SW Zone Meeting Notes:

April 25, 2022 Meeting to focus on Transition and Re-opening Planning & Idea-Sharing

17 in attendance

Lori chairing the meeting, Ellen regrets

* Tina, Katrina, Andrea, Alannah, Courtney, Michelle, Brittany, Jan, Sylvia, Alicia, Lee-Anne, Netti, Julie, Erin, Jen, Jocelyn, Michelle Halket

Michelle representing PHAC today:

* Sharing some information and sent it to Ellen by email as well, will send to Lori as well to share out as necessary
* ART’s were sent to all projects and are due April 30th – any questions to program consultants
* Also sent out a QA session link for new reporting tool (date is May 9th) – consult PC if you didn’t receive the invite or have questions
* No further updates on renewals at this point, but encouraging people to read the evaluation report that was sent out last summer as this may give you insight into next steps for renewals
* As we start new funding year, recipient guide is attached to the info sent to Lori – it’s good info to have (assists with management of funding, and expectations)
* Training updates: link to FASD training course with new content and another FASD One website link and a facilitator course link, Infant Mental Health resources, Dad resources
* Two additional funding opportunities – addressing racism funding and mental health in early years funding
* Sydney provides updates (follow Friday updates)
* Web Connects – still no updates (Dan and Sydney are confidant that they are getting closer to launching though and they hope to have it back up and running in the next month if all goes as planned)
* Question to Michelle re: the information session on May 9th – not all sites received the link, and Michelle will figure out the best way to share out the info and links and update on this
* Committee updates from Nettie – Maternal Mental Health event on the 27th, and the network discussion on May 4th from 2-4pm (encouraged that each project send a person or two to lend voices to the conversation).
* Where is the information for the meeting on May 4th - it is in the newsletter from last Friday and also on the Trello board.
* Nettie sharing about in person programming opening again. Did covid screening and held first group session in about two years recently. Did serve a small snack to the participants and had tables set up to provide some distance while they enjoyed a snack and chatted. Talked about pre and post natal mental health for the first in person session. Only had 4/7 interested that actually attended due to illness, etc. Nettie shared that her program works with Low German, Mennonite families and many of them have moved back to Mexico in the past few years. Rebuilding the program is a theme for Nettie’s program.
* Lee-Ann and Tina (Marymount Children’s Centre). Tina is new to the program and will be running CAPC programs😊 Some virtual, some in person programming at this point. This really depends on the program site (they move around to different community sites) and programming depends on site policies around vaccinations, etc. All plans seem to be tentative right now and constantly changing. Screening on arrival for participants at in person programming. Not generally having to turn people away as people seem to be aware of covid screening at this point and self screen out before even coming. They have not had to turn anyone away.
* Julie (CPNP – Healthy Start in Perth County) – works with Amish families. No virtual services due to participant needs. Doing home-visiting with families, lots of screening and ask them to call her the morning of the visit if they are not going to screen in. Staff are masking and asking families to do so as well if they are able. Program is also in a bit of re-building due to the focus on covid over the past few years and also lots of feelings around protocols, etc.
* Katrina (Rural Response for Healthy Children – Huron County). Still in a hybrid period (some virtual, some in person). Opening more and more in person activities. In person “Walk and Talk” program where parents can bring their children and go out and enjoy nature together with a parent support worker. It was offered throughout the pandemic but it wasn’t running due to lack of interest – people are starting to come back and register again now though. There will be screening but no masking required as it occurs outdoors. Site visits to women’s shelters and second stage housing have occurred all along, and they have had to follow site protocols such as being screened and masking, etc. Crockpot cooking program is starting up again in person; it did not run virtually as it didn’t seem to translate well to online. Eight participants came out to the first week of the program.
* Reminder from Michelle to never use the term “gift card” – use “food voucher”, “food card”, etc. Funders don’t like the idea of gift cards as it sounds like something that could be used for anything and more of a present.
* Andrea (Halton Region – CPNP Program) Strictly virtual for the past two years during covid – have not been able to offer any in person programming. In person programming is still paused. Most staff have come back from deployment in the past month or so. Rebuilding phase right now and Andrea just got approval to do more of a formal evaluation on the program’s virtual model. Active participant list is about 100 people, but only about twenty people actually attending – they want to look into why this is. Concerns that they are not meeting their most vulnerable populations virtually, haven’t needed as much interpretation, etc. as typical as those families that usually need it aren’t coming out. More participants coming earlier in their pregnancies though, which is interesting (perhaps virtual is easier to schedule around).
* Lori – was inspired by Windsor’s efforts to do some surveys and has been doing some with their programs. She was hoping to have the data compiled today, but it’s not quite ready yet. Had the option of participants have someone read the survey to people as well as sending it out. Continuing to do virtual CPNP (delivering groceries and then cook together over Zoom) once per month. Virtual programs are actually better attended than in person programs before Covid. CAPC program is doing in person groups, it’s going well but taxing on staff (planning, screening, cleaning, etc.) Looking forward to doing outdoor things. Home visiting has been mostly on hold for the past while.
* Jan (London/Middlesex Health Unit (Smart Start for Babies - CPNP) Had been on hold, but slowly resuming programming. Tried to resume in person programming late fall, and then got paused again when covid numbers started to rise again. Moved to virtual and it is not being very well attended. Pilot running for newcomer parents virtually, low attendance as opposed to typical high attendance when in person. Increase in first time, young parents which is new. Plan to start returning in person in May, but postponing a few weeks again due to current high numbers and also to start past Eid. Hope to start in person programming in June/July – fingers crossed! Feels like starting from scratch after being mostly on hold for two years. Navigating do we have different vaccination policies for different locations based on that location’s guidelines? Likely would have to.
* Erin: (Carizon – Kitchener (CAPC and CPNP)) Home Visiting service has seen an increase during covid (1-1 support), in person has been offered all along, but most haven’t wanted it so support has been being provided effectively virtually and over the phone. More in person support happening outdoors as the weather gets nicer and restrictions decrease. Group programming is still all virtual due to participant request – have tried to offer in person groups but they are not well attended or registered for.
* Jen (Hamilton Public Health – CPNP) – similar to what Andrea described for Halton. Staff are just getting back after being deployed for covid. Currently running one virtual group and hoping to expand to three soon with one being translated for Arabic speaking participants. Usually have 7 sites and are taking the opportunity to look at maybe moving sites. Were hoping to run first in person group for the summer, but likely will have to push to fall now.
* Courtney (Strive – Niagara (Welland) All virtual though the pandemic with good numbers. Are in the process of looking at opening some in person services, but will continue a hybrid model as they are reaching a lot of participants in this manner. Don’t want to rush back into a drop in program model that they had before (usually operate out of a site with a daycare so need to look at exposure levels). Major concerns from parents is school readiness lately, so they are looking at planning a small program round this that would be registered. 5-6 weeks for a small number of families (perhaps two sessions before school goes back in the fall). Evening sessions are being well attended.
* Brittany (CAPC – Niagara – Brighter Futures) – also seeing evening workshops being very well received – cooking demos during actual dinner prep in home are going well, keeping hybrid approach as well right now. Focus on getting staff back into the office, and looking at reopening plans for summer.
* Sylvia (Chatham-Kent (Building Healthy Babies -CPNP) Have managed to keep 4-5 Low German speaking people engaged virtually, have been doing virtual service mostly, rural areas don’t have great public transportation in her area, continuing to offer virtual services and looking at bringing back an in-person group, but holding off as Chatham Kent has really high covid numbers. Struggling with the childcare pieces due to protocols and who will be willing, drop in programming makes this more challenging as you never know how many people or who will be there. Possibly having some outdoor programming over the summer to get some people re-engaged.
* Jocelyn (Guelph Community Health Centre – CPNP) – it was launched virtually after taking it over from Public Health last summer. Have never run it in person. Looking to move to in person in May (most of participants speak Tigrinya) and navigating ensuring appropriate interpretation. Have secured child-care as there are other programs in the building that are already providing this service and their program can use them. No proof of vaccination required (just staff). Looking at using the “OWL” microphone (rotates to pick up who is speaking to ensure interpretation is clear but not overwhelming). Currently have 14 people or so that are attending program and more than half speak Tigrinya as their primary language.
* Ellen (Windsor Building Blocks for Better Babies – CPNP) – still virtual with monthly porch drop offs/parking lot deliveries of food. Implementing monthly park visits in May in both county and city locations. The goal is to return to in-person programming in September (with weekly city and one county locations) but will maintain hybrid model by offering one virtual program each week. Concerned about procedures for in-person programming including how to offer childcare, is pre-registration and pre-screening required, room limits, is masking required, how to offer snacks, cleaning protocols, social distancing room set-up etc. Difficult to do all these additional activities with bare-boned staffing. Also concerned about rebuilding momentum, reach and popularity that pre-pandemic program achieved.