Agenda No

SHREWSBURY TOWN COUNCIL COMMUNITY GRANTS FUND APPLICATION

GRANT

AMOUNT

REQUESTED

£1,000

Please answer all questions which are relevant to your organisation = failure to do so may result in a delay in the determination of your application

Nutritious frozen food for

Shrewsbury's community

PROJECT

(In no more

than 25

	words)	groups groups	munity	REQUESTED			
	Contact	Details					
Q1	Name of o	Name of organisation making application:					
	Shrewsbu	ry Food Hub	*************				
	Name of o	Name of contact for this application					
	Title: Dr	First Name: Katy	Surname:And	erson			
	Position h	Position held in the organisation: Manager					
	Contact Address, including full postcode:						
	Contact Telephone Number:						
	Email add	Email address:					
	About y	our organisation					
Q2	What typ	e of organisation are yo	u?				
	Tick (✓) re	elevant category:					
	Registered Voluntary	d Charity: Organisation:	(✓) Charity R ()	egistration Numbe	er1171092		
	• •	Limited by Guarantee: lease specify:		Number	•••••		
Q3	When wa	s your organisation esta	blished?				
	April 2016	ò					
Q4	Briefly de	scribe your organisation).				

Describe your organisation, including how many members/users you have, whether

there is a subscription fee and the usual activities/services you provide.

If you are a new organisation, describe the services/activities you plan to provide.

Shrewsbury Food Hub tackles food waste and food poverty. Our 70 volunteer drivers collect food that would otherwise be thrown away from 15 supermarkets every day. This bread, fruit, veg and store cupboard food is still in good condition so we share it with 60 community groups in Shrewsbury including Food Bank Plus, Shrewsbury Ark, Age UK, A4U, youth groups and school breakfast clubs. We collected 32 tonnes of food last year and saved the Severn Hospice 30% of its food budget. This food supports more than 2000 people in Shrewsbury. We also co-ordinate the Shropshire Food Poverty Alliance which is bringing together Shropshire Council, NHS, Food Banks and community organisation to tackle the growing problem of food poverty in our county.

Ų5	if you are a subsidiary of a larger organisation, please state which one.
	N/A
Q6	Does your organisation have an agreed Constitution or Memorandum of Association?
	Please state which and attach a copy: Constitution

Q7 What is your primary source of funding?

For our food redistribution work, trusts and foundations such as the Jean Jackson Trust, local organisations and individuals, supermarkets. For our food poverty work, Sustain and Shropshire Council.

Details of the project or activity you are planning

- Q8 Describe the projects/activity you plan to use this grant for.
 - i) Try to be specific about what you will do and how you will do it.

Your grant would enable us to expand our frozen food service, allowing us to collect more surplus food frozen on its use by date. This would provide more nutritious meat, fish, butter, milk and ready meals to our community group members, preventing waste of this valuable food and improving diets. This builds on a successful pilot carried out with Co-op Bicton Heath which supports 4 community groups. Your funding will match funding allocated by MidCounties Co-op and would include the following activities:

- 1) 20 days of staff time to expand the frozen food service:
 - a. Review with staff at Co-op Bicton Heath to produce a case study of key learning from their experience, to share with other stores and to promote the service.
 - b. Set up of new collections with 4 suppliers establishing necessary legal agreements and working arrangements and building our volunteer team to provide regular collections.
 - c. Set up arrangements with 6 new groups, including a new community Freezer at Meole Estate, ensuring that they have at least Level 2 Food Hygiene training and are fully aware of the food safety requirements of using surplus frozen

food

- 2) Purchase of 9 cool boxes and chill blocks for the transport of chilled food and a stock of cleaning materials.
- ii) Please state how you have identified this need and how the project will benefit the people of Shrewsbury, together with the estimated time span. If you are seeking continuation funding for this project, please provide evidence for this continued need.

Initially our project collected only food that was safe at room temperature, but the pilot allowed us to move into frozen food. We consulted with our member groups to identify whether they were interested in frozen food. The answer was a resounding yes. The four members in our pilot report positive benefits:

- > At Shrewsbury Ark, our local homeless charity, meat, milk and butter help reduce the cost of providing nutritious meals for rough sleepers. (20 people each week)
- > At Sundorne Education (TMBSS), ready meals allow staff to support excluded pupils with a hot meal at lunch time, as they know many of their students will not get a nutritious meal when they go home (25 people each week)
- > At Riversway Elim Church, milk, meat and butter help provide a nutritious meal to support vulnerable people with a shared meal in their café (60 people each week)
- At A4U, our charity supporting people with disabilities, milk, fish, meat and cheese reduce the costs of providing nutritious affordable meals whilst generating profits to support their other activities. (70 people each week)

A survey of our members shows that a further 6 groups would like to receive frozen food to improve nutrition and to bring their members together to make friends and learn to cook: Shropshire Mind, Bacon Buddies, Bromford House, Well.com, Belvidere Food Club. In addition, The Meet Place at Meole Estate and Riversway Elim Church are seeking to establish a community freezer.

This project will complete by June 2019, when this expanded food network of suppliers, volunteers and groups will have been built.

With your support we can unlock more frozen food to tackle food poverty and strengthen our community.

iii) How many peop	le from the Parish of	f Shrewsbury do you
expect to benefit di	rectly from your pro	ject or activity?

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Q9 What criteria will be used to measure the success of the project and how many people from the Parish of Shrewsbury do you expect to benefit from it?

We expect frozen food to reach an additional 200 people in Shrewsbury through the community groups we serve. The success of the project will be measured by:

> The number of new suppliers who agree to give us food

- > The number of new groups which we supply with frozen food and the number of people they support with this nutritious food
- > The feedback from groups on the difference it makes to their operation.

This work will also give us insight into the potential to expand frozen food service further.

Health & Safety

Q10 What, if any, special safety issues are related to your project/activity?

Please provide the following information -

- i) What kind of insurance does your organisation have? Public Liability Insurance £5m
- ii) Do the leaders have the relevant qualifications and/or experience?

 The chilled team have Level 2 safety training. Our chill chain procedures have been developed and reviewed with Food Safety Advisor, Tori Davies at Saracen Solutions and Sarah Jackaman independent Food Technologist and Auditor. We are registered with the EHO and have a 5* food hygiene rating.
- iii) What policies does your organisation have in place (i.e. Health and Safety, Child Protection/Safeguarding, Working with vulnerable adults, Equal Opportunities, CRB Checks etc.)? You may be required to submit copies of your policies
 Health and Safety, Safeguarding and Well Being, Equal Opportunities, Conflict of Interest, Investment and Reserves, General Data Protection

Funding of your project

Q11 Previous Applications

If you have applied for and received funding from Shrewsbury Town Council in the past please provide details of the amount, the year and briefly what the funding was used for.

Year	Project Description	Award £
	N/A	

Q12 Project Funding

Please provide details of the amount of funding you need for your project and give us a breakdown of what the money is for (please enclose any relevant estimates or details).

Tell us the amount of grant requested £1, 000 and provide a detailed breakdown as to how you have reached this figure

Project Expenditure Please list all items of expenditure for your project	Amount of Project
Staff time	£1700
Chill boxes and freezer blocks	£750

Cleaning materials	£50
Total	£2500
Project Income Please list how the project shall be funded	
Co-op Midcounties	£1,500
	£
What is the difference? This should be the same as the amount of Grant you are applying for	£1,000

Q13 Covering a Shortfall

If the Town Council makes an offer less than the amount requested, how will that impact on the Project and how will you cover the shortfall?

We will reduce the scope of the project by bringing less suppliers and groups on board and buying less equipment. There is a lot of good quality food potentially available in supermarkets and local food producers which is currently going to waste, when it could be supporting our community.

Q14 Sustainability

What plans do you have in place to ensure that your organisation becomes more sustainable and less reliant on grant funding, particularly from the Town Council

The costs of contacting new suppliers and groups, developing a volunteer team and setting up the operation are significantly higher than the costs of running the system once established. Thus your funding is an investment which will allow us to unlock more food for our hard pressed community groups, saving them budget and helping them provide nutritious food for their members.

We work hard to create long term relationships with local companies and organisations to provide the resources to sustain and increase our impact.

Your Accounts

Q15 Please provide the following details from your most recent annual accounts

Total Income	£43,546
Less Total Expenditure	£23,680
Surplus / Loss	£19,886

£22,420

Note: Expenditure was lower than budget due to donations of materials and equipment for our depot, which we are granted a free lease by Morris & Co. This was put into reserves to enable us to be able to employ a part time co-ordinator to manage our growing volunteer team.

Please provide a copy of your most recent annual audited accounts or, in the case of newly established organisations, the projected income and expenditure for the next twelve months.

You need to include these documents with this application.

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Q16 Please give us your bank or building society account details

You can only apply for grant if you have a bank/building society account in the name of your organisation. We will only pay grants into an account which requires at least two people to sign each cheque or withdrawal. These people should not be related.

Account name: ...Shrewsbury Food Hub.......

Bank/building society name: 1

Bank/building society address

Who are the signatories and what position do they hold in your organisation?

1 Name Position Manager

2 Name Position Trustee

3 Name Position Treasurer

2 signatories must sign for each cheque or bank transfer.

Any Other Information

Q17 Any other information which you consider to be relevant to your application.

Declarations

Q18 Declaration

Please give details of a senior member of your organisation. For example, this may be your Chairperson, Treasurer or Secretary. They must read the

application and sign below. (This must not be the main contact name in Q1).

I confirm, on behalf of Shrewsbury Food Hub

That I am authorised to sign this declaration on its behalf, and that, to the best of my knowledge and belief, all replies are true and accurate.

I confirm that I have read the Terms and Conditions set out in the Notes which accompanied this application and further confirm that this application is made on the basis that if successful, the organisation will be bound to use the grant only for the purpose specified in this application, and will have to comply with those Terms and Conditions and any others which the Council might attach to the Grant.

Post held in organisation: Chair of Trustees

Title Ms First Name: Clare Surname: Wearden

Organisation address:

Postcode: :

Telephone:

Signed:

Date: 25 January 2019

Q19 Signature of Person Completing the Application

This must be the signature of the person named in Q1 as the main contact and **not be the** same person who has signed in Q18

I confirm that, to the best of my knowledge and belief, all the information in this application from is true and correct. I understand that you may ask for additional information at any stage of the application process.

Signed:

Date: 25th January 2019

Cr	iecklist	
1.	Have you answered every question?	Υ□
2.	Have all signatures been completed?	γ 🔲
3.	Have you included a copy of your constitution?	Υ <mark></mark>
4.	Have you included a copy of your most recent audited accounts?	Υ <mark>□</mark>
5.	Please state any supporting documents you are submitting:	Υ <mark>□</mark>
	Annual report 2018/18	

Please return your completed application form to:

Town Clerk
Shrewsbury Town Council
Riggs Hall
The Library
Castle Gates
Shrewsbury
SY1 2AS

Telephone: 01743 281010 Fax: 01743 281051

Email: Helen.ball@shrewsburytowncouncil.gov.uk