
Continuum of Care Narrative

1. Greater Nashua's Continuum of Care's accomplishments.

Briefly describe the specific accomplishments over the past 12 months in implementing your Continuum of Care strategy. (Please keep discussion to no more than half a page.)

The Greater Nashua Continuum of Care (CoC) includes the City of Nashua and nine surrounding communities in Hillsborough County with an involvement of over 50 individuals representing shelters, food pantries, transitional housing, permanent supportive housing (nonprofit), food pantries, faith-based organizations, for-profit agencies, businesses, banks, welfare, educational institutions, urban department, youth organizations, federal and state governments, and homeless or formerly homeless people. Through careful planning, implementation, and following the guidelines of the Nashua Consolidated Plan, many of last year's goals were realized (developed additional affordable housing, increased participation from towns in the CoC geographical area and from the business community, and greater involvement in local, state, and national legislative issues concerning homelessness).

Over the past 12 months the Nashua Continuum of Care (CoC) has accomplished the following:

- Advocated for, and received, a \$100,000 trust fund with the City of Nashua to develop affordable housing.
- Formed a sub-committee as assigned by the Nashua Board of Alderman to develop an allocation process for the \$100,000 trust fund to local homeless service providers.
- Advocated for a one million-dollar allocation of EDI funds through the Office of Senator Judd Gregg to create affordable housing opportunities. and participated in the planning process for the allocation of those funds.
- Surpassed our development goal for last year by bringing on line 22 additional affordable/low-cost rental housing units. Created a total of 33 units of housing for homeless/chronically homeless persons.
- Raised government and community awareness by hosting several forums on homelessness in the community with the local newspaper doing a 3-part article on homelessness, attending CoC meetings, talking with homeless/formerly homeless individuals, and service agencies.
- Developed and implemented a strategy for emergency overflow shelter beds for the winter months so that no homeless person would go without shelter.
- Contacted and involved the outlying community welfare directors to greater enhance the local provision of welfare services and assistance to the homeless.
- Developed a strong working relationship with Bank of New Hampshire and increased participation by financial institutions in CoC planning process.
- Enhanced communication among homeless service providers with the Continuum Web page.
- Established strong working relationships with other continua in the state focusing on the development of an HMIS (Homeless Management Information System) for NH.
- As part of a collaboration with the State CoC, participated in the HUD-HHS-VA sponsored Policy Academy to increase access to mainstream services for chronically homeless people in order to eliminate homelessness for this particular group of people.

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

- a. **Identify** the lead entity (i.e., convenor or organization managing the overall process) for Greater Nashua's planning process.

Nashua's efforts to address the issues of homelessness were formalized in 1995 by the creation of the Nashua CoC. The CoC involves nonprofit agencies, service providers, the banking and business communities, faith-based organizations, veterans service agencies, public/private sector and homeless/formerly homeless persons. The CoC members elect a chairperson, vice chairperson and secretary that serve on an annual basis. By-laws were established that are also reviewed on an annual basis.

The Greater Nashua Continuum of Care has three subcommittees – Executive/Strategic Committee, Housing Needs and Data Committee, and Legislative Issues Committee. Of these committees, the Executive/Strategic Committee is the lead entity, made up of nonprofit agencies, service providers, businesses, and homeless/formerly homeless individuals. This committee’s responsibility is to create and develop strategies within the Continuum and the community so that no individual/family will be homeless in the greater Nashua area, with particular attention noted to HUD’s charge to eradicate chronic homelessness within 10 years. This committee coordinates meetings, disseminates information and other planning efforts for tracking progress on goal-action steps, and reports monthly at the general CoC meeting and on the Website.

The Housing Needs & Data Committee tracks the various housing needs of chronically homeless and homeless individuals/families (as well as other subpopulations), advocates for permanent housing, and compiles this data for presentation to the full CoC membership at monthly meetings (on an as-needed basis) and on the Website. Oftimes, sending reports or requesting specific information is completed on the Website or the telephone. Under this committee, several ad hoc committees were formed this past year including the Data Gathering Committee whose mission was to specifically gather, compile, and report the “point in time” homeless count on March 27, 2002. Another ad hoc committee, the Affordable Housing Task Force Committee, took the responsibility of developing an allocation process for the \$100,000 housing trust fund given by the City of Nashua. Minutes are recorded at all of these meetings.

The third committee, Legislative Issues Committee, is responsible for keeping the Continuum members abreast of latest legislative bills concerning homeless/chronic homeless, or any of our other subpopulations, by attending hearings, both local, state, and federal, advocating and reporting to the full Continuum on a regular basis. This committee is very active in communicating this information to the CoC members on the Website.

b. Greater Nashua’s CoC planning process.

The Greater Nashua CoC has been meeting monthly for the last five years and more often if necessary to address the issues of housing for the homeless and to insure a comprehensive provision of wrap-around services to assist the homeless in moving to a state of independence. In our effort to involve the private sector, many of our 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. We have developed a strong working relationship with the Bank of New Hampshire and have had the opportunity to host public forums that educate our communities as to the needs of the homeless and how they can help.

Our CoC planning structure consists of three committees (as mentioned above) - an Executive Committee, Housing Needs and Data Committee, and Legislative Issues Committee. The Executive Committee’s (lead entity) responsibility is to create and develop strategies to eradicate homelessness/chronic homelessness within the greater Nashua area. This committee also coordinates meetings, disseminates information and other planning efforts for tracking progress on goal-action steps, and reports monthly at the general CoC meeting. Written minutes of meetings are distributed at the monthly meetings and posted on the Website. The Housing Needs & Data Committee tracks the various housing needs of chronically homeless and homeless individuals/families (as well as other subpopulations), advocates for permanent housing, and compiles this data for presentation to the full CoC membership at monthly meetings (on an as-needed basis) and posts it on the Website. Minutes are also taken at these meetings. Oftimes, sending reports or requesting specific information is completed on the Website or the telephone. The third committee, Legislative Issues Committee, is responsible for keeping the Continuum members abreast of latest legislative bills concerning homeless/chronic homeless, or any of our other subpopulations, by attending hearings, both local, state, and federal, advocating and reporting to the full Continuum on a regular basis. This committee is very active in communicating this information to the CoC members on the Website.

Through these committees we have been able to develop a long-term strategic plan that includes the most current data and housing needs information while being able to respond to legislative and social issues quickly and with pertinent and appropriate information. This successful planning has resulted in increased availability of mainstream (i.e. non-McKinney) resources for homeless/chronically homeless people

including the successful allocation of \$100,000 trust fund developed by the City of Nashua for the needs of the homeless, advocacy and development of Individual Development Accounts for homeless and low-income clientele, and advocacy and support of a \$1,000,000 allocation of HUD EDI funds through the Office of Senator Judd Gregg to create housing opportunities (acquisition and rehabilitation for permanent affordable housing and transitional housing, reduction of lead paint hazards of rental housing, acquisition of deteriorated and/or blighting buildings). This data gathering was incorporated in a public presentation and call for action made to senior citizens in the RISE Program at Rivier College. In addition, we have identified a need for services for dually diagnosed, chronically homeless clients in our CoC and have begun to develop programs for the provision of services to them. The cohesive nature of the CoC and its subcommittees has afforded us the ability to work together to enhance the resources available to persons with HIV/AIDS in our community. Each of the committees noted above establishes goals with a corresponding timetable and reports regularly to the CoC. Ad hoc committees are formed as needed. An example of an ad hoc committee is the Affordable Housing Trust Fund Committee, created by the CoC at the request of the Mayor and Board of Aldermen for the City of Nashua, to develop a process and recommendation for distributing the City's allocation of \$100,000 for affordable housing in Nashua. The manner in which this committee carried out that charge led the City to request that this committee also oversee the allocation of the \$1,000,000 EDI funds received through the Offices of Senator Gregg.

Each of the three committees regularly monitors the newspapers, TV media, federal and state legislatures. In the past year the Greater Nashua CoC has worked with other continua in the State and other groups to coordinate advocacy efforts. For example, a member of the Greater Nashua CoC is also on the Executive Committee of the Board of Directors for the New Hampshire Coalition to End Homelessness (NHCEH). A coordinator has been hired who advocates for homeless/chronic homeless through legislation tracking, attends and testifies at legislative hearings. One of the strengths of the Greater Nashua CoC is our web page (www.nashua-coc.org) which allows for greatly enhanced dissemination of information throughout the CoC in order to more quickly address the needs of the chronic homeless and other homeless individuals and families. Not only does it enhance our ability to address their needs, but it has 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.

c. The dates and main topics of Greater Nashua's CoC planning meetings held since June 2001

Dates	Main Topics
7/11/01	HUD/City annual meeting, invitation to Senators/Representatives Gregg, Sununu, Bass and Smith to attend Continuum meetings. Discussion of scheduled closing of SRO at 23 Temple Street. Southern NH HIV/AIDS Task Force announced receipt of HOPWA Grant.
8/1/01	Matt Leahy/Senator Gregg's office announced that the Senator has targeted \$1,000,000 for Nashua affordable housing. Discussion of use followed. Affordable housing trust fund for Nashua proposed. CoC will support this effort and form a committee to assist in selection criteria.
8/15/01	Affordable Housing Task Force-organizational meeting on City's \$100,000 Trust Fund for Affordable Housing
8/22/01	Affordable Housing Task Force-establishing needs and opportunities in the community
8/24/01	Affordable Housing Task Force-ways of leveraging money/current projects/importance of funding winter shelters
9/4/01	Affordable Housing Task Force-formulated application form
9/5/01	Policy academies for state and local policymakers discussed. Affordable Housing Trust Fund Committee reported after meeting four times.
9/15/01	Affordable Housing Task Force-studied/discussed Status Report on Rental Assistant/ Security Deposit
9/19/01	Affordable Housing Task Force-reviewed short-mid-long term solutions and how to draw up a policy for same
10/3/01	Affordable Housing Trust Fund Committee reported on progress. Have met five times. Discussion of allocating \$15,000 to develop emergency shelter beds for the winter in existing agencies.

Dates	Main Topics
10/3/01	Affordable Housing Task Force-discussed process for applying for funds, format for recommendation to Board of Aldermen
10/10/01	Affordable Housing Task Force-further development of application process and recommendations
11/5/01	Affordable Housing Task Force-forms and letters revised and accepted –ready to pass on to CoC and Board of Aldermen
11/7/01	Emergency Shelter beds established at Harbor Homes and Keystone Hall. Affordable Housing Trust Fund committee reported on progress. Have developed short term and long term plan. Report on Gimme Shelter IV awareness program to be held November 9-10. Senator Pignatelli requested support of the CoC for a legal assistance office in Nashua. CoC offered support.
12/5/01	Affordable Housing Trust Fund Committee reported. The CoC has been asked by the City to assist in the steps for disseminating the funds.
1/9/02	Discussion of partnering with other CoC's to develop an HMIS for the State. Affordable Housing Trust Fund Committee reviewing applications. Gaps analysis discussed and dates for point in time homeless count chosen. Community Awareness day scheduled.
1/22/02	Data Gathering Committee - review form letter to be mailed to agencies and to towns.
2/5/02	Meeting of Data Gathering Committee to review last year's "point in time" homeless count process.
2/6/02	Affordable Housing Trust Fund Committee reviewed four proposals and set an 18-month completion date for projects. Data Committee elected new chair and discussed process for Gaps and Point In Time homeless count this year.
2/19/02	Meeting of Data Gathering Committee to discuss methodology and rationale for "point in time" homeless count. Review of forms and procedures.
3/5/02	Data Gathering Committee meeting to review list to make certain that all potential agencies/towns were included in the "point in time" homeless count.
3/6/02	The Board of Alderman, thanks to the good work of the CoC, will seek an additional \$100,000 trust fund next year for affordable housing by the CoC. Letters to all surrounding towns re: homeless count was reviewed by Data Committee and approved.
3/11/02	Affordable Housing Task Force-discussed properties being taken for back taxes and how this committee could be notified for possible acquisition/use for affordable housing
3/22/02	Data Committee met to compile forms and letters and mail.
4/3/02	Gaps analysis data reviewed from "point in time" survey. Communities identified for follow up calls for count returns. Committees formed to work on CoC application.
4/11/02	Follow up meeting of Data Gathering Committee to review returned forms from "point in time" homeless count and to make follow up phone calls where necessary. Began reviewing data received.
4/22/02	Data Gathering Committee met and reviewed application process and specifically the Gaps Analysis section of the NOFA application.
4/23/02	Data Gathering Committee met again – looked at requirements for NOFA narrative, continued to process data.
5/1/02	Gaps Analysis Chart presented and results reviewed. Prioritizing of project process and pro rata need share for Greater Nashua was discussed.
5/10/02	Data Gathering members met and reviewed data from the "point in time" homeless count.
5/13/02	Data Gathering Committee met continued to review and assimilate data from the "point in time" homeless count.
5/21/02	Data Gathering Committee reviewed narrative, process and organized data from "point in time" homeless count.
5/28/02	Data Gathering Committee met to finalize numbers from data. Made necessary follow up calls for additional data.
6/13/02	Reconvened to discuss \$1,000,000 EDI Grant to create housing opportunities.
6/18/02	Data Gathering Committee met and finalized "point in time" homeless count numbers and explanations for narrative in NOFA proposal.

d. The specific names and types of organizations involved in Greater Nashua’s Continuum of Care planning process. *(Although you may require multiple pages to respond to this item, your response will count as only one page towards the 25- page limitation.)*

Levels of participation are defined as follows:

A **Significant** member of the CoC must regularly attend planning meetings and serve on a minimum of one CoC subcommittee as well as either (1) frequently contribute goods or resources or (2) has or is willing to submit proposals to design and implement programs for the homeless/chronically homeless in the Greater Nashua CoC area.

A **Moderate** member of CoC occasionally attends planning meetings, and contributes effort and resources towards support of Greater Nashua CoC activities.

A **Recruiting** agency/business is one where the CoC is actively pursuing representation through personal visitation, telephone, letters, and informational literature, WebPage.

*Greater Nashua = all communities within the Greater Nashua Continuum of Care area (City of Nashua, Towns of Amherst, Brookline, Hollis, Hudson, Litchfield, Mason, Merrimack, Milford, Mont Vernon)

Column titled Subpopulations Represented: “General” indicates group of people that serves all homeless people, including the various subpopulations, but does not specialize in any one particular group

Specific Names of CoC Organizations/Persons	Geographic Area Represented	Subpopulation Represented, if any* (SMI, SA, VETS, HIV/AIDS, DV, Y)	Level of Participation (activity and frequency in Planning Process)
State Agencies			
Department of Health and Human Services/Division of Family Assistance – Sharon Face/Program Manager	State of NH	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
Veteran’s 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 Director	City of Nashua	General	Significant – regularly attends planning meetings. Member of Housing Needs & Data Committee and Legislative Issues Committee
Welfare Department Bob Mack/Director	City of Nashua	General	Significant – regularly attends planning meetings. Member of Housing Needs & Data Committee

Specific Names of CoC Organizations/Persons	Geographic Area Represented	Subpopulation Represented, if any* (SMI, SA, VETS, HIV/AIDS, DV, Y)	Level of Participation (activity and frequency in Planning Process)
Town of Milford – Marie Brown/Welfare Director	Milford	General	Moderate – occasionally attends planning meetings, visitation to appropriate agency as needed
Town of Merrimack –Pat Murphy/Welfare Director	Merrimack	General	Moderate – occasionally attends planning meetings, visitation to appropriate agency as needed
Town of Amherst – Sharon Frydlo/Welfare	Amherst	General	Moderate – occasionally attends planning meetings, telephone/ Website communication
Town of Mont Vernon – Selectmen’s Office	Mont Vernon	General	Recruiting
Town of Hudson – Paul Sharon/Town Administrator	Hudson	General	Moderate – occasionally attends planning meetings, telephone communication
Town of Litchfield – M. P. Jewett/Selectmen’s Office	Litchfield	General	Recruiting
Town of Hollis – Cath Hallsworth/Welfare Director-Administrative Assistant	Hollis	General	Moderate – occasionally attends planning meetings, visitation to appropriate agency as needed
Town Brookline – Noreen Crooker/Welfare	Brookline	General	Moderate – telephone and visitation
Town of Mason – Barbara Milkovits/Administrative Assistant	Mason	General	Recruiting
Public Housing Authorities (PHAs):			
Nashua Housing Authority – George Robinson/Executive Director	Greater Nashua*	General	Moderate – occasionally attends planning meetings
Nonprofit organizations: (includes Faith-Based organizations):			
Adult Learning Center – Diana Owen/Assistant Director	Greater Nashua*	General	Recruiting
Community Council of Nashua, Inc. – Susan Mead, Outreach Coordinator	Greater Nashua*	SMI, SA	Significant- regularly attends planning meetings. Member of Executive/Strategic, Housing Needs & Data, and Legislative Issues

Specific Names of CoC Organizations/Persons	Geographic Area Represented	Subpopulation Represented, if any* (SMI, SA, VETS, HIV/AIDS, DV, Y)	Level of Participation (activity and frequency in Planning Process)
			Committee
Girls Inc. – Cathy Duffy/Executive Director	Greater Nashua*	Y	Moderate – occasionally attends planning meetings, telephone
Grace Fellowship Church – Paul Berube, Pastor	Greater Nashua*	General	Recruiting
Greater Nashua Dental Connection – Kim Anatosiou/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 Gathering Committee
Greater Nashua Interfaith Hospitality Network, Inc. Bob Marks/Community Liaison	Greater Nashua*	General	Significant- regularly attends planning meetings. Member of Housing Needs & Data Committee
Harbor Homes, Inc. – Peter Kelleher/Executive Director	Greater Nashua*	SMI, SA	Significant- regularly attends planning meetings. Member of Executive/Strategic, Housing Needs & Data and Legislative Issues Committees
Keystone Hall – Peter Swenson/Program Director	Greater Nashua*	DD, SA	Significant- regularly attends planning meetings. Member of Executive/Strategic, Housing Needs & Data, and Legislative Issues Committees
Marguerite’s Place, Inc. Sr. Sharon/Executive Director	Greater Nashua*	SA, DV	Significant- regularly attends planning meetings. Member of Executive/Strategic, Housing Needs & Data and Legislative Issues Committees
Lamprey Health Center – Dr. Richard Slosberg/Medical Director	Greater Nashua*	General	Moderate
Nashua Foundation for Mental Health	Greater Nashua*	SMI, SA	Moderate – occasionally attends planning meetings, telephone communication
Nashua Pastoral Care Center – Maryse Wirbal/ Executive Director	Greater Nashua*	DV, SA	Significant – regularly attends planning meetings. Member of

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			Executive/Strategic Committee
Nashua Soup Kitchen and Shelter – Lisa Christie/Executive Director	Greater Nashua*	General	Significant – regularly attends planning meetings. Member of Strategic Planning, Housing Needs and Legislative Issues Committees
Neighborhood Housing Services of Greater Nashua – Bridget Belton-Jetty/Executive Director	Greater Nashua*	General	Significant- regularly attends planning meetings. Member of Housing Needs & Data Committee
Rape & Assault Support Services, Inc. – Wendy Buice/Shelter Manager	Greater Nashua*	DV	Significant – regularly attends planning meetings. Member of Housing Needs Committee, Chair/Data Gathering Committee
Tolles St. Mission – Rev. Peggy Smith	Nashua	General	Recruiting
St. John Newmann Church – Mary Moriarty/Community Liaison	Amherst, Merrimack, Hollis, Brookline, Nashua	General	Significant- regularly attends planning meetings. Member of Legislative Issues Committee
Southern NH HIV/AIDS Task Force – David Picard/Executive Director	Greater Nashua*	HIV/AIDS	Significant- regularly attends planning meetings. Member of Legislative Issues Committee
Southern NH Services, Inc. – Donnalee Lozeau/Development Director	Southern New Hampshire	General	Significant- regularly attends planning meetings. Member of Strategic Planning, Housing Needs and Legislative Issues Committees
Youth Center of Nashua – Kelly Ordway/Director of Development	Greater Nashua*	Y, SA	Moderate - occasionally attends planning meetings, telephone communication
Business/Business Associations			
Anheuser Busch, Inc.	Greater Nashua*	General	Recruiting
Bank of NH – Lori Piper/Vice President	Greater Nashua*	General	Significant – regularly attends planning meetings. Member of Housing Needs & Data Gathering Committee

Specific Names of CoC Organizations/Persons	Geographic Area Represented	Subpopulation Represented, if any* (SMI, SA, VETS, HIV/AIDS, DV, Y)	Level of Participation (activity and frequency in Planning Process)
Citizens Bank – Debbie Miller/Vice President/CRA Officer	NH	General	Moderate – Housing & Data Gathering
Sovereign Bank – Earl Ross/Vice President	NH	General	Moderate
Subaru of Nashua – Dan Xenzing/Owner	Greater Nashua*	General	Recruiting
United Way – Ray Peterson/Vice President Community Assessment and Investment	Greater Nashua*	General	Significant- regularly attends planning meetings. Member of Housing Data Needs Committee
Homeless/Formerly homeless persons:			
6 persons wish to remain anonymous	Greater Nashua*	SMI, SA	Moderate - occasionally attends planning meetings
Other: e.g.: Law Enforcement, Hospital/Medical/Funders			
Betty Winberg/Citizen/ Advocate	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 Committee
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
Fred Britton – Board of Aldermen	Nashua	General	Significant - liaison between Board of Aldermen and CoC - attends planning meetings as available
Matt Leahy – Representative from Senator Gregg’s Office	NH	General	Significant - attends planning meetings as available, Housing & Data Needs Committee
Mark Vattes – Representative from Senator Smith’s Office	NH	General	Moderate – attends planning meetings as available
Mark Sanborn – Representative from Congressmen Bass’ Office	NH	General	Moderate – attends planning meetings as available
St. Joseph’s Hospital	Greater Nashua*	General	Moderate – attends

Specific Names of CoC Organizations/Persons	Geographic Area Represented	Subpopulation Represented, if any* (SMI, SA, VETS, HIV/AIDS, DV, Y)	Level of Participation (activity and frequency in Planning Process)
Mission Effectiveness			planning meetings as available
Southern NH Medical Center – Maryellen Diruso/Director Community Services	Greater Nashua*	General	Moderate – attends planning meetings as available

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

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

- a. The Greater Nashua CoC’s strategy for ending chronic homelessness. (*Your response will not count toward your 25-page limitation.*)

The Greater Nashua CoC’s working definition of “chronic homelessness” follows HUD’s guidelines: an unaccompanied disabled individual who has been continuously homeless for over one year.

- (1) Greater Nashua’s CoC strategy for ending **chronic** homelessness.

The Greater Nashua CoC has worked diligently over the past several years to fashion a long-term vision of eliminating homelessness in our region including chronic homelessness. It has been challenging to address this goal as the chronically homeless often represent the most difficult population to help, with many homeless individuals challenged by severe mental illness, substance abuse problems or physical disabilities that prevent them from achieving gainful employment. The Greater Nashua CoC supports HUD’s ambitious goal of eliminating chronic homelessness within the next 10 years. We have participated as a regional group in formulating strategies to combat this issue.

Our primary goal is to develop more permanent, affordable, low-income housing. By doing so we will be able to more efficiently move the recipients out of homelessness. The larger the inventories of permanent, low-income housing, the shorter the period of time homeless individuals/families will spend in emergency/temporary/transitional housing. Therefore the need for temporary housing will be diminished in direct proportion to the amount of permanent affordable housing available and accessible to chronically homeless people.

It is also critical to have an increased awareness of the extent and societal costs of homelessness at the local, state and national legislative levels, and to maintain a constant dialogue with our representatives to seek solutions and avoid policies that exacerbate the problem of homelessness. To this end we have in the past year had an increased level of involvement by the staffs of our US Senators Gregg and Smith, and Congressmen Bass and Sununu through attendance at CoC planning meetings when available, and communication via the telephone, fax, Webpage and e-mail. On a local level two members of the City of Nashua’s Board of Aldermen have attended general CoC meetings, when possible, have participated on ad hoc committees concerning affordable housing, and were instrumental in initiating \$100,000 to be allocated by the Board of Aldermen to the Greater Nashua CoC for disbursement for affordable housing with the intent that they will again next year request a like amount.

With regular interaction with our representatives at the state level we may work to amend land use/zoning legislation that would remove obstacles that prevent low-income permanent housing from being built in certain communities and/or certain locations in communities. More permanent, affordable, low-income housing will serve to break the cycle of chronic homelessness that occurs throughout our region, the state, and the country.

In addition, the Greater Nashua CoC believes the best approach for alleviating chronic homelessness is through a coordinated community-based process that includes a pro-active approach for direct access to mainstream programs. The chairperson of the Greater Nashua Continuum of Care is also acting as Co-Leader in the State of New Hampshire’s Policy Academy Program. This program is focused on overcoming barriers to accessing mainstream services for homeless families with children as well as persons who are chronically homeless. This team 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 chronically homeless in our community and in our state.

(2) The remaining obstacles to ending chronic homelessness in the Greater Nashua area.

Many obstacles exist to ending chronic homelessness. The primary ones are funding availability, the bureaucracy involved with the actual obtainment of funds and the extensive timeframes involved; and the limited availability of both (1) affordable housing units, and (2) housing development opportunities remaining in the City of Nashua and surrounding communities.

Beyond the housing obstacles, lack of sufficient levels of available treatment programs prevent people from moving upwardly through this homelessness ladder. Specific needs for the chronically homeless population may be different from “homelessness” and must be identified. For example, the “landlord connection” – a database of tenants who have brought action and caused trouble for landlords (i.e. non-payment of rent, damage of property). It is necessary to work via supportive services with these individuals to understand and to help them regain their self confidence and self esteem in order for them to be able to break the homeless cycle, maintain employment, and begin the upward climb to permanent, affordable housing. Hopefully, through the Homeless Management Information System (HMIS) efforts throughout the State will be accelerated with non-duplication of services and statistics (the magnitude) of the at-risk and homeless population to assist not only the chronically homeless but also other homeless individuals and families.

The lack of a living wage prevents many from attaining self-sufficiency. Learning meaningful job skills and earning marketable wages are tools necessary to remain independent and maintain long-term housing. This is an area where collaboration and ongoing communication is essential with our local, state and national representatives, and hopefully their presence at the Greater Nashua CoC meetings, along with our encouragement, perseverance, and attendance at Legislative Hearings will enable them to have a deeper understanding of the needs of the chronically homeless, and the will to endorse suitable living wages.

b. Goals and specific action steps to carry 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 it will be accomplished)
Goal 1: Development of 25 - 30 affordable low-income, permanent housing for persons/families currently in emergency shelters/transitional housing to open up beds for chronically homeless persons	1) Awareness campaign for local legislature and public 2) Enlist support of key Board of Aldermen 3) Encourage housing contractors participation in the CoC 4) Increase annual budget line items from city, state, and federal governments to meet need	1) CoC Legislative Issues Committee 2) Urban Program Director 3) Dave Darling/Habitat for Humanity 4) CoC Affordable Housing Task Force	1) 12/03 2) 2/03 3) 12/02 4) 6/03

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 it will be accomplished)
	within in 10 years 5) Locate suitable sites for development with suitable accessibility to resources	5) Urban Programs Director	5) 3/03
Goal 2: Preserve existing and create more single adult housing (SRO’s) for chronically homeless individuals	1) Work with other agencies and CoC member towns to quantify need, and demonstrate consequences of net loss 2) Determine number of new SRO units needed	1) CoC Affordable Housing Task Force Committee 2) CoC Housing Needs and Data Committee	1) 3/03 2) 5/03
Goal 3: Improve treatment options for chronic homeless persons with alcohol and substance abuse issues	1) Identify specific needs for this population which may be different from other homeless people 2) Advocacy for <i>new</i> treatment dollars at state and federal level/ working with local and state legislators 3) Seek other funding resources 4) Educate communities as to need, recidivism, and reduction of fear of stigma 5) Expand Transitional Living Center by adding one case manager and 4 beds (currently have 10 beds)	1) Keystone Hall 2) CoC Legislative Issues Committee 3) Coc Legislative Issues Committee 4) CoC Executive/ Strategic Committee 5) Keystone Hall	1) 10/02 2) 12/03 3) 12/03 4) 12/02 5) 10/02
Goal 4: Provide counseling/ treatment services to chronically homeless people addicted and perpetrators of domestic violence	1) Develop, implement an offender treatment component at Keystone Hall	1) Keystone Hall	1) 3/03

c. Other Goals and Action Steps to Address Homelessness in the Greater Nashua Area.

Goal: Other Homelessness	Action Steps	Responsible Person/Organization	Target Dates
Goal 1: 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) CoC Legislative Issues Committee	1) 12/03 2) 12/03
Goal 2: Facilitate the movement of homeless individuals/families out of shelters/transitional housing	1) Gather data on length of stay at shelter 2) Assess client needs to move from shelter	1) Shelter/Transitional Housing Directors 2) Shelter/Transitional Housing Directors	1) 12/02 2) 12/02

Goal: Other Homelessness	Action Steps	Responsible Person/Organization	Target Dates
and into permanent housing (thereby creating space for additional chronically homeless/homeless individuals and families)	3) Provide intensive case management to help families move sooner 4) Recruit and expand area landlords to participate in the security deposit and rental guarantee programs specifically established to serve this population	3) Shelter/Transitional Housing Directors 4) Nashua Pastoral Care Center	3) 3/03 4) 6/03
Goal 3: Increase the number of units of affordable, low-cost, permanent housing for the homeless in greater Nashua by 25 - 30	1) Fight the loss of existing SRO's 2) Educate City Aldermen, builders and developers on housing issues 3) Work with City to devise linkage strategy for development with dollars tied to affordable, low- income housing 4) Expand Transitional Housing Program w/purchase of Norwell 5) Relocate portion of transitional housing units to create 2 units of "permanent" housing for homeless women with children 6) Pursue grant opportunities to fund new housing; work with local developers and existing landlords	1) CoC Housing Needs & Data Committee 2) Urban Programs Director 3) CoC Executive/ Strategic Committee 4) Nashua Pastoral Care Center 5) Nashua Pastoral Care Center 6) Habitat for Humanity	1) 12/03 2) 12/03 3) 12/03 4) 9/03 5) 10/03 6) 7/03
Goal 4: Continue to develop and expand employment opportunities, increasing the number of persons gaining, and maintaining, employment	1) Increase outreach capabilities to Harbor Homes Employment Services Program and Signs in a Second 2) Continue with "Operation Brightside" (City summer beautification program) 3) Coordinate with job training programs including workforce development programs	1) Harbor Homes 2) Harbor Homes 3) Southern NH Services	1) 7/03 2) 9/02 3) 12/02
Goal 5: Expand services to non-English speaking persons	1) Intensify advocacy and training in the non-traditional disabilities that we serve/more bilingual staff	1) CoC Executive/ Strategic Committee	1) 7/03

d. The fundamental service components of Greater Nashua's Continuum of Care system currently in place, and any additional services being planned. *(Although you may require multiple pages to respond to this item, your response will count as only one page towards the 25-page limitation.)*

Fundamental Components in CoC System

Component: *Prevention*

Services in place:

Advocacy:

- **Child and 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.
- **Nashua Pastoral Care Center** – Advocacy for single women with children, provide legal rights to tenants.
- **Nashua Soup Kitchen & Shelter** – Provides Hispanic advocacy, referrals and assistance with benefits to get and maintain housing. This year created half-time position, funded entirely with private donations, for advocacy and education regarding systemic problems that drive people into homelessness. Agency advocated and endorsed Living Wage Campaign and advocated on a bill in NH Legislature, which requires insurance companies to cover alcohol and substance abuse treatment. (Bill passed.) Provided information and testimony to the NH Legislature, which resulted in passage of a \$5 million affordable housing bill.
- **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 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, to help maintain housing and health care.
- **Southern NH Services** – advocacy for homeless and chronically homeless persons at local, state, regional and national levels to prevent homelessness.
- **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.
- **Southern NH HIV/AIDS Task Force** – Staff are in the community 2-5 hours per week meeting with individuals at high risk of acquiring HIV. Individuals are connected with information, housing opportunities, testing and services as appropriate. Education presentations for schools and businesses surrounding HIV prevention.
- **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, day care, 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 Operations 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 Department.
- **Nashua Soup Kitchen & Shelter** – Employment and educational assistance in writing resumes, obtaining interviews for meaningful, gainful employment to assist in getting and maintaining housing.
- **NH Employment Security** - Offers job match, recruitment, vocational resources, and programs to promote financial and residential stability.

Food Pantry/Clothing:

- **Catholic Charities:** Corpus Christie, food pantry.
- **Harbor Homes Emergency Shelter** – Food pantry for shelter guests and ‘street persons’ seeking shelter; provides blankets to homeless and chronically homeless in winter time when the shelter is full and there is no place to go.

Fundamental Components in CoC System

Prevention

Services in place:

Food and Clothing:

- **Harbor Homes Gathering Place (consumer-operated social club)** – Provides nutritious meal daily, food at holidays; has annual Thanksgiving Day dinner.
- **Milford SHARE (collaboration of all church denominations in the communities of Amherst, Brookline, Milford, Mont Vernon)** – Run by volunteers, SHARE maintains a large food pantry and provides clothing to help chronic homelessness and homelessness persons/families, low income, or those at risk of homelessness. The churches also hold fund-raising activities throughout the year.
- **Nashua Pastoral Care Center** - A food pantry to assist those who are chronic homeless and homelessness.
- **Nashua Soup Kitchen & Shelter** – Provides a daily meal to those in need and food baskets at holidays.
- **Southern NH HIV/AIDS Task Force** – Food pantry and holiday baskets for individuals and families living with HIV/AIDS.
- **St. John Neumann Outreach** – Maintains a food pantry to help chronic homeless and homeless individuals/families.
- **The Salvation Army** - Food pantry, emergency assistance, clothing, and furniture. Christmas program and church services to promote social and residential stability.

Intervention:

- **Keystone Hall** – Provides a Transitional Living Center, crisis intervention, alcohol and drug treatment.
- **NH Department of Corrections** - Probation and parole, early and ongoing intervention to reduce recidivism.
- **Southern NH Services, Inc.** – Provides homeless outreach services and case management through the Homeless Prevention Program.

Rental:

- **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.
- **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 homelessness and homeless persons.
- **Nashua Pastoral Care Center** - Emergency assistance for back rent, utilities, fuel, security deposit loans to help 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, education apart of Homebuyer Education seminars, as well as delinquency counseling.
- **Southern NH HIV/AIDS Task Force** –Rental and utility assistance to help maintain permanent residence to individuals and families faced with AIDS or HIV.
- **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.

Fundamental Components in CoC System

Prevention

Services in place:

Support Groups – Individuals and Families:

- **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
- **Milford Regional Counseling Services** – Provides low-income, affordable counseling services to rural Milford and surrounding areas .
- **Rape and Assault Support Services** - 24 hour crisis line, advocacy, education through schools, businesses and non-profit groups such as **Boys & Girls Clubs**, support groups, referrals, shelter, crisis intervention, outreach to Hispanic victims, teen clinics. Additional office in **Milford**

Services planned:

- **Community Council of Nashua** (local mental health center) is developing a Diversion Program with the legal and judicial systems for low level offenders with mental illness and/or dual diagnosis.
- **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** plans to continue to provide back rent, utility assistance, and fuel assistance by expanding available funding sources.
- **Rape and Assault Services** is planning a diversity project with cultural composition, expand the shelter capacity, and hold mother/child groups in Spanish.
- **Southern NH HIV/AIDS Task Force** has no initiatives planned as their current outreach has been funded for another year.

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, New Hampshire State Homeless Helpline, shelters, transitional housing, Gathering Place (consumer-run social club).**
- 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.
- **Rape and Assault Supportive Services** assist persons through referrals, crisis line, local police departments, court referrals. AmeriCorps members accompany clients to court and provide support.
- **Southern NH HIV/AIDS Task Force** – Staff are in the community 2-5 hours per week meeting with individuals at high risk of acquiring HIV. Complete intake process with case manager, referrals as needed.

Component: Outreach

Outreach in place:

These programs by their design predominantly target chronically homeless people unless otherwise noted.

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.) However, the following outreach is in place:

- **Continuum of Care Community Crisis Guide and Map** - (maps left in areas where chronically homeless and homeless persons 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, in dumpsters for homeless/chronically homeless individuals; transportation provided to VA Hospital in Manchester, NH (25 miles away); coordinate efforts with **State of NH Veteran Services Coordinator**.

Fundamental Components in CoC System

Component: Outreach

Outreach in place:

Veterans:

- **Department of Welfare/City** – emergency financial aid for rent vouchers, utilities, food.
- **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 shelters and emergency transportation.
- **Southern NH Services, Inc.** street canvassing under bridges, in the woods, in alleys; transportation to VA Hospital in Manchester, NH; coordinate with **State of NH Veteran Services Coordinator**.
- **St. Joseph Hospital Mission Integration** – offers prescription medicine/financial assistance.

Seriously Mentally Ill:

- **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/families.
- **Community Council of Nashua** – outreach, case management and referral, education and training to local police re: Involuntary Emergency Admission and Conditional Discharge of the mentally ill in need of help.
- **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).
- **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 chronic homeless and homeless persons/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 Soup Kitchen & Shelter, Inc.** – street outreach/case management and referral, emergency shelter, food kitchen.

Substance Abuse:

- **All agencies** – outreach to local police and fire departments in **Nashua** and the 9 communities in the Greater Nashua Continuum of Care catchment area (**Amherst, Brookline, Hollis, Hudson, Litchfield, Mason, Merrimack, Milford, Mont Vernon**) to assist homeless/chronically homeless individuals/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 residence use (the woods, under bridges, garages, alleys, in dumpsters) for persons who are homeless and/or chronically homeless.
- **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/families.
- Link to detox through **Keystone Hall** from the **Addiction Service Providers Network**.
- **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 **Birchwood Counseling Center**.
- **Southern NH Medical Center and St. Joseph’s Hospital** – offer outreach to their emergency rooms and chemical dependence units for homeless and chronically homeless persons.

Fundamental Components in CoC System

Component: *Outreach*

Outreach in place:

HIV/AIDS:

- **Community Council of Nashua, Inc.** – Provides outreach and therapy with referrals to **Southern NH HIV/AIDS Task Force**.
- **Harbor Homes, Inc.** – provides residential housing and support services to those living with HIV/AIDS.
- **Southern New Hampshire HIV/AIDS Task Force** – Has staff in the community 2-5 hours per week meeting with individuals at high risk of acquiring HIV. Linkages with shelters, word of mouth, liaison with CoC area welfare departments, outreach to Hispanic populations.
- **Southern New Hampshire HIV/AIDS Task Force** works with **Nashua Public Health Department**- outreach van to identify homeless with HIV and /or provide HIV test if persons are at high risk for HIV.

Domestic Violence:

- **Nashua Rape and Assault Services, Inc.**– outreach to the Hispanic community, local hospitals, police departments, and schools. Has opened a new 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).
- **Nashua Rape and Assault Services, Inc.** have collaborated with State officials and developed a standardized protocol for handling sexual assault victims.
- An increased relationship and membership is in place with the **Domestic Violence Coordinating Council of Milford NH** and **Nashua Rape and Assault Services, Inc.**
- **Community Council of Nashua, Inc.** - assessment and brief treatment for victims; individual and group therapy; court referrals for Batterers 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** accepts many referrals from **Rape and Assault Safe Shelter** into transitional housing, works closely with **Birchwood Counseling** to provide therapeutic groups, provides security deposits to women and children living in safe shelters, and works very closely with **DCYF**.

Youth:

- **Community Council of Nashua, Inc.** individual and group therapy for child and adolescents through Young Adult Program.
- **DCYF, USDA, WIC, local School Districts, Adult Learning Center, Nashua 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.
- 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 **Nashua Youth Council** to provide therapeutic services to youth in program.
- **Southern NH Services Homeless Outreach Program** – street outreach to unsheltered.

Fundamental Components in CoC System

Outreach Planned:

Veterans:

- **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/chronically homeless veterans..
- **Greater Nashua Interfaith Hospitality Network, Inc.** is still in development stage but the program is an Outreach program in itself. Plans are to have an annual awareness campaign whereby all agencies and community supporters that offer services to the homeless (including veterans) will participate.
- **Harbor Homes, Inc.** plans to seek funding for transportation (to hospitals, crisis centers, etc. where appropriate) and case management services for existing services.

Seriously Mentally Ill:

- **Community Council of Nashua, Inc.** -Working with the legal and judicial system to create a diversion program for low level offenders with mental illness or dual diagnosis.
- **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, crisis centers, etc. where appropriate) and case management services for existing services.

Substance Abuse:

- Outreach to clients with dual diagnosis planned through collaborative relationships with **Harbor Homes, Inc.** (residential and support services), **Marguerite's Place** (residential and support services for single women and children), **Community Council of Nashua, Inc.** and **Nashua Foundation for Mental Health.**

HIV/AIDS:

- **Community Council of Nashua, Inc.** - planning committee for Title III HIV Grant I CARE.

Domestic Violence:

- **Community Council of Nashua, Inc.** plans to provide a supervised visitation center, hiring new coordinator for program.
- **Harbor Homes, Inc.** plans to institute more training in order to understand this population better.
- **Keystone Hall** plans to work with **Rape & Assault Services, Inc.** and **Harbor Homes, Inc.** on a special project for offenders treatment.
- **Nashua Rape and Assault Services, Inc.** - Cultural diversity outreach is planned to increase the relationship of the **Domestic Violence Coordinating Council in Milford, NH** and to collaborate with **State** officials to develop a standardized protocol for handling sexual assault victims.

Youth:

- **Harbor Homes, Inc.** plans to focus on greater staff training in order to better understand this needs of this population.
- **Southern NH Services** – supportive counseling, collaborative with other case management services.
- **Youth Council** will focus outreach activities to schools, VNA's, teen clinics to include statewide advocacy for increased awareness of chronic teen homelessness due to 'aging out' foster care system and on educating other area service providers and the general community as to services they currently have available..
- **Youth Council** has applied for a grant through Southern New Hampshire Medical Center to open an intensive outpatient substance abuse center to work towards prevention and outreach, coping skills, etc.

Component: Assessment

Services in place:

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

Fundamental Components in CoC System

Component: Assessment

Services in place:

- **Churches of all faiths in Nashua and the 9 communities in the Greater Nashua Continuum of Care catchment area (Amherst, Brookline, Hollis, Hudson, Litchfield, Mason, Merrimack, Milford, and Mont Vernon as well as other religious communities)** – by providing various food and clothing pantries, spiritual counseling, and family-oriented outreach and skill building as well as financial and volunteer support to other agencies.
- **Community Council of Nashua, Inc.** – Community mental health center promotes stable mental health, Children and Youth Services for at-risk youth, 24-hour crisis center for brief psychiatric treatment. Outreach to mentally ill homeless (or at risk of homelessness).
- **Department of Health and Welfare (Nashua and 9 surrounding CoC communities – listed above)** – Assess needs of those at risk of acute homelessness.
- **Harbor Homes, Inc.** – Provides evaluation and assessment for housing and residential services in group homes and individual apartments for homeless mentally ill adults and their families. A Residential Service Plan is created for each client. Staff is available 24/7.
- **Harbor Homes, Inc.** – Evaluates the need for residential services for persons/families with mental illness and provide intake and case management. The Shelter also coordinates with mental health centers and others, as appropriate.
- **Marguerite's Place** – Collaborates with Division of Children, Youth, and Families (DCYF), responds to police and courts for assessment and placement; meets regularly with staff of homeless shelters to notify them of openings.
- **Nashua Pastoral Care Center** - Collaborates with **Birchwood Counseling Services** to determine level of need and issues for women in transitional housing program, which can be underlying issues of homelessness.
- **Nashua Soup Kitchen and Shelter, Inc.** – Intake and case management for emergency shelter and vocational support and education. Emergency assistance, case management and advocacy for homeless individuals and families.
- **New Hampshire Catholic Charities** – Provides counseling to individuals, couples, and families, as well as community and parish outreach to strengthen individual and family structure.
- **Police Departments in City of Nashua and CoC catchment area communities (Amherst, Brookline, Hollis, Hudson, Litchfield, Mason, Merrimack, Milford, and Mont Vernon)** provide evaluation and assessment in collaboration with appropriate agencies.
- **Rape and Assault Support Services, Inc.** – Crisis intervention to victims of domestic violence, rape, child sexual assault, and elder abuse.
- **Southern NH HIV/AIDS Task Force** – Information, education, and supportive services to individuals and families faced with AIDS or HIV.
- **Southern NH Services/Homeless Support and Outreach Services** – Provides identification and assessment for homeless individuals and families.
- **Southern NH Medical Center and St. Joseph's Hospital** – Offer evaluation and assessment from their emergency rooms and chemical dependence units to appropriate agencies.
- **St. John Neumann Church Outreach./Merrimack** – Emergency rent vouchers, medication vouchers, and food pantry.
- **Youth Council** collaborates with appropriate agencies in providing therapeutic services to youth in their program.
- **Veteran's Administration** – Outreach, medical, counseling, and advocacy for homeless vets throughout the CoC geographic area.

Services Planned:

- The **Southern NH HIV/AIDS Task Force** is planning to expand services to underserved communities. To increase the profile of the Task Force in the CoC community, and to educate Federal legislators in regards to HIV/AIDS to ensure adequate resources.
- The agencies in the **Greater Nashua Continuum of Care** that work in the area of domestic violence plan to increase outreach to the Hispanic community, increase the relationship of the **Domestic Violence**

Fundamental Components in CoC System

Component: *Assessment*

Services planned:

Coordinating Council in Milford, NH, and collaborate with **State** officials to develop a standardized protocol for handling sexual assault victims.

- **Southern NH Services and Community Council of Nashua** are planning a “bike patrol” to identify chronically homeless and homeless individuals and families.

How homeless 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, New Hampshire State Homeless Helpline, shelters, transitional housing, Gathering Place (consumer-run social club)**.
- **Nashua Pastoral Care Center** referred to Transitional Housing Program; client must make appointment with Birchwood for initial assessment; an action plan is established for treatment.
- **Rape and Assault** – AmeriCorps volunteers (accompany clients to court and provide support to homeless victims of rape and assault)

Component: *Supportive Services*

Services in Place:

Case Management:

- **Community Council of Nashua, Inc. Homeless Support/Outreach Services** – Provides outreach case management, support and emergency shelter access to unsheltered chronic homeless and homeless persons.
- **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.
- **Nashua Pastoral Care Center** provides extensive case management to single women with children.
- **Nashua Soup Kitchen & Shelter, Inc.** – emergency shelter for individuals and families, transitional housing for families, case management.
- **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.

Life Skills:

- **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, and transitional housing for ages 18-21.
- **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).
- **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.

Fundamental Components in CoC System

Component: Supportive Services

Services in Place:

Life Skills:

- **Marguerite's Place, Inc.** – Provides intensive case management for the families and residents and those in the after-care 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 day care to 25 children on a daily basis.
- **Nashua Pastoral Care Center** provides hands-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.
- **Rape and Assault Support Services, Inc.** - Crisis intervention to victims of domestic violence, rape, child sexual assault, and elder abuse. Confidential Emergency shelter available.
- **Southern NH HIV/AIDS Task Force** – Budget planning, counseling, self-advocacy skill building.

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 alcoholism 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.
- **New Hampshire Department of Health and Human Services** – TANF, DCYF, food stamps, Medicaid
- **Southern NH HIV/AIDS Task Force** – Offers counseling services and linkage to other programs such as detox.
- **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 youth, develops a Crisis Plan for each client, 24-hour crisis center for brief psychiatric treatment. 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.
- **Harbor Homes, Inc.** – Provides housing and residential services in group homes and individual apartments for homes and mentally adults and their families. Also provides emergency shelter for individuals and families.
- **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
- **The Gathering Place (Harbor Homes, Inc.)** – Member-operated social club for the mentally ill and homeless in greater Nashua. Free meals available nightly.
- **Southern NH HIV/AIDS Task Force** – Counseling services for individuals and families 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).
- **Veteran's Administration** – Outreach, medical, counseling, and advocacy for homeless veterans.

Fundamental Components in CoC System

Component: *Supportive Services*

Services in Place:

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.
- **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**.

Education:

- **Adult Learning Center** - GED tutoring, ESL, and numerous other programs focused on educational and vocational skill building. Onsite day care available.
- **Area Agency for Developmental Services of Greater Nashua** – Provides services, education, and advocacy for families and individuals with developmental 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.
- **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 Pastoral Care Center** mandated component in the Transitional Housing Program.
- **Southern NH HIV/AIDS Task Force** – Provides prevention education to schools and community groups as well as outreach to your at risk 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** – group of individuals/agencies which meets monthly to coordinate a continuum of primary health care services for people with HIV infection in Hillborough 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 who have provided the area with news coverage on the homeless problems that exist and the lack of affordable housing in this area. For example: Two reporters did a 3-part series on homelessness interviewing homeless/chronically homeless/formerly homeless persons as well as many agencies who provide housing and supportive services.
- **Veteran’s Administration** – Outreach, medical, counseling, and advocacy for homeless veterans.

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 the New Hampshire Employment Security.
- **Nashua Soup Kitchen and Shelter** – Employment skill training in writing resumes, conducting interviews, dress, etc. and bilingual assistance.
- **The PLUS Company** – Vocational rehabilitation for the disabled.
- **Southern NH Services** – Workforce Development Programs.

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** – Head Start, childcare.
- **Youth Council** – Counseling for children and families. Group work for children and teens at risk from drugs and violence.

Transportation:

- **Harbor Homes, Inc. Emergency Shelter** provides transportation, as necessary, 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.
- **Southern NH HIV/AIDS Task Force** – Provides transportation to medical appointments for individuals with HIV/AIDS.
- **Southern NH Services** – provide bus transportation, taxi vouchers.
- **Veteran's Administration** – Outreach, medical, counseling, and advocacy for homeless veterans.

Other:

Food Pantries/Clothing/Services

- **Community Council of Nashua**– Sign language and services provided for persons who are deaf; consumer run warm-line/drop in center.
- **Food Pantries/Clothing/Services 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.
- **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 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.

Fundamental Components in CoC System

Component: *Supportive Services*

Services in Place:

Other:

Food Pantries/Clothing/Services

- **Rape and Assault Services, Inc.** – Crisis intervention, advocacy at court, hospitals, police departments.
- **Sheepfold Assembly of God** – Food pantry, cold lunch. Some clothing items.
- **Social Security Administration** – Information and aid with Federal Social Security programs.
- **Southern NH Medical Center** – Hospital, acute care, and trauma center.
- **Southern NH HIV/AIDS Task Force** – Food pantry and holiday baskets to individuals and families with HIV/AIDS.
- **Southern NH Services, Inc.** – Financial assistance programs, Commodity Food program, Elderly housing, Fuel Assistance, WIC.
- **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 a food pantry.
- **Veteran's Administration** – Outreach, medical, counseling, and advocacy for homeless vets.

Services planned:

- The web page of the CoC (www.nashua-coc.org) will continue to post and expand information about Supportive Services in order to increase awareness and improve access to services.
- The web page of United Way (www.unitedwaynashua.org) will contain services offered by the agencies within the CoC.
- **Harbor Homes Emergency Shelter** plans to collaborate with the **Community Council of Nashua** (local mental health center) to implement MIMS (Mental Illness Management Services) as appropriate.
- **Harbor Homes Emergency Shelter** plans to seek other funding for transportation services for homeless and chronic homeless persons and homeless persons/families.
- **Harbor Homes Emergency Shelter** will seek funding for telephone services to facilitate communication between Shelter clients and potential landlords and employers.
- **Focal Point** is an effort to coordinate elder services and to maximize available resources of local community agencies and the State of New Hampshire. Funds have been appropriated for the current year for this project.
- **Harbor Homes, Keystone Hall, Marguerite's Place, and Nashua Soup Kitchen & Shelter** are in the process of establishing Individual Development Accounts (IDA) through the New Hampshire Community Loan Fund. IDA's are a "matched" savings account (savings dollars matched on 3:1 ratio) for eligible individuals. This account is designed to access financing for permanent housing, education, and small business development.
- **Marguerite's Place** plan to add at least two permanent affordable housing units through MP Housing in the coming year, and to expand participation in the IDA program of the State (for residents presently enrolled who are participating).
- **Marguerite's Place** plans to submit an application to be submitted to Community Development Financial Authority (CDFA) in August 2002 for acquisition and development of two permanent housing units.

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 map, New Hampshire State Homeless Helpline, hospital referral, police referral, hospitals.**
- **Community Council of Nashua** provides service linkage for consumers to necessary assistance.
- **Harbor Homes Emergency Shelter** coordinates with other agencies to help clients gain access to necessary resources such as affordable housing programs, savings programs, employment, and personal needs.

Fundamental Components in CoC System

Component: *Supportive Services*

How homeless persons access/receive assistance:

- **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 day care, education, and transportation. The residents of Marguerite’s Place will meet with individual case managers on a daily basis to ascertain success in receiving this assistance.
- **Southern NH HIV/AIDS Task Force** assists with rental and utility assistance while helping clients connect with affordable housing programs.

e. The fundamental housing components of Greater Nashua’s Continuum of Care system currently in place, and any additional housing being planned.

1. The point in time inventory date used to complete the chart: March 27, 2002

2. Definition of (1) emergency shelter, (2) transitional housing and (3) permanent supportive housing. *(Although you may require multiple pages to respond to this item, your response will count as only one page towards the 25-page limitation.)*

(1) Emergency Shelters

Emergency Shelters within the Greater Nashua Continuum of Care are designed to provide basic needs, are crisis oriented, and short term. Individualized goal plans are developed with each shelter guest to offer supportive services, referrals to appropriate agencies, and case management to assist in connecting to mainstream resources.

(2) Transitional Housing

Characteristics of Transitional Housing in the Greater Nashua Continuum of Care consist of residency up to 2 years, extensive case management (goal setting, teaching and education) for men, women, and families with children. Goal is to increase self-esteem, self-sufficiency, and self-determination as skill levels and/or income rise. Transitional Housing may be located in one building or scattered sites.

(3) Permanent Supportive Housing

Permanent Supportive Housing in the Greater Nashua Continuum of Care is long-term and stabilizing. Mainstream resources are understood and utilized, employment (whether in community businesses or for persons unable to work a full week through the various programs offered by CoC agencies). Permanent supportive housing may be in one building or scattered sites.

Fundamental Components in CoC System (Housing Activity)			
<u>Component:</u> Emergency Shelter			
Provider Name	Facility Name	Bed Capacity	
		Individuals	Persons in Families with Children
Harbor Homes	Maple Street Emergency Shelter	8	15
Harbor Homes	Safe Haven	5	
Nashua Soup Kitchen & Shelter	Ash Street Shelter Kinsley Street Shelter	12	8 10
Rape & Assault Support Services	Confidential due to nature of services	4	6
Subtotal		29	39

Housing Planned:

Greater Nashua Interfaith Hospitality Network, Inc. plans to organize 8-13 churches/synagogues to provide shelter for up to 14 people in temporary housing crises while assisting with job hunting, housing searches, and other necessary supportive services.

How homeless persons access/receive assistance:

Most agencies are entry points - through any CoC member – if individual/family do not fit the criteria for that agency, then a referral is made to the appropriate agency. Anyone can walk through a door and be referred to proper place. The **HMIS**, once in operation, will be another source. Other sources are **Information and Referral, NH Employment Security Nashua City Welfare Department, State Welfare Offices, food kitchens and pantries, Gathering Place** (consumer- operated social club).

Persons/families also access and receive assistance through the **Nashua Soup Kitchen Ash Street and Kinsley Street Shelters and the Harbor Homes, Inc. Maple Street Shelter.**

Component: **Transitional Housing**

Provider Name	Facility Name	Bed Capacity	
		Individuals	Persons in Families with Children
Keystone Hall	Transitional Living Center	10	
Nashua Pastoral Care Center	Norwell Home		16
Nashua Pastoral Care Center	Caroline’s House		9
Nashua Pastoral Care Center	Victory House		13
Nashua Pastoral Care Center	Scattered Sites		3
Marguerite’s Place	Marguerite’s Place		28
Nashua Soup Kitchen & Shelter, Inc.	NSKS Transitional Housing		12
Subtotal		10	81

Housing Planned:

Nashua Pastoral Care plans to purchase/rehab Norwell Home for single women with children.

Rape And Assault Services is in the process of acquiring one unit of transitional housing for single women with children.

How homeless persons access/receive assistance:

Most agencies are entry points - through any CoC member – if individual/family do not fit the criteria for that agency, then a referral is made to the appropriate agency. Anyone can walk through a door and be referred to proper place. The **HMIS**, once in operation, will be another source. Other sources are **NH Employment Security, Nashua City Welfare Department, State Welfare Offices.**

Nashua Pastoral Care Center through referrals, complete application, interview with case manager and Director of Transitional Housing.

Rape and Assault Services through referrals, other agencies, crisis line.

Persons/families also access and receive assistance through the **Nashua Soup Kitchen Ash Street and Kinsley Street Shelters and the Harbor Homes, Inc. Maple Street Shelter.**

Component: **Permanent Supportive Housing**

Provider Name	Facility Name	Individuals	Persons in Families with Children
Harbor Homes	Permanent Housing I	10	
Harbor Homes	Permanent Housing II	19	
Harbor Homes	Permanent Housing III	18	33
Harbor Homes	Permanent Housing IV	8	6

Harbor Homes	Scattered Housing Program	30	11
Harbor Homes	Allds Street	17	
Harbor Homes	Chestnut Street	10	
Harbor Homes	Winter Street	9	
Marguerite's Place	MP Housing		6
Southern NH Services, Inc.	Mary's House/Nashua	40	
	Subtotal	161	56
<p>Housing Planned:</p> <p>Habitat for Humanity plans to complete a one-family home for a homeless family.</p> <p>Harbor Homes, Inc. is submitting a proposal to SAMSHA for 30 units of scattered supportive leased housing targeted to dually diagnosed homeless individuals and/or families.</p> <p>Harbor Homes, Inc. has submitted a HUD 811 proposal for five proposed condominiums for chronically homeless mentally ill individuals and/or families.</p> <p>Nashua Pastoral Care Center is developing two units of affordable permanent housing for single women and children.</p> <p>Harbor Homes, Inc. is submitting a proposal to HUD (NOFA "Bonus" proposal) for five units of scattered leased supportive permanent housing for chronically homeless mentally ill individuals and/or families.</p> <p>Marguerite's Place is working closely with City of Nashua through Affordable Housing Trust Fund and CDBG Program to develop additional permanent housing units for single women with children in the area served by CoC.</p>			
<p><u>How homeless persons access/receive assistance:</u></p> <p>Most agencies are entry points - through any CoC member - if individual/family do not fit the criteria for that agency, then a referral is made to the appropriate agency. Anyone can walk through a door and be referred to proper place. The HMIS, once in operation, will be another source. Other sources are Information and Referral, NH Employment Security Nashua City Welfare Department, State Welfare Offices, food kitchens and pantries, Gathering Place (consumer- operated social club), emergency shelters and transitional housing.</p>			

4. **Homeless Management Information System (HMIS).** (*Your response to this item will not count towards your 25-page limitation.*)

a. Greater Nashua's Continuum of Care (CoC) strategy to implement an HMIS and the progress you have made to date in obtaining the participation of homeless assistance providers.

In January 2001, the Greater Nashua Continuum of Care (CoC) became aware of the Congressional mandate for future implementation of a HMIS to ensure unduplicated client-level reporting of the homeless population. The Greater Nashua CoC began researching ways and means of meeting this mandate, and the discussion led to a demonstration of a human services system, called Civitor™, which was under development for use in the State's CAP agencies. Further at the time, the Greater Nashua CoC was not unanimous in supporting the HMIS concept, and was extremely concerned about the funding impact on direct-support programs. However, as shown in the 2001 Homeless Assistance Programs, did agree to meet and consider implementing such a system. A subcommittee was formed to study HMIS options systematically and make recommendations over the course of the next 12 months. The Greater Nashua CoC was approached by the Balance of State CoC to consider a statewide approach to HMIS along with the Manchester Continuum (the 3 continua in the State). Thus, a subcommittee of the three continua was formed.

The subcommittee first studied HMIS resources made available by HUD, and then discussed HMIS technical approaches with responsible officials in Vermont. Based on its investigations, the subcommittee narrowed its focus to the web-based, highly rated Service Point™ software, offered by Bowman Internet Solutions, and had Bowman demonstrate its product for all interested Balance of State CoC/Manchester CoC/Nashua CoC members on November 19, 2001. The CoCs' response was positive, and a consensus supporting a 2002 HMIS project emerged, despite serious concerns about the impact to Pro Rata Need in each continua.

The Balance of State Continuum conducted a statewide survey (including Nashua and Manchester) of provider computer and connectivity resources in December 2001 - January 2002, to assist in sizing system hardware and software requirements. Each New Hampshire CoC sent representatives to HUD's HMIS technical assistance workshop in Lowell, MA, on February 15, 2002. That experience led to the HUD field office's proffer of dedicated HMIS technical assistance in support of a statewide project approach through the University of Massachusetts/Boston, MA. The Balance of State CoC convened an "emergency" Statewide HMIS Project working group – including representatives from the Greater Nashua and Greater Manchester CoC's and the NH Homeless Hotline (a statewide, Internet-intensive service provider) – in technical assistance sessions on February 21 and 27, 2002. The quick response was necessary to fully exploit HUD's technical assistance resources prior to the anticipated release of the Super NOFA on February 28, 2002.

At HUD's suggestion, the subcommittee consulted the Wisconsin statewide HMIS project director to benefit from her insight into system architecture and overcoming implementation challenges, including the pooling of member CoC's Pro Rata Need allocations required for the project budget. This dialog led to a recommendation, adopted by the NH Statewide HMIS Project working group, that NH would follow the State of Wisconsin's lead and implement Service Point™ HMIS software statewide within all CoCs.

That decision taken, the working group formulated some approaches to delivering HMIS service statewide and assigned estimating responsibilities. Proposed project models – all running Service Point™, were:

- establish a stand-alone HMIS server facility;
- have the University of Massachusetts HMIS project host New Hampshire's HMIS data;
- have the NH Homeless Hotline (doing business as NH Help Line) manage the project in New Hampshire with the data being stored at Bowman Internet Systems in Louisiana;
- have the NH Homeless Hotline manage the project in New Hampshire and augment their existing computer server resources only to the extent needed to host New Hampshire's data at their Concord facility.

At the second emergency HMIS technical assistance meeting on February 27, the day before the expected release of the Super NOFA, the four alternative service models were reviewed and estimates refined. As a result, the working group was confident it had achieved an accurate estimate of costs for the first and second years of a statewide HMIS project.

The New Hampshire Statewide HMIS Project work group determined that the most costly approach would be to establish the State's own server facility equipped with all necessary hardware and software, and none of the group members saw that as a realistic option. The University of Massachusetts server possibility was the next most costly, and some of New Hampshire's CoC's expressed discomfort with that approach. Engaging NH Homeless Hotline as the statewide project sponsor presented the two most favorable cost options by a significant margin. The working group consensus – supported by the HUD University of Massachusetts technical advisor -- was that New Hampshire should focus on the NH Homeless Hotline sponsorship options as being most advantageous to the state. The working group dismissed the Wisconsin example that providers be assessed a fee to become a statewide HMIS "partner." That model was regarded as inappropriate in NH where many providers, who tend to be severely resource-challenged, remain skeptical of the benefits of being part of a statewide-automated client-level reporting system.

The Balance of State and Greater Nashua CoC's acted to support a joint, statewide 2002 HMIS project application on March 6, 2002, and the Manchester CoC confirmed its support on March 20. Because of the impact to respective Pro Rata Needs, it was decided that each NH CoC should bear a fair share of the statewide HMIS project budget. The agreed allocation was Balance of State 67%, Manchester 25%, and Nashua 8%. It was further agreed that the Balance of State chairperson would meet with the HUD field office CPD program manager to: (1) register the State CoCs' objections to the federal government's unfunded HMIS mandate; (2) explain New Hampshire's proposed joint approach to a HMIS project; and (3) seek a Memorandum of Agreement supporting the equitable pooling of Pro Rata Need to meet the costly project budget.

That meeting was held on March 8, 2002. The state's joint HMIS initiative received verbal encouragement, although no reaction was received to the proposed MOA. Nevertheless, the NH CoC's decided to continue their good-faith response to HUD's HMIS mandate as briefed to the HUD field office. Accordingly, each CoC is submitting herewith an identical Exhibit 2 SHP SSO project application, identifying the NH Division of Behavioral Health, Office of Homeless & Housing Services, as applicant and Community Services Council of NH/NH Help Line (based in Concord, NH) as project sponsor in each CoC. The joint project application clearly indicates the budgetary and Pro Rata Need contribution of each CoC.

b. Greater Nashua's efforts to implement 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. How many of the Current Inventory Beds listed on *the* Gaps Analysis chart are included in Greater Nashua's CoC's HMIS:

Not applicable.

5. Gaps Analysis.

a. Greater Nashua's *Continuum of Care: Gaps Analysis* chart. (See page 22)

b. Data sources, the methods and counts used for filling out the columns in the Gaps Analysis chart.

Data Source	Method	Date of Data Collection	Street Count (number)	Shelter Count (number)
Shelter/transitional /supportive housing	completed mail survey of phone & walk-in requests and head counts	March 27, 2002		398
Outreach providers	street count	March 27, 2002	150	
Other (Welfare, Police, Schools, Upper Room, Salvation Army, Catholic Charities)	completed mail survey of phone & walk-in requests	March 27, 2002	88	

c. Data sources and methods identified in 5(b):

1) Greater Nashua CoC's process and methods for collecting the data, including the reason(s) *we* chose those 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 March 27, 2002, 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 then identified agencies in the Greater Nashua Continuum of Care catchment area that serves homeless persons and/or were likely to encounter homeless persons. Such agencies included police departments, hospitals, local welfare departments, schools, mental health providers, substance abuse treatment providers, housing providers for homeless persons and families, 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.

Two detailed forms, along with a cover letter providing an explanation and instructions for completing the forms were 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 adult males, # of adult females, # of children, subpopulation, support services requested, and support services provided.

Forms and cover letters were sent out to the identified agencies one-week prior to the March 27, 2002 homeless count. Reminder calls were placed to all agencies on March 26, 2002. Follow-up calls were placed 2-3 days after the count to ensure that all requests were received.

2) How Greater Nashua estimated the number of homeless people living on the streets or other places not meant for human habitation:

The Greater Nashua CoC estimated the number of homeless living on the streets by insuring 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 March 27, 2002. Additionally, members of the Greater Nashua Continuum of Care 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).

3) 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, and to 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 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. The Data Analysis Committee is currently discussing holding a point-in-time count more than once a year.

The CoC Housing Needs and Data Committee will continue to meet no less than quarterly 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. Priorities.

a. The Greater Nashua *Continuum of Care: Project Priorities* chart. (See page 23)

b. The methods Greater Nashua CoC used to determine whether projects up for renewal are: (1) performing satisfactorily; and (2) effectively addressing the need(s) for which they were designed.

(1) Methods used to determine whether projects up for renewal are performing satisfactorily:

To effectively evaluate each renewal project's performance, the renewal agencies submit a written proposal and conduct a verbal presentation to the Greater Nashua CoC membership, which includes information on each project including, but not limited to, the following:

- Annual reviews by regulatory bodies, such as: independent auditors, city and state agencies, and HUD;
- Results of consumer satisfaction surveys;
- Stability of residences;
- Reduction in hospitalization of mentally ill population;
- Increase in skills/income of homeless persons;
- Diminished recidivism rate;
- Increased self-sufficiency.

A question and answer forum follows each verbal presentation. The CoC provides a ranking sheet on which to prioritize and rank renewals and each member then places their vote. All CoC members present at the meeting are allowed to vote. In an attempt to get as many people involved in the process, this meeting has been previously well publicized through prior agendas, e-mails to membership, Website, and word of mouth. If an entity/agency has more than one representative at the meeting when the vote occurs, that agency is limited to two votes.

(2) Methods used to determine whether projects up for renewal are effectively addressing the need(s) for which they were designed:

In conjunction with the performance evaluation, the CoC uses the same methodology to determine if the projects up for renewal are effectively addressing the needs for which they were designed. The following components, while not all inclusive, are considered:

- A Residential Service Plan (RSP) which is developed with each resident as they enter the program. The RSP is updated on a regular basis, or as requested, to meet the needs of the participant.
- Resident input through contact with staff, case management with development, monitoring and evaluation of an Individual Action Plan (short term/long term goals) monitoring and evaluations are performed annually by 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. The evaluation consists of quantifiable housing, support groups, numbers served, source of referral, number of units of service, etc.
- Keystone Hall (alcohol and substance abuse agency) is participating in a national study on outcomes measurement called TOPS II of which New Hampshire is one of 13 states participating.
- Internal controls (i.e. intake, assessment, progress notes, referrals) which are reviewed on a monthly basis by Supervisor, Client Services, and Program Manager

c. How each project proposed for funding will fill a gap in Greater Nashua'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 25-page limitation.)**

The following existing and new projects are included in the Greater Nashua's CoC application to HUD. The descriptions below provide details about how these projects fill a gap in Greater Nashua's homeless system. The projects are listed in the order that they have been prioritized for funding.

Priority 1: Harbor Homes, Inc. Supportive Permanent Housing VI: This is a new SHP Permanent Supportive Housing for Persons with Disabilities project. This proposed program will provide five units

of affordable, safe, permanent supportive housing for dually diagnosed (a mental illness and substance abuse and/or HIV/AIDS) individuals and/or families throughout the greater Nashua area. As demonstrated by the Greater Nashua Continuum of Care's 2002 Gaps Analysis, there is still an overwhelming shortage of affordable housing available for persons with mental illness. On March 27, 2002, CoC agencies in greater Nashua conducted a "point in time" count to determine the number of homeless persons living on the street, in emergency shelters, or in transitional or supportive housing, and found that the total number is 359. Harbor Homes, Inc. has been providing residential and support services to homeless and/or mentally ill persons since 1982, and has expanded from one group home to over twenty programs in order to meet the ever-growing demand for housing for this population. While Harbor Homes, Inc. waiting list for housing numbers over 340, at least 85 persons are chronically homeless or homeless; others are living in overcrowded conditions with friends or with families. This proposed project will help Harbor Homes to assist these people by allowing us to provide additional permanent supportive housing units.

Priority 2: Keystone Hall Transitional Housing for Homeless Addict and Alcoholics [renewal]: *This is a SHP Transitional Housing Project.* Keystone Hall is the only Alcohol and other Drug treatment agency in the Greater Nashua area that provides services specifically to people who are homeless. In addition, Keystone Hall 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 Continuum of Care for the Greater Nashua area. Dually diagnosed and chronically addicted people comprise the majority of people who are chronically homeless and are specifically targeted by the federal government in their plan to eliminate chronic homelessness in the next 10 years. The Transitional Living Center is a program that is designed to provide assistance to homeless/chronically homeless addicts and alcoholics that need help finding a job, learning basic life coping skills, finding affordable housing and maintaining a safe, sober life style. This program currently serves 10 (6 male and 4 female).

Priority 3: Marguerite's Place Transitional Housing for Homeless Women and 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 to homeless women and children. Together with our 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. Case managers maintain linkages with agencies providing permanent housing, education/training programs, job placement and retention programs. In addition, the case managers assist with counseling, recovery, mental health programs, legal and benefits programs. After Care is offered to each resident when they move into permanent housing in the form of case management, Day Care as described above. This After Care is funded by HUD for six months only, Marguerite's Place subsidizes the remaining costs. If this renewal were not funded, there would be an increase of 60 women and children homeless each year.

Priority 4: Nashua Soup Kitchen & Shelter, Inc. Employment Advocacy Project [renewal]: *This is a SHP Supportive Services Only project.* This project assists approximately 150 persons annually who are homeless achieve greater financial stability and independence to help them move out of homelessness. The chronic homeless and homeless population served by this program includes adults, both individuals and adults heading families. They may be challenged with chronic mental illness, chronic substance abuse, dual diagnosis, HIV/AIDS, or victims of domestic violence. They may be living on the street, at shelters, moving from place to place, or in area transitional housing programs. Many individuals who are homeless lack job-seeking skills required to find employment. They also lack training or education that will enable them to find jobs that pay a living wage. This project responds to a critical need within the CoC and is designed to help chronic homeless and homeless individuals achieve a greater degree of self-sufficiency so they can improve their lives and no longer need to rely on shelters and other assistance programs for basic needs. Experience has shown that the recidivism rate in shelters is reduced once individuals are able to increase their marketability and their self-sufficiency through education and training.

Priority 5: Southern New Hampshire Services, Inc. Homeless Outreach Initiative [renewal: *This is a SHP Supportive Services Only project.* Homeless Outreach/Case Management is the first point of contact with the unsheltered homeless and has as its goal to engage this group of chronic homeless and homeless

by connecting them to homeless services provided in the Nashua area. This program can serve 9 homeless individuals/families/both at any one point. Out of those 9 clients the project served during the past year, 93% entered into the Nashua CoC services system within five days, 75% accessed case management and increased their skills and income, and 67% achieved self sufficiency. As such, this effort is responsive to addressing all the gaps in services identified in the Nashua CoC Gaps Analysis.

Priority 6: NH Statewide Homeless Management Information System (HMIS) [new]: *This SHP Supportive Services Only* project implements a “turn-key” automated homeless information system, designed with HUD technical assistance, statewide within all three NH continua of care. This project will enable homeless service providers to collect uniform information about clients over time, and satisfies the Congressional mandate for unduplicated client-level homelessness data reporting as of October 2004, reflected in the HUD Continuum of Care Programs Application from 2001 and 2002. Running Service Point™ software, the system will place 85 web-enabled computer workstations throughout the state’s homeless assistance provider community, as well as central server devices within the existing facility of the NH Help Line in Concord. Despite its physical location within the Balance of State, Community Services Council of NH, doing business as NH Help Line, is the designated project sponsor for each NH continuum of care in this year’s CoC grant application, consistent with the centralized joint HMIS project architecture. Regardless of location, New Hampshire homeless assistance providers will have dial-up access to the central server via the web, and will interactively access the project HMIS software and database. Operation of the joint HMIS project will enable resource sharing enhanced eligibility determinations and linkages to mainstream programs for homeless clients, and will enable unduplicated client-level reporting, with confidentiality, to state and federal government. The project budget includes hardware, software licenses, Internet connectivity and project management, training, and technical assistance labor resources. To make the project cost burden less onerous, the three NH continua of care have agreed to allocate the joint project budget from their respective Pro Rata Needs in the following manner:

NH Continuum of Care	Project Budget Allocation Factor	Total SHP Project Budget Request Allocation from each Pro Rata Need
Balance of State	67%	\$139,816.27
Greater Manchester	25%	\$52,170.25
Greater Nashua	8%	\$16,694.48
Total	100%	\$208,681.00

Priority 7: Harbor Homes, Inc. Supportive Permanent Housing IV [renewal]: *This is a SHP Permanent Housing for Persons with Disabilities Project.* This proposed supportive housing program has been in operation at full capacity since 2000. The program offers housing and supportive services to 17 chronic homeless/homeless mentally ill individuals and/or families in the greater Nashua area. Renewing this program will enable Harbor Homes to continue housing persons who otherwise would not be able to afford their own apartments and would risk returning to homelessness. The supportive services provided to these individuals, which includes assistance with system management, crisis management, and community integration, are crucial factors in helping them to maintain long-term housing and minimize negative psychiatric effects.

b. How the project selection and priority placement processes were conducted fairly and impartially, and gave equal consideration to projects sponsored by nonprofit organizations.

(1) Greater Nashua’s CoC open solicitation efforts for projects;

The proposed 2002 Super NOFA was announced monthly beginning on January 11, 2002 at the CoC meeting, and an invitation was issued for anyone to consider submitting a proposal. This invitation was issued on the Website, telephone, e-mail, and word of mouth. Once HUD released the NOFA, copies of the

2002 Homeless Assistance Programs were made on disc and distributed to everyone at the April 3rd CoC meeting as well as placed on the Greater Nashua CoC's Website. Prior to each monthly meeting an agenda was sent out on the Website reminding everyone of the meeting date and announcing agenda items. Telephone calls were also made. After each meeting, minutes of the CoC meeting were posted on the Website. Everyone was informed of the timeline to submit new and/or renewal proposals. However, given the lack of funds that were available and the cost of the renewals, any entity who was considering submitting a new project determined it was more important to have the renewal projects funded. If they were not funded, the gaps would be much greater. The NOFA became an agenda item at every monthly meeting.

- (2) identify the objective rating measures applied to the projects and demonstrate that participants on the review panel or committee are unbiased;

With respect to the ranking placement, CoC members discussed the process. It was a decision of the CoC to benefit from the "straddle theory" where if the last ranking proposal had more than 51% within their Pro Rata Need share, then HUD would provide the remaining 49%. Utilizing this theory, it would enable all proposed projects to be ranked within the Greater Nashua CoC's Pro Rata Need, and allow the CoC, as part of its strategy, to have maximum benefit and be able to include the new HMIS (Homeless Management Information System) project. The process was unanimously agreed to, and there were no negative concerns expressed regarding fairness.

In the Greater Nashua CoC, the review panel committee is the whole CoC. All members present had an opportunity to review, question, comment, and vote on the prioritization of each project. Anyone present was entitled to a vote (businesses, banks, homeless/formerly homeless people, service agencies, etc.); however, only two votes were allowed per entity/agency (assuming there were more than two persons present representing a particular agency or business). If there was only one representative present, then there was one vote. Per a decision of the CoC members, a "Ranking Sheet" was distributed to all and used as a guideline in prioritizing the projects. Again, the importance of having the renewals funded was discussed along with the new HUD "Emphasis on Housing" scoring criteria. There was a lengthy discussion on prioritizing the HMIS new project recognizing that it had to be within the Pro Rata Need for Greater Nashua CoC, and as it was a statewide collaboration, that it needed approval from all three continua in the State. At the same time there was concern for funding the renewals. The Executive Director for Harbor Homes, Inc. and also the Chairperson of the CoC commented on the importance for all projects to be within the Greater Nashua CoC Pro Rata Need share – speaking of the gap that would be left if the renewals were not funded and the importance of the new HMIS project. Instituting the "straddle theory" (mentioned above) he recommended that his project (while a very significant supported permanent housing project) as the largest (dollar-wise) project presented be ranked last. That would allow all proposals to be within the Pro Rata Need share for the Greater Nashua CoC. This was only a recommendation.

- (3) explain the voting system used

Agencies submitting proposals distributed copies of their proposed projects to all and had an opportunity to make an oral presentation. This was followed by a question and answer period. The proposals were presented in alphabetical order. As there was only one new permanent supportive housing project eligible for the HUD "Bonus", it was discussed, motion made and unanimously approved that a hand vote would be appropriate for this particular proposal. A motion was then made and unanimously approved that the Permanent Housing VI Program (Harbor Homes, Inc.) be the Number 1 priority.

For the remaining 6 proposals (5 were renewals and 1 [an HMIS project] was new), an anonymous ballot was distributed. An explanation of the ballot and the voting procedure was discussed to assure that everyone had an understanding of the process. On this ballot all projects were listed alphabetically with the numbers 2 through 7. (Number 1 being the "Bonus" project.) CoC members were asked to circle one number per project to indicate their vote, noting *that the same number could not be used twice*. On this ballot, it was stated whether the project was a 'renewal' or 'new'.

As there were no further questions, the votes were then taken, collected, and counted by impartial individuals (a banking person and a college intern). There were individuals present who got to vote that were unbiased and had no stake in the outcome. The votes were then tallied against the number of ballots in hand and the number of votes on the Tally Sheet. They were counted twice to ensure accuracy. Everyone at the meeting was notified of the ranking decision prior to adjourning. The results were then posted on the Nashua CoC Website.

(4) written complaints concerning the process were received during the last 12 months

The Greater Nashua CoC has received no written complaints regarding this process over the past 12 months.

7. Supplemental Resources.

a. **Project Leveraging** chart. (See page 20)

b. **Enrollment and Participation in Mainstream Programs.** The Greater Nashua's Continuum of Care-wide strategy currently in place to **systematically**. **(Although you may require multiple pages to respond to this item, your response will count as only one page towards the 25-page limitation.)**

(1) identify homeless persons eligible for mainstream programs.

The Greater Nashua Continuum of Care believes the best approach for alleviating homelessness is through a coordinated community-based process that includes a pro-active approach for direct access to mainstream programs. Community outreach workers, providers of emergency shelter, and providers of transitional, permanent, and supportive housing programs work to link individuals to such services as Medicaid, SCHIP, TANF, Food Stamps, SSI, Workforce Investment Act programs, and Veterans Health Care by using screening tools provided by the respective agency and/or working closely with service providers to facilitate proper service delivery of mainstream resources.

A key strategy is proactive outreach with assessment to identify the needs of individuals/families and direct them to appropriate available services and resources. The goal of emergency shelter is to get homeless individuals/families off the streets and provide a safe haven and necessary services while additional assessment of needs is conducted and potential eligibility for supportive services from mainstream resources are identified. The shelter providers work closely with other service providers to facilitate proper delivery of mainstream resources to access employment, education, training programs, and other basic needs. Transitional Housing provides stability necessary for the effective delivery of supportive services and intensive case management. Case Managers assess needs and both short-term and long-term goals that will move individuals/families toward permanent affordable housing and self-sufficiency. Application and enrollment in mainstream health, social service, employment, and training programs are incorporated into Individual Service Plans. Permanent affordable housing is the goal for all homeless persons. Ongoing supportive services from mainstream resources may be needed for these individuals/families to maintain permanent housing.

Conditions of homelessness such as transience, instability, and lack of transportation and phone often make it difficult for homeless individuals and families to apply for, retain, and use mainstream resources. For over two decades, the Department of Health and Human Services Regional District Office has served as the centralized location for a single application to be obtained and filed for financial assistance programs, Medicaid, children's health insurance programs, 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, and the SCHIP, Title XX 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. 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. NH Works One-Stop Career Centers are located at New Hampshire Employment Security Offices throughout the state. The local One-Stop Career Center consists of several agencies, including member agencies of the Greater Nashua Continuum of Care, working toward a common goal of building New Hampshire's economic future.

There are several programs and activities identified in the Workforce Investment Act that make their services available to customers through the One-Stop Delivery System. The Act identifies programs that are required partners as well as additional human services programs that may be partners in the local One-Stop systems including: TANF, USDA Food Stamp Employment and Training Programs, Welfare to Work, Workforce Investment Act- Adult and Dislocated Worker Programs, Workforce Investment Act Youth Programs, Vocational Rehabilitation, Veterans Employment and Training Programs, Employment Service, Unemployment Insurance, Adult Education, Post Secondary Vocational Education, Title V of the Older Americans Act, Job Corps, Migrant and Seasonal Farmworker Programs, Indian and Native American Programs, and Bureau of Apprenticeship and Training. Personnel from the various agencies in the One-Stop Center are cross-trained in order to improve integration and coordination of services. 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 amongst the agencies can occur seamlessly, and additional, non-duplicative or dovetailed supportive services can be provided. CoC member agencies have long participated in the local I-Team (Implementation Team Committee of NH Employment Services), which has now been integrated with 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 and providers of 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.

(2) help enroll them in the following programs for which they are eligible:

- Medicaid
- State Children's Health Insurance Program (SCHIP)
- TANF
- Food Stamps
- SSI
- Workforce Investment Act
- Veterans Health Care

CoC member agencies take a proactive approach in assisting individuals/families with enrollment in mainstream programs recognizing that many homeless individuals are not service resistant but can be "system resistant". CoC member agencies maintain linkages with the agencies providing mainstream resources and services. Our collaboration experience provides for an environment in which the needs of the homeless can be identified and met at a local level.

The Chairperson of the Greater Nashua Continuum of Care is also acting as Co-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 and to simplify and explore the possibility of streamlining the application process for multiple programs. ***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.

The following demonstrates the processes in place to ensure that homeless individuals/families are assisted in identifying, applying for, and obtaining benefits under each of the following mainstream programs:

- **Medicaid-** CoC member agencies assist the homeless persons they serve to apply for all benefits for which they may be potentially eligible. CoC member agencies have been instructed in the basic eligibility requirements and services offered through several Medicaid programs. In this way potentially eligible individuals or families can be identified. DHHS offers several medical programs. TANF recipients are automatically eligible for Medicaid. Other Medicaid programs, including coverage for pregnant women or individuals who are permanently and totally disabled, are available based on categorical and financial eligibility requirements. CoC member agencies assist with the application process, transportation to eligibility appointments, and may act as an authorized representative if needed. To ensure that eligible individuals/families continue to receive assistance, Individual Service Plans incorporate maintenance of benefits. Several CoC provider agencies are directly reimbursed through Medicaid for services provided to eligible clients. CoC agencies will question breaks in service and will assist with reapplication if necessary. Staff may refer to the State of New Hampshire Department of Health and Human Services Policy Manual Library at www.state.nh.us/PMIndex.htm for policy and case processing information if necessary.
- **State Children's Health Insurance Program (SCHIP)-** CoC member agencies assist the homeless persons they serve to apply for all benefits for which their family members may be potentially eligible. CoC member agencies have been instructed in the basic eligibility requirements and services offered through the New Hampshire Healthy Kids Program (SCHIP), which consists of comprehensive health and dental coverage that is free or low-cost, depending on household size and income, for children up to the age of 19. Applicants may apply for this program in person at the DHHS Division of Family Assistance Regional District Office or by mail. A mail in application may be downloaded from the Healthy Kids website at www.state.nh.us. Some CoC member agencies have been trained in the application process and are able to submit applications with required eligibility verifications for a mail in application to be processed. A mail-in application is preferable when a family does not meet eligibility requirements for other programs offered through DFA, such as being over income and/or resources. Because DFA does not operate by appointment but on a first come, first served basis during given operating hours, the mail-in application saves time for certain populations. CoC member agencies may assist with the application process and procurement of verifications to determine eligibility. To ensure that eligible children continue to receive this benefit, Individual Service Plans may incorporate maintenance of benefits. CoC member agencies will advocate for children and families, will question breaks in service, and will assist with reapplication if necessary.
- **TANF-** CoC member agencies assist the homeless persons they serve to apply for all benefits for which they may be potentially eligible. CoC member agencies have been instructed in the basic eligibility requirements and services offered through TANF and its related work program in order to identify potentially eligible individuals/families. Temporary Assistance to Needy Families offers financial assistance through two separate, yet related programs, The New Hampshire Employment Program (NHEP) and the Family Assistance Program (FAP). Both programs have a 60-month time limit for receipt of assistance with extensions if specific criteria are met. Support services offered through the NHEP work program, include: Child Care assistance, mileage reimbursement, automobile

repair, bus passes, fees and supplies, tuition assistance, books, tools of the trade, auto insurance, auto registration fees, driver's license fees, office clothing, uniforms, adult cosmetic dental fees not covered by Medicaid, and personal care items. The services are approved by employment counselors who also offer career counseling, job search assistance, job referral and job development services and partner with agencies to provide job readiness programs, life-skills programs, basic education programs, family counseling, vocational rehabilitation, additional funding for training, and additional, non-duplicative or dovetailed supportive services. CoC member agencies assist with the application process, transportation to eligibility appointments, advocate for families, assist with procuring necessary verifications for eligibility determination, and can act as an authorized representative for an applicant/recipient if needed. To ensure that eligible families continue to receive assistance, Individual Service Plans incorporate maintenance of benefits. CoC agencies will question breaks in service and will assist with reapplication if necessary. CoC member agencies are represented at regularly scheduled interagency meetings with staff from DHHS, NHES, NHEP, and Community Action Agencies to share program and policy information including changes, new or pilot programs and partnerships, and gain policy clarification if necessary. Staff may also refer to the State of New Hampshire Department of Health and Human Services Policy Manual Library at www.state.nh.us/PMIndex.htm for policy and case processing information if necessary.

- **Food Stamps-** CoC member agencies assist the homeless persons they serve to apply for all benefits for which they may be potentially eligible. CoC member agencies have been instructed in the basic eligibility requirements and services offered through the Food Stamp program in order to identify potentially eligible individuals/families. Food Stamp funds are directly vendored to individuals, or authorized representatives. The Food Stamp program also has a mandatory job search component, for individuals who do not meet exemption criteria. Individuals participating in job search, including voluntary participants, are entitled to reimbursements for support services. Child Care reimbursement is allowed for up to 40 days in any six-month period, transportation reimbursement is available at a rate of .21 per mile. A maximum of \$25 per month is allowed for expenses such as transportation or other costs that are reasonably necessary and directly related to participation in job search. CoC agencies assist with the application process, may assist with procurement of eligibility verifications, provide transportation to eligibility appointments, and act as an Authorized Representative for an applicant/recipient if needed. To ensure that eligible families continue to receive assistance, Individual Service Plans may incorporate maintenance of benefits. CoC agencies will question breaks in service and will assist with reapplication if necessary. CoC member agencies are represented at regularly scheduled interagency meetings to share program and policy information including changes, and gain policy clarification if necessary. Staff may also refer to the State of New Hampshire Department of Health and Human Services Policy Manual Library at www.state.nh.us/PMIndex.htm for policy and case processing information if necessary.
- **SSI-** CoC member agencies assist the homeless persons they serve to apply for all benefits for which they may be potentially eligible. CoC member agencies have basic information regarding this federal income supplement program funded by general tax revenues designed to help aged, blind and disabled people with little or no income. This program provides cash to meet basic needs of food clothing and shelter. CoC member agencies obtain current information regarding SSI, including eligibility, laws and regulations, and SSI payments at www.governmentguide.com/benefits_and_assistance/govsite. CoC member agencies assist individuals with the application process, transportation to the local Social Security office, and may attend eligibility appointments or assist in obtaining required documentation as needed.
- **Workforce Investment Act-** CoC member agencies assist the homeless persons they serve to apply for all programs for which they may be potentially eligible and will lead to self-sufficiency. CoC member agencies have been instructed in the basic guidelines of this program in order to identify individuals with potential eligibility. Opportunities to access this training and collaboration with the staff of Workforce Investment Act programs is particularly effective since Southern New Hampshire Services, Inc., an active member of the Nashua CoC, administers these programs within Nashua and all

of Hillsborough County. As a local Community Action Agency, Southern New Hampshire Services, Inc., has training funds to assist individuals who have been unable to find employment because they lack the skills and/or experience necessary to obtain employment. Funding is also available for employed workers who are not earning sufficient wages to support themselves or their families. Approved training programs are directly related to a list of “demand occupations” provided by the State of New Hampshire Labor Market Information Bureau. Demand occupations are those with above average annual openings in the state of New Hampshire and wages at or above \$10 per hour (with the exception of some Child Care, Health Care and Human Services positions). Supportive Services are also provided if directly related to the successful completion of a training program. These services have included books, registration fees, testing fees, and transportation reimbursement. Career exploration and career counseling services are provided prior to training. Job search and job referral/job development services are provided, upon completion of training, using resources from the New Hampshire Department of Employment Security. The Job Skills One-Stop Center system mandated by the WIA of 1998 centralizes employment services at the local New Hampshire Employment Security Office. CoC member agencies attend regular meetings with staff from the local Community Action Agency administering the program for ongoing review of program and policy information. CoC member agencies continue to participate on the local I-Team (Implementation Team Committee of NH Employment Services) now integrated with the local One-Stop Career Center Team meetings. Additional resources include the U.S. Department of Labor website at www.doleta.gov. CoC member agencies may assist with transportation to appointments, assist with the application process, aid in procurement of eligibility information, and provide additional case management and additional, non-duplicative or dovetailed supportive services to eliminate barriers and ensure the successful completion of a training program, successful acquisition of a position of employment, or eliminate barriers to job retention.

- **Veterans Health Care Programs** – CoC member agencies assist the homeless persons they serve to apply for all benefits for which they may be potentially eligible. CoC member agencies have basic information regarding Veterans Health Care Programs. The U.S. Department of Veteran’s Affairs offers a wide range of benefits to our Nation’s Veterans, service members, and their families. VA benefits and services fall into the major categories of ; Disability benefits, Education benefits, Vocational Rehabilitation, Home Loans, Burial benefits, Dependants’ and Survivors’ benefits, Health Care, and Life Insurance. Each VA benefit has its own eligibility requirements. Individuals eligible for VA benefits include; a veteran, a veteran’s dependent, a surviving spouse or child of a deceased veteran, a member of the Reserves or National Guard, as well as an active duty service member. The VA administers two disability programs, which pay monthly benefits to disabled veterans. The VA provides a number of health care services including, hospital, outpatient medical, dental, pharmacy, and prosthetic services, sexual trauma counseling, specialized health care for women veterans, health and rehabilitation programs for homeless veterans, readjustment counseling, alcohol and drug dependency treatment, and medical treatment for exposure to radiation or environmental hazards. CHAMPVA, the VA Civilian Health and Medical Program, shares the cost of medical care for dependants and survivors of veterans. If not eligible for TRICARE (the medical program for civilian dependents provided by the Defense Department) or Medicare Part A, as a result of reaching age 65. CoC member agencies have established relationships with the local Veterans Employment Representatives and the N.H. State Veterans Council, Veterans Service Officer for information on potential eligibility and referral to appropriate services. CoC member agencies may assist with the eligibility process including providing transportation to appointments or procurement of eligibility verification. Additional information on enrollment, including enrollment forms and on-line applications, can be found at www.va.gov/health/elig/. The VA also operates a toll free number to assist Veterans with information about and access to benefits at 1-800-827-1000.
- (3) ensure they receive assistance under **each** of the programs for which they are enrolled.
- **Medicaid**- Conditions of homelessness such as instability, lack of a permanent mailing address, phone, or lack of transportation often make it difficult for homeless individuals/families to retain benefits and supportive services from mainstream resources. On a local level, CoC member agencies actively participate in services coordination and will incorporate maintenance of benefits into an Individual

Service Plan or otherwise follow up on continued receipt of benefits. CoC member agencies will follow through with homeless individuals/families they serve to ensure cases are properly processed and not denied/closed for lack of appropriate verifications, missed appointments, lack of attendance at eligibility redetermination appointments, and/or not reporting household changes. CoC member agencies will assist with transportation coordination to appropriate offices, will assist with procurement of eligibility verifications oftentimes assisting with costs involved (for example the cost of sealed birth certificates), and may act as an authorized representative, in-care-of contact, or provide voice mail for the homeless individuals they serve. CoC member agencies advocate for individuals/families, question breaks in service, and assist with the reapplication process if necessary. CoC member agencies will refer to local office staff or the State of New Hampshire Department of Health and Human Services Policy Manual Library at www.state.nh.us/PMIndex.htm for policy and case processing information if necessary. CoC member agencies have also utilized the State's Medicaid Client Services to resolve issues and gain policy clarification and may refer individuals to or advocate for individuals/families through this medium. CoC member agencies are also familiar with the Fair Hearing Process should there be a disagreement with any action taken on a particular case and can advocate for or otherwise assist the homeless persons they serve in this process.

- **State Children's Health Insurance Program (SCHIP)**- Conditions of homelessness, as previously stated, such as instability, lack of a permanent mailing address, phone, or lack of transportation often make it difficult for homeless individuals/families to retain benefits and supportive services from mainstream resources. On a local level, CoC member agencies actively participate in services coordination and will incorporate maintenance of benefits into an Individual Service Plan or otherwise follow up on continued receipt of benefits. CoC member agencies will follow through with homeless individuals/families they serve to ensure cases are properly processed and not denied/closed for lack of appropriate verifications, missed appointments, lack of attendance at eligibility redetermination appointments, and/or not reporting household changes. CoC member agencies will assist with transportation coordination to appropriate offices, will assist with procurement of eligibility verifications oftentimes assisting with costs involved and may act as an authorized representative or in-care-of contact for the homeless individuals/families they serve. CoC member agencies advocate for individuals/families, question breaks in service, and assist with the reapplication process if necessary. CoC member agencies will refer to agency staff or the State of New Hampshire Department of Health and Human Services Policy Manual Library at www.state.nh.us/PMIndex.htm for policy and case processing information if necessary. CoC member agencies have also utilized the State's Medicaid Client Services to resolve issues and gain policy clarification and may refer individuals to or advocate for individuals/families through this medium. CoC member agencies are also familiar with the Fair Hearing Process should there be a disagreement with any action taken on a particular case and can advocate for or otherwise assist the homeless families we serve in this process.
- **TANF**- The environment encompassing homelessness which may include instability, lack of a permanent mailing address, phone, or lack of transportation often make it difficult for homeless individuals/families to retain benefits and supportive services from this and other mainstream resources. On a local level, CoC member agencies actively participate in services coordination and will incorporate maintenance of benefits into an Individual Service Plan or otherwise follow up on continued receipt of benefits. CoC member agencies will follow through with homeless individuals/families they serve to ensure cases are properly processed and not denied/closed for lack of appropriate verifications, missed appointments, lack of attendance at eligibility redetermination appointments, and/or not reporting household changes. CoC member agencies will assist with transportation coordination to appropriate offices, will assist with procurement of eligibility verifications oftentimes assisting with costs involved (for example the cost of sealed birth certificates), and may act as an authorized representative or in-care-of contact for the homeless individuals they serve. CoC member agencies advocate for individuals/families, question breaks in service, and assist with the reapplication process if necessary. CoC member agencies will refer to agency staff or the State of New Hampshire Department of Health and Human Services Policy Manual Library at www.state.nh.us/PMIndex.htm for policy and case processing information if necessary. CoC member agencies have also utilized DFA Client Services in New Hampshire to resolve issues and gain policy clarification and may refer individuals to or advocate for individuals/families through this medium.

CoC member agencies are also familiar with the Fair Hearing Process should there be a disagreement with any action taken on a particular case and can advocate for or otherwise assist the homeless families we serve in this process. CoC member agencies are represented regularly at meetings with staff of the NHEP Work Program, NHES, and the Division of Family Assistance to share program and policy information.

- **Food Stamps-** The previously stated conditions of homelessness such as instability, lack of a permanent mailing address, phone, or lack of transportation often make it difficult for homeless individuals/families to retain benefits and supportive services from mainstream resources. On a local level, CoC member agencies actively participate in services coordination and will incorporate maintenance of benefits into an Individual Service Plan or otherwise follow up on continued receipt of benefits. CoC member agencies will follow through with homeless individuals/families they serve to ensure cases are properly processed and not denied/closed for lack of appropriate verifications, missed appointments, lack of attendance at eligibility redetermination appointments, and/or not reporting household changes. CoC member agencies will assist with transportation coordination to appropriate offices, will assist with procurement of eligibility verifications, and may act as an authorized representative or in-care-of contact for the homeless individuals they serve. CoC member agencies advocate for individuals/families, question breaks in service, and assist with the reapplication process if necessary. CoC member agencies will refer to agency staff or the State of New Hampshire Department of Health and Human Services Policy Manual Library at www.state.nh.us/PMIndex.htm for policy and case processing information if necessary. CoC member agencies have also utilized the State Client Services to resolve issues and gain policy clarification regarding the Food Stamp program. CoC member agencies are also familiar with the Fair Hearing Process should there be a disagreement with any action taken on a particular case and can advocate for or otherwise assist the homeless families we serve in this process.
- **SSI -** As stated with regard to many mainstream programs, conditions of homelessness such as instability, lack of a permanent mailing address, phone, or lack of transportation often make it difficult for homeless individuals/families to retain benefits from mainstream resources. On a local level, CoC member agencies actively participate in services coordination and will incorporate maintenance of benefits into an Individual Service Plan or otherwise follow up on continued receipt of benefits. CoC member agencies will follow through with homeless individuals/families they serve to ensure cases are properly processed and not denied/closed for lack of appropriate verifications, missed appointments, and/or not reporting household changes. CoC member agencies will assist with transportation coordination to appropriate offices, will assist with procurement of eligibility verifications and may act as an in-care-of contact for the homeless individuals they serve. CoC member agencies may obtain information regarding SSI, including eligibility, laws and regulations, and SSI payments at www.governmentguide.com/benefits_and_assistance/govsite
- **Workforce Investment Act-** As stated above, conditions of homelessness such as instability, lack of a permanent mailing address, phone, or lack of transportation often make it difficult for homeless individuals/families to obtain and retain benefits and supportive services from mainstream resources. On a local level, CoC member agencies actively participate in services coordination and will incorporate participation into an Individual Service Plan or otherwise follow up on continued receipt of services. CoC member agencies will follow through with homeless individuals they serve to ensure that applications are properly processed and not denied/closed for lack of appropriate verifications, missed appointments, and/or not reporting household changes. CoC member agencies will assist with transportation coordination to appropriate offices, will assist with procurement of eligibility verifications, may act as an in-care-of contact for the homeless individuals they serve, may assist with faxing required weekly attendance sheets for individuals in training programs to the WIA Counselor, and assist with additional non-duplicative support services to ensure successful completion of a training program or to ensure job retention for employed participants. The Workforce Investment Act is administered locally by an active CoC member agency, Southern New Hampshire Services, Inc. Staff of other CoC member agencies regularly attend meetings with staff from this local Community Action Agency for ongoing review of program and policy information. Additional information may be

obtained at the U.S. Department of Labor website at www.doleta.gov. CoC member agencies are also aware of the U.S. Department of Labor Grievance Procedure Process related to this program, should eligibility or other issues come into question and may refer individuals to or advocate for individuals through this process.

- Veterans Health Care** – Common conditions of homelessness such as instability, lack of a permanent mailing address, phone, or lack of transportation often make it difficult for homeless individuals/families to retain benefits and supportive services from mainstream resources. CoC member agencies will follow through with homeless individuals/families they serve to ensure cases are properly processed and not denied/closed for lack of appropriate verifications, missed appointments, and/or not reporting pertinent changes. The Veterans Administration operates a toll-free number to assist Veterans with information about and access to benefits for Veterans (1-800-827-1000). Additional information on enrollment, including enrollment forms and on-line applications, can be found at www.va.gov/health/elig/. CoC member agencies may assist the homeless individuals they serve in contacting the VA and assist with follow up to the eligibility process including providing transportation to appointments or procurement of eligibility verifications.

c. **Use of Mainstream Resources.** how the identified mainstream resources are currently (within the past 2 years) being used to assist **homeless persons** in the Greater Nashua’s Continuum of Care.

Mainstream Resources	Use of Resource in CoC System (e.g., rehab of rental units, job training, etc) for homeless persons	Specific Project Name	\$ Amount or number of units/beds provided within the last 2 years for the homeless
CDBG	<ul style="list-style-type: none"> Orphanage , transitional housing for those aging out of system Repairs to facility serving homeless due to mental health issues Repairs to transitional housing facility for homeless women and children Repairs to facility providing educational support for homeless individuals and families Program support for food, shelter, and case management for the homeless Combination of funds for substance abuse treatment, prevention of homelessness, and health needs of the homeless Emergency shelter funds Health Program for uninsured homeless, at risk of homelessness 	Nashua Children’s Home Community Council HVAC Marguerite’s Place Nashua Adult Learning Center Nashua Soup Kitchen and Shelter Keystone Hall Boys and Girls Club Lamprey Health Center Harbor Homes Emergency Shelter Neighborhood Health Center	\$42,000.00 \$35,000.00 \$40,000.00 \$45,000.00 \$41,850.00 \$129,000.00 \$57,400.00 \$45,000.00
HOME	<ul style="list-style-type: none"> To acquire/rehab 10 units of housing for homeless women and children 	Marguerite’s Place	\$300,000.00

Mainstream Resources	Use of Resource in CoC System (e.g., rehab of rental units, job training, etc) for homeless persons	Specific Project Name	\$ Amount or number of units/beds provided within the last 2 years for the homeless
Housing Choice Vouchers (Only if priority is given to homeless)	<ul style="list-style-type: none"> *Per Nashua Housing Authority, homeless individuals are included in those who receive vouchers, however no priority is given to the homeless 		
Public Housing (Only if units are dedicated to homeless)	<ul style="list-style-type: none"> *Per Nashua Housing Authority, there are no units specifically dedicated to homeless 		
Mental Health Block Grant	<ul style="list-style-type: none"> Provide housing and support services to homeless chronically mentally ill FEMA Grant for food for homeless shelter FEMA Grant food for homeless peer support State Grant-in-Aid support for homeless shelter 	Harbor Homes Permanent Housing 2 Harbor Homes Emergency Shelter Harbor Homes Gathering Place Harbor Homes Emergency Shelter	\$61,372.00 \$4,000.00 \$5,200.00 \$83,408.00
Substance Abuse Block Grant	<ul style="list-style-type: none"> SAMSHA Block Grant-distributed to agencies operating programs for homeless individuals with dual diagnosis. 	Keystone Hall	\$300,000.00
Social Services Block Grant	<ul style="list-style-type: none"> Title XX Daycare fees for children in homeless families 	Marguerite's Place	\$80,000.00
Welfare to Work	<ul style="list-style-type: none"> * Per Hillsborough County Community Action Agency homeless individuals are included in caseloads but no specific programs/specific funding is allocated to the homeless 		
State Funded Programs State ESG Grant State Funded Grant	<ul style="list-style-type: none"> Provide housing and support services for homeless shelter Provide meals and general support for homeless peer support program 	Harbor Homes Emergency Shelter Harbor Homes Gathering Place	\$26,250.00 \$192,415.00
City/ County Funded Programs	<ul style="list-style-type: none"> To acquire 2 affordable, permanent housing units for homeless women and children graduated of transitional housing program To develop 2 transitional housing units in existing 	MP Housing Nashua Pastoral Care Center	\$25,000.00 \$25,000.00

Mainstream Resources	Use of Resource in CoC System (e.g., rehab of rental units, job training, etc) for homeless persons	Specific Project Name	\$ Amount or number of units/beds provided within the last 2 years for the homeless
	<ul style="list-style-type: none"> • building • Provide housing support for homeless shelter • Shelter costs (hotel rooms) for homeless individuals/families awaiting shelter beds • GED and Child Care programs to homeless in transitional housing, shelters • Outreach for persons with HIV/AIDS, homeless included • Orphanage, children who would otherwise be homeless • Assessment, treatment for clients that include homeless • Dental Services for uninsured adults and children including homeless • Permanent Supportive housing for homeless • Services for persons in crisis including homeless • Shelter, advocacy, and counseling for those escaping domestic violence • Transitional Housing for homeless women and children • Security Deposits helping homeless households • Food, shelter, and skills training for homeless • Transitional Housing, childcare, and case management for homeless women and children 	<ul style="list-style-type: none"> Harbor Homes Emergency Shelter Nashua City Welfare Nashua Adult Learning Center Southern NH Task Force on HIV Nashua Children’s Home Community Council Assessment/Treatment Dental Connection Harbor Homes, Inc. Community Council Information and Referral Rape and Assault Support Services Nashua Pastoral Care- Transitional Housing Nashua Pastoral Care- Deposit Loans Nashua Soup Kitchen and Shelter Marguerite’s Place, Inc. 	<ul style="list-style-type: none"> \$57,400.00 \$164,047.54 \$35,000.00 \$15,000.00 \$16,000.00 \$13,726.00 \$24,824.00 \$25,000.00 \$25,000.00 \$25,000.00 \$23,000.00 \$18,500.00 \$8,150.00 \$10,000.00
Foundations- (Identify by name)	<ul style="list-style-type: none"> • Anheuser Busch- sponsor painting, clean-up of housing for homeless • Benjamin Cohen Trust- building repairs and maintenance for group home for homeless mentally ill • Nashua Rotary West- tenant rent subsidy for homeless shelter • Arthur Getz Trust- provide building repairs and 	<ul style="list-style-type: none"> Harbor Homes Operation Brightside Harbor Homes Permanent Housing 1 Program Harbor Homes Emergency Shelter Harbor Homes Emergency Shelter 	<ul style="list-style-type: none"> \$3,000.00 \$3,500.00 \$1,000.00 \$2,000.00

Mainstream Resources	Use of Resource in CoC System (e.g., rehab of rental units, job training, etc) for homeless persons	Specific Project Name	\$ Amount or number of units/beds provided within the last 2 years for the homeless
	maintenance at homeless shelter <ul style="list-style-type: none"> • Nashua Rotary- provide tenant rent subsidy for homeless shelter • Anna Stearns Trust- provide operating funds for homeless housing program • Building 19 Foundation- provide operating funds for homeless housing program 	Harbor Homes Emergency Shelter Harbor Homes Permanent Housing 3 Program Harbor Homes Permanent Housing 3 Program	\$1,500.00 \$1,000.00 \$100.00

8. **Bonus for Empowerment Zones (EZ) and Enterprise Communities (EC).**

NOT APPLICABLE.

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 25-page limitation**)

Project Priority Number	Name of Project	Type of Contribution	Source or Provider	Value of written commitment
1	Harbor Homes, Inc. Permanent Housing VI	Apartment set up and maintenance	Volunteers – 18 hours	\$180.00
1	Harbor Homes, Inc. Permanent Housing VI	Q/A Survey	Volunteers – 30 hours	\$300.00
1	Harbor Homes, Inc. Permanent Housing VI	Fundraising activities	Volunteers – 90 hours	\$900.00
1	Harbor Homes, Inc. Permanent Housing VI	Painting, yard clean up	Volunteers – 30 hours	\$300.00
1	Harbor Homes, Inc. Permanent Housing VI	Case Management	Marguerite’s Place	\$4,000.00
2	Keystone Hall	Transportation	NH Division of Alcohol and Drug Abuse Prevention and Recovery	\$5,000.00
2	Keystone Hall	Case Management	NH Housing and Homeless	\$20,000.00
2	Keystone Hall	Case Management	NH Division of Alcohol and Drug Abuse Prevention and Recovery	\$44,000.00
2	Keystone Hall	Substance Abuse Treatment	NH Division of Alcohol and Drug Abuse Prevention and Recovery	\$44,000.00
2	Keystone Hall	Client Rent	Keystone Hall	\$10,000.00
2	Keystone Hall	Cash	Thurston Tool	\$1,000.00
2	Keystone Hall	Cash	Milford Rotary	\$1,000.00
2	Keystone Hall	Cash	Dionne & Strout, LTD	\$500.00
3	Marguerite’s Place, Inc.	Program Support	United Way Donor Designations	\$26,383.42
3	Marguerite’s Place, Inc.	Program Support	Religious Groups	\$9,627.04
3	Marguerite’s Place, Inc.	Program Support	Ella Anderson Trust	\$1,200.00
3	Marguerite’s Place, Inc.	Program Support	Barker Foundation	\$5,000.00

Project Priority Number	Name of Project	Type of Contribution	Source or Provider	Value of written commitment
3	Marguerite's Place, Inc.	Program Support	Ann DiNicola Trust	\$2,000.00
3	Marguerite's Place, Inc.	Program Support	United Way Program Award	\$20,000.00
3	Marguerite's Place, Inc.	Program Support	Fidelity Trust	\$250.00
3	Marguerite's Place, Inc.	Residential Fees	Residents of Facility	\$12,000.00
3	Marguerite's Place, Inc.	Employment/Education Services	Nashua Soup Kitchen and Shelter	\$10,000.00
3	Marguerite's Place, Inc.	Fundraising Efforts- Cash	Marguerite's Place	\$25,000.00
3	Marguerite's Place, Inc.	Program Support	BAE Employee Community Fund	\$11,432.36
4	Nashua Soup Kitchen & Shelter, Inc.-Employment Advocacy Project	Housing & Case Management	Marguerite's Place	\$6,000.00
4	Nashua Soup Kitchen & Shelter, Inc.-Employment Advocacy Project	Housing & Case Management	Nashua Pastoral Care Center	\$4,000.00
4	Nashua Soup Kitchen & Shelter, Inc.-Employment Advocacy Project	Housing & Case Management	Keystone Hall	\$3,000.00
4	Nashua Soup Kitchen & Shelter, Inc.-Employment Advocacy Project	Housing & Case Management	Southern NH Services	\$45,000.00
4	Nashua Soup Kitchen & Shelter, Inc.-Employment Advocacy Project	Automobiles (6-10 used cars)	Donated by local dealer to NSK&S	\$10,000.00
5	Homeless Outreach- Southern NH Services	Cash	Southern New Hampshire Services	\$20,000.00
5	Homeless Outreach – Southern NH Services	Grant	HUD, (EDI)	\$15,000.00
6	NH Statewide HMIS Project	Labor: project management and 24/7 staff support	Community Services Council of NH	\$133,158.00
6	NH Statewide HMIS Project	Facilities, utilities	Community Services Council of NH	\$11,050.00
7	Harbor Homes Permanent Housing IV	Internship	Volunteers – 64.25 hours	\$642.50
7	Harbor Homes Permanent Housing IV	Apartment set up and maintenance	Volunteers – 34 hours	\$340.00
7	Harbor Homes Permanent Housing IV	Q/A Survey	Volunteers – 60 hours	\$600.00
7	Harbor Homes Permanent Housing IV	Fundraising activities	Volunteers – 135 hours	\$1,350.00

Project Priority Number	Name of Project	Type of Contribution	Source or Provider	Value of written commitment
7	Harbor Homes Permanent Housing IV	Painting, yard clean-up	Volunteers – 30 hours	\$300.00
7	Harbor Homes Permanent Housing IV	Case Management	Marguerite's Place	\$5,000.00

Total- **\$509,513.32**

Continuum of Care: Project Priorities

(This entire chart will count as only one page towards the 25-page limitation)

Applicant	Project Sponsor and Project Name	Numeric Priority	*Requested Project Amount	Term of Project	Program (Check only one)				
					SHP new	SHP renew	S+C new	S+C renew	SRO new
Harbor Homes, Inc.	Harbor Homes, Inc. Permanent Supportive Housing VI	1	\$162,852	3 (yr)	X				
Keystone Hall (GNAC)	Keystone Hall (GNAC) Transitional Housing for Homeless Alcoholics and Addicts	2	\$60,083	1 (yr)		X			
Marguerite's Place	Marguerite's Place Transitional Housing for Homeless Women and Children	3	\$58,481	1 (yr)		X			
Nashua Soup Kitchen & Shelter, Inc.	Harbor Homes, Inc. Employment Advocacy Project	4	\$59,546	1 (yr)		X			
Southern New Hampshire Services, Inc.	Southern New Hampshire Services, Inc. Homeless Outreach Initiative	5	\$30,736	1 (yr)		X			
NH Division of Behavioral Health	Community Services Council of New Hampshire NH Statewide Homeless Management Information System Project (HMIS)	6	\$16,694	1 (yr)	X				
Harbor Homes, Inc.	Harbor Homes, Inc. Permanent Supportive Housing IV	7	\$100,929	1 (yr)		X			
		8							
		9							
		10							
		11							
		12							
Total Requested Amount:			\$489,321.00						

+Requested HMIS project amount in this application is the Greater Nashua CoC's allocation at 8% of project's Total SHP request of \$208,681. Total SHP Request balance is allocated to Balance of State and Greater Manchester CoCs in their 2002 CoC Applications. See Exhibit 2 for details.

Continuum of Care: Gaps Analysis				
		Estimated	Current	Unmet need/
		Need	Inventory	Gap
Individuals				
Beds	Emergency Shelter	95	29	66
	Transitional Housing	16	10	6
	Permanent Supportive Housing	248	161	87
	Total	359	200	159
Supportive Services Slots	Job Training	40	20	20
	Case Management	173	29	144
	Substance Abuse Treatment	36	10	26
	Mental Health Care	159	152	7
	Housing Placement	188	39	149
	Life Skills Training	105	16	89
	Other			
Sub-populations	Chronic Substance Abuse	64	10	54
	Seriously Mentally Ill	161	140	21
	Dually-Diagnosed	45	0	45
	Veterans	2	2	0
	Persons with HIV/AIDS	4	4	0
	Victims of Domestic Violence	4	1	3
	Youth	1	0	1
	Other: Physical Handicap	15	0	15
Persons in Families With Children				
Beds	Emergency Shelter	98	39	59
	Transitional Housing	190	81	109
	Permanent Supportive Housing	96	56	40
	Total	384	176	208
Supportive Services Slots	Job Training	34	11	23
	Case Management	200	91	109
	Child Care	45	23	22
	Substance Abuse Treatment	12	0	12
	Mental Health Care	73	48	25
	Housing Placement	307	120	187
	Life Skills Training	87	54	33
Other				
Sub-populations	Chronic Substance Abuse	18	0	18
	Seriously Mentally Ill	31	20	11
	Dually-Diagnosed	13	0	13
	Veterans	3	2	1
	Persons with HIV/AIDS	2	2	0
	Victims of Domestic Violence	18	9	9
	Other			
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