

GREATER NASHUA CONTINUUM OF CARE MEETING MINUTES

Nashua City Hall Auditorium

February 4, 2015

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The meeting was called to order at 8:05am by chair, Ana Pancine. Ana explained the rotating format of the monthly meetings (one meeting committee reports; next meeting presentations). She invited anyone who was new to add their name to the sign-in sheet and asked that people review listings on the sign-in sheet to make sure the information was up-to-date.

Introductions were made around the table.

The minutes of the January 7, 2015 were reviewed. Wendy LeBlanc motioned that the minutes be accepted; Barbara Alves seconded the motion. Motion passed.

Presentation:

Coordinated Access

Bob Mack updated the group on work that has been done to establish a Coordinated Access process in the community. Ending Homelessness Committee has worked to develop this process. Lead agencies are Harbor Homes, Southern NH Rescue Mission and the Front Door Agency.

Goal of the process is to provide a “transparent pipeline” that connects the homeless to needed resources that moves people through the system and out of shelters as quickly as possible.

A toll-free number has been established (844-800-9911) that those in need of services can use. Line rings at all three of the lead agencies; each agency has been assigned a specific day/s they are responsible for fielding calls. If a call goes unanswered for five rings, one of the other lead agencies will pick up the call.

The phone line is covered from 8:30am-4:30pm Monday through Friday.

Coordinated Access was launched at the Homeless Connect program last week; a 60 day trial is planned. The lead agencies are meeting every other week to review progress.

A client intake form has been developed and continues to be fine-tuned. Once client needs have been identified, information will be sent out to those on the Coordinated Access Action Group in an effort to connect the person in crisis to the appropriate services. Those receiving the alert are asked to respond quickly with regard to the resources they have available to assist the person.

Additional names/resources will be added to the Action Group list.

Agencies that serve the homeless population are urged to “continue what they’re doing” by serving those individuals who present at their agencies who match the services they provide. Coordinated Access is a means to provide a way to connect those who don’t meet an agency’s criteria efficiently.

With client’s permission, information gathered will be entered into HMIS.

Bob emphasized that there is no money budgeted to fund the Coordinated Access process; lead agencies have accepted the responsibility without compensation. Thought was expressed that having solid data about the usage of the system may lead to some funding opportunities.

Development of Coordinated Access continues to be a work in progress.

Language is an issue – currently using Language Line if needed.

Group discussed need to educate community about the process, especially local welfare offices and schools.

Question was raised about state involvement in our local efforts and whether it would be appropriate for someone from the District Office to attend the GNCOC meetings. Bob indicated that the state is in the process of finding a way to coordinate the efforts being done in the GNCOC, Manchester COC and Balance of State group.

Question was raised on whether the intake form would “travel” with the client so that others would have access to details regarding an individual case. It was noted that if/when we move towards an open HMIS system, this would be possible.

Additional question was raised about individuals being released from the state hospital. Ideal situation would be for the individual to have a discharge plan that addressed housing needs; reality is that if they call the Coordinated Access line, every effort would be made to address their needs.

The Ending Homelessness Committee and lead agencies were thanked for their hard work and commitment to developing the Coordinated Access process. Bob will continue to provide the GNCOC with additional information as it becomes available.