



Arkansas Foodbank Reporting 2025

Why monthly reporting?



- Data-informed decision making
- Shares your hard work & impact to local, state, and federal levels
- Tells your on-the-ground pantry story
- Gives a more accurate picture of food insecurity in Arkansas
- Part of the MOU of membership
- You may use your reports to advocate for funding, volunteers, or other resources within your own communities or from outside agencies (i.e. AHRA, Giving Tree, etc).

Moving back to Agency Express



Moving from Microsoft Form back to Agency Express

- **Why are we moving back?**
 - Agency Express is a better tool for reporting
- **What we still need from you:**
 - Detailed neighbor demographics are essential
- **What is our end goal?**
 - All members on Service Insights by end of 2026

Reminder: What is Service Insights?



The Service Insights Initiative is Arkansas Foodbank's network-wide client data tracking project.

The purpose of Service Insights is to better understand the people we serve as a network by collecting standardized, electronic client data across our network partners and programs, so that we can make strategic decisions about how we provide services and measure our impact.

Important questions to ask yourself about Service Insights:

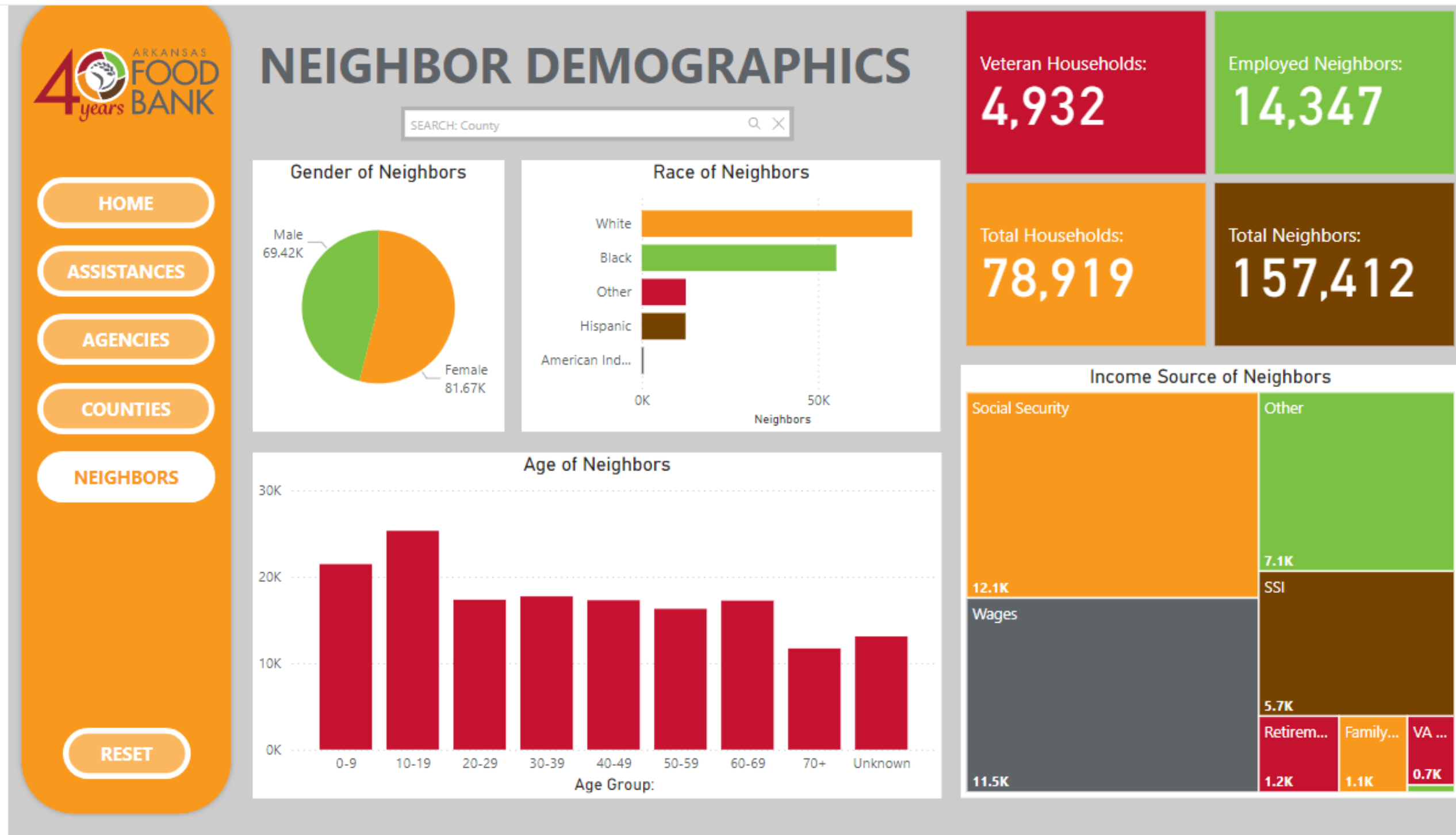
- Have I been trained by a AFB employee on Services Insights?

If I have been trained:

- Am I actively using Service Insights for all intake/distributions?
- Do I have all my neighbors' information in Service Insights currently?

If you answer no to any of these questions- you will need to report on Agency Express

Neighbor Impact



The Service Insights Team onboarding focuses:

- **2023-2024** = Pantries serving large distributions
- **2025** = TEFAP distribution pantries and School pantries
- **2026** = residential facilities, AFB Backpack programs, hospital systems

What Kind of Program are we?



**Before we go further, you need to know
what kind of program you are.**

- Am I active on Service Insights?
- Am I a USDA Distribution:
 - Do you give out USDA (TEFAP, LFPA, and/or CSFP) food?

If you don't know the answer, pause the video and call your Agency Coordinator.

Reporting Expectations

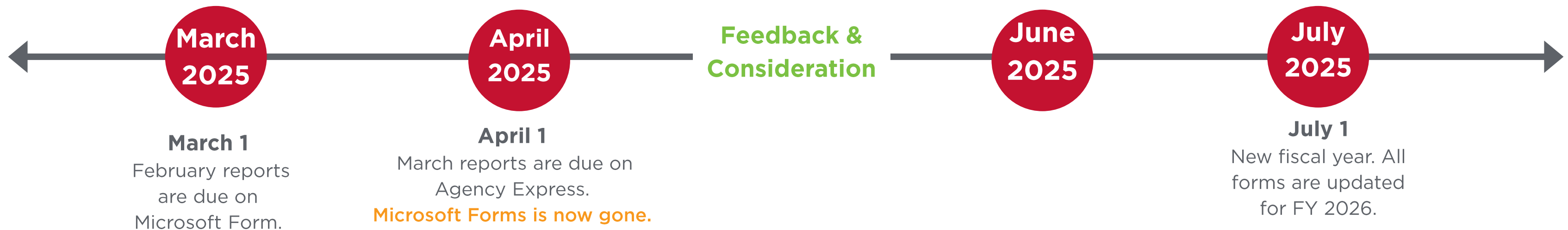


All reports are due by the 1st of the following month.

A Compliance Hold will be put on your account if reporting is not completed.

All members are required to report any assistance given to a neighbor.

If you are not able to report on time, communicate with your coordinator the reason and updated timeline.

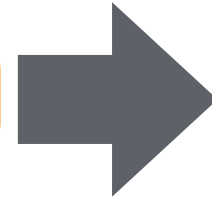


Future Goal: By Dec 2026, all members will report in real-time using the Service Insights.

Who Reports What?

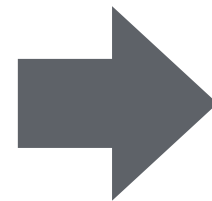


**If you are not
ACTIVE on
Service Insights**



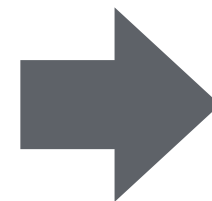
**You will submit reports on
Agency Express by the 1st
of the following month.**

**If you are active on
Service Insights
AND receive TEFAP,
LFPA or CSFP**

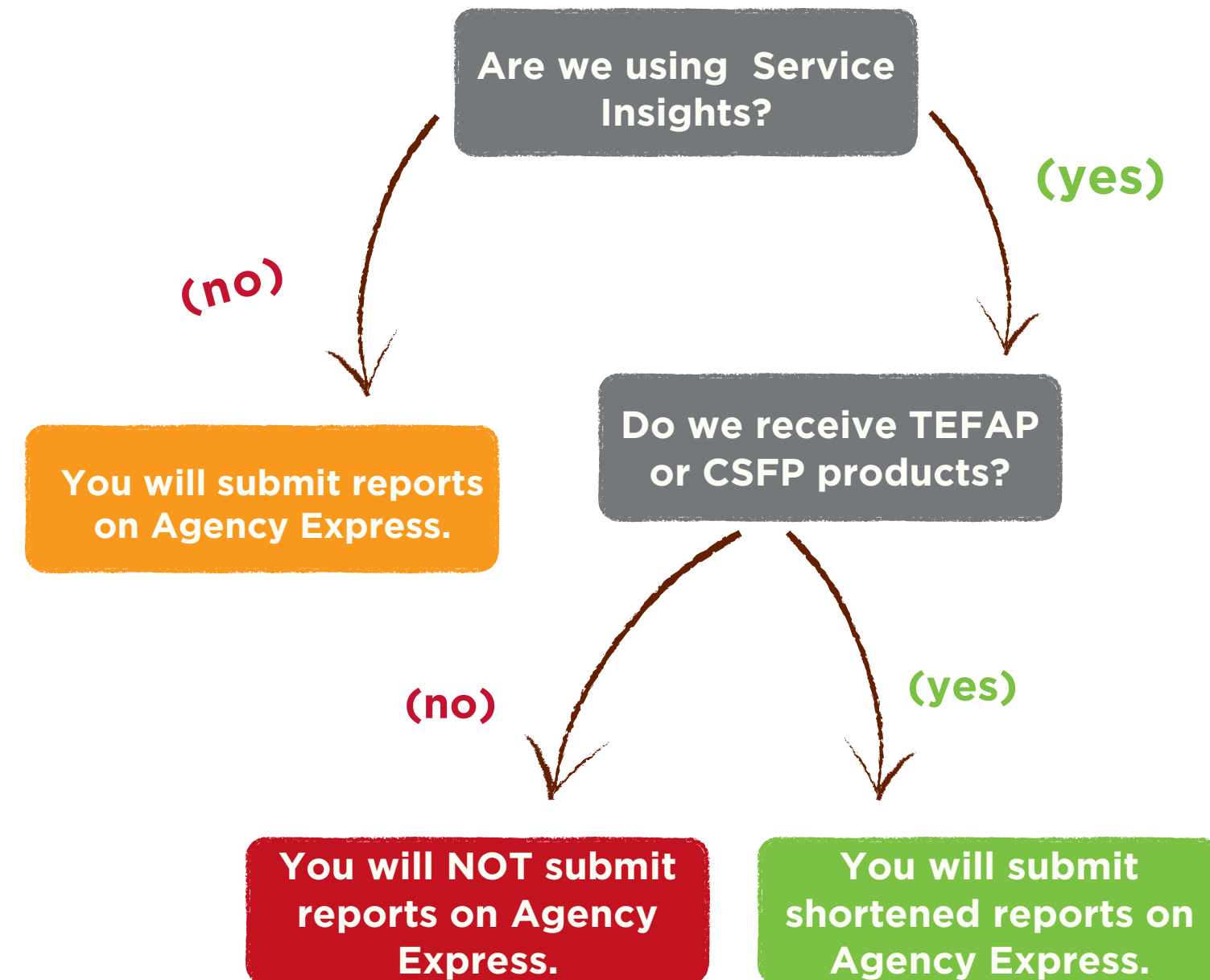


**You will submit shortened
reports on Agency Express
in addition to using the
Service Insights tool.
Piloting a USDA program
on Service Insights**

**If you are
ACTIVE on
Service Insights
AND do NOT
receive TEFAP
or CSFP**



**You will NOT submit
reports on Agency
Express.**



Agency Express Report



If you are
actively using
Service Insights
to document all
distributions and
NOT distributing
USDA,
**you can stop the
video HERE**

**The reports page on Agency Express
will go live on March 1st.**

When you are ready to report, please take a look and confirm the survey (report) you see aligns with your type of distribution(s), if not, please call Aaron Anderson (501-569-4362) before filling out the report.

Agency Express Report



FEEDING AMERICA

Welcome | Order Options | **Report** | Food Bank Links | Help | About TechBridge | Log Out

Welcome TEST-AFB - [0043P00001A](#)

Search

Start Date: 11/16/2024 | End Date: | Expiration Date: |
Ref #: | Title: | CERES SurveyID: | Required: -Select All- ▼

[Search](#) [Clear](#)

My Surveys

	Ref #	Title	Start Date	End Date	Status	Expiration Date	CERES SurveyID	Required
Submit	5567	Your Monthly Report	Feb 1, 2025	Mar 1, 2025	Active	Dec 31, 9999	0043~00 Z3 2025-02-01	True

My responses

No records found!

GODADDY VERIFIED & SECURED

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Sample Neighbor Intake Form



Reminder:
Neighbor
information
needs to be kept
in a secure and
locked place

Sample Neighbor Intake Form

Today's Date: _____

Address: _____

First Name*: _____

City: _____

Last Name*: _____

Zip Code*: _____

Date of Birth: _____

County*: _____

Phone Number: _____

Primary Contact for Household: ☐ Yes ☐ No

No Fixed Address: ☐ True ☐ False

First Name & Last Name	Date of Birth MM/DD/YYYY	Ethnicity	Gender	Relationship to You

Gender (Self-Identified):

☐ Male ☐ Female ☐ Transgender

☐ None of These ☐ Prefer not to Answer

Race (Self-Identified):

☐ White

☐ Hispanic, Latino or Spanish

☐ Black or African American

☐ Asian

☐ Native American or Alaska Native

☐ Middle Eastern or North African

☐ Marshallese

☐ Native Hawaiian/Other Pacific Islander

☐ Some other race or ethnicity

☐ Prefer not to Answer

Employment Status:

☐ Full Time ☐ Part Time ☐ Unemployed

☐ Retired ☐ Did Not Answer ☐ Disabled

Current Housing Status:

☐ At Risk of Being Homeless ☐ Homeless

☐ Transient ☐ Rents ☐ Owns

Does anyone in your household receive SNAP ("food stamps")? ☐ Yes ☐ No ☐ Unsure

☐ Prefer not to Answer

Has anyone in your household, including yourself, served on active duty in the US Armed Services? Active duty includes serving in the US Armed Forces as well as activation from the Reserves or National Guard?

☐ Yes, on active duty in the past, but not now.

☐ Yes, now on active duty.

☐ No, never on active duty except for basic training.

☐ No, never served in the US Armed Forces.

☐ Don't know.

☐ Prefer not to answer.

☐ Didn't ask.

Number of people employed in the household: _____

Please select all that describes your household:

☐ Single Parent ☐ Adult Living Alone

☐ Disabled Household ☐ Multi-Generational Household

Does anyone in your household, including yourself, have a disability that prevents them from accepting any kind of work during the next 6 months?

☐ Yes ☐ No ☐ Don't Know

☐ Prefer Not to Answer



Neighbor Intake Excel Workbook



	A	B	C	D	E	F	G	H	I	J	K	M	N	O	P
1	#	Family/Household served Food Pantry (boxes/bags/choice)	Returning Family/Household	NEW Household	Served Prepared meal	Number of assits the neighbor received this month if more than 1	Number of People Served	Total Number of People in your household	First Name	Last Name	Date of Birth	Phone Number	Address	City	Zip Code
2	1	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	1									
3	2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						2/13/2023				
4	3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						12/1/2022				
5	4	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>						8/27/1989				
6	5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						8/28/1989				
7	6	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						8/29/1989				
8	7	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						8/30/1989				
9	8	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						8/31/1989				
10	9	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						9/1/1989				
11	10	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						9/2/1989				
12	11	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						9/3/1989				
13	12	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						9/4/1989				
14	13	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						9/5/1989				
15	14	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						9/6/1989				
16	15	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						9/7/1989				
17	16	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						7/10/1962				
18	17	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						9/9/1989				
19	18	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						9/10/1989				
20	19	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						9/11/1989				
21	20	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						9/12/1989				
22	21	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						9/13/1989				
23	22	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						9/14/1989				

Common Reporting Questions



Families vs. Individuals

- Families = The number of intake forms filled out. (A family can be one person)
- Individuals = The total number of people represented on those intake forms.

Example:

- 5 neighbors fill out intake forms.
 - 3 are collecting food for just themselves (3 households, 3 individuals).
 - 1 lists themselves plus 3 children (1 household, 4 individuals).
 - 1 lists themselves plus a spouse (1 household, 2 individuals).
- Total Reported: Households = 5, Individuals = 9

Duplicated vs. Unduplicated service

- Duplicated service = any time food is given out in the month
- Unduplicated service = the number of households as explained above

Example:

- Of the 5 neighbor visits above, the two families came back twice more to receive food that month.
 - Total reported for the month: Unduplicated = 9, Duplicated = 21



Who to Contact for Support on Reporting

Agency Services Team Contacts

If you have any questions about reporting:
reach out early and often

Megan Strydom

Agency Services Manager

Mobile: 501-446-0342

Office: 501-596-4334

Email:

mstrydom@arkansasfoodbank.org

**If you are unsure of your
distribution/agency type**

Debbie Trickett

Community/Agency

Support Specialist

Office: 501-569-4304

Email:

agencysupport@arkansasfoodbank.org

**If you are having trouble with
Agency Express**

Aaron Anderson

Data Projects Coordinator

Office: 501-569-4362

Email:

aanderson@arkansasfoodbank.org

**If the report you are filling out is
not asking questions of what
you distribute.**

Service Insights Team

If you would like to be onboarded on to Service Insights or have questions about its use, please reach out to:

Moya Jackson

Service Insights Coordinator

Mobile: 501-993-7093

Office: 501-569-4332

Email:

mjackson@arkansasfoodbank.org

Cassidy Rouse

Service Insights Coordinator

Mobile: 501-412-5140

Office: 501-569-4344

Email:

crouse@arkansasfoodbank.org

Resources and Support

Monthly Newsletters

- Agency Services Newsletter
- [Service Insights Newsletter](#)

Agency Resource Page

[As part of our Website,
we offer information
for agencies](#)

Agency Facebook Page

[Our Facebook Page serves
as a way to stay connected
and share stories](#)

Vivory

Be sure to update your
information on Vivory:
[Find Food Webpage](#)

Service Insights Newsletter

[As part of our Website, we
offer information for
agencies](#)