



A RESPONSE TO COVID-19

LUNCH POSITIVE

INTERVIEW WITH GARY PARGETER – SERVICE MANAGER

See also [Taking Account 4 Case Study 2018- Lunch Positive](#)

“Our values have helped us through our uncertainties and fears, galvanising us as we have mobilised in response to the crisis. Collaboration and partnership are key – client groups require a diverse response.”

Lunch Positive is a small voluntary community organisation in Brighton and Hove whose core mission is the provision of community, food, friendship and peer-support for people living with or affected by HIV. Lunch Positive is guided by the overarching values of acceptance, without judgement, inclusivity, is peer led and delivered by volunteers. They engage with and support large numbers of people with multi-morbidities, and align with NHS priorities around self-management of long-term conditions, through ‘light touch’ peer support and interaction.¹ They have experienced an increase in direct referrals throughout Covid.

Gary is their one employee who is supported by a Board of 5 Trustees. Activities include a Lunch Club and safe space drop-in; a monthly 50+ Supper Group; peer support; hosting specialist advice workers offering information; advice and support; social events; days out and other peer led activities; promoting awareness of HIV in the broader community; an accessible and inclusive volunteer programme and emergency food supplies at times of need.

THE APPROACH

Before lockdown, Lunch Positive had early indicators that needs would be unmet in the event of a lockdown as clients started showing signs of anxiety in their group settings, and were alerted to the fact that there would be an issue around the supply of food for some people.

The Board, Gary and volunteers considered how they might provide a similar service with people ‘no longer in the room’ with the same impact. Thought was given, even before lockdown, as to how people could be supported more widely within the aims and mission of the charity to ensure that people ‘remained connected with LP, each other and to find and share support’. The team felt completely prepared and able to respond to the changing needs by adapting their programmes.

The Board were decisive in their Covid-19 response planning drawing on the variety of skills amongst the Board (including an HIV Clinician providing advice on Covid related issues; an experienced VCSE member gathering essential sector information for the Board and team drawing on national and local expertise and tools). They helped provide direction, assisting strategic decision making, and offered enhanced support for Gary and the volunteer team, planning effective ways of communications, making informed decisions quickly and efficiently.

The contribution and value of the volunteers in the redesign and delivery of the new services is significant. The volunteer structure had to adapt quickly as service user numbers reduced as the need to shield became paramount for some. The volunteer team is managed by Gary but with significant pulls on his time, the work and roles of the volunteer team had to be redefined rapidly with high-level work delegation to the volunteer team. The initial team of 27 volunteers responded with maturity, relishing the increased responsibility and with that, a sense of empowerment. One particular volunteer led the development and implementation of the new services and correlating systems. Mutually supportive and respectful of each other’s expertise, they effectively self-organised, finding ways to implement the plans whilst reflecting on ways of working with less guidance. The result – a high quality delivery service, providing food and support for over 120 people a week. The mobilisation work drew in some of the clients and wider supporters increasing the volunteer numbers to 34.

1 <https://www.nhivna.org/file/5de4e66079c75/HIV-Nursing-18-2-CPD-article.pdf>



SERVICE RESPONSE TO COVID-19

The pre-existing needs of Lunch Positive clients became very evident during the pandemic. A repurposing of the existing service resulted in the adaptation of the core services in response to the immediate emergencies whilst being able to remain connected to their core mission:

Food Support – drawing on their expertise, knowledge and advance contingency planning, the adaptations to replace a weekly lunch club with delivery of 2-3 days food supply was relatively straightforward. Delivery was logistically difficult in the beginning to ensure access to adequate food stock and suppliers to meet demand. The Team connected into the city's emergency food network and the expertise of the [Brighton & Hove Food Partnership](#) in a “*fantastic alignment of communication, connectedness and support*”.

The connectedness of the food network (which included 45 food banks, food hubs and meals projects) resulted in 3200 adults and 1300 children receiving food parcels and 2385 people receiving cooked meals each week. The network provided overarching policy for food stock and support to ensure that gaps in provision were identified, and complimentary services were developed to avoid duplication of support and ensuring everyone in need received support.

Impact: Lunch Positive changed their offer from the existing lunch club and supper, prepared and served at a centre, to delivering 2-3 days emergency nutritional supplies to approximately 126 people at the peak of the crisis. The figures eventually settled at around 120 deliveries per week but were scaled up to a 5-day nutritional supply.

Peer support previously delivered face to face was replaced by a telephone befriending service offering some informal social engagement on the phone. The service targeted those who may have been more isolated with complex and high levels of need (suicide ideation, mental health challenges, physical needs and financial issues). Through peer conversations, trusting relationships were built and lifeline support was given to 12 people a week. Additional needs were identified and befrienders were able to help with referrals and other sources of support.

In one case a client previously resistant to engagement with HIV treatment for many years was at high risk, clinical mechanisms had failed to engage the client but a befriender demonstrating empathy and lived experience was able to provide a peer perspective which led to the client confirming their desire to take up anti retro viral therapy.

Additional community support included the development of a private Facebook Group, members WhatsApp group, online live chat, newsletter, phone-ins and email updates.

Learning: Lunch Positive have been through a steep learning curve since March adapting existing and developing new services. Learning, at pace, they have scaled up their nutritional support both in terms of quality and quantity.

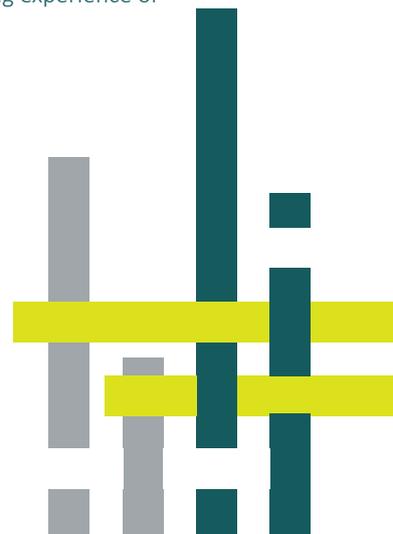
The befriending service was developed and delivered rapidly in response to urgent need. Drawing on the expert resources of a local befriending charity [Together Co](#) – they have developed appropriate delivery frameworks, safeguarding protocols, delivered induction and training to volunteers.

Gary has been impressed by the leadership approaches of his team and the VCSE when engaging externally in uncertain, changing environments and particularly in their ability to engage with new complex decision-making structures.

CHALLENGES

As the sole employee, one of the key challenges for Gary has been the high demand for his time to manage and lead the service redesign, coordinate the volunteer programme and work in partnership with other services supporting and contributing to the emergency citywide response. This has challenged his capacity to manage the finance and funding work and during what would have been a key period for writing funding applications, a task requiring experience or skill levels not readily available amongst the team. Whilst existing funders have been flexible and supportive, Lunch Positive funding constitutes a mix of statutory and annual grants (two thirds of income is derived from annual grants). Where possible with limited capacity, Gary has made applications to the emergency funding responses, locally and nationally but a longer-term approach now needs urgent attention.

However, challenges of seeking two or three-year funding prevail when adopting community and asset-based approaches that focus on the wider social determinants of health. Funders, stakeholders and policy makers largely attach greater value to medical or clinical outcome driven approaches and interventions. This short-term approach to funding cycles for organisations working and supported patients with long term conditions does not provide for stability, growth and further development of services.



OPPORTUNITIES AND THE FUTURE

As a result of their response to the pandemic, Gary identifies a number of opportunities for the future. A positive outcome from the pandemic is the considerable achievements of this team in just a few months. Gary and his team will take time to reflect and to celebrate their response and rapid growth during very challenging circumstances. It has given a sense of what is possible and will keep an open mind and a continuing flexible approach for the rest of this year as the phases of the pandemic evolve and funding is acquired. Everything will be up for reflection and review and possible change, finding new ways to work within an attainable model; identifying what hasn't worked well and capturing the potential to build on the future.

A universal truth of Covid-19 is that barriers that have been in place for many years have been pushed aside through a shared duty of care. Lunch Positive adapted and scaled up their provision in response to not only the additional needs of their clients but also the increasing numbers of people being referred to the services from local primary and secondary care services, particularly clinicians. Improved contact and relationship building with clinicians are developing rapidly. Immediately lockdown kicked in, clinicians developed a more immediate referral process in response to the urgent needs of their most vulnerable patients to Lunch Positive (for essential needs- food, isolation, prescriptions collection).

Now clinicians are making referrals for more nuanced needs. Clinicians have developed a better understanding of the work of Lunch Positive leading to more referral pathways. This has created a distinct opportunity for Lunch Positive to describe and demonstrate how their work and approach can complement and contribute to the care given by clinicians.

Another learning from these improved pathways and increased communications, is that some clinicians have not been aware of the support being provided by Lunch Positive to self-referred clients, often those with complex and long-term needs. This highlights an opportunity for improved collaborative approaches to working with their mutual clients to achieve stronger outcomes through enhanced referral pathways with primary and secondary care services.

The **emergency support service** will continue for those who may require further support, integrating the service alongside the reintroduction of the face to face service, subject to financial capacity. All services will be reviewed against client needs assessments and national and local guidelines.

Lunch Positive have sufficient funding to **continue the food services to the end of the year**. Given the success of the befriending service, Gary plans to bring forward a development of a project they had been considering before the pandemic combining a supper service with the volunteers, matching clients to volunteers befriending over a shared meal, particularly aiming to reach those who are highly socially isolated, often socially anxious. Additionally, plans pre-Covid to work in collaboration with Together Co have been advanced. Further informed by the initial response, additional seed funding has been secured to develop a structured partnership to develop an HIV befriending pilot.

Whilst ensuring an essential return to face to face work and provision of psycho-social support, the future will continue to include a digital approach. Technology has improved communications, efficiency, productivity and introduced an agility to respond to quickly changing information, guidelines and need. Technology and social media have already influenced the organisations increased scope and quality of services but has potential to reach and support many more users.

Gary attributes Lunch Positive's success to the deliberate design of services based on the principles of good practice and driven by a set of strong values and principles. He is confident that Lunch Positive will become stronger and more resilient as a result of the learning and experiences through Covid-19.

He feels that the VCSE's response has been swift and effective, drawing upon well-established principles of partnership and collaboration and previously built capital. He observes that the sectors reach and work, responsive and preventative, has addressed the general needs of the population with a rapidly strategised and highly effective focus and response to the most vulnerable and at risk. Gary believes that the depth of impact has been largely achieved through the sectors ability to consider and act both on behalf of their own beneficiaries and stakeholders, whilst seeking to understand the relationships, needs, onward impact and opportunities for the wider sector and community as a whole, and particularly where there is intersectionality.

He advocates for further opportunities to develop improved mutual understanding across sectors to develop approaches that enable more collaboration and co-design of packages of care between patients, clinicians and VCSE organisations towards successful patient outcomes.

