has developed a cash handling protocol to standardise procedure and minimise risk to vulnerable residents and volunteers.

The Newcastle volunteer network, the 'Toon Army' have undergone Disclosure Barring Service checks by the council, have been issued with identification, provided with an induction programme and covered by council insurance for their work with residents. Volunteers can provide guidance to people requiring support to set up online shopping as well as carrying out physical shopping trips. Newcastle City Council and some charities can produce shopping vouchers for residents which can be paid for by cheque.

Business are noted to be rising to the challenges of payments for food during COVID-19 control measures. Some supermarkets have introduced gift card schemes; however, these still require online management. Morrisons supermarket has simplified online shopping for those who prefer a pre-packed weekly shopping box to be delivered. Encouraging anecdotal evidence is emerging of shops and supermarkets in Newcastle accepting telephone payments. The Post Office have also begun to offer a postal cash service to enable people who are self-isolating to have cash vouchers delivered by Royal Mail or to their phone or email address.

Recommendations: Industry should take care to consider the needs of cash-dependent customers when finding solutions for food payments.

2.11. **Unit restrictions:** While undoubtedly supermarket policies have reduced hoarding and shortages, larger families and food banks have struggled to access adequate quantities of food due to item restrictions.

Mitigation: Newcastle City Council public health team have provided letters of support and identification badges to voluntary organisations (including Food Banks) needing to purchase food in bulk, with anecdotal reports that supermarkets have accepted these and allowed larger purchases.

Recommendation: Industry should urgently seek a national solution to the problem of unit restrictions impacting on VCS food providers, including enabling new registrations with wholesalers for this sector.

2.12. **Systematic barriers:** People qualifying for the shielding programme who decline a free food parcel automatically lose their right to priority online shopping. This counterproductive policy has worsened food supply problems within this group and could create food waste, where people accept unnecessary parcels to secure priority access. Local authorities have recently been given powers to add shielding residents onto supermarket priority lists, but the logistics of this undertaking are complex and this aspect of the shielding programme requires review. Moreover, a lack of data on the food parcel deliveries has meant local authorities were unable to advise residents seeking assurances and led to multiple requests to the national team being made.

2.13. **Dietary requirements:** Given the characteristics of the people in the shielding cohort, more consideration of specific dietary requirements could have been given.

People were left to rely on being able to obtain food suitable for allergies, autoimmune diseases and dietary preferences through other means which, given the issues with online deliveries until recently, exacerbated the issues people faced.

3. What further impacts could the current pandemic have on the food supply chain, or individual elements of it, in the short to medium-term and what steps do industry, consumers and the Government need to take to mitigate them?

3.1. **Increased demand on services:** The community food support sector envisages an increase in demand and organisations are concerned about quantities of supplies and number of volunteers. Newcastle City Council initially experienced resistance from retailers when attempting to purchase food in bulk.

Mitigation: The City Council have liaised with Fare Share, the UK's national network of charitable food distributors, who have waived their usual charges. Development of relationships with charitable and voluntary food providers has strengthened the local food supply infrastructure. Through the Local Resilience Forum (LRF), The Royal Air Force have facilitated the council's bulk purchase from the Co-op in a non-residential location and before routine opening hours to access scarce and highly demanded products. The council has optimised use of human resources, and Environmental Health staff have been redeployed to deliver emergency food parcels which could not be accommodated by community organisations.

Recommendation: Central government and industry should work to ensure local authorities have the power to purchase in bulk without having to resort to using military powers through LRFs.

3.2. **Dependency:** Experienced staff have raised concerns around the possibility of residents becoming dependent on the city council for food supplies and an increased demand on the VCS food providers over the longer-term.

Mitigation: At the time of every free food supply in Newcastle, a review is undertaken with the resident to formulate a plan to prevent recurrence of the situation.

Recommendation: Government should consider the impact of the eventual cessation of the shielding programme on individuals' food security to ensure no further burden is placed upon local authorities and voluntary services as a result.

4. How effectively has the Government worked with businesses and NGOs to share information on disruptions to the supply chain and other problems, and to develop and implement solutions? How effectively have these actions been communicated to the public?

4.1. No submission of evidence from Newcastle City Council

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