



COMMITTEE ON COMMUNITY IMPROVEMENT

March 4, 2025 at 5:45 PM

Aldermanic Chambers, City Hall (3rd Floor)

Members: Aldermen Morgan, Terrio, Kantor, Long, Burkush

AGENDA

The Chairman calls the meeting to order.

The Clerk calls the roll.

1. Amending Resolution and Budget Authorization providing for the acceptance and expenditure of funds in the amount of \$500,000 for CIP 211723 Opioid Litigation Settlement Trust.
Ladies and Gentlemen, what is your pleasure?
2. Amending Resolution and Budget Authorizations providing for the transfer and expenditure of funds in the amount of \$201,000 for CIP 611125 Hope for New Hampshire Recovery: Hope Connections.
Ladies and Gentlemen, what is your pleasure?
3. Amending Resolution and Budget Authorization providing for the acceptance and expenditure of funds in the amount of \$125,000 for CIP 611225 447 Union Street Community Engagement Training Center.
Ladies and Gentlemen, what is your pleasure?
4. Amending Resolution and Budget Authorization providing for the acceptance and expenditure of funds in the amount of \$125,000 for CIP 611325 231 Merrimack Street Affordable Housing Program.
Ladies and Gentlemen, what is your pleasure?
5. Amending Resolution and Budget Authorization providing for the transfer and expenditure of funds in the amount of \$100,000 for CIP 711221 Sheffield PS Force Main.
Ladies and Gentlemen, what is your pleasure?

6. Communication from Peter Marr, Chief of Police, requesting a change to the project description of CIP 410525 ARPA - Park Enforcement.
Ladies and Gentlemen, what is your pleasure?
7. Communication from Denise van Zanten, Library Director, requesting an extension to the completion date of CIP 712424 Carpenter Library Interior Abatement & Painting to June 30, 2026.
Ladies and Gentlemen, what is your pleasure?
8. Communication from Jeff Belanger, Planning and Community Development Director, requesting that the administering department for CIP 810725 SNHU Arena Capital Improvements be changed from Finance to DPW-Facilities.
Ladies and Gentlemen, what is your pleasure?
9. Communication from the Planning and Community Development Director submitting the FY25 Second Quarter ARPA Funds Report.
Ladies and Gentlemen, what is your pleasure?
10. Communication from Ryan Cashin, Chief of Fire, requesting permission to donate a vehicle to Hope for NH Recovery in support of its Hope Connections program.
Ladies and Gentlemen, what is your pleasure?

If there is no further business, a motion is in order to adjourn.



Sharon Y. Wickens
Finance Officer

Michele A. Bogardus
Deputy Finance Officer

CITY OF MANCHESTER
Finance Department

February 18, 2025

To: Alderman Chris Morgan, Chairman CIP Committee
From: Jennifer Heon, Manager Accounting & Reporting

RE: *CIP 211723 – Opioid Litigation Settlement Trust*

The Finance Office is requesting a budget adjustment to CIP 211723 – Opioid Litigation Settlement Trust. The City receives amounts, randomly, from the State of New Hampshire from the Opioid Litigation Settlement Trust. In turn, the Finance department must request, from CIP, the adjustment to the budget to accept the funds.

We are proposing to increase the budget by \$500,000 in anticipation of receiving periodic deposits from the State of New Hampshire.

If you have any questions or concerns, please feel free to contact me at 603-792-6612 or by email jheon@manchesternh.gov.

Sincerely,

Jennifer Heon
Manager – Accounting & Reporting
Finance

City of Manchester
New Hampshire

In the year Two Thousand and Twenty Five

A RESOLUTION

“Amending the FY2023 Community Improvement Program authorizing and appropriating funds in the amount of Five Hundred Thousand Dollars (\$500,000) for the FY2023 CIP 211723 Opioid Litigation Settlement Trust.”

Resolved by the Board of Mayor and Aldermen of the City of Manchester as follows:

WHEREAS, the Board of Mayor and Aldermen has approved the 2023 CIP as contained in the 2023 CIP budget; and

WHEREAS, the 2023 CIP contains all sources of funds to be used in the execution of projects; and

WHEREAS, the Board of Mayor and Aldermen wishes to allow for the appropriation of NH Opioid Litigation Settlement Trust funds in the amount of \$500,000 for the FY2023 CIP 211723 Opioid Litigation Settlement Trust.”

NOW, THEREFORE, be it resolved that the 2023 and 2025 CIP be amended as follows:

By increasing:

FY2023 CIP 211723 Opioid Litigation Settlement Trust	\$500,000 State
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Resolved, that this Resolution shall take effect upon its passage

CIP BUDGET AUTHORIZATION

CIP#: 211723 Project Year: 2023 CIP Resolution: 5/17/2022
 Title: Opioid Litigation Settlement Trust Amending Resolution: 3/18/2025
 Administering Department: Finance Department Revision: #10

Project Description: Distribution from the State of NH for abatement purposes to fight the opioid epidemic.
 NH RSA 126-A:84, IV

Federal Grants Federal Grant: No **Environmental** Review Required: No
 Grant Executed: Completed:

Critical Events

1. Project Initiation	12/20/2022
2. Project Completion	12/31/2025
3.	
4.	
5.	
	12/31/2025

Line Item Budget

	STATE			TOTAL
Salaries and Wages	\$0.00	\$0.00	\$0.00	\$0.00
Fringes	\$0.00	\$0.00	\$0.00	\$0.00
Design/Engineering	\$0.00	\$0.00	\$0.00	\$0.00
Planning	\$0.00	\$0.00	\$0.00	\$0.00
Consultant Fees	\$0.00	\$0.00	\$0.00	\$0.00
Construction Admin	\$0.00	\$0.00	\$0.00	\$0.00
Land Acquisition	\$0.00	\$0.00	\$0.00	\$0.00
Equipment	\$0.00	\$0.00	\$0.00	\$0.00
Overhead	\$0.00	\$0.00	\$0.00	\$0.00
Construction Contracts	\$0.00	\$0.00	\$0.00	\$0.00
Other	\$987,850.09	\$0.00	\$0.00	\$987,850.09
TOTAL	\$987,850.09	\$0.00	\$0.00	\$987,850.09

Revisions: #10 - 3/18/25 Increase budget \$500,000 STATE (\$487,850.09 to \$987,850.09) to allow for periodic deposits.
 #9 - 3/18/25 decrease budget \$201,000 STATE (\$688,850.09 to \$487,850.09) funds to 611125.
 #8- 1/21/25 Increase budget \$166,697.83 STATE (\$522,152.26 to \$688,850.09) NH Opioid Litigation Settlement Trust
 #7 - 7/2/24 decrease budget \$153,327 STATE (\$675,479.26 to \$522,152.26) funds to CIP 211325.

Comments: #1 - Increases budget \$70,554.12 (from \$494,918.65 to \$565,472.77).
 #2 - Decrease budget by \$150,000 (from \$565,472.77 to \$415,472.77) and transfer to CIP #212023
 #3 - Increase budget by \$13,077.52 (From \$415,472.77 to \$428,550.29 STATE)
 #4 - 9/5/23 Decrease budget by \$200,000 (from \$428,550.29 to \$228,550.29) and transfer to CIP #212023
 #5- 10/3/23 Increase budget by \$65,662.94 STATE (\$228,550.29 to \$294,213.23) #6- 7/2/24 Increase budget by

Planning Department/Startup Form - 07/1/20

\$987,850.09



CITY OF MANCHESTER

Jay Ruais

Mayor

MEMORANDUM

To: Alderman Chris Morgan
Chairman, CIP Committee

From: Jay Ruais
Mayor

Date: February 19, 2025

Re: CIP #611125 Hope for New Hampshire Recovery – Hope Connections

The Mayor's Office is requesting that \$201,000 of State funds be transferred from CIP #211723 Opioid Litigation Settlement Trust to create a new CIP project titled CIP #611125 Hope for New Hampshire Recovery – Hope Connections.

Manchester faces challenges with individuals struggling with, among other issues, substance use disorder (SUD), mental health and homelessness who lack the ability to immediately access resources and treatment, leading to recurring crises and strain on city services. Hope Connections is a proposed mobile outreach program designed to connect individuals in need with immediate support and pathways to recovery through collaboration with first responders and existing community resources.

We have prepared the appropriate CIP amending resolution and budget authorization forms necessary to take this action in the event that the Committee and the Board of Mayor and Aldermen approve this request.

Your review of these documents and a recommendation to the full Board is respectfully requested.

In the year Two Thousand and Twenty Five

“Amending the FY2023 and FY2025 Community Improvement Program, authorizing, appropriating and transferring funds in the amount of Two Hundred One Thousand Dollars (\$201,000) for the FY2025 CIP 611125 Hope for New Hampshire Recovery: Hope Connections.”

CIP BUDGET AUTHORIZATION

CIP#: 211723

Project Year: 2023

CIP Resolution: 5/17/2022

Title: Opioid Litigation Settlement Trust

Amending Resolution: 3/18/2025

Administering Department: Finance Department

Revision: #10

Project Description: Distribution from the State of NH for abatement purposes to fight the opioid epidemic.
NH RSA 126-A:84, IV

Federal Grants

Federal Grant: No

Environmental

Review Required: No

Grant Executed:

Completed:

Critical Events

1.	Project Initiation	12/20/2022
2.	Project Completion	12/31/2025
3.		
4.		
5.		
		12/31/2025

Line Item Budget

	STATE			TOTAL
Salaries and Wages	\$0.00	\$0.00	\$0.00	\$0.00
Fringes	\$0.00	\$0.00	\$0.00	\$0.00
Design/Engineering	\$0.00	\$0.00	\$0.00	\$0.00
Planning	\$0.00	\$0.00	\$0.00	\$0.00
Consultant Fees	\$0.00	\$0.00	\$0.00	\$0.00
Construction Admin	\$0.00	\$0.00	\$0.00	\$0.00
Land Acquisition	\$0.00	\$0.00	\$0.00	\$0.00
Equipment	\$0.00	\$0.00	\$0.00	\$0.00
Overhead	\$0.00	\$0.00	\$0.00	\$0.00
Construction Contracts	\$0.00	\$0.00	\$0.00	\$0.00
Other	\$987,850.09	\$0.00	\$0.00	\$987,850.09
TOTAL	\$987,850.09	\$0.00	\$0.00	\$987,850.09

Revisions:

- #10 - 3/18/25 Increase budget \$500,000 STATE (\$487,850.09 to \$987,850.09) to allow for periodic deposits.
 #9 - 3/18/25 decrease budget \$201,000 STATE (\$688,850.09 to \$487,850.09) funds to 611125.
 #8- 1/21/25 Increase budget \$166,697.83 STATE (\$522,152.26 to \$688,850.09) NH Opioid Litigation Settlement Trust
 #7 - 7/2/24 decrease budget \$153,327 STATE (\$675,479.26 to \$522,152.26) funds to CIP 211325.

Comments:

- #1 - Increases budget \$70,554.12 (from \$494,918.65 to \$565,472.77).
 #2 - Decrease budget by \$150,000 (from \$565,472.77 to \$415,472.77) and transfer to CIP #212023
 #3 - Increase budget by \$13,077.52 (From \$415,472.77 to \$428,550.29 STATE)
 #4 - 9/5/23 Decrease budget by \$200,000 (from \$428,550.29 to \$228,550.29) and transfer to CIP #212023
 #5- 10/3/23 Increase budget by \$65,662.94 STATE (\$228,550.29 to \$294,213.23) #6- 7/2/24 Increase budget by

Planning Department/Startup Form - 07/1/20

\$987,850.09

CIP BUDGET AUTHORIZATION

CIP#: 611125

CIP Resolution: 6/4/2024

Title: Hope for New Hampshire Recovery: Hope Connections

Amending Resolution: 3/18/2025

Administering Department Mayor's Office

Revision:

Project Description: Manchester faces challenges with individuals struggling with substance use disorder (SUD) and homelessness who lack immediate access to resources and treatment, leading to recurring crises and strain on city services. Hope Connections is a proposed mobile outreach program designed to connect individuals in need with immediate support and pathways to recovery through collaboration with first responders and existing community resources.

Federal Grants

Federal Grant: No

Environmental

Review Required: No

Grant Executed:

Completed:

Critical Events

Project Initiation	3/18/2025
Project Completion	6/30/2026
	6/30/2026

Line Item Budget

	STATE			TOTAL
Salaries and Wages	\$0.00	\$0.00	\$0.00	\$0.00
Fringes	\$0.00	\$0.00	\$0.00	\$0.00
Design/Engineering	\$0.00	\$0.00	\$0.00	\$0.00
Planning	\$0.00	\$0.00	\$0.00	\$0.00
Consultant Fees	\$0.00	\$0.00	\$0.00	\$0.00
Construction Admin	\$0.00	\$0.00	\$0.00	\$0.00
Land Acquisition	\$0.00	\$0.00	\$0.00	\$0.00
Equipment	\$0.00	\$0.00	\$0.00	\$0.00
Overhead	\$0.00	\$0.00	\$0.00	\$0.00
Construction Contracts	\$0.00	\$0.00	\$0.00	\$0.00
Other	\$201,000.00	\$0.00	\$0.00	\$201,000.00
TOTAL	\$201,000.00	\$0.00	\$0.00	\$201,000.00

Revisions:**Comments:** Funds transferred from CIP #211723

City of Manchester
New Hampshire

In the year Two Thousand and Twenty Five

A RESOLUTION

“Amending the FY2025 Community Improvement Program, authorizing and appropriating funds in the amount One Hundred Twenty-Five Thousand Dollars (\$125,000) for the FY2025 CIP 611225 447 Union Street Community Engagement Training Center.”

Resolved by the Board of Mayor and Aldermen of the City of Manchester as follows:

WHEREAS, the Board of Mayor and Aldermen has approved the 2025 CIP as contained in the 2025 CIP budget; and

WHEREAS, the 2025 CIP contains all sources of funds to be used in the execution of projects; and

WHEREAS, the Board of Mayor and Aldermen wishes to appropriate AHT funds in the amount of \$125,000 for the FY2025 611225 447 Union Street Community Engagement Training Center;

NOW, THEREFORE, be it resolved that the 2025 CIP be amended as follows:

By adding:

FY2025 CIP 611225 447 Union Street Community Engagement Training Center-
\$125,000 AHT

Resolved, that this Resolution shall take effect upon its passage

CIP BUDGET AUTHORIZATION

CIP#: 611225

2025

CIP Resolution: 6/4/2024

Title: 447 Union Street Community Engagement Training Center

Amending Resolution: 3/18/2025

Administering Department Mayor's Office

Revision:

Project Description:

Funding to support programing operated by the Community Engagement Training Center located at 447 Union Street. Resource navigation, educational workshops and training provided to men, women and women with children transitioning out of shelter housing.

Federal Grants

Federal Grant:

No

Environmental

Review Required:

No

Grant Executed:

Completed:

Critical Events

Project Initiation

3/4/2025

Project Completion

6/30/2026

6/30/2026

Line Item Budget

AHTF

TOTAL

Salaries and Wages

\$0.00

\$0.00

\$0.00

\$0.00

Fringes

\$0.00

\$0.00

\$0.00

\$0.00

Design/Engineering

\$0.00

\$0.00

\$0.00

\$0.00

Planning

\$0.00

\$0.00

\$0.00

\$0.00

Consultant Fees

\$0.00

\$0.00

\$0.00

\$0.00

Construction Admin

\$0.00

\$0.00

\$0.00

\$0.00

Land Acquisition

\$0.00

\$0.00

\$0.00

\$0.00

Equipment

\$0.00

\$0.00

\$0.00

\$0.00

Overhead

\$0.00

\$0.00

\$0.00

\$0.00

Construction Contracts

\$0.00

\$0.00

\$0.00

\$0.00

Other

\$125,000.00

\$0.00

\$0.00

\$125,000.00

TOTAL

\$125,000.00

\$0.00

\$0.00

\$125,000.00

Revisions:**Comments:**

City of Manchester *New Hampshire*

In the year Two Thousand and Twenty Five

A RESOLUTION

“Amending the FY2025 Community Improvement Program, authorizing and appropriating funds in the amount One Hundred Twenty-Five Thousand Dollars (\$125,000) for the FY2025 CIP 611325 231 Merrimack Street Affordable Housing Program.”

Resolved by the Board of Mayor and Aldermen of the City of Manchester as follows:

WHEREAS, the Board of Mayor and Aldermen has approved the 2025 CIP as contained in the 2025 CIP budget; and

WHEREAS, the 2025 CIP contains all sources of funds to be used in the execution of projects; and

WHEREAS, the Board of Mayor and Aldermen wishes to appropriate AHT funds in the amount of \$125,000 for the FY2025 CIP 611325 231 Merrimack Street Affordable Housing Program”;

NOW, THEREFORE, be it resolved that the 2025 CIP be amended as follows:

By adding:

FY2025 CIP 611325 231 Merrimack Street Affordable Housing Program - \$125,000 AHT

Resolved, that this Resolution shall take effect upon its passage

CIP BUDGET AUTHORIZATION

CIP#: 611325

2025

CIP Resolution: 6/4/2024

Title: 231 Merrimack Street Affordable Housing Program

Amending Resolution: 3/18/2025

Administering Department: Mayor's Office

Revision:

Project Description:

Renovation of property located at 231 Merrimack Street to serve as transitional housing (30 beds) for women and men transitioning out of the 38 Beech Street and/or off of the Coordinated Entry list. All work is to be completed in accordance with all applicable city codes.

Federal Grants

Federal Grant:

No

Environmental

Review Required:

No

Grant Executed:

Completed:

Critical Events

Project Initiation

6/4/2025

Project Completion

12/31/2025

12/31/2025

Line Item Budget

AHTF

TOTAL

Salaries and Wages

\$0.00

\$0.00

\$0.00

\$0.00

Fringes

\$0.00

\$0.00

\$0.00

\$0.00

Design/Engineering

\$0.00

\$0.00

\$0.00

\$0.00

Planning

\$0.00

\$0.00

\$0.00

\$0.00

Consultant Fees

\$0.00

\$0.00

\$0.00

\$0.00

Construction Admin

\$0.00

\$0.00

\$0.00

\$0.00

Land Acquisition

\$0.00

\$0.00

\$0.00

\$0.00

Equipment

\$0.00

\$0.00

\$0.00

\$0.00

Overhead

\$0.00

\$0.00

\$0.00

\$0.00

Construction Contracts

\$0.00

\$0.00

\$0.00

\$0.00

Other

\$125,000.00

\$0.00

\$0.00

\$125,000.00

TOTAL

\$125,000.00

\$0.00

\$0.00

\$125,000.00

Revisions:**Comments:**

Timothy J. Clougherty
Public Works Director

Owen P. Friend-Gray, P.E.
Deputy Public Works Director

Robert J. Robinson, P.E.
Chief Engineer



Commission
Kathleen Sullivan, Chair
Arthur Gatzoulis, Co-Chair
Mark MacKenzie
Amber Nicole Cannan
Andre Parent

CITY OF MANCHESTER
Department of Public Works
Environmental Protection Division

February 19, 2025

Chairman Morgan
City of Manchester – CIP Committee
One City Hall Plaza
Manchester, NH 03109

Subject: **CIP Adjustment**

Dear Chairman Morgan

EPD respectfully request that the following CIP project balance be transferred and budgets adjusted as indicated below:

\$100,000 from CIP 710519 be transferred to CIP 711221 – The Asset Management scope of work was adjusted leaving unspent funds. Transfer to CIP711221 is required to cover an increase associated with the Sheffield Pump Station Force Main Construction costs.

The revised CIP Budget Authorization forms containing the above proposed changes have been attached. If you have any questions or require any additional information, please feel free to contact us at your convenience.

Thank you

Robert J Robinson, P.E.
Chief Engineer

Attachments:

CC: Timothy J Clougherty
Owen Friend-Gray, P.E.

City of Manchester
New Hampshire

In the year Two Thousand and Twenty Five

A RESOLUTION

“Amending the FY2019 and FY2021 Community Improvement Program, authorizing, appropriating and transferring funds in the amount of One Hundred Thousand Dollars (\$100,000) for the FY2021 CIP 711221 Sheffield PS Force Main.”

Resolved by the Board of Mayor and Aldermen of the City of Manchester as follows:

WHEREAS, the Board of Mayor and Aldermen has approved the 2019 and 2021 CIP as contained in the 2019 and 2021 CIP budget; and

WHEREAS, the 2019 and 2021 CIP contains all sources of funds to be used in the execution of projects; and

WHEREAS, the Board of Mayor and Aldermen wishes to effect the reduction and transfer of funds from FY2019 CIP 710519 Asset Management Implementation to FY2021 CIP 711221 Sheffield PS Force Main.”

NOW, THEREFORE, be it resolved that the 2019 and 2021 CIP be amended as follows:

By decreasing:	
FY2019 CIP 710519 - Asset Management Implementation	\$100,000 Enterprise
By increasing:	
FY2021 CIP 711221 - Sheffield PS Force Main	\$100,000 Enterprise

Resolved, that this Resolution shall take effect upon its passage

CIP BUDGET AUTHORIZATION

CIP#: 710519 Project Year: 2019 CIP Resolution: 6/12/2018
Title: Asset Management Implementation Amending Resolution: 3/18/2025
Administering Department Public Works-EPD Revision: #2

Project Description: Implementation of an asset management program for all of EPD

Federal Grants Federal Grant: No **Environmental** Review Required: No
Grant Executed: Completed:

Critical Events

1.	Project Initiation	7/17/2018
2.	Project Completion	6/30/2025
3.		
4.		
5.		

6/30/2025

Line Item Budget

	ENTERPRISE	STATE		TOTAL
Salaries and Wage	\$0.00	\$0.00	\$0.00	\$0.00
Fringes	\$0.00	\$0.00	\$0.00	\$0.00
Design/Engineering	\$870,000.00	\$30,000.00	\$0.00	\$900,000.00
Planning	\$0.00	\$0.00	\$0.00	\$0.00
Consultant Fees	\$0.00	\$0.00	\$0.00	\$0.00
Construction Admin	\$0.00	\$0.00	\$0.00	\$0.00
Land Acquisition	\$0.00	\$0.00	\$0.00	\$0.00
Equipment	\$0.00	\$0.00	\$0.00	\$0.00
Overhead	\$0.00	\$0.00	\$0.00	\$0.00
Construction Contracts	\$0.00	\$0.00	\$0.00	\$0.00
Other	\$0.00	\$0.00	\$0.00	\$0.00
TOTAL	\$870,000.00	\$30,000.00	\$0.00	\$900,000.00

Revisions: #1 - 2/6/24 Extend completion date from 12/31/23 to 6/30/25 #2- 3/18/25 Decrease budget \$100,000 Enterprise (1,000,000 to \$900,000) (Enterprise \$970,000 to \$870,000) transfer to 711221

Comments:

CIP BUDGET AUTHORIZATION

CIP#: 711221 Project Year: 2021 CIP Resolution: 6/9/2020
 Title: Sheffield PS Force Main Amending Resolution: 3/18/2025
 Administering Department Public Works-EPD Revision: #3

Project Description: The study, design, and construction of a new force main to serve the Sheffield Pump Station (PS) because the existing force main has reached the end of its useful life and is failing.

Federal Grants Federal Grant: No **Environmental** Review Required: No
 Grant Executed: Completed:

Critical Events

1.	Project Initiation	1/1/2021
2.	Project Completion	6/30/2030
3.		
4.		
5.		
		6/30/2030

Line Item Budget

	ENTERPRISE	BOND		TOTAL
Salaries and Wages	\$0.00	\$0.00	\$0.00	\$0.00
Fringes	\$0.00	\$0.00	\$0.00	\$0.00
Design/Engineering	\$100,000.00	\$500,000.00	\$0.00	\$600,000.00
Planning	\$0.00	\$0.00	\$0.00	\$0.00
Consultant Fees	\$0.00	\$0.00	\$0.00	\$0.00
Construction Admin	\$0.00	\$500,000.00	\$0.00	\$500,000.00
Land Acquisition	\$0.00	\$0.00	\$0.00	\$0.00
Equipment	\$0.00	\$0.00	\$0.00	\$0.00
Overhead	\$0.00	\$0.00	\$0.00	\$0.00
Construction Contracts	\$0.00	\$1,500,000.00	\$0.00	\$1,500,000.00
Other	\$0.00	\$0.00	\$0.00	\$0.00
TOTAL	\$100,000.00	\$2,500,000.00	\$0.00	\$2,600,000.00

Revisions: Revision #1 - Increases BOND \$2,500,000 BOND(transferred from CIP #712722), decreases ENTERPRISE \$2,500,000 (from \$2,500,000to \$0). #2 - Extend completion date from 12/31/2022 to 6/30/2030 #3- 3/18/25 Increase budget \$100,000 Enterprise (\$2,500,000 to \$2,600,000) (Enterprise \$0 to \$100,000) from 710519

Comments: Anticipate self funded by sewer fees.

Manchester Police Department
Office of the Chief of Police

Memo

Date: February 11, 2025
To: Chairman Christopher Morgan
From: Chief Peter Marr
Re: CIP #410525 ARPA, request to change language

Chairman Morgan,

In order to use the funds set aside in CIP #410525 Park Enforcement in a broader capacity to address problems throughout the city rather than just in the City Parks (which are currently in good shape), I am requesting to change the language to the below:

Active police patrols in City parks and high crime areas focusing on quality-of-life issues and criminal behavior designed to prevent and reduce the fear of crime from occurring, while also improving the quality of life. Increased police presence in high crime areas inherently deters crime from occurring. This increased presence enables greater engagement with the overall public in general - including business owners, residents, and visitors to the city. The Police Department, and the City of Manchester leadership, have identified the need for additional overtime support, which will focus on the criminal activity and quality of life issues in those high crime areas.

Sincerely,

Peter A. Marr
Chief of Police

CIP BUDGET AUTHORIZATION

CIP#: 410525 2025 CIP Resolution: 6/4/2024
Title: ARPA - Park Enforcement Amending Resolution: 7/2/2024
Administering Department: Police Department Revision: #1

Project Description: Active police patrols in City parks and high crime areas focusing on quality-of-life issues and criminal behavior designed to prevent and reduce the fear of crime from occurring, while also improving the quality of life. Increased police presence in high crime areas inherently deters crime from occurring. This increased presence enables greater engagement with the overall public in general - including business owners, residents, and visitors to the city. The Police Department, and the City of Manchester leadership, have identified the need for additional overtime support, which will focus on the criminal activity and quality of life issues in those high crime areas.

Federal Grants Federal Grant: Yes **Environmental** Review Required: No
Grant Executed: Completed:

Critical Events

Program Initiation	7/2/2024
Program Completion	12/31/2026
	12/31/2026

Line Item Budget

	ARPA			TOTAL
Salaries and Wages	\$377,000.00	\$0.00	\$0.00	\$377,000.00
Fringes	\$123,000.00	\$0.00	\$0.00	\$123,000.00
Design/Engineering	\$0.00	\$0.00	\$0.00	\$0.00
Planning	\$0.00	\$0.00	\$0.00	\$0.00
Consultant Fees	\$0.00	\$0.00	\$0.00	\$0.00
Construction Admin	\$0.00	\$0.00	\$0.00	\$0.00
Land Acquisition	\$0.00	\$0.00	\$0.00	\$0.00
Equipment	\$0.00	\$0.00	\$0.00	\$0.00
Overhead	\$0.00	\$0.00	\$0.00	\$0.00
Construction Contracts	\$0.00	\$0.00	\$0.00	\$0.00
Other	\$0.00	\$0.00	\$0.00	\$0.00
TOTAL	\$500,000.00	\$0.00	\$0.00	\$500,000.00

Revisions: #1 - 3/18/25 Change project description to reflect a broader capacity to address problems throughout the City rather than just in the City Parks.

Comments: Funding transferred from CIP #511222 Park Ranger Program

Denise M. van Zanten
Library Director



Steve Viggiano
Deputy Library Director

MEMORANDUM

To: Alderman Chris Morgan, Chair of Community Improvement Committee

From: Denise van Zanten, Library Director

Date: February 20, 2025

Re: Extension of Completion Date of CIP #712424 Carpenter Library Interior Abatement & Painting

The Library Department respectfully requests that the end date for CIP #712424 (Carpenter Library Interior Abatement & Painting) be extended until 6/30/2026, as the planning portion of the project has been extensive given the scope of working on a historical building and has not been concluded by the current project end date that was listed as 6/30/24.

I apologize that I missed extending the date of this Federal Grant when I requested extensions for my other open projects last year.

If you should you have any questions, please do not hesitate to contact me. Thank you for your consideration.

Respectfully submitted,

Denise M. van Zanten

Denise M. van Zanten
Library Director
dvanzant@manchesternh.gov
603-792-7629

CIP BUDGET AUTHORIZATION

CIP#: 712424

Project Year: 2024

CIP Resolution: 6/6/2023

Title: Carpenter Library Interior Abatement & Painting

Amending Resolution:

Administering Department Library

Revision: #1

Project Description: Funds to abate lead paint, restore historic plaster, repaint the interior and address the minor exterior leak locations at Carpenter Library.

Federal Grants

Federal Grant:

Environmental

Review Required: No

Grant Executed:

Completed:

Critical Events

1.	Project Initiation	7/1/2023
2.	Project Completion	6/30/2026
3.		
4.		
5.		
		6/30/2026

Line Item Budget

	FEDERAL			TOTAL
Salaries and Wages	\$0.00	\$0.00	\$0.00	\$0.00
Fringes	\$0.00	\$0.00	\$0.00	\$0.00
Design/Engineering	\$0.00	\$0.00	\$0.00	\$0.00
Planning	\$0.00	\$0.00	\$0.00	\$0.00
Consultant Fees	\$0.00	\$0.00	\$0.00	\$0.00
Construction Admin	\$0.00	\$0.00	\$0.00	\$0.00
Land Acquisition	\$0.00	\$0.00	\$0.00	\$0.00
Equipment	\$0.00	\$0.00	\$0.00	\$0.00
Overhead	\$0.00	\$0.00	\$0.00	\$0.00
Construction Contracts	\$874,500.00	\$0.00	\$0.00	\$874,500.00
Other	\$0.00	\$0.00	\$0.00	\$0.00
TOTAL	\$874,500.00	\$0.00	\$0.00	\$874,500.00

Revisions: #1-3/18/25 extend completion date from 6/30/24 to 6/30/2026**Comments:**

Planning Department/Startup Form - 07/1/20

\$874,500.00



CITY OF MANCHESTER
PLANNING AND COMMUNITY DEVELOPMENT

Planning and Land Use
Building Regulation
Code Enforcement
Community Improvement Program

Jeffrey D. Belanger, AICP
Director

Nicola Strong
Deputy Director – Planning & Zoning

Michael J. Landry, PE, Esq.
Deputy Director – Building Regulations

MEMORANDUM

To: Alderman Chris Morgan
Chairman, CIP Committee

From: Jeffrey Belanger, AICP
Director, Planning and Community Development

JD

Date: February 21, 2025

Re: CIP #810725 SNHU Arena Capital Improvements – Administering Department Correction

The Planning and Community Development Department is requesting that the administering department on the budget authorization form be changed from Finance to DPW-Facilities. When the project was added to the CIP Budget on December 3rd, 2024, the Administering Department on the budget authorization form was incorrect.

We have prepared the appropriate CIP budget authorization form necessary to take this action in the event that the Committee and the Board of Mayor and Aldermen approve this request.

Your review of these documents and a recommendation to the full Board is respectfully requested.

CIP BUDGET AUTHORIZATION

CIP#: 810725 2025 CIP Resolution: 6/4/2024
Title: SNHU Arena Capital Improvements Amending Resolution: 12/3/2024
Administering Department DPW - Facilities Revision: #1

Project Description: Project is to provide technology and hardware updates to the SNHU Arena

Federal Grants Federal Grant: No **Environmental** Review Required: No
Grant Executed: Completed:

Critical Events

Initiation Date	12/3/2024
Completion Date	6/30/2044
	6/30/2044

Line Item Budget

	BOND			TOTAL
Salaries and Wages	\$0.00	\$0.00	\$0.00	\$0.00
Fringes	\$0.00	\$0.00	\$0.00	\$0.00
Design/Engineering	\$0.00	\$0.00	\$0.00	\$0.00
Planning	\$0.00	\$0.00	\$0.00	\$0.00
Consultant Fees	\$0.00	\$0.00	\$0.00	\$0.00
Construction Admin	\$0.00	\$0.00	\$0.00	\$0.00
Land Acquisition	\$0.00	\$0.00	\$0.00	\$0.00
Equipment	\$0.00	\$0.00	\$0.00	\$0.00
Overhead	\$0.00	\$0.00	\$0.00	\$0.00
Construction Contracts	\$0.00	\$0.00	\$0.00	\$0.00
Other	\$3,646,780.00	\$0.00	\$0.00	\$3,646,780.00
TOTAL	\$3,646,780.00	\$0.00	\$0.00	\$3,646,780.00

Revisions: #1- 3/18/25 change Administering Department from Finance to DPW-Facilities

Comments: Funds from Bond with a 20 year useful life



CITY OF MANCHESTER

PLANNING AND COMMUNITY DEVELOPMENT

Jeffrey D. Belanger, AICP
Director

Planning and Zoning
Building Regulation
Code Enforcement
Community Improvement Program

Nicola Strong
Deputy Director – Planning & Zoning

Michael J. Landry, PE, Esq.
Deputy Director Building Regulations

MEMORANDUM

To: Alderman Chris Morgan
Chair, CIP Committee

From: Jeffrey Belanger, AICP
Director of Planning and Community Development

Date: February 21, 2025

Re: American Rescue Plan Act (ARPA) Reporting, Second Quarter of Fiscal Year 2025

This memorandum and its attachments constitute the Planning and Community Development Department's (PCD's) report regarding expenditure of the City's ARPA funds during the second quarter of FY25, which ended on December 31, 2025. This report is informational only. No action is requested.

Enclosed with this memorandum is a spreadsheet that summarizes the status of all CIP projects funded by ARPA as of December 31. It shows that the City has obligated all \$43,281,853.00 of its ARPA funds, of which \$29,975,979.27 – or 69.3% – have been expended.

Also enclosed with this memorandum are reports from all recipients describing how they have used these funds during the second quarter of FY25.

Regarding the status of positions funded by ARPA, as of December 31, seventeen positions were fully funded by ARPA, and another three positions were partially funded by ARPA. The fully funded positions were two Public Health Specialists, five Community Health Workers, two Community Health Nurses, one Police Officer, two Crime Analysts, one Emergency Management Coordinator, one Director of Homelessness Initiatives, one Homelessness Initiatives Coordinator, one Community Grants Administrator, and one Part Time Planner. The partially funded positions were two Public Health Specialists and one Community Grants Administrator.

PCD staff will be available at your next meeting to respond to any questions.

Project Number	Admin Department	Project Name	Original Amount Funded	Current Funded	Total Expended	Encumbered	Balance	Notes
211725	Planning & Community Development	ARPA - Hope City Church Capital Improvements	\$ 53,900.00	\$ 53,900.00	\$ -		\$ 53,900.00	
211825	Planning & Community Development	ARPA - MPAL General Assistance	\$ 60,000.00	\$ 60,000.00	\$ -		\$ 60,000.00	
212023	Department of Housing Stability	ARPA - Gatehouse TST Initiative	\$ 150,000.00	\$ 100,469.79	\$ 100,469.79		\$ 0.00	Closed 12/31/24
212122	Health Department	ARPA - Healthy Food Access Strategic Plan & Implementation	\$ 419,050.83	\$ 319,933.00	\$ 208,239.40		\$ 111,693.60	
212222	Health Department	ARPA - Healthy Corner Stores Project	\$ 624,300.83	\$ 572,200.00	\$ 232,660.72		\$ 339,539.28	
212322	Health Department	ARPA - Community Health Worker Program	\$ 6,515,340.79	\$ 4,155,080.00	\$ 2,224,910.02		\$ 1,930,169.98	
212422	Planning & Community Development	ARPA - Ready, Set, LAUNCH	\$ 1,073,839.20	\$ 1,073,839.20	\$ 448,323.46		\$ 625,515.74	
310022	Planning & Community Development	ARPA - Job Resource Coaching & Higher Education Project	\$ 3,000,000.00	\$ 1,740,234.00	\$ 948,679.68		\$ 791,554.32	
310025	Planning & Community Development	ARPA - MCC Tuition Support Program	\$ 200,000.00	\$ 200,000.00	\$ -		\$ 200,000.00	
410122	Police Department	ARPA - Law Enforcement Support for Violent Crime Reduct/Prev	\$ 2,708,333.33	\$ 2,708,333.33	\$ 2,054,606.32		\$ 653,727.01	
410125	Police Department	ARPA - Police Mental Health Clinician	\$ 109,000.00	\$ 109,000.00	\$ 43,909.01		\$ 65,090.99	
410222	Police Department	ARPA - ACERT Program	\$ 2,272,156.25	\$ 2,272,156.25	\$ 1,209,375.67		\$ 1,062,780.58	
410224	Police Department	ARPA - Crime Analysts	\$ 450,000.00	\$ 450,000.00	\$ 251,998.56		\$ 198,001.44	
410322	Office of the Mayor	ARPA - Director of Homelessness Initiatives	\$ 710,847.36	\$ 251,427.94	\$ 51,473.61		\$ 199,954.33	
410325	Police Department	Police ShotSpotter - Gunshot Detection	\$ 163,000.00	\$ 163,000.00	\$ -		\$ 163,000.00	
410422	Fire Department	ARPA - Emergency Management Coordinator	\$ 601,518.80	\$ 438,518.80	\$ 389,382.80		\$ 80,937.84	
410525	Police Department	ARPA - Park Enforcement	\$ 500,000.00	\$ 500,000.00	\$ 92,397.16		\$ 407,602.84	
411025	Police Department	ARPA - MPD Bonuses/Hiring (10 Officers)	\$ 100,000.00	\$ 100,000.00	\$ -		\$ 100,000.00	
411125	Solicitor's Office	Victim - Witness Coordinator	\$ 49,437.51	\$ 49,437.51	\$ -		\$ 49,437.51	
510624	DPW-Parks, Rec & Cemeteries	ARPA - Bass Island Park Erosion Mitigation	\$ 20,000.00	\$ 20,000.00	\$ 20,000.00		\$ -	
511222	DPW-Parks, Rec & Cemeteries	ARPA - Park Rangers	\$ 1,293,399.47	\$ 716,876.93	\$ 716,876.93	\$ -	\$ (0.00)	\$76,522.54 Being Resolved the (-
610024	Office of the Mayor	ARPA - Winter Emergency Shelter	\$ 1,000,000.00	\$ 1,203,855.79	\$ 1,203,855.79		\$ (0.00)	\$54,205,581.00
610324	Planning & Community Development	ARPA - Concentrated Code Enforcement 3	\$ 330,000.00	\$ 74,562.47	\$ 73,892.93		\$ 669.54	
610325	Office of the Mayor	ARPA - Beech Street Programs	\$ 433,100.00	\$ 842,239.15	\$ 574,858.82	\$ -	\$ 267,951.66	
610723	Lincoln Avenue Capital	ARPA - Residences at 351 Chestnut Street	\$ 900,000.00	\$ 900,000.00	\$ 900,000.00		\$ 0.00	
610724	Planning & Community Development	ARPA - Affordable/Supportive Housing Initiative	\$ 3,000,000.00	\$ -	\$ -		\$ -	
610725	Office of the Mayor	Winter Warming Station	\$ 150,000.00	\$ 150,000.00	\$ 55,000.00		\$ 95,000.00	
610823	Lincoln Avenue Capital	ARPA - Residences at 351 Chestnut Street (Merrimack St. Parcel)	\$ 202,000.00	\$ 2,137,483.00	\$ 2,137,483.00		\$ -	
611124	Planning & Community Development	ARPA - Brook Street Shelter Operations	\$ 764,517.00	\$ 664,517.00	\$ 485,349.83		\$ 179,167.17	
611224	Planning & Community Development	ARPA - MHRA Landlord Incentive Program	\$ 300,000.00	\$ 300,000.00	\$ 294,038.58		\$ 5,961.42	
611423	Office of the Mayor	ARPA - Homelessness Response & Emergency Shelter Operations	\$ 398,000.00	\$ 398,000.00	\$ 398,000.00		\$ -	
712222	DPW-Highway	ARPA - Neighborhood Environmental Improvement	\$ 792,317.71	\$ 772,317.71	\$ 538,831.33	\$ -	\$ 233,486.38	
712322	DPW-Facilities	ARPA - City Hall Ventilation Upgrades	\$ 727,499.00	\$ 727,499.00	\$ 727,322.00		\$ 177.00	
712422	DPW-Facilities	ARPA - Rines Center Ventilation Upgrades	\$ 350,000.00	\$ 350,000.00	\$ 350,000.00		\$ -	
712522	DPW-Highway	ARPA - Clean Water State Revolving Fund Projects	\$ 5,000,000.00	\$ 3,980,000.00	\$ 1,229,575.16	\$ 2,026,787.00	\$ 723,637.84	
712622	DPW-Highway	ARPA - Revenue Replacement - Roads & Sidewalks	\$ 1,000,000.00	\$ 1,000,000.00	\$ 1,000,000.00	\$ 1,014.25	\$ (1,014.25)	DPW has indicated that the
810324	Department of Housing Stability	ARPA - Coordinator	\$ 100,000.00	\$ 300,000.00	\$ 111,642.72		\$ 188,357.28	
810722	Planning & Community Development	ARPA - Planning and Administrative Support	\$ 1,250,262.38	\$ 850,262.38	\$ 436,906.06		\$ 413,356.32	
810724	Planning & Community Development	ARPA - Part Time Planner	\$ 120,000.00	\$ 120,000.00	\$ 50,078.62		\$ 69,921.38	
810822	Planning & Community Development	ARPA - Small Business Grants & Program Assistance	\$ 2,000,000.00	\$ 2,000,000.00	\$ 1,862,177.22	\$ 4,309.91	\$ 133,512.87	
810825	Office of the Mayor	ARPA - Grant Coordinator	\$ 207,418.25	\$ 207,418.25	\$ -		\$ 207,418.25	
810922	Economic Development	ARPA - Manchester Economic Development Office	\$ 1,334,286.26	\$ 342,107.71	\$ 342,107.71		\$ (0.00)	
810925	Welfare Department	Welfare - ARPA Basic Needs Support	\$ 80,000.00	\$ 80,000.00	\$ -		\$ 80,000.00	
811022	Economic Development	ARPA - Branding Strategy Modernization & Promotion	\$ 2,000,000.00	\$ 1,607,140.53	\$ 474,229.86		\$ 1,132,910.67	
811024	MEDO	ARPA - 12-Month Pilot Prog. for Cleaning, Maint. Safety & Hospitality Service	\$ 415,000.00	\$ 615,000.00	\$ 267,929.75		\$ 347,070.25	
811025	Solicitor's Office	Independent City Auditor	\$ 135,000.00	\$ 135,000.00	\$ -		\$ 135,000.00	
811122	Planning & Community Development	ARPA - Community Event and Activation Grants	\$ 1,000,000.00	\$ 582,528.81	\$ 581,882.78		\$ 646.03	
811222	Planning & Community Development	ARPA -Affordable Housing Trust Fund - Affordable Housing RFP	\$ 1,500,000.00	\$ -	\$ -		\$ -	Original amount funded was \$3,000,000.
811222	Planning & Community Development	ARPA -Affordable Housing Trust Fund - MHRA Acquisition/Rehab.	\$ 1,000,000.00	\$ 400,000.00	\$ 400,000.00		\$ -	
811222	Planning & Community Development	ARPA - Affordable Housing Trust Fund - MHRA Landlord Incentive	\$ 500,000.00	\$ 500,000.00	\$ 500,000.00		\$ (0.00)	
811322	Finance	ARPA - City Services Fee Waivers	\$ 1,000,000.00	\$ 593,484.38	\$ 593,484.38		\$ -	
811422	Finance	ARPA - Revenue Replacement (Budget)	\$ 937,000.00	\$ 5,394,030.07	\$ 5,394,029.60		\$ 0.47	Closed
TOTALS			\$ 50,000,524.97	\$ 43,281,853.00	\$ 29,975,979.27	\$ 2,032,111.16	\$ 11,306,135.74	

Expenditures through 12-31-2024

- ATTACHMENT G -
CITY OF MANCHESTER, NH
COMMUNITY IMPROVEMENT PROGRAM
AMERICAN RESCUE PLAN ACT

QUARTERLY REPORTING INFORMATION

Project Number: 212122

Project Name: Healthy Food Access Strategic Plan & Implementation (EC 2.37)

Agency Name: Health Department

Prepared By: Gabriela Walder/Elaine Michaud

Contact Info:

Reporting Period: 10/01/2024 – 12/31/2024

I. Project Obligation and Expenditures

OBLIGATION		EXPENDITURE	
Total Project Obligation:	\$ 319,933	Total Project Expenditure:	\$208,239.40
Previous Quarter Obligation:	\$ 0.00	Previous Quarter Expenditure:	\$ 8,980.93
Current Quarter Obligation:	\$ -\$ 92,471.00	Current Quarter Expenditure:	\$ 52,023.97

- ❖ **Subawards of \$50,000 Or more** – If your project contained any contract/grant/loan/transfer/or direct payment to an individual, business or agency, please fill out the additional information on Section IV.

II. Project Status

☐ Not Started ☐ Completed less than 50% ☒ Completed 50% or more ☐ Completed

III. Project Service Area/Demographic Distribution - What Impacted and/or Disproportionally Impacted population does this project primarily serve? Please select the population primarily served. If this project primarily serves more than one Impacted and/or Disproportionately Impacted population, please select up to two additional populations served

	Impacted		Disproportionately Impacted
	General Public		
	Low- or-moderate income households or populations (see chart below)		Low-income households and populations (see chart below)
	Households that experienced unemployment	X	Households and populations residing in Qualified Census Tracts*
X	Households that experienced increased food or housing insecurity		Households that qualify for certain federal programs ²
	Households that qualify for certain federal programs ¹		Households residing in the U.S. territories or receiving services from these governments
	For services to address lost instructional time in K-12 schools: any students that lost access to in-person		Other households or populations that experienced a disproportionate negative economic impact of the pandemic other than those listed above (specify in section V.)

	instruction for a significant period of time		
	Other households or populations that experienced a negative economic impact of the pandemic other than those listed above (specify in section V.)		

Income Limits by Household Size – Manchester, NH – 2022

Household Size	1 Person	2	3	4	5	6	7	8
Low Income	\$25,040	\$32,227	\$40,626	\$49,025	\$57,424	\$65,823	\$74,222	\$82,621
Moderate Income	\$40,690	\$52,260	\$65,880	\$79,500	\$93,120	\$106,740	\$120,360	\$133,980

¹ For Impacted households, these programs are Children’s Health Insurance Program (“CHIP”); Childcare Subsidies through the Child Care and Development Fund (“CCDF”) Program; Medicaid; National Housing Trust Fund (“HTF”), for affordable housing programs only; Home Investment Partnerships Program (“HOME”), for affordable housing programs only.

² For Disproportionately Impacted households, these programs are Temporary Assistance for Needy Families (“TANF”), Supplemental Nutrition Assistance Program (“SNAP”), Free- and Reduced-Price Lunch (“NSLP”) and/or School Breakfast (“SBP”) programs, Medicare Part D Low-Income Subsidies, Supplemental Security Income (“SSI”), Head Start, Special Supplemental Nutrition Program for Women, Infants, and Children (“WIC”), Section 8 Vouchers, Low-Income Home Energy Assistance Program (“LIHEAP”), and Pell Grants.

**See Map of Qualified Census Tract on page 21*

IV. Subawards of \$50,000 Or more – If your project contained any contract / grant / loan / transfer / or direct payment to an individual, business or agency greater than or equal to \$50,000, please provide the following information for each recipient

Agency/Business/Individual Legal Name: City of Manchester, NH

Address: 1 City Hall Plaza, Manchester, NH 03101

UEI #: WXMZXFFQG2C9 SAM #:

Award number & name: Healthy Food Access Strategic Plan & Implementation (EC 2.37)

Award date: August 2021

Award amount: \$319,933 Award type:

Award payment method (reimbursable or lump sum payment(s)): Lump Sum (half of total award)

Primary place of performance: Manchester Health Department

Period of performance - Start date: August 2021 End date: December 2026

Loan expiration date (expected to be paid in full):

Quarterly obligation amount: \$

Quarterly expenditure amount: \$

Activity general description:

Demographic Information (if applicable):

Number of New (Unduplicated) Households Served This Period _____

Male _____ Female _____ Elderly (>62 Y.O.) _____ Disabled _____

_____ White _____ Native Hawaiian/Other Pacific Islander
_____ American Indian/Alaskan Native _____ Hispanic, Latino, Spanish
_____ Asian _____ Other Multi-Racial
_____ African American

V. Project Benchmark Reporting – Please provide the following information in each report (50 – 250 words)

The creation of a healthy food access strategic plan and implementation fund focused on the HUD-defined Qualified Census Tracts are aligned with the expenditure category of 'Services to Disproportionately Impacted Communities' as it pertains to "households that experienced increased food and housing insecurity" and "investments in neighborhoods to promote improved health outcomes."

During this quarter, the Manchester Health Department (MHD) continued the implementation phase of the Healthy Food Access Plan, focusing on those short-term strategies to improve availability of and accessibility to healthy food and to support stability. Specifically, MHD and multiple community partners continued and completed their work on the following:

- Promotional efforts for the City's ***first annual Food Resource Guide***, including up-to-date information on food assistance, public food pantry locations and hours, community garden access, and nutrition education opportunities, released in October 2024;
- Completed collaborative efforts with ***Manchester School District*** and distributed ***\$28,000 in funds and materials*** to establish/improve the infrastructure for food pantries at seven (7) school locations, ***serving a total of approximately 1500 unique individuals*** during the school year;
- Arranged/completed funding support totaling ***\$4,9617.77*** for ***six (6) community partners - Manchester Boys & Girls Club, Families in Transition, YMCA of Downtown Manchester, Merrimack Valley Assistance Project, Amoskeag Health, and the future Stebbins Community Center*** - to create/improve the infrastructure of their food pantries, ***serving more than 15,000 individuals annually***;
- Collaborated with ***three (3) community partners*** to provide immediate funds and future allocation of funds totaling ***\$39,600 funding*** for ***expansion of nutrition education*** to targeted populations, including classes for ***teens and young adults, families, and older adults, as well as case management services to include in care coordination for patients at higher risk of chronic disease development***.
- Initiated efforts to collect and analyze information on public transportation needs for City residents through City-wide survey (250 completed surveys to date) to assist and facilitate residents' access to healthy foods, and began collaboration with MTA to evaluate and implement potentials solutions.

QUARTERLY REPORTING INFORMATION

Project Number: 212222

Project Name: Healthy Corner Stores Project (EC 2.37)

Agency Name: Health Department

Prepared By: Gabriela Walder/Elaine Michaud

Contact Info:

Reporting Period: 10/01/2024 – 12/31/2024

VI. Project Obligation and Expenditures

OBLIGATION		EXPENDITURE	
Total Project Obligation:	\$ 572,200.00	Total Project Expenditure:	\$232,660.72
Previous Quarter Obligation:	\$ 0	Previous Quarter Expenditure:	\$ 30,616.07
Current Quarter Obligation:	\$ 0	Current Quarter Expenditure:	\$ 15,277.55

- ❖ **Subawards of \$50,000 Or more** – If your project contained any contract/grant/loan/transfer/or direct payment to an individual, business or agency, please fill out the additional information on Section IV.

VII. Project Status

☐ Not Started ☒ Completed less than 50% ☐ Completed 50% or more ☐ Completed

VIII. Project Service Area/Demographic Distribution - What Impacted and/or Disproportionately Impacted population does this project primarily serve? Please select the population primarily served. If this project primarily serves more than one Impacted and/or Disproportionately Impacted population, please select up to two additional populations served

	Impacted		Disproportionately Impacted
	General Public		
	Low- or-moderate income households or populations (see chart below)		Low-income households and populations (see chart below)
	Households that experienced unemployment	x	Households and populations residing in Qualified Census Tracts*
x	Households that experienced increased food or housing insecurity		Households that qualify for certain federal programs ²
	Households that qualify for certain federal programs ¹		Households residing in the U.S. territories or receiving services from these governments
	For services to address lost instructional time in K-12 schools: any students that lost access to in-person instruction for a significant period of time		Other households or populations that experienced a disproportionate negative economic impact of the pandemic other than those listed above (specify in section V.)
	Other households or populations that experienced a negative economic impact of the pandemic other than		

those listed above (specify in section V.)	
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Income Limits by Household Size – Manchester, NH – 2022

Household Size	1 Person	2	3	4	5	6	7	8
Low Income	\$25,040	\$32,227	\$40,626	\$49,025	\$57,424	\$65,823	\$74,222	\$82,621
Moderate Income	\$40,690	\$52,260	\$65,880	\$79,500	\$93,120	\$106,740	\$120,360	\$133,980

¹ For Impacted households, these programs are Children’s Health Insurance Program (“CHIP”); Childcare Subsidies through the Child Care and Development Fund (“CCDF”) Program; Medicaid; National Housing Trust Fund (“HTF”), for affordable housing programs only; Home Investment Partnerships Program (“HOME”), for affordable housing programs only.

² For Disproportionately Impacted households, these programs are Temporary Assistance for Needy Families (“TANF”), Supplemental Nutrition Assistance Program (“SNAP”), Free- and Reduced-Price Lunch (“NSLP”) and/or School Breakfast (“SBP”) programs, Medicare Part D Low-Income Subsidies, Supplemental Security Income (“SSI”), Head Start, Special Supplemental Nutrition Program for Women, Infants, and Children (“WIC”), Section 8 Vouchers, Low-Income Home Energy Assistance Program (“LIHEAP”), and Pell Grants.

**See Map of Qualified Census Tract on page 21*

IX. Subawards of \$50,000 Or more – If your project contained any contract / grant / loan / transfer / or direct payment to an individual, business or agency greater than or equal to \$50,000, please provide the following information for each recipient

Agency/Business/Individual Legal Name: City of Manchester, NH

Address: 1 City Hall Plaza, Manchester, NH 03101

UEI #: WXMZXFFQG2C9

SAM #:

Award number & name: Community Health Worker Program (EC 2.19)

Award date: August 2021

Award amount: \$ 572,200

Award type:

Award payment method (reimbursable or lump sum payment(s)): Lump Sum (half of total award)

Primary place of performance: Manchester Health Department

Period of performance - Start date: August 2021

End date: December 2026

Loan expiration date (expected to be paid in full):

Quarterly obligation amount: \$

Quarterly expenditure amount: \$

Activity general description:

Demographic Information (if applicable):

Number of New (Unduplicated) Households Served This Period _____

Male _____ Female _____ Elderly (>62 Y.O.) _____ Disabled _____

_____ White _____ Native Hawaiian/Other Pacific Islander
_____ American Indian/Alaskan Native _____ Hispanic, Latino, Spanish
_____ Asian _____ Other Multi-Racial
_____ African American

X. Project Benchmark Reporting – Please provide the following information in each report (50 – 250 words)

During this quarter, through our community partner ORIS (Organization for Refugee and Immigrant Success) Fresh Start Farms, the program continues to work with **two stores from Cohort 1** (Dollar Deluxe and R & E Convenience), **two stores from Cohort 2** (TMC Convenience and La Bonne Semence), and the **first store from Cohort 3** (Himalayas). **Two new stores - Parkside Convenience and Hanover Street Market** are completing training and onboarding and will begin receiving produce deliveries by January 2025.

Produce sales from all stores this quarter totaled \$1,820.67. The total sales of fresh produce by all corner stores since the onboarding of the first stores 25 months ago now **exceeds \$34,000**.

Each of the five stores this quarter were offered in-season local crops and provided technical assistance and support as they participated in ongoing food ordering and delivery. Arrangements have been made to **ensure culturally appropriate specialty produce** items will be made available for La Bonne Semence and Himalayas when in season.

The program goal is to expand the number of participating stores in 2025 (three stores), and 2026 (three stores).

Initial efforts were made during this quarter to identify additional stores for consideration of participation in the program in 2025. To support the program through December 2026, ORIS Fresh Start Farms contractually committed to continue as the Food Hub for the project and to facilitate the on-boarding of new stores and providing technical assistance for the remainder of the grant period.

QUARTERLY REPORTING INFORMATION

Project Number: 212322

Project Name: Community Health Worker Program (EC 2.19)

Agency Name: Health Department

Prepared By: Gabriela Walder/Elaine Michaud

Contact Info:

Reporting Period: 10/01/2024 to 12/31/2024

I. Project Obligation and Expenditures

OBLIGATION		EXPENDITURE	
Total Project Obligation:	\$4,155,080.00	Total Project Expenditure:	\$2,224,910.02
Previous Quarter Obligation:	\$ 0.00	Previous Quarter Expenditure:	\$ 228,300.94
Current Quarter Obligation:	-\$684,545.00	Current Quarter Expenditure:	\$ 269,650.78

- ❖ **Subawards of \$50,000 Or more** – If your project contained any contract/grant/loan/transfer/or direct payment to an individual, business or agency, please fill out the additional information on Section IV.

II. Project Status

☐ Not Started ☒ Completed less than 50% ☐ Completed 50% or more ☐ Completed

III. Project Service Area/Demographic Distribution - What Impacted and/or Disproportionately Impacted population does this project primarily serve? Please select the population primarily served. If this project primarily serves more than one Impacted and/or Disproportionately Impacted population, please select up to two additional populations served

Impacted		Disproportionately Impacted	
☐	General Public	☐	
☐	Low- or-moderate income households or populations (see chart below)	☐	Low-income households and populations (see chart below)
☐	Households that experienced unemployment	☒	Households and populations residing in Qualified Census Tracts*
☐	Households that experienced increased food or housing insecurity	☐	Households that qualify for certain federal programs ²
☐	Households that qualify for certain federal programs ¹	☐	Households residing in the U.S. territories or receiving services from these governments
☐	For services to address lost instructional time in K-12 schools: any students that lost access to in-person instruction for a significant period of time	☐	Other households or populations that experienced a disproportionate negative economic impact of the pandemic other than those listed above (specify in section V.)
☐	Other households or populations that experienced a negative economic impact of the pandemic other than	☐	

Income Limits by Household Size – Manchester, NH – 2022

Household Size	1 Person	2	3	4	5	6	7	8
Low Income	\$25,040	\$32,227	\$40,626	\$49,025	\$57,424	\$65,823	\$74,222	\$82,621
Moderate Income	\$40,690	\$52,260	\$65,880	\$79,500	\$93,120	\$106,740	\$120,360	\$133,980

¹ For Impacted households, these programs are Children’s Health Insurance Program (“CHIP”); Childcare Subsidies through the Child Care and Development Fund (“CCDF”) Program; Medicaid; National Housing Trust Fund (“HTF”), for affordable housing programs only; Home Investment Partnerships Program (“HOME”), for affordable housing programs only.

² For Disproportionately Impacted households, these programs are Temporary Assistance for Needy Families (“TANF”), Supplemental Nutrition Assistance Program (“SNAP”), Free- and Reduced-Price Lunch (“NSLP”) and/or School Breakfast (“SBP”) programs, Medicare Part D Low-Income Subsidies, Supplemental Security Income (“SSI”), Head Start, Special Supplemental Nutrition Program for Women, Infants, and Children (“WIC”), Section 8 Vouchers, Low-Income Home Energy Assistance Program (“LIHEAP”), and Pell Grants.

**See Map of Qualified Census Tract on page 21*

XIV. Subawards of \$50,000 Or more – If your project contained any contract / grant / loan / transfer / or direct payment to an individual, business or agency greater than or equal to \$50,000, please provide the following information for each recipient

Agency/Business/Individual Legal Name: City of Manchester, NH

Address: 1 City Hall Plaza, Manchester, NH 03101

UEI #: WXMZXFFQG2C9

SAM #:

Award number & name: Community Health Worker Program (EC 2.19)

Award date: August 2021

Award amount: \$4,155,080

Award type:

Award payment method (reimbursable or lump sum payment(s)): Lump Sum (half of total award)

Primary place of performance: Manchester Health Department

Period of performance - Start date: December 2021

End date: December 2026

Loan expiration date (expected to be paid in full):

Quarterly obligation amount: \$

Quarterly expenditure amount: \$

Activity general description:

Demographic Information (if applicable):

Number of New (Unduplicated) Beneficiaries Served This Period _____

Male _____ Female _____ Elderly (>62 Y.O.) _____ Disabled _____

_____ White	_____ Native Hawaiian/Other Pacific Islander
_____ American Indian/Alaskan Native	_____ Hispanic, Latino, Spanish
_____ Asian	_____ Other Multi-Racial
_____ African American	

Project Benchmark Reporting – Please provide the following information in each report (50 – 250 words)

The Public Health and Safety Team (PHAST) has continued to make a positive impact on the community and community members' overall well-being by **connecting them with needed social services and available benefits**. In addition to providing support to residents in their homes and neighborhoods, PHAST continues to increase access to their services by collaborating with other organizations supporting Manchester residents and having **team members available on-site** weekly at the Centro Latino. The team also continues its work with the Manchester Police Department Crisis Response Unit (CRU) every Tuesday, in which a CHW works with a police officer to follow up with recently overdosed residents.

PHAST also continues its **partnership and collaboration** with:

- Manchester Police Department (MPD), providing response and support to residents contacting MPD for matters not involving safety/security issues;
- Meals on Wheels (MOW), providing wellness checks for Manchester MOW clients who do not respond when scheduled deliveries are made (formerly the responsibility of the MPD);
- Manchester Housing & Development Authority (MHRA), providing wellness checks, service coordination and other support to MHRA tenants.

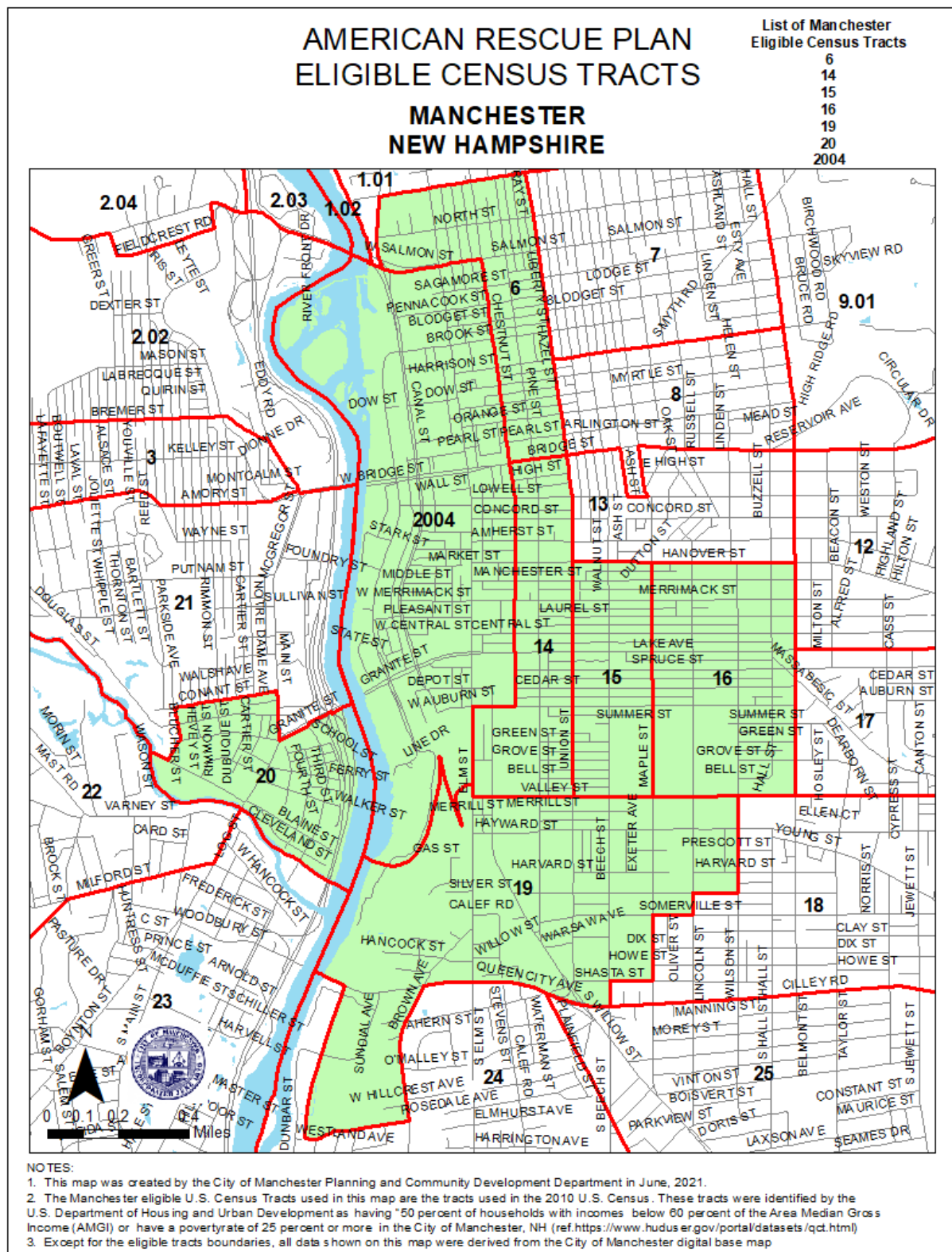
Since the program's implementation in December 2021, the PHAST team has **served 1384 community members**, including **207** community members newly served this quarter, while the team continued to work with existing clients. Many clients are receiving assistance multiple times due to their needs. In the last year alone (since October 2022), PHAST members have had **3,342 one-on-one encounters (448 this quarter)** with both new and existing clients. From those interactions, **2,559 referrals to external organizations (133 this quarter)** for services and assistance were made. The purpose of these referrals included, but were not limited to, educational supports and services, financial needs, housing, health care referrals, food insecurity supports, and mental health support. The total number of **MOW wellness checks** PHAST has performed to date is **414, with 21 this quarter**. One MPD frequent-caller was supported by PHAST, and the PHAST members joined the MPD's CRU meeting once a week.

The CHWs continue their professional development with one completing UNH's Building Futures Together program.

The grant also funds two Community Health Nurses (1.8 FTE) providing home-based clinical care, education, and resources to high-risk expectant mothers through the MHD's Healthy Start program. Since July 2022, a total of **188 patient referrals (29 this quarter)** have been received from Amoskeag Health providers resulting in over **350 home visits (48 this quarter)** by these two experienced nurses. The Healthy Start program also provides diaper bags and infant care items to those clients in emergent/urgent need of supplies to care for their child(ren), with **13 families** receiving those items this quarter.

This quarter, in further support of the PHAST and Healthy Start Clients, a Caring Cupboard filled with **items to meet urgent/emergent client needs for basic necessities** (diapers, infant care items, personal hygiene and

safety items, first aid kits, cleaning supplies, etc.) was created at the Health Department for team members to distribute to clients who require critical assistance. Finally, MHD was able to secure **child safety car seats** to be distributed to families in need, in collaboration with MPD, through the car seat safety program where PHAST members and MPD are certified to properly fit and install car seats with appropriate child safety education for the families.



- ATTACHMENT F -
CITY OF MANCHESTER, NH
COMMUNITY IMPROVEMENT PROGRAM
AMERICAN RESCUE PLAN ACT

QUARTERLY REPORTING INFORMATION

Project Number: 212422

Project Name: *Ready, Set, LAUNCH*

Agency Name: *Amoskeag Health*

Prepared By: *Michelle Wnek/Heather Mckinnon*

Contact Info:

mwnek@AmoskeagHealth.org/ hmckinnon@amoskeaghealth.org

Reporting Period: *10/1/14 to 12/31/24*

I. Project Invoices and Expenditures

INVOICE DATE	INVOICE AMOUNT
September 2024 (submitted in October 2024, paid in November 2024)	\$18,468.71
October 2024 (submitted in November 2024, paid in December 2024)	\$21,236.60
November 2024 (submitted in December 2024, paid in December 2024)	\$25,191.22

QUARTER TOTAL

\$64,896.53

- ❖ **Subawards of \$50,000 Or more** – If your project contained any contract/grant/loan/transfer/or direct payment to an individual, business or agency, please fill out the additional information on Section IV.

II. Project Status

☐ Not Started ☒ Completed less than 50% ☐ Completed 50% or more ☐ Completed

- III. **Project Service Area/Demographic Distribution** - What Impacted and/or Disproportionally Impacted population does this project primarily serve? Please select the population primarily served. If this

project primarily serves more than one Impacted and/or Disproportionately Impacted population, please select up to two additional populations served

	Impacted		Disproportionately Impacted
	General Public		
	Low- or-moderate income households or populations (see chart below)		Low-income households and populations (see chart below)
	Households that experienced unemployment		Households and populations residing in Qualified Census Tracts*
	Households that experienced increased food or housing insecurity		Households that qualify for certain federal programs ²
	Households that qualify for certain federal programs ¹		Households residing in the U.S. territories or receiving services from these governments
	For services to address lost instructional time in K-12 schools: any students that lost access to in-person instruction for a significant period of time		Other households or populations that experienced a disproportionate negative economic impact of the pandemic other than those listed above (specify in section V.)
	Other households or populations that experienced a negative economic impact of the pandemic other than those listed above (specify in section V.)		

Income Limits by Household Size – Manchester, NH – 2022

<i>Household Size</i>	<i>1 Person</i>	<i>2</i>	<i>3</i>	<i>4</i>	<i>5</i>	<i>6</i>	<i>7</i>	<i>8</i>
<i>Low Income</i>	\$25,040	\$32,227	\$40,626	\$49,025	\$57,424	\$65,823	\$74,222	\$82,621
<i>Moderate Income</i>	\$40,690	\$52,260	\$65,880	\$79,500	\$93,120	\$106,740	\$120,360	\$133,980

¹ For Impacted households, these programs are Children’s Health Insurance Program (“CHIP”); Childcare Subsidies through the Child Care and Development Fund (“CCDF”) Program; Medicaid; National Housing Trust Fund (“HTF”), for affordable housing programs only; Home Investment Partnerships Program (“HOME”), for affordable housing programs only.

² For Disproportionately Impacted households, these programs are Temporary Assistance for Needy Families (“TANF”), Supplemental Nutrition Assistance Program (“SNAP”), Free- and Reduced-Price Lunch (“NSLP”) and/or School Breakfast (“SBP”) programs, Medicare Part D Low-Income Subsidies, Supplemental Security Income (“SSI”), Head Start, Special Supplemental Nutrition Program for Women, Infants, and Children (“WIC”), Section 8 Vouchers, Low-Income Home Energy Assistance Program (“LIHEAP”), and Pell Grants.

**See Map of Qualified Census Tract on Attachment G*

IV. Subawards of \$50,000 Or more – If your project contained any contract / grant / loan / transfer / or direct payment to an individual, business or agency greater than or equal to \$50,000, please provide the following information for each recipient

Agency/Business/Individual Legal Name: Behavioral Health Improvement Institute Keene State College

Address: 5 Chenell Drive, Suite 301, Concord, NH 03301

UEI #: UDDNE26Q4JH1, DV3PJ2NRLKC5, and K7L3KXX4EV44 SAM #: K7L3KXX4EV44

Award number & name: Ready Set LAUNCH

Award date: 01/01/2022

Award amount: \$159,525.00 Award type: Contract

Award payment method (reimbursable or lump sum payment(s)): fixed price contract/lump sum

Primary place of performance: remote/virtual

Period of performance - Start date: 01/01/2022 End date: 12/31/2026

Loan expiration date (expected to be paid in full): n/a

Quarterly obligation amount: \$7,976.25

Quarterly expenditure amount: \$5,317.50 (includes amounts in the September & October 2024 invoices)

Activity general description:

Demographic Information (if applicable):

Number of New (Unduplicated) Households Served This Period _____106_____

Male _54_ Female _52_ Elderly (>62 Y.O.) _0_ Disabled _0_

_____86_____ White	_____0_____ Native Hawaiian/Other Pacific Islander
_____1_____ American Indian/Alaskan Native	_____35_____ Hispanic, Latino, Spanish (ethnicity, may identify as more than one racial group)
_____4_____ Asian	_____2_____ Other Multi-Racial
_____10_____ African American	*We had 6 cases with no race reported*

I. Project Benchmark Reporting – Please provide the following information in each report (50 – 250 words)

- Brief description of structure and objectives of assistance program(s), including public health or negative economic impact experienced
- Brief description of how a recipient's response is related and reasonably proportional to a public health or negative economic impact of COVID-19.
- Indicate if a program evaluation of the project is being conducted

- Indicate if a program evaluation of the project is being conducted

In total, 106 infants were born this quarter. Each of these families was offered a home visit. Of those 106 families, 31 initially consented to a home visit; the acceptance rate (29%) is lower than the previous quarter. Six families who had a newborn, consented to, and received a home visit during the quarter; the completion rate is 19%, this is lower than the previous quarter. An additional 23 home visits occurred during the quarter that were either scheduled or rescheduled from previous quarters. A grand total of 29 home visits were provided during the quarter.

Thirteen of the 29 families experienced hardship resulting in basic unmet needs and 19 referrals were made on their behalf. Two families received brief navigator interventions. All thirteen families needed support with income or employment. Three families were identified as needing support with finding childcare, two with housing, and two with accessing healthcare. Nine referrals were made to Amoskeag Health for services like long-term case management, behavioral health, and primary care. Seven referrals were made to the New Hampshire Food Bank for immediate food assistance or SNAP enrollment. Five referrals were made to the Manchester Diaper Pantry and three referrals were made to the local Community Action Program.

During this quarter, we implemented ASQ screenings to enhance the Ready Set LAUNCH program by providing developmental assessments focused on cognitive and social-emotional growth for infants aged 0 to 1 at our clinic. To foster caregiver participation, we hosted staff coaching and brainstorming sessions aimed at identifying effective strategies. From these discussions, we developed targeted talking points to promote caregiver engagement with the program. The primary goal of these screenings is to evaluate infants' developmental progress and support parents in understanding their child's milestones. During this quarter, we successfully completed seven ASQ screenings.

During this quarter, we experienced staff turnover in the newborn navigator position. Despite this challenge, we successfully managed the transition by quickly recruiting and onboarding a qualified replacement. As a result, there was no interruption in services, and we were able to maintain the crucial bilingual status of the role, ensuring continued support for our diverse families.

In 2024, the RSL team introduced Enhanced Navigation, a program designed to offer participants in the RSL program the opportunity to receive up to three additional home visits. Families may qualify for Enhanced Navigation if they meet one of the following criteria:

1. The caregiver reports a language barrier that inhibits access to services.
2. The caregiver faces challenges with mental health or motivation, affecting their ability to perform typical activities.
3. The family's needs are identified as complex.

In Q4, five families were enrolled in the Enhanced Navigation program, resulting in a total of seven follow-up contacts. No new referrals were made because of these follow-up contacts.

To meet the needs of the broader community and effectively address the impacts of the COVID-19 pandemic, the RSL team introduced two opportunities for parent engagement. All team members have been trained in facilitating the Circle of Security (CoS), a framework designed to help caregivers strengthen their connections with their children. In our previous report, we omitted the fact that the team hosted CoS classes from August to October 2024. Eight families were served by the CoS sessions, four of whom had at least one child under the age of 3. Participants were recruited from DCYF, Waypoint, ACERT, and the RSL program. Additionally, in Q4 the team continued hosting Parent Cafés. Parent Cafés provide a supportive, structured environment for caregivers to come together, share experiences, learn from one another, and access resources to strengthen their parenting. In Q4, the RSL team hosted two Parent Café sessions, with a total of nine attendees.

We track RSL documentation, data, and performance metrics through a custom-built Quickbase database built by our external evaluator, the Behavioral Health Improvement Institute at Keene State College. Ready, Set, LAUNCH provided outreach to 106 newborns and their caregiver(s) between 10/1/24 and 12/31/24, with 31 (29%) consenting to a home visit. Six infants were born *and* received a home visit within the quarter; an additional 23 home visits occurred in the quarter for a grand total of 29. From October-December, 21% (n=6) of families that received a home visit resided within disproportionately impacted census tracts. In 2024, a total of 29 home visits were provided to families who reside within ARPA defined disproportionately impacted census tracts.

Twenty-nine family needs assessments were conducted, resulting in nineteen families receiving at least one brief navigator intervention (e.g. psychoeducation) and/or referral for additional professional services. This number includes needs assessments that were entered as part of the previous quarter's birth and home visit count. Across the twenty-nine, sixteen brief navigator interventions occurred, no crisis referrals, and sixty-four referrals for additional professional services were provided. Brief navigator interventions included psychoeducation around the baby blues, provision of hotline information, and infant crying. The referrals for additional professional services addressed the following needs: income and employment (49), home and housing (7), childcare (5) mental health (1), natural supports (1), and transportation (1). Referrals were made to partners at Amoskeag Health, Southern New Hampshire Services, Manchester Diaper Pantry, and New Hampshire Food Bank.

After completion of a home visit, all families are asked to complete the Caregiver Satisfaction Survey administered through Qualtrics via a text or email link. The survey was developed by our external evaluator and measures the respondent's experience of the home visit via 5-point Likert scale (1=Not at All, 5=Completely) and write-in responses. During this quarter, 23 families responded to the survey. The average score across all survey items was 4.95.

Nineteen families responded to an open-ended survey question about what was most helpful about the home visit. Most respondents answered that everything was helpful, resources were mentioned as the second most helpful, followed by learning about my community resources. Comments included, "A lot of new and useful information for me and baby. Humanity of RSL, because for every family is beginning an exciting period, but not easy one." Thirteen responded to a survey question about what would make the home visit better. Of those, most said nothing or

simply a positive remark like, “It was good, there is nothing that would make the RSL home visiting better.”

- ATTACHMENT F -
CITY OF MANCHESTER, NH
COMMUNITY IMPROVEMENT PROGRAM
AMERICAN RESCUE PLAN ACT

QUARTERLY REPORTING INFORMATION

Project Number: **310022**

Project Name: **Job Resource Coaching & Higher Education Partnership (EC 2.7)**

Agency Name: **Southern New Hampshire University**

Prepared By: **Meredith Albuquerque**

Contact Info: **M.Albuquerque@snhu.edu**

Reporting Period: **October 1, 2024 – December 31, 2024**

I. Project Invoices and Expenditures

INVOICE DATE	INVOICE AMOUNT
10/16/2024 (Paid 11/12/24)	\$176,037.55

QUARTER TOTAL

\$176,037.55

❖ **Subawards of \$50,000 Or more** – If your project contained any contract/grant/loan/transfer/or direct payment to an individual, business or agency, please fill out the additional information on Section IV.

II. Project Status

☐ Not Started ☐ Completed less than 50% ☒ Completed 50% or more ☐ Completed

III. Project Service Area/Demographic Distribution - What Impacted and/or Disproportionally Impacted population does this project primarily serve? Please select the population

primarily served. If this project primarily serves more than one Impacted and/or Disproportionately Impacted population, please select up to two additional populations served

	Impacted		Disproportionately Impacted
	General Public		
X	Low- or-moderate income households or populations (see chart below)		Low-income households and populations (see chart below)
	Households that experienced unemployment	X	Households and populations residing in Qualified Census Tracts*
	Households that experienced increased food or housing insecurity		Households that qualify for certain federal programs ²
	Households that qualify for certain federal programs ¹		Households residing in the U.S. territories or receiving services from these governments
	For services to address lost instructional time in K-12 schools: any students that lost access to in-person instruction for a significant period of time		Other households or populations that experienced a disproportionate negative economic impact of the pandemic other than those listed above (specify in section V.)
	Other households or populations that experienced a negative economic impact of the pandemic other than those listed above (specify in section V.)		

Income Limits by Household Size – Manchester, NH – 2022

Household Size	1 Person	2	3	4	5	6	7	8
Low Income	\$25,040	\$32,227	\$40,626	\$49,025	\$57,424	\$65,823	\$74,222	\$82,621
Moderate Income	\$40,690	\$52,260	\$65,880	\$79,500	\$93,120	\$106,740	\$120,360	\$133,980

¹ For Impacted households, these programs are Children’s Health Insurance Program (“CHIP”); Childcare Subsidies through the Child Care and Development Fund (“CCDF”) Program; Medicaid; National Housing Trust Fund (“HTF”), for affordable housing programs only; Home Investment Partnerships Program (“HOME”), for affordable housing programs only.

² For Disproportionately Impacted households, these programs are Temporary Assistance for Needy Families (“TANF”), Supplemental Nutrition Assistance Program (“SNAP”), Free- and Reduced-Price Lunch (“NSLP”) and/or School Breakfast (“SBP”) programs, Medicare Part D Low-Income Subsidies, Supplemental Security Income (“SSI”), Head Start, Special Supplemental Nutrition Program for Women, Infants, and Children (“WIC”), Section 8 Vouchers, Low-Income Home Energy Assistance Program (“LIHEAP”), and Pell Grants.

**See Map of Qualified Census Tract on Attachment G*

IV. Subawards of \$50,000 Or more – If your project contained any contract / grant / loan / transfer / or direct payment to an individual, business or agency greater than or equal to \$50,000, please provide the following information for each recipient

Agency/Business/Individual Legal Name: Duet, Inc

Address: 50 Milk St. 6th Floor, Boston, MA 02019

UEI #:

SAM #:

Award number & name:

Award date:

Award amount: Award type:

Award payment method (reimbursable or lump sum payment(s)): Cost-Reimbursable

Primary place of performance: Boston, MA

Period of performance - Start date: 10/10/22

End date: 12/31/26

Loan expiration date (expected to be paid in full):

Quarterly obligation amount: \$

Quarterly expenditure amount: \$

Activity general description: Scholarship

Demographic Information (if applicable):

Number of New (Unduplicated) Households Served This Period 0

Male Female Elderly (>62 Y.O.) Disabled

 White

 Native Hawaiian/Other Pacific Islander

 American Indian/Alaskan Native Hispanic, Latino, Spanish

 Asian Other Multi-Racial

 African American

V. Project Benchmark Reporting – Please provide the following information in each report (50 – 250 words)

- Overall number of students served by the Program
- Number/Percentage of students whose home residence is located on a Qualified Census Tract (addresses to be cross-referenced with Attachment G).
- Number of individuals participating in sectoral job training activities (by sector/major of study).

- Number of individuals completing sectoral job training activities (by sector/major of study).

	Overall Number of Students Served by Program	48 (1 no longer at SNHU) 24 SNHU 24 Duet
2.	Number/Percentage of students whose home residence is located in a Qualified Census Tract	11/48
3.	Number of individuals participating in sectoral job training activities (by sector/major of study)	Communication: 2 Creative Writing: 1 Ed for Licensure: 2 Psychology: 1 Business Administration: 22 Construction Management: 1 Computer Science: 3 Electrical Engineering: 1 Economics and Finance: 1 Game Art and Interactive Design: 3 Justice Studies: 3 Public Administration: 2 Mechanical Engineering: 1 Healthcare Management: 4
4.	Number of individuals completing sectoral job training activities (by sector/ major of study)	All SNHU students have completed PCC-201, which helps students prepare their resumes, cover letters, LinkedIn Profiles, and introduces them to various industries they can work in.

- ATTACHMENT F -
CITY OF MANCHESTER, NH
COMMUNITY IMPROVEMENT PROGRAM
AMERICAN RESCUE PLAN ACT

QUARTERLY REPORTING INFORMATION

Project Number: 410122

Project Name: Law Enforcement Support for Violent Crime Reduction/Prevention (EC 3.16)

Agency Name: Police Department

Prepared By: Lt. Patrick Houghton

Contact Info: phoughton@manchesternh.gov

Reporting Period: October 1, 2024 – December 31, 2024

I. Project Obligation and Expenditures

OBLIGATION		EXPENDITURE	
Total Project Obligation:	\$ 2,708,333.33	Total Project Expenditure:	\$2,054,606.32
Previous Quarter Obligation:	\$ 0.00	Previous Quarter Expenditure:	\$ 216,912.15
Current Quarter Obligation:	\$ 0.00	Current Quarter Expenditure:	\$ 213,454.30

❖ **Subawards of \$50,000 Or more** – If your project contained any contract/grant/loan/transfer/or direct payment to an individual, business or agency, please fill out the additional information on Section IV.

II. Project Status

☐ Not Started ☐ Completed less than 50% ☒ Completed 50% or more ☐ Completed

III. Project Service Area/Demographic Distribution - What Impacted and/or Disproportionally Impacted population does this project primarily serve? Please select the population primarily served. If this project primarily serves more than one Impacted and/or Disproportionately Impacted population, please select up to two additional populations served

	Impacted	Disproportionately Impacted
☒	General Public	
☐	Low- or-moderate income households or populations (see chart below)	Low-income households and populations (see chart below)
☐	Households that experienced unemployment	Households and populations residing in Qualified Census Tracts*
☐	Households that experienced increased food or housing insecurity	Households that qualify for certain federal programs ²

	Households that qualify for certain federal programs ¹	Households residing in the U.S. territories or receiving services from these governments
	For services to address lost instructional time in K-12 schools: any students that lost access to in-person instruction for a significant period of time	Other households or populations that experienced a disproportionate negative economic impact of the pandemic other than those listed above (specify in section V.)
	Other households or populations that experienced a negative economic impact of the pandemic other than those listed above (specify in section V.)	

Income Limits by Household Size – Manchester, NH – 2022

Household Size	1 Person	2	3	4	5	6	7	8
Low Income	\$25,040	\$32,227	\$40,626	\$49,025	\$57,424	\$65,823	\$74,222	\$82,621
Moderate Income	\$40,690	\$52,260	\$65,880	\$79,500	\$93,120	\$106,740	\$120,360	\$133,980

¹ For Impacted households, these programs are Children’s Health Insurance Program (“CHIP”); Childcare Subsidies through the Child Care and Development Fund (“CCDF”) Program; Medicaid; National Housing Trust Fund (“HTF”), for affordable housing programs only; Home Investment Partnerships Program (“HOME”), for affordable housing programs only.

² For Disproportionately Impacted households, these programs are Temporary Assistance for Needy Families (“TANF”), Supplemental Nutrition Assistance Program (“SNAP”), Free- and Reduced-Price Lunch (“NSLP”) and/or School Breakfast (“SBP”) programs, Medicare Part D Low-Income Subsidies, Supplemental Security Income (“SSI”), Head Start, Special Supplemental Nutrition Program for Women, Infants, and Children (“WIC”), Section 8 Vouchers, Low-Income Home Energy Assistance Program (“LIHEAP”), and Pell Grants.

**See Map of Qualified Census Tract on Attachment G*

IV. Subawards of \$50,000 Or more – If your project contained any contract / grant / loan / transfer / or direct payment to an individual, business or agency greater than or equal to \$50,000, please provide the following information for each recipient

Agency/Business/Individual Legal Name:

Address:

UEI #:

SAM #:

Award number & name:

Award date:

Award amount: \$

Award type:

Award payment method (reimbursable or lump sum payment(s)):

Primary place of performance:

Period of performance - Start date: _____ End date: _____

Loan expiration date (expected to be paid in full):

Quarterly obligation amount: \$ _____

Quarterly expenditure amount: \$ _____

Activity general description:

Demographic Information (if applicable):

Number of New (Unduplicated) Households Served This Period _____

Male _____ Female _____ Elderly (>62 Y.O.) _____ Disabled _____

_____ White	_____ Native Hawaiian/Other Pacific Islander
_____ American Indian/Alaskan Native	_____ Hispanic, Latino, Spanish
_____ Asian	_____ Other Multi-Racial
_____ African American	

V. Project Benchmark Reporting – Please provide the following information in each report (50 – 250 words)

- Does this project include a capital expenditure and type of capital expenditure?
 - No
- Total expected capital expenditure, including pre-development costs, if applicable.
 - N/A
- Brief description of structure and objectives of assistance program(s), including public health or negative economic impact experienced.
 - Manchester Police conduct foot patrols in gun violence hot spot areas, all of which are in ARP Eligible Census Tracts. These are area with chronic gun violence problems.
 - Manchester Police is also supporting a youth Intervention Programing Coordinator to assist with program design and implementation of interventions for at-risk youth at the Manchester Police Athletic League.
- Brief description of how a recipient's response is related and reasonably proportional to a public health or negative economic impact of COVID-19.

- During COVID-19, gun violence increased significantly. This was likely due to the social implications of the pandemic. Foot patrols are deployed as both a crime reduction and community engagement measure. To-date, officers had over 9,200 community contacts while conducting foot patrols. During this reporting period, the foot patrols were paused, but will begin again after the winter months. Additionally, dedicated resources have been allotted to investigate violent crime. Over 517 violent crime cases have received over 4,200 hours in additional investigative effort by detectives. The added resources have resulted in over 220 arrests of violent offenders, 86 firearms seized and significant numbers of crime guns recovered. Importantly, clearance rates for these offenses has increased. Most significantly, during the reporting period, there has been a continued decline in gun violence in Manchester. Quarter 1 of 2024 saw a 3% decline in all gun crimes compared to the 3-year average, and a 10% decline in gunfire incidents compared to the 3-year average. Importantly Quarter 1 also saw a 10% decline in non-fatal shootings in Manchester compared to prior years. This is a continued decline in non-fatal shooting incidents in Manchester.
- The dollar amount of the total project spending that is allocated towards evidence-based interventions.
 - \$2,708,333.33
- Indicate if a program evaluation of the project is being conducted
 - Manchester Police is conducting program evaluation of this effort.

- ATTACHMENT F -
CITY OF MANCHESTER, NH
COMMUNITY IMPROVEMENT PROGRAM
AMERICAN RESCUE PLAN ACT

QUARTERLY REPORTING INFORMATION

Project Number: 410125

Project Name: Police Mental Health Clinician (EC 1.12)

Agency Name: Manchester Police Department

Prepared By: Steven Hoeft Contact Info: 603-792-5411

Reporting Period: October 1, 2024 – December 31, 2024

I. Project Obligation and Expenditures

OBLIGATION		EXPENDITURE	
Total Project Obligation:	\$ 109,000	Total Project Expenditure:	\$ 43,909.01
Previous Quarter Obligation:	\$ 0.00	Previous Quarter Expenditure:	\$ 8,437.21
Current Quarter Obligation:	\$ 0.00	Current Quarter Expenditure:	\$ 35,471.80

❖ **Subawards of \$50,000 Or more** – If your project contained any contract/grant/loan/transfer/or direct payment to an individual, business or agency, please fill out the additional information on Section IV.

II. Project Status

___ Not Started X Completed less than 50% ___ Completed 50% or more ___ Completed

III. Project Service Area/Demographic Distribution - What Impacted and/or Disproportionally Impacted population does this project primarily serve? Please select the population primarily served. If this project primarily serves more than one Impacted and/or Disproportionately Impacted population, please select up to two additional populations served

	Impacted		Disproportionately Impacted
X	General Public		
	Low- or-moderate income households or populations (see chart below)		Low-income households and populations (see chart below)
	Households that experienced unemployment	X	Households and populations residing in Qualified Census Tracts*

	Households that experienced increased food or housing insecurity		Households that qualify for certain federal programs ²
	Households that qualify for certain federal programs ¹		Households residing in the U.S. territories or receiving services from these governments
	For services to address lost instructional time in K-12 schools: any students that lost access to in-person instruction for a significant period of time		Other households or populations that experienced a disproportionate negative economic impact of the pandemic other than those listed above (specify in section V.)
	Other households or populations that experienced a negative economic impact of the pandemic other than those listed above (specify in section V.)		

Income Limits by Household Size – Manchester, NH – 2022

Household Size	1 Person	2	3	4	5	6	7	8
Low Income	\$25,040	\$32,227	\$40,626	\$49,025	\$57,424	\$65,823	\$74,222	\$82,621
Moderate Income	\$40,690	\$52,260	\$65,880	\$79,500	\$93,120	\$106,740	\$120,360	\$133,980

¹ For Impacted households, these programs are Children’s Health Insurance Program (“CHIP”); Childcare Subsidies through the Child Care and Development Fund (“CCDF”) Program; Medicaid; National Housing Trust Fund (“HTF”), for affordable housing programs only; Home Investment Partnerships Program (“HOME”), for affordable housing programs only.

² For Disproportionately Impacted households, these programs are Temporary Assistance for Needy Families (“TANF”), Supplemental Nutrition Assistance Program (“SNAP”), Free- and Reduced-Price Lunch (“NSLP”) and/or School Breakfast (“SBP”) programs, Medicare Part D Low-Income Subsidies, Supplemental Security Income (“SSI”), Head Start, Special Supplemental Nutrition Program for Women, Infants, and Children (“WIC”), Section 8 Vouchers, Low-Income Home Energy Assistance Program (“LIHEAP”), and Pell Grants.

**See Map of Qualified Census Tract on Attachment G*

IV. Subawards of \$50,000 Or more – If your project contained any contract / grant / loan / transfer / or direct payment to an individual, business or agency greater than or equal to \$50,000, please provide the following information for each recipient

Agency/Business/Individual Legal Name:

Address:

UEI #:

SAM #:

Award number & name:

Award date:

Award amount: \$ Award type:

Award payment method (reimbursable or lump sum payment(s)):

Primary place of performance:

Period of performance - Start date: End date:

Loan expiration date (expected to be paid in full):

Quarterly obligation amount: \$

Quarterly expenditure amount: \$

Activity general description:

Demographic Information (if applicable):

Number of New (Unduplicated) Households Served This Period _____

Male _____ Female _____ Elderly (>62 Y.O.) _____ Disabled _____

_____ White	_____ Native Hawaiian/Other Pacific Islander
_____ American Indian/Alaskan Native	_____ Hispanic, Latino, Spanish
_____ Asian	_____ Other Multi-Racial
_____ African American	

V. Project Benchmark Reporting – Please provide the following information in each report (50 – 250 words)

- Does this project include a capital expenditure and type of capital expenditure?
 - No
- Total expected capital expenditure, including pre-development costs, if applicable.
 - N/A
- Brief description of structure and objectives of assistance program(s), including public health or negative economic impact experienced.

Embedding a full time licensed clinical mental health clinician within Manchester Police Department will greatly enhance the mental health support service available to our personnel, especially during and after crises like the COVID-19 pandemic. “Approximately one-third of first responders struggle with the stigma around seeking mental health services” (Carbajal et al., 2021). Here's how an embedded licensed clinician can address the mental health and wellness needs of the employees of the MPD:

1. **Offering Confidential Support:** Establishing a confidential environment where employees can discuss their concerns without fear of judgment or repercussions is crucial. The embedded clinician can provide individual counseling sessions where officers can freely express their emotions, stressors, and challenges.
 2. **Psychoeducation and Coping Strategies:** Educating law enforcement personnel about the psychological impact of the pandemic, professional stressors, personal stressors, and providing them with coping strategies can help them manage stress more effectively. This can include techniques for stress reduction, mindfulness practices, and ways to improve resilience.
 3. **Trauma Informed Care:** Many law enforcement officers may experience traumatic events in the line of duty, which can be exacerbated during a pandemic. The embedded clinician can provide trauma-informed care, helping officers process their experiences and develop healthy coping mechanisms.
 4. **Peer Support Programs:** Facilitating peer support programs where officers can connect with and support each other can be invaluable. The embedded clinician can oversee these programs, providing guidance and resources to ensure they are effective in promoting mental wellness within the department.
 5. **Regular Check-ins and Wellness Consultations:** Conducting regular check-ins with personnel to assess their mental health and wellness can help identify issues early on and provide timely support. These check-ins can be done individually or in group settings, depending on the preferences of our personnel.
 6. **Stigma Reducing Efforts:** Addressing the stigma surrounding mental health within law enforcement culture is essential. The embedded clinician can work to reduce stigma by promoting open discussions about mental health, sharing personal stories of resilience, and normalizing help-seeking behaviors.
 7. **Collaboration with Leadership and Existing Support Services:** Working closely with departmental leadership and our Mental Health & Wellness Coordinator to prioritize mental health and wellness initiatives is crucial. The embedded clinician can collaborate with leadership and our Mental Health & Wellness Coordinator to develop policies and procedures that support our personnel's well-being and ensure that mental health resources are readily available and accessible.
 8. **Community Resource Referral:** Connecting officers with external mental health resources and support services in the community can complement the services provided internally. The embedded clinician can serve as a liaison between law enforcement personnel and external mental health providers, facilitating referrals and ensuring continuity of care.
- Brief description of how a recipient's response is related and reasonably proportional to a public health or negative economic impact of COVID-19.

The COVID-19 pandemic has profoundly reshaped societies worldwide, touching every facet of human life. Among the frontline responders to this global crisis were the law enforcement personnel of the Manchester Police Department (MPD). During the pandemic, our personnel were tasked with maintaining public safety, while balancing all of the professional, and personal effects that the pandemic caused for our families, and society as a whole. “Already at greater risk of mental health problems than the U.S. population due to unique occupational hazards, first responders have been called to serve on local frontlines during an unprecedented global catastrophe. The COVID-19 pandemic has resulted in greater levels of economic hardships, illness, and death not seen outside of world wars,” (Carbajal et al., 2021). Our personnel face unique risks in their line of duty, and within their families; the COVID-19 pandemic has exacerbated these challenges.

Ensuring the mental health and wellness of the employees of the MPD remains one of Chief Allen Aldenberg’s, top priorities. The ability of sworn officers and civilian personnel to consistently perform critical and essential job functions, to ensure the public’s safety, is at the core of policing. The MPD recognizes the direct positive correlation between prioritizing one’s own mental health and wellness and our ability to perform essential job functions. If an employee is not in good physical and mental condition, they cannot ensure the public’s, their colleagues’, or their own safety. Prioritizing mental health and wellness, as an agency, unequivocally aids our personnel to be healthier, happier, safer, and better able to perform our law enforcement occupational functions. “First responders experience higher rates of mental health conditions, including posttraumatic stress disorder (PTSD), depression, anxiety, suicide/suicide ideation, and relationship problems compared to the general population. Rates of these conditions have increased in the overall population with the onset of the COVID-19 pandemic” (Carbajal et al., 2021).

The nature of policing often requires close contact with the public, which resulted in our personnel becoming more susceptible to exposure to the virus. These close contacts with members of our community often included contact with individuals who were infected with COVID-19. These mandatory increased exposures to infected individuals exacerbated the stress our personnel and their families had to endure during the pandemic.

From 2020 through 2023, approximately 336 employees of the MPD contracted COVID-19 and/or were required to self-quarantine, per the Center for Disease Control and Prevention guidelines. These self-quarantines resulted in mental health impacts, social impacts, economic impacts, educational impacts, and influenced domestic dynamics for our employees. These aforementioned outcomes also impacted the residents of our community and families across the country.

Research indicates that since the onset of COVID-19, “first responders and frontline providers have reported increased feelings of sadness and anxiety, with a reluctance to ask for help. First responders may also experience effects from being stigmatized due to their high exposure to COVID-19, leading to feelings of isolation. Finally, social distancing, both on the job and in personal households, may affect first responders’ abilities to seek and receive support from their

networks of coworkers, friends, or family. Ultimately, the challenges faced by first responders during the COVID-19 pandemic may be contributing to a decreased likelihood that they remain in their occupation” (McAlearney et al., 2022).

Furthermore, the pandemic has underscored the importance of community relations in effective law enforcement. The pandemic had a direct impact on the health, safety, operations, and community relations our personnel work to maintain on a daily basis. Our collective response to the pandemic must prioritize the well-being, and resilience of our employees, who serve and protect our community. This prioritization of the mental health and wellness of our employees ensures that they are equipped to meet the public safety needs of our city.

During the summer and fall of 2020, the City of Manchester experienced a rise in shootings and gun crime amid the COVID-19 pandemic. From a macro perspective, this rise in shootings and gun crime can be attributed to economic strain, social disruption, pandemic-related crime opportunism, and the strain on first responder, medical and mental health care systems. Addressing the rise in gun crime and shootings amid the COVID-19 pandemic required a comprehensive approach that encompassed public health interventions, economic support, community policing efforts, mental health resources, and targeted measures to address the root causes of violence. Collaboration between state and city government, the MPD, our community partners, and city public health experts was essential to mitigate the impact of the pandemic on firearm-related violence and promote community safety and resilience.

- The dollar amount of the total project spending that is allocated towards evidence-based interventions.
 - \$109,000 (Total amount)

Citations:

1. Police Executive Research Forum. 2021. *Promising Strategies for Strengthening Police Department Wellness Programs: Findings and Recommendations from the Officer Safety and Wellness Technical Assistance Project*. Washington, DC: Office of Community Oriented Policing Services.
 2. Colleen Copple, James Copple, Jessica Drake, Nola Joyce, Mary-Jo Robinson, Sean Smoot, Darrel Stephens and Roberto Villasenor. 2019. *Law Enforcement Mental health and Wellness Programs; Eleven Case Studies*. Washington, DC. Office of Community Oriented Policing Services.
 3. Spence, Deborah L., Mellissa Fox, Gilbert C. Moore, Sarah Estill, and Nazmia, E.A. Comerie. 2019. *Law Enforcement Mental Health and Wellness Act: Report to Congress*. Washington, DC. Department of Justice
- Indicate if a program evaluation of the project is being conducted
 - N/A

**CITY OF MANCHESTER, NH
COMMUNITY IMPROVEMENT PROGRAM
AMERICAN RESCUE PLAN ACT**

QUARTERLY REPORTING INFORMATION

Project Number: 410222 Project Name: ACERT Program (EC 2.13)
Agency Name: Amoskeag Health
Prepared By: Skylar Bottcher Contact Info: 513-642-1643
Reporting Period: October 1st, 2024- December 31th, 2024

I. Project Invoices and Expenditures

Date Received	Reconciliation Period	INVOICE AMOUNT
8/4/23	July Expenses	\$46,126.43
9/12/23	August Expenses	\$18,567.88
10/10/23	September Expenses	\$35,325.36
11/8/23	October Expenses	\$27,846.88
12/12/23	November Expenses	\$36,749.31
1/5/24	December Expenses	\$35,898.68
2/8/24	January Expenses	\$23,439.58
3/7/24	February Expenses	\$52,565.77
4/10/24	March Expenses	\$36,088.16
5/10/24	April Expenses	\$21,941.29
6/6/24	May Expenses	\$34,548.66
7/15/24	June Expenses	\$34,545.02
8/12/24	July Expenses	\$76,013.28
9/10/24	August Expenses	\$34,935.78
10/7/24	September Expenses	\$27,257.65
11/8/24	October Expenses	\$33,973.52
1/15/24 Reconciliation Date	November Expenses	\$27,105.20
1/15/24 Reconciliation Date	December Expenses	\$33,142.53

QUARTER TOTAL: October- Decemeber
\$94,221.25

- ❖ **Subawards of \$50,000 Or more** – If your project contained any contract/grant/loan/transfer/or direct payment to an individual, business or agency, please fill out the additional information on Section IV.

II. Project Status

☐ Not Started ☐ Completed less than 50% ☒ Completed 50% or more ☐ Completed

III. Project Service Area/Demographic Distribution - What Impacted and/or Disproportionately Impacted population does this project primarily serve? Please select the population primarily served. If this project primarily serves more than one Impacted and/or Disproportionately Impacted population, please select up to two additional populations served

	Impacted		Disproportionately Impacted
X	General Public		
X	Low- or-moderate income households or populations (see chart below)		Low-income households and populations (see chart below)
	Households that experienced unemployment	X	Households and populations residing in Qualified Census Tracts*
	Households that experienced increased food or housing insecurity		Households that qualify for certain federal programs ²
	Households that qualify for certain federal programs ¹		Households residing in the U.S. territories or receiving services from these governments
	For services to address lost instructional time in K-12 schools: any students that lost access to in-person instruction for a significant period of time		Other households or populations that experienced a disproportionate negative economic impact of the pandemic other than those listed above (specify in section V.)
	Other households or populations that experienced a negative economic impact of the pandemic other than those listed above (specify in section V.)		

Income Limits by Household Size – Manchester, NH – 2022

Household Size	1 Person	2	3	4	5	6	7	8
Low Income	\$25,040	\$32,227	\$40,626	\$49,025	\$57,424	\$65,823	\$74,222	\$82,621
Moderate Income	\$40,690	\$52,260	\$65,880	\$79,500	\$93,120	\$106,740	\$120,360	\$133,980

¹ For Impacted households, these programs are Children's Health Insurance Program ("CHIP"); Childcare Subsidies through the Child Care and Development Fund ("CCDF") Program; Medicaid; National Housing Trust Fund ("HTF"), for affordable housing programs only; Home Investment Partnerships Program ("HOME"), for affordable housing programs only.

² For Disproportionately Impacted households, these programs are Temporary Assistance for Needy Families ("TANF"), Supplemental Nutrition Assistance Program ("SNAP"), Free- and Reduced-Price Lunch ("NSLP") and/or School Breakfast ("SBP") programs, Medicare Part D Low-Income Subsidies, Supplemental Security Income ("SSI"), Head Start, Special Supplemental Nutrition Program for Women, Infants, and Children ("WIC"), Section 8 Vouchers, Low-Income Home Energy Assistance Program ("LIHEAP"), and Pell Grants.

**See Map of Qualified Census Tract on page 21*

IV. Subawards of \$50,000 Or more – If your project contained any contract / grant / loan / transfer / or direct payment to an individual, business or agency greater than or equal to \$50,000, please provide the following information for each recipient

Agency/Business/Individual Legal Name: YWCA-New Hampshire

Address: 72 Concord St. Manchester, NH 03103

UEI #:FWVEAJGAMHR3

SAM #:N/A

Award number & name: CIP #410222 ACERT Program (EC 3.8)

Award date: October 2021

Award amount: \$320,749.62 Award type: Contract

Award payment method (reimbursable or lump sum payment(s)): Reimbursable

Primary place of performance: YWCA-NH and Manchester Police Department

Period of performance - Start date: January 2022

End date: December 2026

Loan expiration date (expected to be paid in full): December 31, 2026

Quarterly obligation amount: \$N/A

Quarterly expenditure amount: \$ \$0

Activity general description:

The YWCA is one of three core partner organizations involved with the day-to-day core operations of ACERT. The YWCA provides two family advocates, who collectively put in 40 hours per week (20 hours per individual) to provide case management to families identified by ACERT. The YWCA also provides domestic violence specific supports and services to families referred through the program.

Agency/Business/Individual Legal Name: Keene State College, Behavioral Health Improvement Institute (BHII)

Address: 51 College Road, Room 109, University of New Hampshire, Durham, NH 03824

UEI #:UDDNE26Q4JH1, DV3PJ2NRLKC5, K7L3KXX4EV44

SAM #: N/A

Award number & name: CIP #410222 ACERT Program (EC 3.8)

Award date: October 2021

Award amount: \$415,027.50 Award type: Fixed Price Contract

Award payment method (reimbursable or lump sum payment(s)): Reimbursable

Primary place of performance: Keene State College, BHII

Period of performance - Start date: October 2021

End date: December 2026

Loan expiration date (expected to be paid in full): December 31, 2026

Quarterly obligation amount: \$N/A

Quarterly expenditure amount: \$ 19,763.19

Activity general description:

The Behavioral Health Improvement Institute (BHII) at Keene State College is serving as our external evaluator. This quarter, BHII helped us articulate our logic model and workflow as prerequisites for developing an ACERT logic model, fidelity measure, and custom-built data platform using QuickBase. QuickBase is a secure, cloud-based, FERPA- and HIPAA-compliant online data platform in which all ACERT case documentation and performance measures will be entered and stored. Measures will fall into one of two categories: 1) capacity development and 2) victim and child welfare support.

Agency/Business/Individual Legal Name: UpReach Therapeutic Equestrian Center

Address: 153 Paige Hill Road, Goffstown, NH 03045

UEI #: SKEGKBCYFWV8

SAM #: N/A

Award number & name: CIP #410222 ACERT Program (EC 3.8)

Award date: October 2021

Award amount: \$138,369.00 Award type: Contract

Award payment method (reimbursable or lump sum payment(s)): Reimbursable

Primary place of performance: UpReach Therapeutic Equestrian Center

Period of performance - Start date: January 2022

End date: December 2026

Loan expiration date (expected to be paid in full): December 31. 2026

Quarterly obligation amount: \$N/A

Quarterly expenditure amount: \$ 4,892.33

Activity general description:

UpReach Therapeutic Equestrian Center provides evidence-informed therapeutic programming to children and families referred through ACERT.

Agency/Business/Individual Legal Name: Waypoint

Address: 99 Hanover St. Manchester, NH 03101

UEI #: QX4YNCN4JYK5

SAM #:N/A

Award number & name: CIP #410222 ACERT Program (EC 3.8)

Award date: October 2021

Award amount: \$64,134.00 Award type: Contract

Award payment method (reimbursable or lump sum payment(s)): Reimbursable

Primary place of performance: Waypoint

Period of performance - Start date: January 2022 End date: December 2026

Loan expiration date (expected to be paid in full): December 2026

Quarterly obligation amount: \$N/A

Quarterly expenditure amount: \$ _ 4,829.07 _____

Activity general description:

Waypoint provides evidence-based home visiting services and other family support resources to families referred through ACERT.

Demographic Information (if applicable):

Reporting Period: October 1, 2024 – December 31, 2024

Number of New (Unduplicated) Households Served This Period 125

Male 105 Female 189 Other 1 Blank 4 Elderly (>62 Y.O.) 0 Disabled 0

85 White 0 Native Hawaiian/Other Pacific Islander

0 American Indian/Alaskan Native 126 Hispanic, Latino, Spanish

4 Asian 1 Other Multi-Racial

5 African American 8 Unknown

*198 individuals' race was not identified

V. Project Benchmark Reporting – Please provide the following information in each report (50 – 250 words)

- Brief description of how a recipient's response is related and reasonably proportional to a public health or negative economic impact of COVID-19.

Families continue to face negative public health and economic impacts as a result of COVID-19. The global pandemic has exacerbated the rates of children exposed to violence and other adverse experiences in Manchester and statewide. From October 1, 2024, through December 31, 2024, the ACERT team received 335

incidents from the Manchester Police Department where at least one juvenile was present during a traumatic incident resulting in a police response. The most common incident types were juvenile calls for service (81; when a juvenile requests law enforcement assistance or intervention), physical assault (63; incident involving physical violence or bodily harm inflicted upon an individual), and domestics without crime (57; incidents within a familial or domestic relationship where no criminal offense has been committed).

Home visits are an essential service the ACERT team provides, during which one police officer and one family advocate visit the households of the youth involved in a police-involved incident. During the home visits, the ACERT team educates the families about ACEs and HOPE (healthy outcomes from positive experiences) and seeks consent for ACERT services. From October 1st through December 31st, the ACERT team conducted home visits involving 299 individuals in 125 households.

Referrals to community partners are provided to those families that consent to services. From October 1st through December 31st, 174 referrals to services designed to mitigate the negative effects of trauma were made on behalf of 63 households consisting of 79 adults and 89 children.

- Indicate if a program evaluation of the project is being conducted.
 - The Behavioral Health Improvement Institute (BHII) at Keene State College is our external evaluator. This quarter, we continued the use of the ACERT database and case management system for families receiving services through ACERT. The ACERT database is developed in Quickbase, a secure, cloud-based FERPA- and HIPPA-compliant online data platform in which all ACERT case documentation and performance measures are entered and stored. Measures fall into one of two categories: 1) capacity development and 2) victim and child welfare support. Both the capacity development and victim and child welfare portions of the database are complete and partnering service provider agencies were securely receiving and tracking ACERT referrals as well as communicating referral outcomes via the database.

- ATTACHMENT F -
CITY OF MANCHESTER, NH
COMMUNITY IMPROVEMENT PROGRAM
AMERICAN RESCUE PLAN ACT

QUARTERLY REPORTING INFORMATION

Project Number: 410224

Project Name: *Crime Analysts (EC 2.18)*

Agency Name: *Police Department*

Prepared By: *Patrick Houghton*

Contact Info: *phoughton@manchesternh.gov*

Reporting Period: *October 1, 2024 – December 31, 2024*

I. Project Obligation and Expenditures

OBLIGATION		EXPENDITURE	
Total Project Obligation:	\$ 450,000.00	Total Project Expenditure:	\$251,998.56
Previous Quarter Obligation:	\$ 0.00	Previous Quarter Expenditure:	\$ 50,785.98
Current Quarter Obligation:	\$ 0.00	Current Quarter Expenditure:	\$ 47,670.51

❖ **Subawards of \$50,000 Or more** – If your project contained any contract/grant/loan/transfer/or direct payment to an individual, business or agency, please fill out the additional information on Section IV.

II. Project Status

___ Not Started ___ Completed less than 50% X Completed 50% or more ___ Completed

III. Project Service Area/Demographic Distribution - What Impacted and/or Disproportionally Impacted population does this project primarily serve? Please select the population primarily served. If this project primarily serves more than one Impacted and/or Disproportionately Impacted population, please select up to two additional populations served

	Impacted		Disproportionately Impacted
X	General Public		
	Low- or-moderate income households or populations (see chart below)		Low-income households and populations (see chart below)
	Households that experienced unemployment	X	Households and populations residing in Qualified Census Tracts*
	Households that experienced increased food or housing insecurity		Households that qualify for certain federal programs ²
	Households that qualify for certain federal programs ¹		Households residing in the U.S. territories or receiving services from these governments

	For services to address lost instructional time in K-12 schools: any students that lost access to in-person instruction for a significant period of time		Other households or populations that experienced a disproportionate negative economic impact of the pandemic other than those listed above (specify in section V.)
	Other households or populations that experienced a negative economic impact of the pandemic other than those listed above (specify in section V.)		

Income Limits by Household Size – Manchester, NH – 2022

<i>Household Size</i>	<i>1 Person</i>	<i>2</i>	<i>3</i>	<i>4</i>	<i>5</i>	<i>6</i>	<i>7</i>	<i>8</i>
<i>Low Income</i>	\$25,040	\$32,227	\$40,626	\$49,025	\$57,424	\$65,823	\$74,222	\$82,621
<i>Moderate Income</i>	\$40,690	\$52,260	\$65,880	\$79,500	\$93,120	\$106,740	\$120,360	\$133,980

¹ For Impacted households, these programs are Children’s Health Insurance Program (“CHIP”); Childcare Subsidies through the Child Care and Development Fund (“CCDF”) Program; Medicaid; National Housing Trust Fund (“HTF”), for affordable housing programs only; Home Investment Partnerships Program (“HOME”), for affordable housing programs only.

² For Disproportionately Impacted households, these programs are Temporary Assistance for Needy Families (“TANF”), Supplemental Nutrition Assistance Program (“SNAP”), Free- and Reduced-Price Lunch (“NSLP”) and/or School Breakfast (“SBP”) programs, Medicare Part D Low-Income Subsidies, Supplemental Security Income (“SSI”), Head Start, Special Supplemental Nutrition Program for Women, Infants, and Children (“WIC”), Section 8 Vouchers, Low-Income Home Energy Assistance Program (“LIHEAP”), and Pell Grants.

**See Map of Qualified Census Tract on Attachment G*

IV. Subawards of \$50,000 Or more – If your project contained any contract / grant / loan / transfer / or direct payment to an individual, business or agency greater than or equal to \$50,000, please provide the following information for each recipient

Agency/Business/Individual Legal Name:

Address:

UEI #:

SAM #:

Award number & name:

Award date:

Award amount: Award type: Direct payment

Award payment method (reimbursable or lump sum payment(s)):

Primary place of performance:

Period of performance - Start date: _____ End date: _____

Loan expiration date (expected to be paid in full): _____

Quarterly obligation amount: \$ _____

Quarterly expenditure amount: \$ _____

Activity general description: _____

Demographic Information (if applicable):

Number of New (Unduplicated) Households Served This Period _____

Male _____ Female _____ Elderly (>62 Y.O.) _____ Disabled _____

_____ White _____ Native Hawaiian/Other Pacific Islander
_____ American Indian/Alaskan Native _____ Hispanic, Latino, Spanish
_____ Asian _____ Other Multi-Racial
_____ African American

V. Project Benchmark Reporting – Please provide the following information in each report (50 – 250 words)

- Number of FTEs hired under this program’s authority.
 - Manchester Police has hired 2 full-time Crime Analysts to support the Real Time Crime Center.
- Brief description of structure and objectives of assistance program(s), including public health or negative economic impact experienced.
 - Two Analysts will be assigned to the “Real Time Crime Center”, which will operate within the Communications Division. These analysts will primarily work on supporting the law enforcement response to in-progress violent crime calls through Intelligence and Information gathering. Additionally, analysts will support suspect / person of interest risk assessments, creation of a daily crime bulletin, and tracking of crime incidents in real time to assist with resource deployment and police responses. One aspect will be the real-time tracking of overdoses to identify spikes as they occur and public health partners can be notified to respond appropriately. This pilot project was created to assist the City of Manchester respond to increases in violent crime that, in part, were the result of the Covid-19 pandemic and coinciding negative economic impact experienced.
 -
- Brief description of how a recipient’s response is related and reasonably proportional to a public health or negative economic impact of COVID-19.
 - After the onset of the Covid-19 pandemic, Manchester experienced an increase in Violent Crime of nearly 13%. Specifically, gun crimes increased in the City where gunfire incidents increased in 2020 and 2022. A more detailed examination of non-fatal shootings also identified increases in non-fatal shootings in 2020 and

2021. The above description of the structure and objectives of this program are part of the overall response to reducing and preventing violent crime. Skilled crime analysts, in a real-time setting help to ensure prolific offenders are identified, crime spikes are identified before they become chronic, and additional capacity to make data-driven decisions in response to violent crime in Manchester.

- The dollar amount of the total project spending that is allocated towards evidence-based interventions.
 - \$450,000.
- Indicate if a program evaluation of the project is being conducted
 - A program evaluation is being conducted. A pre-survey has been conducted within the department, which will be followed up at 6-months and 12-months. This survey will help assess the impact of the analysts on response to violent crime. Additionally, daily tasks of the Analysts are being tracked to assess the overall work of the analysts and how it impacts calls and crimes in real time.

ARPA - CRIME ANALYSTS

Project # 410224

WF0403329

Expires: December 31, 2026

As of December 31, 2023

							8%
Item	Total Budget Amount	Previously Reported	Oct - Dec 23	Total	Balance	% Spent	
Personnel							
Regular Salary (110)	\$ 260,000	\$ -	\$ 23,796.60	\$ 23,796.60	\$ 236,203.40	9.2%	
Fringe Benefits							
Health Insurance (211)	\$ 80,000	\$ -	\$ 5,435.51	\$ 5,435.51	\$ 74,564.49	6.8%	
Dental Insurance (212)	\$ 5,000	\$ -	\$ 231.46	\$ 231.46	\$ 4,768.54	4.6%	
Life Insurance (213)	\$ 250	\$ -	\$ 27.42	\$ 27.42	\$ 222.58	11.0%	
Disability Insurance (219)	\$ 500	\$ -	\$ 17.94	\$ 17.94	\$ 482.06	3.6%	
City Retirement (228)	\$ 85,000	\$ -	\$ 8,590.70	\$ 8,590.70	\$ 76,409.30	10.1%	
FICA (230)	\$ 19,250	\$ -	\$ 1,709.35	\$ 1,709.35	\$ 17,540.65	8.9%	
	\$ 190,000	\$ -	\$ 16,012.38	\$ 16,012.38	\$ 173,987.62	8.4%	
GRAND TOTALS	\$ 450,000	\$ -	\$ 39,808.98	\$ 39,808.98	\$ 410,191.02	8.8%	

- ATTACHMENT F -
CITY OF MANCHESTER, NH
COMMUNITY IMPROVEMENT PROGRAM
AMERICAN RESCUE PLAN ACT

QUARTERLY REPORTING INFORMATION

Project Number: 410322

Project Name: *Director of Homelessness Initiatives (EC 3.1)*

Agency Name: *Office of the Mayor*

Prepared By: *Owen Westover*

Contact Info: *owestover@manchesternh.gov*

Reporting Period: *October 1, 2024 – December 31, 2024*

I. Project Obligation and Expenditures

OBLIGATION		EXPENDITURE	
Total Project Obligation:	\$ 251,427.94	Total Project Expenditure:	\$ 113,514.40
Previous Quarter Obligation:	-\$ 226,847.36	Previous Quarter Expenditure:	\$ 24,188.47
Current Quarter Obligation:	-\$ 88,572.06	Current Quarter Expenditure:	\$ 24,942.34

❖ **Subawards of \$50,000 Or more** – If your project contained any contract/grant/loan/transfer/or direct payment to an individual, business or agency, please fill out the additional information on Section IV.

II. Project Status

___ Not Started X Completed less than 50% ___ Completed 50% or more ___ Completed

III. Project Service Area/Demographic Distribution - What Impacted and/or Disproportionally Impacted population does this project primarily serve? Please select the population primarily served. If this project primarily serves more than one Impacted and/or Disproportionately Impacted population, please select up to two additional populations served

	Impacted		Disproportionately Impacted
	General Public		
	Low- or-moderate income households or populations (see chart below)	x	Low-income households and populations (see chart below)
	Households that experienced unemployment		Households and populations residing in Qualified Census Tracts*
x	Households that experienced increased food or housing insecurity		Households that qualify for certain federal programs ²

	Households that qualify for certain federal programs ¹		Households residing in the U.S. territories or receiving services from these governments
	For services to address lost instructional time in K-12 schools: any students that lost access to in-person instruction for a significant period of time		Other households or populations that experienced a disproportionate negative economic impact of the pandemic other than those listed above (specify in section V.)
	Other households or populations that experienced a negative economic impact of the pandemic other than those listed above (specify in section V.)		

Income Limits by Household Size – Manchester, NH – 2024

<i>Household Size</i>	<i>1 Person</i>	<i>2</i>	<i>3</i>	<i>4</i>	<i>5</i>	<i>6</i>	<i>7</i>	<i>8</i>
<i>Low Income</i>	\$40,050	\$45,800	\$51,500	\$57,200	\$61,800	\$66,400	\$70,950	\$75,550
<i>Moderate Income</i>	\$64,050	\$73,200	\$82,350	\$91,500	\$98,850	\$106,150	\$113,500	\$120,800

¹ For Impacted households, these programs are Children’s Health Insurance Program (“CHIP”); Childcare Subsidies through the Child Care and Development Fund (“CCDF”) Program; Medicaid; National Housing Trust Fund (“HTF”), for affordable housing programs only; Home Investment Partnerships Program (“HOME”), for affordable housing programs only.

² For Disproportionately Impacted households, these programs are Temporary Assistance for Needy Families (“TANF”), Supplemental Nutrition Assistance Program (“SNAP”), Free- and Reduced-Price Lunch (“NSLP”) and/or School Breakfast (“SBP”) programs, Medicare Part D Low-Income Subsidies, Supplemental Security Income (“SSI”), Head Start, Special Supplemental Nutrition Program for Women, Infants, and Children (“WIC”), Section 8 Vouchers, Low-Income Home Energy Assistance Program (“LIHEAP”), and Pell Grants.

**See Map of Qualified Census Tract on Attachment G*

IV. Subawards of \$50,000 Or more – If your project contained any contract / grant / loan / transfer / or direct payment to an individual, business or agency greater than or equal to \$50,000, please provide the following information for each recipient

Agency/Business/Individual Legal Name:

Address:

UEI #:

SAM #:

Award number & name:

Award date:

Award amount: \$ Award type:
Award payment method (reimbursable or lump sum payment(s)):
Primary place of performance:
Period of performance - Start date: End date:
Loan expiration date (expected to be paid in full):
Quarterly obligation amount: \$
Quarterly expenditure amount: \$
Activity general description:

Demographic Information (if applicable):

Number of New (Unduplicated) Households Served This Period 141

Male 92 Female 49 Elderly (>62 Y.O.) 18 Disabled 68

10 White 1 Native Hawaiian/Other Pacific Islander
2 American Indian/Alaskan Native 2 Hispanic, Latino, Spanish
0 Asian 1 Other Multi-Racial
7 African American

V. Project Benchmark Reporting – Please provide the following information in each report (50 – 250 words)

****Will be paid through ARPA beginning 7/1/24.**

- Does this project include a capital expenditure and type of capital expenditure?
No
- Total expected capital expenditure, including pre-development costs, if applicable.
- Brief description of structure and objectives of assistance program(s), including public health or negative economic impact experienced.
 - The primary goal of this position is to coordinate and oversee the City’s efforts in addressing homelessness, including the mitigation of homeless encampments and the oversight of the City’s shelter and Engagement Center. The role involves fostering strong partnerships with various stakeholders such as City employees, business and community groups, State and Federal officials, and the media. A key responsibility is to develop and implement effective communication strategies, ensuring that information about services is shared across relevant groups and the public, while also strengthening collaboration between homelessness service

providers, both public and private.

The individual in this role will also focus on identifying service gaps, measuring outcomes, and reducing the duplication of resources within the community by collecting and analyzing data. Regular engagement with citizens, attendance at relevant meetings and training, and staying informed on best practices for homelessness services are essential components of this position to ensure the effectiveness of the City's programs and operations.

- Brief description of how a recipient's response is related and reasonably proportional to a public health or negative economic impact of COVID-19.
 - The population served is at significant risk of COVID-19 as well as other communicable diseases. Many homeless individuals served suffer negative health outcomes due to housing instability.
- The dollar amount of the total project spending that is allocated towards evidence-based interventions.
 - This provides payroll support for the position.
- Indicate if a program evaluation of the project is being conducted
 - This position is subject to yearly employment evaluations.

- ATTACHMENT F -
CITY OF MANCHESTER, NH
COMMUNITY IMPROVEMENT PROGRAM
AMERICAN RESCUE PLAN ACT

QUARTERLY REPORTING INFORMATION

Project Number: 410422

Project Name: Fire Department Emergency Management Coordinator (EC 1.9)

Agency Name: Fire Department

Prepared By: Melissa Paulhamus

Contact Info: 603-792-3824

Reporting Period: October 1, 2024-December 31, 2024

I. Project Obligation and Expenditures

OBLIGATION		EXPENDITURE	
Total Project Obligation:	\$ 438,518.80	Total Project Expenditure:	\$ 389,382.80
Previous Quarter Obligation:	-\$ 163,000.00	Previous Quarter Expenditure:	\$ 15,977.87
Current Quarter Obligation:	\$ 0.00	Current Quarter Expenditure:	\$ 31,801.84

❖ **Subawards of \$50,000 Or more** – If your project contained any contract/grant/loan/transfer/or direct payment to an individual, business or agency, please fill out the additional information on Section IV.

II. Project Status

☐ Not Started ☐ Completed less than 50% ☒ Completed 50% or more ☐ Completed

III. Project Service Area/Demographic Distribution - What Impacted and/or Disproportionally Impacted population does this project primarily serve? Please select the population primarily served. If this project primarily serves more than one Impacted and/or Disproportionately Impacted population, please select up to two additional populations served

	Impacted	Disproportionately Impacted
☒	General Public	
☐	Low- or-moderate income households or populations (see chart below)	Low-income households and populations (see chart below)
☐	Households that experienced unemployment	Households and populations residing in Qualified Census Tracts*
☐	Households that experienced increased food or housing insecurity	Households that qualify for certain federal programs ²

	Households that qualify for certain federal programs ¹	Households residing in the U.S. territories or receiving services from these governments
	For services to address lost instructional time in K-12 schools: any students that lost access to in-person instruction for a significant period of time	Other households or populations that experienced a disproportionate negative economic impact of the pandemic other than those listed above (specify in section V.)
	Other households or populations that experienced a negative economic impact of the pandemic other than those listed above (specify in section V.)	

Income Limits by Household Size – Manchester, NH – 2022

Household Size	1 Person	2	3	4	5	6	7	8
Low Income	\$25,040	\$32,227	\$40,626	\$49,025	\$57,424	\$65,823	\$74,222	\$82,621
Moderate Income	\$40,690	\$52,260	\$65,880	\$79,500	\$93,120	\$106,740	\$120,360	\$133,980

¹ For Impacted households, these programs are Children’s Health Insurance Program (“CHIP”); Childcare Subsidies through the Child Care and Development Fund (“CCDF”) Program; Medicaid; National Housing Trust Fund (“HTF”), for affordable housing programs only; Home Investment Partnerships Program (“HOME”), for affordable housing programs only.

² For Disproportionately Impacted households, these programs are Temporary Assistance for Needy Families (“TANF”), Supplemental Nutrition Assistance Program (“SNAP”), Free- and Reduced-Price Lunch (“NSLP”) and/or School Breakfast (“SBP”) programs, Medicare Part D Low-Income Subsidies, Supplemental Security Income (“SSI”), Head Start, Special Supplemental Nutrition Program for Women, Infants, and Children (“WIC”), Section 8 Vouchers, Low-Income Home Energy Assistance Program (“LIHEAP”), and Pell Grants.

**See Map of Qualified Census Tract on Attachment G*

IV. Subawards of \$50,000 Or more – If your project contained any contract / grant / loan / transfer / or direct payment to an individual, business or agency greater than or equal to \$50,000, please provide the following information for each recipient

Agency/Business/Individual Legal Name:

Address:

UEI #:

SAM #:

Award number & name:

Award date:

Award amount: \$

Award type:

Mitigation Plan. This position has completed the City's Extreme Temperature Annex, and coordinated information sharing regarding cooling station activation thresholds. This position coordinates a Special Events Working Group to help improve the Special Events public safety planning process, as well as writing and coordinating multiple grants to support emergency response and recovery efforts citywide. The Emergency Management Coordinator is currently overseeing the adoption of a Citywide Emergency Alerting platform which can be used for preplanned as well as emergency situations, and includes functionality for WEA, participating in regional emergency management exercises for critical infrastructure, has started a Daily Operations Briefing for relevant partners, and is working with MIT Lincoln Laboratory on incorporating Language Learning Models to improve daily operations. Lastly, this position is responsible for coordinating disaster recovery efforts and has developed an Initial Damage Assessment survey, as well as coordinates FEMA Public Assistance for the City, including for COVID and recent flood damage.

- Brief description of how a recipient's response is related and reasonably proportional to a public health or negative economic impact of COVID-19.

- This position is coordinating the City's FEMA Public Assistance requests relative to COVID-19 which to date is just over \$2.4 million, of which \$1.7 million has been recovered and over \$700,000 still under review. Additionally, this position has coordinated all requests for PPE, sanitization and other supplies relative to COVID-19 including tracking of requests, logistics for pick up/delivery, etc. While the City's EOC was activated, this position was responsible for the development of the City's IAP, and is actively participating in the After Action Report process with the State of New Hampshire, and City of Manchester Health Department/Greater Manchester Public Health Network.

- Purpose of funds (e.g., payroll support, safety measure implementation). ○ Payroll

- Indicate if a program evaluation of the project is being conducted ○ Annual employee evaluations, monitoring success of grant funding secured under this position for emergency management purposes, and monitoring of public safety planning efforts coordinated by this position for pre-planned events, and emergency/disaster scenarios.

- ATTACHMENT F -
CITY OF MANCHESTER, NH
COMMUNITY IMPROVEMENT PROGRAM
AMERICAN RESCUE PLAN ACT

QUARTERLY REPORTING INFORMATION

Project Number: 410525

Project Name: *Park Enforcement (EC 1.11)*

Agency Name: *Manchester Police Department*

Prepared By: *Steven Hoeft* **Contact Info:** *603-792-5411*

Reporting Period: *October 1, 2024 – December 31, 2024*

I. Project Obligation and Expenditures

OBLIGATION		EXPENDITURE	
Total Project Obligation:	\$ 500,000	Total Project Expenditure:	\$ 92,397.16
Previous Quarter Obligation:	\$ 0.00	Previous Quarter Expenditure:	\$ 40,263.62
Current Quarter Obligation:	\$ 0.00	Current Quarter Expenditure:	\$ 52,133.54

❖ **Subawards of \$50,000 Or more** – If your project contained any contract/grant/loan/transfer/or direct payment to an individual, business or agency, please fill out the additional information on Section IV.

II. Project Status

___ Not Started X Completed less than 50% ___ Completed 50% or more ___ Completed

III. Project Service Area/Demographic Distribution - What Impacted and/or Disproportionally Impacted population does this project primarily serve? Please select the population primarily served. If this project primarily serves more than one Impacted and/or Disproportionately Impacted population, please select up to two additional populations served

	Impacted		Disproportionately Impacted
X	General Public		
	Low- or-moderate income households or populations (see chart below)		Low-income households and populations (see chart below)
	Households that experienced unemployment	X	Households and populations residing in Qualified Census Tracts*
	Households that experienced increased food or housing insecurity		Households that qualify for certain federal programs ²

	Households that qualify for certain federal programs ¹		Households residing in the U.S. territories or receiving services from these governments
	For services to address lost instructional time in K-12 schools: any students that lost access to in-person instruction for a significant period of time		Other households or populations that experienced a disproportionate negative economic impact of the pandemic other than those listed above (specify in section V.)
	Other households or populations that experienced a negative economic impact of the pandemic other than those listed above (specify in section V.)		

Income Limits by Household Size – Manchester, NH – 2022

<i>Household Size</i>	<i>1 Person</i>	<i>2</i>	<i>3</i>	<i>4</i>	<i>5</i>	<i>6</i>	<i>7</i>	<i>8</i>
<i>Low Income</i>	\$25,040	\$32,227	\$40,626	\$49,025	\$57,424	\$65,823	\$74,222	\$82,621
<i>Moderate Income</i>	\$40,690	\$52,260	\$65,880	\$79,500	\$93,120	\$106,740	\$120,360	\$133,980

¹ For Impacted households, these programs are Children’s Health Insurance Program (“CHIP”); Childcare Subsidies through the Child Care and Development Fund (“CCDF”) Program; Medicaid; National Housing Trust Fund (“HTF”), for affordable housing programs only; Home Investment Partnerships Program (“HOME”), for affordable housing programs only.

² For Disproportionately Impacted households, these programs are Temporary Assistance for Needy Families (“TANF”), Supplemental Nutrition Assistance Program (“SNAP”), Free- and Reduced-Price Lunch (“NSLP”) and/or School Breakfast (“SBP”) programs, Medicare Part D Low-Income Subsidies, Supplemental Security Income (“SSI”), Head Start, Special Supplemental Nutrition Program for Women, Infants, and Children (“WIC”), Section 8 Vouchers, Low-Income Home Energy Assistance Program (“LIHEAP”), and Pell Grants.

**See Map of Qualified Census Tract on Attachment G*

IV. Subawards of \$50,000 Or more – If your project contained any contract / grant / loan / transfer / or direct payment to an individual, business or agency greater than or equal to \$50,000, please provide the following information for each recipient

Agency/Business/Individual Legal Name:

Address:

UEI #:

SAM #:

Award number & name:

Award date:

Award amount: \$

Award type:

Award payment method (reimbursable or lump sum payment(s)):

Primary place of performance:

Period of performance - Start date: _____ End date: _____

Loan expiration date (expected to be paid in full):

Quarterly obligation amount: \$ _____

Quarterly expenditure amount: \$ _____

Activity general description:

Demographic Information (if applicable):

Number of New (Unduplicated) Households Served This Period _____

Male _____ Female _____ Elderly (>62 Y.O.) _____ Disabled _____

_____ White _____ Native Hawaiian/Other Pacific Islander
_____ American Indian/Alaskan Native _____ Hispanic, Latino, Spanish
_____ Asian _____ Other Multi-Racial
_____ African American

V. Project Benchmark Reporting – Please provide the following information in each report (50 – 250 words)

- Does this project include a capital expenditure and type of capital expenditure?
 - No
- Total expected capital expenditure, including pre-development costs, if applicable.
 - N/A
- Brief description of structure and objectives of assistance program(s), including public health or negative economic impact experienced.
 - Following the Covid-19 epidemic, the City of Manchester experienced an increase in homeless and unhoused individuals traveling to the city for various reasons. The driving force behind the migration to the city of Manchester was that of services provided locally such as mental health, drug and alcohol “misuse” programs/treatment services, etc. City leaders realized that when programs and services were not successful for individuals, many of them remained in the city’s downtown area and were left homeless, rather than returning to their own communities. Approximately 135-165 individuals remained unhoused and were treatment resistant.
 - Due to this population being unhoused, the city found many of its parks and downtown areas subjected to increased drug use, open alcohol use/abuse, and increase in both

crime and city/state ordinance violations. The feedback from the community, both the business and residential community was that the homeless issue was increasingly getting worse, having a negative impact on city businesses, residential properties, and the general quality of life in the downtown area.

- With the implementation of these funds, the Manchester Police Department was able to form a group of 12 dedicated officers whose role would be to focus on these quality of life issues, specifically drug use, assaults, and thefts in the downtown area. Since the inception of the group in July, 2024, there has been a noticeable improvement on the targeted area, specifically the downtown business district of the city.
- Brief description of how a recipient's response is related and reasonably proportional to a public health or negative economic impact of COVID-19.
 -
- The dollar amount of the total project spending that is allocated towards evidence-based interventions.
 - \$500,000
- Indicate if a program evaluation of the project is being conducted
 -

- ATTACHMENT F -
CITY OF MANCHESTER, NH
COMMUNITY IMPROVEMENT PROGRAM
AMERICAN RESCUE PLAN ACT

QUARTERLY REPORTING INFORMATION

Project Number: 610324

Project Name: Concentrated Code Enforcement 3 (EC 2.18)

Agency Name: Manchester Planning & Community Development

Prepared By: Thomas Brescia

Contact Info: tbrescia@manchesternh.gov

Reporting Period: October 1, 2024 – December 31, 2024

I. Project Obligation and Expenditures

	OBLIGATION		EXPENDITURE
Total Project Obligation:	\$ 74,562.47	Total Project Expenditure:	\$ 73,892.93
Previous Quarter Obligation:	\$ 0.00	Previous Quarter Expenditure:	\$ 20,005.56
Current Quarter Obligation:	-\$ 255,437.53	Current Quarter Expenditure:	\$ 702.07

❖ **Subawards of \$50,000 Or more** – If your project contained any contract/grant/loan/transfer/or direct payment to an individual, business or agency, please fill out the additional information on Section IV.

II. Project Status

___ Not Started X Completed less than 50% ___ Completed 50% or more ___ Completed

III. Project Service Area/Demographic Distribution - What Impacted and/or Disproportionally Impacted population does this project primarily serve? Please select the population primarily served. If this project primarily serves more than one Impacted and/or Disproportionately Impacted population, please select up to two additional populations served

	Impacted		Disproportionately Impacted
X	General Public		
	Low- or-moderate income households or populations (see chart below)		Low-income households and populations (see chart below)
	Households that experienced unemployment		Households and populations residing in Qualified Census Tracts*
X	Households that experienced increased food or housing insecurity		Households that qualify for certain federal programs ²

	Households that qualify for certain federal programs ¹	Households residing in the U.S. territories or receiving services from these governments
	For services to address lost instructional time in K-12 schools: any students that lost access to in-person instruction for a significant period of time	Other households or populations that experienced a disproportionate negative economic impact of the pandemic other than those listed above (specify in section V.)
	Other households or populations that experienced a negative economic impact of the pandemic other than those listed above (specify in section V.)	

Income Limits by Household Size – Manchester, NH – 2024

<i>Household Size</i>	<i>1 Person</i>	<i>2</i>	<i>3</i>	<i>4</i>	<i>5</i>	<i>6</i>	<i>7</i>	<i>8</i>
<i>Low Income</i>	\$40,050	\$45,800	\$51,500	\$57,200	\$61,800	\$66,400	\$70,950	\$75,550
<i>Moderate Income</i>	\$64,050	\$73,200	\$82,350	\$91,500	\$98,850	\$106,150	\$113,500	\$120,800

¹ For Impacted households, these programs are Children’s Health Insurance Program (“CHIP”); Childcare Subsidies through the Child Care and Development Fund (“CCDF”) Program; Medicaid; National Housing Trust Fund (“HTF”), for affordable housing programs only; Home Investment Partnerships Program (“HOME”), for affordable housing programs only.

² For Disproportionately Impacted households, these programs are Temporary Assistance for Needy Families (“TANF”), Supplemental Nutrition Assistance Program (“SNAP”), Free- and Reduced-Price Lunch (“NSLP”) and/or School Breakfast (“SBP”) programs, Medicare Part D Low-Income Subsidies, Supplemental Security Income (“SSI”), Head Start, Special Supplemental Nutrition Program for Women, Infants, and Children (“WIC”), Section 8 Vouchers, Low-Income Home Energy Assistance Program (“LIHEAP”), and Pell Grants.

****See Map of Qualified Census Tract on Attachment G***

IV. Subawards of \$50,000 Or more – If your project contained any contract / grant / loan / transfer / or direct payment to an individual, business or agency greater than or equal to \$50,000, please provide the following information for each recipient

Agency/Business/Individual Legal Name:

Address:

UEI #:

SAM #:

Award number & name:

Award date:

Award amount:

Award type:

Award payment method (reimbursable or lump sum payment(s)):

Primary place of performance:

Period of performance - Start date: _____ End date: _____

Loan expiration date (expected to be paid in full):

Quarterly obligation amount: \$

Quarterly expenditure amount: \$

Activity general description:

Demographic Information (if applicable):

Number of New (Unduplicated) Households Served This Period _____

Male _____ Female _____ Elderly (>62 Y.O.) _____ Disabled _____

_____ White	_____ Native Hawaiian/Other Pacific Islander
_____ American Indian/Alaskan Native	_____ Hispanic, Latino, Spanish
_____ Asian	_____ Other Multi-Racial
_____ African American	

V. Project Benchmark Reporting – Please provide the following information in each report (50 – 250 words)

- In order to identify properties that do not conform with minimum housing standards and to develop individual programs with property owners to achieve compliance, and in recognition of the need to maintain and expand the City's housing inventory to combat COVID-exacerbated affordable housing shortages, ARPA funding was allocated to hire one Concentrated Code Enforcement position.
 - i. The aforementioned position is currently vacant. The previously employed Concentrated Code Enforcement officer resigned from his position, with his last day falling on September 27th, 2024.
 - ii. Due to this vacancy and shifting priorities within the City, the majority of remaining funds from this project were reallocated to other eligible ARPA projects.

- ATTACHMENT G -
CITY OF MANCHESTER, NH
COMMUNITY IMPROVEMENT PROGRAM
AMERICAN RESCUE PLAN ACT

QUARTERLY REPORTING INFORMATION

Project Number: 610325

Project Name: Beech Street Programs

Agency Name: The Mayor's Office

Prepared By: Owen Westover

Contact Info: 603-792-3898

Reporting Period: October 1, 2024 – December 31, 2024

I. Project Obligation and Expenditures

OBLIGATION		EXPENDITURE	
Total Project Obligation:	\$ 842,239.15	Total Project Expenditure:	\$ 574,858.82
Previous Quarter Obligation:	\$ 433,100.00	Previous Quarter Expenditure:	\$ 235,261.81
Current Quarter Obligation:	\$ 409,139.15	Current Quarter Expenditure:	\$ 339,597.01

❖ **Subawards of \$50,000 or more** – If your project contained any contract/grant/loan/transfer/or direct payment to an individual, business or agency, please fill out the additional information on Section IV.

II. Project Status

☐ Not Started
 ☐ Completed less than 50%
 ☒ Completed 50% or more
 ☐ Completed

III. Project Service Area/Demographic Distribution - What Impacted and/or Disproportionally Impacted population does this project primarily serve? Please select the population primarily served. If this project primarily serves more than one Impacted and/or Disproportionately Impacted population, please select up to two additional populations served

	Impacted		Disproportionately Impacted
	General Public		
	Low- or-moderate income households or populations (see chart below)		Low-income households and populations (see chart below)
	Households that experienced unemployment	X	Households and populations residing in Qualified Census Tracts*
X	Households that experienced increased food or housing insecurity		Households that qualify for certain federal programs ²

	Households that qualify for certain federal programs ¹		Households residing in the U.S. territories or receiving services from these governments
	For services to address lost instructional time in K-12 schools: any students that lost access to in-person instruction for a significant period of time		Other households or populations that experienced a disproportionate negative economic impact of the pandemic other than those listed above (specify in section V.)
	Other households or populations that experienced a negative economic impact of the pandemic other than those listed above (specify in section V.)		

Income Limits by Household Size – Manchester, NH – 2024

<i>Household Size</i>	<i>1 Person</i>	<i>2</i>	<i>3</i>	<i>4</i>	<i>5</i>	<i>6</i>	<i>7</i>	<i>8</i>
<i>Low Income</i>	\$40,050	\$45,800	\$51,500	\$57,200	\$61,800	\$66,400	\$70,950	\$75,550
<i>Moderate Income</i>	\$64,050	\$73,200	\$82,350	\$91,500	\$98,850	\$106,150	\$113,500	\$120,800

¹ For Impacted households, these programs are Children’s Health Insurance Program (“CHIP”); Childcare Subsidies through the Child Care and Development Fund (“CCDF”) Program; Medicaid; National Housing Trust Fund (“HTF”), for affordable housing programs only; Home Investment Partnerships Program (“HOME”), for affordable housing programs only.

² For Disproportionately Impacted households, these programs are Temporary Assistance for Needy Families (“TANF”), Supplemental Nutrition Assistance Program (“SNAP”), Free- and Reduced-Price Lunch (“NSLP”) and/or School Breakfast (“SBP”) programs, Medicare Part D Low-Income Subsidies, Supplemental Security Income (“SSI”), Head Start, Special Supplemental Nutrition Program for Women, Infants, and Children (“WIC”), Section 8 Vouchers, Low-Income Home Energy Assistance Program (“LIHEAP”), and Pell Grants.

**See Map of Qualified Census Tract on Attachment G*

IV. Subawards of \$50,000 Or more – If your project contained any contract / grant / loan / transfer / or direct payment to an individual, business or agency greater than or equal to \$50,000, please provide the following information for each recipient

Agency/Business/Individual Legal Name: East Coast Evolution Leadership

Address: 190 Elm Street, Manchester NH 03101

UEI #: KAJ4QAK51647

SAM #:

Award number & name:

Award date: monthly in quarter

Award amount: \$572,167.81

Award type: Direct payment

Award payment method (reimbursable or lump sum payment(s)):

Primary place of performance:

Period of performance - Start date: End date: thru quarter

Loan expiration date (expected to be paid in full):

Quarterly obligation amount: \$ 0

Quarterly expenditure amount: \$ 105,501.17

Activity general description: Staffing

Agency/Business/Individual Legal Name: 39 Beech Street, LLC

Address:

UEI #: CEC3P4JE1167 SAM #:

Award number & name:

Award date: monthly in quarter

Award amount: 341,666.70 Award type: Direct payment

Award payment method (reimbursable or lump sum payment(s)):

Primary place of performance:

Period of performance - Start date: End date: thru quarter

Loan expiration date (expected to be paid in full):

Quarterly obligation amount: \$0

Quarterly expenditure amount: \$0

Activity general description: rent

Demographic Information (if applicable):

Number of New (Unduplicated) Households Served This Period __141__

Male _92__ Female __49_ Elderly (>62 Y.O.) _18__ Disabled _68__

__10__ White __1__ Native Hawaiian/Other Pacific Islander
__2__ American Indian/Alaskan Native __2__ Hispanic, Latino, Spanish
__0__ Asian __1__ Other Multi-Racial
__7__ African American

V. Project Benchmark Reporting – Please provide the following information in each report (50 – 250 words)

- Does this project include a capital expenditure and type of capital expenditure?
- Total expected capital expenditure, including pre-development costs, if applicable.
- Brief description of structure and objectives of assistance program(s), including public health or negative economic impact experienced.
- Brief description of how a recipient's response is related and reasonably proportional to a public health or negative economic impact of COVID-19.
- The dollar amount of the total project spending that is allocated towards evidence-based interventions
- Indicate if a program evaluation of the project is being conducted

This project does not include capital expenditure this quarter. The population that this program serves is the homeless population in Manchester. They are struggling with public health issues related to poverty and housing instability including mental health, physical disabilities, and substance abuse issues. This population is impacted disproportionately by the pandemic due to not having access to health care, testing, and prevention...as well as living conditions where prevention is not possible. All of the interventions provided by the department are evidenced based in best practice public health models that serve the homeless population. **All funds are spent on evidence-based practices. The program is evaluated regularly by data management and reporting to measure quality of service and outcomes.**

This quarter, the population was provided with essential services such as food, hygiene kits, and wound care supplies to meet their immediate needs. The engagement center and shelter played a pivotal role in connecting individuals to a wide range of programs aimed at long-term stability. These programs included access to Medication-Assisted Treatment (MAT) for those in recovery, housing assistance programs, job placement and training opportunities, and various recovery services. Additionally, individuals were supported in applying for state financial recovery programs, such as Supplemental Nutrition Assistance Program (SNAP), ensuring they had access to both healthcare and basic necessities for their ongoing recovery and well-being.

- ATTACHMENT F -
CITY OF MANCHESTER, NH
COMMUNITY IMPROVEMENT PROGRAM
AMERICAN RESCUE PLAN ACT

QUARTERLY REPORTING INFORMATION

Project Number: 610725

Project Name: Winter Warming Station (EC 2.18)

Agency Name: Office of the Mayor

Prepared By: Irina Owens, Owen Westover

Contact Info: 603-792-3859

Reporting Period: October 1, 2024 – December 31, 2024

I. Project Obligation and Expenditures

OBLIGATION		EXPENDITURE	
Total Project Obligation:	\$ 150,000.00	Total Project Expenditure:	\$ 55,000
Previous Quarter Obligation:	\$ 0.00	Previous Quarter Expenditure:	\$ 0.00
Current Quarter Obligation:	\$ 150,000.00	Current Quarter Expenditure:	\$ 55,000

❖ **Subawards of \$50,000 Or more** – If your project contained any contract/grant/loan/transfer/or direct payment to an individual, business or agency, please fill out the additional information on Section IV.

II. Project Status

___ Not Started X Completed less than 50% ___ Completed 50% or more ___ Completed

III. Project Service Area/Demographic Distribution - What Impacted and/or Disproportionally Impacted population does this project primarily serve? Please select the population primarily served. If this project primarily serves more than one Impacted and/or Disproportionately Impacted population, please select up to two additional populations served

	Impacted		Disproportionately Impacted
	General Public		
	Low- or-moderate income households or populations (see chart below)		Low-income households and populations (see chart below)
	Households that experienced unemployment	X	Households and populations residing in Qualified Census Tracts*
X	Households that experienced increased food or housing insecurity		Households that qualify for certain federal programs ²
	Households that qualify for certain federal programs ¹		Households residing in the U.S. territories or receiving services from these governments
	For services to address lost instructional time in K-12 schools: any		Other households or populations that experienced a disproportionate negative

	students that lost access to in-person instruction for a significant period of time		economic impact of the pandemic other than those listed above (specify in section V.)
	Other households or populations that experienced a negative economic impact of the pandemic other than those listed above (specify in section V.)		

Income Limits by Household Size – Manchester, NH – 2022

Household Size	1 Person	2	3	4	5	6	7	8
Low Income	\$25,040	\$32,227	\$40,626	\$49,025	\$57,424	\$65,823	\$74,222	\$82,621
Moderate Income	\$40,690	\$52,260	\$65,880	\$79,500	\$93,120	\$106,740	\$120,360	\$133,980

¹ For Impacted households, these programs are Children’s Health Insurance Program (“CHIP”); Childcare Subsidies through the Child Care and Development Fund (“CCDF”) Program; Medicaid; National Housing Trust Fund (“HTF”), for affordable housing programs only; Home Investment Partnerships Program (“HOME”), for affordable housing programs only.

² For Disproportionately Impacted households, these programs are Temporary Assistance for Needy Families (“TANF”), Supplemental Nutrition Assistance Program (“SNAP”), Free- and Reduced-Price Lunch (“NSLP”) and/or School Breakfast (“SBP”) programs, Medicare Part D Low-Income Subsidies, Supplemental Security Income (“SSI”), Head Start, Special Supplemental Nutrition Program for Women, Infants, and Children (“WIC”), Section 8 Vouchers, Low-Income Home Energy Assistance Program (“LIHEAP”), and Pell Grants.

**See Map of Qualified Census Tract on Attachment G*

IV. Subawards of \$50,000 Or more – If your project contained any contract / grant / loan / transfer / or direct payment to an individual, business or agency greater than or equal to \$50,000, please provide the following information for each recipient

Agency/Business/Individual Legal Name:

Address:

UEI #:

SAM #:

Award number & name:

Award date:

Award amount:

Award type: Direct payment

Award payment method (reimbursable or lump sum payment(s)):

Primary place of performance:

Period of performance - Start date:

End date:

Loan expiration date (expected to be paid in full):

Quarterly obligation amount: \$

Quarterly expenditure amount: \$

Activity general description:

Demographic Information (if applicable):

Number of New (Unduplicated) Households Served This Period __141__

Male __92__ Female __49__ Elderly (>62 Y.O.) __18__ Disabled __68__

__10__ White	__1__ Native Hawaiian/Other Pacific Islander
__2__ American Indian/Alaskan Native	__2__ Hispanic, Latino, Spanish
__0__ Asian	__1__ Other Multi-Racial
__7__ African American	

V. Project Benchmark Reporting – Please provide the following information in each report (50 – 250 words)

- Does this project include a capital expenditure and type of capital expenditure?
- Total expected capital expenditure, including pre-development costs, if applicable.
- Brief description of structure and objectives of assistance program(s), including public health or negative economic impact experienced.
- Brief description of how a recipient’s response is related and reasonably proportional to a public health or negative economic impact of COVID-19.
- The dollar amount of the total project spending that is allocated towards evidence-based interventions
- Indicate if a program evaluation of the project is being conducted

-ATTACHMENT H-

**CITY OF MANCHESTER, NH
COMMUNITY IMPROVEMENT PROGRAM
AMERICAN RESCUE PLAN ACT
QUARTERLY REPORTING INFORMATION**

Project Number: 611124 Project Name: Brook Street Shelter Operations

Agency Name: Light of Life

Prepared By: Kristie McKenney

Contact Info: kristie@lightoflifenh.org

Reporting Period: October – December 2024

I. Project Obligation and Expenditures

OBLIGATION		EXPENDITURE	
Total Project Obligation:	\$664,517.00	Total Project Expenditure:	\$485,349.83
Previous Quarter Obligation:	\$0.00	Previous Quarter Expenditure:	\$170,684.41
Current Quarter Obligation:	\$0.00	Current Quarter Expenditure:	\$106,259.00

❖ **Subawards of \$50,000 Or more** – If your project contained any contract/grant/loan/transfer/or direct payment to an individual, business or agency, please fill out the additional information on Section IV.

II. Project Status

☐ Not Started ☐ Completed less than 50% X ☐ ☒ Completed 50% or more ☐ Completed

III. Project Service Area/Demographic Distribution - identify whether or not the project is serving an economically disadvantaged community

- ☐ -- x ☐ Program or service is provided at a physical location in a Qualified Census Tract* Primary intended beneficiaries live within a Qualified Census Tract*
- ☐ Not applicable to this Project

**See Map of Qualified Census Tracts on Subrecipient Agreement Attachment G.*

QUARTERLY REPORTING INFORMATION

IV. Subawards of \$50,000 Or more – If your project contained any contract / grant / loan / transfer / or direct payment to an individual, business or agency greater than or equal to \$50,000, please provide the following information for each recipient

Agency/Business/Individual Legal Name:

Address:

DUNS #: SAM

Award number & name:

Award date:

Award amount: Award type:

Award payment method (reimbursable or lump sum payment(s):

Primary place of performance:

Period of performance - Start date: End date: Loan expiration

date (expected to be paid in full):

Quarterly obligation amount: \$

Quarterly expenditure amount: \$

Activity general description:

Demographic Information (if applicable):

Number of New (Unduplicated) Beneficiaries Served This Period 22

Male 3 Female 45 Elderly (>62 Y.O.) 1 Disabled

43 White

American Indian/Alaskan Native

Asian

6 African American

Native Hawaiian/Other Pacific Islander

Hispanic, Latino, Spanish

Other Multi-Racial

49 <40% AMI

≥40%-65% AMI

<185% FPL%

≥185%-300% FPL

Additional performance indicators for corresponding Project as described in Section 2.

QUARTERLY REPORTING INFORMATION

V. Project Benchmark Reporting – Please provide the following information in each report (250-word limit)

CIP #611124 – Brook Street Shelter Operations (EC 2.18)

- Brief description of activities/progress made during this quarter.
 - During this quarter we continued our operations of Beacon on Brook Street Shelter for women and children. We are at capacity every single day. At capacity means we have all 16 beds full. We are working with all the women who come to the Beacon on housing options, stabilization and supportive services. We continue to be encouraged by the victories we are already seeing in some of the women we serve. We are also excited that we don't have a lot of turnover. This indicates to us that the women feel safe and don't want to jeopardize their housing situation. With that said, we have high expectations of our clients in that they are not to just remain stagnant, but are to be working regularly with a case manager on successfully moving on. We strongly believe and can see that it is all about relationships.
- Does this project include a capital expenditure and type of capital expenditure?
 - No
- Total expected capital expenditure, including pre-development costs, if applicable.
 - N/A
- Brief description of structure and objectives of assistance program(s), including public health or negative economic impact experienced.
 - N/A
- Brief description of how a recipient's response is related and reasonably proportional to a public health or negative economic impact of COVID-19.
 - Due to COVID-19, there are increased numbers of individuals experiencing homelessness.
- The dollar amount of the total project spending that is allocated towards evidence-based interventions.
 - This has not been calculated, however, Beacon on Brook shelter is a housing first model shelter which does have evidence of being more successful than others in terms of assisting individuals to move to permanent housing.
- Indicate if a program evaluation of the project is being conducted.
 - We are tracking this project through the HMIS system. Furthermore, we are working with the organization who operates the data system on adding our own tracking features. We would like to track the effectiveness of the different opportunities we are offering women at the shelter and at the walk-in support center. I anticipate having some of that information next quarter.

- ATTACHMENT F -
CITY OF MANCHESTER, NH
COMMUNITY IMPROVEMENT PROGRAM
AMERICAN RESCUE PLAN ACT

QUARTERLY REPORTING INFORMATION

Project Number: 611224

Project Name: *Planning Department Affordable Housing Trust Fund (EC 3.10)*

Agency Name: *Manchester Housing and Redevelopment Authority*

Prepared By: *Nicole Hudson* Contact Info: *nudson@manchesterhousing.org*

Reporting Period: *September 1, 2024 – November 3, 2024* Due: *January 16, 2024*

I. Project Invoices and Expenditures

INVOICE DATE	INVOICE AMOUNT
September 2024	\$30,621.00
October 2024	\$25,478.00
November 2024	\$4,650.00

QUARTER TOTAL

\$ 60,749.00

❖ **Subawards of \$50,000 or more** – If your project contained any contract/grant/loan/transfer/or direct payment to an individual, business or agency, please fill out the additional information on Section IV.

II. Project Status

☐ Not Started ☐ Completed less than 50% ☒ Completed 50% or more ☐ Completed

III. Project Service Area/Demographic Distribution - What Impacted and/or Disproportionally Impacted population does this project primarily serve? Please select the population primarily served. If this project primarily serves more than one Impacted and/or Disproportionately Impacted population, please select up to two additional populations served

	Impacted	Disproportionately Impacted
X	General Public	
X	Low- or-moderate income households or populations (see chart below)	Low-income households and populations (see chart below)
X	Households that experienced unemployment	Households and populations residing in Qualified Census Tracts*
	Households that experienced increased food or housing insecurity	Households that qualify for certain federal programs ²
	Households that qualify for certain federal programs ¹	Households residing in the U.S. territories or receiving services from these governments
	For services to address lost instructional time in K-12 schools: any students that lost access to in-person instruction for a significant period of time	Other households or populations that experienced a disproportionate negative economic impact of the pandemic other than those listed above (specify in section V.)
	Other households or populations that experienced a negative economic impact of the pandemic other than those listed above (specify in section V.)	

Income Limits by Household Size – Manchester, NH – 2022

Household Size	1 Person	2	3	4	5	6	7	8
Low Income	\$25,040	\$32,227	\$40,626	\$49,025	\$57,424	\$65,823	\$74,222	\$82,621
Moderate Income	\$40,690	\$52,260	\$65,880	\$79,500	\$93,120	\$106,740	\$120,360	\$133,980

¹ For Impacted households, these programs are Children’s Health Insurance Program (“CHIP”); Childcare Subsidies through the Child Care and Development Fund (“CCDF”) Program; Medicaid; National Housing Trust Fund (“HTF”), for affordable housing programs only; Home Investment Partnerships Program (“HOME”), for affordable housing programs only.

² For Disproportionately Impacted households, these programs are Temporary Assistance for Needy Families (“TANF”), Supplemental Nutrition Assistance Program (“SNAP”), Free- and Reduced-Price Lunch (“NSLP”) and/or School Breakfast (“SBP”) programs, Medicare Part D Low-Income Subsidies, Supplemental Security Income (“SSI”), Head Start, Special Supplemental Nutrition Program for Women, Infants, and Children (“WIC”), Section 8 Vouchers, Low-Income Home Energy Assistance Program (“LIHEAP”), and Pell Grants.

**See Map of Qualified Census Tract on Attachment G*

IV. Subawards of \$50,000 Or more – If your project contained any contract / grant / loan / transfer / or direct payment to an individual, business or agency greater than or equal to \$50,000, please provide the following information for each recipient

Agency/Business/Individual Legal Name:

Address:

UEI #:

SAM #:

Award number & name:

Award date:

Award amount: \$

Award type:

Award payment method (reimbursable or lump sum payment(s)):

Primary place of performance:

Period of performance - Start date:

End date:

Loan expiration date (expected to be paid in full):

Quarterly obligation amount: \$

Quarterly expenditure amount: \$

Activity general description:

Demographic Information (if applicable):

Number of New (Unduplicated) Households Served This Period 23

Male 22 Female 28 Elderly (>62 Y.O.) 1 Disabled 14

<u>44</u> White	<u>0</u> Native Hawaiian/Other Pacific Islander
<u>0</u> American Indian/Alaskan Native	<u>12</u> Hispanic, Latino, Spanish
<u>1</u> Asian	<u>0</u> Other Multi-Racial
<u>6</u> African American	

V. Project Benchmark Reporting – Please provide the following information in each report (50 – 250 words)

- **Brief description of structure and objectives of assistance program(s), including public health or negative economic impact experienced** - The Housing Applicant/Landlord Partnership Program, funded via the Affordable Housing Trust Fund, from the City of Manchester has enabled Manchester Housing and Redevelopment Authority (MHRA) to place program applicants/participants into units in the city which would otherwise not be available to them. As an example, MHRA has been able to assist with unit repair reimbursement for units that initially failed the Housing Quality Standards inspection as required by HUD. This enabled families to keep their search time to a minimum and their vouchers from expiring before they found a unit/landlord who would approve their tenancy.
- **Number of new affordable housing units added to the City's inventory** – 0 units are privately owned
- **Number of units added to the Housing Choice Voucher Program** – 23 units added to the program
- **Number of housing units rehabbed during this quarter** – 1 units rehabbed (received HQS repair funds)
- **Number of households that received rental/mortgage assistance during this quarter** – 23 Households

QUARTERLY REPORTING INFORMATION

Project Number: 712522

Project Name: Clean Water State Revolving Fund Projects (EC 5.6)

Agency Name: Public Works - HWY

Prepared By: Caleb Dobbins

Contact Info: cdobbins@manchesternh.gov

Reporting Period: October 1, 2024 – December 31, 2024

I. Project Obligation and Expenditures

OBLIGATION		EXPENDITURE	
Total Project Obligation:	\$3,980,000.00	Total Project Expenditure:	\$1,229,575.16
Previous Quarter Obligation:	\$0.00	Previous Quarter Expenditure:	\$ 14,068.43
Current Quarter Obligation:	\$0.00	Current Quarter Expenditure:	\$ 425,320.30

II. Project Status

☐ Not Started ☒ Completed less than 50% ☐ Completed 50% or more ☐ Completed

III. Programmatic Data

- Projected/actual construction start date (month/year): **1/2023**
- Projected/actual initiation of operations date (month/year): **12/2023**
- National Pollutant Discharge Elimination System (NPDES) Permit Number (if applicable; for projects aligned with the Clean Water State Revolving Fund): **NH0100447**
- Public Water System (PWS) ID number (if applicable; for projects aligned with the Drinking Water State Revolving Fund): **N/A**
- Location Type i.e. Address, Address range, Road segment, or Latitude/Longitude (WGS84 or NAD83): **Project locations not yet determined. Possible locations range throughout the City.**
- Location Detail: **Project locations not yet determined.**
- Median household Income using the Census website and the American Community Survey 5 yr estimate: **\$62,087**
- Lowest Quintile Income of the Service Area (at or below 40% AMI from the HUD website or at or below 185% of Federal Poverty Guidelines from the HHS website): **\$43,920**

IV. Project Benchmark Reporting – Please provide the following information in each report (50 – 250 words)

- Does this project include a capital expenditure and type of capital expenditure? Include any cost-effective measures taken.
- Total expected capital expenditure, including pre-development costs, if applicable
- Note how project contributes to addressing climate change and/or how projects benefit disadvantaged communities in line with the Justice40 Initiative.

This project will include numerous capital expenditures once design is complete. The design is progressing and initial estimates and designs are occurring after the preliminary evaluations.

The total cost of expected capital expenditures is expected to be approximately \$3.5M on infrastructure and \$0.5M on design, but as designs are not yet complete, this number is only a rough approximation.

This project helps to address climate change and benefits disadvantaged communities in line with the Justice40 initiative by increasing capacity of the stormwater systems throughout the City reducing flooding and damage to roadways and properties from the increased intensity of storms. These adjustments/changes are focused primarily in the older sections of the city where there is a lower median income and a higher percentage of disadvantaged people.

Current Completed Projects

Dunbarton Road Culvert Repair

Marjam Culvert Repair

Catch basin replacement @ 575 Calef Road

Queen City Ave/Riverwalk Drainage Repairs

Quarterly Progress- CY 2024 Q4

The design consultant Environmental Partners (EP) continues to submit plans for review for multiple locations throughout the city. GMI Asphalt has begun work on first bid project. Sections addressed include work on Dunbarton Rd/Straw Rd and President Ave.

- ATTACHMENT F -
CITY OF MANCHESTER, NH
COMMUNITY IMPROVEMENT PROGRAM
AMERICAN RESCUE PLAN ACT

QUARTERLY REPORTING INFORMATION

Project Number: 810324

Project Name: Homelessness Initiatives Coordinator (EC 2.16)

Agency Name: Office of the Mayor

Prepared By: Owen Westover

Contact Info: 603-792-3898

Reporting Period: October 1, 2024 – December 31, 2024

I. Project Obligation and Expenditures

OBLIGATION		EXPENDITURE	
Total Project Obligation:	\$ 300,000.00	Total Project Expenditure:	\$ 111,642.72
Previous Quarter Obligation:	\$ 200,000.00	Previous Quarter Expenditure:	\$ 19,361.57
Current Quarter Obligation:	\$ 0.00	Current Quarter Expenditure:	\$ 22,440.01

❖ **Subawards of \$50,000 Or more** – If your project contained any contract/grant/loan/transfer/or direct payment to an individual, business or agency, please fill out the additional information on Section IV.

II. Project Status

___ Not Started x Completed less than 50% ___ Completed 50% or more ___ Completed

III. Project Service Area/Demographic Distribution - What Impacted and/or Disproportionally Impacted population does this project primarily serve? Please select the population primarily served. If this project primarily serves more than one Impacted and/or Disproportionately Impacted population, please select up to two additional populations served

	Impacted		Disproportionately Impacted
	General Public		
	Low- or-moderate income households or populations (see chart below)		Low-income households and populations (see chart below)

	Households that experienced unemployment	X	Households and populations residing in Qualified Census Tracts*
X	Households that experienced increased food or housing insecurity		Households that qualify for certain federal programs ²
	Households that qualify for certain federal programs ¹		Households residing in the U.S. territories or receiving services from these governments
	For services to address lost instructional time in K-12 schools: any students that lost access to in-person instruction for a significant period of time		Other households or populations that experienced a disproportionate negative economic impact of the pandemic other than those listed above (specify in section V.)
	Other households or populations that experienced a negative economic impact of the pandemic other than those listed above (specify in section V.)		

Income Limits by Household Size – Manchester, NH – 2024

<i>Household Size</i>	<i>1 Person</i>	<i>2</i>	<i>3</i>	<i>4</i>	<i>5</i>	<i>6</i>	<i>7</i>	<i>8</i>
<i>Low Income</i>	<i>\$40,050</i>	<i>\$45,800</i>	<i>\$51,500</i>	<i>\$57,200</i>	<i>\$61,800</i>	<i>\$66,400</i>	<i>\$70,950</i>	<i>\$75,550</i>
<i>Moderate Income</i>	<i>\$64,050</i>	<i>\$73,200</i>	<i>\$82,350</i>	<i>\$91,500</i>	<i>\$98,850</i>	<i>\$106,150</i>	<i>\$113,500</i>	<i>\$120,800</i>

¹ For Impacted households, these programs are Children’s Health Insurance Program (“CHIP”); Childcare Subsidies through the Child Care and Development Fund (“CCDF”) Program; Medicaid; National Housing Trust Fund (“HTF”), for affordable housing programs only; Home Investment Partnerships Program (“HOME”), for affordable housing programs only.

² For Disproportionately Impacted households, these programs are Temporary Assistance for Needy Families (“TANF”), Supplemental Nutrition Assistance Program (“SNAP”), Free- and Reduced-Price Lunch (“NSLP”) and/or School Breakfast (“SBP”) programs, Medicare Part D Low-Income Subsidies, Supplemental Security Income (“SSI”), Head Start, Special Supplemental Nutrition Program for Women, Infants, and Children (“WIC”), Section 8 Vouchers, Low-Income Home Energy Assistance Program (“LIHEAP”), and Pell Grants.

**See Map of Qualified Census Tract on Attachment G*

IV. Subawards of \$50,000 Or more – If your project contained any contract / grant / loan / transfer / or direct payment to an individual, business or agency greater than or equal to \$50,000, please provide the following information for each recipient

Agency/Business/Individual Legal Name:

Address:

UEI #:

SAM #:

Award number & name:

Award date:

Award amount:

Award type: Direct payment

Award payment method (reimbursable or lump sum payment(s)):

Primary place of performance:

Period of performance - Start date: End date:

Loan expiration date (expected to be paid in full):

Quarterly obligation amount: \$

Quarterly expenditure amount: \$

Activity general description:

Demographic Information (if applicable):

Number of New (Unduplicated) Households Served This Period _____

Male ___ Female ___ Transgendered ___ Elderly (>62 Y.O.) ___ Disabled ___

___ White ___ Native Hawaiian/Other Pacific Islander

___ American Indian/Alaskan Native ___ Hispanic, Latino, Spanish

___ Asian ___ Other Multi-Racial

___ African American

V. Project Benchmark Reporting – Please provide the following information in each report (50 – 250 words)

- Number of FTEs hired under this authority.
- Brief description of structure and objectives of assistance program(s), including public health or negative economic impact experienced.
- Brief description of how a recipient's response is related and reasonably proportional to a public health or negative economic impact of COVID-19.
- The dollar amount of the total project spending that is allocated towards evidence-based interventions
- Indicate if a program evaluation of the project is being conducted

This project does not include capital expenditure this quarter. The population that this position serves is the homeless population in Manchester. They are struggling with public health issues related to poverty and housing instability including mental health, physical disabilities, and substance abuse issues. This population is impacted disproportionately by the pandemic due to not having access to health care, testing, and prevention...as well as living conditions where prevention is not possible. All of the interventions provided by the department are evidenced based in best practice public health models that serve the homeless population. **\$19,361.57 is spent on evidence-based practices. The program is**

evaluated regularly by data management and reporting to measure quality of service and outcomes.

- ATTACHMENT F -
CITY OF MANCHESTER, NH
COMMUNITY IMPROVEMENT PROGRAM
AMERICAN RESCUE PLAN ACT

QUARTERLY REPORTING INFORMATION

Project Number: 810722

Project Name: *Planning and Administrative Support (EC 7.1)*

Agency Name: *Manchester Planning & Community Development*

Prepared By: *Thomas Brescia*

Contact Info: *tbrescia@manchesternh.gov*

Reporting Period: *October 1, 2024 – December 31, 2024*

I. Project Obligation and Expenditures

OBLIGATION		EXPENDITURE	
Total Project Obligation:	\$ 850,262.38	Total Project Expenditure:	\$ 436,906.06
Previous Quarter Obligation:	\$ 0.00	Previous Quarter Expenditure:	\$ 30,640.85
Current Quarter Obligation:	\$ 0.00	Current Quarter Expenditure:	\$ 33,457.03

❖ **Subawards of \$50,000 Or more** – If your project contained any contract/grant/loan/transfer/or direct payment to an individual, business or agency, please fill out the additional information on Section IV.

II. Project Status

___ Not Started X Completed less than 50% ___ Completed 50% or more ___ Completed

III. Project Service Area/Demographic Distribution - What Impacted and/or Disproportionally Impacted population does this project primarily serve? Please select the population primarily served. If this project primarily serves more than one Impacted and/or Disproportionately Impacted population, please select up to two additional populations served

	Impacted		Disproportionately Impacted
X	General Public		
	Low- or-moderate income households or populations (see chart below)		Low-income households and populations (see chart below)
	Households that experienced unemployment	X	Households and populations residing in Qualified Census Tracts*
	Households that experienced increased food or housing insecurity		Households that qualify for certain federal programs ²

	Households that qualify for certain federal programs ¹		Households residing in the U.S. territories or receiving services from these governments
	For services to address lost instructional time in K-12 schools: any students that lost access to in-person instruction for a significant period of time	X	Other households or populations that experienced a disproportionate negative economic impact of the pandemic other than those listed above (specify in section V.)
	Other households or populations that experienced a negative economic impact of the pandemic other than those listed above (specify in section V.)		

Income Limits by Household Size – Manchester, NH – 2024

<i>Household Size</i>	<i>1 Person</i>	<i>2</i>	<i>3</i>	<i>4</i>	<i>5</i>	<i>6</i>	<i>7</i>	<i>8</i>
<i>Low Income</i>	\$40,050	\$45,800	\$51,500	\$57,200	\$61,800	\$66,400	\$70,950	\$75,550
<i>Moderate Income</i>	\$64,050	\$73,200	\$82,350	\$91,500	\$98,850	\$106,150	\$113,500	\$120,800

¹ For Impacted households, these programs are Children’s Health Insurance Program (“CHIP”); Childcare Subsidies through the Child Care and Development Fund (“CCDF”) Program; Medicaid; National Housing Trust Fund (“HTF”), for affordable housing programs only; Home Investment Partnerships Program (“HOME”), for affordable housing programs only.

² For Disproportionately Impacted households, these programs are Temporary Assistance for Needy Families (“TANF”), Supplemental Nutrition Assistance Program (“SNAP”), Free- and Reduced-Price Lunch (“NSLP”) and/or School Breakfast (“SBP”) programs, Medicare Part D Low-Income Subsidies, Supplemental Security Income (“SSI”), Head Start, Special Supplemental Nutrition Program for Women, Infants, and Children (“WIC”), Section 8 Vouchers, Low-Income Home Energy Assistance Program (“LIHEAP”), and Pell Grants.

****See Map of Qualified Census Tract on Attachment G***

IV. Subawards of \$50,000 Or more – If your project contained any contract / grant / loan / transfer / or direct payment to an individual, business or agency greater than or equal to \$50,000, please provide the following information for each recipient

Agency/Business/Individual Legal Name:

Address:

UEI #:

SAM #:

Award number & name:

Award date:

Award amount:

Award type:

- ATTACHMENT F -
CITY OF MANCHESTER, NH
COMMUNITY IMPROVEMENT PROGRAM
AMERICAN RESCUE PLAN ACT

QUARTERLY REPORTING INFORMATION

Project Number: 810724

Project Name: Part Time Planner (EC 3.5)

Agency Name: Manchester Planning & Community Development

Prepared By: Thomas Brescia

Contact Info: tbrescia@manchesternh.gov

Reporting Period: October 1, 2024 – December 31, 2024

I. Project Obligation and Expenditures

OBLIGATION		EXPENDITURE	
Total Project Obligation:	\$ 120,000.00	Total Project Expenditure:	\$ 50,078.62
Previous Quarter Obligation:	\$ 0.00	Previous Quarter Expenditure:	\$ 9,217.47
Current Quarter Obligation:	\$ 0.00	Current Quarter Expenditure:	\$ 9,967.89

❖ **Subawards of \$50,000 Or more** – If your project contained any contract/grant/loan/transfer/or direct payment to an individual, business or agency, please fill out the additional information on Section IV.

II. Project Status

___ Not Started X Completed less than 50% ___ Completed 50% or more ___ Completed

III. Project Service Area/Demographic Distribution - What Impacted and/or Disproportionally Impacted population does this project primarily serve? Please select the population primarily served. If this project primarily serves more than one Impacted and/or Disproportionately Impacted population, please select up to two additional populations served

	Impacted		Disproportionately Impacted
X	General Public		
	Low- or-moderate income households or populations (see chart below)		Low-income households and populations (see chart below)
	Households that experienced unemployment		Households and populations residing in Qualified Census Tracts*
	Households that experienced increased food or housing insecurity		Households that qualify for certain federal programs ²

	Households that qualify for certain federal programs ¹	Households residing in the U.S. territories or receiving services from these governments
	For services to address lost instructional time in K-12 schools: any students that lost access to in-person instruction for a significant period of time	Other households or populations that experienced a disproportionate negative economic impact of the pandemic other than those listed above (specify in section V.)
	Other households or populations that experienced a negative economic impact of the pandemic other than those listed above (specify in section V.)	

Income Limits by Household Size – Manchester, NH – 2024

<i>Household Size</i>	<i>1 Person</i>	<i>2</i>	<i>3</i>	<i>4</i>	<i>5</i>	<i>6</i>	<i>7</i>	<i>8</i>
<i>Low Income</i>	\$40,050	\$45,800	\$51,500	\$57,200	\$61,800	\$66,400	\$70,950	\$75,550
<i>Moderate Income</i>	\$64,050	\$73,200	\$82,350	\$91,500	\$98,850	\$106,150	\$113,500	\$120,800

¹ For Impacted households, these programs are Children’s Health Insurance Program (“CHIP”); Childcare Subsidies through the Child Care and Development Fund (“CCDF”) Program; Medicaid; National Housing Trust Fund (“HTF”), for affordable housing programs only; Home Investment Partnerships Program (“HOME”), for affordable housing programs only.

² For Disproportionately Impacted households, these programs are Temporary Assistance for Needy Families (“TANF”), Supplemental Nutrition Assistance Program (“SNAP”), Free- and Reduced-Price Lunch (“NSLP”) and/or School Breakfast (“SBP”) programs, Medicare Part D Low-Income Subsidies, Supplemental Security Income (“SSI”), Head Start, Special Supplemental Nutrition Program for Women, Infants, and Children (“WIC”), Section 8 Vouchers, Low-Income Home Energy Assistance Program (“LIHEAP”), and Pell Grants.

**See Map of Qualified Census Tract on Attachment G*

IV. Subawards of \$50,000 Or more – If your project contained any contract / grant / loan / transfer / or direct payment to an individual, business or agency greater than or equal to \$50,000, please provide the following information for each recipient

Agency/Business/Individual Legal Name:

Address:

UEI #:

SAM #:

Award number & name:

Award date:

Award amount:

Award type:

Award payment method (reimbursable or lump sum payment(s)):

Primary place of performance:

Period of performance - Start date: End date:

Loan expiration date (expected to be paid in full):

Quarterly obligation amount: \$

Quarterly expenditure amount: \$

Activity general description:

Demographic Information (if applicable):

Number of New (Unduplicated) Households Served This Period _____

Male _____ Female _____ Elderly (>62 Y.O.) _____ Disabled _____

_____ White	_____ Native Hawaiian/Other Pacific Islander
_____ American Indian/Alaskan Native	_____ Hispanic, Latino, Spanish
_____ Asian	_____ Other Multi-Racial
_____ African American	

V. Project Benchmark Reporting – Please provide the following information in each report (50 – 250 words)

- In order to assist other planning staff in long-range planning and modifications to the code of zoning ordinances – revisions prompted in part by community concerns surrounding homelessness and lack of affordable housing – ARPA funding was allocated to hire one Part Time Planner.
 - i. The aforementioned position is currently filled.
 - ii. There have been no staffing changes associated with this program this quarter.

- ATTACHMENT F -
CITY OF MANCHESTER, NH
COMMUNITY IMPROVEMENT PROGRAM
AMERICAN RESCUE PLAN ACT

QUARTERLY REPORTING INFORMATION

Project Number: 810822

Project Name: *Small Business Grants & Program Assistance (EC 2.29)*

Agency Name: *Manchester Planning & Community Development*

Prepared By: *Thomas Brescia*

Contact Info: *tbrescia@manchesternh.gov*

Reporting Period: *October 1, 2024 – December 31, 2024*

I. Project Obligation and Expenditures

OBLIGATION		EXPENDITURE	
Total Project Obligation:	\$ 2,000,000.00	Total Project Expenditure:	\$ 1,862,177.22
Previous Quarter Obligation:	\$ 0.00	Previous Quarter Expenditure:	\$ 98,814.58
Current Quarter Obligation:	\$ 0.00	Current Quarter Expenditure:	\$ 36,372.91

❖ **Subawards of \$50,000 Or more** – If your project contained any contract/grant/loan/transfer/or direct payment to an individual, business or agency, please fill out the additional information on Section IV.

II. Project Status

☐ Not Started ☐ Completed less than 50% ☒ Completed 50% or more ☐ Completed

III. Project Service Area/Demographic Distribution - What Impacted and/or Disproportionally Impacted population does this project primarily serve? Please select the population primarily served. If this project primarily serves more than one Impacted and/or Disproportionately Impacted population, please select up to two additional populations served

	Impacted		Disproportionately Impacted
☒	General Public		
	Low- or-moderate income households or populations (see chart below)		Low-income households and populations (see chart below)
	Households that experienced unemployment	☒	Households and populations residing in Qualified Census Tracts*
	Households that experienced increased food or housing insecurity		Households that qualify for certain federal programs ²

	Households that qualify for certain federal programs ¹		Households residing in the U.S. territories or receiving services from these governments
	For services to address lost instructional time in K-12 schools: any students that lost access to in-person instruction for a significant period of time	X	Other households or populations that experienced a disproportionate negative economic impact of the pandemic other than those listed above (specify in section V.)
	Other households or populations that experienced a negative economic impact of the pandemic other than those listed above (specify in section V.)		

Income Limits by Household Size – Manchester, NH – 2024

<i>Household Size</i>	<i>1 Person</i>	<i>2</i>	<i>3</i>	<i>4</i>	<i>5</i>	<i>6</i>	<i>7</i>	<i>8</i>
<i>Low Income</i>	\$40,050	\$45,800	\$51,500	\$57,200	\$61,800	\$66,400	\$70,950	\$75,550
<i>Moderate Income</i>	\$64,050	\$73,200	\$82,350	\$91,500	\$98,850	\$106,150	\$113,500	\$120,800

¹ For Impacted households, these programs are Children’s Health Insurance Program (“CHIP”); Childcare Subsidies through the Child Care and Development Fund (“CCDF”) Program; Medicaid; National Housing Trust Fund (“HTF”), for affordable housing programs only; Home Investment Partnerships Program (“HOME”), for affordable housing programs only.

² For Disproportionately Impacted households, these programs are Temporary Assistance for Needy Families (“TANF”), Supplemental Nutrition Assistance Program (“SNAP”), Free- and Reduced-Price Lunch (“NSLP”) and/or School Breakfast (“SBP”) programs, Medicare Part D Low-Income Subsidies, Supplemental Security Income (“SSI”), Head Start, Special Supplemental Nutrition Program for Women, Infants, and Children (“WIC”), Section 8 Vouchers, Low-Income Home Energy Assistance Program (“LIHEAP”), and Pell Grants.

**See Map of Qualified Census Tract on Attachment G*

IV. Subawards of \$50,000 Or more – If your project contained any contract / grant / loan / transfer / or direct payment to an individual, business or agency greater than or equal to \$50,000, please provide the following information for each recipient

Agency/Business/Individual Legal Name: Deo Mwano Consultancy

Address: 152 S. Mast St. Goffstown, NH 03045

UEI #: R6YLBH1PET3

SAM #:

Award number & name:

Award date: 1/1/2023

Award amount: \$181,500.00

Award type: Contract

Award payment method (reimbursable or lump sum payment(s)): Reimbursable

Primary place of performance: Manchester, NH

Period of performance - Start date: _____ End date: _____

Loan expiration date (expected to be paid in full): _____

Quarterly obligation amount: \$ _____

Quarterly expenditure amount: \$0.00

Activity general description: Screening applicants for the 360 Business Success program, collaborating with eligible applicants to create Scopes of Work and later Subrecipient Agreements.

Demographic Information (if applicable):

Number of New (Unduplicated) Households Served This Period _____

Male _____ Female _____ Elderly (>62 Y.O.) _____ Disabled _____

_____ White	_____ Native Hawaiian/Other Pacific Islander
_____ American Indian/Alaskan Native	_____ Hispanic, Latino, Spanish
_____ Asian	_____ Other Multi-Racial
_____ African American	

V. Project Benchmark Reporting – Please provide the following information in each report (50 – 250 words)

- The Small Business Grant & Program Assistance initiative continued to provide opportunities for small businesses (under \$2 million in revenue, fewer than 15 full-time employees) to seek reimbursement for previously sustained COVID-19 related losses. The following data was collected for this quarter:
 - i. **SBGPA Grants Awarded: 2**
 - 1. Presto Craft Kitchen
 - 2. FortCycle
 - ii. **Total SBGPA Grant Funding Awarded: \$20,000**
 - iii. **Women-Owned Businesses Awarded SBGPA Funding: 1**
 - iv. **Qualified Census Tract Businesses Awarded SBGPA Funding: 1**
 - v. **Approximate Number of Employees Impacted: 14**

- The 360 Business Success program was designed in consultation with Deo Mwano Consultancy with the aim in mind of providing recipients of the SBGPA initiative with additional funding and direction toward improving business practices and growing their capacity. As of this quarter, the following data reflects the progress of this program:

i. **Total 360 Business Success Programs Approved: 24**

1. Diz's Café
2. PR Bartending
3. Bravo Cleaning Services
4. USA Chicken & Biscuit
5. The Potato Concept
6. My Pilates Studio
7. Ash Street Inn
8. Dimensions in Dance
9. Nu Nails
10. To Share Brewing
11. El Rincon
12. B's Tacos
13. Afro Paris
14. Rally & Revive
15. Temple Food & Groceries
16. United Physical Therapy
17. Unchartered Tutoring
18. Art 3 Gallery
19. Everest Convenience Store
20. Delicious Balance
21. Mane Fetish
22. Stark Brewing
23. Jumpp Chiropractic
24. Studio 550 Art Center

ii. **Total Obligated Project Funding: \$219,218.87**

iii. **Total Project Invoices Paid: \$200,862.04**

- ATTACHMENT F -
CITY OF MANCHESTER, NH
COMMUNITY IMPROVEMENT PROGRAM
AMERICAN RESCUE PLAN ACT

QUARTERLY REPORTING INFORMATION

Project Number: 811022

Project Name: *Branding Strategy Modernization & Promotion (EC 2.11)*

Agency Name: *Manchester Economic Development Office*

Prepared By: Jodie Nazaka **Contact Info:** *jnazaka@manchesternh.gov*

Reporting Period: *October 1, 2024 – December 31, 2024*

I. Project Obligation and Expenditures

OBLIGATION		EXPENDITURE	
Total Project Obligation:	\$ 1,607,140.53	Total Project Expenditure:	\$ 474,229.86
Previous Quarter Obligation:	-\$ 315,000.00	Previous Quarter Expenditure:	\$ 41,394.41
Current Quarter Obligation:	-\$ 54,825.00	Current Quarter Expenditure:	\$ 156,910.53

❖ **Subawards of \$50,000 Or more** – If your project contained any contract/grant/loan/transfer/or direct payment to an individual, business or agency, please fill out the additional information on Section IV.

II. Project Status

___ Not Started X Completed less than 50% ___ Completed 50% or more ___ Completed

III. Project Service Area/Demographic Distribution - What Impacted and/or Disproportionally Impacted population does this project primarily serve? Please select the population primarily served. If this project primarily serves more than one Impacted and/or Disproportionately Impacted population, please select up to two additional populations served

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X	General Public		
	Low- or-moderate income households or populations (see chart below)		Low-income households and populations (see chart below)
	Households that experienced unemployment		Households and populations residing in Qualified Census Tracts*
	Households that experienced increased food or housing insecurity		Households that qualify for certain federal programs ²

	Households that qualify for certain federal programs ¹	Households residing in the U.S. territories or receiving services from these governments
	For services to address lost instructional time in K-12 schools: any students that lost access to in-person instruction for a significant period of time	Other households or populations that experienced a disproportionate negative economic impact of the pandemic other than those listed above (specify in section V.)
	Other households or populations that experienced a negative economic impact of the pandemic other than those listed above (specify in section V.)	

Income Limits by Household Size – Manchester, NH – 2022

<i>Household Size</i>	<i>1 Person</i>	<i>2</i>	<i>3</i>	<i>4</i>	<i>5</i>	<i>6</i>	<i>7</i>	<i>8</i>
<i>Low Income</i>	\$25,040	\$32,227	\$40,626	\$49,025	\$57,424	\$65,823	\$74,222	\$82,621
<i>Moderate Income</i>	\$40,690	\$52,260	\$65,880	\$79,500	\$93,120	\$106,740	\$120,360	\$133,980

¹ For Impacted households, these programs are Children’s Health Insurance Program (“CHIP”); Childcare Subsidies through the Child Care and Development Fund (“CCDF”) Program; Medicaid; National Housing Trust Fund (“HTF”), for affordable housing programs only; Home Investment Partnerships Program (“HOME”), for affordable housing programs only.

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**See Map of Qualified Census Tract on Attachment G*

IV. Subawards of \$50,000 Or more – If your project contained any contract / grant / loan / transfer / or direct payment to an individual, business or agency greater than or equal to \$50,000, please provide the following information for each recipient

Agency/Business/Individual Legal Name:

Address:

UEI #:

SAM #:

Award number & name:

Award date:

Award amount: \$

Award type:

Public Relations Program Implementation:

We produced and launched a video series focused on Live, Work, Play in Manchester. The mayor was featured on Fox Business Varney and Co. in November 2024 for the City's Hot Housing Market

Social Media Launch:

We launched OnlyinManchesterNH with a huge success. The first round focusing on some of our most beloved downtown businesses. We'll then venture out into the rest of the city for round two in 2025. We gained more than 3,000 followers in Q4 and growing.

Destination Marketing Website Development:

Work continued on the development of a new destination marketing website for Manchester. This site will further enhance the city's digital presence, serving as a hub for visitors, businesses, and stakeholders to access information about the city's offerings.

We're crafting a digital experience that invites you to explore everything we have to offer. Manchester is a place where tradition and innovation meet.

Soon, you'll have a new way to discover it all. From dining options, things to do, events, outdoor activities, lodging and accommodations, event planning and unlike a typical city website, a destination marketing website centers around promoting a specific place rather than a product or service.

The site will have Compelling visuals, Informative content with Detailed information about local attractions, events, accommodation options, transportation, and things to do.

The website is designed to be easy to navigate and allow visitors to find relevant information quickly. And will feature Interactive features which will include interactive maps, virtual tours, and user-generated content to enhance engagement

Overall, Q4 saw significant strides in branding, public relations, social media, and event planning, all of which are helping to position Manchester for continued growth and success in the months ahead.

Ryan J. Cashin
Chief of Department



Assistant Chiefs:
Matthew A.K. Lamothe
David Flurey
Joshua Guay

City of Manchester *Fire Department*

TO: Alderman Morgan, CIP Chair
FROM: Chief Ryan Cashin
DATE: February 19, 2025
RE: Fire Department Vehicle Donation

RL

I am writing to you today to request permission to donate an older fire department SUV to Hope for NH Recovery. This donation will help support the Hope Connections program; a program that the BMA just invested \$201,000 to enhance recovery efforts in the City.

Thank you for your attention to this matter.