

COMMITTEE ON COMMUNITY IMPROVEMENT

April 1, 2025 at 5:30 PM

Chairman Morgan called the meeting to order.

The Clerk called the roll.

Present: Aldermen Morgan, Kantor, Long, Burkush

Absent: Alderman Terrio

Messrs.: A. Thomas, Mayor Ruais, R. Cashin

1. Amending Resolution and Budget Authorizations providing for the transfer and expenditure of funds in the amount of \$111,915 for CIP 211325 Overdose Prevention Funding.

Alderman Kantor stated I have questions on some of the statistics on overdoses and how you are collecting the data exactly.

Anna Thomas, Public Health Officer, responded we have actually spent several years fine-tuning this. Historically, AMR which is the service that the city contracts with for ambulance services, were the ones pulling this data originally. That started as early as 2015. That is how far back this has gone. In the last few years, what we have done is look at what calls are coming in to Police and Fire as well and at the end of each month we put all of that data together and try to clean it so we have real numbers if you will. Let me just put a footnote in that that AMR has gone to great lengths to create criteria of who meets the definition of a suspected overdose or suspected overdose fatality. Keep in mind that these are only people who end up in the first responder system. There is a lot of community overdosing happening with people administering Narcan or others administering Narcan that never get counted in these numbers. This is an under representation of what is actually happening in the city.

Alderman Kantor stated I wanted to be clear on that because people are getting Narcan and they should be following-up at the hospital but if they don't, they are not counted in these numbers.

Ms. Thomas replied right and we also have another problem in that if somebody fatally overdoses or attempts to overdose and died by suicide, those are actually included in these numbers as well. If somebody overdoses multiple times like we had one individual overdose 20 times in a weekend, all 20 of those overdoses get counted in these numbers. These don't represent...the overall numbers are not individual human beings. They are just a collective number of events that we have. I will tell you that we are waiting for confirmation on this data but in March I think it will be the first month in I don't know how long because I tried to go back as far as I could that we did not have an overdose fatality in Manchester. That is a huge milestone because every month we have had fatalities and every month we have had overdoses. The progress that we have made in just a couple of years has been amazing. I want to credit the whole

community for getting around this and making this a priority as well as all of our city departments that are working together now.

Alderman Kantor stated I do know someone that passed away and the reason given was heart attack but really it was an overdose. How many of these numbers are because of drugs and other complications?

Ms. Thomas answered that is a very good question. All of these numbers that we get from AMR locally are suspected until confirmed because it can take months for the toxicology to come back in. We wait for the medical examiner reports and that gives you the confirmation of death and the cause of death whether it is opioid related or otherwise overdose related. They release those reports on a regular basis. The truest number is what they release but unfortunately there is a huge lag in getting those numbers which is why we always term these as suspected overdoses or yet to be confirmed. It takes a little bit of time.

Alderman Kantor stated regarding the Narcan, you have to learn how to administer right because it is medicine.

Ms. Thomas responded yes absolutely you should.

Alderman Kantor asked when people are handing Narcan out like the non-profits, who specifically is handing it out.

Ms. Thomas replied it is a range of people. It is fairly easy to use if we are just doing a nasal spray. Any of the individuals who are distributing them, any of the outreach teams, many of the clients they are working with already know how to use it or have used it themselves on other people but that is part of the education. When they are going out, they are talking to people. The whole idea is to save lives so they are trying to first and foremost build a relationship with them and that trust. Ultimately, what we want to do is pivot away from stopping the bleed kind of thought which is where we have been spending two years plus of our time. That is why in this iteration we want to get away from that scope of work and focus more upstream to treatment and recovery and use those outreach workers who have established trust in the community for that purpose to make those referrals.

Alderman Kantor stated to me we are just continuing to enable people and then they are one step farther away from getting help and one step closer to truly overdosing.

Ms. Thomas stated we are pleased with all of the progress we have made and I think at this point it makes a lot of sense to kind of get away from the harm reduction techniques with IV drug use that we used previously. There are other entities doing that work now. We didn't have that in the beginning but that has stabilized. We see as a Health Department that it is time to pivot out of that work and focus more upstream on the treatment and recovery aspects of this.

Alderman Kantor asked so are you saying no more needles.

Ms. Thomas answered no more needles.

Alderman Kantor stated that is important because it really creates situations where other kids can pick them up.

Ms. Thomas replied let me caution you. You know that you all passed an ordinance to allow the Health Department to go in and provide some oversight on these programs and enforcement if necessary. Our department is empowered to do that. We are now spending more time working with these programs. There will potentially be three. We don't know as we are still waiting for information from DHHS. They are going to need regular visits and we want to make sure they are compliant with what the ordinance says. I just caution you that even though the Health Department and the one person we have that has been a partner in this work is coming out of the formula, it doesn't eliminate it from the community. I don't think we are going to totally abandon this plague that we have of needles on the streets. I think it will decrease. I think there will be some oversight and that is the goal with the ordinance but unfortunately they are going to continue to operate and I think we are going to do the best we can to control whatever we can and enforce but we are going to have to keep monitoring that and report back to you. Summer is coming and that is the time we see needles in the streets. The snow covers up a lot. We certainly don't want them in our recreational areas and right-of-ways. We will see how this summer goes.

Alderman Kantor stated yes because kids need to be safe and able to play.

Ms. Thomas responded I couldn't agree with you more.

Alderman Long asked do you think it would be an advantage to the City of Manchester to have needle lock boxes.

Ms. Thomas replied that is an interesting question. I know out on the seacoast they have tried this and it has been successful for them. It is the same thing. It has to be well-monitored and somebody has to go and clean them out. Maybe in certain areas if we wanted to test it...my recommendation would be just to pilot it somewhere if you thought it could be beneficial. I think where we are seeing a lot of the needles know, I don't know if that is going to change the behavior of just discarding them everywhere in the city and whether people will be motivated enough to use the receptacle. It is certainly worth a shot; anything that would help. I just don't want the optics of it to be that we are a needle friendly community and put receptacles everywhere.

Alderman Long stated I was thinking about putting one in the park.

Ms. Thomas stated I will tell you that Queen City Exchange, which has been the largest syringe service program in the city, has gone to great lengths to try to be part of the solution even though they are still doing the harm reduction work. They put boxes in various locations like 39 Beech and they take on the cost of maintaining those boxes. I will tell you that we have a stericycle contract for the needles that we generate in our clinics. We are not doing needled exchange at the Health Department. This is just from when we are doing immunizations and such. Our contract every month is about \$300 just to maintain and dispose of those needles properly. This organization has taken it upon themselves to go and do that outreach. They have offered it to all of the shelter

environments. They will put the boxes up and maintain them. You will see in the syringe service numbers that they are actually bring in more numbers than they are disseminating because they are starting to collect in areas that they are not even disseminating needles to. I think that is a win and a credit to all of you really pushing that standard in the community and setting the expectation that you don't want these needles all over the city.

*On motion of **Alderman Burkush**, duly seconded by **Alderman Long**, it was voted to approve.*

2. Amending Resolution and Budget Authorization providing for the acceptance and expenditure of funds in the amount of \$480,000 for CIP 511322 Recreation Programming.

*On motion of **Alderman Long**, duly seconded by **Alderman Burkush** it was voted to approve.*

3. Amending Resolution and Budget Authorizations providing for the transfer and expenditure of funds in the amount of \$3,700 for CIP 610424 Dilapidated Buildings.

*On motion of **Alderman Long**, duly seconded by **Alderman Burkush**, it was voted to approve.*

4. Amending Resolution and Budget Authorization providing for the acceptance and expenditure of funds in the amount of \$100,000 for CIP 610425 351 Chestnut Street InvestNH Demolition Grant.

*On motion of **Alderman Long**, duly seconded by **Alderman Burkush**, it was voted to approve.*

5. Amending Resolution and Budget Authorization providing for the acceptance and expenditure of funds in the amount of \$500,000 for CIP C160060025 State of NH 39 Beech Street Shelter Operations.

Alderman Kantor stated I want to know if there are expectations on this money.

Mayor Ruais stated in the contract that was passed last week by the NH Executive Council and that was in the agenda packet materials, it outlines the expectations from the state for the city. The expectations are that effectively over the next five months we continue operations at the current status at the shelter.

Alderman Kantor asked as is.

Mayor Ruais answered yes.

Alderman Long moved to approve. **Alderman Burkush** duly seconded the motion. Chairman Morgan called for a vote. The motion carried with Alderman Kantor being duly recorded in opposition.

6. Amending Resolution and Budget Authorization providing for the acceptance and expenditure of funds in the amount of \$1,642,325 for CIP C410020025 Homeless Healthcare.

Alderman Kantor stated I have a question about the homeless description. Is it anyone?

Ms. Thomas responded that is a very good question. The definition of homelessness varies depending on which branch of government you speak to. HUD has a definition and the Department of Education has a definition and the Healthcare for the Homeless and Health & Human Services definition of homelessness can include people who are at risk for homelessness as well as experiencing homelessness. So if you are on the verge of experiencing homelessness, you can be seen through that mechanism. I will give you a small example. At any time, we have 600+ children during a school year experiencing displacement or homelessness. They might couch surf for a couple of days or they are homeless for a couple of days in the year. They get counted as a homeless number with the Department of Education but under Healthcare for the Homeless we can actually see them for primary healthcare because they are at risk for homelessness. They may end up in a stable environment again but because they have had some instability in the year, we can see them at Healthcare for the Homeless.

Alderman Kantor asked how do they know how to contact you.

Ms. Thomas answered Healthcare for the Homeless does a lot of outreach. In fact, one of the outreach workers on our Rapid Response Team is an employee of Healthcare for the Homeless and that is where we have recruited a lot of the staff who comprise the Rapid Response Team; from our partner organizations. They put out flyers in multiple languages. The outreach workers are out in the street all of the time. So you have two fixed facilities with Healthcare for the Homeless. One is right next to Hope for NH Recovery and the other is in the basement of 199 Manchester Street. Then you have the street medicine van, which is basically a primary healthcare clinic on wheels. That will go to 39 Beech and places like that. That is what is nice about having that because you can literally bring that to different parts of the community. We bring the services to some of these locations that otherwise wouldn't be able to get their clients to us.

Alderman Kantor stated the other thing is illegal immigrants.

Ms. Thomas responded we don't ask about citizenship as you know because we are a healthcare provider and by law we are not allowed to.

Alderman Kantor asked so anyone can walk in. How do you know they are really homeless then?

Ms. Thomas replied most of the individuals we see are referred to us by the existing entities. Since we are at 199 Manchester Street, a lot of the clients come right downstairs for example.

Alderman Kantor stated I was thinking if it was over in the emergency rooms. Is the money going to the emergency rooms?

Ms. Thomas responded no we are not going over there at all. It is literally just the referrals from the existing agencies that we work with who already know who is experiencing homelessness.

Alderman Kantor stated thank you.

Ryan Cashin, Fire Chief, stated I know you talked about existing agencies you are working with. I would like to add Hope for NH Recovery.

Ms. Thomas stated absolutely. They are on our board of Healthcare for the Homeless. Just so you know, we are all connected formally as well. I would be happy to add that to the description. They are the newest member, I think, to a lot of our work. That is a good add.

Alderman Long asked do you have a rough percentage of how many children take advantage of this.

Ms. Thomas answered it is about 200 kids out of about 1,200 active patients at any time. That patient base can go up to about 1,700 depending on what point in the year. It fluctuates. The same thing with the numbers of kids. We are also seeing an increase in the over 65 population. There are a lot of seniors experiencing homelessness which is new. Children is really where we want to focus our energy because a lot of these kids really need the healthcare. To me, it has always been a priority. We work with all of our partner agencies like Amoskeag Health for example and Child Health Services because they are the other qualified health center in the city. We often will refer patients back and forth to each other.

Alderman Long asked within Manchester, what are the top two ailments.

Ms. Thomas responded mental behavioral health by far and then some of the chronic diseases that are left untreated. That is actually very symbolic of a lot of people around the country. Any of our chronic diseases like diabetes, heart disease, undiagnosed cancers, by the time we are getting people into Healthcare for the Homeless we are often getting them later and at a more advanced stage of disease. I would argue it is untreated chronic disease.

Alderman Long asked where does dentistry come in.

Ms. Thomas Poisson Dental Facility is at Catholic Medical Center now HCA. That has always been our go to when we had to refer adults. In our dental program you know we have a dental van that goes to all 21 public schools. We can scoop up the kids through that mechanism who need us. We treat about 600 children a year with free dental care off of that van and volunteer dentists. The dentists are amazing in this community. We have had amazing professionals come in and help. Now we are starting to do the senior center to go to the other end of the life span if you will. Most of the referrals when we need to get someone into dental care that is an adult, especially if they are

experiencing homelessness and because we contract with CMC already they can get them into Poisson.

Alderman Long stated maybe we can thank some of these professionals, Your Honor, at one of our meetings. These dentists are stepping up and we are grateful for that.

Alderman Kantor asked with the amount of Narcan you hand out, can you tell me if people are getting the insulin that they need for free.

Ms. Thomas asked do you mean if they are seen through Healthcare for the Homeless.

Alderman Kantor answered yes.

Ms. Thomas stated I think it is basically subsidized healthcare so when they come in we get federal dollars to offset the cost. If somebody has chronic conditions like that, that will be taken care of through Healthcare for the Homeless. I will tell you that 55% of the patients are on Medicaid. There are actually a significant number who have other forms of insurance as well. Usually we turn to those first and if they are uninsured then they have uncompensated care that would be provided to them by Healthcare for the Homeless.

Alderman Burkush asked regarding the \$80 million that the state had to give back, does that affect us.

Ms. Thomas answered so far not significantly. There was one small grant that we were still spending down that was offsetting the cost of partial hours for one of our administrative assistants and our nursing supervisor. We are able to absorb that. It was a grant that was going to sunset in June of this year anyway so we weren't expecting it beyond this. So far we are okay. To be perfectly frank with you, I am worried. I don't know what is coming down the pike and you know that a lot of our employees are federally funded through a variety of grants. I am not sure. As soon as we know, you will also know about the status of those positions. It does keep me up at night.

*On motion of **Alderman Long**, duly seconded by **Alderman Burkush**, it was voted to approve.*

7. Communication from Anna Thomas, Public Health Director, requesting that CIP 210224 Modernization of Food Protection be extended to December 31, 2025.

*On motion of **Alderman Long**, duly seconded by **Alderman Burkush**, it was voted to approve.*

8. Communication from Ryan Cashin, Fire Chief, requesting the number of license plates allotted to the Fire Department be modified to accommodate an addition to its fleet.

*On motion of **Alderman Burkush**, duly seconded by **Alderman Long**, it was voted to approve.*

9. Communication from the Fire Chief requesting an updated Certificate of Authority for a previously awarded FY22 Homeland Security Grant.

*On motion of **Alderman Long**, duly seconded by **Alderman Burkush**, it was voted to approve.*

10. Communication from the Fire Chief requesting approval to accept two additional years of grant funding for the department's Community Response Unit from the State of New Hampshire, totaling \$512,000.

*On motion of **Alderman Long**, duly seconded by **Alderman Burkush**, it was voted to approve.*

11. Communication from Jeff Belanger, Director of Planning and Community Development, advising that the Planning Department and the Mayor's Office have applied for grant funding from two programs administered by the State of New Hampshire Department of Business and Economic Affairs.

*On motion of **Alderman Long**, duly seconded by **Alderman Burkush**, it was voted to approve.*

*There being no further business, on motion of **Alderman Long**, duly seconded by **Alderman Kantor**, it was voted to adjourn.*

A True Record. Attest.

A handwritten signature in black ink, appearing to read "Matthew Normand". The signature is fluid and cursive, with a long horizontal stroke at the end.

City Clerk