

On the upside: How BC community non-profits providing social services responded to Covid-19

Gathered by the Board Voice Society of BC from its member organizations
July 2020

BC's non-profit social services sector responded quickly and with much innovation and energy to the unprecedented challenges of the coronavirus pandemic. We wanted to capture some of the fast responses, caring and success stories that happened in the midst of an incredibly difficult time for our organizations' clients, staff and boards, so we asked these five questions of some of our members. We're sharing their wonderful, inspiring answers here.

1. *What made you most proud of how your organization, staff and board adapted to the challenges of the Covid-19 pandemic?*
2. *What kind of innovations did you see happening as your organization worked to manage the impact of Covid-19 on staff and clients?*
3. *What surprised you the most about how the coronavirus impacted your organization and its clients?*
4. *If it were up to you to prepare the non-profit social services sector for another pandemic, what are the "lessons learned" that you'd give the most attention to?*
5. *Are there service changes and staff processes/policies that your organization brought in during the pandemic that you're thinking of keeping because they turned out to be a better way of doing things?*

Shelley Morris - Cridge Centre for the Family

Proud moments:

I have been, am and continue to be proud of the incredible commitment of staff – everything we do was designated essential. So while the world was told “safer at home” and “stay home” – my staff, with their very own human concerns about their health in a pandemic, still came to work every day to serve those in need, giving 110 per cent. I am also proud that we did not lay off a single staff member (some took leave due to vulnerable health – but we did not lay anyone off ourselves).

Innovations:

Every action, every task, every procedure had to be reviewed and many amended for safety of staff and clients. Recreation activities for seniors moved into hallway bingo, hallway exercise, hallway music etc – people sitting in the doorway of suites 8-10 feet apart. Dining moved from service in a dining room to service delivery to the suite. Stringent lockdown to visitors and volunteers at all buildings and programs created the need for adaptation and flexibility. Service delivery in the community was virtual or a sidewalk apart; food security was an issue for vulnerable clients and the generous support of the community allowed us to roll with the punches.

Surprises:

PAPERWORK! The reporting load to funders, the government, licensing and oversight bodies has been INCREDIBLE – it has placed enormous strain on us. Perhaps if we were a single-service organization it would be different, but in a multi-service organization we are overwhelmed with paperwork, reporting, constant weekly revisions to requirements etc. Other than that however, as I said, we kept service delivery up without interruption, just a little more creatively than in the past.

Lessons learned:

Keep your ear to the ground and don't wait for government to tell you what to do. When we heard/saw what was emerging in Washington State and the first inklings of it in British Columbia, we didn't wait for direction, we chose as an organization to shut down outside activities, severely restrict visitors etc.

What kept us safe was being quick and nimble and attentive. It was particularly concerning that the focus was on Long Term Care but nothing about Assisted Living (one of our programs) or

group homes (one of our programs) – so we took matters into our own hands rather than wait and risk the health of those we serve and those who serve.

Changed practices and policies we'll keep:

I think there will be, we've chatted about some, but it's too early for us to say for sure what those will be – Our greater concern is how to manage the health and wellbeing of those we serve if a second wave comes in the fall and pushes us back to full lockdown, just as we've started to ease some of our restrictions 'slightly'. We are particularly concerned about how to manage the mental health of everyone.

Tanya Behardien - OneSky Community Resources

Proud moments:

I think in times of crisis things can go off the rails quickly. Right out of the gate we built a very strong COVID 19 Exposure Control and Training Plan. This built a lot of trust with staff and they felt really well taken care of. This was epic to pull off. In a multi-service organization like ours it felt like we were drinking from a fire hose with the amount of information we were receiving- most of it after the fact. The organization adapted very quickly and nimbly to do the things we needed to do and a stronger sense of team emerged and a deepening of folks' connection to our mission and values. When push came to shove, people really showed how they live the values of this organization. Our Leadership Team meets every day and continues to do so and we have never worked better together (we are currently down 2 of our director positions including HR and Community Living). People in the organization saw and felt that which gave them a sense of pride in being a part of something special.

Here is an example of one of the notes our leadership team received:

"I just wanted to take a minute and let you know how grateful I am to have you all guiding us. You have worked so hard and really have been an unwavering source of solid support for all of us. Your leadership through this tricky time has been calm, consistent and reliable. It is so very apparent how much you care for all of the staff and participants and are working so hard to do the right thing for everyone. In speaking with other CCRR programs, I was so happy and proud to be able to say that we are part of an agency that is working hard on policy and getting us all set up at home and even that counselling for staff is an option. I see so many of our sister programs struggling out there right now and I cannot tell you how grateful I am for being a part of

this agency. With these people and in this place I feel safe and supported. You truly help us in holding a soft front for those we are supporting while you are the strong back. In this time when we are all doubting ourselves, I just wanted to say that I see you. And thank you! That's about enough cliché and mush for one day. Have a wonderful weekend and take care of yourselves and your families."

Innovations:

Not sure that they are necessarily innovations but definitely moved to doing things differently. One thing we did that was easy to do was to serve as a backbone organization for the local soup kitchen. They are entirely volunteer driven and when the pandemic hit they closed up their operations. This had a huge impact on the homeless population and vulnerable people who relied on these meals to survive. They received a grant from the Community Foundation to continue and to actually hire staff but they had no experience in hiring, or employing people. We were able to serve as a backbone organization to help them to continue to deliver service by providing a hiring framework, templates and a payroll service. All of our programs and services continued to operate although many of the services we offered were different. A couple of unique things happened in our family development programs.

Our Sexual Abuse Intervention Therapist has mastered play therapy on a virtual platform. It is hard to imagine how this works, but she has had very good results. We also used a virtual platform to conduct Family Group Conferences. These conferences involve pulling together family members and close friends from all over to discuss and plan for a young person who may not be able to be successful living at home or independently. In our Community Living Residential services, we were able to isolate one team per each residence and minimize staff movement.

Our Community Inclusion Staff provided outreach services which resulted in a lot of hiking and walking and exploring neighborhoods. Our Seniors Services transformed their operations to buy/deliver groceries and prescriptions and do more phone check-ins. Our receptionist, who is very talented with sewing, sewed cloth face masks since we were having a lot of trouble sourcing PPE – and she did it while answering the office phone remotely.

Since we couldn't bring our staff together for an appreciation event, we had a family picnic dinner delivered to every staff member who worked so they could take a night off from cooking for their family. On Administrative Professionals Day we had a lunch delivered to each person's home from a local winery and we had a zoom appreciation lunch.

We also shared our pandemic plans with two local First Nations so they could adapt them and use them as a template. We held and continue to hold virtual town hall meetings across the agency. We offered extra counselling support beyond EFAP for anyone who wanted it.

Surprises:

There is a lot of discussion about change management processes and how good change takes time....sometimes people can be slow to change but this was not the case for us. People adapted quickly and we were able to make well informed and timely decisions. We were also super lucky that in areas like child care where we did downsize temporarily, all the staff that we moved to temporary layoff wanted to be off with their families, and all the staff that stayed really wanted to work.

We also met new clients (we call them participants) that we didn't know before as a result of the pandemic. We met a lot of new seniors and families with children of Essential Service Workers. The pandemic is very difficult for our clients with intellectual disabilities. Having their routines and preferences disrupted is challenging alone, never mind their level of understanding of what is happening and why things must happen differently.

Lessons Learned:

- Investment upfront in putting together an amazing Pandemic Plan. This guiding document has and continues to serve us to navigate myriad scenarios that aren't predictable. Each time something has come up and we have gone back to the document, it has guided us in the right direction.
- Stockpile - PPE-we were turned down by every supplier as we were not an existing client and did not have access to what we would have needed if an outbreak happened. This was our biggest vulnerability.
- Having a diverse funding base is helpful and a contingency reserve.
- Have a strong Occupational Health and Safety Program.
- Over-communicate with people and keep them informed.

Changed practices/policies we will keep:

I am sure that there will be some service delivery that we keep but what stands out to me the most is this: Our increased and intensive and intentional internal collaboration has optimized the many skills in the various teams resulting in better outcomes for the people we serve and the communities. We have also reduced silos by this kind of intensive collaboration. People

have talked about connecting with their direct reports much more than they did when we met face to face and this has had a positive impact.

Sian Lewis - Kamloops Society for Alcohol and Drug Services (Phoenix Centre)

Proud moments:

There was an immediate response and everyone brought their expertise forward in a collaborative effort to respond to the challenge keeping staff and client safety as the primary focus. The Board was there in the background, supporting us but making space for us to do our jobs.

Innovations:

It isn't necessarily an innovation but we developed a work from home policy, agreement, process and procedures in a four-day period to meet WorkSafe requirements for some of our staff to work remotely. Prior to this we had no work from home policy/procedure in place.

We partnered with the unions to assist us in developing this quickly (they shared templates/sample documents). Staff were called upon to do tasks that were out of their typical job description and they rose to this challenge. For example, we had a kitchen staff take on basic housekeeping tasks when a janitor called in sick.

We had many staff support the process of wiping down all high-touch surfaces throughout the facility. Our large meeting room was converted into a staff change room for those staff providing direct patient care (they are required to change out of street clothes upon entering the building and to don work clothes).

Surprises:

The greatest impact internally was on the staff not the clients. Our staff do such an exceptional job that clients who were on our inpatient unit felt safe and cared for. Staff, on the other hand, had never experienced a pandemic and a handful had great difficulty in processing this for themselves – not as an employee necessarily but as human beings. Most of management's work has been focused on supporting the staff. One third of our staff complement are currently on leave. Some of the leaves are due directly to COVID, some lengthened in time because of COVID, some not related to COVID. COVID exacerbated some staff's pre-existing mental health issues.

Lessons learned:

Now that we have gone through this experience, we realize that preparing staff mentally and emotionally is just as important as preparing them from a practice perspective. It is imperative the leadership team is functioning well and this team needs to be clear on expectations in light of a crisis. This pandemic exposed a significant weak link within our Leadership Team and going forward we need to focus our efforts on repairing this.

The speed at which this pandemic changed our practice is also worth noting. Now that we have a semblance of a plan, we will be far more nimble next time around...although I have to hand it to my staff, they were pretty darn nimble. We already had an infectious control policy in place, so this was a true blessing. Although we had to do many extras, we were fortunate to already have the health expertise onsite to face the challenges of the pandemic.

Changed practices and policies we'll keep:

We will keep the increased screening re: health status of clients being admitted, as well as staff self-monitoring for their own health. We will continue to promote social distancing and hand washing. We will continue with the increased cleaning of all high-touch surfaces. We will continue to educate our clients about the importance of all these practices. We will continue to limit the number of visitors to the facility and screen the health status of those who are permitted entry (i.e. repair services). We will maintain all the additional signage in the facility promoting safe practices.

Mary Lynn McKenna and board member Eleanor Calder - [Esquimalt Neighbourhood House](#)

Proud moments:

Quick response to following the Public Health Recommendations.

- Purchasing of masks, gloves and hand sanitizer for all the people entering ENH
- Removal of all touch articles in reception area such as chairs, pens, and food.
- Used the outside porch for non-perishable food items.

Innovations:

- Partnerships with Harbourview Church
- Discussion with funding agencies

- Staff having phone conversations and mail out information to clients
- Purchase of new VoIP communication system – currently being installed to ensure one secure platform is used by 63 internal users for now and the future; audio/video technology; land lines no longer needed as of June 26, 2020;

Surprises:

We may not know until we begin to open up again, but we were surprised by how quickly, we were able to mobilize and address the need to work remotely while continuing to stay in regular contact with clients.

Lessons learned:

- Protective equipment is essential for safe practice.
- Quick and truthful information about the operations, updates, and supportive resources made available to everyone who accesses the agency.
- Funding sources also need to give this kind of information to the social care sector.
- Board needs to continue to meet on a regular basis to be able to provide leadership on informing the Community.
- Ensuring technological and communication needs are current – allowing for swiftly changing methods to deliver service;
- Ensuring risk management plans include more comprehensive plans to continue operating if facilities were no longer available;

Changed practices and policies we'll keep:

- Partnership with Harborview to provide weekly changes has been a great support for many people.
- People dropping by without appointments do not necessarily need to enter our buildings
- Resources normally sought out are available outside of the building with easy access 7 days a week.
- Adult Mental Health Counselling is being offered via audio/video communication – we may consider continuing this method (with some exceptions) – remote sessions have been successfully offered by other organizations for years.
- Considering continuing to seek all funds needed for our community partner (all volunteers) to resume a weekly free food market on our premises;

- We have secured funds for all food purchases for the market for April 2020 to March 31, 2021; basically, turning the project into a service; I believe we were successful with securing funds for 1 year because we had only requested funds to directly purchase food for the market; ordering food for delivery takes a few minutes by email; as well, the new method for.

Dianne Hinton and board chair Leslie Welin - Clements Centre Society

Proud moments:

First, our organization. Clements closed for only the briefest of days once school districts announced their closure. In the absence of their CEO (who was on vacation out of the country), the senior leadership stepped up to handle the agency's response to the pandemic. Once appropriate measures were in place, service delivery resumed, albeit in a significantly different format. Providing calm reassurance to the myriad of employee and family responses, the leadership team worked together to ensure that communication was regular without being overwhelming. Clements was consistent and collaborative in its response. Working with families to identify the best type and amount of support for each unique situation. Clements also worked to help home share providers by connecting with them and seeking government funds.

We transitioned a youth into a CLBC funded residence. Not without COVID related complications but ultimately with success.

Second, our staff. One particular story stands out. I have no words better than those of the employees involved. I've decided to simply cut and paste the appreciative email from our Behavioural Consultant to the employees of our Children & Family Support Program:

"Hey Superheroes!! Thank you for letting me borrow your super powers yesterday. For those I'm including in this email who don't know the story: B, C and A were cooking up a storm at CFS yesterday and gave me a super duper veggie meat chili and an extra cheesy baked pasta dish as well as 2 spa packages to give to a family on my caseload who I was going to pop in to see. I arrived at their front door—food and treats in hand -- and Mom answered my knock. I didn't recognize her—she's probably lost at least 10 lbs, she's covered in scratches and bruises across her chest and down each arm, her hair is falling out and going grey. Her eyes told me she was both embarrassed and excited to see me (I'm not writing a critical incident so I don't have to totally justify my observations). Her daughter looked terrified but peeked her head around the corner once she saw her

Mom's smile. I let her know that my friend A had put both a pink and a purple nail polish in the spa package for her and that I was hoping she and her Mom could have a little bit of fun tonight. My last conference call regarding this family had 11 professionals, all with university degrees, on it. We are doing our utmost within our various disciplines and bureaucracies to help this family who is working so hard and struggling so much. Our meetings and report writing and advocating add up to hundreds of hours and thousands of dollars by now and nothing has been more helpful to this family than what you did for me to pass on last night. You are superheroes meeting families where they are at. You are helping in really meaningful tangible ways. Meatballs are far more essential than webinars, a face to face smile beats Zoom and I am so elated by the fact that you understand that, and in true Childrens' Family Support fashion, are still meeting all your efficiency and effectiveness measures by helping families thrive. You've changed your means but not your ends. You boost my mental health everyday by allowing me to be in your presence and what you are doing for the families we serve is invaluable. Thank you for making my personal and my professional life so happy."

And finally, our board. I am most proud of the fact that when I, in forced isolation upon return from hiking out of country, requested a board meeting, (second day back from vacation on a non-board meeting day) not only did the entire board show up (virtually of course) but they backed my request for what is now called 'pandemic pay'. Back in March, there was no mention of compensating employees who were putting themselves and their families at what we thought at the time to be a significant risk. The board was wholly supportive. And I am proud to work with such a team.

I realized that I am most proud that when the community rallied together to put supports into place, Clements was top of mind for so many. We were approached to support the organization of childcare for Tier 1 and 2 essential workers, to participate in the food task force through our social enterprise The Mindful Mouthful and to support the "pop up" emergency shelter in the neighboring parking lot. It's reassuring to recognize the extent of community awareness of the depth and breadth of our agency.

Innovations

Services to the children and families we support took a significant turn. One cannot be concerned about physical therapy when food is in low supply, or when isolation creates situations where single parents cannot leave the house for groceries, exercise, anything due to the significant needs of their child and complete withdrawal of support such as school/child care. Clements Child Development employees had to respond by providing that Friday evening

dinner, by running an errand, by meeting in the carport or garage just to listen to an exhausted mom. While our brochures have long indicated our supports are family centred, this was our opportunity to truly demonstrate that. I have some great emails of appreciation from moms who received one of the 'kits' dropped off weekly for families. This one contained shaving cream and some creative art ideas, with the option of 'zooming' in to see what peers were doing with their kits. Her son experimented with the shaving cream craft long enough for her to mow the lawn on a sunshiny April day.

There is, of course, the virtual component. Who knew it could be so easy to 'pivot' (seems to be the popular term) to virtual meetings? Families responded best they could, employees made the switch as did our board and so many of our stakeholders and partners.

Community Inclusion for adults with disabilities has been somewhat 'stuck' for a time. Folks are included in their communities but we have been struggling with residual traditions in terms of the types and amounts of support offered. We have become innovative! We have made another step forward in terms of appreciating the contributions and abilities of those we are paid to support. Folks are resilient! They can be part of their own service delivery, and quite frankly were ready before we were. It's been a pleasure to witness the innovative ways we communicate, connect and offer support to those adults and their loved ones throughout this pandemic. Again, weekly kits dropped off to create either on your own or with peers through 'zoom'. Zoom dance class, yoga class and Friday afternoon chat group.

Surprises

I am not sure I was surprised but I am certainly grateful that AT LAST the work of some of our services has received the recognition that was long overdue. There has been a real shift in the way the work is viewed. This impacts our employees and those we serve by elevating their place in this community. In this province and indeed across the country. This is important work, done by underpaid employees. I hope that this recognition will be sustained long enough to ensure systemic change in the definition and understanding of 'essential'.

Lessons learned

It does indeed take a village. During the pandemic agencies worked together to address so many of the issues that had plagued our community for years. It was an incredible example of how when we drop the presumptive silos, trust that each of us is doing the very best we can and recognize that we are all serving the same community....amazing things can happen. For

me it's the greatest lesson, and how novel, that working together might have the most impact. Who knew?!

I think the contribution of families to the care of their children and adult children with special needs has finally been recognized. The lesson has been to appreciate this and perhaps re-think processes that prevent families from receiving the same support as 'paid' caregivers for the same child/adult might receive.

At the provincial and federal level I hope that the lesson is in the recognition of the value/importance, the 'essential-ness' of social service agencies on the overall health and wellness of communities.

Other lessons learned, submitted by Leslie Welin:

- Importance of board-CEO communication
- Crucial that non-profits collaborate. Sharing knowledge and resources is vital.
- Recognize that there will be pressures on government and financial market, yet, we need to look to the Donut Economic model to come out of this. Inequalities are not acceptable.
- Recognize that NPs saved the bacon of this province and country. Yes, there was economic help, but it was the innovation of the sector in pivoting to virtual and distanced service delivery.
- Need to fund technology for our sector
- Stop using GDP as a measure of success and use determinants of health within the limits of environment as our measure of success.

Changes in policy/planning we'll keep

As mentioned above, there have been significant changes to our community inclusion programming that is less 'bricks and mortar' and more community. This had been a long time aspiration. This will stay.

Zoom will stay with us – dancing, exercising, chatting. How fun! Leslie Welin comment: However, Zoom can challenge how people "hear" one another. Conversational guidelines were developed and are now a part of each board package.

That paediatric therapy might be provided virtually was not a consideration previously. We have learned that in not all situations is it necessary for the therapist to see the child/family in

person. Virtual therapy, virtual infant development consultations will remain but only as an additional possibility in our catalogue of services.

Working from home is likely to be more accepted and valued for some but not all of the work. Staying home when sick will be respected, and possibly working from home when only slightly sick will be the new standard.

Denise Yagulnesky - Kitimat Community Resources

Proud moments:

As ED, I was away on family leave staying with my brother in law in Williams Lake palliative care until he died on March 6 just prior to the state of public health emergency that was declared on March 17. I left in mid February, well before covid 19 was a “big thing” in BC. It was and is a very traumatic time for me as well as my board and staff because we are a family and my brother in law died from aggressive brain cancer in 4.5 months. So in addition to the emotional stress everyone was feeling for me, they were also navigating this unfolding of the pandemic along with my partner Cyndi. And they did without burdening me during one of the most traumatic times of my life.

Our board, administration and front lines pulled together to talk to other agencies in the community and essentially our community closed down by the end of March. Our mall was closed, library, pool, agencies, doctors’ offices, optometrists, etc. By the time I thought I better leave Williams Lake to come back to Kitimat the first week of April (I didn’t know if travel was going to be affected provincially) I came back to a closed town. I hadn’t even been following the news of what was happening but my staff were, and they knew what was best for us to do to stay safe.

My partner Cyndi told me to come home when I was ready and that there was nothing for me to do. Everyone from all our programs were already working from home and communication went out to the public while we waited for the recommendations to come from Minister Dix and Dr. Bonnie. So what am I most proud of? That my role as ED was not needed in the face of crisis and uncertainty because of the people around me who rose up during a time when I couldn’t.

And even as we work through this and I am haunted by the end of my brother in law and impact on my sister and nephew, my work family around me shields me from having to be the

one who has to stand up alone. They stand up beside me and oftentimes in front of me. Which is just what I need right now to heal my heart.

Innovations:

In addition to following the guidelines from the Provincial Health Officer and WorkSafe BC, we went to a virtual model of service delivery with our clients. We closed our offices from the third week of March until June 1. This virtual model required us to purchase laptops, work phones and tablets. We now have an intercom outside one of our offices as we are in Phase 2 of opening again. We screen clients outside and provide them with the rules for entering our building for public job search.

We have to be very tight with our WorkBC office as we are seeing high numbers of job seekers travelling from AB to look for work locally. So we completely reconfigured our office to allow for social distancing and have time limits and PPE available to reduce the risk of exposure and transmission. We ask clients to use hand sanitizer upon entry to the building and we disinfect after each client. In our adult literacy programs, our instructor was holding Facebook live sessions as well as groups outside.

Staff had virtual group check-ins each day in the latter part of March and April to cover off any issues with clients or other challenges they were seeing. Again, they absolutely took the lead and figured out what they needed to do.

And I will say hats off to our funders across the board who gave us the autonomy to do what we felt was appropriate as far as balancing service delivery and keeping our staff safe. So our experience was very positive in this aspect. I would be remiss if I didn't mention that the District of Kitimat covered our costs for the technology upgrades and Covid-19 upgrades such as the installation of plexiglass and acquiring of PPE. We have been very fortunate to have such a responsive and generous community.

Surprises:

What I observed is that there are 2 camps of reactions over this pandemic:

- The first camp are the ones who are super serious about the risk and immediate response and safety measures that need to be in place to stay healthy. They follow the daily briefings and are up to date on the research that is being done and are walking medical journals of information.

- The second camp are the ones who are more difficult to read as they kind of agree that there are risks and that we should act hard and fast but not really. They pick apart and debate the information that is broadcast about the pandemic. Somewhat of conspiracy theorists. You know how they say to not discuss religion or politics? Maybe covid-19 could be added to this list.

What absolutely surprised me after we opened on June 1 was the reaction from the job seekers from Alberta to our safety measures. We would say after dealing with these folks – “do they even know we are in a pandemic?” They become irritated when we ask the health questions at the door and don’t seem to understand our reduced operating hours and time limits in our building to reduce exposure. Our locals get it and actively work with us to maintain our health and safety.

But I will say the out-of-province clients have brought more challenges to us. These folks are coming to Kitimat looking for work predominantly from Alberta, but also Saskatchewan and Manitoba. And with our massive work camps here and activity going on with LNG and the pipeline, it does feel like we are sitting ducks waiting for an explosion to happen as far as cases go. In our town we had a few cases at the start of the pandemic in March – seniors who had travelled out of the country and one retired teacher we all knew got very sick. So again it's us as locals trying to protect ourselves.

Lessons learned:

- Have a stockpile of PPE and disinfectant wipes
- Put up your plexiglass now and consider the configuration of your space to be able to utilize the 6-foot rule. This is hard for so many non-profits who don’t have adequate funding for space but it’s a conversation that likely will stay with us while we negotiate our contracts.
- Be prepared to send your people home and have them have the ability to work from home with laptops and phones. Right now we have our Case Managers who see clients one on one continue to work from home 2 days a week to manage their caseload and come into the office the remaining time to do other aspects of their job. So a flexible home/office model.
- Stay home if you are sick with cold or flu symptoms. So many of us old-school people come to work come hell or high water because we don’t have adequate numbers of staff or have to respond to funder deadlines. This needs to change in our sector. We can’t continue to give our all when there are not adequate funds to support our all. It is not admirable or a show of dedication or loyalty. It shines a light on the type of people

that are attracted to this sector – the nurturers, the caregivers and the healers of the world who often give too much and sacrifice their own health. Sickness policies need to change and if it means closing your office because of it, then the funder needs to accept that or provide more funds to bring a temp in.

- In our WorkBC contract, the government has dictated to us how many hours a week we have to be open. Nonprofits need to continue to hammer home the lack of funding that supports this notion in our contract negotiation. And what is appropriate for downtown Kelowna may not be appropriate for downtown Kitimat. So allow us to have control over our hours of operation that fits the needs of our community. Some of our contracts allow this but some don't.

Changes in policy/planning we'll keep:

As described previously, we will keep a home/office combo at least for this remaining fiscal year with our WorkBC program.

We were always complimented on our way of one to one help with clients with their job search application processes, on the computer, teaching how to email etc. We have since discovered that many of our clients are more capable than what they let on, so our approach has changed to a more supportive, cheerleading approach rather than the doing. The doing is fast and easy for those of us who can do but we create dependency on our clients. And in this virtual world, it is best they learn more skills for independence.

We will adjust our sick time policy, which is pretty good already, but we will include the “no questions asked “stay at home if you are sick” caveat because now we are all set up to work from our homes.

Overall, we are navigating this pandemic without too many challenges. We had a face to face board meeting in June and have been in touch throughout the pandemic by phone/text.

Without question our board has prioritized our safety first and hammer home – keep doing what you are doing to reduce your risk.

We have cancer survivors and staff with immune compromised health issues, so without a doubt we consider them first. As mentioned, all our funders have been awesome as far as giving us full rein to do what we needed to do, and our community came up with the funds to purchase technology to work from home. Some bright lights for sure during a stressful time.

Wendy Richardson - John Howard Society, North Vancouver Island

Proud moments:

We are particularly proud of the way we continued to offer services, including face to face services throughout the pandemic. We found creative ways to work with youth, adults, and families and continue to provide critical support. One example was the cooking group – the staff person delivered the ingredients to each youth’s home ahead of time, the event happened virtually and youth posted pictures of the resulting creations.

Innovations:

There were several great innovations – we introduced virtual counselling using doxy.me and intend to continue making this available for hard to reach clients after the pandemic; we found ways to meet young people in outside, walking on the beach etc. to enable counsellors to do face to face check-ins with vulnerable youth; we provided hand-made masks to all staff and many clients thanks to a concerted effort by local quilting guilds.

Surprises:

A few staff went off on “stress leaves” so they could take advantage of CERB while other staff stepped up and demonstrated tremendous courage in their efforts to continue to provide essential services.

Lessons learned:

Ensuring adequate supplies of face masks, hand cleanser, and wipes ahead of time. Clearly identifying what work can be done effectively from home and providing concrete guidance on how staff can demonstrate accountability for their work-from-home time. Having a slate of casual staff to help cover absentee staff, whether due to illness, “stress” leaves, or child care challenges.

Changes in policy/practices we’ll keep

We will keep virtual counselling as an additional service. We have the ability for the entire financial department to operate remotely if necessary.

Rod Santiago - Archway Community Services

Proud moments:

- The creativity and enthusiasm that our program teams showed as they adapted to the pandemic;
- The determination and courage that our team showed: not only committed to keeping our doors open, but adding additional programs and services to fill in gaps as COVID-specific situations required (Mobile Seniors Outreach / Food Hubs);
- How quickly we responded and shifted our services as an organization, despite the omnipresent uncertainty and anxiety (COVID Response Team to lead the change process)

Innovations:

So many, but here are a few examples:

- Our Youth Resource Centre had themed video calls with clients, such as “Playland Day” complete with cotton candy and mini donuts and “San Diego Zoo Day”;
- The Family Centre & Best for Babies provided curbside pick-up and provided online versions of their programs in English and Punjabi; Facebook Live weekly versions of the program are getting 400+ views;
- Food Bank switched to walk-by and drive-through services; and, we increased the number of satellite Food Bank sites throughout the community from 12 to 14;
- “Abby Dads” provided parking lot chat groups because virtual programming wasn’t enough;
- Within two weeks of the pandemic being called, Archway developed a brand-new Mobile Seniors Outreach initiative to provide services (groceries, prescription meds, laundry, walking dogs, friendly visits, etc.) to isolated seniors throughout the community;
- Counselling programs provided virtual services within weeks of the pandemic being called;
- Addictions Centre / OAT provided services with increased sanitizing, reduced client scheduling and remote doctor visits;
- Legal Advocacy continued providing services remotely;
- Legal Advocacy for Agricultural Workers connected newly arrived migrant workers from Mexico (quarantined) with Archway Food Bank to ensure that they were receiving culturally appropriate food

- Community Living connected with clients remotely – EPIC did drive-by waves to encourage to augment virtual visits;
- Career Paths hosted online webinars;
- A2E (Access to English) provided remote tutoring;
- Immigrant Settlement continued providing services remotely.

Surprises:

- How it affected every facet of our agency and programming. Fortunately, we had already made the switch to O365, which made it possible for us, as an entire organization, to switch our service delivery models. Nevertheless, we lacked technological infrastructure (laptops, mobile phones, PowerPoint projectors, hardware, etc) as did our clients to make the transition easily.
- We stayed open during the entire pandemic, with only a small number of our programs shutting down (mostly those dealing with seniors who would be too vulnerable to the virus).
- The emotional impact was significant: physical distancing and social isolation caused a major impact on the mental well-being of our staff and clients. Being an essential service and keeping our doors open (especially in the early days when repercussions were unknown) was stress- inducing.

Lessons learned:

- The importance of maintaining a current technological profile – how switching to O365 turned out to be incredibly helpful during the pandemic;
- The importance of a flexible, responsive leadership team – how the COVID Response Team was able to shepherd the organization through the beginning of the pandemic;
- The ongoing role that the Next Normal / Planning Ahead committee continues to play.
- The importance of clear guidelines, policies and support for staff regarding remote work. This includes how employees are coping with the new reality of remote work, including how to remain productive and connected with their co-workers.
- The importance of communicating clearly and encouraging our team (in various ways) on an ongoing basis throughout the course of the pandemic.

Changes/policies we'll keep:

- Remote work (hybrid): many staff are valuing the ability to work from home and we are adapting our policies to reflect this new reality. Additionally, we are evaluating what our office spaces might look like in the future to better support a hybrid model;
- Program specific: the Mobile Seniors Outreach program will become a permanent offering provided by our Seniors department. Many programs will continue to offer a remote version of their programs, which was valued both by staff and clients;
- Next Normal: planning ahead for the next wave; building up the technological & other infrastructure for the next year (or five) of COVID.

Christine Mohr, Options Community Services

Proud moments:

I would say that I am most proud of how nimble we were and clear in our communication. While it felt like we were building the ship while we were sailing it, we were calm, followed the science as it emerged and communicated frequently and quickly.

We are proud that our staff continued to live our values of Diversity, Integrity, Collaboration, Excellence, and Resourcefulness. They put our clients and each other first in how we proceeded. We have great feedback from the people we serve and our funders who were relieved to see how we continued to work.

Staff were/ are hugely resourceful in finding ways to support clients. For example, staff in our services for children with special needs, created fun videos showing children how to properly wash their hands by including the children's key workers throwing hand sanitizers to each other (really fun video) to each other. These same staff thought about each child that they worked with and created activity boxes to drop off at their homes. Parents were touched when they saw how well staff knew their child and the effort that went into each kit. They shared feeling cared for and valued.

Perhaps the best example of our resourcefulness involved opening three temporary shelter sites practically overnight so that guests at our shelters could socially distance. As well, one of the sites was designated for individuals where COVID19 diagnose was being tested for. The Fraser Health Crisis Line which is operated by Options did not skip a beat as staff and volunteers continued to provide critical services through a period of heightened anxiety for callers, volunteers and staff. Other staff connected with our most vulnerable clients by seeing them in

outdoor settings while practicing safe distancing and mask use. Weekly Sunday dinners with youth with lived experience in government care, continued virtually with youth making meals via on-line support and then sharing their meal together as a group virtually. Yes, this was a bit different but served the purpose of connection, support and some sense of normalcy in their routine. We simply really did not skip a beat.

Innovations:

We have moved to a much higher degree of virtual service provision both at the group (classroom) level and individual client level. We have also learned that some of our clients are more capable and that we were perhaps doing more for them versus supporting self-sufficiency (noted this with our mental health clients, some youth, and some of our newcomer clients).

One thing that the pandemic has pushed us to get done is the development of a very substantial on-line training for potential Crisis-line volunteers. We rely on some 200 volunteers to resource the CL and having a more efficient means of providing the training which will also continue to involve some in-person training, is something that we have wanted to do for a long time. We are now able to provide this training more efficiently. As well, we are able to do volunteer screening virtually, etc., thereby proving greater flexibility in meeting with potential volunteers.

Surprises

I was surprised that some of our funders seemed to think that they could direct what we would do or not do as an organization and that we needed to wait to hear from them, especially in the case of a pandemic. As well, contact with pretty much all funders was quite delayed at the local level and the higher levels of government were scrambling. Indeed, we heard directly from various government staff that they were very disappointed about not receiving direction themselves for their staff and operations.

I am not intending to be critical about the slow and disorganized response. It is actually what I would expect. I understand that government is a very big machine and cannot make nimble decisions. This is especially why it was most annoying to receive direction from some funders way past the point of when decisions needed to be made. We simply did what we knew we had to do. We also did not need them to tell us what to do.

Lessons learned

We need to have more non-expiring PPE on hand (shield, masks, etc.), government and our sector need to formalize supplier chains of expiring products such as sanitizers so that we can readily secure these when needed (e.g. with firms that went from brewery to hand sanitizers).

We need to establish better means of seconding (for lack of words) staff from within and across other non-profits and government to provide service in the most critical of essential services. We need to share what we have each learned through this pandemic, including contacts so that we can learn from each other.

I really, really think we need to debrief with our government colleagues about what went well and what did not between government and our sector. I think about the various pandemic assistance initiatives that exist and how great it is to have these. At the same time, for example, the federal/ provincial Pandemic Premium Pay (PPP) is a nightmare given the incredible confusion, lack of clarity, contradiction, central direction while also layered with individual social service ministry direction, etc. of this initiative.

The PPP is creating great disparity at organizations such as it is not available for non-provincially funded programs and because each of our many funders is making their own decisions for what services and which staff are eligible to receive this funding. I am happy to elaborate in person. I am very concerned about the impact the PPP will have on staff morale. We potentially have situations where staff working directly, in-person with clients at shelters or transition houses, or in social housing are paid PPP while their colleagues working as counsellors or otherwise at home or in office and not directly and in-person with clients receive the same amount of PPP. How is this reasonable? What does it say to our staff who are by the nature of their work at substantially greater risk than those who worked at home or in office virtually?

Changes in practice/policy we'll keep

We will maintain the Crisis Line volunteer screening and trainings as noted above. We'll also maintain virtual classes for newcomers and employment services where this works better for clients, thereby freeing up more space for in-person classes for people who do not have access to computers or are not tech savvy. And it's cheaper service delivery given we do not need additional space for virtual services.

Thank you to the Board Voice members who participated in this survey!