

If possible, please estimate the percentage of clients you are currently able to serve.

[illegible]

If you are currently serving less than 100% of clients please explain why.

Change to operations

Public health regulations restricting programs, size of cohorts and ratios; no access yet to school spaces and city facilities have also been closed.

Can serve the same number but done through pickup service. No inside programs, services or resources

group activities halted due to pandemic, staff restricted for outreach activities and families restricted from accessing community supports

We do not know if school boards will provide permits to use their gymnasiums this fall. It sounds like school sports will not be happening, but the Ontario Volleyball Association has a full "return to Play" plan for clubs, provided they can find places to play.

In child care we have a cap until September on the number of children we can enroll. In addition families are choosing to wait to enroll their children and as an organization we are slowly increasing the number of children we are caring for to ensure safety. These are all contributing factors.

100 virtually / less than 10% for face to face services

we are currently providing online services (we did initially make phone calls and send materials by mail) so those with limited computer/internet access may not be accessing our programs/supports

Caution about riding in small groups. Covid restrictions eliminate riders who prefer to draft

The emergency shelter is currently closed and people are being served remotely in motels. The number of people sheltered are approx 3x higher than normal but we have had to limit our outreach program(for past clients needing help) to remote support only to ensure staff and resident safety.

We have had to scale back our summer lunch program due to limited volunteers allowed in our prep spaces for the lunches. Additionally, our organizational capacity has shifted and staff are more focused on COVID-19 related concerns. We are prepping 40 lunches a week as opposed to the 80 or so we previously prepared.

access limitations

While we are able to provide service virtually at 100% capacity, not all clients currently on caseload have chosen to fully participate in services at this time.

Many clients have re-prioritized their immediate goals. Specifically in our Literacy and Basic Skills programs. In addition, many of our clients have barriers to using technology in place of one to one in person sessions. Inter agency referrals are down due to their own pandemic responses as well.

We are able to serve 100 per cent. However, we are not serving 100 per cent because our clients are not coming to food bank. Since April we have been serving approximately 75% of our clients. People have not been turning up.

Closed mid March to current date due to Covid

Health Unit office closure and the closure of community partners doors, e.g. local businesses, schools, municipalities, etc. We continue to increase our service delivery as we move into additional stages.

We are serving approximately 70% of our clients. This was restricted by our inability to bring any clients into the building for 6 weeks - until we were reclassified as an essential service . Then we could see only high priority/essential/urgent clients face to face, while seeing others virtually (video, phone or email). Some parents do not want virtual, and many of those do not yet qualify to come into the Centre. This will change next week, when we open up to more clients.

We are not able to offer groups or face to face visits. Groups represent 42% of our clients and face to face visits 15% of how clients receive services. Of note 80% of our day program clients are not able to be served.

Currently a number of our programs are still on hold or suspended due to various reasons related to the COVID pandemic. For example, volunteer support, facility availability, fear of contracting the virus, social distancing guidelines, etc

Because of Covid-19, the place where we meet is closed. The older folks are afraid to meet together at this time.

The Community Centre is closed.

Offices are not fully open and limited space to conduct meetings safely.
Bobcaygeon Helps

Available shelter occupancy has been reduced by 50% to avoid spread of covid in congregate living environment. Women have been unable to access service due to being 'housebound' with their abusers.

Virtual capacity, technology

Our club has been closed since March and the Directors have decided to remain closed until they review the status in the New Year. We are run by volunteers to fundraise, do programming, clean, host rental groups. They felt that it was not safe to open.

the City has closed our meeting facility. The Coboconk tiny jail, which our volunteers operate from May until Labour day is also closed. No visitors were able to view the interior of the jail. Our membership has been unable To hold any of our usual lunches, crafts and games days, or line dancing classes. Covid 19 has stopped our activities completely.

We haven't been able to operate at all during the pandemic.

funding

Partners and donors have constraints. Special funding is reaching most vulnerable where agencies are operating programs.

We are a service club; part of Lions Clubs International. In the current COVID-19 pandemic situation, the Club is unable to continue its normal fundraising and community service activities.

Covid restrictions negates the economics to open

We are a volunteer organization that raises money for our community and the ppl in it. We are unable to do our regular events that generate money at this time. Because we can not do this we have depleted our funds for monthly bills that still need to be paid regardless of the stage that this pandemic is in.

Most of the money raised by our club (for dispersement to the community) is ticket sales for various raffles and draws. Some sales could be done on-line, however most and better sales are achieved with personal contact.

Staff have been laid off because of financial concerns within the agency.

Do you anticipate these challenges will be different in 3 months? 6 months? Please tell

yes

With return to school, some staff will be able to return to work. Depending on whether there is a second wave, this will impact health and mental well-being.

Possibly. Again cycle of work will shift and leaner supports likely.

i think the child care will lessen but not completely be eradicated.

Hopefully, things will improve with time; however, there are plans in place for every scenario.

Optimistic that in 6 months things will be better and concern will be less. However what we have learned to add additional health protection for volunteers and summer staff will remain but modified.

What we have found is that once staff are back to work they are finding joy in their work.

School restart improves attendance but before or after care is still reduced; resulting shortened work day/hours. Staff are accessing EAP and may have improved mental health. As staff voluntarily return to work, those anxious will feel more comfortable and return. All improvements. However, with the possibility of a second wave and emergency measures, comfort will erode and closures will impact attendance at work.

The challenges all depend on the stage of the pandemic. If we can open indoor gatherings to at least 100 people, that will help tremendously.

Staff are beginning to return for food bank days. Establishment of policy and safety procedures assures staff of how we are reducing risk.

I hope that we will be able to have more volunteers willing to return to help at the food bank.

As a father of two, I have personal concerns of a spike in the pandemic with schools reopening. Once we return to our shelter in October I anticipate some level of normalcy returning. The increased number of clients have required us to double staff all of our shifts which has placed a heavy burden on our shelter workers.

These challenges could be different in 3 to 6 months, it will depend on the lifting of public restrictions. It will also depend if there is a second wave of this

pandemic. As most of any ticket sales we make are during the summer months due to cottagers and increased tourism, in 3 or 6 months, the amount of tourists will not be there to restart ticket sales. We will have to wait until next spring/summer to restart any of our fundraising events/ticket sales.

no

No. The next 6 to 12 months look very bleak, and the Club may have to fold.

Ongoing

Not expecting any great change unless the social gathering numbers are increased and social distancing restrictions of 2 meters is removed.

There will an ongoing needs to assist new and existing clients in tech skills development as well as ensuring access to the required services and hardware. In addition to serving those who benefit most from in person learning

Childcare may continue to be an issue depending on whether there is a second wave in this area. Mental well-being of staff may decline if there is a second wave.

Uncertain what duration of time it will take to return safely to our programs. Under the current social distancing guide lines, our hall can only accommodate 16 people at a time.

Depends on where the Pandemic takes us.

No, we will continue to be challenged with bringing staff back to the office and provide sufficient physical distancing. A second wave would impact our organization and may of the above noted concerns would remain. With schools going back if parents send their children to school some of the daycare concerns can be mitigated. Education and reassurance of adequate PPE is allaying some of the return to work concerns. The inclusion of staff in decision making and policy development helps.

These will persist and may increase, especially if children do not pass screen, and need to stay home; if people are exposed to COVID so must work from home while isolating (only virtual services provided that way); staff with any symptoms will stay home (eg. cold symptoms) who would have worked prior to COVID with over-the-counter medication such as cold/sinus/antihistamine medications.

It depends on the pandemic and whether or not the place opens up to the public.

There will no challenges unless the centre reopens. At that time we would

have to consider if we would be able to provide meals for clients due to space we have available.

No we anticipate similar challenges as well as worry / anxiety / fear with flu season and predicted second wave.

We anticipate 2021 season to be similar

6 months-12 months

No. Until there is a vaccine for COVID, we are a high risk environment for the spread of covid and I don't see that pressure going away for another six months at least.

Will depend on the school system starting up

No. Seniors are the most vulnerable and do not want to take chances on getting together in groups. Which is what we are designed to do to fight loneliness and isolation and inactivity.

Depends upon whether we are able to continue to return to work a few days a week. Some staff are struggling with the 100% remote work environment.

It is anticipated that the financial assistance the Foundation is able to offer, will continue well into next year as demands for support of all kinds will continue, not only in Bobcaygeon but in other communities in Kawartha

We expect to find it difficult come Toy Drive, due to members being apprehensive about meeting and collecting toys.

These things will continue to be an issue for an unlimited amount of time.

We don't anticipate child care needs will change. There are a lot of unknowns

I anticipate the challenges will increase over the next few months. We depend on fundraising income. With the economic situation within the community, the challenges in fundraising with the public health measures and the increase demand for services we will not have the income to support the agency on a long term basis.

I do not anticipate that our challenges will be any different in coming months. Given that COVID-19 is ever evolving, our staff's mental well being and the supports they need will evolve as well. Succession planning as a human resource challenge will remain on our radar due to the fact that our number of employees will not be increasing. Additionally, as we head into our busiest season (the holiday season), our staff will be busier than they have been over the last 4 months.

Are there other challenges for you with PPE or infrastructure as a result of Public Health

PPE/infection control

Plexiglass install has made communication with seniors very difficult. Already often hard of hearing, now wearing a mask and communicating through a barrier.

Access to schools for programming - in class and before and after school - may be limited as schools limit outside visitors. Rules around transportation of children may impact our ability to serve clients. And public health rules regarding learning groups or cohorts in school may impact the out of school care cohorts, putting demands on infrastructure that will be difficult to meet.

Difficulties obtaining products.

Challenge is in ensuring that individuals accessing the food bank have the appropriate PPE. Having a mandatory mask protocol in place greatly hinders those with low-incomes. We have had to purchase extra PPE to ensure clients have what is required to enter the premises.

Early in the Pandemic finding enough PPE to comply with congregate care guidelines and having it delivered was a great challenge- this is improving now

It will be challenging to wear masks and face shields while caring for children. In child care we hold children often.

At this time, we have been directed to continue with virtual programming by the Ministry. We may reopen as of Sept 1 so our conversations are just starting with regards to PPE needs/new policies, etc. We had our first consult with our local health unit. We will have more information as we step further down the path towards re-opening our programs to families in our community.

Size and configuration of our office and treatment spaces to allow for distancing.

We do not know the availability PPE in the future as demand increases. We had great difficulty accessing PPE at the beginning of the pandemic. Supply chains may be improved or may feel the pressure. In addition, costs fluctuate depending on source and demand.

Space is our single biggest concern. We cannot socially distance without cutting back on volunteer numbers so have had to spread out the work to multiple days.

In the beginning there were challenges in accessing disinfectants we were able to obtain but costly. We started ordering in bulk.

We accessed the Red Cross Grant to obtain masks. The increased cleaning requirements have increased the demands on staff as that has been added to their daily duties.

resources/\$

Shared common spaces cause challenges with partners as some want higher standards which is an ongoing cost that cannot be sustained.

We are a volunteer seniors group and do not have the manpower or financial resources to function under the current restrictions. Most of our members are being very cautious being in open public spaces.

We can not do anything to upgrade our facility until there is money generated or granted or donated to us.

As a non-profit organization, we are unable to raise money to keep our club running

Costs related to purchase and supply delays

We would be required to have volunteers attend and deep clean / sanitize our facility after each use. Not feasible.

We're community funded, based on our fundraising efforts. Without being able to fund raise, we won't have the funds to purchase what is necessary for PPE. It will be up to the individual members to supply their own.

other

No. We can't do anything.

No, we just need gyms to play in following strict protocols.

Public need more about walking/cycling opportunities and what is need to do to protect themselves- getting outdoors is critical for mental health and trails

No but this could change as we move into fall.

This has been a dynamic environment with frequent changes as more is learned about the COVID pandemic. All levels of government have performed well in this difficult situation

Yes, in the area of testing. We had arranged on site testing for women so they could access shelter housing. We are now being told women have to travel to testing sites. This poses a barrier for many women who may not have a vehicle or who are anxious about getting the test. Public health said they would expediate testing for women if it meant they would get safe shelter and now they have changed their position on this.

With our admin office being closed to the public and our shelter serving clients remotely, we haven't had to implement significant measures to date. This would be a question to revisit in October.

PPE is not required for our organization. We social distance when there is a need to get together or use Zoom meetings to confer with each other.

Our organization depends on relating to others and reaching out which is difficult given the current circumstances.

We do not necessarily have any challenges with acquiring resources or installing any measures (we did in March and April but are doing well now), however it can be challenging to enforce Public Health Measures, especially as time goes on and community members become more comfortable and less cautious about guidelines such as mask use and social distancing. Volunteers of KLFS and clients at our food bank, the Lindsay Community Food Market, all come to visit our sites with different comfort levels, and we certainly want to see them and do not wish to turn them away, but managing differences in levels of expectations and comfort is challenging.

(Related to funding) Do you anticipate this being different in 3 months? 6 months? Please tell us how.

Yes/maybe

Its hard to know given the amount of long term change predicted and policy development. Unemployment rate increases will justify the need for enhanced funding

The funding allocations will end and we will need to rely on revenue from Thrift Store for the purchasing of food, which has been negatively impacted by COVID.

Yes. The provincial government is mandating child care back to full capacity in September. We do not have the guidelines for this yet. Difficult to plan with no guidelines. Don't really know what funding will be like.

Funding will no longer be provided in 3 months time. There may continue to be private donations but we suspect that they will also decrease.

We do not know at this time.

at this time, we are uncertain. The Ministry announced that our funding would be reviewed and possibly reduced retroactively to March 15, 2020. It has not been confirmed yet. Originally it was communciated that it would remain the same. We have had some communicaiton indicating that there will be additional funds to help with resources such as PPE and extra cleaning costs.

We have not received our budget for this year so this could change if there is a reduction or if proposed cuts to Public Health continue.

We have had increased costs with COVID (PPE, plexiglass, platform for virtual services etc) but have also saved money with COVID (not paying mileage to staff; not filling positions as not possible to see kids); they have evened each other out so no net loss/gain. We anticipate higher costs in next 3-6 months if staff exposed to COVID - increased sick time, increased isolation time - all resulting in decreased efficiency/ effectiveness and fewer children receiving services.

If indoor gatherings do not go up to 100 or more, we will lose our hall because no money will have been generated to keep it going

yes, if we don't get the all clear from the pandemic and the place doesn't open up. No one is going to come out and help make stuff to sell.

It is difficult to tell because we will be heading into Christmas.

Yes in at least 6 months. Hopefully able to do some public fundraising

Government funding is declining each month and will be nonexistent in 2 months

Yes, we expect less funding and increased clients to the food bank.

I expect significant challenges in the new year. The additional funding assisted with the increased staffing and relocation costs related to COVID. Our fundraising has been impacted significantly given our two biggest events occur in the summer. These effects will be fully felt around Christmas and our year-end as the additional governmental funding begins to dry up. As with any charity, the financial challenges faced by individuals, businesses and service clubs in our community will eventually impact us.

It will depend on action at city level

short term funding for extra cleaning and PPE needs will end by Dec 2020

It is anticipated that the Foundation's work will only grow as the community learns more on the benefit of having a local community foundation.

I anticipate that the financial impacts will increase in the future. As programs currently offered, such as the Wage Subsidy, are reduced the need to fund raise will become greater in uncertain economic times.

We anticipate that donations will decrease over the next 3 - 6 months. We are certain that the emergency funding from government, as well as emergency funding from Food Banks Canada & Feed Ontario will come to an end in October 2020. Given the influx of support we have received from private donors over the last 4 months, we imagine that donors are fatigued at this point and will not be able to offer the same amount of financial support until we settle into a "post COVID-19 normal". While we have held three food drives since March, and they were busy, they have brought in less and less funds each time, and the funds that they have brought in pale in comparison to what our usual fundraising events would have provided. Most of these large fundraisers take place in the latter half of the year, around the holiday season (October - December). These fundraisers have always been social events, and we anticipate a significantly decreased turnout and therefore a significant decrease in funds raised.

No

No. Our fundraising events for the year were cancelled and there are none scheduled to recoup this loss until May 2021 at this time. Additionally, user fees for services are almost nil as we are largely unable to do the in person visit that elicits such fees (eg. driver's medical).

We expect to continue to have decreased funding in all of these areas in this time period.

We expect funding to continue at the same level for this fiscal year (ends March 31, 2021).

It will be an ongoing concern. Competition for funds had previously reached a tipping point in geographic areas.

No. We can survive until late November 2020, after that we will have exhausted our limited funds. The Club will close.
Omeme Legion

No change unless social distancing limits are removed and the number of patrons allowed is increased to the limits allowed by the liquor licence.

We are currently in a "wait and see" holding pattern. We find it impossible to function under the current restrictions.

We will continue to open as we can, group activities that we offer for a fee will continue to be limited and be less income

Club athletes will pay less until January when competitions are set to resume.

It will be less but will rebound in 6 months but not like before

No change in next three months, revenue will continue to trend down, as we've cancelled another fundraising event due to social distancing. In six months, we will focus on donor year-end fundraising but it is unclear whether we will see a full recovery.

This will likely remain the same for future months

No difference unless facility opens and even at that point it would all depend on whether we would be able to provide food service safely to possible

clients.

No expected changes

We had to shut Vicky's Values which is our gently used clothing store for three months resulting in a loss of \$75,000 in revenue. In addition all our major fundraising events and revenue from third party events has decreased. We have had to cancel our fundraisers. We rely on Vicky's Values and our fundraising events to support our services. We need to raise approximately \$400,000 each year to maintain services and we are unable to do this as a result of covid. This will have a significant long term impact on our services and may result in staff layoffs and program closures. In addition, many people are suffering financially as a result of loss of income during COVID and donations from individuals and sponsorships from businesses are down and will continue to be down until people regain their financial footing.

We anticipate that our facility will be closed for a full year before seniors are comfortable returning to group activities without fear.

We don't expect any changes until things open back up to normal again, unless we can find new ways to raise funds.

I do not anticipate this changing at all in the near future

We anticipate will be solid for this fiscal unsure about next. Government has been very supportive and flexible to date.

What other barriers, gaps or concerns do you have around your agency's ability to provide service robustly?

funding/resources

With continued workplace closures and pressures on businesses in our community, we see concerns for the following: ongoing serious fundraising constraints and challenges, NFPs struggling to deliver programs, more people needing to access programs and more people needing help with basics of life. Other waves of Covid will cause ongoing changes in legislation with constraints (HR and Financial). Any gov't support programs will have expired ie wage subsidies

Increased needs and capacity for most programming while experiencing reduced capacity due to policy

Once the COVID specific food purchasing funding has ended, if there is a surge of new clients, which is expected, maintaining the level of food service will be difficult.

With the inability to raise funds it is difficult to provide services ie. helping people with glasses and such.

The club has no resources / income and has expenses of a mortgage, heating, utilities, insurance, to pay even while closed. We have a small contingency fund that will not last for the next year.

sufficient staff to complete work

Membership may not recover. We may need relief from the city for rent for our meeting facility as we had no income from sales at the little jail.

Bering able to serve the public come toy shopping days. We serve those who require assistance, and with businesses closing and jobs being lost, we expect our recipient numbers to climb much higher.

H&S/infection concerns

Most of our Members are in the vulnerable sector of the population, i.e. over 65 years. The Club cannot ask Members to risk infection. The Club cannot hold any events at its Hall, or perform community services that involve contact with the public.

Regular volunteers in the food bank are older and many are not comfortable working during the pandemic.

The fear of Covid and risk of outbreak.

Entering peoples homes Entering partner agencies

Many staff have children; if they are ill, or unable to attend school, staff will lose time at work; clients and families more nervous about exposure to COVID and may not want to come in to the Centre; others do not like virtual and will not agree to receiving services in this way.

Our greatest concern would be a significant rate of infection among our staff members.

We are a volunteer agency and our board and volunteer base are mostly made up of those in the high risk category - age & health. We have had youth able to volunteer but will lose their support once school begins. We require volunteers in order to offer our service to the community and our at risk volunteers are willing to help but the few of us who are in a younger bracket are concerned they are taking on undue risk. Balance of demand and care for our volunteers.

The pandemic will continue to impact how we serve our outreach clients. We have to protect the people residing in shelter so more limited services will have to be offered (take away meals vs eating in kitchen for example)

Major barrier is ability to interact with public safely.

IT

We have concerns about having a virtual service model currently, where some families have connectivity issues.

access to technology for families and ability to offer outreach and respite work with a strain on our staffing resources fully staffing the homes in pandemic

tech to support virtual visits

staff working from home not having proper technology to provide zoom.

We have had to make substantial upgrades to our technology to be able to provide services virtually. If there is a second wave additional upgrades will need to be made to allow staff to access the office virtually. The quality of access to internet services is also a concern for our staff that live rural.

other

Currently managing alright, but concerned about the backlog we will encounter when we re-initiate regular visits, preventive care screening, etc. Additionally, flu season will be an extreme challenge particularly in light of the large influx of patients who will be here for the winter who would usually have travelled south.

Provincial rules around maintaining childcare spaces for previous clients affects our ability to onboard new clients and it is unclear how long this may continue. Cleaning and disinfecting protocols also create barriers to adding users and programming.

Inability to provide social interactions. Health guidelines are difficult to maintain Reduced number allowed on premises No gaming allowed which is a very large part of our program Volunteer pool is rather small to coop with all the restrictions and provide other resourceful ideas to compensate the programming that has been restricted

mandates as to PPE requirements (masks), capacity restrictions

Permits for gymnasiums

More outdoor communication - what can be done and how it can be done
Work with KTCT to promote trail use

We have some programs that operate out of public schools, we do not want to overburden our partners at TLDSB at this time with questions regarding our programs re-opening in these buildings. We are proposing that we will service families outdoors while schools adjust to re-opening protocols, and once things have settled we will initiate discussions with the school board regarding our program locations.

physical distancing requirements

We rely on many partners who host our support groups, education and social recreation programs across all the larger and smaller communities in Kawartha Lakes. We expect that many will have restrictions on guests on the premises. Even if we wanted to restart groups we may have to find new sites. Social distancing may indicate an expansion of smaller groups with fewer participants. We may not have the HR or volunteer capacity to expand, thereby creating wait lists. Volunteers are an integral part of our service delivery, leading support groups, co-hosting education and supporting office

administration. Many of those volunteers may choose not to return. All this in addition to the slow return of our partners, decreasing the overall number of referrals for service.

We can not provide the events that we typically do throughout the year if indoor gatherings does not increase.

The size of our kitchen could be an issue on maintaining distancing for people doing meal prep.

Staff has been reduced and those working are getting tired.

Ability to purchase product in bulk is a challenge right now and serving clients in our small space will become a challenge when the weather turns.

Clients mental health instability, isolation

We continue to provide the same level of service, however, all of the meetings and events that we would have previously hosted in-person have now transitioned to Zoom/webinars.

Fewer people willing to help make it very difficult to accommodate the needs of the clients.

We are concerned about those most vulnerable and impoverished as this continues. Should there be another shut down we are planning ways to continue to support those people. Specifically to prevent overdoses.

One barrier we faced was being able to purchase large enough quantities of food at grocery stores to re-stock food banks. This is less of an issue today, as limits are few and far between now. But, during the first few months, it was really difficult and stores were not very accommodating. Our food bank Coordinator would have to make 3 or more stops to different grocery stores so she could get enough to serve her clients that week. If there was not enough time for her to make stops to all of the stores, she might not have had enough of every item to ensure all clients got some. If there was to be another round of food shortages, this would be a barrier that would once again impact our ability to provide service robustly. - One gap we observed was in our ability to offer deliveries. Many clients requested that food be delivered to them, but unfortunately with our very limited capacity without volunteers, and increased demand on our food bank, we were not able to offer a delivery option (although we did make a handful of exceptions when warranted and when we had the ability to do so). This is still a gap that exists for our organization, and we would assume that deliveries will remain in high demand over the next while, or at least until COVID-19 is less of a threat.

What are your concerns based upon what clients/service recipients are indicating?

health/mental wellbeing

There is increasing concern about having missed non-urgent care appointments and clients are becoming less willing to continue missing these. (eg. physicals, B12 injections)

Some parents are worried about schooling and child care for their children who have complex medical needs.

adequate and sustainable. Health and mental health a growing concern and more people will need assistance. Rural mental health outreach needs to be substantially supported and promoted. Access to PPE? Cost to access.

Even with all the PPE and sanitizing, many seniors and middle aged patrons still have fears of catching COVID and for their safety are not attending our functions

need for basic living supports, mental health and addictions

limited access to regular routine has caused an increase in crisis and behavioural events for our clients and families, and we have limited ability to respond

Clients are reporting increased cognitive and physical decline in the person living with dementia due to social restrictions. Their caregivers are experiencing a significantly higher burden of care due to limited home and community care, lack of access to respite or day programs and isolation from family and friends who'd previously be available to help.

Client mental health is always a concern as it can spiral into a number of negative ways. The isolation that occurred at the beginning of the pandemic was very difficult for people.

Seniors are not getting out of their homes to visit and interact with others in the club. We don't know the extent of the problem, as we don't have any method to get feedback from members as to how they are coping and what their needs are.

clients mental health deteriorating, isolation

Isolation, loneliness

financial

Others have had employment jeopardized as they do not have an appropriate child care option.

Local financial supports will not be in place or if there is a plan, will it be adequate and sustainable.

Donors are afraid to invest as there is a long road ahead with lots of financial concerns. High rate of people in our geographic areas on fixed incomes.

They are concerned that the Club will have folded long before COVID-19 has gone, which will leave them without funding and or volunteer services.

educational and employment supports

Cost of food has increased, and without continued financial support the amount of food we are providing will decrease. Many clients are concerned they will become more food insecure in the coming months.

We can not provide the donations we typically do or provide a place for local groups to hold events if we lose our hall

Lack of funds.

Future demand, number of volunteers and money to pay for increased amounts of food.

Feedback we have received from clients is that: - They are worried that they have applied for CERB without being eligible, and that they will have to pay it back but they don't have the money to do so. We are worried that this will cause another surge in food bank useage. - They are nervous to leave home to visit the food bank because of COVID-19. Of course, this makes us concerned that they are not at all receiving the nutrition they need to maintain a good level of health to be able to protect themselves if they fell ill. - Families are needing more food than usual to support their children who have been at home since March. Many low-income families rely on student nutrition programming that their children have access to in school. With students at home, parents are having to provide them with more meals, and we have gotten feedback that the kids are snacking a lot more than usual because they're home so often. We are concerned about this on our end because food banks typically give a set amount of food to clients based on

the number of individuals in their household, and not all clients will advocate for their increased needs.

service access

Families have been patient and understanding. Public Health guidelines do create barriers to participation for those who do not pass screening and require negative COVID tests before returning. Childrens' COVID tests are not available online which can cause delays.

Some clients have expressed concerns about the need for their children to have safe socialization opportunities.

That families choose not to return to group care

Our concerns are that service recipients want more service and we are gradually returning.

Families need support/respite, especially families with high needs children.

For public health it depends on the service and the sector. For example, with schools their planning for return to school and lack of guidance is prohibiting the delivery of oral health, vision screening and immunization in the school setting. We are having to determine other service delivery options including location.

Some families are keen to receive virtual services; others will not attempt it. Some do not have the required technology, or adequate internet. Complex children requiring face-to-face services are also the most vulnerable in a pandemic.

Clients want services to go back to full capacity. Feel they are isolated and rely on the community engagement on a day to day basis to maintain their quality of life

Bobcaygeon Helps Clients are not getting the food choices that are part of our normal procedure.

Clients know the Centre is closed.

At the height of the pandemic women were indicating that they could not escape their abuser as they were on lockdown with them. The level of the abuse when if they did manage to flee was more severe than we have seen in many years. It is simply not safe to have abused women be forced into a lockdown with their abusers. Not all homes and families are safe places to live. Women are still indicating that they are nervous about accessing shelter

and counselling services because of the threat of COVID in the community and in particular in congregate living environments.

feeding individuals in the winter will make serving the clients more difficult because we will have to take special measures to deliver food to those who cannot pick it up because of the weather.

lack of services being provided from other agencies such as mental health

Our clients have indicated the connectivity is an issue. They are pleased that continue to provide services yet many are unable to access the virtually groups. School is also a concern for our families. Many struggle to afford school supplies and with the public health requirements this concern has increased.

other

Keeping employees

Connectivity and devices is a priority if schools close the doors again.

Safety - not to collect in certain areas along the trail and reminder about what to do such as signage

So far, clients have not voiced any concerns. We are delivering more food to clients who cannot wear masks for health reasons but so far this is not a concern.

Maintaining Covid guidelines consistently. Insurance coverage for Covid issues not available

Our clients are able to access our services. Their concerns are in the larger picture of their lives - income & schooling for their children.

The participation rate in our region (Kawartha Lakes, Haliburton, Peterborough and Northumberland) is very low meaning that a large percentage of the working age population is not employed or unemployed and actively looking for work. This has resulted in some employers not being able to fill open positions.

lack of technology

Are you concerned that there are marginalized groups who would benefit from your service, but are not accessing it for some reason? For example, families living in poverty, or newcomers to Canada. Please elaborate.

seniors

we are particularly concerned about isolated seniors. They are not necessarily accessing required care as transportation is even more difficult to manage and they have added concerns about exposure potentially delaying urgent care that could end in poorer health outcomes and potential death.

Seniors have stopped attending our free functions set aside especially for seniors

Seniors. We know we have seniors in need in our communities but they are hesitant to reach out for help from the food bank. We are finding unique ways to reach them as they seem to be a generation who thinks they should not be helped by the food bank. We continue to state that the food bank is available for all people, families and individuals who need assistance.

Our membership is senior citizens, as well as those who normally rent the club for weddings, special community meetings, celebrations of life, anniversaries. It has created a large vacuum in the community.

Low income

Families living in poverty have had other stressors to contend with that have taken priority over accessing services.

Yes. As a service club, Lions is usually very active in supporting the less well off and marginalized segments of our society. Under COVID-19, we are unable to continue our community work.

Many individuals are nervous about coming, and feel they will be judged. Many low-income wage earners do not attend the food bank as often as they perhaps should. Seniors living in poverty.

Poverty is a definite barrier to accessing things that we are currently trying to offer on line and through our respite app

We do have athletes who will try to access Jumpstart or other funding to assist them with registration fees.

Yes - some do not have internet or technology (due to cost) or live rurally where internet service is inconsistent.

Yes, people who are living in poverty but do not feel that they are at a food bank level.

CERB has provided an alternative for Food Bank Clients, but I think that in our area, people are accessing the Food Bank as needed.

Yes, the current relief funds available for Bobcaygeon are allocated by request and assessed based on urgent need. It is known that those who may benefit from the Fund are shy and hesitate to make the inquiry about qualification. The local advisors focus on connecting and accessing the most vulnerable and in need.

We are concerned about not being as accessible during the lock down. We delivered food and basic need items where and when we could. Handed out food cards.

95% of our families are from marginalized groups. We have seen an increase in demand for service and we are aware that many families could

benefit from our programs that are not currently accessing them. We have a lengthy waitlist at this time.

other

We've been limited in our ability to offer enhanced staffing (one on one support) due to cohort sizes.

We were able to assist the federal government in two funding rounds to help some of our most vulnerable citizens. Citizens living in rural communities are always more at risk as funding funnels down through government agencies, it is based often on population. Isolated citizens are always a concern. Isolation could include many different demographics.

Those in rural settings without transportation and have likely not been historically referred due to this barrier

Everyone no specific group lack of communication about outdoor activities and facilities

Currently we are mandated by the government to reserve parents spaces even if they are not coming back right now. So These empty spaces for children are preventing any Ne families from accessing our programs. H

Possibly but we have tried to ensure that families are connected to us, by providing multiple ways that they can...and also ensuring that families are aware of programs that our partners offer that are more directed at marginalized groups.

yes, we have staff linking with vulnerable groups. Some if the fear on getting the virus, they do not know what services are available to them, virtual delivery is a barrier if they don't have the means to access virtual care, food security, etc.

There is a lack of awareness of our services among the general population. In addition, most of our referrals come from primary care (though not required). Those without a family doctor may not be connected to our support in a timely fashion. We provide home visits for supportive counselling, which is an asset to those where transportation is a concern. Should we not be able to return to home visits, clients may only access our services through other means, phone and video.

Yes, homeless, poverty, indigenous, newcomers to Canada to name a few.

criminal justice those being released because of Bill C-75

lack of face to face will limit some accessing - recent homeless housed,
those with mental health or substance use

people who suffer with anxiety have a much more difficult time because of
fear around covid.

Yes, particularly those living with a disability or medical condition. Many food
bank clients served by our member food banks are those with disabilities.
These individuals on ODSP were not eligible for CERB, and yet we are
seeing them less frequently or not at all. Many expressed that they were
afraid to leave home due to pre-existing medical conditions which make them
more vulnerable to COVID-19.

What other supports would be helpful to your agency to maximize its response to the community?

Communication

A means of communication related to services. I.e. a joint portal where each agency could list services being offered. Like the flu clinics - when, special precautions, etc. We do post them on our website, etc., but would think one centralized spot would be ideal.

Enhanced knowledge sharing with other agencies.

It will be important for the various sectors who provide services to continue to share information and collaborate. Understanding how services have shifted within various organizations will allow for agencies to help families navigate services more effectively, and partnerships between agencies will maximize our ability to fully support the community.

Regular community support, awareness of available services

Generic policy for service groups to post when allowed to reopen to the public

advertising!

coordinated community response, sharing of resources, understanding of roles and responsibilities,

Coordination with partners

Some publicity once we are able to resume activities. New members would be, very welcome and outside publicity would be valuable.

Help spreading the word

about our services and our needs when possible. - Some sort of streamlined source of information for all local social service providers; one where we can share updates, and hear updates from other agencies and learn about any relevant changes in available supports or guidelines from the federal, provincial, and municipal governments. There's so much to keep track of it can be overwhelming, something centralized, to the point, and all encompassing would be very helpful.

financial

Direct Support and partnerships with the municipalities and other NFPs.
Continued wage subsidy programs. Shared sourcing for PPE to reduce costs.

We have zero income. Some kind of funding that will allow us to maintain our Hall and provide community service would help us survive.

Support from
the Municipal government especially during fundraising events.

support from the municipality by offering in-kind
space to host programs and regional approach for PPE access for those
outside of acute and primary care.

A grant would be helpful in order to maintain our building and pay our costs
that happen regardless such as taxes, hydro and insurance. We as
volunteers can not carry this club on our own. We need to be able to host
events to that we can have our hall available to the community it belongs to.

We need some improvements to our building. Our building is a City of
Kawartha Lakes building so we have been reaching out to the city to ask if
they can make the building accessible, repair the roof and now that Covid
makes line ups necessary we would like an portico/porch shelter over the
doorway to help protect either our volunteers distributing food during the fair
weather months outside or to protect clients lining up to come in during the
cold months. We also need to have electrical plugs installed to support
freezers that are so necessary to safe food storage.

Municipal funding has been directed to homeless shelters and only \$5,000
was directed to our next step housing program and \$3,000 for food. This is
completely inadequate. The women we serve at WR LIVE and are part of the
CKL. During the pandemic we have not been providing service to out of area
residents. We had to hire additional staff for our next stage housing program
as we converted three units to offsite shelter beds so women could self
isolate before coming into the shelter and we had to rent a motel room for
two months for emergency intakes. Our costs for all of this were in excess of
\$60,000 not to mention the ongoing costs of running the shelter. The
municipality should be taking more responsibility to assist with the shelter
and safety for abused women in our community. They are your citizens as
well

additional PPE, purchase of lap tops for clients and staff

Cleaning and financial support to pay the bills is critical

Potentially more funds to broaden the reach of support to other communities

Funding for additional cleaning costs. We have increased with no specific funding. Funding to assist with tech support.

Financial assistance to offset the losses in fundraising income to cover the costs of just keeping the doors open. Support has been provided for wages, funding provided for Covid related programs but they has been little help available for us to maintain the services we provided before covid or to cover the costs of heat, hydro, water and sewage bills that are required to keep the office open.

More flexible and frequent funding opportunities

other

Access to internet in rural areas.

We need people to advocate for the community use of school/college gymnasiums.

More web site promotion of trail

a functioning electronic health record to enhance service delivery.

Technology to loan to families (we have loaned what we can, but do not have a large inventory), masks for families is an ongoing need, as is other types of PPE (face shields, gowns, plexiglass table shields)

Improved connectivity for all areas within our region to ensure that we are effectively able to offer our webinars to everyone.