

## Citywide Strategic Partners – COVID-19 Response Lessons learnt 13.10.2020

### Strategic Community Partners:

Danny Power (Frank Gillen Centre)  
Sinead McKinley (North Belfast Advice Partnership)  
Helen Crickard (Forward South)  
Brian Kingston (Forward South)  
Jackie Redpath (Greater Shankill Partnership/Spectrum Centre)  
Nicola Verner (Greater Shankill Partnership/Spectrum Centre)  
Michael Doherty (Lenadoon Neighbourhood Renewal Partnership)  
Jim Girvan (Upper Andersonstown Community Forum)  
Bob Stoker (South City Resource Centre)  
Conor Maskey (Intercomm)

### Belfast City Council:

Alison Allen (Neighbourhood Services Manager Social & Community Recovery)  
Stevie Lavery (Neighbourhood Services Manager, West Belfast)  
Kelly Gilliland (Neighbourhood Services Manager, North Belfast)  
Cate Taggart (Neighbourhood Services Manager, East Belfast)  
Stephen Leonard (Neighbourhood Services Manager, South Belfast)  
Margaret Higgins (Neighbourhood Integration Manager, North Belfast)  
Alice McGlone (Neighbourhood Integration Manager, West Belfast)  
Kathy Watters (Neighbourhood Integration Manager, East Belfast)  
Denise Smith (Neighbourhood Integration Manager, South Belfast)

### What worked well:

- Scale of the problem. Large numbers of ppl needing support and the number of groups delivering parcels and volunteering was great. Widespread need and response.
- Quick response from council and having a single point of contact was helpful.
- Identifying a local centre to support food distribution in the area was vital – central point. Unfortunate that BCC were not able to support via their CC network.
- DFC very quickly giving flexibility to their funded groups and providing budget for first 6 months. The NR structure was essential in areas where it exists
- Local knowledge was vital – and the best way of identifying peoples unique needs
- North Belfast Directory went out with every food parcel. Also worked with businesses – key
- NBAP offer a benefit check for ppl who present with food poverty. Need to identify what support ppl need. They had an urgent list/weekly list, manage need and expectations.
- Going local was more effective. Communications across the NR areas was very important.
- Local knowledge was so very important – ppl still out shopping and receiving parcels. But this has to be balanced with the structures in place by govt departments.

### Didn't work well

- Data Sharing – this was mentioned by most of the attendees. Both between different stats and between stats and community partners.
- Shielded model – lack of information/data and volume grossly underestimated. Also, levels of vulnerability not always linked to a medical diagnosis.
- Lack of clarity around who should receive shielding letters and the basis on what those were made

- Confusion around who DfC eligibility criteria for food parcels. Needed to be more clear. Facilitated mixed messaging re need v entitlement.
- Communication between BCC/DFC/Health – felt like 3 separate structures. Too many helplines.
- Information overload. Very overwhelming and difficult at times. BCC and stats coming in with the food and helpline after the community groups were all set up and operating. BCC and Communities need to be more synchronised and do things at the same time
- Disruption to suppliers/ service companies, eg. printing services, had to make innovative arrangements.
- Need to be more strategic and work together. There was duplication and ppl getting food parcels who didn't need them. Ppl were getting food parcels not suited to them, diabetic, celiac etc. Can we get local businesses involved?

#### **Other points raised/discussed:**

- A database of all community organisations across Belfast – shared – would be useful.
- A community response plan for Belfast would be useful.
- Bigger Challenge around this winter. Potential for severe weather. Not as many volunteers available. Fuel poverty.
- Flu vaccinations – could we help promote and encourage? Example of the Drive through flu vaccines in east at Holywood arches. How do we get information from GP practices to the VCSE sector to help promote this?
- Social prescribing – importance of physical activities, mental stimulation, connecting to other services
- Areas of weak community infrastructure. How to identify and respond to gaps in support. Importance of the foodbanks and using that structure.
- Peoples needs are getting greater again
- BCC – fund 21 advice services. Vitrally important and key role going forward. Debt solutions.
- Digital inequality and access to internet.
- Domestic Violence – stay at home stay safe message – not universally application to all family situations
- Increase in ASB and family disputes.
- 18-25yr olds – may have been overlooked in the first phase. Communication with them and all groups is very important. A community message going to all, everyone has a part to play
- Information from a central point providing communities with advice/info
- Still important to pursue the recovery strategy, opportunity to look creatively toward opportunities, employment, giving people hope, positivity.
- Covid exhaustion – need a clear message to ppl – which is not traumatising. Clear, sensible and a bit longer term. Can we give positive messages? Hope and light at the end of the tunnel.
- Strategic messaging, informing realistic expectations.
- BCC role as a facilitator, information sharing.
- How do we make sure we are getting to the most vulnerable people.
- Information on the warm and well scheme.
- BCC doesn't need to lead the charge on everything. The key is to get the existing services and referrals to work better.
- Increase in ASB/Neighbourhood disputes as a consequence of lockdown restrictions
- Food shouldn't be an entitlement, again local knowledge is key.