

Appendix 1: Coronavirus (Covid-19) Impacts (Mandatory)

PCP Catchment: Lower Hume Primary Care Partnership

<p>Partner Agencies: <i>Funded agencies should include in their 2019–2020 annual report a response to the following questions about the impact of coronavirus (COVID-19)</i></p>	<ul style="list-style-type: none"> • Nexus Primary Health • Alexandra District Health • Seymour Health • Yea and District Memorial Hospital • Smiles4Miles
<p>What planned programs or activities (if any) have you stopped due to coronavirus (COVID-19)? Please explain whether you believe this is a temporary measure, or likely to be permanent?</p>	<p>Face to face meetings, events, workshops with community members and other groups and organisations have been put on hold including:</p> <ul style="list-style-type: none"> ○ RESPOND project engagement/action in Murrindindi ○ Health promotion work in both Murrindindi and Mitchell ○ RESPOND Step 2 community workshops ○ Engagement of Mitchell Shire around community workshops to explore barriers and enablers of healthy eating and physical activity for children, including key leaders and stakeholders throughout the Shire, and community, to understand their role and influence in the 'bigger picture' and plan a way forward. ○ RESPOND Monitoring of primary school's health related data collection for Grade 2, 4 and 6 postponed for 12 months ○ Direct face to face promotion of Grow Well Dindi ○ County Women’s Association (CWA) and Foodworks cooking demonstrations/lessons ○ Direct engagement with community through discussions, community Vox Pops, markets, youth groups, Community House activities etc. ○ Regular Prevention Collaborative monthly meetings • Temporary until COVID restrictions ease and community readiness for action returns <ul style="list-style-type: none"> ○ This may be long after restrictions ease due to their implications on resources, funding on groups, organisations and individuals ○ Some momentum has been lost and therefore specific re engagement strategies will be necessary ○ Alternative engagement strategies have been sought as per below <p>Smiles 4 Miles program implementation and award process has been impacted as many kinder’s, long daycare and family day care educators have had closures, as well as reduced or no children and staff attending their service.</p> <ul style="list-style-type: none"> • Organisations have had competing priorities with extra work to undertake to ensure their settings could continue to run and are COVID-19 safe for staff, children and families. • Temporary until COVID-19 restrictions ease and we return to as close to normal as possible. <ul style="list-style-type: none"> ○ This however will impact on the Smiles 4 Miles 2020 award rates and possibly 2021 registrations rates.
<p>What planned programs or activities (if any) have you changed due coronavirus (COVID-19)?</p>	<ul style="list-style-type: none"> • Monthly meetings have become more regular, particularly weekly online ‘check-in’ meetings for the first few months, less frequent now, as well as regular monthly online meetings

	<ul style="list-style-type: none"> ● Focused more on communication and awareness building for the RESPOND project (Grow Well Dindi) rather than community actions <ul style="list-style-type: none"> ○ Aligned communication with the current environment e.g. restrictions affecting the way people access and eat food, as well as exercise they can undertake. ● Methods of engagement focus on remaining at a physical distance (virtual) <ul style="list-style-type: none"> ○ i.e. creating interest in the new name and logo (Grow Well Dindi) have been almost entirely through social, other media and Mailchimp ○ Extending out Smiles 4 Miles award criteria and celebrating the small milestones via LHPCP social media and newsletters.
<p>What additional activities (if any) have you undertaken due to coronavirus (COVID-19)?</p>	<ul style="list-style-type: none"> ● Planned and commenced implementation and evaluation on an internal health promotion initiative at Nexus ● Increased internal organizational focus on healthy eating, physical activity for staff via newsletters/Facebook etc. ● Internal Policy, processes, and training improvements to increase accessibility and relationships with diverse groups, to work on equity and co-design healthy eating/physical activity specific actions with them in future ● Health promotion activity in Mitchell (i.e. focus on food security) in lieu of RESPOND roll out ● LHPCP started a weekly COVID-19 newsletter, which has now become a monthly general LHPCP newsletter that incorporates prevention work, information and resources. ● Seymour Health continued with their healthy together Seymour work where possible. ● More regular engagement with community, organisations and Smiles 4 Miles settings to assess progress and any further support required or to see what needed to be put on hold for now or reassessed to include COVID-19 impacts. ● Increased: <ul style="list-style-type: none"> ○ Meetings and networking online rather than face to face. ○ Social media and other media interaction with the community i.e. local papers, local ○ Participation in webinars and online learning
<p>Have you received requests from partner organisations to respond to coronavirus (COVID-19) in particular ways? If so, please tell us about them.</p>	<ul style="list-style-type: none"> ● LHPCP received feedback from our Leadership team that they required concise and up to date best practice information on COVID-19 and how it impacts their organisations and our priority area collaborative work. This is why the previous weekly COVID-19 newsletter was developed. ● More requests to join in on online learning and information sharing i.e. workshops, webinars etc. ● Increased information/invitations to attend/awareness raising from organisations about the direct impact of Covid-19 on specific groups in the community i.e. refugees and asylum seekers, Aboriginal people, the LGBTIQ+ community etc. ● With reduced ability to engage physically with community on Respond, Prevention workers were able to assist with the increased internal need to respond to health and wellbeing of staff in the working from home environment, supporting initiatives internally on healthy eating and physical activity. As well working on internal policies/processes to build accessibility to services for diverse groups (i.e.: LGBTIQ+ and Aboriginal Torres Strait Islander), building stronger platforms for relationships and future work
<p>Has coronavirus (COVID-19) changed the way you</p>	<ul style="list-style-type: none"> ● More flexible and trying to support partner organisations, while still promoting the importance of progressing collaborative work where

<p>work with partners? If so, how?</p>	<p>possible, as well as what needs to be put on hold or can be incorporated into the COVID-19 work that is required of partner organisations.</p> <ul style="list-style-type: none"> • Less ability to build a team environment <ul style="list-style-type: none"> ○ Unable to attend work related activities together ○ Interaction is not face to face ○ Using technology much more frequently than before ○ More planned and time allocated interaction
<p>Does your organisation have plans related to coronavirus (COVID-19) response and recovery over the next six months?</p>	<ul style="list-style-type: none"> • Murrindindi and Mitchell Shire's are looking at COVID-19 recovery plans and the prevention collaborative will assess how these fit with the 2020-2021 Prevention Plan during the review process. • LHPCP and Prevention workers are a part of the Goulburn Health and Wellbeing Partnership and collaborative work, including food security. • The prevention collaborative is looking at what work can be done in the healthy eating and physical activity over the next 12 months, in line with the current COVID-19 environment / recovery needs, particularly in Step 1 Grow Well Dindi communities, as the RESPOND project step 2 has been postponed until 2022.
<p>Is there anything else you wish to tell us about the impact of coronavirus (COVID-19) on your agency?</p>	<ul style="list-style-type: none"> • Most prevention and Smiles 4 Miles coordinators have been working from home due to COVID-19 restrictions, which can impact on the cohesion and collaborative process of our work. • It has created added extra workload in regard to keeping organisations, settings and community engaged with collaborative work. • Working remotely has highlighted the importance of working as a team and the importance of spontaneous face to face interaction, establishing relationships that exist largely because of 'human' contact and personal exchange.