CONFRONTING THE CRISIS

Helping Bermuda’s most vulnerable manage through Covid-19

The Third Sector Coordinated Crisis Response Effort (CCRE) worked directly with Bermuda’s Emergency Measures Organisation to align the needs of essential service providers with resources during the Covid-19 pandemic. The CCRE thanks donors for more than $1.5 million given to the Emergency Fund.

Please support the Bermuda Emergency Fund at www.bcf.bm
Learn about other important nonprofit programmes at www.givebermuda.org
Introduction

Bermuda’s response to the Covid-19 pandemic has been a testament to the community’s generosity and resilience. Businesses and people gave time, goods, services and money to help members of the community who have little or less. Some gave directly to specific nonprofit organisations and some gave as a collective via the Bermuda Emergency Fund. The international business community, through their respective in-house charitable committees and through their larger membership bodies, gave hundreds of thousands of dollars to purchase PPE and ventilators for the hospital and to provide even more support to nonprofits with which they have had existing relationships through past social investments. The Government has provided assistance to the thousands of people who have been laid off as a result of the pandemic. The Bermuda Health Council ensured that even during a pandemic the standards and regulations of key contributors were in place and served as a silent backbone to a diverse set of efforts during the crisis.

In addition, we have heard so many stories of individuals helping individuals—giving money and support; and employers continuing to pay staff even when they can’t work, because they know they are otherwise putting people into profound difficulty.

As part of celebrating our generosity as a community, this report highlights the work of the Third Sector Coordinated Crisis Response Effort (CCRE), a rapid-response collaboration between funders and nonprofits aimed at ensuring resources were coordinated to meet the greatest needs during Phase I of the Disaster Relief Shelter-in-Place protocol.

A Coordinated Third Sector effort

In early March 2020, it was becoming clear that when the pandemic reached Bermuda there was going to be a serious need for Third Sector nonprofit services. As charitable foundations with expertise and leadership in grantmaking to nonprofits, the Bank of Bermuda Foundation (Allison Towlson and Vivien Carter) and Bermuda’s Community Foundation (Dr. Myra Virgil) had been independently assessing how to mitigate the massive burden that was about to be placed on so many in Bermuda’s small community, from nonprofit service providers to the communities that they serve. As Foundation leaders, they agreed that a concerted effort to ensure the efficient, effective deployment of resources would be needed.

Other Third Sector stakeholders had also been raising the alarm: Dr. Claudette Fleming of Age Concern, as advocate and supporter for the senior citizens’ population, realised this pandemic might prove more than could be handled without help.

The group reached out to others with the expertise and resources to assist with the task ahead, including: the Bermuda Health Council (Dr. Ricky Brathwaite and Ja-Mae Smith), the Inter-Agency Committee for Children and Families (Nicola Paugh) and individuals Danielle Riviere (former Executive Director of the former Centre on Philanthropy) and Tina Nash (former Executive Director of Raleigh International Bermuda and newly appointed Executive Director of WindReach Bermuda), both of whom were contracted to provide administrative support to the team.

The CCRE emerged as the way to organise their efforts.

At the same time the Bermuda Government was assessing community needs for the weeks ahead. As a result, CCRE representatives Myra Virgil and Vivien Carter became members of an EMO sub-group, chaired by National Disaster Coordinator and Disaster Reduction and Recovery Management team member Steve Cosham. Having representatives of the Third Sector was critical for the CCRE, enabling it to align efforts with the national priorities and plans. Involving the Third Sector at this level of a national response was a welcome first for Bermuda, and to a degree, an acknowledgement of the crucial contribution made by the nonprofit community.
Additional members of some of the representative organisations provided critical administrative, communications and coordination support, namely: Kim Pratt, Trust Administrator for Bank of Bermuda Foundation, Amanda Outerbridge, Michelle Grant and Sarah Cooke of the Bermuda (Community) Foundation, Davina Dickinson (XL Foundation) and BHeC’s Elizabeth Kast. The Government of Bermuda’s Department of Public Works provided wonderful support to the team, assisting with deliveries, for example. Local vendors also provided pro bono or at-cost services. The CCRE publications on each service area recognise this support.

A collective effort to manage the deployment of essential services

The island has many helping services, charities and organisations. The value of the CCRE was that it brought collective efforts and energies together to support the entire Third Sector. The organisers recognised that coordinated efforts were going to be far more effective than everyone working in silos. In fact, the CCRE representatives met three times a week for nine weeks, as a whole group, in addition to separate weekly grants assessment and deployment sessions and follow-up sub-group meetings.

The sole intent of the CCRE was to serve as connector; facilitating support and galvanising resources. It did not aim to replace the essential and direct service and programme delivery of local nonprofits. The main objective was to ensure that those entities servicing the essential needs of the people most at risk could continue to do so. As a country, the CCRE was focused on making sure that those who had become vulnerable or increasingly marginalised had access to services. Collective and coordinated efforts are critical but traditionally under-utilised vehicles of action.

The two Foundations, both of which have trained grantmakers on staff, were well placed to assist other donors of all types make informed philanthropic decisions. Many companies and individuals wanted to give but were unsure of the most urgent requirements. The central collaborative effort helped to direct their resources towards the most pressing needs. The approach increased the overall effectiveness of the effort.

In practice, how does a collective effort work?

To enable nonprofits to continue their critical services, CCRE conducted a needs assessment, using an online survey developed in collaboration with the Bermuda Health Council. Approximately 60 nonprofits, churches and other organisations providing essential services were contacted and asked what they would need in the immediate to short term in order to remain open, continue providing services and potentially expand to meet increased needs. A second survey was distributed to known corporate donors and other individuals to solicit offers of time, goods and services to meet the needs (cash donations were managed separately by the BCF through the Bermuda Emergency Fund). The next step for the CCRE was to use the collected information to match identified needs with available resources. The hope was that this approach would decrease the likelihood of gaps in service.

How the grantmaking process worked

Requests for assistance were received initially using the needs survey tool and then assessed to:

1. Ensure the applicants met the criteria for national pandemic needs or that the emergency request would go to a vulnerable population of the community
2. Classify the area they would address
3. Match against available funds.

Assessments for the deployment of funds were carried out on Sundays, before the beginning of each work week, by Myra Virgil and Vivien Carter, heads of grantmaking for their respective foundations. Further into the pandemic and once a core set of essential service providers emerged, weekly tracking reports and top-up funding requests reverted to the BCF.
Challenges to achieving best service delivery during the pandemic

It was anticipated that managing through the pandemic would be a challenging economic situation for the whole of Bermuda’s Third Sector. The CCRE recognised that at a time when Bermuda’s Third Sector services are most needed, nonprofits would be at their most vulnerable and in many cases fighting for survival. Some employees were unable to work. Some nonprofits had no volunteers. The fragile funding bases were hit and/or fees for services had stopped. The CCRE wanted to make sure that the wider community understood that the sector needed to be sustained for the future of the community and not just through the immediate crisis.

One of the specific challenges was that a significant number of volunteers in the community as a whole were senior citizens, and they were now vulnerable to the coronavirus and needed to stay at home. This reality created an immediate shortage of volunteers. Nonprofits operate on a shoestring budget; volunteers can be the lifeblood of their work and so this became a serious issue for some. Feeding programmes were particularly challenged to provide food and deliver meals as a result. Organisations such as counselling and addiction support services had to transition from walk-in facilities to virtual online models. However, not all are equipped to do so, which led to cuts in service.

Overall, the aforementioned grants assessment team monitored the needs and the ability of service providers to meet them. Having this leadership working in concert with the EMO enabled a direct link between governmental and non-governmental services and private, community-based funding, decreasing the likelihood of gaps in service and increasing the speed at which funds could be deployed.

Emergent Underlying Concerns and Tension

- Capacity of nonprofit organisations to stay open and manage current services with limited staff and possibly fewer volunteers
- Volunteer pool capacity and lock-down protocols—some service providers needed a defined volunteer pool that are not civilians or not high risk (susceptible to Covid-19)
- Serving the most marginalised (homeless, people with addictions) and managing in crisis times with limited medically-trained resources, due to higher prioritised health service delivery areas
- Knock-on unemployment issues if funding for charitable sector as a whole is diverted to essential services.

How did the community get involved?

Many businesses, international and local, as well as individuals, made early offers of funding, supplies and food. For organisations or individuals able to contribute gifts in kind, supplies or other needed items, the CCRE developed and distributed a giving survey to provide clarity around resources available. The outpouring of support and requests to assist the community was amazing.

The CCRE developed surveys to gather information on nonprofit service providers’ needs and offers of time, goods and services. The BCF established the Bermuda Emergency Fund for organisations and individuals who wanted to contribute financially to assist with the crisis response. A summary report on the Emergency Fund is annexed.

CCRE Products & Outcomes

The first phase of the CCRE’s work involved reaching out to a set of nonprofits to assess who was open and operating and who had shut their doors, like so many businesses in other sectors. Some of these nonprofits may not have been in the frontline of providing essential services at the time. Some needed to be open but needed support—and not necessarily financial support but volunteers.

CCRE gathered information about their needs and assessed the impact of the crisis and the community lockdown. Following from participation in EMO meetings, a clearer blueprint for managing a pandemic and the required services emerged as did the way the CCRE would manage the work.
In the final phase of CCRE’s work, another survey was conducted to assess the impact of the pandemic on the sector. In the end, nine core products were developed through CCRE and many more were independently produced by the lead CREE agencies:

1. **A comprehensive needs assessment survey** was developed to capture the specific needs of non-profits and churches providing programmes and services. BHC created a survey tool with input from the collaborative group.

2. **Several nonprofit service provider short and long lists.** Led by the IAC, CCRE identified 60 non-profits providing essential services to initially report on urgent needs and a subset of 17-20 registered charities that delivered essential services prior to lockdown protocols.

3. **Community Contributors survey** was developed: one for business and groups and another for individuals completed, to capture offerings of community resources. Resources were defined as gifts in kind as well as transportation, volunteers, supplies, in addition to cash gifts.

4. **An Essential Services Contacts Listing**

5. **A Supported Food Security and Meal Programme Services listing**

6. **Coordination processes to collate survey reports, match resources to needs in principle and then coordinate the delivery of resources to community requests.**

   a) Via the IAC, CCRE reached out to 288 registered charities; 188 agencies that run programmes or were staffed, pre Covid-19, were targeted to participate
   b) 115 survey responses were received as at April 17, 2020
   Key elements of this report are annexed to this report. To receive a full copy of the report contact the IAC at: nicola@iac.bm.

8. **EMO reports.** The two EMO-sub-committee members from the foundations prepared and presented weekly reports to the EMO, focused on core essential services delivered by the nonprofit sector during the pandemic and private funds donated by the community to support the delivery of these services.

9. **Community messages.** Using designs partly developed by One Communication and information from weekly EMO reports, community messages on the work were posted to Facebook on a page designed for this purpose.

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**New Products independently designed or refined by CCRE Leaders as organisational responses to the pandemic**

- **Age Concern Bermuda** refined its **client tracking and request process**, sharing its findings and results, which showed increased requests for hardship supports. It extended its partnerships to Project Action and the Bermuda Police Service, by coordinating the deployment of this support to seniors in need. Age Concern engaged senior sector service providers to assess and refer clients to the appropriate body within the network; and to report up to the EMO through the CCRE any issues that needed to be addressed at a higher systemic level.

- **Bank of Bermuda Foundation**, having pivoted from its traditional grant application process to a partner **engagement strategy**, whereby the Director of Programmes reached out to essential service providers to assess and refer clients to the appropriate body within the network; and to report up to the EMO through the CCRE any issues that needed to be addressed at a higher systemic level.

- **Bermuda Community Foundation** re-engineered its **online gift registration process** to enable faster public acknowledgement of contributors. It also designed **new gift acknowledgement, payment processes, grant confirmation and activity reporting forms**, the latter of which reduced standard grant reporting requirements to ensure the swifter deployment of funds. The BCF produced situation updates throughout the pandemic that can be found at www.bcf.bm.

- **Bermuda Health Council**, which also has responsibility for the oversight and licensing of the
residential care homes for seniors, worked with local developers to create a digitised symptom tracker that is being used as a lead indicator for economic reopening, implemented standards of insurance coverage for telemedicine, thus changing how care is delivered during Covid-19; developed guidelines for operation of medical practices and other health related businesses during Covid-19; collaborated on Covid-19 testing protocols and funding; and has been providing necessary assistance to many individuals who have been unemployed and uninsured as a result of the pandemic.

- **Inter-Agency Committee (IAC)** hosted 12 Covid-19 response related webinars and circulated a weekly resource listing, compiling local and international resources, webinars and training opportunities relevant for human service and nonprofit Covid-19 response. IAC also released an Opinion Editorial highlighting the role the Third Sector has played in rising to the challenges presented by the pandemic. To further support nonprofits through this difficult period, IAC has collaborated with Ignite to provide a four-week intensive training programme aimed at enabling mindsets, providing best-practice models and encouraging new behaviours necessary for nonprofit leaders in the current environment.

- **Bermuda Psychological Association** developed call scripts for hotline service providers, a template for managing a hotline rota and help line log sheets. Dr. Alison Daniels, head of the BPA, prepared Mental Health Tips for the Community (list of hotline service providers, on-call spiritual leaders and the tip sheet are annexed).

- **IAC also collaborated with Age Concern** to create a Third Sector Resource Guide, providing a comprehensive list of international best practices around Covid-19 related policies and processes.

- **IAC and Age Concern Bermuda** hosted two Impact of Covid-19 forums to share the survey results. Recovery discussions continue to take place with the broader nonprofit sector.

**What We Learned: Perspectives from CCRE Group Members**

As learning organisations, it was always important to CCRE members to reflect upon their experiences, especially one as profound as a pandemic. When asked about their take-aways on working as a coordinated group, in keeping with a collective impact approach, the group members offered the following:

1. **Before the onset of the crisis response and ideally, before the work begins, key discussions with collaborating partners must be undertaken, which should include:**
   a. Getting clarity on the role and value each team member will bring to the effort
   b. Deciding who will speak to which issues, who will respond to which queries from the public, from the media and from sector stakeholders
   c. Agreeing who can use the materials that are jointly developed or developed by one entity during the work together. Agree who “owns” a work product once the project is finished

2.) **Ensure that nonprofit service providers are remunerated for their work**

3. **Recognize that crisis response work will involve increased demand on some participants, especially those involved in group coordinating work while undertaking their full-time day jobs.**

4. **Meeting the intense productivity demands of crisis at this level, while unsustainable in the long term, proved critical for most of the team members during the height of the shelter-in-place order. Longer term sustainability plans, however, must now emerge.**

Thank you to all the amazing volunteers and individuals who helped during this extraordinary time.
ANNEXES

I. Essential Services contact list sample. Go to www.gov.bm to see full list

EMERGENCY FOOD SERVICES (as of 22 Apr 20)

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Supported Food Security and Meal Programme Services
II. Impact Survey Deck: excerpts

Executive Summary
Non-Profit COVID 19 Impact Survey, April 2020

TOTAL RESPONDENTS 115

- Education: 25
- Relief of Those In Need: 22
- Sports: 19
- Health: 12
- Arts & Culture: 11
- Environmental: 7
- Citizenship: 6
- Human Rights: 4
- Recreational: 4
- Poverty Relief: 2
- Animal Welfare: 2
- Armed Forces: 1
- Other: 21

Received COVID-19 Response Funding

Range of COVID-19 Response Funding per non-profit

Operations Open During COVID-19:
85 (74% of Total Responses)

Operations Closed During COVID-19:
30 (26% of Total Responses)

Staffing Metrics

Average Volunteering Hours Pre COVID-19: 104.5 Monthly Hours

Changes to Monthly Volunteering Hours:
- 5% Increase
- 60% Decrease
- 36% No Change

Modification to Existing Services

Offering online / tele-service: 13
Increasing services: 20
Decreasing services: 18
Offering no services: 25
No change in Services: 32
Other (please specify): 1

NUM OF AGENCIES BY NUMBER OF OPERATING MONTHS LEFT IF NO ADDITIONAL FUNDING RECEIVED

MONTHS REMAINING

- 0
- 1
- 2
- 3
- 4
- 5
- 6
- 7
- 8
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THIRD SECTOR
Coordinated Crisis Response Effort
### Executive Summary
Non-Profit COVID-19 Impact Survey, April 2020

#### TOTAL RESPONDENTS 115

4 Specified Category Breakdowns

<table>
<thead>
<tr>
<th>Category</th>
<th>Average Operational Months Without Funding</th>
<th>Employed Staff Pre COVID-19</th>
<th>Staffing Metrics</th>
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<td>8.6 Months</td>
<td>218</td>
<td>49 Employees</td>
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<td>Relief of Those in Need</td>
<td>6.6 Months</td>
<td>136</td>
<td>20 Employees</td>
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<td>Arts &amp; Culture</td>
<td>7.5 Months</td>
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<td>8 Employees</td>
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<td>Other</td>
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<td>42 Employees</td>
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#### Change to Number of Clients Served Since COVID-19

- Increase: 12%
- Decrease: 16%
- No change: 30%
- N/A Do not have clients: 27%

#### Job creation or opportunities during this time

- Yes: 37%
- No: 63%

- Additional IT staff required
- Remote services
- Delivery Persons needed
- Meal preparation staff needed
- Social Workers are needed
- More staff for research
- Course Instructors needed
- Temporary Admin roles
III. 543-1111 Mental Wellbeing Hotline Supporters & On-call Spiritual Advisors

**Psychologists**
Adriene Berkeley  
Brian Rosorea  
Bruce Donaldson  
Carla Bean  
Claudia Cobon (Solstice)  
Eloise Pitts Crick (Solstice)  
Gemma Harris (Solstice)  
Emcee Chekwas  
Laura Henagulph  
Laura Robinson  
Mellisa Gibbons-Tankard  
Alison Daniels

**Triage**
Amirah Abdullah  
Angria Bassett  
Charmaine Richardson  
Darren Francis  
David Parker  
Erinn Hayward  
Jana Outerbridge  
Joanne Dean  
Julita Peniston  
Kamlam Singh-Tacklin  
Kelly Madeiros  
Robert King  
Sherry Walker  
Simone Romane  
Tanya Thomas  
Miriam Shaya-King  
Latisha Lister-Burgess (EAP)  
Aria Bean (EAP)  
Raquel Ingemann (EAP)  
Lauren Trott (EAP)  
Nina Wilson (EAP)  
Rishee Paschal (Family Centre)

**On-Call Spiritual Leaders (Coordinated by Pastor Leroy Bean, Ministry of National Security)**

Apostle Jimmie Denwiddie  
Bishop Calvin Armstrong  
Bishop Lloyd Duncan  
Bishop Lynn Landy  
Bishop Neville Smith  
Bishop Nicholas Dill  
Bishop Steven Jones  
Bishop Vernon Lambe  
Bishop Wes Spiewak  
Dr. Blanche Burchall  
Dr. Carlton Crockwell  
Dr. Deborah Evans  
Dr. Henry Armstrong  
Dr. Larry Dixon  
Dr. Maybelle Denwiddie  
Dr. Milton Burgess  
Dr. Patricia Tacklyn  
Pastor Caria Bean, Psy.D.  
Pastor Clark Minors  
Pastor Cyril Millett  
Pastor Damon Hendrickson  
Pastor Daron Lowe  
Pastor David Lambe  
Pastor David Steede  
Pastor Dean Smith  
Pastor DeJaun Tull  
Pastor Gladstone Thompson  
Pastor Harold Lambe  
Pastor Hector Quinones  
Pastor Kenneth Manders  
Pastor Kimmie Mello  
Pastor LaQuita Landy  
Pastor Leonard Santucci  
Pastor Leroy Bean  
Pastor Lorne Bean  
Pastor Michelle Hill  
Pastor Rudolph Ebbin  
Pastor Shelley Steede  
Pastor Ulric Hetsberger  
Pastor Yvonne Ramsay

**IV. Mental Health Tips: Dr. Alison Daniels**

There is no manual or playbook that can tell us what is going to happen during this Covid-19 pandemic; we are all dealing with something that we have never experienced before. As the cases worldwide increase and a vaccine is many months away you may find yourself feeling anxious, scared, angry, not wanting to leave the house or finding it difficult to relax. These are all understandable reactions to a stressful event.

It is important to note that we all react differently to stressful situations and it can present itself in different ways. As we are now confined without our typical coping strategies you may see a change in your eating or sleeping patterns, feel more irritable, sensitive or become critical of those around you. Find yourself worrying more about your health and the health of those you love. You may see a worsening of your chronic disease or mental health conditions. You could also find it difficult to concentrate or experience fatigue, headaches, shoulder/neck/back or stomach pains, to name a few.
Here are a few steps to help you look after your physical and emotional wellbeing:

- Try focusing on the things that are in your control: Although most of us are not going to work, getting up and getting out of your pyjamas mentally prepares you for the day ahead. Scheduling the things you would like to achieve can help to give you a sense of purpose to your day.
- Maintain a healthy lifestyle: Try to get at least seven hours of sleep a night, eat a balanced diet, do some form of exercise getting outside in the sun if at all possible or doing activities inside your home. Reduce your caffeine intake and try to avoid using alcohol, tobacco or other drugs to cope with stress.
- Stay connected with friends and family: Social support can help you get through stressful times. Although we are socially distancing, we can find innovative ways to connect with those we love through video calling apps (Zoom/ WhatsApp, FaceTime or similar applications). Connections can also be maintained through email or telephone calls. This is a time to share your concerns or worries with those you love or try to focus on what you are grateful and thankful for.
- Talk about other things other than the virus: Hearing and reading about the pandemic repeatedly, including on social media, can be upsetting. Try taking breaks and ensure that you are getting your news from reputable local sources like www.gov.bm or the Premier’s press conference (which can be found on television, online or on the radio), or from Centers for Disease Control and Prevention (CDC) and the World Health Organisation (WHO). There is much “fake news” out there which can lead to unnecessary worry and anxiety, so do your best to limit your exposure.

V. Ways for Parents to Support Children

Children may have a different response to this Covid-19 pandemic.

- Be vigilant to any changes in your child’s behaviour—they may be more clingy, anxious, withdrawn, angry, complaining of butterflies in their stomach, or may return to bed wetting.
- Give them the opportunity to talk about their feelings. It is important to be responsive, listen to what your child is concerned about and reassure them. Talk about the pandemic in age-appropriate language that is developmentally appropriate and provide extra love and attention during this trying time.
- Maintain order in their lives as much as possible. All children find routines reassuring, and this will also help when it is time to transition back to a “normal schedule.” It is important to establish time for education and just as important to schedule time for play and relaxation.
- Stay connected with friends and family. Children are also missing their loved ones. Try to build in time for virtual interactions to help them stay connected. This can also provide reassurance that their loved ones are okay.
- Limit their exposure to the news. Constantly hearing and reading about Covid-19 can have a negative impact on your child. Do your best to monitor their exposure. If you can, limit it to times when they are with you. This will give you an opportunity to help explain what they are hearing and you will be able to answer any questions they may have.
- Throughout the pandemic acknowledge your feelings—whatever you are feeling right now is ok. But if you feel concerned that the stress and anxiety of the pandemic is having an impact of your daily life reach out for support for yourself or your children.
- There are several helplines set up to assist: the Emotional Wellbeing Hotline (543-1111), which is available seven days a week from 9am–9pm; and Child and Adolescent Services Covid-19 crisis line (249-3370), which is available Monday to Friday 9am–5pm. Both lines are staffed by qualified caring professionals there to support you and your child by providing assistance or a listening ear.
- Reaching out for support shows strength and coping with stress will help keep you safe and healthy.
VI. Bermuda Emergency Fund at BCF Summary Report (May 21, 2020 end of Phase I Shelter-In-Place)

The Emergency Fund made two types of grants: 1) core essential service providers; 2) nonprofit organisations requesting emergency support to maintain or transition services to existing clients. Guided by pandemic protocols in conjunction with the EMO, core essential service providers were identified and funded to fill gaps in public services by location, method and time of day. These organisations were already positioned to deliver the identified critical services and had demonstrated capacity and/or willingness to maintain, ramp up or transition to service a larger segment of the public. Another set of grants went to nonprofits that needed emergency support to respond or shift services to existing clients to maintain services. These tended to be one-off disbursements.

Total Emergency Funds Raised (excluding offline pledges) $1.90 m
Total Deployed / Earmarked (as at 24 May 2020 – 9 weeks) $1.56 m

Allocations by Essential Service Area

<table>
<thead>
<tr>
<th>Service Area</th>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Seniors</td>
<td>Services and Supports / Nursing Homes</td>
<td>$491,300</td>
</tr>
<tr>
<td>Food</td>
<td>Provision of food/meals/vouchers islandwide</td>
<td>$518,700</td>
</tr>
<tr>
<td>Disaster Relief</td>
<td>Includes transport for testing by ambulance</td>
<td>$202,600</td>
</tr>
<tr>
<td>Mental Health Supports</td>
<td>Includes Substance Use / Abuse</td>
<td>$138,400</td>
</tr>
<tr>
<td>Safety</td>
<td>Domestic violence and counselling</td>
<td>$75,000</td>
</tr>
<tr>
<td>Medicine/Health Supp.</td>
<td>Includes subsidised medication allocation</td>
<td>$66,000</td>
</tr>
<tr>
<td>Disaster Recovery</td>
<td>Includes post-emergency mobilisation support</td>
<td>$27,500</td>
</tr>
<tr>
<td>Homeless</td>
<td>Unsheltered population (food, volunteer co-ord.)</td>
<td>$26,000</td>
</tr>
</tbody>
</table>

Third sector nonprofits and coordinating partners report that they:
- Served approx. 10,000 meals or food security equivalents per week, as groceries or vouchers
- Ensured the safety of 16 women and their children fleeing domestic violence
- Made 8,000-plus calls to quarantined residents; transported individuals for testing
- Ensured wifi/technology for more than 300 residents in senior care homes and ensured staff and volunteers had access to PPE
- Provided housing support to more than 30 unsheltered people
- Responded to over 200 calls from people in distress
- Provided mental health supports and services to people with special needs
- Distributed medication and equipment to people with inadequate health coverage

Core essential service provider grant recipients

<table>
<thead>
<tr>
<th>Age Concern Bermuda</th>
<th>Eliza Doolittle Society</th>
</tr>
</thead>
<tbody>
<tr>
<td>Anglican Cathedral</td>
<td>First Baptist Church</td>
</tr>
<tr>
<td>/ Cathedral of the</td>
<td>Focus Counseling Services</td>
</tr>
<tr>
<td>Most Holy Trinity</td>
<td>Open Airways</td>
</tr>
<tr>
<td>Bermuda Red Cross</td>
<td>Open Your Heart Foundation</td>
</tr>
<tr>
<td>Bermuda Diabetes Association</td>
<td>Project Action</td>
</tr>
<tr>
<td>Bermuda Psychology Association / Mental Health Hotline</td>
<td>St. John Ambulance Bermuda</td>
</tr>
<tr>
<td>Centre Against Abuse</td>
<td>Salvation Army Bermuda</td>
</tr>
<tr>
<td>Christ Church Warwick</td>
<td>Seventh-Day Adventist Church — Adventist Community Services</td>
</tr>
<tr>
<td>Coalition for Protection of Children</td>
<td></td>
</tr>
</tbody>
</table>

Funds granted to maintain or provide an emergency response to existing clientele

| A New Life | The Family Centre |
| Action on Alzheimer’s | Gina Spence Productions |
| Answering the Cry of the Poor | Network of Residential Care Homes for Seniors (A) |
| Association of Filipinos in Bermuda | Pathways Bermuda |
| Bermuda Housing Trust | Solstice |
| Bermuda Islamic Cultural Centre—Islamic Food Bank | Teen Haven |
| Butterfield / Loren Feeding Programme | Tomorrow’s Voices |
| Covid-19 Homeless Shelter at CedarBridge | Vision Bermuda |
### VII. Contributors to the Covid-19 Bermuda Emergency Fund (as at March 30, 2020)

#### $100,000 and over
- Anonymous Donors
- Allan & Gill Gray Philanthropy Limited
- Fidelis Insurance Bermuda Ltd.
- Monument Re
- Pacific Life Re
- PartnerRe Ltd.

#### $50,000 and over
- AXIS Specialty Bermuda
- Caitlin & Ross Curtis
- Oil Management Services Ltd.
- One Communications Ltd.
- PricewaterhouseCoopers
- Third Point Reinsurance Ltd.

#### $25,000 and over
- Aeon Re
- AIG Bermuda
- Aon Group (Bermuda)
- Argon Foundation
- Aspen Re / BNTB
- Athene
- The Atlantic Philanthropies
- Bank of Bermuda Foundation

#### $10,000 and over
- Allianz Risk Transfer
- Aon Group (Bermuda)—staff contributions
- Bermuda Brokers Limited
- Jenn & Nick Campbell
- Robert Cawthorn
- Charles & Lesley Marshall Family
- Colonial Group International
- Barbara Conyers in memory of Stronach O’Neill
- F&G Re Ltd
- Chris & Alyson Grasso

#### $5,000 and over
- Ascot Bermuda Limited
- Atlantic Philanthropies Staff Designated Gift Programme
- Butterfield Bank (in kind)
- Chubb Charitable Foundation – Bermuda
- Sue & George Cubbon
- Garden Club of Bermuda
- Freemasons’ Fund for Bermuda
- KPMG
- Mike & Allie Krefta
- Emily Leitch

#### $1,000 and over
- Hannover Re (Bermuda) Ltd.
- Markel Bermuda Limited
- Ryan & Julia Mather
- Brian & Karen McNamara
- Mark & Tina Nash
- Brian O’Hara
- Sagicor Re Bermuda Ltd.
- Schroders (Bermuda) Limited
- Validus Charity & Giving Committee
- Anonymous Donors

#### $5,000 and over
- Jan & James MacDonald
- MFUG in Services Limited
- Mat Twilley
- Hinal & Sonal Patel
- Britt & Jonathan Reiss
- Jeremy Robertson
- Sun Life Financial
- William Wharton
- Arthur & Sophie Wightman
- Matthew Wilken
- Willis Towers Watson
- Zurich Bermuda
To view updates on how the contributors to the Bermuda Emergency Fund are being deployed, go to www.bcf.bm
Caring for Seniors
How CCRE helps Bermuda’s elderly and those who care for them
The Third Sector Coordinated Crisis Effort is working hard for seniors living independently and seniors living in Bermuda’s 19 residential care homes, which serve 317 residents. Our group has:

- Identified and extended urgent meal services for residents at the Mavis Smith Williams Nursing Home to April month-end
- Confirmed and covered costs for professional cleaning to Environmental Protection Standards
- Coordinated purchase of PPE supplies for Third Sector entities, including care homes
- Arranged subsidised access to food and incontinence supplies to help Senior Homes maintain a three-month stock
- Supported IT, telecoms and WiFi Internet infrastructure to execute telemedicine/resident contact with families
- Deployed resources to purchase or secure mobile phones for care staff and seniors
- Deployed resources to facilitate delivery of essential supplies to residences
- Connected volunteers to support various feeding programmes around the Island
- Connected Bermuda Police Service to help Age Concern deliver groceries and essential supplies to vulnerable seniors


EMERGENCY FUND GRANTEES: Age Concern Bermuda, Bermuda Housing Trust, Network of Bermuda Residential Care Homes for Seniors, Project Action, Vision Bermuda

Disaster Relief
Funds from the Bermuda Emergency Fund have been deployed to support the DBM Covid-19 community response. Work in this essential service area involved:

- Coordinating quarantine calls and checks on individuals in the community
- Providing support for organisations helping people in confinement
- Providing support for first responders who need services and equipment, including mental health support
- Directing and coordinating services with the DBM to support disaster planning
- Providing support and coordination for homeless shelter needs and transporting individuals to testing centres. The emergency shelter operates 24/7 for 30 people, supplying food and helping with drug rehabilitation support
- Providing support for an additional 120,000 community masks
- Providing support for the Emergency Shelter, including three DBM/EPS responders and one ambulance to transport people to and from Covid-19 testing
- Providing support for decontamination of testing transport vehicle before each trip
- Providing support for three designated news and vehicles, delivering lunch and dinner to the fire department and the hospital
- Providing support for staffing and other costs related to disaster relief for Covid-19

Unsheltered / Homelessness & Related Substance Abuse
Funds from the Bermuda Emergency Fund have been deployed to support the DBM Covid-19 community response. Work in this essential service area involved:

- Assessing and coordinating goods and supplies for those being housed at the Emergency Shelter at CedarBridge Academy
- Coordinating and arranging support for shelter management team
- Providing resources to support the addition of extra staff/volunteers for 24/7 shelter management at The Salvation Army
- Providing resources to support increased demand on operations and to purchase PPE for staff and supplies for residents to maintain shelter-in-place protocols in various short-term housing facilities

COORDINATING PARTNERS & VENDORS: Age Concern Bermuda, Arnold’s Warehouse, Bermuda Red Cross, Emergency Shelter, St. John Ambulance, Centre Against Abuse, Focus Counselling

EMERGENCY FUND GRANTEES: Age Concern Bermuda, Bermuda Housing Trust, Network of Bermuda Residential Care Homes for Seniors, Project Action, Vision Bermuda

Domestic Violence & Abuse Protection
Funds from the Bermuda Emergency Fund have been deployed to support the DBM Covid-19 community response. Work in this essential service area involved:

- Delivering crisis management counselling
- Providing two hotline resources 24/7
- Providing legal support and facilitating Domestic Protection Orders
- Purchasing food, vouchers and goods for clients
- Providing designated housing facilities for up to 15 families to ensure their safety

COORDINATING PARTNERS & VENDORS: Age Concern Bermuda, Arnold’s Warehouse, Bermuda Red Cross, Emergency Shelter, Focus Counselling, The Salvation Army, Centre Against Abuse, Centre Against Abuse

EMERGENCY FUND GRANTEES: Age Concern Bermuda, Arnold’s Warehouse, Bermuda Red Cross, Emergency Shelter, Centre Against Abuse
Food Security & Services

More than 7,600 meals per week have been provided islandwide.

The Third Sector Coordinated Crisis Effort has:

- Identified and extended food security services to seven days a week: cooked food for people with no stove or capacity to cook; provided pantry access and grocery voucher support.
- Identified and extended urgent meal services for residents at the Matilda Smith Williams Nursing Home to the end of April.
- Mapped and assessed gaps in food bank and meal services available to the public by day and location.
- Developed and distributed an Emergency Food Services Schedule, which is updated regularly.
- Sustained and augmented central food services.
- Supported resources to cover additional food bank, food pantry, and meals for pick-up on Saturdays and Sundays.
- Diversified locations for food access where lack of public transport presented challenges at eastern and western ends of the island.
- Increased provisions to existing providers who have been serving vulnerable people for years.
- Boosted all food distribution service allocations by five percent, funded to the end of May, to manage reported increases.

Food Security & Services

Medical & Health Care Supports

Facilities from the Bermuda Emergency Fund have been deployed to support the BMG Covid-19 community response. As the number of people seeking access to information on managing their health and access to subsidised medication to manage their health, resources have been deployed to support organisations with:

- Purchasing medical supplies
- Purchasing prescription medication
- Providing healthcare advice and management
- Delivering medications and medical supplies

Mental Health

Facilities from the Bermuda Emergency Fund have been deployed to support the BMG Covid-19 community response. Work in the essential service area involved:

- Identifying technological resources required by mental health providers to deliver sustained TeleHealth, TeleMedicine and TeleEducation services
- Deploying resources to various mental health providers to purchase upgraded equipment to support TeleHealth people receiving care but struggling to pay for their medications and dealing with financial worries, job loss and other stressors
- Coordinating and connecting organisations, service providers and psychiatric clinicians to implement an Emotional Wellbeing Hotline to support those dealing with loss and anxiety, and to support family members or friends going through a tough time. Service is available seven days a week from 9am to 9pm
- Developing and distributing an essential services contract list, which includes all contact details and service descriptions of identified essential service providers. This is updated regularly