

Continuum of Care Homeless Assistance Programs

2003 Application Summary

This is the first page of your application. Remove this page and place it in the front of your application.

Continuum of Care (CoC) Name: Greater Nashua Continuum of Care

CoC Contact Person and Organization: Lisa Christie, Nashua Soup Kitchen & Shelter, Inc.

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Continuum of Care Geography

Using the Geographic Area Guide, list the name and the six-digit geographic code number for *each* city and/or county participating in your Continuum of Care. Because the geography covered by your system will affect your Need score, it is important to be accurate. Enter the name of *every listed* city and/or county that makes up the geography for your Continuum of Care system and its assigned code. Leaving out a jurisdiction could reduce your pro rata need amount. Adding in a jurisdiction that is not really part of your system is likely to significantly reduce your score. Before completing, please read the NOFA guidance and page 2 of this application regarding geographically overlapping Continuum of Care systems.

Geographic Area Name	6-digit Code
Example: Syracuse	366376
Example: Onondaga County	369067

Geographic Area Name	6-digit Code
Nashua, City of	331026
½ of Hillsborough County: as shown below:	
Amherst, Town of (Hillsborough County)	339011
Brookline, Town of (Hillsborough County)	339011
Hollis, Town of (Hillsborough County)	339011
Hudson, Town of (Hillsborough County)	339011
Litchfield, Town of (Hillsborough County)	339011
Mason, Town of (Hillsborough County)	339011
Merrimack, Town of (Hillsborough County)	339011
Milford, Town of (Hillsborough County)	339011
Mont Vernon, Town of (Hillsborough County)	339011

Exhibit 1:

Continuum of Care Narrative

1. Greater Nashua's Continuum of Care Accomplishments.

Briefly describe the specific accomplishments of the past 12 months in implementing the Greater Nashua CoC strategy.

Continued Growth in Network, Linkages and Capacity

- The Greater Nashua CoC, as an applicant, participated in a NH Collaborative Initiative to help end chronic homelessness in concert with the two other CoC's in the State. The proposal called for locating 60 apartments for the homeless (20 units for the Nashua CoC) to be used in partnership with the various healthcare service and housing agencies, and veterans. Details in 2.b., page 3.
- The Greater Nashua CoC and the Policy Academy co-sponsored the first Ending Homelessness Conference, in a larger effort of creating a plan for ending homelessness in Nashua; plan to be presented Spring 2004. Details in 2.b., page 3.
- Of the 143 clients exiting CoC programs, 4.8% had SSI; 17.4% had secured TANF; 48.2% reported income from employment (an improvement of 35.7% over status at entry); 23.7% had Medicaid; 27.9% had secured Food Stamps; and 82.9% with no financial resources at entry reported income at exit.
- Interagency networking and collaborations in new and sustained undertakings (e.g. joint grant applications, speaking at public hearings (Land Use, Board of Aldermen), maximizing mainstreaming of resources, participation in Mayor's Task Force on Housing [report due August 2003], Individual Development Accounts Program).
- Agency staff and volunteer support to new undertaking by Interfaith Hospitality Network for family shelter in faith-based settings.
- Brought in local Housing Authority as significant participant in the Nashua CoC.
- Committed CoC members staff and resources to develop a Resource Protocol Directory to help in accessing mainstream resources.

New Resource Development

- Interfaith Hospitality Network secured \$20,000 NH Charitable Foundation grant to help organize temporary housing of homeless families, increasing the CoC's capacity to shelter homeless families with children.
- Harbor Homes awarded HUD Section 811 funds for acquisition of 5 new units for people with disabilities, many of whom are chronically homeless or at risk for becoming chronically homeless.
- Oversaw the award of \$100,000 in Nashua Affordable Housing Trust Fund (AHTF) monies.
- Advisory role in committing \$1,000,000 HUD Economic Development Initiative (EDI) grant, received through the Office of Sen. Judd Gregg. Funds targeted solely for the homeless as detailed in 2.b., page 3.

Policy Development

- MP Housing, Inc. received commitment of \$400,000 (net) in CDFA Tax Credits, the first in the City of Nashua, to be used to purchase affordable, permanent housing units.
- Ending Homelessness in 10 Years Plan underway. Sixteen (16) people have been meeting monthly since last November.
- Maintain advisory role in administering AHTF and EDI awards. Monthly and special meetings; Committee of 20.
- Input into the process and final report, due August 2003, of the Mayor's Housing Task Force, looking at barriers to affordable permanent housing, necessary policy changes, subsidy considerations and regulation strategies.

2. Greater Nashua's *planning process* for developing a Continuum of Care strategy.

- a. *Identify* the lead entity for Greater Nashua's CoC planning process.

The Lead Entity of the Greater Nashua CoC is the Executive/Development/Strategic Committee. This committee is made up of staff from nonprofit agencies, service providers, faith-based organizations, businesses, government and homeless/formerly homeless individuals. This committee's responsibility is to create and develop strategies within the Continuum and the community, with special attention noted to HUD's charge to eradicate chronic homelessness. This committee coordinates meetings and focus groups, disseminates information, manages other planning efforts for tracking progress on goal-action steps, and reports monthly at the general CoC meeting and on the www.nashua-coc.org website. Annually, the CoC members elect a chairperson and vice chairperson. A recording secretary is appointed. The office holders may serve for two consecutive terms. By-laws, established in 1995, are reviewed on an annual basis.

b. *Describe* Greater Nashua's CoC planning process.

Among the tools and methods employed to do planning, the CoC uses focus groups of providers, community residents and clients to do brainstorming and SWOT analyses (Strengths, Weaknesses, Opportunities, and Threats). These focus groups are led by a practitioner specifically trained in qualitative research methods and the results and findings are shared with the Continuum and incorporated in public presentations. The preparation for this year's Ending Homelessness Conference included a substantial literature review, which is resulting in a planned on-line bibliography of resources. Quantitative analysis of economic and social factors has also been done and has been used to document the level of local revenues needed to support general welfare. Data for both qualitative and quantitative analysis when not available from other sources is done by surveys and sampling.

The information gathered and analyzed is used by the various agencies in the Greater Nashua CoC (CoC) which includes nonprofit agencies, local government, service providers, the banking and business communities, faith-based organizations, veterans, public/private sector and homeless/formerly homeless persons. The CoC has been meeting monthly for the last six years and more often if necessary to address the issues of housing for the homeless. This is to insure collaboration and information resource sharing in order to provide comprehensive wrap-around services for homeless persons in moving towards greater independence. Beginning last year with HUD's focus on ending chronic homelessness, greater emphasis was placed on persons who are chronically homeless. CoC members have worked hard over the past years to involve the private sector in homeless planning. For example, many members serve on volunteer boards and committees for groups such as the Nashua Chamber of Commerce, the two local Rotary Clubs, Exchange Clubs and Lions Clubs. A strong working relationship continues between the CoC and the Bank of New Hampshire presenting opportunities to host public forums to educate the business community on the needs of the homeless and how they can help. In addition, this past year, the CoC developed a collaborating relationship with the Nashua Housing Authority.

The Greater Nashua CoC planning structure consists of three committees: Executive/Development/Strategic Committee (Lead Entity), Housing Needs and Data Committee, and Legislative Issues Committee. The responsibility of the lead entity, the Executive/Development/Strategic Committee, is to create and develop strategies to eradicate homelessness (including chronic homelessness) within the greater Nashua area. As mentioned earlier, this committee also coordinates meetings, disseminates information, tracks progress on goal-action steps, and reports monthly at the general CoC meeting. The Housing Needs & Data Committee tracks the various housing needs of chronically homeless and homeless individuals/families (as well as other subpopulations), advocates for affordable permanent housing, and compiles this data for presentation to the full CoC membership at monthly meetings (on an as-needed basis) and on the www.nashua-coc.org website. The Legislative Issues Committee attends legislative local, state, and federal hearings, advocates for chronic homeless and other homeless persons, and reports to the full Continuum on a regular basis. This committee is also responsible for keeping Continuum members abreast of latest legislative bills concerning homeless/chronic homeless, or any of our other subpopulation primarily through the www.nashua-coc.org website and at monthly CoC meetings.

Each of the three CoC committees distributes written minutes of meetings to CoC members; the minutes are also posted on the www.nashua-coc.org website. Each committee establishes goals with a corresponding timetable and reports regularly to the CoC. Ad hoc committees are formed as necessary, such as the Data Gathering Committee whose mission this year was to conduct a "point in time" homeless count (from 12 noon, May 19 to 12 noon, May 20, 2003) and then to specifically gather, compile, and report results.

The three CoC committees regularly monitor the newspapers, TV media, federal and state legislatures to stay informed and target advocacy strategies. In the past year the Greater Nashua CoC has worked with the two other continua in the State as well as additional groups to coordinate advocacy efforts. A CoC member is on the Board of Directors Executive Committee for the New Hampshire Coalition to End Homelessness (NHCEH); another CoC nonprofit agency has hired a coordinator who advocates for homeless/chronic homeless through legislation tracking, and attends and testifies at legislative hearings.

Through the joint effort of these committees the Greater Nashua CoC has been able to develop a long-term strategic plan that includes the most current data and housing needs information while being able to respond quickly to legislative and social issues with pertinent and appropriate information. Over this past year, the Greater Nashua CoC has had strong representation and input with the NH Policy Academy (PA). A former CoC chairperson is currently the chairperson of the Policy Academy. The PA (made up of 150 high-level policy makers including Office of the Governor, the Office of Homeless and Housing Services, Office

of the Commissioner of Health and Human Services, state legislators, community and agency leaders, veterans) has developed an Action Plan to overcome barriers in accessing and maximizing mainstream resources for chronic homeless and other homeless persons and families. The PA sponsored a proposal submission to the Corporation for Supportive Housing to help bring about a systems change in NH by ending homelessness. The Greater Nashua CoC provided input to, support of, and authored the majority of this proposal. The PA also submitted, and agreed to be an advisory group for the NH Collaborative Initiative. The proposal was authored by the Greater Nashua CoC and submitted to the Interagency Council on Homelessness.

In this collaborative spirit, the Greater Nashua Continuum of Care and the New Hampshire Policy Academy co-sponsored a statewide Conference to End Homelessness held in Nashua. Approximately 175 attendees throughout the State were present, representing local, state and federal policy makers, congressional representatives, NH Division of Health & Human Services, NH Housing Finance Authority, for profit and nonprofit agencies, homeless and formerly homeless individuals, members from NAMI NH (National Alliance for the Mentally Ill), advocacy groups, faith-based organizations, and representatives from the Veterans Administration. From our neighboring state, the Commonwealth of Massachusetts, there were representatives from the Division of Health & Human Services, nonprofit agencies and Veterans Hospital. There was a panel discussion by local city and nonprofit agency representatives addressing housing issues and possible models for New Hampshire. Keynote speakers were Philip Mangano, Director of the US Interagency Council on Homelessness, and Steve Berg, Vice President for Policy and Programs at the National Alliance to End Homelessness. As a result of this Conference, a draft plan to end homelessness has been submitted to the Greater Nashua CoC Ending Homelessness Subcommittee. The CoC is now working very closely with John O'Brien, New England Interagency Council on Homelessness representative, who has attended the PA meetings and is scheduled to come to the next Greater Nashua CoC general meeting. He has met with the Mayor of Nashua and has stimulated municipal involvement in the development of Nashua's plan to end homelessness..

The Greater Nashua CoC participated in a New Hampshire Collaborative Initiative to help end chronic homelessness in concert with the two other CoC's in the state. (Required elements of this proposal involved HUD, HRSA, SAMHSA, and DVA.) The proposal called for locating 60 apartments for the homeless to be split between the three State continua (or 20 units for the Greater Nashua CoC) to be used in partnership with various healthcare service and housing agencies, and veterans. Of the 60 units, 36 would be for the chronically homeless: veterans, substance abusers, and mentally ill clients. Other homeless persons would use the other 24 units.

Another significant event that occurred this past year included the allocation of HUD Economic Development Initiative (EDI) funds. A new advisory committee made up of community stakeholders and CoC members was created to administer this \$1,000,000 received through the Office of Senator Judd Gregg to create affordable housing opportunities. The funds are targeted solely for the homeless as follows: \$180K for acquisition and rehabilitation for permanent affordable housing; \$150K for acquisition and rehabilitation for transitional housing; \$230K for acquisition of deteriorated and/or blighted buildings; \$300K for Lead Paint hazard reduction targeting Section 8 units; \$140K for technical assistance and administration.

One of the strengths of the Greater Nashua CoC is our web page (www.nashua-coc.org), which allows for rapid dissemination of information throughout the CoC membership in addressing the needs of the chronic homeless/homeless individuals and families, including proposed bills and actions from the State Legislature. It serves as a central communication avenue for all members of the CoC and is used extensively for sending minutes of meetings, reports, requesting specific information, distributing legislative materials, announcing fund raisers, and other various activities. For example, individuals throughout the US have made inquiry for information on replication of existing programs, such as our Safe Haven (the only one in the State of New Hampshire). The website has also strengthened the grant writing of our local nonprofits through the sharing of information as they identify and pursue additional mainstream resources for the clients we all serve. An e-mail distribution loop has been established for the PA and Greater Nashua CoC. While there is a national policy academy website, there are currently plans to create a PA New Hampshire website.

c. List the dates and main topics of Greater Nashua's CoC planning meetings held since June 2002, demonstrating that these meetings are (1) regularly scheduled, (2) held year round, and (3) not solely focused on developing an application in response to the NOFA.

Dates	Main Topics
06/05/02	General CoC Meeting. Gaps Analysis Chart report. Presentation and ballot vote of NOFA 2002 proposals. Discussion of 811 proposal. CoC membership agreed not to meet in July.
06/05/02	Lead Entity Committee meeting to discuss housing funding option that may be available to local welfare office.

Dates	Main Topics
06/07/02	CoC representatives attend Coalition to End Homelessness meeting in Concord, NH.
06/08/02	Neighborhood Resource Symposium put on by Neighborhood Housing Services of Greater Nashua – outdoor fair and series of workshops around issues of access to government, services and resources.
06/13/02	Affordable Housing Trust Fund Subcommittee meeting to discuss transitional housing rules and awards.
06/18/02	Gaps Analysis Subcommittee meeting to review database outputs, review narrative.
07/05/02	CoC representatives attend Coalition to End Homelessness meeting in Concord, NH.
07/10/02	Mayor's Housing Task Force kick-off meeting which includes CoC members. Chairperson is CoC member.
07/10/02	Affordable Housing Trust Fund Subcommittee meeting to discuss guideline applications for funding.
07/18/02	Urban Programs staff, Mayor's staff and Welfare Officer met to develop presentation on local housing costs.
07/22/02	Greater Nashua CoC Representatives attend State CoC meeting (BOSCOC).
07/30/02	Urban Programs Office meeting with Health and Community Services and Welfare
07/31/02	Affordable Housing Trust Fund Subcommittee meeting to discuss applications for funding 3 agencies.
08/02/02	CoC representative attended Coalition to End Homelessness meeting in Concord, NH.
08/07/02	General CoC Meeting. Affordable Housing Trust Fund Subcommittee name changed to EDI (Economic Development Initiative) Housing Advisory Subcommittee. Review of recent National Alliance to End Homelessness Conference. Greater Nashua Interfaith Hospitality Network has received grant for 'start-up' operations.
08/08/02	NHS sponsors National Night Out, for residents to take back their streets for safety.
08/26/02	Nashua Homeless Outreach workers attended the State Outreach Workers Quarterly meeting.
08/27/02	Meeting between current and past welfare officers to discuss possible reasons for rising local welfare costs.
08/28/02	Mayor's Housing Task Force Committee meeting. CoC members represented on committee.
08/28/02	CoC members attended NH Coalition to End Homeless 3-day conference in North Conway, NH.
09/04/02	EDI Advisory Committee to discuss applications for funding.
09/04/02	General CoC Meeting. Subcommittee established to develop Program Resource Directory. Discussion of emergency winter shelter beds. Representatives from Half Moon Sober Festival, Inc. (drug and alcohol abuse organization) explained their organization's mission and goals. Flyers were distributed.
09/06/02	Emergency Shelter Solutions Subcommittee meeting to discuss strategy.
09/06/02	CoC representative attended Coalition to End Homelessness meeting in Concord, NH.
09/11/02	Emergency Shelter Solutions Subcommittee toured an emergency shelter, spoke with staff re: winter shelter beds.
09/11/02	United Way Day of Caring, involvement with CoC agencies.
09/12/02	Greater Nashua CoC representatives attend State CoC meeting (BOSCOC).
09/18/02	Program Resource Directory Subcommittee begins work on developing mainstream resources binder with assistance from Southern NH University intern.
09/20/02	Discussion with State Homeless Coordinator re: additional state resources for emergency winter shelter beds.
09/21/02	Hispanic Homeownership Fair by NHS; City provides information on Housing Improvement Program and Lead Hazard Reduction. CoC agencies involved.
09/28/02	Mayor's Housing Task Force Committee meeting. CoC members represented on committee.
09/26/02	Emergency Shelter Solutions Subcommittee meeting with agency as selected provider for winter beds.
10/02/02	General CoC Meeting. Election of CoC Chairperson and Vice Chairperson. Reports on EDI Subcommittee, Program Resource Directory Subcommittee; United Way's Committee Assessment Needs distributed next week; available on website.
10/02/02	EDI Advisory Subcommittee meeting.
10/04/02	CoC representatives attend Coalition to End Homelessness meeting in Concord, NH.
10/08/02	CoC Emergency Solutions Subcommittee winter shelter meeting.
10/10/02	Greater Nashua CoC representatives attend State CoC meeting (BOSCOC).
10/16/02	Human Services career fair at New Hampshire Technical College. CoC agencies involvement.
10/18/02	Program Resource Directory Subcommittee meeting. Discussion with intern of objectives and work plan.
10/20/02	CoC members participated in "Gimme Shelter" on capitol grounds, Concord, NH.
10/23/02	Mayor's Housing Task Force Committee meeting. CoC members represented on committee.
11/01/02	CoC representatives attend Coalition to End Homelessness meeting in Concord, NH.
11/01/02	Nashua Inter-Agency Council meeting. Discussion on revising and updating Mainstream Resource guide.
11/06/02	General CoC Meeting. Update: Program Resource Directory Subcommittee; winter shelter beds. Committee formed and charged with developing a plan to end homelessness includes United Way, City Welfare, nonprofit

Dates	Main Topics
	executive directors, program managers, faith-based organizations, formerly homeless individuals.
11/18/02	Mayor's Housing Task Force Committee meeting. CoC members represented on committee.
11/18/02	Nashua Homeless Outreach workers attended the State Outreach Workers Quarterly meeting.
11/21/02	Greater Nashua CoC representatives attend State CoC meeting (BOSCOC).
11/21/02	Title III Cultural Diversity Training; purpose to gain increased insight & sensitivity to other cultures and minorities.
11/25/02	Policy Academy Meeting. Member of Greater Nashua CoC is Chairperson. HMIS discussion; review of Action Plan to End Homelessness, technical assistance needs. CoC members in attendance.
12/03/02	Technical Assistance Collaborative (TAC) training on "Making the Most of Mainstream Resources". Many Greater Nashua CoC members in attendance.
12/04/02	General CoC Meeting. Proposed Zoning Ordinance changes for City of Nashua presented by a citizen member of the City Zoning Regulation Advisory Committee. Distributed copies of proposed zoning issues pertinent to CoC members and their agencies.
12/04/02	First meeting of CoC End Homelessness Subcommittee – Lead Entity..
12/06/02	CoC representatives attended Coalition to End Homelessness meeting in Concord, NH.
12/11/02	Welfare Costs Data Gathering meeting with Lead Entity.
12/13/02	Welfare caseworker focus group discussion about welfare trends. CoC members in attendance.
12/16/02	Other provider focus group discussion about supportive services trends. CoC members in attendance.
01/03/03	CoC representatives attended Coalition to End Homelessness meeting in Concord, NH.
01/08/03	General CoC Meeting. Public hearing on proposed zoning changes; reports from Mayor's Housing Task Force Committee, EDI Advisory Subcommittee, Ending Homelessness Subcommittee, Data Gathering Subcommittee homeless count. Discussion of Section 8 HUD funding bill currently in Congress.
01/08/03	CoC Ending Homelessness Subcommittee meeting – Lead Entity.
01/08/03	EDI Advisory Subcommittee meeting to review agency applications for funding.
01/09/03	NH Workforce Housing Council (includes CoC members) met; purpose to work on statewide action (i.e. education programs, legislative action, research).
01/16/03	Greater Nashua CoC representative attends State CoC meeting (BOSCOC).
02/04/03	HUD Debriefing Session on 2002 NOFA attended by several CoC members.
02/05/03	General CoC Meeting. Reports on CDBG schedule, 2003 NOFA, Mayor's Task Force, BOSCOC Meeting, Ending Homelessness Subcommittee, Legislative Bills SB95/HB360, and Data Gathering/Gaps Analysis Subcommittee.
02/10/03	CoC representative attended Coalition to End Homelessness Second Annual Meeting.
02/19/03	Testimony by Urban Programs Department/CoC member before Human Affairs Committee/Board of Aldermen re: CDBG program history, effectiveness and future.
02/20/03	Greater Nashua CoC representatives attend State CoC meeting (BOSCOC).
02/27/03	CoC Ending Homelessness Subcommittee meeting – Lead Entity.
02/28/03	Harbor Homes, Inc. PH3 and HIV/AIDS Task Force (CoC members) meet to discuss client issues, status of benefits and barriers to accessing mainstream resources.
03/05/03	General CoC Meeting. TAC presentation re: 2002 NOFA results. Reports on upcoming public hearing/land use, Conference to End Homelessness, and Corporation for Supportive Housing (CSH) proposal.
03/05/03	CoC Ending Homelessness Subcommittee brainstorming meeting on ending homelessness conference – Lead Entity.
03/05/03	Policy Academy meeting. Discussion of HMIS system, CSH proposal, NH Collaborative Initiative proposal, and Drake Model of service to dually diagnosed. CoC members in attendance.
03/06/03	CoC Ending Homelessness Subcommittee meeting – Lead Entity. Conference planning discussion.
03/07/03	CoC representatives attended Coalition to End Homelessness meeting in Concord, NH.
03/13/03	CoC Ending Homelessness Subcommittee meeting – Lead Entity. Conference planning discussion.
03/13/03	NH Workforce Housing Council (includes CoC members) met to work on statewide action (i.e. education programs, legislative action, research).
03/18/03	NH Workforce Housing Council (includes CoC members) met with the Speaker of the House and President of the Senate/State Legislature.
03/25/03	CoC members attended HMIS training/discussion meeting in Concord, NH.
03/26/03	Mayor's Housing Task Force Committee meeting. CoC members represented on committee.
03/27/03	CoC Ending Homelessness Subcommittee – Lead Entity. Conference planning meeting.

Dates	Main Topics
03/27/03	Greater Nashua CoC representatives attend State CoC meeting (BOSCOC).
04/02/03	General CoC Meeting. Reports from Mayor's Task Force, EDI Advisory Committee, City Welfare Work Program, CDBG commitments, Emergency Shelter Solutions Committee, Program Resources Directory, BOSCOC meeting, Ending Homelessness Conference, public hearing amending City's Consolidated Plan, NH Collaborative Initiative to Help End Chronic Homelessness proposal.
04/02/03	CoC Ending Homelessness Subcommittee – Lead Entity. Brainstorming meeting on homelessness conference.
04/03/03	Policy Academy meeting. Discussion of CSH and NH Collaborative Initiative proposals, technical assistance. CoC members in attendance.
04/04/03	CoC representative attended Coalition to End Homelessness meeting in Concord, NH.
04/08/03	Welfare Power Point presentation to City of Nashua Board of Aldermen by Lead Entity.
04/09/03	CoC Ending Homelessness Subcommittee – Lead Entity. Conference planning meeting.
04/16/03	Human Affairs Committee/Board of Aldermen – presentation on CDBG and HOME projects by Urban Programs.
04/17/03	CoC Ending Homelessness Subcommittee – Lead Entity. Conference planning discussion.
04/23/03	Cable TV taping on homelessness in Nashua with information on upcoming Ending Homelessness Conference.
04/23/03	Meeting of the EDI Subcommittee to hear application from agencies requesting funding.
04/24/03	Greater Nashua CoC representatives attend Balance of State CoC meeting (BOSCOC).
04/28/03	CoC Ending Homelessness Conference Subcommittee planning discussion – Lead Entity.
05/08/03	NH Workforce Housing Council (includes CoC members) met to work on statewide action (i.e. education programs, legislative action, research).
05/02/03	First Statewide Ending Homelessness Conference sponsored by the Greater Nashua Continuum of Care and the Policy Academy.
05/07/03	General CoC meeting. Review of 2003 NOFA proposal, Conference to End Homelessness, BOSCOC meeting, Mayor's Housing Task Force. Update on CSH and NH Collaborative Initiative proposals.
05/07/03	CoC Ending Homelessness Subcommittee review and brainstorming meeting.
05/08/03	Policy Academy meeting. Update on proposals, Ending Homelessness in NH Conference, future direction. CoC members in attendance.
05/08/03	CoC meeting to discuss nonprofit providers on Land Use Code revision, its impact on lower income residents and opportunities for SRO, PSH and affordable housing development.
05/09/03	CoC representatives attended Coalition to End Homelessness meeting in Concord, NH.
05/13/03	Gaps Analysis Subcommittee meeting to review survey forms, database of agencies to be polled for point-in-time.
05/14/03	Gaps Analysis Subcommittee survey mailing.
05/15/03	Greater Nashua CoC representatives attend State CoC meeting (BOSCOC). Gaps Analysis discussion.
05/15/03	CoC NOFA Team meeting – distribution of materials/tasks assigned.
05/19/03	CoC Lead Entity meeting – discussion with Land Use Code Advisory representative on analysis of proposed code.
05/19/03	Annual homeless "point in time" census taken by CoC Gaps Analysis Subcommittee and outreach workers.
05/20/03	TAC NOFA Teleconference attended by several CoC members.
05/22/03	Lead Entity CoC meeting with local agency staff regarding writing the Plan to End Homelessness.
05/22/03	Public Hearing on Land Use Ordinance attended by CoC members.
05/22/03	CoC NOFA Team meeting. Preparation and questions for 6/4/03 General CoC meeting.
05/28/03	HUD NOFA Broadcast in Manchester attended by five CoC members.
06/2/03	Gaps Analysis Subcommittee met to review status/quality of data collected. Follow-up calls to homeless census reporting agencies.
06/04/03	General CoC Meeting. Review of NOFA proposal, Section 1; report from Ending Homelessness Subcommittee.
06/04/03	CoC Ending Homelessness Subcommittee brainstorming meeting – Lead Entity.
06/06/03	CoC representatives attended Coalition to End Homelessness meeting in Concord, NH.
06/09/03	Gaps Analysis Subcommittee met to review status of agency reporting, quality of data, preliminary findings.
06/09/03	Regional Planning Committee. Update on Mainstream Resources. Attended by CoC members.
06/12/04	NOFA Team meeting. Review and discussion of Exhibit 1 sections.
06/13/03	Gaps Analysis Subcommittee meeting on first draft of submission.
06/16/03	Final Gaps Analysis Subcommittee numbers disseminated to CoC membership.
06/19/03	HUD NOFA Broadcast.
06/25/03	Special CoC General Meeting. Purpose to present and prioritize proposals, including Bonus proposal.

d. Involvement and level of participation in the planning process.

(Although you may require multiple pages to respond to this item, your response will count as only one page towards the 30-page limitation.)

Column titled Subpopulations Represented: "General" serves all homeless people, including the various subpopulations, but does not specifically focus on any one subpopulation.

Specific Names of CoC Organizations/Persons	Geographic Area Represented	Represented, if any* (SMI, SA, HIV/AIDS, DV, VETS, Y)	Level of Participation (activity and frequency in planning process)
State Agencies			
Department of Health and Human Services/Division of Family Assistance – Sharon Face/Asst. Admin.	State of NH	General	Moderate – occasionally attends planning meetings
Department of Health and Human Services/Office of Minority Health – Linda Sprague/Multi-Cultural Specialist	City of Nashua	General	Moderate – occasionally attends planning meetings
NH Division of Behavioral Health Services/Consumer Housing and Homeless – Lance dePlante/Director	State of NH	General	Moderate – occasionally attends planning meetings
Veterans Administration – Don Casey/Director	State of NH	VETS	Moderate – occasionally attends planning meetings
Local Government Agencies			
City of Nashua			
Community Block Grant/Urban Programs – Klaas Nijhuis/Deputy Manager, Urban Programs, Paul Newman/Manager, Urban Programs, Linda Jaynes/ Admin. Asst/Urban Programs	City of Nashua	General	Significant – Lead Entity; regularly attends Executive/Strategic Development Committee meetings; convenes, Vice Chairs and attends planning meetings; visitation to appropriate agencies as needed; member of Housing Needs, Data, Legislative Issues, Ending Homelessness and Ad Hoc Committees. Helped plan and was presenter at Ending Homelessness Conference; prepares Minutes; NOFA Team Com.
City of Nashua/Dept. of Environmental Health – Heidi Peek/Deputy Health Officer	City of Nashua	General	Moderate – occasionally attends planning meetings
Nashua Public Health Dept. – Jade Marco/Street Outreach Worker	City of Nashua	General	Moderate – occasionally attends planning meetings
Nashua Welfare Dept. – Robert Mack/Director	City of Nashua	General	Significant – regularly attends planning meetings; member of Housing Needs, Data, & Ending Homelessness Committees
Nashua Transit – Anne Brockway/Mobility Mgr.	City of Nashua	General	Moderate – occasionally attends planning meetings
Other Towns			
Town of Amherst – Sharon Frydlo/Welfare Officer	Amherst	General	Moderate – occasionally attends planning meetings, telephone/website communication

Specific Names of CoC Organizations/Persons	Geographic Area Represented	Represented, if any* (SMI, SA, HIV/AIDS, DV, VETS, Y)	Level of Participation (activity and frequency in planning process)
Town of Brookline – Noreen Crooker/Welfare Office	Brookline	General	Moderate – telephone and visitation
Town of Hollis – Cathy Hallsworth/Welfare Director-Admin. Asst.	Hollis	General	Moderate – occasionally attends planning meetings, visitation to appropriate agency as needed
Town of Hudson – Kathy Wilson/Temp. Welfare Administrator	Hudson	General	Moderate – occasionally attends planning meetings, telephone communication
Town of Mason – Barbara Milkovits/Admin. Asst.	Mason	General	Moderate – occasionally attends planning meetings, telephone communication
Town of Merrimack – Pat Murphy/Welfare Administrator	Merrimack	General	Moderate – occasionally attends planning meetings, visitation to appropriate agency as needed
Town of Milford – Maria Brown/Welfare Director	Milford	General	Significant- regularly attends planning meetings; active on Housing Needs Committee
Public Housing Authorities (PHA's)			
Nashua Housing Authority – Grace Hicks-Grogan/Exec. Director	City of Nashua	General	Significant – regularly attends planning meetings
Nonprofit Organizations: (includes Faith-based organizations)			
Adult Learning Center – Diana Owen/Asst. Director	Greater Nashua	General	Moderate – occasionally attends planning meetings
Area Agency of Greater Nashua, Inc. – George Barrett/Service Coordinator	City of Nashua	Developmentally Disabled, Y	Moderate – occasionally attends planning meetings
Bridges – Tara Davis/Emergency Shelter Manager, Agnes Han/Case Manager	Greater Nashua	DV	Significant – regularly attends planning meetings; member of Housing Needs Committee and Data Gathering Committee
Community Council of Nashua, Inc. – Susan Mead/Outreach Coord, Carol Furlong, Scott Brennan/Staff	Greater Nashua	SMI, SA	Significant – Lead Entity; regularly attends planning meetings; member of Executive/Strategic, and Legislative Issues Committees
Corpus Christie Food Pantry – Kay Golden/Director**	Greater Nashua	General	Moderate – occasionally attends planning meetings
Girls Inc. – Cathy Duffy/Executive Director	Greater Nashua	Y	Moderate – occasionally attends planning meetings
Granite State Independent Living Foundation – Jenifer Gokey/Benefits Specialist	State of NH	Persons living with disabilities	Moderate – occasionally attends planning meetings
Greater Nashua Dental Connection - Kim Anastasiou/Executive Director	Greater Nashua	General	Moderate – occasionally attends planning meetings, telephone communication
Greater Nashua Habitat for Humanity - David Darling/Community Coordinator	Greater Nashua	General	Significant – regularly attends planning meetings; member of Housing Needs, Data and Ending Homelessness Com.
Greater Nashua Interfaith Hospitality Network, Inc. – Bob Marks/ Community Liaison**	Greater Nashua	General	Significant – regularly attends planning meetings; member of Housing Needs and Data Committees
Half Moon Sober Festival – Mary Fisher/Board of Directors, Cheryl Rawe/Grant Writer	Greater Nashua	SA	Significant – attends planning meetings; member of Ending Homelessness Com.

Specific Names of CoC Organizations/Persons	Geographic Area Represented	Represented, if any* (SMI, SA, HIV/AIDS, DV, VETS, Y)	Level of Participation (activity and frequency in planning process)
Harbor Homes, Inc. – Peter Kelleher/ Executive Director, Mary Auer, Sue Bultman, Joseph Ntengeri, Brian Sousa, Staff	Greater Nashua	SMI, SA	Significant – Lead Entity; regularly attends planning meetings; member of Executive/Strategic Housing Needs, Data and Legislative Issues Committees, NOFA Team Committee
Keystone Hall – Peter Kelleher/ Executive Director	Greater Nashua	DD, SA	Significant – Lead Entity; regularly attends planning meetings, member of Executive/ Strategic Planning, Housing Needs, Data and Legislative Issues Committees
Marguerite's Place, Inc. – Sister Sharon/Executive Director, Ruth Crosman/Asst. Director**	Greater Nashua	SA, DV	Significant – Lead Entity; regularly attends planning meetings; member of Executive/ Strategic, Housing Needs, Data and Legislative Issues Committees; Planner and Presenter at Ending Homeless Conference. Ending Homeless Committee Attendee, NOFA Team Committee.
Merrimack River Medical Services – Matt Davis/Director	City of Nashua	SA	Moderate – occasionally attends planning meetings
Nashua Advocacy Group – Janet Kelly/President	Greater Nashua	General	Significant – regularly attends planning meetings; member Housing Needs and Data Committees
Nashua Area Health Center – Mariellen Durso/Executive Director	Greater Nashua	General	Significant – Lead Entity; regularly attends planning meetings; Executive/Strategic Planning Committee
Nashua Foundation for Mental Health – Jody Stephens, Clinical Director	Greater Nashua	SMI, SA	Moderate – occasionally attends planning meetings
Nashua Pastoral Care Center – Maryse Wirbal/Executive Director**	Greater Nashua	DV, SA	Significant – regularly attends planning meetings;
Nashua Soup Kitchen and Shelter – Lisa Christie/Executive Director, Eileen Brady, Donna Juskiewicz, Patti Hayes/Staff	Greater Nashua	General	Significant – Lead Entity; Chair, CoC; regularly attends planning meetings; member of Executive/ Strategic Planning, Housing Needs and Legislative Issues Committees; NOFA Team Committee
Nashua Youth Council – Betsy Abrahms/Executive Director	Greater Nashua	Y, SA	Moderate – occasionally attends planning meetings; telephone communication
Neighborhood Housing Services of Greater Nashua – Bridget Belton- Jette/Executive Director, Lina Ruiz/Outreach Coordinator	Greater Nashua	General	Significant – Lead Entity; regularly attends planning meetings; member of Executive/Strategic Development, Housing Needs & Data Committees; Ending Homelessness Conference planning
St. John Neumann Church – Mary Moriarty/Community Liaison**	Amherst, Brookline, Hollis, Merrimack, Nashua	General	Significant – regularly attends planning meetings; member of Legislative Issues Committee
SHARE (food cooperative) – Sister Sandra Morgan/Coordinator**	Greater Nashua	General	Moderate – occasionally attends planning meetings

Specific Names of CoC Organizations/Persons	Geographic Area Represented	Represented, if any* (SMI, SA, HIV/AIDS, DV, VETS, Y)	Level of Participation (activity and frequency in planning process)
Soul Purpose – David Cull/President	Greater Nashua	General	Significant – regularly attends planning meetings; member of Housing Needs, Data and Ending Homelessness Committees; NOFA Team Committee
Southern NH HIV/AIDS Task Force – George Kleeman/Executive Director, Wendy Furnari/Staff	Greater Nashua	HIV/AIDS	Significant – regularly attends planning meetings; member of Legislative Issues Committee
Southern NH Services, Inc. – Donnalee Lozeau/Program & Community Development Director, Nick Lorang/Director CSBG, Tony Epaphras/Director Outreach-Case Management Project	Southern New Hampshire	General	Significant – Lead Entity; regularly attends planning meetings; member of Executive/Strategic Planning, Housing Needs, Legislative Issues, Ad Hoc Committees; NOFA Team Committee
Business/Business Associations			
Bank of NH – Lori Piper/Vice President	Greater Nashua	General	Significant – regularly attends planning meetings; member of Housing Needs & Ad Hoc Committees; NOFA Team Committee
Citizens Bank – Debbie Miller/Vice President	NH	General	Moderate – participates on Housing and Data Gathering Committees
Sovereign Bank – Earl Ross/Vice President	NH	General	Moderate
United Way – Ray Peterson/Vice President Community Assessment and Investment	Greater Nashua	General	Significant – regularly attends planning meetings; member of Housing Needs & Data Committees
Homeless/Formerly Homeless Persons			
6 persons who wish to remain anonymous	Greater Nashua	SMI, SA	Significant – Lead Entity; member Executive/Strategic Planning Committees; regularly attends monthly meetings
Other, e.g.: Hospital/Medical Funders, Law Enforcement			
Betty Winberg/Citizen/Parent	Greater Nashua	SMI (parent)	Significant – regularly attends planning meetings
Alphonse Hattenschwiler – Former Director/Community Services, City of Nashua	Nashua – former Legislator	General	Significant – regularly attends planning meetings; member of Legislative Issues & Ending Homeless Committees
Fred Britton – Board of Aldermen	Nashua	General	Significant – liaison between Board of Aldermen and CoC; Ending Homelessness Committee; attends planning meetings as available
Lori Cardin – Board of Aldermen/Board of Directors, Nashua Children's Home	Nashua	General	Significant – liaison between Board of Aldermen and CoC; attends planning meetings as available
Matt Leahy – Representative from Senator Hugh Gregg's Office	NH	General	Significant – attends planning meetings as available;; Housing Needs & Data Committees
William Wrobelski – Representative from Senator John Sununu's Office	NH	General	Moderate – attends planning meetings as available
Mark Sanborn – Representative from Congressman Charles Bass' Office	NH	General	Moderate – attends planning meetings as available; Data Gathering Committee

Specific Names of CoC Organizations/Persons	Geographic Area Represented	Represented, if any* (SMI, SA, HIV/AIDS, DV, VETS, Y)	Level of Participation (activity and frequency in planning process)
Nashua Fire Marshal's Office – Mike Vaccaro/Fire Marshal	City of Nashua	General	Moderate – occasionally attends planning meetings
Nashua Police Department – Sgt. John Fisher	City of Nashua	General	Moderate – occasionally attends planning meetings
Nashua Telegraph – Stephanie Hooper/Staff Reporter	NH	General	Moderate – attends planning meetings as available
NH Legal Assistance – Christine Lavalle, Esq./Staff Attorney	NH	General	Moderate – attends planning meetings as available
St. Joseph Hospital – Robert Demers/Vice President **	Greater Nashua	General	Moderate – attends planning meetings as available
Southern NH Medical Center – Ellen O'Shea/Access Team Member	Greater Nashua	General	Moderate – attends planning meetings as available
VA Medical Center – Bruce Bissett/Homeless Coordinator	NH	General	Moderate – attends planning meetings as available

*Subpopulation Key: Seriously Mentally Ill (SMI), Substance Abuse (SA), HIV/AIDS, Domestic Violence (DV), Veterans (VETS), and Youth (Y).

**Faith-Based Organization

3. Greater Nashua's Continuum of Care *goals* and *system* under development.

A. Chronic Homelessness Strategy/Goals

(1) **Past Performance**

(a) The specific actions taken over the past year towards ending chronic homelessness

The Greater Nashua Continuum of Care has taken the following specific actions over the past year (July 2002 – June 2003) towards ending chronic homelessness:

- The Nashua CoC, as an applicant, participated in a collaborative initiative proposal to help end chronic homelessness in concert with the two other CoCs in the state. The proposal called for locating 60 apartments for the homeless (or 20 units for the Nashua CoC) to be used in partnership with the various healthcare service and housing agencies, and veterans. Of the 60 units, 36 would be for the chronically homeless: veterans, substance abusers, and mentally ill clients. Other homeless persons would use the other 24 units. Overall total of \$3.5 million over 3 years.
- Nashua CoC and the NH Policy Academy hosted the first "Ending Homelessness in New Hampshire Conference" in May '03 with Steve Berg from the National Alliance to End Homelessness and Philip Mangano from the Interagency Council on Homelessness as guest speakers. This conference was attended by approximately 175 and had strong press coverage, bringing the issue of chronic homelessness and homelessness to the forefront in the Nashua CoC targeted geographic area and the state.
- An End Homelessness Subcommittee was formed in November '02 and meets monthly. Work has included a strengths, weaknesses, opportunities and threats analysis on the community, agencies, clients and the system as they all related to ending chronic homelessness and homelessness. The target end product is a ten-year plan to end chronic homelessness in our region.
- Developed 5 affordable low income, permanent housing for persons/families currently in emergency shelters/transitional housing to open up emergency shelter beds for chronically homeless persons.
- A Mayor's Housing Task Force was created in July 2002 to address the issue of affordable housing for all segments of the population (chronically homeless and homeless persons). This is expected to be a 12 –18 month process targeting 3 – 4 key issues to research, address and report to the Mayor with recommendations for the City of Nashua.
- Current Chair of the Greater Nashua CoC attended the National Alliance to End Homelessness Conference in order to become more knowledgeable about addressing this issue; brought back ideas of additional ways in which the Nashua CoC may address and continue its efforts towards combating chronic homelessness.
- CoC has set up a Quality Assurance Team under the End Homelessness Committee to monitor the progress of tasks assigned towards the goal of ending chronic homelessness and other homelessness.

- A task force with assistance from an intern from Southern New Hampshire University completed a Resource Protocol Directory. The directory is intended to assist case managers in identifying all resources available (including mainstream resources) to assist the chronically homeless.
- National Alliance for Mentally Ill – New Hampshire was recently funded to serve the under-served, mentally ill Hispanic population, some of whom are chronically homeless.
- In December 2002, several Nashua CoC agency members attended a training conference sponsored by TAC and HUD on How to Improve Access to Mainstream Resources for chronic homeless and homeless persons.
- To educate the general public on the problems and concerns of chronic homelessness, the Nashua Telegraph newspaper ran feature articles about homelessness and chronic homelessness in the City of Nashua, and a local television station profiled the experiences of a chronically homeless individual in one of their programs.

(b) The remaining obstacles to ending chronic homelessness in the Greater Nashua area:

Many obstacles still exist to ending chronic homelessness – the primary ones being the lack of affordable housing and supportive service resources. The housing-specific obstacles are many including (1) the potential loss of existing SROs due to market pressures (gentrification) and the barriers to building new SROs and other multi-family housing because of proposed land use/zoning regulation changes in the City of Nashua; (2) continued low housing vacancy factors (less than 1%); (3) rents in Nashua continue to be among the highest in the State of NH, resulting in a high demand for public subsidies, which because of low vacancy rate are hard to utilize; (4) lack of sufficient housing development subsidies to reduce debt service; and (5) cost of land is prohibitive for the building of new affordable, low-income housing units, which could free up other housing units for the homeless and chronically homeless.

Beyond the housing obstacles, lack of sufficient levels of available treatment programs and actual cuts in substance abuse programs prevent people from moving upwardly through this homelessness ladder. Substance abuse, for example, tends to play a major factor in profiling a chronically homeless person; yet, over the past five years there has been an 80% loss of substance abuse treatment beds in NH. Over this past year due to the closing of various psychiatric hospitals/crisis centers, 176 persons were turned away from involuntary, emergency admissions at the NH State Hospital for the mentally ill population due to lack of housing capacity.

Specific needs for the chronically homeless population may be different from the “other homeless” population. To understand those differences, it is necessary to work via Homeless Outreach intervention and supportive services with the chronically homeless population and to engage and help them connect to the Greater Nashua’s CoC service systems in addition to providing permanent supportive housing. Informed intervention should be enabling and not be furthering dependency so that those who are likely to move to independence are able to regain their self confidence and self esteem, to be able to break the homeless cycle and maintain employment, as well as permanent affordable housing. This face-to-face engagement with the chronically homeless population will yield data to inform decisions about resource allocations and policies. Such information could be used to improve the funding for supportive services, which has been level. With inadequate funding, agencies are forced to either run in deficit or cut services, as costs continue to increase. This puts programs and agencies at risk, and homeless providers are not able to provide adequate services to the chronic and other homeless in this area.

Jobs that do not pay living wages prevent many chronically homeless individuals from attaining self-sufficiency. This geographic area (the southern tier of the State) continues to experience a decline in well paying manufacturing jobs, which are being replaced by low-wage jobs in the service sector, without benefits, making housing affordability a serious issue for low-wage earners. Learning meaningful, marketable job skills and earning marketable wages are tools necessary to remain independent and maintain long-term housing. Supportive services aimed at increasing skill levels of the chronically homeless are essential in this process.

(2) Current Chronic Homelessness Strategy.

Below is a brief summary of Greater Nashua CoC’s continuing strategies and goals for ending chronic homelessness. *(Your response is expected to be no more than 2 pages, however, none of it will count towards your 30-page limitation.)*

The 7 element CoC Strategy that follows continues to be our tool to guide us to achieving our goals for ending chronic homelessness.

1. Analysis and Plan for Monitoring Local and Regional Situation
 - a. Analyze the causes of chronic homelessness: general and how they apply in Nashua
 - b. Identify and quantify this vulnerable population, including in-migration
 - c. Identify social, political and economic factors that change vulnerability (+ and -)
 - d. Establish a dashboard cluster of gauges to report situation and trends on website
(HMIS will be helpful in this, along with micro economic indicators collected by state agencies (local unemployment, costs of living, housing costs, etc.)
 - f. Periodically collect, review and analyze data for trends, opportunities and threats
2. Public Awareness
 - a. Use finding of Analysis/Monitoring to inform public, funders and volunteers, legislators and administration
 - b. Report periodically at CoC Planning meetings, Aldermanic meetings, United Way, etc.
 - c. Periodic press releases on positive and negative changes observed, threats and opportunities to mobilize public and to begin to shape policy
 - d. Host conferences that both help us learn from best practices and inform about current, future situation
3. Policy Shaping
 - a. CoC Data Gathering/Analysis analyzes proposed legislation/regulation/specific subsidized programs for potential impact on chronic homelessness
 - b. Prepare white papers for legislators and administration that analyze policies or suggest policies
 - c. Use conferences to illustrate potential effects of policies being considered, and to propose helpful policies
 - d. Develop a local plan to end chronic homelessness informed by analysis of resources, and laying out the commitment of those resources through development and management of buildings and supportive services
4. Resource Identification, Building, Allocation and Preservation
 - a. Inventory all current community assets (physical, social, human, financial) that impact chronic homelessness both positively and negatively
 - b. Identify those assets that are at risk of being lost and not replaced (e.g.: Single Room Occupancies)
 - c. Analyze to identify deficiencies, weaknesses, and strengths of all assets
 - d. Analyze agencies for their potential to effectively employ and administer assets
 - e. Develop a resource allocation plan for most effective use of financial, human and physical assets to target the problem of chronic homelessness and that lays out objectives for CoC. *(Target HUD funds to creation of housing that matches needs, HHS and supplemental resources to target supportive services and household needs)* Allocation decisions about resources directed to permanent supportive housing will help open the back door of the emergency shelter system.
5. Targeted Acquisition, Development, Management
 - a. Follow the strategy developed through the analysis of resources to commit assets to specific agencies or partnerships to achieve agreed upon objectives
 - b. Build capacity in agencies where weaknesses were identified
6. Support Program Development and Implementation
 - a. Based on an analysis of the economic as well as the social and psychological factors of this vulnerable population, develop supportive services that overcome those weaknesses in ways that are sustainable, and lead to independence wherever possible
 - b. Work on discharge policies and case management with institutions that might potentially discharge individuals or households into homelessness
7. Evaluation of interventions and monitor progress made towards achieving goals

Below is a brief summary of the evidence of Nashua CoC's continuing work towards our goals of having a realistic and workable plan in place by Spring 2004 and the ultimate goal of ending chronic and episodic homelessness.

In November 2002, the Nashua CoC formed an active sub-committee which meets monthly to develop a 10-year plan to end homelessness and to address the current issues of chronic homelessness. Several positive steps have been taken as a result of the work of this committee including:

- A draft of a working plan to End Chronic Homelessness has been started with the intent to have a final draft available for public comment and review by 12/31/03 with implementation in Spring 2004.
- Actively involved through various member agencies in the City of Nashua's process currently underway to revise the Land Use/Zoning Regulations. The CoC is concerned over the impact on the chronically homeless and homeless populations

that the possible loss of existing SRO units, under the proposed revisions could have, and is working actively to prevent this from occurring. To date, the CoC, with others, has been successful in slowing down the process and working with the City and its consultants for a more thorough review being conducted on the affordable, low income housing component within the regulations.

Involvement in a committee which is studying issues of housing affordability:

- The Mayor's Housing Task Force, which has met for the past 18 months, intends to present a draft plan to the Mayor, Summer 2003. That plan will also address housing for those members of our community who are at risk of being chronically homeless.

Pursuit of funding opportunities:

- The Nashua CoC supported submission of a statewide NH Collaborative Initiative to End Chronic Homelessness grant application seeking resources to end chronic homeless and targeting the mentally ill, substance abuse, and veteran populations. The proposal calls for locating 60 apartments for the homeless (20 within the Nashua CoC catchment area) to be used in partnership with various healthcare service and housing agencies, and veterans. 36 units would be for the chronically homeless: veterans, substance abusers, and mentally ill clients, and the other 24 units would be for other homeless persons. Overall total of \$3.5 million over a 3-year period.

Annual homeless census and resource inventory:

- Within the Nashua CoC's geographic area we have identified 133 chronically homeless individuals that are currently sheltered and another 151 chronically homeless that are unsheltered for a total of 284 that are designated as "chronically homeless".

(3) Future Goals

The following are specific future-oriented goals, and specific action steps to be undertaken over the next 18 months in carrying out a strategy to end **chronic** homelessness in the Greater Nashua area.

Goal: End Chronic Homelessness ("What" are you trying to accomplish)	Action Steps ("How" are you to go about accomplishing it)	Responsible Person/ Organization ("who" is responsible for accomplishing it)	Target Dates (Mo/Yr will be accomplished)
Goal 1: Develop 15-20 affordable low-income, permanent housing for persons/families currently in emergency shelters/ transitional housing to open up beds for chronically homeless persons	1) Execution of following permanent housing proposals - MP Housing, Inc., NH Collaborative Initiative, and Veterans (per diem program for serving up to 20 veterans) 2) Awareness campaign for local legislature and public through personal visits, phone calls, invitation to CoC meetings, etc. 2) Enlist support via personal visit, letter, telephone, e-mail of key legislators and Board of Alderman 3) Invite 2 housing contractors to a CoC meeting 4) Locate at least 2 suitable sites for development with access to resources	1) MP Housing, Inc., Harbor Homes, Inc., State of NH, 2) CoC Legislative Issues Committee 2) Urban Programs Manager 3) Habitat for Humanity/Dave Darling 4) Urban Programs Manager	1) 12/04 2) 02/04 3) 06/04 4) 12/04
Goal 2: Preserve existing single adult housing (SRO's) for chronically homeless individuals	1) Continued involvement in the dialogue re: changes to the Land Use Codes/Zoning Regulations 2) Collaborate with the Nashua Housing Authority to purchase existing, private SRO's	1) CoC Affordable Housing Task Force Committee 2) Executive Committee	1) 06/04 2) 12/04

Goal: End Chronic Homelessness ("What" are you trying to accomplish)	Action Steps ("How" are you to go about accomplishing it)	Responsible Person/ Organization ("who" is responsible for accomplishing it)	Target Dates (Mo/Yr will be accomplished)
Goal 3: Improve treatment options for chronic homeless persons with alcohol and substance abuse issues	1) Support ELSHI (Ending Long-Term Supportive Homeless Services Initiative) 2) Prioritize the chronic homeless person 3) Identify specific needs for this population which may be different from other homeless people 4) Advocacy for new treatment dollars at state and federal level, working with local and state legislators 5) Seek other funding resources 6) Educate communities as to need, recidivism, and reduction of fear of stigma	1) CoC Agencies 2) CoC Agencies 3) Keystone Hall 4) CoC Legislative Issues Committee 5) CoC Legislative Issues Committee 6) CoC Executive/ Strategic Committee	1) 12/04 2) 10/04 3) 12/04 4) 12/04 5) 12/04 6) 12/04
Goal 4: Work towards the licensing of a substance abuse treatment center	1) Complete licensing process by securing resources to renovate the building to meet requirements 2) Hire qualified personnel for treatment center	1) Keystone Hall 2) Keystone Hall	1) 12/04 2) 12/04
Goal 5: Improve access to mainstream services through SESAS (Spanish English Substance Abuse Services) for the chronically homeless	1) Awareness campaign to educate the Spanish speaking population about SESAS availability by neighborhood visitation, mailings, faith-based organizations 2) Create a communications system similar to "just-in-time" approach as resource for chronic homeless. HMIS, once it comes on line, will compliment this system	1) Neighborhood Housing Services 2) CoC Executive/Strategic Committee	1) 12/04 2) 12/04
Goal 6: Increase collaboration with other State of NH CoC's to access inter/ intra funding sources for chronic homelessness	1) Develop a fact sheet of available funding resources with the other State of NH CoC's 2) Request a meeting with the Department of Labor and other involved groups, 3) Create a web-based e-mail loop	1) CoC Executive/Strategic Committee 2) CoC Executive/Strategic Committee 3) CoC Executive/Strategic Committee	1) 12/04 2) 12/03 3) 01/04

B. Other Homelessness Goals Chart

- (1) The Nashua Continuum of Care has had the following accomplishments over the past year in addressing the community's other homelessness goals:
- MP Housing, a CoC member agency, received commitment of \$400,000 (net) in CDFA Tax Credits, the first in the City of Nashua, to be used to purchase affordable, permanent-housing units, specifically for the homeless.
 - Greater Nashua Interfaith Hospitality Network, Inc. has received a \$20,000 grant from the NH Charitable Foundation which will provide lodging, meals and day facility to this nonprofit, which provides lodging and meals to homeless families via a network of eight local churches on a rotating basis.
 - Nashua Pastoral Care Center expanded their transitional housing program with the purchase of the Norwell House creating eight (8) units of housing for homeless women with children in a group home setting with 24/7 staff coverage.

- Greater Nashua CoC along with the Policy Academy hosted an “Ending Homelessness in New Hampshire Conference” in May '02 with Steve Berg from the National Alliance to End Homelessness and Philip Mangano from the Interagency Council on Homelessness as guest speakers. This conference was attended by over 175 and had strong press coverage, bringing the issue of homelessness to the forefront in the Nashua CoC targeted geographic area.
- There are now 26 individuals participating in the Individual Development Accounts, which is a 3-to-1 matched savings program by the Federal Government and local banks supporting education and savings towards home ownership for homeless families.
- A Mayor’s Housing Task Force was created in July 2002 to address the issue of affordable housing for all segments of the population, including the chronically homeless. This is expected to be a 12 –18 month process targeting 3 – 4 key issues to research, address and report to the Mayor with recommendations for the City of Nashua.
- An advisory committee was established last year to set priorities and objectives and to develop an application and selection process for the award of funds from the HUD EDI grant targeting affordable housing development. The committee also reviews applications and to date has awarded commitments to Nashua Pastoral Care Center (NPCC) of approximately \$27,000 and Nashua Children’s Home (NCH) of \$55,000. The NPCC award is one of the sources for acquisition and rehabilitation of a former nursing home to serve as transitional housing for single mothers and infants. The money is targeted for lead hazard reductions. The NCH award is one of the sources of a HOME-funded project to create five units of housing for youth aging out of the child protective custody system. In both cases, if this housing were not available these households or individuals would be homeless.
- The Nashua CoC has been an active voice for the homeless in the City of Nashua’s decision to update the City’s Land Use Code/Zoning Regulations. The CoC has been instrumental in an Affordable Housing Section being added to the Code, as the current Land Use Code does not address this issue. This updated Land Use Code is currently in the discussion stages at the City/Alderman level.
- An End Homelessness Committee was formed in November '02 and it has focused on a strengths, weaknesses, opportunities and threats analysis on the community, agencies, clients and the system as they all related to ending homelessness.
- The Telegraph Newspaper ran a feature article about homelessness in the City of Nashua.
- CoC has set up a Quality Assurance Team under the End Homelessness Committee to monitor the progress of tasks assigned towards the goal of ending chronic homelessness and other homelessness.
- Several of Nashua CoC’s member agencies were successful in getting the Governor’s Commission on Substance Abuse to fund the Nashua area for two staff to reach out to the underserved substance abuse Hispanic community. Previous to this there were no Spanish-speaking counselors in the Nashua area.
- A task force with assistance from an intern from Southern New Hampshire University completed a Resource Protocol Directory. The directory is intended to assist case managers in identifying all resources available (including mainstream resources) to assist homeless individuals and families.
- The Nashua CoC has been an active voice in the City of Nashua’s decision to update the City’s Land Use Code/Zoning Regulations. The CoC has been instrumental in an Affordable Housing section being added to the Code, as the current Land Use Code does not address this issue. This updated Land Use Code is currently in the discussion stages at the City/Alderman level.

(2) The following are goals and specific action steps to be undertaken in carrying out a strategy to end homelessness in the Greater Nashua area.

Goal: Other Homelessness	Action Steps	Responsible Person/Organization	Target Dates
Goal 1: Develop 43 units of elderly housing which will free other units for the homeless	1) Purchase building and renovate. Application filed with HUD for funding for this purpose	1) Southern NH Services, Inc.	1) 12/04
Goal 2: Develop 2 units of affordable housing	1) Create Phase III of its current transitional housing program to include 2 units of affordable, permanent housing for graduates of the existing transitional housing program	1) Nashua Pastoral Care Center	1) 06/04

Goal: Other Homelessness	Action Steps	Responsible Person/Organization	Target Dates
Goal 3: To effect changes in public policy that drive people into homelessness.	1) Work on living wage campaign 2) Involvement in the local and state legislative process by attending hearings and testifying, when appropriate	1) CoC Executive/ Strategic Committee 2) Legislative Issues Committee	1) 06/04 2) 06/04
Goal 4: Facilitate the movement of homeless individuals/families out of shelter/transitional housing and into permanent housing (thereby creating space for additional chronically homeless/homeless individuals/families)	1) Gather data on length of stay at shelter using HMIS 2) Assess client needs to move from shelter 3) Provide intensive case management to help families move sooner 4) Recruit and expand area landlords to participate in security deposit and rental guarantee programs specifically established to serve this population	1) Shelter/Transitional Housing Directors 2) Shelter/Transitional Housing Directors 3) Shelter/Transitional Housing Directors 4) Nashua Pastoral Care	1) 12/03 2) 12/03 3) 12/03 4) 06/04
Goal 5: Increase the number of units of affordable, low-cost permanent housing for the homeless in greater Nashua by 8 – 10	1) Fight the loss of existing SRO's 2) Educate City Aldermen, builders, developers on housing issues 3) Work with City to devise linkage strategy for development with dollars tied to affordable, low-income housing 4) Pursue grant opportunities to fund new housing; work with local developers and existing landlords	1) CoC Housing Needs & Data Committee/ Executive Committee 2) Urban Programs Director 3) CoC Executive/ Strategic Committee 4) Habitat for Humanity	1) 12/03 2) 12/03 3) 12/03 4) 06/04
Goal 6: Maintain involvement in changes to Land Use Codes/ Zoning Regulations as it pertains to affordable housing and SRO's	1) Maintain dialogue with the City of Nashua's Planning Department and Mayoral Office	1) CoC Executive/ Strategic Committee	1) 12/03
Goal 7: To support legislation for the development of workforce housing in NH	1) Continued partnership with NH Housing Forum 2) Continue to push for local awareness	1) CoC Legislative Committee 2) Member agencies	1) 06/04 2) 06/04
Goal 8: Continue to develop and expand employment opportunities, increasing the number of persons gaining, and maintaining employment	1) Increase outreach capabilities to Harbor Homes, Inc. Employment Services Program and Signs in a Second 2) Continue with "Operation Brightside" a city-wide beautification summer program 3) Coordinate with job training programs including workforce development programs 4) Continue with Employment and Education Program	1) Harbor Homes, Inc. 2) Harbor Homes, Inc. 3) Southern NH Services, Inc. 4) Nashua Soup Kitchen & Shelter, Inc.	1) 06/04 2) 06/04 3) 06/04 4) 06/04

C. Discharge Planning Policy

The Greater Nashua Continuum of Care is subject to the Discharge Policies of the State of New Hampshire, Department of Health & Human Services, Division of Behavioral Health, Office of Homeless Housing and Services.

The Department of Health and Human Services has developed a Discharge Planning Policy for persons leaving publicly funded institutions and systems of care. The prioritized need was to first work on developing a Discharge Plan for state institutions since these institutions account for a significant number of persons discharged each year that may or may not have a home. Following the final development and implementation of this State Plan, the Department will work with appropriate local governments to develop a similar plan and approach for local institutions.

The Discharge Planning Committee is led by the Director of the Office of Homeless and Housing Services. The membership of the Discharge Planning Committee represents a diverse group of state agencies (e.g. the Department of Corrections, New Hampshire Hospital, the Division of Behavioral Health, and Division of Juvenile Justice Services), homeless service and housing providers, advocates for people who are homeless and people with disabilities, and the New Hampshire Welfare Administrators Association as well as the three State continua.

The Discharge Planning Committee has created two work groups in order to develop a Discharge Policy. These work groups included a Referral Work Group made up of agencies to which persons who are discharged often seek shelter, housing and services in the areas of the three Continua in New Hampshire. A second group, Provider Work Group, was made up of staff from institutions that release individuals into the general population. A separate Steering Committee was formed to consolidate the two groups' ideas, generate a discharge policy, and oversee implementation of a policy.

The two work groups conducted research into both the needs in New Hampshire within the three Continua areas (Nashua, Manchester, and Balance of State) as well as existing Discharge Planning Policies developed in other states. This information was then brought to the Steering Committee, which developed it into a draft Discharge Planning Policy. The Emergency Shelter and Homeless Coordination Commission as well as members of the three Continua reviewed the Discharge Policy.

The Draft Discharge Planning Policy was submitted to the Commissioner of the Department of Health and Human Services for review; it will then be forwarded to the newly elected Governor for review and comment. A copy of the draft Discharge Policy is presented in the box below.

STATEWIDE HOMELESS PREVENTION DISCHARGE COORDINATION POLICY
Draft April 2003

WHEREAS, the current homeless population in New Hampshire includes the chronically long-term homeless including individuals with substance abuse disorders, the mentally ill, battered women and children, adolescent runaways, the recently unemployed, the elderly, families, and the recently incarcerated;

WHEREAS, it is contrary to sound public policy that such persons be discharged from in-patient facilities in New Hampshire to a state of homelessness; and

WHEREAS, 42 USC 11362 requires governmental entities seeking federal grants under the McKinney Act for homelessness to develop and implement a homeless prevention discharge coordination policy; and

WHEREAS, all publicly funded institutions or systems of care in New Hampshire (such as health care facilities, foster care or other youth facilities or correction programs and institutions) should make every effort through active case management discharge planning to identify and offer community resources and services to locate suitable housing and other types of after-care treatment for such persons and to document such measures including any competent refusal of treatment and/or aid with placement; and

NOW, THEREFORE, it is the policy of this state that all such publicly funded institutions or systems of care in New Hampshire shall develop and implement such homeless prevention discharge coordination policies and protocols for the discharge of persons in their custody or care to prevent such discharge from immediately resulting in homelessness to the maximum extent practicable and where appropriate within six months of the adoption of this policy and to make such policies and protocols available for public inspection.

The State Office of Housing and Homeless Services have made significant resources and services available to the Nashua CoC community in order to help with the challenge in accessing affordable housing and supportive services.

Unexecuted Grants Awarded Prior to the 2002 Continuum of Care Competition

NOT APPLICABLE. There are no Unexecuted Grants in the Greater Nashua Continuum of Care area.

E. Service Activity Chart

(Although you may require multiple pages to respond to this item, your response will count as only one page towards the 30-page limitation.)

Fundamental Components in CoC system

Component: *Prevention*

Services in place:

Advocacy:

Child & Family Services – Advocacy and support for families at risk of child abuse/neglect. Provide respite care, referrals to childcare, and provider training to prevent homelessness. Case management for ages 7-17.

CoC Community Crisis Service Guide and Map – Illustrates locations, phone numbers, services offered by provider agencies for individuals who are chronically homeless or homeless. Distributed to all CoC agencies, local churches, hospitals, missions, social clubs and other potential “points of entry” to break cycle of homelessness.

Community Council of Nashua – Outreach/case managers provide advocacy to MI homeless or at risk of being homeless by assisting individuals and families to Welfare Departments, food pantries and other potential financial assistance, assuring the necessary information is gathered. Operates supervised Visitation Center to provide opportunity to address visitation needs of displaced parents.

Marguerite’s Place, Inc. – Advocacy for homeless women with children, referrals to supplemental resources, employment opportunities, and landlords/permanent housing opportunities.

Nashua Pastoral Care Center – Advocacy for single women with children, provide legal rights to tenants.

Nashua Soup Kitchen & Shelter, Inc. – Provide Hispanic advocacy, referrals and assistance with benefits to get and maintain housing. Advocacy and education, funded entirely with private donations, regarding systemic problems that drive people into homelessness. Provide referrals to mainstream resources for income and housing.

New Hampshire Legal Assistance – Advocate to prevent evictions.

School Systems in the communities of Amherst, Brookline, Hollis, Hudson, Litchfield, Mason, Merrimack, Milford,

Mont Vernon, Nashua – Serve as referral point for families in need of prevention support to deter runaway youth and becoming homeless. Children are fed on a daily basis, physical and mental health care is provided as well as counseling.

Southern NH HIV/AIDS Task Force – Advocacy and support for homeless and chronically homeless individuals and families living with HIV/AIDS and those at high risk for acquiring HIV, to help maintain housing and health care.

Southern NH HIV/AIDS Task Force – Staff are in the community 20 hours per week meeting with individuals at high risk of acquiring HIV. Individuals are connected with information, housing opportunities, testing and services as appropriate. Educational presentations for schools and businesses surrounding HIV prevention.

Southern NH Services – Advocacy for homeless and chronically homeless persons at local, state, regional and national levels to prevent homelessness. SNHS is represented on two Nashua housing advocacy organizations: the Mayor’s Affordable Housing Taskforce and Great American Downtown. Key player in passing enabling legislation for the Electric Assistance Program that provides the low income with substantially discounted electric rates.

Youth Council – Counseling and advocacy, and group work with children and teens-at-risk from drugs and violence to promote residential and social stability in attempt to reduce the runaway teen from being homeless.

Employment:

Girls, Inc. – Advocacy, daycare, and job skills training to give female youths the confidence to secure employment and residential stability.

Harbor Homes Employment Services Program – Provides training and paid employment (resume and experience-building) to persons with a mental illness in maintenance, landscaping, snow plowing, office cleaning, Signs In a Second (client employment project featuring sign making and engraving), and Operation Brightside (a 6-week summer beautification project funded by Anheuser-Busch, coordinated through the Mayor’s Office and Nashua Parks and Recreation Department). Assignments are determined by the Mayor’s Office and coordinated with the Nashua Parks and Recreation Dept.

Marguerite’s Place, Inc. – Assistance with career exploration, resume writing, interviewing skills, transportation to job interviews. Referrals to employment support counselors. Provide childcare services for women who are job searching, interviewing, and obtaining employment.

Nashua Pastoral Care Center – Provides education and job skill training opportunities to single mothers with children. It also provides a professional women’s clothing closet to assist this population with appropriate dress for interviews.

Nashua Soup Kitchen & Shelter – Resume preparation, job search, assistance in obtaining birth certificates and photo identification cards, Citybus tickets for job interviews and job search, coordination of car donation program with Subaru of Nashua, assistance with education planning and implementation, and referrals to mainstream resources such as TANF, NH Employment Program, Veteran’s Administration, and Job Corps.

Fundamental Components in CoC system

Component: *Prevention*

Services in place

Employment:

NH Employment Security – Offers job match, recruitment, vocational resources, and programs to promote financial and residential stability.

Southern New Hampshire Services, Inc. – Operates a variety of mainstream workforce development programs; collaborates with homeless service providers to involve the homeless in mainstream employment resources such as Welfare to Work, WIA Dislocated Workers program, WIA Adult Disadvantaged and Disadvantaged Worker Program, the NH Employment Program (in partnership with the NH Division of Employment Security), and the Food Stamp Employment Program.

Food Pantry/Clothing:

Catholic Charities – Corpus Christi food pantry.

Harbor Homes Emergency Shelter – Food pantry for shelter guests and persons living on the street seeking shelter; provides blankets to homeless and chronically homeless in winter time when the shelter is full and there is no place to go.

Harbor Homes Gathering Place (consumer operated social club) – Provides nutritious meal daily, food at holidays; annual Thanksgiving Day dinner.

Milford SHARE (collaboration of all church denominations in the communities of Amherst, Brookline, Milford and Mont Vernon) – Run by volunteers, SHARE maintains a large food pantry and provides clothing to help chronically homeless and homeless persons/families, low income, or those at risk of homelessness. The churches also hold fund-raising activities throughout the year.

Nashua Pastoral Care Center – Food pantry to assist those who are chronically homeless and homeless.

Nashua Soup Kitchen & Shelter, Inc. – Provides two daily meals to those in need, monthly nonperishable food bags to individuals and families, daily perishable (fresh fruits, vegetables and bakery products) foods to individuals and families, holiday food baskets twice a year, and bedding supplies for individuals and families living in the community.

St. John Neumann Outreach – Maintains a food pantry to help chronically homeless and homeless individuals and families.

The Salvation Army – Food pantry, emergency assistance, clothing, and furniture. Christmas program and church services to promote social and residential stability.

Southern NH HIV/AIDS Task Force – Food pantry and holiday baskets for individuals and families living with HIV/Aids.

Southern New Hampshire Services, Inc. – Operates the Emergency Assistance Food Program which allows for the delivery of government surplus food items to food pantries and soup kitchens in the Nashua Continuum of Care area. Operates the Women, Infants and Children Nutrition Program, the Commodity Surplus Food Program.

The Upper Room Ministries – Provides food and clothing to the homeless.

Rental/Utilities Assistance:

Community Services (City of Nashua) – Emergency financial aid for rent, utilities, food stamps, and medication to prevent homelessness. Referral/Information about childcare options in the area to facilitate vocational pursuit.

Department of Health and Welfare officers in the communities of Amherst, Brookline, Hollis, Hudson, Litchfield, Mason, Merrimack, Milford, Mont Vernon, Nashua – Emergency financial aid for rent vouchers, utilities, food, medication, and transportation.

Harbor Homes, Inc. – Provides first month and/or security deposit through Maple Street Shelter to homeless families.

Marguerite's Place – Provides security deposits, rental assistance with repayment plans to single mothers with children, interface with agencies for help with substance abuse and counseling, allow children to continue in the daycare program.

Milford SHARE – Emergency rental vouchers and security deposits for chronic homeless and homeless persons.

Nashua Pastoral Care Center – Emergency assistance for back rent, utilities, fuel security deposit loans and utility shut-offs to prevent chronic homelessness and homelessness.

Nashua Soup Kitchen & Shelter, Inc. – Emergency financial assistance for back rent, security deposits and utility shut-offs to prevent chronic homelessness and homelessness.

Neighborhood Housing Services of Greater Nashua, Inc. – Provides foreclosure prevention and delinquency counseling and education as part of Homebuyer Education seminars, and offers a 3:1 IDA Program for low-income homebuyers. All services provided in English and Spanish.

Fundamental Components in CoC system

Component: *Prevention*

Services in place:

Rental/Utilities Assistance:

Southern NH HIV/AIDS Task Force – Rental, mortgage, and utility assistance to help maintain permanent residence to individuals and families faced with HIV/AIDS.

Southern NH Services, Inc. – Provides funds for short term emergency energy situations to families who have utility arrearages, have received eviction notices or utility termination notices and are at imminent risk of becoming homeless; allows very low income elderly to live independently in affordable housing through the operation of 152 units of Sec. 202 supportive elderly housing in the City of Nashua.

St. John Neumann Outreach – Emergency rent vouchers, utilities, medication vouchers to help prevent homelessness. Fuel assistance is also offered.

Support Groups – Individuals and Families:

Area Agency for Developmental Services of Greater Nashua – Outreach to homeless people and their families who have developmental disabilities; limited homeless prevention assistance to families who have a family member who has a developmental disability.

Big Brother and Big Sister of Greater Nashua – Screening and matching of adults with children to provide friendship, guidance, support, and stability to at-risk youth.

Boys and Girls Club of Greater Nashua – Provides a safe, stable social environment for boys and girls to encourage and strengthen family and social skills.

Bridges (formerly Rape and Assault Support Services) – 24-hour crisis line, advocacy, education through schools, businesses and non-profit groups such as **Boys & Girls Club**, support groups, referrals, shelter, crisis intervention, outreach to Hispanic victims, teen clinics. Additional office in Milford.

Harbor Homes, Inc., Marguerite's Place, Inc., Nashua Soup Kitchen & Shelter, Inc., Nashua Pastoral Care Center, Inc., and Neighborhood Housing Services of Greater Nashua, Inc. – Community Partners in **NH Statewide IDA Collaborative**, providing homeless and at-risk for homelessness individuals and families a 3:1 match of savings for home buyership. Yearly requirements of program include 8 hours Financial Fitness Training and 4 hours Home Ownership Training.

Keystone Hall, Inc. – Provides a Transitional Living Center, crisis intervention, alcohol and drug counseling.

Milford Regional Counseling Services – Provides low-income, affordable counseling services to rural Milford and surrounding areas.

Southern NH HIV/AIDS Task Force – Peer support groups for various sub-populations living with HIV/AIDS provide a safe environment for sharing coping skills.

Southern New Hampshire Services, Inc. – Regular residential support group meetings at Mary's House, a permanent housing facility for homeless women consisting of 40 SRO apartment units.

Services planned:

Bridges (formerly Rape and Assault Support Services) – Planning a diversity project with cultural composition, expand the shelter capacity, and hold mother/child groups in Spanish.

Harbor Homes, Inc., Gathering Place (Homeless/mentally ill consumer run drop-in center) – Plans to offer crisis intervention, more group activities, skill building, increased volunteer activities.

Marguerite's Place – To provide daycare services for homeless women to enable them to continue with education/training culminating in employment.

Nashua Pastoral Care Center – To continue to provide back rent, utility assistance, and fuel assistance by expanding available funding sources.

Southern New Hampshire Services, Inc. – Received a United Way venture grant to explore the feasibility of developing a Community Development and Resource Center which would provide economic opportunities for minorities with a special emphasis on underserved low-income populations. SNHS was recently awarded a grant to operate the Nashua Academy, a community based, year long intensive and comprehensive program of punishment and rehabilitation under which offenders are required to undertake life skills activities relating to their self-improvement plan as a condition of continued strict probation.

Fundamental Components in CoC system

Component: Prevention

Services planned:

Services planned:

Southern New Hampshire Services, Inc. – Develop 43 units of elderly housing which will free other units for the homeless.

Spanish/English Substance Abuse Services (SESAS) – To provide bilingual substance abuse education to the Hispanic community.

How persons access/receive assistance:

Persons access and receive assistance through **self-referral, agency referral, ACCESS Team referral, court referral, local police departments, Homeless Outreach program, CoC Community Crisis Service Guide and Map, NH State Homeless Helpline, shelters, and transitional housing programs.**

Visit the **Nashua Pastoral Care Center**, complete an application, prepare a budget, meet with a case technician, and assistance is given directly to the third party.

Bridges (formerly Rape and Assault Support Services) assists persons through referrals, crisis line, local police departments, court referrals. AmeriCorps members accompany clients to court and provide support.

Harbor Homes, Inc., Gathering Place – Oldest consumer driven drop in center in the state, clients receive referrals, food and connections to mainstream services.

Southern NH HIV/AIDS Task Force – Staff are in the community 20 hours per week meeting with individuals at high risk of acquiring HIV. HIV positive individuals complete an intake process with case manager, referrals as needed.

Southern New Hampshire Services, Inc. – The Outreach worker uses a checklist to identify the needed services and refer the clients to the appropriate services provider within the CoC.

Component: Outreach

Outreach in place:

Veterans: The greater Nashua area has had a relatively small homeless veteran population compared to the state's largest city of Manchester, NH, where the VA Hospital and Outpatient Services are located, 25 miles away. The following outreach is in place:

1) For homeless persons living on the streets:

Continuum of Care Community Crisis Guide and Map – Maps, left in areas where homeless persons living on the streets might pick them up, indicate shelter locations, phone numbers, clothing and other services offered to assist them.

Community Council of Nashua, Inc. – Street canvassing under bridges, in the woods, in alleys, for homeless individuals who are veterans.

Harbor Homes, Inc. – Street canvassing, emergency shelter for homeless/chronically homeless persons; transportation provided to VA Hospital in Manchester, NH (25 miles away).

Nashua Soup Kitchen & Shelter, Inc. – Street canvassing, emergency shelter provided for homeless/chronically homeless individuals.

Police Departments and Hospital Emergency Teams (St. Joseph Hospital and Southern NH Medical Center) – Outreach to persons living on the streets, emergency transportation, and referrals to emergency shelters.

St. Joseph Hospital Mission Integration – Offers prescription medicine/financial assistance.

Southern New Hampshire Services, Inc. – Engages unsheltered homeless veterans through street canvassing, under bridges, in the woods, in alleys, and links to appropriate services; transportation to VA Hospital in Manchester, coordinates with State of NH Veteran Services Coordinator

Fundamental Components in CoC system

Component: *Outreach*

Outreach in place

Veterans:

2) For other homeless persons:

Department of Welfare/City – Emergency financial aid for rent vouchers, utilities, food.

Police Departments and Hospital Emergency Teams (St. Joseph Hospital and Southern NH Medical Center) – Outreach to shelters and emergency transportation.

St. Joseph Hospital Mission Integration – Offers prescription medicine/financial assistance.

Seriously Mentally Ill:

1) For homeless persons living on the streets:

All agencies – Outreach to local police and fire departments in **Nashua** and the 9 communities in the Continuum of Care catchment area (**Amherst, Brookline, Hollis, Hudson, Litchfield, Mason, Merrimack, Milford, Mont Vernon**) to serve homeless and chronically homeless individuals and families.

Community Council of Nashua, Inc., Southern New Hampshire Services, Inc., and City Welfare Department – Outreach to places not meant for residential use (the woods, under bridges, alleys, dumpsters, garages, motels).

Harbor Homes Gathering Place (consumer-operated social club) - Peer-to-peer word of mouth in a non-clinical environment for persons who are chronically homeless or homeless.

Nashua Soup Kitchen & Shelter, Inc. – Street outreach/case management and referral, emergency shelter, food kitchen.

Southern New Hampshire Services, Inc. – Engages unsheltered homeless mentally ill persons through street canvassing, under bridges, in the woods, in alleys, and links them to appropriate services.

2) For other homeless persons:

All agencies – Outreach to local police and fire departments in **Nashua** and the 9 communities in the Continuum of Care catchment area (**Amherst, Brookline, Hollis, Hudson, Litchfield, Mason, Merrimack, Milford, Mont Vernon**) to serve homeless and chronically homeless individuals and families.

Harbor Homes Emergency Shelter – Outreach to substance abuse treatment facilities, the local Crisis Center, local shelters, emergency rooms and psychiatric units at local hospitals, the **New Hampshire State Hospital**, and all agencies serving chronically homeless and homeless persons and families.

Harbor Homes Gathering Place (consumer-operated social club) - Peer-to-peer word of mouth in a non-clinical environment for persons who are chronically homeless or homeless.

Nashua Pastoral Care Center, Inc. – Assists with prescriptions, food, bus tickets, and referrals for this population.

Nashua Soup Kitchen & Shelter, Inc. –Case management and referral, emergency shelter, food kitchen.

Substance Abuse:

1) For homeless persons living on the streets:

All Agencies – Outreach to local police and fire departments in **Nashua** and the 9 communities in the Continuum of Care catchment area (**Amherst, Brookline, Hollis, Hudson, Litchfield, Mason, Merrimack, Milford, Mont Vernon**) to assist homeless and chronically homeless individuals and families.

Collaboration between **Keystone Hall** and **Community Council of Nashua, Inc.** to provide link to detox and the local **Crisis Center** for homeless and/or chronically homeless persons with mental illness and substance abuse.

Community Council of Nashua, Inc., Southern New Hampshire Services, Inc., and City Welfare Department – Outreach to places not meant to serve as a residence use--(the woods, under bridges, garages, alleys, in dumpsters) for persons who are homeless or chronically homeless.

Link to detox through **Keystone Hall** from the **Addiction Service Providers Network**.

Southern NH Medical Center and St. Joseph's Hospital – Offer outreach to their emergency rooms and units with chemically dependent patients for homeless and chronically homeless persons.

Fundamental Components in CoC system

Component: Outreach

Outreach in place

Substance Abuse:

1) For homeless persons living on the streets:

Southern New Hampshire Services, Inc. – Engages unsheltered homeless individuals with substance abuse problems through street canvassing, under bridges, in the woods, in alleys, and links them to appropriate services.

2) For other homeless persons:

All Agencies – Outreach to local police and fire departments in **Nashua** and the 9 communities in the Continuum of Care catchment area (**Amherst, Brookline, Hollis, Hudson, Litchfield, Mason, Merrimack, Milford, Mont Vernon**) to assist homeless and chronically homeless individuals and families.

Collaboration between **Keystone Hall** and **Community Council of Nashua, Inc.** to provide link to detox and the local **Crisis Center** for homeless and/or chronically homeless persons with mental illness and substance abuse.

Harbor Homes Emergency Shelter – Outreach and referral to substance abuse treatment facilities, the local **Crisis Center**, local shelters, emergency rooms and psychiatric units at local hospitals, the **New Hampshire State Hospital** and **all agencies** serving chronic homeless and homeless persons and families.

Link to detox through **Keystone Hall** from the **Addiction Service Providers Network**.

Marguerite's Place, Inc. – Accepts women and children from **Odyssey House** into transitional housing, works closely with and refers individuals to **Odyssey House, Keystone Hall, and Birchwood Counseling Center**.

Nashua Pastoral Care Center – Accepts women and children from **Odyssey House** into transitional housing, works closely with paying costs to detox facility **Marathon House** with **Keystone Hall** and **Northeast Counseling Services**.

Southern NH Medical Center and St. Joseph's Hospital – Offer outreach to their emergency rooms and units with chemically dependent patients for homeless and chronically homeless persons.

HIV/AIDS:

1) For homeless persons living on the streets:

Community Council of Nashua, Inc. – Provides outreach and therapy with referrals to **Southern NH HIV/AIDS Task Force**. Participates on the planning committee for the I CARE Grant and serves on the Advisory Committee.

Nashua Soup Kitchen & Shelter, Inc. – Provides referral for at-risk food kitchen patrons to **Southern NH HIV/AIDS Task Force** and **Nashua Public Health Dept.**

Southern New Hampshire HIV/AIDS Task Force – Has staff in the community 20 hours per week meeting with individuals at high risk of acquiring HIV, targeted outreach to Hispanic populations, MSM (men who have sex with men), and youth

Southern New Hampshire HIV/AIDS Task Force – Works with **Nashua Public Health Department's** outreach van to identify homeless with HIV and or provide HIV test if persons are at high risk for HIV.

Southern New Hampshire Services, Inc. – Engages unsheltered homeless individuals with HIV/AIDS through street canvassing, under bridges, in the woods, in alleys, and links them to appropriate services. Coordinates with the **Nashua Board of Health**.

2) For other homeless persons:

Community Council of Nashua, Inc. – Provides outreach and therapy with referrals to **Southern NH HIV/AIDS Task Force**. Participates on the planning committee for the I CARE Grant and serves on the Advisory Committee.

Harbor Homes, Inc. – Provides residential housing and support services to those living with HIV/AIDS.

Nashua Soup Kitchen & Shelter, Inc. – Provides referral for at-risk emergency shelter residents and food kitchen patrons to **Southern NH HIV/AIDS Task Force** and **Nashua Public Health Dept.**

Southern New Hampshire HIV/AIDS Task Force – Has staff in the community 20 hours per week meeting with individuals at high risk of acquiring HIV, targeted outreach to Hispanic populations, MSM (men who have sex with men), and youth.

Linkages with shelters, word of mouth, liaison with CoC, area welfare departments.

Fundamental Components in CoC system

Component: *Outreach*

Outreach in place

Domestic Violence:

1) **For homeless persons living on the streets:**

Bridges (formerly Nashua Rape and Assault Support Services) – Outreach to local hospitals, police departments, and schools; additional facility in Milford to serve the Greater Souhegan Valley (a rural area 20-30 miles west of Nashua).

Nashua Soup Kitchen & Shelter, Inc. – Provides referral to **Bridges** for individuals in a domestic violence situation seeking emergency shelter.

Southern New Hampshire Services, Inc. – Engages unsheltered domestic violence victims through street canvassing, under bridges, in the woods, in alleys, and links them to appropriate services. Member of the **Domestic Violence Coordinating Council of Greater Nashua**.

2) **For other homeless persons:**

Bridges (formerly Nashua Rape and Assault Support Services) – Outreach to the Hispanic community, local hospitals, police departments, and schools; additional facility in Milford to serve the Greater Souhegan Valley (a rural area 20-30 miles west of Nashua). AmeriCorps volunteers advocate to local court systems, collaborate with the **Division of Children, Youth and Families (DCYF)**.

Bridges – Collaborated with State officials and developed a standardized protocol for handling sexual assault victims. **Domestic Violence Coordinating Council of Milford, NH** has joined the **Domestic Violence Coordinating Council of Greater Nashua**.

Community Council of Nashua, Inc. – Assessment and brief treatment for victims; individual and group therapy; court referrals for Batterers Program; Supervised Visitation Program.

Marguerite's Place, Inc. – Collaborates with **DCYF**, responds to police and courts for placement; meets regularly with staff of homeless shelters to notify them of openings.

Nashua Pastoral Care Center, Inc. – Accepts many referrals from **Bridges Safe Shelter** into transitional housing, works closely with **Northeast Counseling Services** to provide therapeutic groups, provides security deposits to women and children living in safe shelters, and works very closely with **DCYF**.

Nashua Soup Kitchen & Shelter, Inc. – Provides referral to **Bridges** for individuals in a domestic violence situation seeking emergency shelter.

Youth:

1) **For homeless persons living on the streets:**

Teen outreach through **Nashua School** system and **Nashua Area Health Center** regarding domestic violence and identification of 'at-risk' youth in local schools and **School Suspension Center** providing transitional and supportive services.

Southern NH Services, Inc. – Engages unsheltered homeless youth through street canvassing, under bridges, in the woods, in alleys, and links them to appropriate services. Collaborates with **Child and Family Services**, focusing on runaway youth living on the streets.

2) **For other homeless persons:**

Community Council of Nashua, Inc. – Individual and group therapy for children and adolescents through Young Adult Program.

DCYF, USDA, WIC, local School Districts, Adult Learning Center, The Youth Council, Community Council, UNH Cooperative Extension, Catholic Charities, City Health & Community Services Division, Junior Women's League, Big Brother/Big Sister of Greater Nashua, Boys and Girls Club of Greater Nashua, Child and Family Services, Girls, Inc., Neighborhood Health Center, Catholic Charities, CHINS Diversion Program, Nashua Children's Home – Outreach and educational services through teen centers and clinics, group meetings, Mayor's Task Force on Youth, network with Oasis (a teen and 'aging out' coalition) and collaborate with one another to best serve the youth and their individual needs.

Marguerite's Place, Inc. – collaborates with **Milford Regional Counseling Services** and the **YMCA** to provide therapeutic services to youth in the program.

Fundamental Components in CoC system

Component: Outreach

Outreach in place

2) For other homeless persons:

Leadership training at **Nashua Housing Authority** targeting Hispanic population.

Teen outreach through **Nashua School** system and **Nashua Area Health Center** regarding domestic violence and identification of 'at-risk' youth in local schools and **School Suspension Center** providing transitional and supportive services.

Nashua Children's Home – Housing for at-risk youth, school and comprehensive services.

Nashua Pastoral Care Center – Collaborates with **The Youth Council** to provide therapeutic services to youth in program.

Southern NH HIV/AIDS Task Force – Targets youth at risk for acquiring HIV through street and community outreach.

Southern NH Services, Inc. – Collaborates with **Child and Family Services**, focusing on runaway youth. Provides program specific outreach to involve homeless youth in its Head Start, Child Care, WIC and Commodity Supplemental Food programs.

Outreach planned:

Veterans:

1) For homeless persons living on the streets:

Community Council of Nashua, Inc. – Activities focusing on educating other area service providers and the general community as to what services are currently available for homeless and chronically homeless veterans living on the streets.

Harbor Homes, Inc. – Plans to seek funding for transportation (to hospitals, etc.) and case management services.

2) For other homeless persons:

Community Council of Nashua, Inc. – Activities focusing on educating other area service providers and the general community as to what services are currently available for homeless and chronically homeless veterans.

Harbor Homes, Inc. – Plans to seek funding for transportation (to hospitals, etc.) and case management services.

Harbor Homes, Inc. – Has applied for a VA Per Diem Grant to provide outreach and support services to 20 veterans residing in HHI housing).

Seriously Mentally Ill:

1) For homeless persons living on the streets:

Harbor Homes, Inc. – Plans to seek funding for transportation (to hospitals, etc.) and case management services.

2) For other homeless persons:

Harbor Homes, Inc., **Keystone Hall**, **Nashua Foundation for Mental Health**, and **Community Council of Nashua, Inc.** have planned a joint venture under **SAMHSA** to address the needs of the dually diagnosed.

Harbor Homes, Inc. – Plans to seek funding for transportation (to hospitals, etc.) and case management services.

Substance Abuse:

1) For homeless persons living on the streets:

Harbor Homes, Inc., **Marguerite's Place**, **Community Council of Nashua, Inc.**, and **Nashua Foundation for Mental Health** - Outreach to clients with dual diagnosis planned through collaborative relationships between these organizations.

Spanish/English Substance Abuse Services (SESAS) – Outreach to Hispanic population in the community, providing education, referral, and counseling services.

Fundamental Components in CoC system

Component: Outreach

Outreach in place

Substance Abuse:

2) For other homeless persons:

Harbor Homes, Inc., Marguerite's Place, Community Council of Nashua, Inc., and Nashua Foundation for Mental Health - Outreach to clients with dual diagnosis planned through collaborative relationships between these organizations.
Spanish/English Substance Abuse Services (SESAS) – Outreach to Hispanic population in the community, providing education, referral, and counseling services.

Domestic Violence:

1) For homeless persons living on the streets:

Harbor Homes, Inc. – Plans to institute more training in order to understand this population better.

2) For other homeless persons:

Harbor Homes, Inc. – Plans to institute more training in order to understand this population better.

Youth:

1) For homeless persons living on the streets:

Harbor Homes, Inc. – Plans to focus on greater staff training in order to better understand the needs of this population.

2) For other homeless persons:

Harbor Homes, Inc. – Plans to focus on greater staff training in order to better understand the needs of this population.

Component: Supportive Services

Services in place:

Case Management:

Community Council of Nashua, Inc., Homeless Support/Outreach Services – Provides outreach case management, support and emergency evaluation.

Information and Referral of Greater Nashua – Provides information about services and agencies in Nashua. Offers bilingual services.

Harbor Homes, Inc. – Provides case management to chronic homeless and homeless individuals and families to assist them in achieving self-sufficiency. Individualized Goal Plans are developed to identify need areas (permanent housing, employment, self-help).

Keystone Hall – Provides case management to individuals with alcohol and/or substance abuse.

Marguerite's Place, Inc. – Provides intensive case management to the families in transitional housing program to assist in achievement of permanent housing and self-sufficiency. Case Management is provided to families in the Aftercare program to maintain permanent housing and self-sufficiency.

Nashua Pastoral Care Center – Provides extensive case management to single mothers with children in the Transitional Housing Program. It also provides case management to all families in need through its Prevention and Intervention of Homelessness and CARE Programs.

Nashua Soup Kitchen & Shelter, Inc. – Provides individualized case management to emergency shelter guests, transitional housing residents, and homeless families that are living in motel rooms paid by **City Welfare Department**, focusing on employment, permanent housing, and referrals to mainstream resources, physical and mental health services, and substance abuse services.

New Hampshire Department of Health and Human Services – TANF, DCYF, food stamps, Medicaid.

Southern NH HIV/AIDS Task Force – Provides extensive case management and support to individuals living with HIV/AIDS.

Fundamental Components in CoC system

Component: *Supportive Services*

Services in place:

Case Management:

Southern New Hampshire Services, Inc. – Provides case management services within the context of outreach to the unsheltered homeless, and families who are at risk of becoming homeless including fuel assistance recipients, Head Start families and participants in Child Health Care Support Program, and residents of Mary's House, a permanent housing facility for homeless women.

Life Skills:

Bridges – Crisis intervention to victims of domestic violence, rape, child sexual assault, and elder abuse. Confidential emergency shelter available.

Child and Family Services – Education and other asset building for families at risk of child abuse/neglect. Volunteer parents and social workers model and teach parenting skills, provide respite care, referrals to childcare, and provider training. Case management for ages 7-17.

Community Council of Nashua – Child Impact Program, teaches parenting skills to newly divorced parents in order to ensure a healthier environment.

Harbor Homes, Inc. – Offers life skills to chronic homeless and homeless individuals and families to assist them in achieving self-sufficiency. Individualized Goal Plans are developed to identify need areas (permanent housing, employment, and self-help). Provides counseling, budget planning, ADL skill development, medication education and crisis intervention.

Hillsborough County Family Intervention Program – Provides educational support and assistance to at-risk families.

Information and Referral of Greater Nashua – Provides information about services and agencies in Nashua. Offers bilingual services.

Local churches and religious community – Spiritual counseling and family-oriented skill building.

Marguerite's Place, Inc. – Provides intensive case management for the families and residents and those in the aftercare program, life skills referral to alcohol and drug abuse programs and mental health agencies. In addition, Marguerite's Place provides financial assistance for education and transportation, and assists with employment advocacy. Marguerite's Place also provides direct daycare to 25 children on a daily basis.

Nashua Pastoral Care Center – Provides hand-on teaching model and financial literacy program.

New Hampshire Catholic Charities – Provides counseling to individuals, couples, and families, as well as community and parish outreach.

Southern NH HIV/AIDS Task Force – Budget planning, counseling, self-advocacy skill building.

Southern New Hampshire Services, Inc. – Provides life skills training for women residing at Mary's House, a permanent housing facility for homeless women. Life skills training focuses on areas such as job search and interviewing, budgeting, nutrition, hygiene and personal care, and literacy skills. Child Health Care Support Program provides training in the acquisition of parenting skills, the strengthening of parent-child relationships, budgeting, home management, communication skills, pre-vocational skill development, and supervised visitation.

Alcohol and Drug Abuse Treatment:

Access Team (Southern NH Medical Center) – Emergency outreach and response to serious mental health or suicide situations and psychiatric emergencies.

Greater Nashua Council on Alcoholism – Provides crisis care, social detoxification, outpatient counseling, transitional living, and sobriety maintenance to people with drug and alcohol addictions.

Information and Referral of Greater Nashua – Provides information about services and agencies in Nashua. Offers bilingual services.

Keystone Hall – Offers treatment for individuals with alcohol and drug abuse.

Nashua Pastoral Care Center, Inc. – Assists with prescriptions, food, bus tickets, referrals and the cost for detox treatment fees for this population.

New Hampshire Department of Health and Human Services – TANF, DCYF, food stamps, Medicaid.

Fundamental Components in CoC system

Component: *Supportive Services*

Services in place:

Alcohol and Drug Abuse Treatment:

Southern NH HIV/AIDS Task Force – Offers counseling services and linkage to other programs such as detox and methadone treatment.

Veteran's Administration – Outreach, medical, counseling, and advocacy for homeless veterans.

Health – Physical and Mental:

Access Team (Southern NH Medical Center) – Emergency outreach and response to serious mental health or suicide situations and psychiatric emergencies.

Community Council of Nashua (community mental health center) – Promotes stable mental health, services for children and youth at risk, develops a Crisis Plan for each client, 24-hour Crisis line for psychiatric evaluation. Outreach to homeless or at risk of homelessness who are mentally ill.

Community Services (City of Nashua) – Child Health Clinic for proactive and early intervention on medical issues. Public Health offers HIV/AIDS testing and outreach. Referral/Information about childcare options in the area to facilitate vocational pursuit to prevent homelessness.

Greater Nashua Dental Connection, Inc. – Provides dental/oral care to families on Medicaid and/or who do not have any insurance and are 200% below poverty level.

Harbor Homes, Inc. – Provides housing and residential services in group homes and individual apartments for mentally ill adults and their families. Also provides emergency shelter for individuals and families who suffer with psychiatric and physical difficulties.

Information and Referral of Greater Nashua – Provides information about services and agencies in Nashua. Offers bilingual services.

Nashua Pastoral Care Center, Inc. – Provides assistance with prescriptions, medication bridge program, and is a referring agency to the **Greater Nashua Dental Connection, Inc.**

New Hampshire Department of Health and Human Services – TANF, DCYF, food stamps, Medicaid.

Southern NH HIV/AIDS Task Force – Mental health counseling services for individuals and families living with HIV/AIDS. Linkage with **Dartmouth Hitchcock I CARE Clinic** for all medical needs of people living with HIV/AIDS.

Southern New Hampshire Medical Center – Emergency response to serious mental health challenges (e.g., suicidal situations, psychiatric emergencies within the medical center or by telephone.

The Gathering Place (Harbor Homes, Inc.) – Member-operated social club for the mentally ill and homeless in greater Nashua. Free meals nightly.

Veteran's Administration – Outreach, medical, counseling, and advocacy for homeless veterans.

AIDS-related Treatment:

Access Team (Southern NH Medical Center) – Emergency outreach and response to serious mental health or suicide situations and psychiatric emergencies.

Community Services of Nashua, Inc. – HIV/AIDS testing and outreach and referral.

Harbor Homes, Inc. – Provides supportive services and referrals to mainstream services to persons with HIV/AIDS.

Information and Referral of Greater Nashua – Provides information about services and agencies in Nashua. Offers bilingual services.

New Hampshire Department of Health and Human Services – TANF, DCYF, food stamps, Medicaid.

Southern NH HIV/AIDS Task Force – Information, education and supportive services to individuals and families faced with AIDS or HIV, including case management, client advocacy, nutritional counseling, respite care, peer support, housing support and **HOPWA (Housing Opportunities for People with AIDS)**.

Education:

Adult Learning Center – GED tutoring, ESL, and numerous other programs focused on educational and vocational skill building. Onsite daycare available.

Fundamental Components in CoC system

Component: *Supportive Services*

Services in place:

Education:

Area Agency for Developmental Services of Greater Nashua – Provides services, education, and advocacy for families and individuals with development disabilities.

Child and Family Services – Education and support for families at risk of child abuse/neglect. Volunteer parents and social workers model and teach parenting skills, provide respite care, referrals to childcare, and provider training. Case management for ages 7-17.

Harbor Homes, Inc. – Provides vocational training for formerly homeless and persons with mental illness through its Employment Services Program.

Hillsborough County Family Intervention Program – Provides family support and assistance.

Information and Referral of Greater Nashua – Provides information about services and agencies in Nashua. Offers bilingual services.

Nashua Soup Kitchen & Shelter, Inc. – Provides funding for textbooks, registration fees, and classes for individuals who are homeless or chronically homeless.

Nashua Pastoral Care Center – Mandated component of the Transitional Housing Program. Also offer Financial Literacy Training.

Southern NH HIV/AIDS Task Force – Provides prevention education to schools and community groups as well as outreach to youth at risk, MSM (men who have sex with men) and the Latina community.

Southern NH Integrated Care, Southern NH HIV/AIDS Task Force, Harbor Homes, Inc., NH Minority Health Coalition, St. Joseph's Family Medical Center, Infectious Disease Associates, Southern NH Medical Center, Welcoming Light, Inc., Bristol-Myers Squibb, Keystone Hall, Nashua Area Health Center, City of Nashua Community Services and Dartmouth Hitchcock Medical Center – Group of individuals/agencies which meets monthly to coordinate a continuum of primary health care services for people with HIV infection in Hillsborough County. Purpose is to educate and establish long-term care for persons with HIV/AIDS.

The Telegraph – City newspaper with coverage over Southern New Hampshire, provides news coverage on the homeless problems that exist and the lack of affordable housing in this area.

Veteran's Administration – Outreach, medical, counseling, and advocacy for homeless veterans.

Community Council of Nashua – Provides job coaching to persons with MI. Assists with development of resumes and job opportunities.

Employment Assistance:

Harbor Homes Employment Services Program – Provides paid work opportunities, training, and vocational support for clients challenged with mental illness.

Information and Referral of Greater Nashua – Provides information about services and agencies in Nashua. Offers bilingual services.

Nashua Pastoral Care Center – Maintains a resource center and works closely with **New Hampshire Employment Security**.

Nashua Soup Kitchen & Shelter, Inc. – Prepares resumes and cover letters, assistance in removing barriers to employment, i.e., assistance with car repairs, obtaining state picture ID cards, providing voicemail access, referrals to **Adult Learning Center**, local schools and colleges for GEDs, diplomas and vocational training. Coordinates car donation program with local dealership, and provides bus tickets to employment interviews and mainstream resources.

The PLUS Company – Vocational rehabilitation for the disabled.

Southern New Hampshire Services, Inc. – Operates a variety of mainstream workforce development programs; collaborates with homeless service providers to involve the homeless in mainstream employment resources such as Welfare to Work, WIA Dislocated Workers Program, WIA Adult Disadvantaged and Disadvantaged Worker Program, the NH Employment Program (in partnership with the NH Division of Employment Security), and the Food Stamp Employment Program.

Fundamental Components in CoC system

Component: *Supportive Services*

Services in place:

Employment Assistance:

Veteran's Administration Compensative work Therapy Program – Targets homeless veterans who are substance abusers and/or chronically unemployed. Assists in locating permanent housing, providing substance abuse counseling, and vocational training and placement.

Child Care:

City of Nashua Community Services – Play groups for children of at-risk families.

Greater Nashua Child Care Center – Childcare for children ages 13 months to 6 years. Accepts Title XX.

Greater Nashua Dental Connection – Dental clinic for low income and uninsured children.

Hillsborough County Family Intervention Program – Provides family support and assistance.

Information and Referral of Greater Nashua – Information regarding available services and agencies within the Nashua area. Offers bilingual services.

Marguerite's Place, Inc. – Transitional services for mothers and their children. Case management, supported housing, and daycare provided onsite.

Nashua Crisis Pregnancy Center – Counseling and support for women having difficult pregnancy. Donated baby clothes and furniture items sometimes available.

Neighborhood Health Center – Primary health care, family planning and reproductive health services, pre- and post-natal health care, family/teen drop-in program.

New Hampshire Department of Health and Human Services – TANF, DCYF, food stamps, Medicaid.

Southern NH HIV/AIDS Task Force – Respite care services for families living with AIDS.

Southern New Hampshire Services, Inc. – Operates the Head Start Program and a childcare center.

The Youth Council – Counseling for children and families. Group work for children and teens at risk for drugs and violence.

Transportation:

Harbor Homes, Inc. - Provides transportation, as necessary, through its Emergency Shelter and MIMS providers, to shelter guests for medical appointments, seeking employment, and to other entitlement benefits.

Hillsborough County Family Intervention Program – Provides family support and assistance.

Marguerite's Place, Inc. – Provides transportation to shelters and other supportive services.

Nashua Pastoral Care Center – Provides assistance with bus tickets, cabs, etc.

Nashua Soup Kitchen & Shelter, Inc. – Provides bus tickets to homeless and at-risk for homelessness adults for job search, job interviews, and appointments at mainstream resource agencies.

Southern NH HIV/AIDS Task Force – Provides transportation to medical appointments for individuals with HIV/AIDS.

Southern New Hampshire Services, Inc. – Provides bus transportation and taxi vouchers to get to emergency shelters.

Veteran's Administration – Outreach, medical, counseling, and advocacy for homeless veterans.

Other:

Food Pantries/Clothing/Services

Bridges – Crisis intervention, advocacy at court, hospitals, police departments.

Community Council of Nashua – Sign language and services provided for persons who are deaf; bilingual staff on-site.

Harbor Homes, Inc. Emergency Shelter – Maintains a food pantry for shelter guests and 'street people.' In the winter when the Shelter is full, clean blankets are placed in a barrel on the porch for anyone to help himself or herself.

Fundamental Components in CoC system

Component: *Supportive Services*

Services in place:

Other:

Food Pantries/Clothing/Services

Information and Referral of Greater Nashua – Provides information about services and agencies in Nashua. Offers bilingual services.

Marguerite's Place, Inc. – Provides housing placement for single women with children.

Milford SHARE (Collaboration of all denomination of churches in Milford, Brookline, Amherst, and Mont Vernon) – Emergency rental vouchers and security deposits, food pantry, and clothing.

Nashua Pastoral Care Center, Inc. – Food pantry.

Nashua Soup Kitchen & Shelter, Inc. – Food pantry.

Neighborhood Housing Services of Greater Nashua, Inc. – Provides referral and coordination of support services for tenants and area residents. All services provided in English and Spanish.

Sheepfold Assembly of God – Food pantry, cold lunch. Some clothing items.

Social Security Administration – Information and aid with Federal Social Security programs.

Southern NH HIV/AIDS Task Force – Food pantry and holiday baskets to individuals and families with HIV/AIDS.

Southern NH Medical Center – Hospital, acute care, trauma center.

Southern NH Services, Inc. – Financial assistance programs, Personal Emergency Response systems, RSVP, NH Reads/AmeriCorps, Accompanied Transportation Services, HOME Single family Rehab. program, Translation/Interpretation Services.

St. John Neumann Church Outreach/Merrimack – Medication vouchers and food pantry.

St. Joseph Hospital – Hospital, acute care, and trauma center.

The Salvation Army – Food pantry, emergency assistance, clothing, and furniture. Christmas program and church services.

Tolles St. Mission – Food pantry, clothing, furniture, church services, and support.

Upper Room Compassionate Ministries – Clothing, hygiene products, and food pantry.

Veteran's Administration – Outreach, medical, counseling, and advocacy for homeless veterans.

Services planned:

CoC – The web page (www.nashua-coc.org) will continue to post and expand information about supportive services in order to increase awareness and improve access to services.

CoC, Keystone Hall – To improve treatment options for chronic homeless persons with alcohol and other substance abuse issues, will identify specific needs for this population, advocate for state and federal funding, seek other funding sources, and education communities as to need.

Keystone Hall – Working toward licensing of a substance abuse treatment center.

United Way of Greater Nashua – The web page of United Way (www.unitedwaynashua.org) will contain services offered by the agencies within the CoC.

Harbor Homes, Inc. – Plans to work with the HMIS to develop tracking information, which will eliminate duplication of services.

Harbor Homes Emergency Shelter – Plans to continue collaboration with **Community Council of Nashua** to implement MIMS (Mental Illness Management Services) as appropriate.

Harbor Homes Emergency Shelter – Plans to seek other funding for transportation services for homeless and chronically homeless persons and families.

Harbor Homes Emergency Shelter – Will seek funding for telephone services to facilitate communication between shelter clients and potential landlords and employers.

Marguerite's Place – Plans to expand participation in the IDA (Individual Development Account) program of the State and assist 1-3 individuals to reach their goal of homeownership within the next twelve months.

Fundamental Components in CoC system

Component: *Supportive Services*

Services in place:

Services planned:

Marguerite's Place – MP Housing plans on matching monies received in tax credits from CDFA (Community Development Finance Authority) to develop two or more units of permanent affordable housing each year for the next two years.

Neighborhood Housing Services of Greater Nashua, Inc. – Plans to add at least eight permanent affordable housing units in the coming year.

Southern New Hampshire Services, Inc. – Nashua Info-Bank will provide information about services and agencies in Nashua, scheduled to begin operation Summer 2003. An additional elderly housing project in partnership with the **Nashua Senior Activity Center** and the **City of Nashua**.

Spanish/English Substance Abuse Services (SESAS) – Developing Spanish/English Substance Abuse Services agency to provide outreach, education, substance abuse counseling, and referrals for individuals in the community.

How homeless persons access/receive assistance:

Persons access and receive assistance through **self-referral, agency referral, case managers/staff at shelters, transitional housing programs, and permanent supportive housing programs, ACCESS Team referral, Homeless Outreach Program, crisis may, New Hampshire State Homeless Helpline, hospital referral, police referral, hospitals.**

Community Council of Nashua provides service linkage for consumers to necessary assistance.

Harbor Homes, Inc. Emergency Shelter, Safe Haven, and Gathering Place coordinate with other agencies to help clients gain access to necessary resources such as affordable housing programs, savings programs, employment, and personal needs.

Marguerite's Place staff will continue to work with residents in accessing the IDA program with the State (participation began in May 2002). Will continue to access funds for daycare, education, and transportation. The residents of Marguerite's Place will meet with the individual case managers on a daily basis to ascertain success in receiving this assistance.

Nashua Pastoral Care Center, Inc., offers several programs for those facing homelessness: Transitional Housing for single mothers with children; administers the Housing Security Guarantee Program which provides security deposit loans to income eligible families with no interest assessed; provides rental guarantee vouchers to provide incentive to landlords to rent to a homeless family, vouchers guarantee the landlord three months worth of fair market rent if they rent to this population; provides intervention with rent arrearages, utility disconnections, home heating fuel.

Southern NH HIV/AIDS Task Force assists with rental and utility assistance while helping clients connect with affordable housing programs.

Southern New Hampshire Services, Inc. – Through aggressive Street Outreach, helps the unsheltered homeless receive services within the Nashua CoC.

F. Housing Activity Chart

(Although you may require multiple pages to respond to this item, your response will count as only one page towards the 30-page limitation.)

Fundamental Components in CoC System -- Housing Activity Chart								
Component: <i>Emergency Shelter</i>								
Provider Name	Facility Name	Geo Code <input type="checkbox"/> *	Target Population		Bed Capacity			
					Individuals		Families with Children	
Current Inventory			A	B	2002	2003	2002	2003
Bridges	Undisclosed for confidentiality	331026	FC	DV	5	5	12	12
Community Council of Nashua, Inc.	Crisis Center	331026	SMF		10	0	0	0
Harbor Homes, Inc.	30 Allds Street	331026	SMF		1	1	0	0
Harbor Homes, Inc	Maple Arms	331026	SMF		5	14	4	13
Harbor Homes, Inc	14 Amherst Street	331026	SMF		5	5	0	0
Nashua Soup Kitchen & Shelter, Inc.	Ash Street and Kinsley Street Shelters	331026	FC		14	14	16	16
GNCA, Inc.	Keystone Hall	331026	SMF		4	4		
Subtotal					44	43	32	41
Under Development								
Nashua Advocacy Group	TBD	331026	SMF			4		2
Subtotal						4		2
Component: <i>Transitional Housing</i>								
Provider Name	Facility Name	Geo Code <input type="checkbox"/> *	Target Population		Bed Capacity			
					Individuals		Families with Children	
Current Inventory			A	B	2002	2003	2002	2003
Bridges	Undisclosed for confidentiality	331026	FC	DV	1	1	2	2
Soul Purpose	New Searles Road	331026	SMF		0	7	0	0
Greater Nashua Council on Alcoholism, Inc.	Keystone Hall	331026	SMF		24	24	0	0
Nashua Soup Kitchen & Shelter, Inc.	86 Chestnut Street/29 Kinsley Street	331026	FC		0	0	12	12
Marguerite's Place, Inc.	Marguerite's Place	331026	SF		0	0	23	23
Pastoral Care Center	Norwell Home and Transitional Housing	331026	SF		0	0	36	53
Subtotal					25	32	73	90
Under Development								
Soul Purpose	TBD	331026				0		7
Subtotal						0		7

Component: *Permanent Supportive Housing*

Provider Name	Facility Name	Geo Code	Target Population		Bed Capacity			
					Individuals		Families with Children	
Current Inventory			A	B	2002	2003	2002	2003
Harbor Homes, Inc.	PH1 (Maple Program)	331026	SMF		15	15	0	0
Harbor Homes, Inc.	All other sites - PH2, PH3, PH4, PH5, Allds Street, Winter Street, Chestnut Street, Mainstream	331026	FC		141	141	129	129
Southern NH Services, Inc	Mary's House	331026	SF		40	40	0	0
MP Housing, Inc..	MP Housing	331026	SF		0	0	0	8
Subtotal					196	196	129	137
Under Development								
MP Housing	Scattered Sites	331026	SF			0		9
Harbor Homes, Inc.	Section 811, Scattered Sites	331026	SMF			7		6
Subtotal						7		15

4. Continuum of Care: Housing Gaps Analysis Chart

		Current Inventory in 2003	Under Development in 2003	Unmet Need/ Gap
Individuals				
Beds	Emergency Shelter	43	4	2
	Transitional Housing	32	0	3
	Permanent Supportive Housing	196	7	3
	Total	271	11	8
Persons in Families With Children				
Beds	Emergency Shelter	41	2	54
	Transitional Housing	90	7	149
	Permanent Supportive Housing	137	15	63
	Total	268	24	266

4. Continuum of Care: Homeless Population and Subpopulations Chart

Part 1: Homeless Population	Sheltered		Unsheltered	Total
	Emergency	Transitional		
1. Homeless Individuals	43	32	227	302
2. Homeless Families with Children	14	30	151	195
2a. Persons in Homeless Families with Children	41	90	403	534
Total (lines 1 + 2a)	84	122	630	836
Part 2: Homeless Subpopulations	Sheltered		Unsheltered	Total
1. Chronically Homeless	133		151	284
2. Seriously Mentally Ill	190			
3. Chronic Substance Abuse	174			
4. Veterans	17			
5. Persons with HIV/AIDS	15			
6. Victims of Domestic Violence	87			
7. Youth	339			

5. Methods used to Collect Information for the Housing Gaps Analysis and Homeless Population/ Subpopulation Charts

- a. Data sources, methods and counts used for filling out the "Current Inventory" and "Under Development" columns in the Gaps Analysis chart:

The method of collecting data for the Gaps Analysis Chart "Current Inventory" and "Under Development" sections was completed through surveys developed by the Data Analysis Committee. A detailed survey form, along with a cover letter providing an explanation and instructions for completing the form was mailed to agencies in the Greater Nashua CoC region. Such agencies included housing providers for homeless persons and families, police departments, hospitals, local welfare departments, schools, mental health providers, substance abuse treatment providers, and other local nonprofit service providers plus other agencies that provide basic necessities to low income and homeless individuals and families. Agencies were asked to provide numbers for current inventory of shelter/housing for 2003 and any additional resources under development for the future, including types of shelter/housing provided or planned (emergency shelter, transitional housing, permanent supportive housing). The inventory data

collected from the surveys was cross-referenced with additional data collected on the surveys regarding the different categories of individuals and families sheltered and unsheltered to calculate unmet need.

Data Source	Method	Date of Data Collection	Street Count (number)	Shelter Count (number)
Shelter/transitional/supportive housing providers	Completed mail survey of phone and walk-in requests and head counts, numbers reported are result of actual head count; form included question on units under development	Noon, May 19, 2003 to noon, May 20, 2003		596
Outreach providers	Street count	Noon, May 19, 2003 to noon, May 20, 2003	66	
Other (Welfare, Police, Schools, Upper Room, Salvation Army, Catholic Charities)	Completed mail survey of phone & walk-in requests, numbers reported are result of actual head count; form included question on units under development	Noon, May 19, 2003 to noon, May 20, 2003	173	

b. **Greater Nashua CoC's definition of emergency shelter and transitional housing.**

Emergency Shelter: A community-supported place where an individual or a household who for economic reasons or other crisis situations finds themselves without a home can spend the night for a short period until such time as a more permanent place to live can be found.

Transitional Housing: A community-supported place that provides housing and programmed supportive services for a period of up to two years to individuals and households who have suffered economic or other crisis. The goal of our transitional housing programs is to prepare these individuals and households through the development of human, social and financial assets so that they can live independently and integrate into normal community life.

c. **Data sources and methods identified in Part 1 Homeless Population and Subpopulations Chart:**

Greater Nashua CoC's process and methods for collecting the data, including the reason(s) *we* chose these methods:

The first step in the process of data collection was to identify a specific point in time to count the number of homeless in the Greater Nashua area. In an effort to avoid duplication of counts, the CoC chose a **point-in-time of noon, May 19, 2003 to noon, May 20, 2003**, the date consistent with the date used to conduct homeless counts in the other continua within the State of New Hampshire. The Data Analysis Committee identified agencies in the Greater Nashua Continuum of Care catchment area that serve homeless persons and/or were likely to encounter homeless persons. Such agencies included housing providers for homeless persons and families, police departments, hospitals, local welfare departments, schools, mental health providers, substance abuse treatment providers, and other local nonprofit service providers plus other agencies that provide basic necessities to low income and homeless individuals and families. Although some of our contact agencies do not provide direct service (i.e. housing) because they often provide referrals to homeless programs, we have long been aware that they are often the primary contact for homeless individuals or families.

As described above, a detailed survey form, along with a cover letter providing an explanation and instructions for completing the forms was mailed to each identified agency in order to: (1) gather data necessary to complete the HUD "point-in-time" Gaps Analysis Chart as accurately as possible, and (2) differentiate between homeless persons counted through the use of unique identifiers in order to avoid having the same homeless person being counted twice. The CoC Housing Needs & Data Committee count can be traced to documented data in order to address possible duplication. This was achieved by requesting the following categories of information: Head of Household Initials, # of adults, # of children, subpopulation, support services requested, and support services provided. Determination of whether a household or individual would be categorized as chronically homeless was made by the responding agencies, according to HUD's definition of *Chronically Homeless* provided on the survey forms and reported back to the CoC Housing Needs & Data Committee.

Forms and cover letters were sent out to the identified agencies about one-week prior to the May 19, 2003 homeless count. Most agencies were already aware of the purpose and method of the homeless count; those that were unfamiliar were invited to call key contacts from the CoC Housing Needs & Data Committee. Several calls were received. Follow-up calls were placed

between June 2 and June 6 after a review of the returned requests as well as those agencies from which no response or incomplete data was received. All data was collected and verified by June 11, 2003.

Nashua CoC's Housing & Data Analysis Committee will conduct annual surveys to track data on homeless individuals and families, until such time as the statewide HMIS system is in place and data can be obtained. The Greater Nashua CoC will act as contact entity.

d. Methods used for Part 2 Homeless Population and Subpopulations Chart:

The Greater Nashua CoC determined the number of homeless living on the streets by ensuring that the forms (described above) were mailed to those agencies and programs that provide aggressive street outreach and supportive services to the unsheltered homeless. Once the forms were received, comparisons of the unique identifiers were made, and duplicates eliminated to determine an accurate number of homeless street persons on May 19 to May 20, 2003. Additionally, members of the Greater Nashua CoC searched the alleys, woods, bridges and parks that are known to be inhabited by homeless persons who are not in shelters. This count reflects individuals/families who are homeless by the HUD definition; it does not include those that are doubled-up or living with family and friends. Since the point-in-time count represents merely a "snapshot" of one night, and the Greater Nashua CoC strictly adhered to HUD's rules for taking the count, key stakeholders strongly believe that the homeless population in this area has been underestimated and does not reflect the "true" needs of the community. There are many homeless and chronic homeless people living in over-crowded situations, moving from family to family and/or friend to friend (jeopardizing their hosts' housing as well).

e. Community's plans for conducting an annual update of the Fundamental Components of CoC System Housing Activity Chart:

As part of the annual point-in-time survey, the CoC Housing Needs & Data Committee will poll agencies regarding their total number of beds/units currently available to shelter the homeless, as well as to review beds/units under development. The data will then be tabulated in the format required by the CoC Application at least annually or as required.

f. Greater Nashua's plans for conducting regular point-in-time counts of the homeless using the resources available in the community.

The Greater Nashua CoC plans to conduct a homeless point-in-time count on an annual basis until such time that the HMIS data has proven to reflect a complete and accurate count. We will continue coordinating the date of the count with the other continua in the State. The CoC also hopes to coordinate data gathering methodology with other continua to reflect accurate comparisons across the State. In the future, during the week prior to the count, surveys (similar to those used over the past few years, but modified to reflect the CoC Application requirements) will again be mailed out to agencies in the greater Nashua area that are likely to provide services to the homeless and/or are likely to encounter homeless persons/families on any given day. The surveys will again ask for information needed to complete the Gaps Analysis chart. Reminder calls and follow-up calls will also be placed to maximize the number of responses returned. As HMIS goes fully on line, we will be comparing data between street/shelter/provider count and that reported by HMIS. The Housing Needs and Data Committee nevertheless will continue to conduct an annual point-in-time count by current methods, until that function is proven to be accomplishable through HMIS supplemented with a street count.

The CoC Housing Needs and Data Committee will continue to meet as required to assess the needs of the chronic homeless and other homeless persons (as well as any potential affordable/low cost housing developments in the community). The CoC Housing Needs and Data Committee, consisting primarily of homeless service providers, will continue to assess the needs and trends seen in daily shelter operation.

6. Homeless Management Information System (HMIS). (Your response to this item will not count towards your 30-page limitation.)

a. Describe in a brief narrative your Continuum of Care (CoC) strategy to implement an HMIS.

The New Hampshire Statewide Homeless Management Information System (HMIS) Project is a joint effort of all three Continuums of Care serving the homeless/chronic homeless of New Hampshire. The three Continuums are Greater Nashua Continuum of Care, Balance of State Continuum of Care, and the Manchester Continuum of Care. In 2002 the three Continua agreed to support a single statewide HMIS project, to be implemented by the NH Homeless Hotline. At the time of this

application, that project is in the Technical Submittal process and thus not operational. The Homeless Hotline is a program under NH Help Line, a 24-hour/365 day a year information and referral service administered by Community Services Council of New Hampshire (CSCNH). CSCNH is the umbrella nonprofit organization that oversees the HMIS Project. As part of the Homeless Hotline, NH Help Line also provides crisis intervention for homeless/chronic homeless and potentially homeless throughout the entire state. The nationally certified intake and referral specialists at NH Help Line currently work with shelter staff within the state. The NH Help Line program also has the existing infrastructure to support a statewide HMIS implementation. The partnership of the three New Hampshire Continua, combined with the existing resources of the NH Homeless Hotline, provides an economy of scale to the project and a cost saving to all stakeholders.

New Hampshire's three Continua (Greater Nashua, Manchester, and Balance of State) already work collaboratively to assist the state's growing homeless population. However, there has not been a consistent means of tracking homeless persons across a substantial array of homeless providers. Implementation of a statewide HMIS system allows several key improvements in current services and the data collected on utilization of these services. These include:

Improvements for Homeless Individuals and Families

- Streamlined intake and referral processes;
- Decrease in duplicative intakes and assessments conducted when seeking multiple services;
- Increased awareness of services through linkages with information and referral components.

Improvements for Providers of Homeless Services

- Simplified reporting procedures;
- Increased awareness and access to open emergency beds and shelter;
- Tracking and monitoring of client needs and utilization;
- Information and Referral – increase tied to programs and services available for a variety of needs;
- Increased support with 24/7 live-voice assistance for provider staff during nights, weekends and holidays;
- Ease of access to data and reports on homeless needs and provider utilization, useful for funders, boards and community partners.

Improvements for Community Planning and Development

- Collection of unduplicated counts of homeless clients;
- Collection of client-specific data on age, location, disabilities, etc.;
- Identification of service gaps and priority needs.

Based on HUD evaluations, system demonstrations in New Hampshire, and consultation with other statewide HMIS projects, New Hampshire selected the Service Point TM software package for this important project. Service Point TM offers an internet-based, on-line capacity to enter and distribute client-specific data and referral information. Such on-line capabilities offer homeless providers a low-cost and low-maintenance application capable of sending and receiving large quantities of encrypted data to a centralized, secure database across available Internet service provider networks. This coordinated data collection system will allow unduplicated counts of homeless clients across multiple homeless providers throughout the state, simplified reporting, and a streamlined referral process.

Other important characteristics of the HMIS Project in New Hampshire include:

- A single central server location within the State to serve all three NH Continua;
- Acquiring and providing standard computer workstations to ensure uniform on-line connectivity to all participating HMIS provider locations;
- Utilizing and upgrading existing systems at NH Help Line/Homeless Hotline as a lower cost option for HMIS project management;
- NH Help Line/Homeless Hotline will provide project management, technical assistance, and training for provider locations.

b. Please check one of the following which best reflects the status of your CoC in having a Continuum-wide HMIS

- The CoC has not yet considered implementing an HMIS.
- The CoC has been meeting and is considering implementing an HMIS.
- The CoC has decided to implement an HMIS and is selecting needed software and hardware.
- The CoC has implemented a Continuum-wide HMIS.
- The CoC has implemented, but is seeking to update or change its current HMIS.
- The CoC has implemented, but is seeking to expand the coverage of its current HMIS system.

c. If your CoC has already implemented or is seeking to update or expand its HMIS system, identify in the table below how many of the Current Inventory in 2003 beds listed on your Housing Gaps Analysis chart are included in the CoC's HMIS and are currently providing data on clients into the system. For each Current Inventory in 2003 Housing Activity category, indicate the number of beds that are providing client level data into the HMIS and the percent of coverage for that category. For example: there are 100 beds in the Current Inventory in 2003 for the Individuals/Emergency Shelter category and client level data into the HMIS are provided for 60 of these beds. Place 60 beds/60 percent in the following chart for the Individuals/Emergency Shelter category.

NOT APPLICABLE

	Current Inventory in 2003 Beds/Percentage Providing Client Data into HMIS	
	Individuals	Families
Emergency Shelter	____/____	____/____
Transitional Housing	____/____	____/____
Permanent Supportive Housing	____/____	____/____

7. Priorities.

- a. See *Continuum of Care: Project Priorities* Chart on Page 25.
- b. Describe the methods you use to determine whether projects up for renewal are: (1) performing satisfactorily and (2) effectively addressing the need(s) for which they were designed.

The following methods, while not all inclusive, are used to determine satisfaction performance and effectiveness of a program:

- Annual Progress Report (APR) data is reviewed to measure and track project outcomes through increase in skills, income and self-sufficiency;
- Client access to mainstream resources;
- Monitoring a client's progress in the program through an Individual Service Plan (ISP). The local community mental health center and the client in conjunction with multiple agencies, including the residential provider develop this plan. The ISP includes clinical, mental health, and other services;
- Resident/client input with staff and case management through resident or other meetings, communication with a client's family. A Consumer Satisfaction Survey (CSS) is conducted every other year by impartial individuals (usually college interns) with clients to evaluate where they live and the services they receive.
- Annual reviews are performed by regulatory bodies such as independent auditors, the NH Division of Alcohol and Drug Abuse Prevention and Recovery, Housing & Urban Development, NH Division of Mental Health & Developmental Services, City of Nashua, and United Way of Greater Nashua. These evaluations consist of quantifiable housing, support groups, numbers served, source of referral, number of units of service, etc.;
- Reduction in hospitalization of mentally ill population; New Hampshire Hospital performs census recidivism tracking to and from the hospital as well as other institutions; and diminished recidivism rate in the court system. The courts notify the community mental health center, the residential provider, and other appropriate agencies which can be an indication of the effectiveness of the program;
- Internal controls (i.e. intake, assessment, progress notes, referrals) which are reviewed on a monthly basis by Supervisor, Client Services, and Program Manager

- c. Describe how each project proposed for funding will fill a gap in your community's Continuum of Care system. *(Although you may require multiple pages to respond to this item, your response will count as only one page towards the 30-page limitation.)*

The following *renewal* plus *Bonus* projects are included in the Greater Nashua's CoC HUD application. The descriptions below provide details as to how these projects fill a gap in Greater Nashua's homeless/chronic homeless system. The projects are listed in the order that they have been prioritized.

Priority 1 (Bonus Project): MP Housing, Inc. [new]: *This is a SHP Permanent Supportive Housing for Homeless Women with Children.*

This proposed program of permanent housing by MP Housing, Inc. will provide at least two more units of affordable, safe, permanent supportive housing for homeless women and children who suffer as a result of mental illness, substance abuse, dual diagnosis and/or HIV/AIDS in the Greater Nashua area. As demonstrated over and over again across the nation, the lack of permanent, affordable housing is at a crisis level. The survey taken for the "point in time" chart shows that the Nashua Continuum of Care has a need for 63 units of permanent housing. MP Housing has been providing permanent housing to homeless women and children since 2000. The services to be provided in conjunction with this permanent housing program are supported by case management, at no cost to HUD. This proposal will add to the proposed number of permanently, affordable housing units for this population. The families who are presently in these permanently affordable housing units are provided with case management, Day Care and other accesses to mainstream resources. The Waiting List for such affordable housing is in the hundreds and the lack of units available just exacerbates the problem. This lack of housing, coupled with the loss of higher salaried occupations and the cost of rental housing all contribute to this crisis. This proposed project will help to fill this much-needed gap for permanent housing for homeless women and children

Priority 2: Harbor Homes, Inc. Permanent Housing 3 (PH3) [renewal]: *This is a SHP Permanent Housing Project for Persons with Disabilities.*

The PH3 Program, established in 1995, consists of three integrated components: a 5-bed Safe Haven, 28 units of leased permanent housing (available in scattered single, double, and family units throughout the greater Nashua area), supportive services, and an employment supported services program (ESP). The subpopulation served in the PH3 project are chronically homeless or homeless, and include individuals/families who have severe mental illness, chronic substance abuse, are dually-diagnosed, have HIV/AIDS or related diseases, are victims of domestic violence, women and children, and veterans.

The 5-bed Safe Haven provides a point of entry for fragile homeless and chronically homeless individuals with mental illness who are outside the existing network of community supports and services. *The PH3 Safe Haven is the only safe haven in New Hampshire.* Since 1995, 93 formerly chronically homeless individuals have passed through the Safe Haven and moved onto more permanent housing.

The PH3 Program presently has 30 units of permanent housing, scattered apartments serving 69 individuals (including significant others and children). Supportive services are a core component in the PH3 Program. These services assist participants in identifying their individual needs and in establishing personal goals, working toward increased self-sufficiency, improved skills, and better management of their mental health issues. The PH3 staff coordinate with existing mainstream resources and other area service providers to help individuals meet their goals, and support the participant's individual goals such as community involvement, potential employment, and recreation skills.

The employment-supported services program (ESP) prepares participants for gainful employment by providing supervision and support in a number of "real work" situations. Other than Harbor Homes and its affiliate agencies, this employment program has contracts with several other nonprofit agencies providing, but not limited to, services in cleaning, landscaping, maintenance, painting and repairs. Offering the opportunity for individuals to learn practical job skills while engaged in paid employment enables them to move closer to the goal of increased independence.

Recognizing that everyone should have a home or safe permanent housing, that people need to have hope and feel good about themselves – that they *can* make a difference in their lives, and that they need a job to sustain themselves (and their families), the PH3 Program was designed as a 'total package' – one component does not exist without the other. This Program is one that fills a gap in the greater Nashua area for this subpopulation.

Priority 3: Nashua Soup Kitchen & Shelter, Inc. Employment Advocacy Project [renewal]: *This is a SHP Supportive Services Only Project.*

The Nashua Soup Kitchen & Shelter, Inc. (NSK&S) Employment Advocacy Project is filling the gap that exists between homeless and chronically homeless individuals and families, and obtaining an income that affords the opportunity to acquire and maintain permanent housing. By providing opportunities to obtain GEDs, high school diplomas, language skills, technical training, college courses, textbooks, transportation, resumes, job leads, voicemail, state-issued picture ID cards, driver's licenses, and to remove other barriers to employment, the rate of recidivism in homelessness is reduced.

Four emergency shelters and six transitional housing programs have access to and regularly refer their clients to this project, with over 550 homeless individuals receiving assistance to increase their income through training, employment, and mainstream resources over the six years this project has been in place.

Without this project, hundreds of formerly unemployed, homeless and chronically homeless members of our community would not have had the resources to gain the skills, education, and subsequent income that has kept them from returning to homelessness.

Priority 4: Marguerite's Place, Inc. Transitional Housing for Homeless Women with Children [renewal]: *This is a SHP Transitional Housing Project.*

Marguerite's Place has been committed to providing support in the form of intensive case management, Day Care and After Care services to homeless women and children. Marguerite's Place is the only transitional housing program with on-site Day Care for the children. Together with the residents, the case managers establish short and long-term goals, review strengths and challenges and detail responsibility for each. An Individual Action Plan is established to encompass both larger goals with smaller more immediate goals to be achieved. The case managers accompany and assist the residents in accessing the mainstream resources in the community. The case managers and residents maintain linkages with agencies providing permanent housing, education/training programs, job placement and retention programs. In addition the case managers assist with informal counseling and direction recovery programs, mental health programs, legal and health benefit programs. After Care is provided for each resident when they move into permanent housing in the form of case management and Day Care. The After Care is funded by HUD for only a period of six months and Marguerite's Place through grants, and other fundraising efforts subsidize the remainder of the After Care program. If this renewal is not funded, there would be an increase of 72 women and children homeless each year.

Priority 5: GNCA, Inc. - Keystone Hall Transitional Housing for Homeless Addict and Alcoholics [renewal]: *This is a SHP Transitional Housing Project.*

Keystone Hall's (KH) mission is to empower the chemically dependent person to take responsibility toward recovery through professional counseling in a caring environment. KH is the only alcohol and other drug treatment agency in the greater Nashua area that provides services specifically to people who are poor, homeless, and indigent, regardless of their ability to pay. In addition, KH is one of the only agencies in the State of New Hampshire that provides services to people who suffer from dual diagnosis (addiction as well as mental illness). Both of these services address serious areas of concern within the communities in the Greater Nashua Continuum of Care. Dually diagnosed and chronically addicted people make up the majority of people who are chronically homeless, and are specifically targeted by the federal government in their plan to eliminate chronic homelessness by 2012.

The Transitional Living Center (TLC) is a program that is designed to maintain a safe, sober lifestyle while providing assistance to homeless and chronically homeless addicts and alcoholics who need help in finding a job, learning basic life coping skills, and in locating affordable housing. An average stay is 6-12 months. This may be extended when individual needs indicate a longer stay such as completing goals (i.e. a GED) or the unavailability of affordable housing. This program currently serves 10-12 males and females.

The recent "point-in-time" survey conducted on May 20, 2003 by the Greater Nashua Continuum of Care reported in the greater Nashua area that there were 174 known chronic substance abusers. Loss of HUD funding would create a significant gap, leaving a despairing and vulnerable subpopulation in our communities with nowhere to go.

Priority 6: Harbor Homes, Inc. Permanent Housing 2 [renewal]: *This is a SHP Permanent Housing for Persons with Disabilities Project.*

The Permanent Housing 2 (PH2) Program fills a gap identified by the Greater Nashua Continuum of Care. In existence since 1990, this program focuses on providing a stable living environment to previously homeless/chronic and other homeless individuals/families living with serious mental illness. Eligibility for this program is based upon being homeless, having a mental illness, and meeting the HUD-defined Very Low Income Limit for the Nashua, NH area.

Housing is available in scattered single, double, and family units throughout the greater Nashua area to accommodate an individual's need and choice, and will take into consideration factors such as access to public transportation, proximity to needed support services, schools (if necessary), handicap accessibility, safety and affordability of the unit.

The PH2 Program provides support services allowing for program participants to live as independently as possible in locations of their choosing while increasing life skills and income to allow for greater self-determination. With one-on-one staff support, program participants are able to better cope with the symptoms of their mental illness that otherwise interfere with their ability to function independently in the community. Program staff assists participants in applying for, and more importantly, reapplying and maintaining eligible benefits, such as Medicaid, Social Security, and Welfare; while at the same time, accessing other necessary

community-based supports and resources. These community supports include, but are not limited to, staff support, peer support, the Gathering Place (a mental health consumer-operated social club), Operation Brightside (a six-week summer employment program sponsored by the City of Nashua), food pantries and the Salvation Army.

By attacking the root causes of homelessness, it is hoped that the cycle will be broken and will ultimately progress to eliminating homelessness altogether.

Priority 7: Harbor Homes, Inc. Permanent Housing 4 [renewal]: *This is a SHP Permanent Housing for Persons with Disabilities Project.*

The Permanent Housing 4 (PH4) Program fills a gap identified by the Greater Nashua Continuum of Care. The PH4 program was established in November of 2000 to offer safe, affordable housing with effective support services for individuals and families who are homeless, with little or no income, and have an active mental illness or a dual diagnosis of mental illness with a co-occurring illness such as HIV or substance abuse.

Housing is available in scattered single, double and family units throughout the greater Nashua area to accommodate an individual's need and preference. (Two families in the program reside in the town of Milford.) The PH4 program places people near work and support services that they may need. Accessibility for the physically handicapped is also considered. The PH4 Program presently has 10 units of permanent housing serving 14 individuals (including children and other adults)

The PH4 program staff has assisted each resident in identifying individual needs and establishing personal goals by coordinating with existing resources and service providers to attain these objectives. Every effort has been made to utilize all mainstream resources that a resident may be entitled to and has an interest in pursuing.

It is hoped that this type of permanent housing with supports will enable disabled people to find a nice place to live and ultimately develop the skills needed so that they may never become homeless again.

Priority 8: Southern New Hampshire Services, Inc. Homeless Outreach Initiative [renewal]: *This is a SHP Supportive Services Only Project.*

Southern New Hampshire Services Homeless Outreach/Case Management Project provides intervention, referral, case management and advocacy services primarily to the unsheltered homeless, both chronic and other homeless. Most often, this service is the first step toward engaging the unsheltered homeless in obtaining available services within the Greater Nashua Continuum of Care system and, thereby, transitioning the homeless to both supportive and independent permanent housing. It, in essence, begins the continuum of services designed to lead a chronic homeless person to permanent housing and self-sufficiency. It is the only program in Nashua funded by HUD through the Continuum of Care specifically for the provision of homeless outreach/case management.

This project targets unsheltered homeless, both chronically and homeless – those living in cars, under bridges, or other places considered uninhabitable. It is important to note that most clients have mental health and/or substance abuse problems. The Outreach Coordinator interfaces with all the other service providers: housing – permanent and transitional, shelters, pastoral care, day centers, and any other appropriate agency.

Priority 9: Homeless Management Information Services (HMIS) [renewal]: *This is a SHP Project.*

The New Hampshire Statewide Homeless Management Information System (HMIS) Project is a joint effort of New Hampshire's three Continua of Care serving the homeless/chronic homeless of New Hampshire. The Homeless Hotline is a program under NH Help Line, a 24-hour/365 day a year information and referral service administered by Community Services Council of New Hampshire (CSCNH). CSCNH is the umbrella nonprofit organization that oversees the HMIS Project. As part of the Homeless Hotline, NH Help Line also provides crisis intervention for homeless/chronic homeless and potentially homeless throughout the entire state. The nationally certified intake and referral specialists at NH Help Line currently work with shelter staff within the state. The NH Help Line program also has the existing infrastructure to support a statewide HMIS implementation. The partnership of the three New Hampshire Continua, combined with the existing resources of the NH Homeless Hotline, provides an economy of scale to the project and a cost saving to all stakeholders.

New Hampshire's three Continua already work collaboratively to assist the state's growing homeless population. However, there has not been a consistent means of tracking homeless persons across a substantial array of homeless providers. Implementation of a statewide HMIS system allows key improvements in current services and the data collected on utilization of these services.

Other important characteristics of the HMIS Project in New Hampshire include:

- A single central server location within the State to serve all three NH Continua;
- Acquiring and providing standard computer workstations to ensure uniform on-line connectivity at all participating HMIS provider locations;
- Utilizing and upgrading existing systems at NH Help Line/Homeless Hotline as a lower cost option for HMIS project management;
- NH Help Line/Homeless Hotline will provide project management, technical assistance, and training for provider locations.

d. **Demonstrate** how the project selection and priority placement process were conducted **fairly and impartially**, and gave equal consideration to projects sponsored by nonprofit organizations.

Shortly after the NOFA 2003 was issued by HUD, an e-mail was sent out to the entire CoC membership inviting anyone to submit new and renewal proposals to the CoC as part of this NOFA process, indicating where information could be received either on the HUD website or at a Greater Nashua CoC NOFA Team member's office. At a previous CoC General Meeting members were invited to submit new proposals, were informed of Nashua's pro rata need dollars, funding priorities, renewals burden, and strategies. A count indicated that there would be nine (9) proposals coming up for renewal in this NOFA year. After review and discussion it was unanimously agreed upon by the membership that, in order not to increase the gaps in greater Nashua, the renewals would take greatest priority. It was also noted that there have been no written complaints concerning the process used in the previous year as to the fairness and impartiality of presentation and ranking of proposals. All agreed it was fair, open, and impartial. The CoC NOFA Team designed a "Project Performance Review Guide" based upon key points that were believed to be important such as type of project and target population served, accessing mainstreaming resources, quality of project plan and outcome measures, demonstration of successful past performance per APR questions 11 and 16. A copy of this Project Performance Review Guide was given in advance to anyone submitting a proposal.

A Special CoC Meeting was called on 6/25/03 for the sole purpose of presenting and prioritizing proposals. Copies of the "Project Performance Review Guide" were distributed to all members present to be used as a *guide*. To give equal consideration to all projects, it was stated that each presenter would be allowed 5 minutes for presentation with a 3-minute question and answer period. A Sportline stopwatch was used to ensure timing fairness to everyone. Per the CoC By Laws, the Chairperson stated that there would be 2 votes per agency (providing that there were two representatives from the agency present) and one vote per individual not representing an agency. A sign in sheet was passed around (as is done at every CoC meeting.) The CoC Chairperson asked if there were any Bonus proposals to be presented. There was only one, MP Housing, Inc. After MP Housing, Inc.'s presentation and question period, a CoC member suggested that since there was only one Bonus project that a voice vote be taken. This was agreed unanimously and so done. MP Housing, Inc. was approved as the Number 1 Priority Bonus project. There were no new projects to be introduced but there were nine (9) renewal proposal projects (each requesting one [1] year funding) which were then presented in alphabetical order followed by the question and answer period. Once completed, there was a review of the ballot process. Once all questions were answered concerning the ballot or the vote to be taken, ballots were distributed by a roll call of names to insure that every qualified member had a vote. (Earlier at this meeting each agency had named their two designated voters who were then checked against the sign-in sheet.) The CoC Chairperson asked if all agency designees and individuals had a ballot. Twenty-four ballots were distributed. A committee of three impartial persons (a bank vice president, a City employee from the Urban Programs Department, and an executive director from a nonprofit agency – none having any affiliation with the presented proposals) counted the votes in the presence of all. The ballots were counted three times. One ballot had to be discarded due to improper completion. Everyone at the meeting was then notified of the ranking decision. The results were also posted on the CoC website.

8. Supplemental Resources.

A. **Project Leveraging** See Leveraging Chart, Page 26.

B. Describe your continuum Care wide strategy to:

(1) IDENTIFY ELIGIBILITY of homeless persons for mainstream programs

Strategy – Intake and Assessment The moment an individual or family begins to access the homeless services system, front line staff, comprised of homeless outreach, intake/assessment, and case management personnel, begin a comprehensive assessment of need to identify persons who are homeless and include a review of all mainstream resources that an individual/family receives or might be eligible for and assist in the referral/eligibility process. In the Greater Nashua area, the provision of services to individuals who are homeless follows a “no wrong door” system of entry. Homeless persons seek services at shelters, welfare organizations, community action agencies, social service agencies, and domestic violence centers. The staff at the point of entry then takes responsibility for conducting an assessment to determine individual needs, provide information about available services, and act as a liaison between local agencies and the homeless individual or family. Case Managers assess needs, and develop a plan incorporating both short-term and long-term goals that will include application and enrollment in mainstream health, social service, employment, and training programs as applicable. Case Managers ensure that clients not yet receiving services are linked with appropriate mainstream resources.

Strategy – Linkages and Technological Innovation Infobank of Greater Nashua, an internet system administered by a CoC member agency at www.info-nh.org is utilized to link homeless persons with mainstream health and social service programs. This system maintains an extensive database of public and private resources including information about each service provider, agency web links when available, a description of services and how to access services. This information may also be obtained by phone system. Another phone system, New Hampshire Help Line is a statewide, 24-hour, 365 day a year telephone service for the people in the state of New Hampshire. Trained & Certified Information and Referral Specialists provide information, referral, assistance, and crisis intervention services utilizing the NH Help Line Resource Database. The NH Help Line Resource Database contains comprehensive information about social service agencies and programs throughout the state of New Hampshire including Mainstream Resources. The State of New Hampshire, Department of Health and Human Services, local office has served as the centralized location for a single application to be obtained and filed for **TANF financial assistance, Medicaid, Children’s Health Insurance Program (CHIP), Title XX Childcare, and Food Stamps**. In December of 1998, The DHHS Division of Family Assistance implemented a new computer system programmed according to the policy of all available financial and medical programs administered by the Division including **TANF and Medicaid, and the SCHIP, Social Services Block Grant Childcare, and Food Stamp** programs. The system is capable of eligibility determination and benefit calculation for all available programs based on demographic information entered with one set of verifications provided by the applicant.

Strategy – Agency Collaboration A Past Chair of the Greater Nashua Continuum of Care is also currently Leader in the State of New Hampshire’s Policy Academy Program focused on overcoming barriers to accessing mainstream services for homeless families with children as well as persons who are chronically homeless. This team, comprised of representatives from the Office of the Governor, the Office of Homeless and Housing Services, and the office of the Commissioner of Health and Human Services, along with community level front line experts, agency leaders and state legislators, has the ability to impact state policies and services and is committed to create and implement a strategic State Action Plan to enhance the necessary linkages to support a seamless statewide service system and to eliminate barriers to the accessibility of services for the homeless in our state. Strategic Action Plans currently in process through the State of New Hampshire’s Policy Academy Program to ensure access to and enrollment in available mainstream resources include: **Building new partnerships** and educating mainstream service personnel with regard to issues unique to the chronic homeless and homeless population such as lack of stable housing, transportation and access to a permanent mailing address and phone, as well as improving outreach efforts with regard to program benefits and eligibility requirements to the homeless. **Improving our business by identifying barriers in state law and policy** to improve the integration and coordination of programs where multiple needs may be addressed at the same time. **Strengthening access to and use of data for program planning, performance monitoring and outcome assessment** to learn what relevant data is available from a range of sources, to obtain a baseline assessment of use of mainstream resources, to determine cross system cost of services for the homeless population, and assist with needs assessment for the chronic homeless population. **Developing replicable pilot programs in New Hampshire** to demonstrate alternate service delivery models for the chronic homeless population.

Strategy – Cross-Training/New Resource Development A TAC sponsored, HUD funded, state-wide training entitled “Making the Most of Mainstream Resources” was held this past December and was attended by the Chair and Co-Chair of the Greater Nashua CoC and several staff from CoC member agencies. This training and accompanying materials were developed in an effort to increase access of valuable mainstream service resources by homeless individuals and families by sharing information about mainstream service resources, how they can assist homeless individuals and families, and how homeless individuals and families can access them. The training also provided a forum for providers of homeless services to connect with providers of mainstream services focusing on issues and needs unique to homeless individuals and families. A Resource Directory was provided with general eligibility requirements for each of the mainstream programs, application processing information, services covered, appeals process information, and identification of a New Hampshire contact person.

(2) Help Enroll them in the following programs for which they are eligible: SSI, TANF, Medicaid, Food Stamps, SCHIP, Workforce Investment Act, and Veterans Health Care

Strategy – Advocacy and On-Going Case Management Homeless providers have learned that simply referring individuals to programs may not be adequate. Often, this strategy requires that an advocate or case manager accompany the individual to the appointment for assistance, assist the client with completing forms and obtaining documentation, providing assistance such as translation, and confirm program enrollment, advocating for clientele as necessary, to ensure that they continue to receive the services for which they are eligible.

The Greater Nashua CoC has three agencies piloting this approach. Positive results have been attained particularly with the identification of key contact persons in the agencies administering mainstream resources to resolve issues, answer questions, clarify information, and remove barriers to services. A proactive approach in assisting homeless persons with enrollment in mainstream resources has proven effective recognizing that many homeless individuals are not service resistant but can be "system resistant".

Generally, the case managers meet with their clients weekly to review goals and progress and the status of benefits. Case Managers also follow-up directly with service providers/agencies in order to monitor the status of applications and ensure that the programs and benefits they have been enrolled in are actually being utilized. This pilot program will be used as a model for other agencies and progress will be reported back to the CoC.

Strategy – Agency Collaboration and Cross-Training The implementation of the Workforce Investment Act (WIA) of 1998, created a new, comprehensive, customer focused workforce investment system with service delivery of multiple programs in one location, the One-Stop Center. NH Works One-Stop Career Centers demonstrate a strategy in place to improve integration and coordination of programs where multiple needs can be addressed at one time while improving outreach efforts and eligibility requirements of several mainstream programs. In May of 2003, New Hampshire Governor Craig Benson and Nashua Mayor Bernard Streeter officiated the grand opening of Nashua's new **NH Works One-Stop Career Center**. The major partners include member agencies of the Greater Nashua Continuum of Care. The Department of Health and Human Services, The Department of Education, Vocational Rehabilitation, Community Action Program/Southern NH Services, The Department of Labor, the Department of Resources and Economic Development, and others work together toward the common goal of improving New Hampshire's economic future. Since the Workforce Investment Act was signed into law, these agencies, who administer the mainstream programs, **TANF, Food Stamps, Medicaid, SCHIP, and Welfare to Work** in the One-Stop center are cross-trained with regard to the programs offered by each of the agencies to improve integration and coordination of programs so multiple needs can be addressed at the same time. It is not uncommon for an individual to be working with several agencies at one time. With releases of information, eligibility verifications can be shared without the client having to duplicate efforts. Partnering among the agencies can occur seamlessly, and additional non-duplicative or dovetailed supportive services can be provided. CoC member agencies participate in the ongoing local One-Stop Team meetings. This allows for an environment where issues unique to the homeless may be shared as well as an environment where mainstream programs may improve efforts to serve the homeless population. With ongoing dialogue and sharing of information, linkages are created both ways, staff at the local One-Stop Center may refer their customers, based on need, to providers of emergency shelter, transitional, permanent, and supportive housing programs and agency staff at shelters and housing programs may assist their clientele, with entry into the local One-Stop system for access to available mainstream services. The providers of other mainstream programs – **SSI and Veteran's Health care** are housed at regional offices. The Case Manager's role in the enrollment process varies based upon the needs of the individual being served, but it is the Case Manager's responsibility to help their clients enroll in the mainstream programs for which they are eligible.

Strategy –Continued Growth in Network and Linkages The HUD funded, state-wide training, "Making the Most of Mainstream Resources" held in December 2003 was attended by staff from CoC member agencies. This training allowed for growth in the area of networking and creating linkages between providers of mainstream services and providers of homeless services. During this training, a Resource Directory was provided with important information regarding each mainstream program, and also identified key contact people, useful websites, and specific efforts in New Hampshire to help homeless persons access services.

(3) Ensure they receive assistance under each of the programs for which they are enrolled

Strategy – Advocacy and on-going case management Consistent follow-up through on-going case management services is a tremendous strength of our existing system and ensures that clients are accessing the services they are enrolled in. Generally, case managers meet with their clients weekly to review goals and progress and the status of benefits. Case Managers also follow-up directly with service providers/agencies in order to ensure that the programs and benefits they have been enrolled in are

actually being utilized. TANF, and Food Stamp recipients must participate in a redetermination of eligibility every four to six months. Recipients of Medicaid and SCHIP must participate in redetermination of benefits at four, six or twelve month intervals. This requires clients, case managers, and advocates, to track dates and maintain critical paperwork. Many agencies have developed systems to ensure that their clients are able to maintain these critical resources including acting as an Authorized Representative for a recipient if needed. Case Managers will question breaks in service and will assist with reapplication if necessary. If a client is denied a benefit, the case manager will review the denial and, if appropriate, assist the client to resubmit an application or file an appeal.

Strategy – Agency Collaboration- Interagency collaborative efforts have also been implemented as a venue to monitor the receipt of assistance. Collaboration between the providers of homeless services and the providers of mainstream resources ensure that clients are receiving the best services they can. In some cases, agencies serving homeless families have participated in co-case management with the case managers or employment counselors providing mainstream services. With releases of information, case management is shared without the client or agency having to duplicate efforts. Partnering among the agencies can occur seamlessly, and additional non-duplicative or dovetailed supportive services can be provided.

Strategy –Technological Innovation Data Warehousing. The New Hampshire Department of Health and Human Services (DHHS) is creating a master data system that will integrate information on health and social service needs and delivery systems.

1- Income Source	2- Adults who exited (all renewals)	3- Source of income at entry	4-% with income at entry	5- Source of income at exit	6- % with income at exit	7- Entry/Exit difference
<i>Example: TANF</i>	854	91	10.7%	126	14.8%	4.1
A- SSI	143	6	4.1%	7	4.8%	.7
B- TANF	143	24	16.7%	25	17.4%	.7
H-Employment Income	143	18	12.5%	69	48.2%	35.7
K. Medicaid	143	27	18.8%	34	23.7%	4.9
I-Food Stamps	143	35	24.4%	40	27.9%	3.5
N-No Financial Resources	143	82	57.3%	14	9.7%	-47.6

These include data and information from the public health arena, personal and family health issues, Medicaid managed care activities, maternal and child health activities, and responses to population surveys. HHS' data warehouse will initially contain Managed Care and related data. Later phases will integrate case-management data, such as eligibility, family, and community service information, which will be linked to the other public health data sets and used for case-management purposes.

C. Participation in Mainstream Programs and Employment Chart

What is the total number of projects represented in this chart? 6

- Information has been updated as some APR's did not include Medicaid when TANF recipients are automatically eligible for Medicaid.

D. Use of other Mainstream Resources. *(Although you may require multiple pages to respond to this item, your response will count as only one page towards the 30-page limitation.)*

Mainstream Resources	Use of Resource in CoC system for <u>homeless</u> persons (e.g. rehab of rental units, job training, etc)	Specific Project Name	\$ Amount or number of units/beds provided with last <u>2 years</u> specifically for the <u>homeless</u>
CDBG	Rental Unit Rehab Technical Assistance with Rehab Home Ownership Training Capital Improvement and Repairs: Supportive Housing for homeless individuals Supportive housing for homeless individuals Transitional housing for homeless women with children Transitional Housing for homeless women with children Orphanage, Transitional Housing for those aging out of system Program support for food, shelter, and case management for homeless individuals and families Outpatient Counseling for homeless individuals Emergency Shelter Services for homeless individuals and families	Housing Improvement Program NHS of Greater Nashua Plus Co. Area Agency Marguerite's Place Nashua Pastoral Care Center Nashua Children's Home Nashua Soup Kitchen and Shelter Keystone Hall Nashua Soup Kitchen and Shelter	\$300,000 Committed \$147,500.00 \$100,000.00 \$11,000.00 \$18,500.00 \$40,000.00 \$34,500.00 \$84,000.00 \$10,000.00 \$53,000.00 \$80,150.00
HOME	City monitors tenant files and rents for all HOME funded projects. There are 12 Transitional units funded through HOME in Nashua	NSKS: 29 Kinsley/86 Chestnut (3) NPCC: 65 Vine (5) and 14 C Street (4)	12 units

Mainstream Resources	Use of Resource in CoC system for <u>homeless</u> persons (e.g. rehab of rental units, job training, etc)	Specific Project Name	\$ Amount or number of units/beds provided with last 2 years specifically for the <u>homeless</u>
Housing Choice Vouchers (only if priority is given to homeless)	<p>NHHFA (New Hampshire Housing Finance Authority) Housing Choice Voucher Administrative Plan gives preference to Homeless Individuals. Homeless is defined using the HUD definition, specifically, those who lack a fixed, regular and adequate night time residence.</p> <p>Transitional Housing programs which provide individual case management services, including service coordination and implementation of Transitional Housing case plans, are also given a preference.</p> <p>Rent subsidy for homeless mentally ill and dually diagnosed individuals</p>	<p>Households with vouchers given homeless preference within the Greater Nashua CoC catchment area</p> <p>Harbor Homes Mainstream Housing</p>	<p>36 Vouchers/households</p> <p>75 Vouchers/Households</p>
Public Housing (only if units are dedicated to homeless)	<p>40 SRO units of Section 8 subsidized permanent supportive housing for Homeless Women</p>	<p>Mary's House</p>	<p>\$474,650.00 (128 individuals served)</p>
Mental Health Block Grant	<p>Provide housing and support services to homeless</p> <p>FEMA grant for food for homeless shelter</p> <p>FEMA grant for food for homeless peer support</p> <p>State Grant-in-Aid support for homeless shelter</p>	<p>Harbor Homes permanent Housing 2</p> <p>Harbor Homes Emergency Shelter</p> <p>Harbor Homes Gathering Place</p> <p>Harbor Homes Emergency Shelter</p>	<p>\$91,065.00</p> <p>\$9,000.00</p> <p>\$10,200.00</p> <p>\$171,408.00</p>
Substance Abuse Block Grant	<p>No funding used for homeless purposes</p>		
Social Services Block Grant	<p>Child Care Development Scholarship Fund Daycare fees for children in homeless families</p> <p>Child Care Development Scholarship Fund child care fees for children in homeless families</p>	<p>Marguerite's Place</p> <p>Nashua Adult Learning Center</p>	<p>\$80,000.00</p> <p>\$40,000.00</p>

Mainstream Resources	Use of Resource in CoC system for <u>homeless</u> persons (e.g. rehab of rental units, job training, etc)	Specific Project Name	\$ Amount or number of units/beds provided with last <u>2 years</u> specifically for the <u>homeless</u>
Welfare to Work	Job Training for homeless persons	Nashua One-Stop Center Services	\$154,000.00 (77 individuals)
State Funded Programs	<p>Transitional Housing for homeless families</p> <p>Security Deposit Vouchers for homeless individuals</p> <p>Housing and Supportive Services for homeless individuals and families</p> <p>Emergency shelter and transitional housing for homeless individuals and families</p> <p>Provide housing and support for homeless shelter- State ESG Grant</p>	<p>Nashua Pastoral Care Center</p> <p>Nashua Pastoral Care Center</p> <p>Nashua Pastoral Care Center</p> <p>NSKS Emergency Shelter and Transitional Housing</p> <p>Harbor Homes Emergency Shelter</p>	<p>\$60,000.00</p> <p>\$35,000.00</p> <p>\$75,000.00</p> <p>\$100,000.00</p> <p>\$26,250.00</p>
City/County Funded Programs	<p>Transitional Housing and case management for homeless women and children</p> <p>Transitional Housing, child care and case management for homeless women with children</p> <p>Security Deposits helping homeless households</p> <p>Food, shelter, and skills training for homeless</p> <p>Provide housing support for homeless shelter</p> <p>Emergency Shelter and food for homeless individuals and families</p> <p>Outreach for persons with HIV/AIDS, homeless included</p> <p>Emergency Services for homeless individuals and families</p> <p>Shelter Costs (hotel rooms) for homeless individuals/families awaiting shelter beds</p>	<p>Nashua Pastoral Care Center</p> <p>Marguerite's Place</p> <p>Nashua Pastoral Care Center</p> <p>NSKS Emergency Shelter and Transitional Housing</p> <p>Harbor Homes Emergency Shelter</p> <p>Nashua Soup Kitchen and Shelter</p> <p>Southern NH AIDS Task Force</p> <p>American Red Cross</p> <p>Nashua City Welfare</p>	<p>\$58,000.00</p> <p>\$10,000.00</p> <p>\$38,500.00</p> <p>\$48,350.00</p> <p>\$2,500.00</p> <p>\$22,850.00</p> <p>\$30,000.00</p> <p>\$20,000.00</p> <p>\$147,248.00</p>

City/County Funded Programs (continued)	Shelter advocacy, and counseling for homeless individuals escaping domestic violence	BRIDGES	\$54,100.00
	Orphanage, children who would otherwise be homeless	Nashua Children's Home	\$37,000.00
	Permanent Supportive Housing for Homeless	Harbor Homes, Inc.	\$67,000.00
	Services for persons in crisis including homeless	Community Council	\$31,726.00
	Child Care program includes homeless in shelters and transitional housing	Greater Nashua Child Care Center	\$23,000.00
Private	Transitional Housing for homeless families	Nashua Pastoral Care Center	\$250,000.00
	Housing and Support Services for homeless individuals and families	NSKS Emergency Shelter and Transitional Housing	\$546,036.00
Foundations	Multiple Foundations - Transitional Housing for homeless families	Nashua Pastoral Care Center	\$200,000.00
	Multiple Foundations -Housing and Support Services for homeless individuals and families	NSKS Emergency Shelter and Transitional Housing	\$77,225.00
	Anheuser-Busch – sponsor painting, clean-up of housing for homeless	Harbor Homes Operation Brightside	\$3,000.00
	Benjamin Cohen Trust- building repairs and maintenance for group home for homeless mentally ill	Harbor homes Permanent Housing 1 program	\$3,500.00
	Nashua Rotary West- tenant rent subsidy for homeless shelter	Harbor Homes Emergency Shelter	\$2,000.00
	Arthur Getz Trust- provide building repairs and maintenance at homeless shelter	Harbor Homes Emergency Shelter	\$2,000.00
	Nashua Rotary – provide tenant rent subsidy for homeless shelter	Harbor Homes Emergency Shelter	\$1,500.00
	Anna Stearns Trust- provide operating funds for homeless housing program	Harbor Homes Permanent Housing 3 program	\$1,000.00
	Agnes Lindsey Trust- provide operating funds for homeless shelter	Harbor Homes Emergency shelter	\$5,000.00
	Amelia Peabody Trust- provide building repairs for homeless shelter and homeless housing program	Harbor Homes Emergency shelter	\$15,000.00

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Continuum of Care: Project Priorities

(This entire chart will count as only one page towards the 30-page limitation)

(1) Applicant	(2) Project Sponsor and Project Name	(3) Numeric Priority	(4) **Requested Project Amount	(5) Term of Project	(6) Program and Component/Type*				
					SHP new	SHP renew	S+C new	S+C renew	SRO new
MP Housing	MP Housing, Inc, Permanent Housing for Homeless Women with Children.	1	\$173,659	3 years		PH			
Harbor Homes, Inc.	Harbor Homes, Inc. Permanent Housing 3	2	\$862,121	1 year		PH			
Harbor Homes, Inc.	Nashua Soup Kitchen & Shelter, Inc. Employment Advocacy Program	3	\$ 59,546	1 year		SSO			
Marguerite's Place, Inc.	Marguerite's Place Transitional Housing for Homeless Women and Children	4	\$ 58,481	1 year		TH			
Greater Nashua Council on Alcoholism, Inc. (GNCA)	Keystone Hall Transitional Housing for Homeless Alcoholics and Addicts	5	\$ 60,083	1 year		TH			
NH Division of Behavioral Health.	Harbor Homes, Inc. Permanent Housing 2	6	\$195,285	1 year		PH			
Harbor Homes, Inc.	Harbor Homes, Inc. Permanent Housing 4	7	\$100,929	1 year		PH			
Southern New Hampshire Services, Inc.	Southern New Hampshire Services, Inc. Homeless Outreach Initiative	8	\$ 32,273	1 year		SSO			
NH Division of Behavioral Health	Community Services Council of New Hampshire NH Statewide Homeless Management Information System Project (HMIS)	9	\$ 12,170	1 year		HMIS			
**Total Requested Amount:			\$1,554,547						

Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Continuum of Care: Project Leveraging

(Complete only one chart for the entire Continuum of Care and insert in Exhibit 1. *This entire chart will count as only one page towards the 30-page limitation*)

Project Priority Number	Name of Project	Type of Contribution	Source or Provider	*Value of Written Commitment
1	MP Housing, Inc.	Program Support Tax Credits	Anheuser Busch Foundation CDFA	\$ 10,000.00 \$400,000.00
2	Harbor Homes, Inc. Permanent Housing 3	Food, fuel assistance, security deposits, case management Intervention, rehabilitation, transitional living for drug & alcohol addicted Food, case management, employment advocacy, meals temporary emergency shelter, meals, holiday food bags, gifts Cash – Client Fees Cash – Production Revenue Cash – Public Support Services – Volunteer Time	Nashua Pastoral Care Center, Inc. Keystone Hall Nashua Soup Kitchen & Shelter, Inc. Harbor Homes, Inc. Harbor Homes, Inc. Harbor Homes, Inc. Harbor Homes, Inc.	\$ 17,000.00 \$ 24,969.00 \$ 3,000.00 \$ 69,588.00 \$153,052.00 \$ 2,000.00 \$ 36,920.00
3	Nashua Soup Kitchen & Shelter, Inc. Employment Advocacy Project	Housing & Case Management Housing & Case Management Housing & Case Management Housing & Case Management Automobiles (6-10 used cars) 12 Voice Mailboxes	Marguerite's Place, Inc. Nashua Pastoral Care Center, Inc. Keystone Hall Southern NH Services, Inc. (Mary's House) Nashua Soup Kitchen & Shelter, Inc. U. S. Cellular	\$ 6,000.00 \$ 4,000.00 \$ 3,000.00 \$ 45,000.00 \$ 10,000.00 \$ 4,320.00
4	Marguerite's Place, Inc.	Residential Fees Fundraising Efforts Program Support Program Support Program Support Program Support Program Support Program Support Program Support	Residents of Marguerite's Place Marguerite's Place, Inc. Religious Groups Anheuser Busch Foundation Madeline Von Weber Trust United Way Program Award Fidelity Trust Barker Foundation BAE Employee Community Fund	\$ 25,000.00 \$ 46,137.00 \$ 3,575.00 \$ 10,000.00 \$ 5,000.00 \$ 23,000.00 \$ 467.50 \$ 5,000.00 \$ 22,450.00
5	GNCA, Inc.	Transportation Mental Health Counseling Life Skills Counseling Outpatient Services Operations and supportive services Outpatient services Operations, supportive services Food	Harbor Homes, Inc. Harbor Homes, Inc. Harbor Homes, Inc. United Way of Greater Nashua State of NH Department of Health & Human Services CDBG – City of Nashua DADAPR FEMA	\$ 5,000.00 \$ 10,000.00 \$ 10,000.00 \$ 25,000.00 \$ 40,000.00 \$ 28,000.00 \$441,320.00 \$ 7,000.00

Project Priority Number	Name of Project	Type of Contribution	Source or Provider	*Value of Written Commitment
6	Harbor Homes, Inc. Permanent Housing 2	Food, fuel assistance, security deposits, case management Intervention, rehabilitation, transitional living for drug & alcohol addicted Food, case management, employment advocacy, meals temporary emergency shelter, meals, holiday food bags, gifts Cash – Client Fees Cash – Medicaid Cash – Public Support Services – Volunteer Time	Nashua Pastoral Care Center, Inc.	\$ 7,500.00
			Keystone Hall	\$ 8,000.00
			Nashua Soup Kitchen & Shelter, Inc.	\$ 5,000.00
			Harbor Homes, Inc.	\$ 48,568.00
			Harbor Homes, Inc.	\$219,469.00
			Harbor Homes, Inc.	\$ 5,796.00
			Harbor Homes, Inc.	\$ 7,910.00
7	Harbor Homes, Inc. Permanent Housing 4	Food, fuel assistance, security deposits, case management Case management Intervention, rehabilitation, transitional living for drug & alcohol addicted Food, case management, employment advocacy, meals temporary emergency shelter, meals, holiday food bags, gifts Cash – Client Fees Cash – Medicaid Cash – public support Services – volunteer time	Nashua Pastoral Care Center, Inc.	\$ 5,000.00
			Marguerite's Place, Inc.	\$ 500.00
			Keystone Hall	\$ 6,000.00
			Nashua Soup Kitchen & Shelter, Inc.	\$ 2,500.00
			Harbor Homes, Inc.	\$ 28,460.00
			Harbor Homes, Inc.	\$ 91,378.00
			Harbor Homes, Inc.	\$ 1,500.00
Harbor Homes, Inc.	\$ 7,910.00			
8	Southern New Hampshire Services, Inc.	Cash	Southern New Hampshire Services, Inc.	\$ 20,000.00

