



Attended by over 15 members, the forum provided an opportunity for members to share their experience and learnings on dealing with Coronavirus.

The Forum kicked-off with a discussion, led by Wendy Price, co-ordinator for the Q6 Community Partnership in Dartmouth and Alisa Kefford from Dartmouth Community Chest who shared their experience of converting a weekly resident-led community hub into a resident-led seven day a week food distribution hub. The results speak for themselves – between 23 March and 6 May, the hub delivered a staggering 5000 hot meals and 1000 emergency parcels for free.

The feedback from attendees also demonstrated the value of Wendy and Alisa sharing their experience:

“
Enjoyed the Dartmouth story v. much.” ...Me too, fab meeting thank you really inspiring.

“
Inspiring work! Thanks for a great call!

“
It has been great hearing such positive experiences in this time.

NNHSA will be writing-up this experience as a case study. This will be available on our website by the end of May.

Key learnings from Wendy and Alisa's experience and the discussion included:

- **Connected communities** have proven to be **more resilient** to the impact of COVID-19; if you don't have a strong community now, build one, supported by people with community development skills
 - COVID-19 has **broken down barriers** between providers and increased goodwill. This needs to be built on and supported by local politicians
 - The **community can step in** where some statutory services are not meeting the needs of vulnerable people, for example as a result of furloughing of staff
 - Having a **physical space can add significantly to community-led support** – both for volunteers and users of services. It also provides a platform for local people to engage with local services through drop ins etc
 - **Physical distancing** e.g. in food preparation has been a challenge but protocols have been developed and for the most part this is possible
 - **Availability, responsiveness** (to people and not responsible for people) and **being yourself** (emotionally present) are key to successful community support initiatives
 - **On and off-line communication** is important to promoting services, as is word of mouth
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Summary of 27 May 2020 Forum

Discussion points included:

- Non-COVID-19 patients are not presenting at surgeries or A&E
- Vulnerable people don't fall through the net when communities are connected
- Patient Participation Groups are proving very valuable
- Housing associations are well placed to provide additional support

Potential solutions included:

- Better define the frequency and impact of quality contact to provide a benchmark for skills development
- Learn from the success of the Mutual Aid Societies
- Generate/reinforce evidence that community and network support is what helps people to stay/keep well
- Future peer support that taps into current empathy with social isolation
- Community engagement needs to be parallel funded process

