

CITY OF NASHUA, NH



DRAFT

2020 CONSOLIDATED PLAN

for
HUD Programs

For the Period July 1, 2020 – June 30, 2025
Jim Donchess, Mayor

Executive Summary

ES-05 Executive Summary - 24 CFR 91.200(c), 91.220(b)

1. Introduction

**DRAFT Plan is subject to revision based on public comment and HUD review. While the DRAFT is substantially complete, there are some areas to be completed, formatting and editing. **

The City of Nashua, NH's Five-Year Consolidated Plan (ConPlan) identifies the community's affordable housing, community and economic development needs and outlines a comprehensive and coordinated strategy for addressing them. This Consolidated Plan covers the period beginning July 1, 2020 through June 30, 2025. It also serves as the application for funding to the U.S. Department of Housing and Community Development (HUD) for the Community Development Block Grant (CDBG) and HOME Investment Partnership (HOME) federal entitlement programs that serve low-income individuals and/or households. Furthermore, the ConPlan serves as a foundation for other HUD funding sought on a periodic or competitive basis, such as those through the Continuum of Care or the Lead-Based Paint Hazard Control Grant.

The goals of this Plan parallel those that HUD has established for jurisdictions across the country to pursue as part of their consolidated planning efforts: to provide decent housing and a suitable living environment, and expand economic opportunities, primarily for low- and moderate-income persons.

The City of Nashua is committed to a diverse and inclusive community that engages and encourages residents and institutions to work together to make Nashua the most livable city for all its residents. To this end, the City will continue to pursue strategies to address housing, economic, and social service needs of low and moderate-income residents, the homeless and special needs populations. Neighborhood revitalization in areas that lag behind the rest of the community is also a priority.

Housing is by far the highest ranked priority in this Plan. Although affordable housing was the top priority in our last Plan, housing for nearly all income brackets has become an issue. There is almost no vacancy in the rental market, and the supply of homes for sale is also extremely limited. When higher income buyers cannot find suitable housing, they turn to rentals creating less options for low income families.

Additional stressors to the City (and country as a whole) is the changing population distribution. As Boomers age there will be significant health and housing needs; the next largest cohort are Millennials who have demonstrated they seek dramatically different lifestyles and housing options. Cities need to position themselves to attract a diverse workforce, starter families and strong community members.

2. Summary of the objectives and outcomes identified in the Plan Needs Assessment Overview

Affordable housing: Efforts to maintain and increase the supply of affordable units are critical. Given that Nashua is primarily built out, the City will continue to focus on rehab of existing units; both owner-

occupied and rental properties. A multi-pronged approach using funds under this plan, leverage from other federal and state funds, as well as code enforcement will be undertaken to help revitalize the City's aging housing stock.

The difference between affordable and subsidized housing is also a key distinction to be noted. Affordable housing, by definition, meets the HUD guidelines for maximum rents. However, to many the maximum HUD rents are still out of reach and subsidy is needed to afford these units. The need for housing that is affordable to very-low income households will be a priority in this Plan. As shown in more detail later in this Plan, nearly 46% of all renters are paying more than 30% of their gross income toward housing costs. When we look at the lowest income households, those who earn 50% or less than the AMI, the statistic is even more staggering with XX% paying more than 50% of their gross income toward housing costs.

Economic development: Economic development was ranked high through citizen participation, with a strong focus on expanding transportation options. Transportation was identified across all sectors, as key to linking low-income individuals to employment, services and everyday needs. Nashua has its own strong retail market and is in close proximity to the *Merrimack Premium Outlets*, which offers job opportunities for low-income resident. Transportation to and from our retail hubs, with expanded night hours continues to be a focus. However, it should also be noted that while retail jobs are abundant, they are the low paying and hold a large share of the market. Expanded economic opportunities, including access to higher paying jobs with benefits, will remain a high priority.

Public Services: Expanding the availability of and increasing access to needed services is a key goal of the City. Public input identified services for youth as a top need, targeting high risk youth and increasing affordable childcare programs and subsidies. Examples of youth needs included the lack of clinicians (with a possibility of enticing those entering the field from college to volunteer or work with low-income families by offering loan forgiveness); increased access to after-school programs; reducing the gap time between identifying a child in need and treatment; how to reach the youth who fall through the cracks.

Seniors were also identified as a group with high needs. Again pointing to transportation, specifically the stakeholder session noted the creation of a senior-specific ride share app. Other objectives included affordable day programs and creating a formal council-on aging.

Given that HUD limits the amount of CDBG funding that can be applied to public services, it is important to identify these priorities. However, both the City and its partners should seek other funds to help address these needs.

Creating livable communities: The City will continue to use CDBG funding make improvements to facilities that serve the public and infrastructure, including improved lighting, sidewalks and parks to revitalize challenged neighborhoods and strengthen community.

Homelessness: From a financial standpoint, the households most susceptible to becoming homeless are households who are at less than 30% median income and are severely cost-burdened (paying more than 50% of their income for rent). Other populations disproportionately at risk of becoming homeless are victims of domestic violence, substance abuse, those with severe mental health problems and people leaving prison.

In order to address this at-risk population, there is a need for long-term permanent affordable housing and supportive transitional/permanent housing for the at-risk sub-populations. Counseling, health-care, life-skills training and sustainable employment at an adequate wage are all critical to reducing homelessness within the City. CDBG funding will be used to support these efforts under the public service cap and HOME funds will be used to increase the supply of permanent affordable housing.

3. Evaluation of past performance Charts to be added

4. Summary of citizen participation process and consultation process

Citizen Participation: The City used both online and in-person methods of obtaining input on priorities and goals. In summer of 2019 we began with a resident survey conducted in the *Tree Streets* neighborhood. The survey was done during a neighborhood social event, and conducted by Neighborworks of Southern NH. We obtained 87 total responses, that are summarized later in this Plan.

In addition to the survey, the City held a stakeholder input session in February 12, 2020. The session was directed included non-profits (including the Continuum of Care), medical providers, mental health agencies, hospitals, private sector and faith-based representatives. This stakeholder session was key to setting priorities and goals. The summary of that meeting and the survey results are attached as an appendix.

The general public was informed through presentations to elected officials. The first presentation, done on February 10, 2020 at the Human Affairs Committee Meeting, provided an overall view of the Consolidated Plan process, eligible use of funds and other high level topics. Following the presentation we had a general answer/question period. The meeting was publically noticed, open to the public, broadcast and recorded.

The first official public hearing was held on March 9th, through the Aldermanic Human Affairs Committee. The Hearing began with another presentation, this one covered the results of the stakeholder session and also offered a period for discussion. During the comment period, several members of the public provided testimony in favor of the identified priorities, goals and activities for the first year Action Plan.

The second public meeting is pending as of this writing, to allow comment on this Draft Plan.

Consultations: The UPD consulted directly with the Greater Nashua Continuum of Care, nonprofit and social service agencies, the Nashua Housing Authority, The New Hampshire Housing Finance Authority, Nashua Regional Planning Commission, public agencies and City departments regarding the priorities and needs addressed in this Plan. These consultations transpired through questionnaires, interviews and discussions groups.

Consultation with the Greater Nashua Chamber of Commerce was done through their Workforce Housing Initiative. The Chamber created a committee in July of 2019 to evaluate and explore how housing impacts the area's workforce availability. The Committee, which included the Community Development Director and the Urban Programs Manager, was charged with: Assessing the current workforce housing needs of the greater Nashua area and making recommendations to the Chamber's Board of Directors for programs and initiatives to address gaps and opportunities where the Chamber can have an impact. Their report helped inform this Consolidated Plan.

The Greater Nashua Continuum of Care (GNCO) provided the information required for the Homeless Needs section and the Nashua Housing and Redevelopment Authority (NHRA) provided the information required for the Public Housing Needs section.

Many existing resources were utilized in the preparation of this Plan. These sources include:

-) Nashua Regional Planning Commission's (NRPC) *Housing Needs Assessment update*, available at <http://www.nashuarpc.org/>
-) Greater Nashua United Way's 2019 Community Assessment found at <https://unitedwaynashua.org/home/our-work/community-assessment/>
-) NH Housing Finance Authority's housing research and publications found at <http://www.nhhfa.org/>

5. Summary of public comments

Comments on this Draft Plan will be added following the comment period. Other public input is summarized throughout the plan from the surveys, meetings, and hearings.

6. Summary of comments or views not accepted and the reasons for not accepting them

7. Summary

The Process

PR-05 Lead & Responsible Agencies 24 CFR 91.200(b)

1. Describe agency/entity responsible for preparing the Consolidated Plan and those responsible for administration of each grant program and funding source

The following are the agencies/entities responsible for preparing the Consolidated Plan and those responsible for administration of each grant program and funding source.

Agency Role	Name	Department/Agency
CDBG Administrator	NASHUA	Community Development, Urban Programs
HOME Administrator	NASHUA	Community Development, Urban Programs

Table 1 – Responsible Agencies

Narrative

The City of Nashua’s Urban Programs Department within the Community Development Division is the administrator for the CDBG and HOME Programs.

Funds under the Homeless Emergency Assistance and Rapid Transition to Housing (HEARTH) Act of 2009, such as McKinney-Vento, Emergency Solutions Grant (ESG) or Housing Opportunities for Persons with AIDS (HOPWA) programs, are sought on a competitive basis and managed by the Greater Nashua Continuum of Care, consistent with this Consolidated Plan.

Consolidated Plan Public Contact Information

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PR-10 Consultation - 91.100, 91.200(b), 91.215(I)

1. Introduction

Provide a concise summary of the jurisdiction's activities to enhance coordination between public and assisted housing providers and private and governmental health, mental health and service agencies (91.215(I)).

The City of Nashua's Community Development Division regularly coordinates with public and assisted housing providers along with private and governmental health, mental health, and service agencies. Nashua's Healthy Housing Network is comprised of the City's Division of Public Health and Community Services, Code Enforcement, Police, Fire and School Departments; the Greater Nashua Continuum of Care; Neighborworks of Southern NH; Southern NH Services, Inc.; Nashua Housing Authority; NH Housing Finance Agency; the statewide Healthy Homes Strategic Planning Committee; the NH Lead Paint & Healthy Homes Program (formerly CLPPP); and many others.

The Community Development Department's Director sits on the NH Housing Finance Authority's Board of Directors; the Urban Programs Manager oversees the Citizens Advisory Commission for Community Grants process; the City's Welfare Officer is part of the Greater Nashua Continuum of Care. These are just a few examples of the many facets of coordination between the City and the community. Staff is aware of any major occurrence that which would impact housing or health of vulnerable community residents. Engaging with nonprofit service providers on a regular basis will continue to foster an environment where the City works in tandem with the community towards better development.

The City had prepared this Plan prior to the COVID-19 pandemic, and prefers to let this stand on its own. However, recent events have shown the strength of the City's network and partnerships with non-profits, the business community, and its residents. Utilizing digital tools the City took swift action to connect with those entities serving Nashua's most vulnerable populations. Agencies proved they were nimble and more than capable to ensure residents' needs were met. From food, to household goods, medical and dental care, groceries, transportation, emergency housing needs and essential child care. The City will build on the reinforced network to continue to carry out the goals within this Plan.

Describe coordination with the Continuum of Care and efforts to address the needs of homeless persons (particularly chronically homeless individuals and families, families with children, veterans, and unaccompanied youth) and persons at risk of homelessness

The Greater Nashua Continuum of Care (GNCO) is the primary decision making group that manages the overall planning effort for homelessness. The communities served by GNCO include Nashua, Brookline, Amherst, Hollis, Merrimack, Milford, Mont Vernon, Hudson, Litchfield and Mason. The GNCO utilizes federal, state and private funds to address the needs of homeless, including competitive grants. Participating partner agencies include transitional housing providers, permanent housing providers, veteran's services organizations, and shelter programs.

The City is represented at the GNCO by Manager of the Welfare Department, a department within the City of Nashua's Division of Public Health & Community Services (DPHCS). The Welfare Officer is a member of the GNCO Executive Board and also chairs the GNCO Ending Homelessness sub-committee. The Ending Homelessness sub-committee was very active in the creation and implementation of the Coordinated Entry process for the Greater Nashua community, working with

partner agencies to provide clients access to necessary homeless prevention and shelter services, including chronically homeless individuals and families and veteran populations.

Members of the GNCOC participated in the Stakeholder Input Session and the GNCOC provided direct narrative and data for this Plan.

Describe consultation with the Continuum(s) of Care that serves the jurisdiction's area in determining how to allocate ESG funds, develop performance standards and evaluate outcomes, and develop funding, policies and procedures for the administration of HMIS

The City is not a direct recipient of ESG funds. The GNCOC applies for ESG funds through the SuperNOFA competitive process, using the Consolidated Plan and member input to determine how to allocate ESG funds. The City’s Welfare Officer, part of the Division of Public Health and Community Services, is a member of the GNCOC and coordinates between the City and the GNCOC. The Urban Programs Manager is included on the GNCOC list-serve and attends meetings periodically.

Identify any Agency Types not consulted and provide rationale for not consulting

The City attempted to include all major agencies providing a full range of services in and around Nashua, none were purposefully excluded/not consulted.

Other local/regional/state/federal planning efforts considered when preparing the Plan

Name of Plan	Lead Organization	How do the goals of your Strategic Plan overlap with the goals of each plan?
NRPC 2020 Housing Needs Assessment	Nashua Regional Planning Commission	Assessment of regional housing needs, focused on affordability
Continuum of Care	Greater Nashua Continuum of Care	The Continuum of Care provides the framework and services for many of the activities provided locally to provide assistance and housing to homeless individuals and families.
Nashua Regional Plan	Nashua Regional Planning Commission	Community & Economic Vitality, Environment, Housing and Transportation. The City especially relied on the Housing Needs Chapter of the Regional Plan.
Tree Street Neighborhood Plan	City of Nashua, Community Development	Enhancing suitable living environments for low-income residents and areas.
2017-2018 Biennial Housing Plan	NH Housing Finance Authority	Affordable housing
2015 Analysis of Impediments to Fair Housing	NH Housing Finance Authority	Affordable housing, fair housing, rental data
2019 Residential Rental Cost Survey	NH Housing Finance Authority	Affordable housing, rental data/needs
2015-2024 Ten Year Transportation Plan	State of NH	Economic development, transportation, opportunities for low-income residents

Name of Plan	Lead Organization	How do the goals of your Strategic Plan overlap with the goals of each plan?
2017 Community Health Assessment	City of Nashua, Div of Public Health & Comm Services	Health & housing link, opportunities and suitable living environments for low-income residents
Housing Data (Purchase & Rental Trend Reports)	NHHFA	March 2019 report, analyzes current housing trends. Affordable Housing
Housing Needs in NH	NHHFA	Affordable housing
Analysis of Impediments to Fair Housing (AFH)	City of Nashua	Fair Housing, Affordable Housing; preliminary data used to support goals/needs/priority

Table 2 – Other local / regional / federal planning efforts

Describe cooperation and coordination with other public entities, including the State and any adjacent units of general local government, in the implementation of the Consolidated Plan (91.215(l))

The City of Nashua’s Community Development Division regularly coordinates with other Departments and Divisions throughout this City in addition to the Regional Planning Commission/Metropolitan Planning Organization (MPO), the State of NH Departments of Transportation and Environmental Services, NH Department of Health and Human Services, and the State Division of Historic Resources. Within the Community Development Division the Departments of Urban Programs, Transportation, Parking, Code Enforcement, Planning, Zoning, Building and Community Development work closely and cooperatively to implement the goals of the Consolidated Plan. Examples of cooperation include the distribution of the Consolidated Plan Resident Survey through the Nashua Transit System bus service and partnership with Code Enforcement and Building to begin the process of revising renovation standards to include “green building design”.

The Urban Programs Department, who has primary responsibility for carrying out the Consolidated Plan, collaborates on state-wide efforts with the NH Housing Finance Authority (NHHFA) on topics such as lead-paint, healthy housing and HOME funded affordable housing projects. Additionally, the Community Development Director sits on the NHHFA’s Board of Directors.

The Nashua Regional Planning Commission works closely with the Community Development Division on regional planning topics such as infrastructure, energy resources, fair housing and housing resources. In addition, the Nashua Regional Planning Commission serves as the regional MPO coordinating transportation related infrastructure funding through the state and federal government for both the Nashua Transit System and transportation infrastructure related funding within the City and region.

Regional partnerships support HUD’s Office of Economic Resilience, Sustainable Communities Planning grant. This program supports regional planning efforts that integrate housing and transportation decisions, and increase state, regional, and local capacity to incorporate livability, sustainability, and social equity values into land use plans and zoning. In this area, the Nashua Regional Planning Commission was awarded and oversees the funds that would benefit Nashua. The Consolidated Plan is only one example of long-term planning that integrates the above concepts into our funded activities.

Other Economic Resilience partnerships include regional planning initiatives with the Greater Nashua Public Health Emergency Preparedness, regional environmental/sustainability initiatives through the Nashua Regional Planning Commission, and the Souhegan Mutual Aid program for hazardous materials. The City is also looking for other opportunities to support regional resilience planning through programs by the US Department of Housing and Urban Development and the US Environmental Protection Agency.

PR-15 Citizen Participation

1. Summary of citizen participation process/Efforts made to broaden citizen participation

Summarize citizen participation process and how it impacted goal-setting

Citizen participation was an integral component in developing this plan. In addition to the efforts listed below, Section PR10 – Consultations, offers details on who was contacted. The City used a combination of methods to reach different types of groups. For example, a non-profit partner collected surveys during a community event in a target neighborhood; participatory budgeting was used to evaluate top community infrastructure needs; the professional sector was invited to attend a day-time stakeholder meeting; and public meetings were held through elected officials. Additional details follow:

Citizen Participation: The City used both online and in-person methods of obtaining input on priorities and goals. In summer of 2019 we began with a resident survey conducted in the *Tree Streets* neighborhood. The survey was done during a neighborhood social event, and conducted by Neighborworks of Southern NH. We obtained 87 total responses, that are summarized later in this Plan.

Participatory budgeting summary – In the fall/winter of 2018, Nashua Mayor Jim Donchess initiated the “Your Voice, Your Choice” project to engage the residents of the Tree Streets neighborhood in directing an investment of \$25,000 to improve the area. The effort was based on a concept known as participatory budgeting, in which community members directly influence how to spend part of a public budget. Ideas submitted by the community were gathered in December 2018 and January 2019 through an online form, at two public events held in the Tree Streets neighborhood, and through suggestion boxes placed at various locations in the community. This effort helped identify neighborhood priorities, which influenced priorities in this Plan.

The general public was informed through presentations to elected officials. The first presentation, done on February 10, 2020 at the Human Affairs Committee Meeting, provided an overall view of the Consolidated Plan process, eligible use of funds and other high level topics. Following the presentation we had a general answer/question period. The meeting was publically noticed, open to the public, broadcast and recorded.

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The second public meeting is pending as of this writing, to allow comment on this Draft Plan.

Consultations: The UPD consulted directly with the Greater Nashua Continuum of Care, nonprofit and social service agencies, the Nashua Housing Authority, The New Hampshire Housing Finance Authority, Nashua Regional Planning Commission, public agencies and City departments

regarding the priorities and needs addressed in this Plan. These consultations transpired through questionnaires, interviews and discussions groups.

The City held a stakeholder input session in February 12, 2020. The session was directed included non-profits (including the Continuum of Care), medical providers, mental health agencies, hospitals, private sector and faith-based representatives. Resident input from the early efforts was used to guide topics presented at this meeting. All in attendance voted in real-time, using software that integrated to on-screen results. The first round ranked priorities within broad categories (i.e. what type of youth services most important). Break-off groups then worked to create goals to address the top needs. In the last round, each person voted on the various goals, among all categories. That final voting process ranked needs across the broad categories. This stakeholder session was key to setting priorities and goals. The summary of that meeting and the survey results are attached.

Consultation with the Greater Nashua Chamber of Commerce was done through their Workforce Housing Initiative. The Chamber created a committee in July of 2019 to evaluate and explore how housing impacts the area's workforce availability. The Committee, which included the Community Development Director and the Urban Programs Manager, was charged with: Assessing the current workforce housing needs of the greater Nashua area and making recommendations to the Chamber's Board of Directors for programs and initiatives to address gaps and opportunities where the Chamber can have an impact. The final report was presented in March 2020 and helped inform this Consolidated Plan.

The Greater Nashua Continuum of Care (GNCOC) provided the information required for the Homeless Needs section and the Nashua Housing and Redevelopment Authority (NHRA) provided the information required for the Public Housing Needs section.

All of the consultation and citizen participation efforts impacted the prioritization of the goals listed in the Plan. The raw data provided throughout this Plan helps demonstrate need; yet community input is needed to direct the limited resources to their most critical needs/goals.

Needs Assessment

NA-05 Overview

Needs Assessment Overview

The Needs Assessment section of this Consolidated Plan highlights the challenges many low and moderate income Nashua residents face in finding safe, decent, and affordable housing. The housing cost burden experienced by low and moderate income residents has long been and will continue to be one of the top issues for Nashua residents. HUD has provided the format and data for the tables found within the Needs Assessment. Supplemental data, created by the City, is provided throughout using the most up-to-date information available. Please see the supplemental appendix attached to this Plan for a quick guide reference.

NA-10 Housing Needs Assessment - 24 CFR 91.205 (a,b,c)

Summary of Housing Needs

Demographics	Base Year: 2009	Most Recent Year: 2015	% Change
Population	86,494	87,110	1%
Households	34,801	34,620	-1%
Median Income	\$64,219.00	\$67,246.00	5%

Table 3 - Housing Needs Assessment Demographics

Data Source: 2005-2009 ACS (Base Year), 2011-2015 ACS (Most Recent Year)

Number of Households Table

	0-30% HAMFI	>30-50% HAMFI	>50-80% HAMFI	>80-100% HAMFI	>100% HAMFI
Total Households	5,805	4,410	4,450	3,715	16,235
Small Family Households	1,575	1,440	1,645	1,550	9,075
Large Family Households	300	300	220	365	965
Household contains at least one person 62-74 years of age	875	915	855	775	2,810
Household contains at least one person age 75 or older	1,100	940	645	250	735
Households with one or more children 6 years old or younger	1,035	770	644	580	1,950

Table 4 - Total Households Table

Data Source: 2011-2015 CHAS

Housing Needs Summary Tables

1. Housing Problems (Households with one of the listed needs)

	Renter					Owner				
	0-30% AMI	>30-50% AMI	>50-80% AMI	>80-100% AMI	Total	0-30% AMI	>30-50% AMI	>50-80% AMI	>80-100% AMI	Total
NUMBER OF HOUSEHOLDS										
Substandard Housing - Lacking complete plumbing or kitchen facilities	120	4	20	0	144	0	10	0	0	10
Severely Overcrowded - With >1.51 people per room (and complete kitchen and plumbing)	10	0	50	15	75	0	4	0	0	4
Overcrowded - With 1.01-1.5 people per room (and none of the above problems)	195	105	150	70	520	15	0	0	30	45
Housing cost burden greater than 50% of income (and none of the above problems)	2,530	320	30	15	2,895	1,100	500	240	105	1,945
Housing cost burden greater than 30% of income (and none of the above problems)	540	1,680	805	95	3,120	245	730	740	810	2,525

	Renter					Owner				
	0-30% AMI	>30-50% AMI	>50-80% AMI	>80-100% AMI	Total	0-30% AMI	>30-50% AMI	>50-80% AMI	>80-100% AMI	Total
Zero/negative Income (and none of the above problems)	95	0	0	0	95	105	0	0	0	105

Table 5 – Housing Problems Table

Data 2011-2015 CHAS
Source:

2. Housing Problems 2 (Households with one or more Severe Housing Problems: Lacks kitchen or complete plumbing, severe overcrowding, severe cost burden)

	Renter					Owner				
	0-30% AMI	>30-50% AMI	>50-80% AMI	>80-100% AMI	Total	0-30% AMI	>30-50% AMI	>50-80% AMI	>80-100% AMI	Total
NUMBER OF HOUSEHOLDS										
Having 1 or more of four housing problems	2,855	430	250	105	3,640	1,120	515	240	135	2,010
Having none of four housing problems	1,275	2,280	2,220	1,395	7,170	355	1,190	1,735	2,085	5,365
Household has negative income, but none of the other housing problems	95	0	0	0	95	105	0	0	0	105

Table 6 – Housing Problems 2

Data 2011-2015 CHAS
Source:

3. Cost Burden > 30%

	Renter				Owner			
	0-30% AMI	>30-50% AMI	>50-80% AMI	Total	0-30% AMI	>30-50% AMI	>50-80% AMI	Total
NUMBER OF HOUSEHOLDS								
Small Related	1,255	810	305	2,370	240	340	390	970
Large Related	240	180	65	485	0	35	20	55

	Renter				Owner			
	0-30% AMI	>30-50% AMI	>50-80% AMI	Total	0-30% AMI	>30-50% AMI	>50-80% AMI	Total
Elderly	650	415	123	1,188	780	685	415	1,880
Other	1,175	690	375	2,240	330	170	160	660
Total need by income	3,320	2,095	868	6,283	1,350	1,230	985	3,565

Table 7 – Cost Burden > 30%

Data 2011-2015 CHAS
Source:

4. Cost Burden > 50%

	Renter				Owner			
	0-30% AMI	>30-50% AMI	>50-80% AMI	Total	0-30% AMI	>30-50% AMI	>50-80% AMI	Total
NUMBER OF HOUSEHOLDS								
Small Related	1,015	85	0	1,100	220	165	80	465
Large Related	175	0	0	175	0	35	0	35
Elderly	495	130	8	633	580	230	155	965
Other	1,010	105	20	1,135	305	75	10	390
Total need by income	2,695	320	28	3,043	1,105	505	245	1,855

Table 8 – Cost Burden > 50%

Data 2011-2015 CHAS
Source:

5. Crowding (More than one person per room)

	Renter					Owner				
	0-30% AMI	>30-50% AMI	>50-80% AMI	>80-100% AMI	Total	0-30% AMI	>30-50% AMI	>50-80% AMI	>80-100% AMI	Total
NUMBER OF HOUSEHOLDS										
Single family households	135	25	150	74	384	0	0	0	10	10
Multiple, unrelated family households	30	80	0	0	110	15	4	0	25	44
Other, non-family households	45	0	50	15	110	0	0	0	0	0
Total need by income	210	105	200	89	604	15	4	0	35	54

Table 9 – Crowding Information – 1/2

	Renter				Owner			
	0-30% AMI	>30-50% AMI	>50-80% AMI	Total	0-30% AMI	>30-50% AMI	>50-80% AMI	Total
Households with Children Present								

Table 10 – Crowding Information – 2/2

Describe the number and type of single person households in need of housing assistance.

Approximately 30% of all households are single person households. Of the single person households, just under 4,000 or 35.6% are seniors 65 years old and over (2014-2018 ACS). Following national trends, the City of Nashua has a growing elderly population and the number of elderly households is expected to rise in the coming years. In fact, NRPC’s recent Housing Needs Assessment projects substantial increases by the year 2040 for the 70-79 and over 80 years population of 123% and 108% respectively, as compared to the 2010 Census.

The limited incomes and resources of seniors and the high cost of housing in Nashua presents housing challenges to this community and a greater need for housing assistance. Additionally, the average single-person household spends a larger percentage of their income on housing (given they are not sharing housing costs with another income-earner). Therefore, many single person households, including seniors, are in need of more affordable housing options and assistance.

Estimate the number and type of families in need of housing assistance who are disabled or victims of domestic violence, dating violence, sexual assault and stalking.

Victims of domestic violence, dating violence, sexual assault and stalking may experience discrimination in the rental market. The NHHFA 2015 Analysis of Impediments to Fair Housing notes that domestic violence is a leading cause of homelessness among women. The use of “crime free” clauses in leases further increases risk to victims. While the federal Violence Against Women Act protects survivors who are applicants and tenants of federally subsidized housing, there are no such protections in private housing. New Hampshire’s legislature proposed but did not enact a bill in 2013 that would have prohibited discrimination against domestic violence survivors.

There are several agencies that assist victims of domestic violence, dating violence, sexual assault and stalking, with *Bridges Domestic and Sexual Violence Support* being the lead in the community. Bridges provides free and confidential services to victims and survivors of domestic violence, sexual assault, teen dating violence, child sexual abuse, elder abuse, stalking, and harassment. They provide crisis intervention, emergency shelter, court advocacy, support groups, and education and outreach to both women and men. In recent years they have seen an increase in the need for housing these victims. Last year alone they served 67 people and referred an additional 15 for whom they did not have capacity.

A significant proportion of individuals on the public housing and voucher waitlist identify as disabled, with 23.5% and 37.7% respectively. These households also tend to be extremely low-income (<30% AMI). Given the very low rental vacancy rate in Nashua, finding housing that can accommodate disabled

individuals with mobility, sight or hearing impairments, is nearly impossible. The current housing market does not have enough affordable supply for the general population, let alone those with special needs.

Outside of the public housing waitlists, in general the growing number of elderly residents and the advanced age of Nashua's housing stock is creating a greater need for accessible housing. Furthermore, the majority of affordable housing is coterminous with the City's oldest housing stock, limiting options for physically challenged individuals.

Are any populations/household types more affected than others by these problems?

The region's most affordable housing units are located in Nashua's city-center. This area is also where the oldest housing stock exists and has the highest concentrations of poverty and ethnicity. The populations living in these Census tracts are subject to housing problems at higher rates than the general population. Within this subset, the special needs population, including the elderly, is negatively impacted by housing costs and accessibility issues. This population generally subsists on a fixed income and does not have the resources to cope with rising housing costs and the cost of rehabbing housing to accommodate accessibility concerns. Families with young children who live in the area described above, are also at greater risk of lead-paint poisoning.

Describe the characteristics and needs of Low-income individuals and families with children (especially extremely low-income) who are currently housed but are at imminent risk of either residing in shelters or becoming unsheltered 91.205(c)/91.305(c)). Also discuss the needs of formerly homeless families and individuals who are receiving rapid re-housing assistance and are nearing the termination of that assistance

The Greater Nashua Continuum of Care's ten-year Plan to End Homelessness details the characteristics of Nashua's homeless population and of those at risk of becoming homeless. Housing instability for low-income individuals and families with children is linked to poverty, unemployment, underemployment, domestic violence, a decline in public assistance, lack of affordable health care, unforeseen medical emergencies, mental illness, substance abuse, and chemical addiction. Although Nashua has a strong jobs market, a large majority are retail and low-paying jobs for unskilled workers. This prevents many from earning a living wage and as a result many cannot secure housing. The prohibitive cost of market rate housing and lack of affordable housing puts many of Nashua's low-income individuals and families with children at risk of becoming unsheltered.

Mental illness and other disabilities afflict a number of low-income residents and could prevent them from earning a living wage. The limitations imposed by disabilities, a lack of jobs, affordable housing and supportive services places many at risk of residing in shelters or becoming unsheltered.

According to data gathered from service providers, the GNCOC reports the primary reasons for 1st time homelessness is substance abuse, mental health, domestic violence risk, and disruption of a support system. This aligns with HMIS data regarding MH/SA and has allowed GNCOC to identify the issues with a support system which are not always captured in HMIS. Drug abuse is both a cause and a result of homelessness. According to data provided by the Centers for Disease Control and Prevention, NH ranks in the top five nationally for the number of opioid-related deaths relative to its population. NH also ranks No. 1 in fentanyl-related deaths per capita. As a result of these staggering numbers, the number of 1st-time homeless in 2019 was 518. However, due to efforts of the Coordinated Entry System that number decreased from 805 in the previous year. Some individuals and families are more at risk of becoming homeless due to payments owed on utility bills, rent, etc.

The needs of families and individuals who are nearing termination of their rapid-rehousing assistance, is similar to those who are currently homeless or at risk of becoming homeless. For the reasons listed above, families about to lose assistance must be provided essential services (child care, counseling, drug/alcohol treatment, job skills training, etc) in order to make the transition into mainstream housing.

If a jurisdiction provides estimates of the at-risk population(s), it should also include a description of the operational definition of the at-risk group and the methodology used to generate the estimates:

The City's at-risk populations are discussed throughout this section. They include, very-low income families, individuals with mental or physical impairments and the elderly. Sources used to generate the estimates are referenced within each response.

Specify particular housing characteristics that have been linked with instability and an increased risk of homelessness

The high cost of housing in Nashua creates instability and an increased risk of homelessness for those households that are highly housing cost burdened. As previously shown, households that are low-income, predominantly renters, are at the greatest risk. Nearly 46% of all renters in Nashua pay more than 30% of gross income toward housing costs. The large amount of household income going towards housing costs results in the potential for any disruption, such as a job loss, to put a family or individual at an increased risk of becoming homeless.

Discussion

Nashua's low and moderate income population are housing cost burdened because of a lack in education, job training, jobs that pay a living wage, and the cost of maintaining housing in Nashua. There exists a high need for supportive services aimed at low and moderate income individuals for the purpose of increasing economic and educational opportunities. Additionally, other social services including mental health services are needed to maintain a stable environment for those low and moderate income residents most at risk of becoming homeless. The wages earned by unskilled laborers do not align with the market rate cost of housing. Many residents on fixed incomes cannot afford to maintain their housing whether it's general upkeep or payment of property taxes. The Market Analysis section of the Consolidated Plan provides an in-depth examination of housing costs and the availability of affordable housing.

NA-15 Disproportionately Greater Need: Housing Problems – 91.205 (b)(2)

Assess the need of any racial or ethnic group that has disproportionately greater need in comparison to the needs of that category of need as a whole.

Introduction

The HUD definition of disproportionately greater need is when members of a racial or ethnic group at an income level experience housing problems at a greater rate (10% or more) than the income level as a whole. We gathered data from the 2014-2018 ACS, as the most recent available, to supplement the charts below. The data shows Nashua’s total population has become more diverse since the last ConPlan as approximately 72.2% are White alone (down from 77.2% in the last ConPlan), 3% Black or African American alone, 17.4% Hispanic of any race, 4.6% Asian alone, 0.1% Native Hawaiian and Other Pacific Islander, and 2.6% some other race/two or more races. Although Nashua’s population is significantly White alone, Nashua is the most racially and ethnically diverse community in the region. However, due to limited diversity, we cannot use the 10% HUD threshold. See discussion.

0%-30% of Area Median Income

Housing Problems	Has one or more of four housing problems	Has none of the four housing problems	Household has no/negative income, but none of the other housing problems
Jurisdiction as a whole	4,760	845	200
White	3,635	630	170
Black / African American	115	75	0
Asian	140	10	30
American Indian, Alaska Native	0	0	0
Pacific Islander	0	0	0
Hispanic	800	110	0

Table 11 - Disproportionally Greater Need 0 - 30% AMI

Data Source: 2011-2015 CHAS

*The four housing problems are:

1. Lacks complete kitchen facilities,
2. Lacks complete plumbing facilities,
3. More than one person per room,
4. Cost Burden greater than 30%

30%-50% of Area Median Income

Housing Problems	Has one or more of four housing problems	Has none of the four housing problems	Household has no/negative income, but none of the other housing problems
Jurisdiction as a whole	3,355	1,060	0
White	2,745	845	0
Black / African American	75	40	0
Asian	100	0	0
American Indian, Alaska Native	30	10	0
Pacific Islander	0	0	0
Hispanic	370	140	0

Table 12 - Disproportionally Greater Need 30 - 50% AMI

Data Source: 2011-2015 CHAS

*The four housing problems are:

1. Lacks complete kitchen facilities,
2. Lacks complete plumbing facilities,
3. More than one person per room,
4. Cost Burden greater than 30%

50%-80% of Area Median Income

Housing Problems	Has one or more of four housing problems	Has none of the four housing problems	Household has no/negative income, but none of the other housing problems
Jurisdiction as a whole	2,045	2,410	0
White	1,650	2,065	0
Black / African American	135	55	0
Asian	10	35	0
American Indian, Alaska Native	10	0	0
Pacific Islander	0	0	0
Hispanic	240	175	0

Table 13 - Disproportionally Greater Need 50 - 80% AMI

Data Source: 2011-2015 CHAS

*The four housing problems are:

1. Lacks complete kitchen facilities,
2. Lacks complete plumbing facilities,
3. More than one person per room,
4. Cost Burden greater than 30%

80%-100% of Area Median Income

Housing Problems	Has one or more of four housing problems	Has none of the four housing problems	Household has no/negative income, but none of the other housing problems
Jurisdiction as a whole	1,145	2,575	0
White	965	2,165	0
Black / African American	20	50	0
Asian	30	105	0
American Indian, Alaska Native	0	0	0
Pacific Islander	0	0	0
Hispanic	90	185	0

Table 14 - Disproportionally Greater Need 80 - 100% AMI

Data Source: 2011-2015 CHAS

*The four housing problems are:

1. Lacks complete kitchen facilities,
2. Lacks complete plumbing facilities,
3. More than one person per room,
4. Cost Burden greater than 30%

Discussion

Again, the HUD definition of disproportionately greater need is when members of a racial or ethnic group at an income level experience housing problems at a greater rate (10% or more) than the income level as a whole. In the tables above, White households have the highest rates of housing problems. However, they are also the majority of the population. For each income bracket above, the rate of housing problems follows the overall ethnicity population breakdown. For example, in the 0-30% range, White HH’s experience housing problems at a rate of 76.4% and Hispanic HH’s at 16.8% (within that income range alone). As stated, the total population (all income levels) is 72.2% and 17.4% respectively.

When looking at the 30-50% and 50-80%, we see White HH’s have an increased rate of housing problems , when compared to the total population; at 9.6% and 8.5% higher than the population rate.

NA-20 Disproportionately Greater Need: Severe Housing Problems – 91.205 (b)(2)

Assess the need of any racial or ethnic group that has disproportionately greater need in comparison to the needs of that category of need as a whole.

Introduction

0%-30% of Area Median Income

Severe Housing Problems*	Has one or more of four housing problems	Has none of the four housing problems	Household has no/negative income, but none of the other housing problems
Jurisdiction as a whole	3,975	1,630	200
White	3,035	1,225	170
Black / African American	115	75	0
Asian	140	10	30
American Indian, Alaska Native	0	0	0
Pacific Islander	0	0	0
Hispanic	640	270	0

Table 15 – Severe Housing Problems 0 - 30% AMI

Data Source: 2011-2015 CHAS

*The four severe housing problems are:

1. Lacks complete kitchen facilities,
2. Lacks complete plumbing facilities,
3. More than 1.5 persons per room,
4. Cost Burden over 50%

30%-50% of Area Median Income

Severe Housing Problems*	Has one or more of four housing problems	Has none of the four housing problems	Household has no/negative income, but none of the other housing problems
Jurisdiction as a whole	945	3,470	0
White	800	2,795	0
Black / African American	50	65	0
Asian	4	95	0
American Indian, Alaska Native	0	35	0
Pacific Islander	0	0	0
Hispanic	90	415	0

Table 16 – Severe Housing Problems 30 - 50% AMI

Data Source: 2011-2015 CHAS

*The four severe housing problems are:

1. Lacks complete kitchen facilities, 2. Lacks complete plumbing facilities, 3. More than 1.5 persons per room, 4. Cost Burden over 50%

50%-80% of Area Median Income

Severe Housing Problems*	Has one or more of four housing problems	Has none of the four housing problems	Household has no/negative income, but none of the other housing problems
Jurisdiction as a whole	490	3,955	0
White	365	3,350	0
Black / African American	10	185	0
Asian	10	35	0
American Indian, Alaska Native	10	0	0
Pacific Islander	0	0	0
Hispanic	100	315	0

Table 17 – Severe Housing Problems 50 - 80% AMI

Data Source: 2011-2015 CHAS

*The four severe housing problems are:

1. Lacks complete kitchen facilities, 2. Lacks complete plumbing facilities, 3. More than 1.5 persons per room, 4. Cost Burden over 50%

80%-100% of Area Median Income

Severe Housing Problems*	Has one or more of four housing problems	Has none of the four housing problems	Household has no/negative income, but none of the other housing problems
Jurisdiction as a whole	240	3,480	0
White	125	3,000	0
Black / African American	0	70	0
Asian	20	115	0
American Indian, Alaska Native	0	0	0
Pacific Islander	0	0	0
Hispanic	70	205	0

Table 18 – Severe Housing Problems 80 - 100% AMI

Data Source: 2011-2015 CHAS

*The four severe housing problems are:

1. Lacks complete kitchen facilities, 2. Lacks complete plumbing facilities, 3. More than 1.5 persons per room, 4. Cost Burden over 50%

Discussion

See the discussion in NA-15 section. The race/ethnic groups that experience severe housing problems tends to follow the total population distribution.

NA-25 Disproportionately Greater Need: Housing Cost Burdens – 91.205 (b)(2)

Assess the need of any racial or ethnic group that has disproportionately greater need in comparison to the needs of that category of need as a whole.

Introduction:

The definition of cost burdened is a household that pays 30% or more of their income toward housing costs. Any percentage above 30% but below 50% is considered a housing cost burden, and if a household is paying 50% or more of their household income on housing, then that household is experiencing a severe housing cost burden.

Housing Cost Burden

Housing Cost Burden	<=30%	30-50%	>50%	No / negative income (not computed)
Jurisdiction as a whole	22,325	6,945	5,115	235
White	18,360	5,685	4,095	170
Black / African American	420	195	160	0
Asian	1,680	235	180	65
American Indian, Alaska Native	10	30	10	0
Pacific Islander	0	0	0	0
Hispanic	1,405	705	615	0

Table 19 – Greater Need: Housing Cost Burdens AMI

Data Source: 2011-2015 CHAS

Discussion: Including percentages helps identify where disproportionate burden exists.

Housing Cost Burden	<=30%	% of Income Category	30-50%	% of Income Category	>50%	% of Income Category	No / negative income (not computed)
Jurisdiction	22,325		6,945		5,115		235
White	18,360	82.2%	5,685	81.9%	4,095	80.1%	170
Black / African American	420	1.9%	195	2.8%	160	3.1%	0
Asian	1,680	7.5%	235	3.4%	180	3.5%	65
American Indian, Alaska Native	10	0.0%	30	0.4%	10	0.2%	0
Pacific Islander	0	0.0%	0	0.0%	0	0.0%	0
Hispanic	1,405	6.3%	705	10.2%	615	12.0%	0

NA-30 Disproportionately Greater Need: Discussion – 91.205(b)(2)

Are there any Income categories in which a racial or ethnic group has disproportionately greater need than the needs of that income category as a whole?

The table above shows the number of households paying 30%, 30-50% and more than 50% on housing costs. White HH's are cost burdened at a rate of 82.2, 81.9, and 80.1% respectively. While the rate incrementally reduces in each income category for White HH's, the opposite is true Hispanic HH's where we see 6.3, 10.2, and 12% respectively. The rate of Hispanic HH's who are cost burdened doubles from those paying 30% of their income versus those paying 50% or more of their income toward housing costs.

If they have needs not identified above, what are those needs?

Housing cost burden disproportionately affects households in the lowest income brackets. This is a fairly obvious conclusion, however limited income HH's also tend to be seniors and female head of households. Although not specifically related to race/ethnicity, housing cost burden for these populations is noteworthy.

Are any of those racial or ethnic groups located in specific areas or neighborhoods in your community?

When we break down the rate of cost burdened households geographically, it is clear that cost burdened households are concentrated in the lower-income Census Tracts. These Tracts also have the highest concentrations of non-white households, and female head of households. Specifically, 42% of Tract 108's population is a female head of household; the median HH income is \$36,496, compared to the city-wide average of \$88,118; and only \$26,573 for female head of households. Tract 108 also contains 51% non-white households, the highest concentration of any Tract. [ACS 5 year estimates 2014-2018]

Also of importance is the distinction between renters and owners. In Nashua 45.6% of all renters are cost burdened (paying more than 30% of their income toward housing), compared to 25.4% of owners [ACS 5 year estimates 2014-2018].

NA-35 Public Housing – 91.205(b)

Introduction

Totals in Use

	Program Type								
	Certificate	Mod-Rehab	Public Housing	Vouchers			Special Purpose Voucher		
				Total	Project - based	Tenant - based	Veterans Affairs Supportive Housing	Family Unification Program	Disabled *
# of units vouchers in use	0	40	659	860	0	834	26	0	0

Table 20 - Public Housing by Program Type

*includes Non-Elderly Disabled, Mainstream One-Year, Mainstream Five-year, and Nursing Home Transition

Data Source: PIC (PIH Information Center)

Characteristics of Residents

	Program Type								
	Certificate	Mod-Rehab	Public Housing	Vouchers			Special Purpose Voucher		
				Total	Project - based	Tenant - based	Veterans Affairs Supportive Housing	Family Unification Program	
Average Annual Income	0	9,427	13,857	15,839	0	15,961	11,926	0	
Average length of stay	0	3	6	7	0	7	1	0	
Average Household size	0	1	1	2	0	2	1	0	
# Homeless at admission	0	8	1	10	0	10	0	0	

	Program Type							
	Certificate	Mod-Rehab	Public Housing	Vouchers			Special Purpose Voucher	
				Total	Project - based	Tenant - based	Veterans Affairs Supportive Housing	Family Unification Program
# of Elderly Program Participants (>62)	0	3	235	123	0	119	4	0
# of Disabled Families	0	25	258	333	0	327	6	0
# of Families requesting accessibility features	0	40	659	860	0	834	26	0
# of HIV/AIDS program participants	0	0	0	0	0	0	0	0
# of DV victims	0	0	0	0	0	0	0	0

Table 21 – Characteristics of Public Housing Residents by Program Type

Data Source: PIC (PIH Information Center)

Race of Residents

Race	Program Type								
	Certificate	Mod-Rehab	Public Housing	Vouchers			Special Purpose Voucher		
				Total	Project - based	Tenant - based	Veterans Affairs Supportive Housing	Family Unification Program	Disabled *
White	0	35	611	780	0	756	24	0	0
Black/African American	0	3	36	68	0	66	2	0	0
Asian	0	1	8	8	0	8	0	0	0
American Indian/Alaska Native	0	1	3	3	0	3	0	0	0

Race	Program Type								
	Certificate	Mod-Rehab	Public Housing	Vouchers			Special Purpose Voucher		
				Total	Project - based	Tenant - based	Veterans Affairs Supportive Housing	Family Unification Program	Disabled *
Other	0	0	0	0	0	0	0	0	0

*includes Non-Elderly Disabled, Mainstream One-Year, Mainstream Five-year, and Nursing Home Transition

Table 22 – Race of Public Housing Residents by Program Type

Data Source: PIC (PIH Information Center)

Ethnicity of Residents

Ethnicity	Program Type								
	Certificate	Mod-Rehab	Public Housing	Vouchers			Special Purpose Voucher		
				Total	Project - based	Tenant - based	Veterans Affairs Supportive Housing	Family Unification Program	Disabled *
Not Hispanic	0	38	482	619	0	593	26	0	0

*includes Non-Elderly Disabled, Mainstream One-Year, Mainstream Five-year, and Nursing Home Transition

Table 23 – Ethnicity of Public Housing Residents by Program Type

Data Source: PIC (PIH Information Center)

Section 504 Needs Assessment: Describe the needs of public housing tenants and applicants on the waiting list for accessible units:

The Nashua Housing and Redevelopment Authority (NHRA) operates 13 sites of public housing comprised of 72 buildings. ADA accessible units total 48, which is 4.8 percent of the total units. There is no demand at this time for accessible two-bedroom units within NHRA's elderly and non-elderly disabled buildings, nor are there any applicants on these waiting lists. Seven percent of NHRA's elderly and non-elderly disabled applicants are awaiting an accessible one-bedroom unit. There is no demand at this time for accessible four-bedroom accessible units within family developments, nor are there any applicants on this waiting list. Two percent of NHRA's family applicants are awaiting an accessible two or three-bedroom unit. NHRA currently has four families in need of a transfer to an accessible unit comprised of one family, one non-elderly disabled resident, and two elderly residents.

Most immediate needs of residents of Public Housing and Housing Choice voucher holders:

Section 8 HCVP participants are in need of a broader unit selection which meet NHRA's payment and HQS standards. While a great deal of rental housing and apartment complexes exists within the city, the rental costs far exceed NHRA's payment standards. As the City of Nashua's population continues to grow, the demand for affordable housing far exceeds what is currently available.

How do these needs compare to the housing needs of the population at large:

It is necessary for more affordable housing choices in the City as a whole. The availability of affordable housing units is a need for families living in Nashua, NH. The majority of public housing clients and voucher holders are extremely low-income. Individuals within that bracket have the least amount of options when choosing housing. Affordability is the determining factor, and in many cases overrides the need for proximity to public transportation, markets and health care.

NA-40 Homeless Needs Assessment – 91.205(c)

Introduction:

The Greater Nashua Continuum of Care (GNCOC) is the primary decision making group that manages the overall planning effort for the entire COC. The communities served by the COC include Nashua, Brookline, Amherst, Hollis, Merrimack, Milford, Mont Vernon, Hudson, Litchfield and Mason. The GNCOC utilizes federal, state and private funds to address the needs of the homeless, including competitive HOPWA grants. Limited resources covered by this Plan are directed toward Homelessness. However, the City as a whole and many of its Divisions work to address this need outside of Plan resources. Information relating to the GNCOC's goals was obtained from their annual HUD reports.

For virtually all homeless individuals and families, decent, safe, affordable housing is a critical step in ending homelessness. In some cases, this is their only need. Often, in addition to affordable housing, the homeless also need supportive services to make the transition to independent living or to deal with other problems. Common issues include substance abuse, mental illness, childcare, transportation, life skills, job training and other basic life skills.

If data is not available for the categories "number of persons becoming and exiting homelessness each year," and "number of days that persons experience homelessness," describe these categories for each homeless population type (including chronically homeless individuals and families, families with children, veterans and their families, and unaccompanied youth):

Nature and Extent of Homelessness: (Optional)

Race:	Sheltered:	Unsheltered (optional)
Ethnicity:	Sheltered:	Unsheltered (optional)

Estimate the number and type of families in need of housing assistance for families with children and the families of veterans.

Describe the Nature and Extent of Homelessness by Racial and Ethnic Group.

Describe the Nature and Extent of Unsheltered and Sheltered Homelessness.

Discussion:

NA-45 Non-Homeless Special Needs Assessment - 91.205 (b,d)

Introduction:

The special needs population consists of persons who are not homeless but for various reasons, require assistance and supportive housing. This includes the elderly and frail elderly; persons with mental, physical, and/or developmental disabilities; persons with alcohol or drug addiction; persons with HIV/AIDS and their families; and victims of domestic violence, dating violence, sexual assault and stalking. Given the high cost of housing in Nashua and the surrounding areas, provision of affordable housing for these special needs populations has been challenging.

Describe the characteristics of special needs populations in your community:

As defined by the Census Bureau, a disability is a long-lasting physical, mental, or emotional condition that can make it difficult for a person to do activities such as walking, climbing stairs, dressing, bathing, learning, or remembering. This condition can also impede a person from being able to go outside the home alone or to work.

In Nashua, 12.7% of the total population is estimated to have a disability, according to ACS data. Of those, 5.9% are children, 10.8% are 18-65 years of age and 35.2% are over 65 years of age. The most common types of disabilities among children was cognitive; persons ages 18 to 64 were cognitive, ambulatory and difficulty with living independently; for those 65 years or older the top disabilities were hearing, ambulatory and difficulty with living independently. According to the National Organization on Disabilities, a significant income gap exists for persons with disabilities, given their lower rate of employment. In Nashua, persons with disabilities were substantially more likely than persons without disabilities to live in poverty. According to ACS, 20.4% of residents with disabilities lived in poverty, compared to 7.6% of persons without disabilities. In Nashua, median earnings for disabled persons age 16 and older were \$21,823, compared to \$36,268 for those without disabilities. That is approximately 66% lower earnings for disabled individuals compared to non-disabled.

What are the housing and supportive service needs of these populations and how are these needs determined?

Based on consultation and input from area service providers and City Departments, it has been determined that:

-) There is a need for additional permanent supportive housing to address the needs of the homeless, households at imminent risk of becoming homeless, and/or special needs clients
-) There is a need for new construction / acquisition / rehabilitation of rental housing for lower income households
-) There is a need for additional support services that assist persons with special needs
-) There is a need for mental health services for those with special needs and those that have been victims of violence and/or family trauma
-) Multilingual services are needed for the non-English speaking special needs population

Discuss the size and characteristics of the population with HIV/AIDS and their families within the Eligible Metropolitan Statistical Area: As of December 31, 2018, there were a total of 1,316 people living with HIV (669) and AIDS (647) in the State of New Hampshire. New cases averaged 35 each year for the past 5 years. Because numbers are fairly small in NH as opposed to many other states, epidemiological data is not released for town/city of residence, but we do know that Hillsborough County is home to the bulk of people living with HIV in the State. At their headquarters in Nashua, the

Southern NH HIV/AIDS Task Force serves approximately 190 individuals living with HIV/AIDS annually, with approximately 75% living in Greater Nashua and the nine surrounding towns. Clients must have an income at or below 500% of the federal poverty level or below to receive services, indicating the most vulnerable people with HIV are being served.

NA-50 Non-Housing Community Development Needs – 91.215 (f)

Describe the jurisdiction’s need for Public Facilities:

The following public facility needs were identified by consultation with the City of Nashua’s Division of Public Works, along with community input from the resident survey and community stakeholder session:

-) Facilities for high risk youth (i.e. increased after-school programming space)
-) Facilities for homeless persons (more ADA accessible, modern facilities)
-) Facilities for persons with disabilities and seniors (ensure existing facilities remain in good shape)
-) Park/Recreational facilities
-) New public health facility

How were these needs determined?

The City's needs for public facilities were determined through a number of processes with input from City Departments such as Public Works, Community Development, Parks and Recreations and a resident survey (87 responses). A major factor in prioritizing non-housing community development needs was the stakeholder session held February 12, 2020 attended by approximately 20 agencies.

Describe the jurisdiction’s need for Public Improvements:

Transportation related needs ranked high across all sectors of stakeholder input. Transportation was noted as affecting access to jobs for low-moderate income households, access to services for LMI and seniors, and a high need for the disabled population. Specific transportation needs included: expanding the existing transportation system within and out of the city; more frequent loops; and connection to nearby retail outlets in Merrimack, NH.

Other public improvements that remain highly rated include:

-) Sidewalk improvements
-) Lighting, especially at parks for extended/safe use
-) Bike lanes

How were these needs determined?

These needs were determined through the same process as above: input from City Departments such as Public Works, Community Development, Parks and Recreations and a resident survey (87 responses), and the stakeholder session held February 12, 2020 attended by approximately 20 agencies.

Describe the jurisdiction’s need for Public Services:

The following public services needs are available within the community through the City and service providers. However, funding levels do not meet the demand for services. Since CDBG regulations limit public service funding to 15% of the total grant amount, prioritization of CDBG funding is essential to meeting the most urgent of the community.

The following public services needs were identified through the public input described through this plan:

-) Youth services, especially increasing the # of or access to clinicians (create programs to connect graduating college students to youth; loan forgiveness; other incentives to boost supply)
-) Transportation services: Developing ride share apps for seniors for to utilize idle vehicles/drivers (through NTS, First Student, others); develop transportation app for disabled/special needs population with real-time info and an easy way to pay.

-) Supportive services for mental, behavioral & general health
-) Develop a formal council/coordination for seniors
-) Safe/affordable child care, with public transit tied locations
-) Employment: technical/trades training

How were these needs determined?

These needs were determined through the same process as above: input from City Departments such as Public Works, Community Development, Parks and Recreations and a resident survey (87 responses), and the stakeholder session held February 12, 2020 attended by approximately 20 agencies.

Housing Market Analysis

MA-05 Overview

Housing Market Analysis Overview:

In the 2015 Consolidated Plan (approx. 5 years ago), the focus was on the foreclosure crisis and its impact to the rental market, as well as the competition it created in the rental market. Compared to the 2010 ConPlan, where rental units were abundant and mostly affordable as households were easily able to obtain mortgage financing. It was this easy access to lending, and predatory lending practices put many moderate income households in a tenuous position, and led to the housing market crash. Home prices plummeted and many found themselves with negative equity, forcing them to sell short or “walk away”. The credit damage and disruption to low-moderate income families would take years to repair.

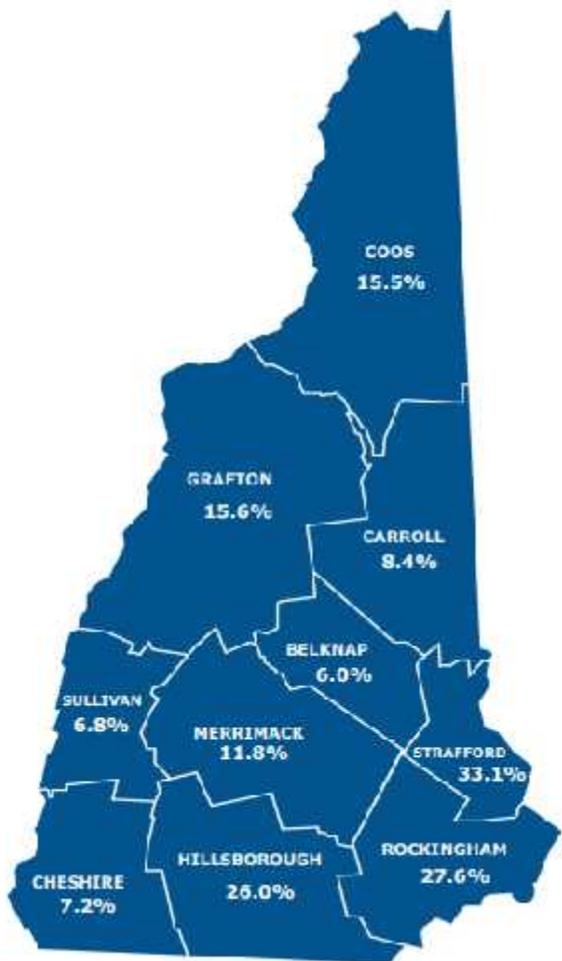
During the Great Recession and years of recovery, housing construction slowed significantly. Now, our current economic conditions are strong, millennials are of home-buying age, and seniors are looking to down size. We have a new housing crisis, that one of affordability.

The following are some key facts and data points, recently highlighted in the Chamber of Commerce’s report on Workforce Housing:

-) The median purchase price of a single family home in Nashua was \$219,000 in 2010 and \$280,000 in 2019, an increase of 27% in a decade. (NHHFA 2019)
-) The median two bedroom rent in Nashua increased from \$1,310 per a month in 2015 to \$1,506 per month in 2019. A 19% increase in the last four years and 28% increase since 2009. A household would need to make almost \$60,000 per year to afford \$1,506 per month. (NHHFA 2019 – see map below from NHHFA’s 2019 Residential Rental Cost Survey report)
-) The income of someone on disability or social security is \$771 per month.
-) There has been a steep increase in cost burdened households. Approximately 30% of households are renters. The average renter in the Nashua region makes \$15.63 per hour, or about \$32,000 per year. This would allow for a maximum of \$800 per month for housing expenses. This is half of the income needed to afford a rental unit at the 2019 median rent of \$1,506 per unit. (National Low Income Housing Coalition, Out of Reach 2019: New Hampshire)
-) The 2019 vacancy rate is 0.3% for a two bedroom in Nashua, whereas a healthy vacancy rate is around 5%. (NHHFA, 2019)
-) 45% of renter households in our region are cost burdened (ACS 5-year 2014-2018)
-) 42% of all households earn less than the state defined workforce housing income limits (NRPC, Housing Needs Assessment, 2019)
-) The homeless population in Hillsborough county has increased 16.9% from 2010 to 2018 (DHHA, Point In Time Count, 2010-2018)
-) The average household size has steadily dropped over the last decades. In 1960 household size in Nashua was 3.5 people, as of 2010 it was 2.5 people, with the largest growth in single person households. As our population ages we expect to see significantly more single person households than in the past.

- J Nashua’s largest population cohort in the next five years is coming into first time homebuyer age (30-34). This is a key population for our workforce that needs attainable housing options. Our younger households are looking for the same housing product as our senior population who are looking to downsize. The senior households that are downsizing are out competing younger households who do not have the cash equity from selling a home.
- J Up until 2016 the housing that has been built was larger in size. This is in contrast to our shrinking household sizes. From 1960-1980 70 to 90% of all houses built were less than 2,000 SF, from 1990-2000 30% of the houses built were less than 2,000 SF, and from 2000-2010 50% of the houses built were less than 2,000 SF, however more than 1/3 of the smaller units built from 2000-2010 are permanently age restricted.
- J There has been a steady decline in construction and manufacturing employment in NH, with construction jobs declining the most.

**PERCENT CHANGE IN
2-BEDROOM MEDIAN
GROSS RENT OVER
FIVE YEARS
(STATEWIDE),
2014 - 2019**



MA-10 Number of Housing Units – 91.210(a)&(b)(2)

Introduction

All residential properties by number of units

Property Type	Number	%
1-unit detached structure	16,125	44%
1-unit, attached structure	2,315	6%
2-4 units	6,135	17%
5-19 units	5,735	16%
20 or more units	5,645	15%
Mobile Home, boat, RV, van, etc	875	2%
Total	36,830	100%

Table 24 – Residential Properties by Unit Number

Data Source: 2011-2015 ACS

Unit Size by Tenure

	Owners		Renters	
	Number	%	Number	%
No bedroom	70	0%	720	5%
1 bedroom	430	2%	4,025	27%
2 bedrooms	4,680	24%	7,305	48%
3 or more bedrooms	14,275	73%	3,115	21%
Total	19,455	99%	15,165	101%

Table 25 – Unit Size by Tenure

Data Source: 2011-2015 ACS

Describe the number and targeting (income level/type of family served) of units assisted with federal, state, and local programs.

The NH Housing Finance Authority maintains a directory of assisted housing. As of this writing there were approximately 2,021 total assisted units, of those only 240 are accessible, 1,108 are elderly, 157 are special needs and 72 are transitional housing units. (Note: there may be some duplication, as certain units may serve multiple family types). The directory is available at www.nhhfa.org.

Provide an assessment of units expected to be lost from the affordable housing inventory for any reason, such as expiration of Section 8 contracts.

Insert updated chart - pending

Does the availability of housing units meet the needs of the population?

There is insufficient affordable housing to meet the needs of low and moderate income people currently living in Nashua. The wait list for public housing is approximately 7 years, households report “doubling-

up” to afford rent, and the vacancy rate is currently less than 1% (and 0.3% for a two-bedroom). There is also insufficient housing for higher income households. The number of households renting has significantly increased across all income levels in the last few year (NRPC 2020 Housing Needs Assessment). It is difficult to determine if this is a life-choice trend, or if HH’s are forced to rent due to lack of affordable purchase options.

Nashua’s housing stock is mismatched in square footage size to household size. On the homebuyer side, 62% of households are 1-2 people; yet only 26% of homes are 1-2 bedrooms. The majority of homes are 3-bedroom, and about 30% are 4+ bedrooms. As mentioned, seniors are seeking the smaller homes for downsizing, while starter families are seeking the same properties, but do not have equitable cash resources. Nashua has vast numbers of large homes that do not appeal to small HH’s and those who purposely want to keep housing costs as a low percentage to income.

Furthermore, the significant projected increase in our aging population creates an ongoing housing consideration. Will there be enough housing units in the coming 10-15 years to accommodate the aging population and what do we do with those units when that population no longer requires specialized housing. Are there housing types that can be modified or constructed to serve multiple generations? Where should this housing be located?

Describe the need for specific types of housing:

Affordable housing was the highest ranking need identified through citizen participation. In addition, housing that is accessible to persons with disabilities and low income seniors, particularly the frail elderly, is very limited. Additional supportive housing for persons with mental illness, developmental disabilities and other disabling conditions is also needed. Likewise, affordable housing for families with children remains a need throughout the community.

Rental housing development remains a priority. However, smaller more practical homes, located in proximity to services (shopping, dining, schools) is favored among Millennials. The Southeastern Institute of Research Inc. (SIR) highlights the changing population distribution from bell curve, to an almost inverted pyramid and the housing demands that come with the population change. John W. Martin, SIR’s CEO and Managing Partner, recently offered these points to consider as cities compete to reverse projected negative population in the coming decades: Millennial game plan; workforce development plan; immigration plan; affordable workforce housing plan; place marketing plan; and place making plan.

There has been some positive progress. We have seen a steady investment in Accessory Dwelling Units (ADU), since the state mandated that communities allow ADU’s in all residential districts. Since 2017 Nashua is averaging about 10 new ADU’s per year.

MA-15 Housing Market Analysis: Cost of Housing - 91.210(a)

Introduction

The median purchase price of a single family home in Nashua in 2019 was \$280,000, an increase of 19% since the amount listed below for 2015. The median two bedroom rent in Nashua increased from \$1,310 per a month in 2015 to \$1,506 per month in 2019. A 19% increase in the last four years and 28% increase since 2009. (NHHFA 2019)

Increasing contract rent limits was the highest ranked need from the stakeholder session. Agencies at that meeting see first-hand the limitations of contract rent and how it often results in tenants obtaining sub-standard rental units.

Cost of Housing

	Base Year: 2009	Most Recent Year: 2015	% Change
Median Home Value	267,400	235,800	(12%)
Median Contract Rent	935	996	7%

Table 26 – Cost of Housing

Data Source: 2005-2009 ACS (Base Year), 2011-2015 ACS (Most Recent Year)

Rent Paid	Number	%
Less than \$500	1,670	11.0%
\$500-999	6,165	40.7%
\$1,000-1,499	6,145	40.5%
\$1,500-1,999	990	6.5%
\$2,000 or more	199	1.3%
Total	15,169	100.1%

Table 27 - Rent Paid

Data Source: 2011-2015 ACS

Housing Affordability

% Units affordable to Households earning	Renter	Owner
30% HAMFI	1,170	No Data
50% HAMFI	4,840	1,245
80% HAMFI	9,295	3,965
100% HAMFI	No Data	6,885
Total	15,305	12,095

Table 28 – Housing Affordability

Data Source: 2011-2015 CHAS

Monthly Rent

Monthly Rent (\$)	Efficiency (no bedroom)	1 Bedroom	2 Bedroom	3 Bedroom	4 Bedroom
Fair Market Rent	790	938	1,239	1,722	1,732
High HOME Rent	790	938	1,239	1,722	1,732
Low HOME Rent	790	938	1,180	1,362	1,520

Table 29 – Monthly Rent

Data Source: HUD FMR and HOME Rents

Is there sufficient housing for households at all income levels?

Nashua is currently experiencing a housing shortage for all income levels, including those that are not low or moderate income (i.e. <1% vacancy rate). Households who are low-moderate, especially the lowest, are severely affected, as they do not have the income elasticity to absorb additional housing costs. The type of existing single-family housing available is not aligned with average household size.

How is affordability of housing likely to change considering changes to home values and/or rents?

Housing affordability is expected to remain strained based on consistent increases in both property values and rents and no foreseeable decline in the immediate future or longer term. Nashua’s low and moderate income population will continue to be priced out of their community as home prices and rental rates rise. Long-time homeowners living on fixed income, primarily seniors, are increasingly at risk of displacement because they can no longer afford to pay rising property taxes, utilities and afford to maintain their homes.

How do HOME rents / Fair Market Rent compare to Area Median Rent? How might this impact your strategy to produce or preserve affordable housing?

The chart above shows fair market rent (FMR) compared to HOME rent limits. However, current data shows the average rent for a two-bedroom in 2019 was \$1,506. Area median rent is a snapshot of true rent in the community, versus FMR that is calculated using formulas. Although HOME rents are lower, many developers indicate they would take a rent reduction in exchange for guaranteed payment, and often less rental turn-over that comes with a HOME subsidized unit. Nashua is primarily built-out, meaning there are far greater opportunities for redevelopment versus new construction on green land. It is imperative that the City continue to utilize its HOME funds to not only develop, but preserve affordable housing.

MA-20 Housing Market Analysis: Condition of Housing – 91.210(a)

Introduction

This section discusses the condition of housing stock in Nashua. HUD defines substandard housing using conditions similar to those in the Needs Assessment above. Housing units are considered substandard if they have one or more of the following conditions: 1) lack of complete plumbing facilities; 2) lack of complete kitchen facilities; 3) more than 1 person per room; or 4) a housing cost burden greater than 30%. The chart below shows the number of units in Nashua with one or more of these conditions considered substandard.

As previously mentioned, Nashua is a built-out community and we have significant aging housing stock. The condition of this aging housing stock is less than desirable, which leads us to a strategy of wanting to invest in rehabilitation to preserve affordability.

Definitions

The City of Nashua regulates the condition of rental housing through the Nashua Revised Ordinances, Chapter 182, Housing Standards. Consistent with these codes the City considers a “Standard” unit as meeting all state and local codes; and a “Substandard” unit as one is in poor condition, but is both structurally and financially feasible to rehabilitate. Substandard would not include a unit that is condemnable or inhabitable.

Condition of Units

Condition of Units	Owner-Occupied		Renter-Occupied	
	Number	%	Number	%
With one selected Condition	5,755	30%	6,550	43%
With two selected Conditions	8	0%	380	3%
With three selected Conditions	0	0%	10	0%
With four selected Conditions	0	0%	0	0%
No selected Conditions	13,685	70%	8,225	54%
Total	19,448	100%	15,165	100%

Table 30 - Condition of Units

Data Source: 2011-2015 ACS

Year Unit Built

Year Unit Built	Owner-Occupied		Renter-Occupied	
	Number	%	Number	%
2000 or later	1,375	7%	950	6%
1980-1999	6,470	33%	4,060	27%
1950-1979	8,965	46%	5,090	34%
Before 1950	2,640	14%	5,070	33%
Total	19,450	100%	15,170	100%

Table 31 – Year Unit Built

Data Source: 2011-2015 CHAS

Risk of Lead-Based Paint Hazard

Risk of Lead-Based Paint Hazard	Owner-Occupied		Renter-Occupied	
	Number	%	Number	%
Total Number of Units Built Before 1980	11,605	60%	10,160	67%
Housing Units build before 1980 with children present	2,220	11%	1,175	8%

Table 32 – Risk of Lead-Based Paint

Data Source: 2011-2015 ACS (Total Units) 2011-2015 CHAS (Units with Children present)

Vacant Units

	Suitable for Rehabilitation	Not Suitable for Rehabilitation	Total
Vacant Units			
Abandoned Vacant Units			
REO Properties			
Abandoned REO Properties			

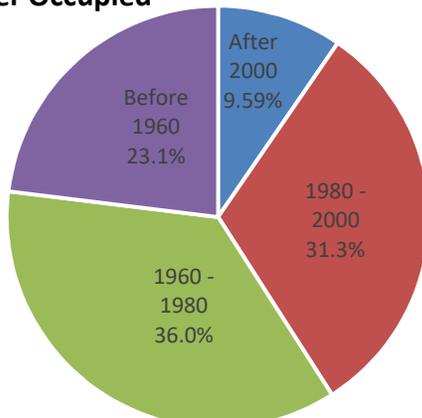
Table 33 - Vacant Units

Information on vacant units is not available. The City does maintain a registry of property managers for rental properties, however it would only be possible to identify REO properties if the bank provided their contact information as the property manager. Unfortunately in many cases the lender hires a local manager. Data retrieved through this method would not be reliable. Further the City’s Police and Fire Departments do not maintain a listing of residential vacant units. Anecdotally, vacant units do not present the problem they did during the foreclosure crisis several years ago.

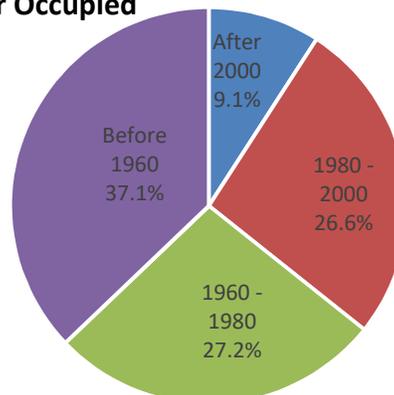
Need for Owner and Rental Rehabilitation

The majority of Nashua’s housing stock, 63% of owner-occupied housing units and 71% of renter occupied housing units was constructed prior to 1980. Furthermore, 50% of total units were built prior to 1940. Based on the age of most of the housing stock alone, there is a need for rehabilitation of both rental and ownership units.

**Year Home Built
Owner Occupied**



**Year Home Built
Renter Occupied**



The City has a long-standing housing rehab program for owner-occupied properties (1-4 units), and recently added a pilot program for rental rehab. Rental rehab has been ranked a high priority need year after year, and only last year was the City able to allocate CDBG funds toward this purpose. In its first year the full amount allocated (\$54,894) was used within approximately six months and assisted seven housing units. The total amount leveraged through owner contribution (private funds) was \$70,078, far exceeding the required 10% match. Other funds leveraged to these projects included City of Nashua Lead Paint & Healthy Homes grants totaling \$55,000; and \$33,000 of State of NH Lead Paint loan funds (though NHHFA). The success of the pilot and demand for additional funding highlights how federal dollars can leverage significant investment, while preserving affordability to tenants.

Estimated Number of Housing Units Occupied by Low or Moderate Income Families with LBP Hazards

NH’s Division of Health and Human Services (DHHS) issued the 2018 Lead Exposure Data Brief for the Greater Nashua Region (<https://www.dhhs.nh.gov/dphs/bchs/clpp/>). Within that report, Nashua ranks high across the board for all risk factors. For example, the percentage of older housing stock, % of rental units occupied by children under 6 years old, % of children living below poverty level, and children with no health insurance.

At the state level, recent changes to the law are phasing in lower blood lead levels as the trigger for investigation. As of July 1, 2019 the action level is 7.5 µg/dL and all children (not just high risk) shall be tested at age one and two. As shown on the side graph only a fraction of children are tested, which results in an underreporting of true lead exposure. We anticipate additional testing will identify greater numbers of children with EBLs. Related to recent changes in the HUD Lead Safe Housing Rule, the City works closely with the Nashua Housing and Redevelopment Authority when cases of EBLL are identified in their Housing Choice Voucher units. The action level under the federal Lead Safe Housing Rule is 5 µg/dL.

Annual Number (and Percent) of Children, 0 to 72 Months Old, Tested for Blood Lead in the Greater Nashua Region 2014 – 2018



Since 2007, the City, through the Urban Programs Department, has been successful in securing grant funding from HUD’s Office of Healthy Homes and Lead Hazard Control to address lead paint and other health hazards in units occupied by low-moderate income households. As of this writing the City has been awarded a total of \$11,700,000 through four separate grants.

The City of Nashua's Division of Public Health and Community Services provided free blood lead screenings, education and home visits with a specialist from the Environmental Health Department. Nurses offered one-on one education with parents of children with elevated blood lead levels. The City’s Code Enforcement Department has been trained to recognize potential lead hazards, especially in homes where young children reside, and make referrals to the Urban Programs Department.

MA-25 Public and Assisted Housing – 91.210(b)

Introduction

Totals Number of Units

	Program Type								
	Certificate	Mod-Rehab	Public Housing	Vouchers					
				Total	Project -based	Tenant -based	Special Purpose Voucher		
						Veterans Affairs Supportive Housing	Family Unification Program	Disabled *	
# of units vouchers available	0	40	662	853	0	853	0	0	0
# of accessible units									
*includes Non-Elderly Disabled, Mainstream One-Year, Mainstream Five-year, and Nursing Home Transition									

Table 34 – Total Number of Units by Program Type

Data Source: PIC (PIH Information Center)

Describe the supply of public housing developments:

Nashua Housing and Redevelopment Authority (NHRA) owns and operates 662 units of public housing in the City of Nashua, NH. Of the 662 units, 409 units are designated elderly/non-elderly disabled, and 253 units house families. Based on the current waiting list statistics there is a great need for safe, decent and affordable family units, with the two-bedroom family units in the highest demand.

Describe the number and physical condition of public housing units in the jurisdiction, including those that are participating in an approved Public Housing Agency Plan:

NHRA owns and operates 662 units of public housing. The backlog of modernization work needed to bring the buildings and units up-to-date is vast, with NHRA focusing on the building envelopes and mechanical systems and foregoing any modernization to interior of units and buildings. HUD utilizes the Public Housing Assessment System to score PHAs on its financial capacity, management of its programs, safety and security of developments, along with outstanding maintenance work needed. Securing funding to maintain developments is challenging, and requires deferment of work needed.

Public Housing Condition

Public Housing Development	Average Inspection Score
Nashua Housing and Redevelopment Authority	86 (2019)

Table 35 - Public Housing Condition

Describe the restoration and revitalization needs of public housing units in the jurisdiction:

NHRA has a backlog of restoration and revitalization needs within its portfolio of public housing developments. Due to funding constraints, NHRA has focused on maintaining the building envelopes and major systems as a priority. Work needed at NHRA developments includes, but is not limited to kitchen and bathroom modernization, common area painting, carpeting, flooring and lighting upgrades, along with security enhancements. Obsolete housing is a growing concern for housing authority's nationwide.

Describe the public housing agency's strategy for improving the living environment of low- and moderate-income families residing in public housing:

NHRA utilizes HUD Capital Fund Program funding to improve the living environment of its residents. Funding levels is not nearly enough to address the modernization needs within public housing developments. Prioritization of work occurs annually, with focus placed on roofs, windows, doors, major system components, and safety of the buildings.

As a result of funding shortages, NHRA is seeking ways to transform public housing through other funding sources. The redevelopment of public housing is becoming a necessity for most PHAs, and use of programs such as Rental Assistance Demonstration (RAD), Section 18 and LIHTC/HOME funds can enable the success of these conversions.

Discussion: The Nashua Housing and Redevelopment Authority (NHRA) is planning a major redevelopment that will have a significant (positive) impact on the number of affordable housing units, will greatly improve the layout of the area and living conditions of its current residents. The Bronstein Apartments (the "Property") is a 48-unit public housing development located on a 4.2-acre site at 41 Central Street, Nashua, NH and is owned and operated by the NHRA. The Property was built in 1971 and is in poor physical condition. NHRA has partnered with Boston Capital to redevelop Bronstein Apartments utilizing competitive 9% and 4% low-income housing tax credits, bond financing, and the HUD Section 18 Demolition/Disposition Program. The development team is proposing to replace the obsolete public housing with approximately 204 newly constructed units of mixed-income rental housing. Seventy (70) units will be affordable to extremely-low and low-income individuals and families.

The demolition and disposition of public housing is authorized under Section 18 of the Housing Act of 1937, as amended. NHRA will submit a Section 18 Demo/Dispo application to HUD in 2020. The application will meet all of the administrative steps and requirements of 24 CFR Part 970 and HUD Notice PIH 2018-04 including justification that the Property is obsolete as to physical condition, location, or other factors, making it unsuitable for housing purposes, and no reasonable program of modifications is cost-effective to return the public housing project or portion of the project to its useful life.

Once the Section 18 application is approved by HUD, the Declaration of Trust will be released from the Property and it will no longer operate under the public housing program, but under HUD's Project-Based Voucher Program. The Property will continue to operate with rental subsidy under Section 8 of the Housing Act of 1937.

The timeline for the redevelopment of Bronstein Apartments will be approximately 24-months.

MA-30 Homeless Facilities and Services – 91.210(c)

Introduction

The Greater Nashua Continuum of Care (GNCO) is the primary decision making group that manages the overall planning effort for the entire COC. The communities served by the COC include Nashua, Brookline, Amherst, Hollis, Merrimack, Milford, Mont Vernon, Hudson, Litchfield and Mason. The GNCO utilizes federal, state and private funds to address the needs of the homeless, including competitive HOPWA grants. Limited resources covered by this Plan are directed toward Homelessness. However, the City as a whole and many of its Divisions work to address this need outside of Plan resources. Most of the information relating to the GNCO was obtained from their annual HUD reports.

Facilities and Housing Targeted to Homeless Households

	Emergency Shelter Beds		Transitional Housing Beds	Permanent Supportive Housing Beds	
	Year Round Beds (Current & New)	Voucher / Seasonal / Overflow Beds	Current & New	Current & New	Under Development
Households with Adult(s) and Child(ren)					
Households with Only Adults					
Chronically Homeless Households					
Veterans					
Unaccompanied Youth					

Table 36 - Facilities and Housing Targeted to Homeless Households

Describe mainstream services, such as health, mental health, and employment services to the extent those services are used to complement services targeted to homeless persons

For virtually all homeless individuals and families, decent, safe, affordable housing is a critical step in ending homelessness. In some cases, this is their only need. Often, in addition to affordable housing, the homeless also need supportive services to make the transition to independent living or to deal with other problems. Common issues include substance abuse, mental illness, childcare, transportation, life skills, job training and other basic life skills.

The GNCOC hosts a Project Employment Connect annually, which connects homeless individuals with employers, in addition to other resources. Led by Chair of the Employment Subcommittee, which meets monthly, strategies around increasing access to employment includes providing clients with documents needed for employment, referring to job employment programs and assist with resume writing. GNCOC also provides clients with a list of agencies that will hire sex offenders and those with a criminal background along with a list of WorkForce jobs as well as having this posted at many of the agencies. In addition to providing transportation and bus passes to the job interviews and work sites, these agencies also have clothes and tools to assist with their new jobs. Employment programs are invited to COC meetings to educate projects on their resources and 211 staff are trained to assess and refer to resources to increase income. All GNCOC Programs help participants apply and maintain benefits through NH's single benefit application for cash assistance, medical, SNAP, childcare, medical beneficiary, and long term supports and services, that is accessible in paper and electronically. Staff are required to assist w/appeals if initial apps are denied. The COC System Administrator is SOAR trained, and all GNCOC funded projects have at least one SOAR trained staff person that assists clients with their SSI applications. BOSCO programs provide assistance in accessing employment programs through their supportive services, which assists individuals with increasing their cash income. The COC Coordinator at Harbor Homes is responsible for overseeing the GNCOC's strategy to increase job and income growth from employment.

List and describe services and facilities that meet the needs of homeless persons, particularly chronically homeless individuals and families, families with children, veterans and their families, and unaccompanied youth. If the services and facilities are listed on screen SP-40 Institutional Delivery Structure or screen MA-35 Special Needs Facilities and Services, describe how these facilities and services specifically address the needs of these populations.

The GNCOC publishes a *Homelessness Toolkit* - A resource package for homeless or soon to be homeless persons. It includes a listing of agencies and resources in the community. Rather than attach the document to this Plan, the most up to date version can be found at <http://www.nashua-coc.org/>.

The facilities available to meet the needs of homeless persons are also described in SP-40 and MA-35. Per HUD's mandate, the GNCOC has an ad-hoc committee working within the continuum as well as individuals participating on a statewide committee to implement a coordinated intake assessment program. This helps streamline referrals and make it easier for those seeking services to meet their needs. More coordinated utilization of the Homeless Management Information System (HMIS) is also strengthening the COC's ability to track individuals served.

Rapid re-housing funds are also being utilized in our community to assist families in moving out of shelters more quickly, but there still are not enough resources to easily free up shelter space. There has also been an increase in utilization of the COC's wrap around services, to shorten shelter stays. One GNCOC agency has a generous supportive services for Veteran's and their families that has done a tremendous job of preventing veteran homelessness.

There are three emergency shelters operating in Nashua, two receiving some Emergency Solutions Grant (ESG) funds as well as several agencies with transitional housing programs. Unfortunately, the need always far outweighs the capacity and programs often turn away those in need. One of the shelter programs has developed a new relationship with the two local hospitals to provide support for individuals seeking services from the Emergency Department for behavioral health issues, and provides emergency shelter once they are discharged from the hospital.

MA-35 Special Needs Facilities and Services – 91.210(d)

Introduction

Special needs groups include the elderly and frail elderly, persons with severe mental illness, persons with physical and/or developmental disabilities, persons with alcohol or other drug addiction, and persons living with HIV/AIDS. There are one or more organizations in Nashua that address the needs of these special needs populations. However, due to the growing number of persons with special needs, gaps in capacity remain for housing and supportive services.

“211” top calls (United Way 2017):

Nashua	
Total Calls	5,637
Total Referrals	7,404
Top 5 Calls Reasons	
1. Tax Prep Assistance	
2. Homeless Related	
3. Electric Payment Assistance	
4. Undesignated Temp Financial Assistance	
5. Legal Counseling	

Including the elderly, frail elderly, persons with disabilities (mental, physical, developmental), persons with alcohol or other drug addictions, persons with HIV/AIDS and their families, public housing residents and any other categories the jurisdiction may specify, and describe their supportive housing needs

Nashua’s population is aging rapidly, which increases the need for senior housing and services. The elderly, including the frail elderly, need access to facilities and support services to ensure safe, decent, affordable housing. Many seniors are on fixed incomes and cannot afford to retrofit housing as their need for better accessibility increases. Likewise, when the elderly are no longer able to care for themselves the need for in-home care or residential facilities becomes crucial. Over the next several years the vanguard of the "Baby Boomers" will hit retirement age and their incomes will level since they will be past the peak earning years as a generation. Health care and supportive services will gradually become a larger concern as they get older, which will impact the system in a more dramatic fashion since they are the largest cohort to reach retirement age in US history.

As with the elderly, persons with mental, physical, and developmental disabilities also need access to facilities or programs that ensure safe, decent, affordable housing. Because children and young adults are represented in this population, the impacts of this group are different from the elderly. The length of time that they need supportive housing is generally much longer. Additionally, those with drug or alcohol addictions, persons with HIV/AIDS and their families need greater access to supportive housing. The City and its partner organizations work in tandem to either provide services or refer these groups to the proper supportive organizations.

Describe programs for ensuring that persons returning from mental and physical health institutions receive appropriate supportive housing

The GNCOC's adopted discharge protocols, which covers discharge from foster care, health care, mental health and corrections can be found at their website <http://nashua-coc.org/>.

Foster Care: Future planning for children 16 and older (or younger if in state guardianship) includes: adult living preparation, ed. and career planning, employment options, vocational training programs, adult connections and/or mentors, family supports, medical coverage and adult housing options or alternatives that are safe and affordable. DCYF Aftercare Services is a voluntary program that provides continued planning and support for eligible young adults between the ages of 18-21 formerly in DCYF/DJJS foster care. This program offers a range of supports and services designed to assist young adults in reaching their ed., employment and personal goals including limited services and funds for housing and related expenses. This Discharge Planning Protocol is understood and agreed to by the BOS and the systems of care in the GNCOC.

Health Care: A revised Homeless Prevention Discharge Plan was adopted by both the Discharge Planning Committee and the DHHS Commissioner in March 2007. Members from various health care providers were represented. A protocol was established as part of the plan that calls for health care providers to communicate with homeless outreach services and housing resources and to provide human services resource packets for distribution to patients who are homeless upon admission and/or identified as at risk of homelessness upon discharge. This Discharge Planning Protocol is understood and agreed to by the BOS and the institutions and systems of care in the GNCOC.

Mental Health: Development of an individualized discharge plan is initiated by the assigned treatment team upon admission and modified to reflect new data throughout the treatment planning process. The patient/legal guardian, family and significant others, as well as relevant outpatient providers, are included in the development and implementation of the discharge plan. It is designed to facilitate a smooth transition of the patient from the Hospital to home, community or other facility in a manner that will minimize delays in discharge and offer a continuum of care between the Hospital and anticipated care providers. Discharge planning shall be conducted in accordance with all federal, state and regulatory requirements. The discharge plan shall address the patient's housing preferences, level of care needs, accessibility to services and affordability. Discharge to homeless shelters, motels and other non-permanent settings shall be avoided to the maximum extent practicable. The Administrator, Community Integration, under the direction of the Medical Director, oversees this process. This Discharge Planning Protocol is understood and agreed to by the BOS and the institutions and systems of care in the GNCOC.

Corrections: The Department of Corrections has a formal protocol in place for parolees. The protocol includes inmates developing a formal discharge/parole plan, residing in an on-site transitional housing facility and accessing Department Halfway Houses upon release. DHHS has entered into a Memorandum of Agreement with the Department of Corrections regarding Medicaid eligibility determination at least 90 days prior to an inmate's release. According to the Bureau of Homeless and Housing Services (BHHS), shelters and McKinney-Vento funded transitional and permanent housing programs are not appropriate housing for this population. This Discharge Planning Protocol is understood and agreed to by the BOS and the institutions and systems of care in the GNCOC.

Specify the activities that the jurisdiction plans to undertake during the next year to address the housing and supportive services needs identified in accordance with 91.215(e) with respect to persons who are not homeless but have other special needs. Link to one-year goals. 91.315(e)

The GNCOC will continue to implement several strategies which include: providing clients with documents needed for employment (identification cards and birth certificate), refer to job employment programs which help clients to obtain their GED-TASC and assist with resume writing, allow the homeless to use their address of job applications, SOAR Team Members assist by walking people through the process of signing up for benefits. GNCOC will also provide clients with a list of agencies that will hire sex offenders and those with a criminal background.

Specific outreach to the LGBT population and training to providers is also a priority. Southern NH HIV/AIDS Task Force is a non-profit AIDS Service Organization providing affordable housing, case management, and supportive services including access to medical care and medications to individuals and families living with HIV/AIDS and offers HIV testing and counseling to those at risk of HIV infection. As a member of the GNCOC, this agency offers a unique, holistic approach to care and prevention resulting in better outcomes for clients and community. While this Task Force is the lead agency, no GNCOC agency discriminates with regards to LGBT, and these agencies are trained on a regular basis on providing equal access to HUD Programs. Agencies also receive a list of resources to refer LGBT individuals to depending upon their need. Any client or community member with a discrimination claim due, to HIV status or LGBTQIA identity, are referred to GLAD – Gay and Lesbian Advocates and Defenders – New Hampshire.

In order to better identify and assess the needs of homeless youth, the GNCOC has partnered with the Balance of State COC (BOSCO) where COC leadership engaged the statewide Youth Subcommittee, which includes COC funded programs, child protection and juvenile justice staff, NH's Runaway and Homeless Youth programs(administered by Child and Family Services – CFS), and members of the former NH Homeless Teen Task Force, State Representatives, the Department of Education, and school district McKinney Vento homeless liaisons to increase PIT count participation by youth centered providers.

The GNCOC conducts an event, the Employment Connect annually at the Nashua Public Library. This event is targeted toward at-risk and homeless individuals to link with employment resources.

For entitlement/consortia grantees: Specify the activities that the jurisdiction plans to undertake during the next year to address the housing and supportive services needs identified in accordance with 91.215(e) with respect to persons who are not homeless but have other special needs. Link to one-year goals. (91.220(2))

The City is supporting the Nashua Soup Kitchen & Shelter's efforts to redevelop a former school into new a shelter facility, offering emergency shelter for single adults and families with children, as well as the creation of 10 units of permanent housing for individuals experiencing homelessness.

The City offers home rehabilitation to provide access ramps, lifts, accessible bathrooms, etc., for persons with mobility impairments through the CDBG Housing Improvement Program. The City will continue to support agencies that provide supportive housing services for the special needs populations. These activities are linked to the one year goals of affordable housing, creating livable communities, and public services. CDBG funds are further directed to agencies that assist special needs populations. Renovations of facilities at Opportunity Networks and PLUS Company are slated for funding in the

upcoming year. In addition, the City's HOME funds are often directed to projects developing supportive housing.

In response to the opioid drug crisis facing New Hampshire, a new task force on Substance Use Prevention, Treatment and Recovery was formed in January 2016 in Nashua, and began meeting to discuss how various organizations and agencies can work together to combat the opioid crisis. After 14 overdose deaths occurred in Nashua within a 2-month period (the highest number to date at that point in time), the task force proposed the creation of a safe station initiative that would serve those who are seeking treatment and recovery from drugs and substance misuse.

The City of Nashua (notably its Fire Department) has partnered with Harbor Homes, Ambulance Medical Rescue (AMR), St. Joseph's Hospital, Southern NH Health System and Revive Recovery Resource Center to implement a unique and successful strategy for helping individuals in need of substance use disorder treatment. Since late November 2016, 24 hours a day, an individual in need of help can go to any Nashua fire station ("Safe Station") and ask for assistance. The firefighters provide a quick assessment to determine if emergency medical care may be needed. Within 20 minutes, through texts, emails, and phone calls, a Harbor Homes trained recovery support provider responds in person to transport the participant to one of three locations where substance use disorder treatment, behavioral and primary health care, and emergency shelter will be provided.

As most City hospital Emergency Rooms may be overwhelmed with patients, this program assists all by weeding out those individuals seeking assistance that may not need immediate medical attention, but need immediate help. In its first year, over 1,100 individuals received assistance and the incidence of overdoses was reduced by 24%. The City plans to expand the network and services offered to increase the number emergency shelter beds available.

These are a few examples of assisting special needs populations obtain, or gain access to supportive housing.

MA-40 Barriers to Affordable Housing – 91.210(e)

Negative Effects of Public Policies on Affordable Housing and Residential Investment

Fair housing and affordable housing are closely intertwined. The Analysis of Impediments to Fair Housing (conducted as an Assessment of Fair Housing) indicates there are some public policies that affect the limited availability of affordable housing. Examples include single family zoning restrictions (see ADU discussion below), lot and green space restrictions, etc. Other barrier examples include families opting to house multiple households in one unit, due to rising rents and economic downturns. Nashua does not restrict the number of related persons in one dwelling unit, however there can only be up to three unrelated people. The City's most affordable housing, namely rental, is coterminous with the inner city where the housing is dense, the population is predominately low-income and open space is limited. Parking in higher density areas or for homes with large families is a problem as parking space is limited. Nashua generally does not allow overnight parking on city streets, however recently revised its parking ban to allow certain streets (those in the most dense/low-income neighborhoods) to park on the street. Lastly, although diversity has increased among elected and appointed boards in recent years, the decision making boards for land use regulations and tax policy do not reflect the diversity in the City's population. Residents are not substantially engaged in land use policies.

MA-45 Non-Housing Community Development Assets – 91.215 (f)

Introduction

The following tables reflect pre-populated information provided by HUD. The assessment and narrative that follow were derived through consultation with the public and the City’s Economic Development Office. Several comments were received through public input regarding the lack of high-tech, well paying jobs in Nashua. These comments and the discussion below is reflected in the priority ranking of economic development, attracting businesses and workforce training.

Economic Development Market Analysis

Business Activity

Business by Sector	Number of Workers	Number of Jobs	Share of Workers %	Share of Jobs %	Jobs less workers %
Agriculture, Mining, Oil & Gas Extraction	77	0	0	0	0
Arts, Entertainment, Accommodations	4,101	5,023	10	10	1
Construction	1,813	1,143	4	2	-2
Education and Health Care Services	7,485	9,179	18	19	1
Finance, Insurance, and Real Estate	2,326	1,435	5	3	-3
Information	1,382	1,512	3	3	0
Manufacturing	6,069	6,807	14	14	0
Other Services	1,578	1,547	4	3	-1
Professional, Scientific, Management Services	4,836	4,216	11	9	-3
Public Administration	0	0	0	0	0
Retail Trade	6,418	10,639	15	22	7
Transportation and Warehousing	1,055	1,107	2	2	0
Wholesale Trade	2,317	3,041	5	6	1
Total	39,457	45,649	--	--	--

Table 37 - Business Activity

Data Source: 2011-2015 ACS (Workers), 2015 Longitudinal Employer-Household Dynamics (Jobs)

Labor Force

Total Population in the Civilian Labor Force	49,935
Civilian Employed Population 16 years and over	46,500
Unemployment Rate	6.88
Unemployment Rate for Ages 16-24	24.39
Unemployment Rate for Ages 25-65	4.94

Table 38 - Labor Force

Data Source: 2011-2015 ACS

Occupations by Sector	Number of People
Management, business and financial	12,485
Farming, fisheries and forestry occupations	2,260
Service	4,675
Sales and office	12,025
Construction, extraction, maintenance and repair	3,095
Production, transportation and material moving	3,005

Table 39 – Occupations by Sector

Data Source: 2011-2015 ACS

Travel Time

Travel Time	Number	Percentage
< 30 Minutes	27,450	63%
30-59 Minutes	11,435	26%
60 or More Minutes	4,385	10%
Total	43,270	100%

Table 40 - Travel Time

Data Source: 2011-2015 ACS

Education:

Educational Attainment by Employment Status (Population 16 and Older)

Educational Attainment	In Labor Force		Not in Labor Force
	Civilian Employed	Unemployed	
Less than high school graduate	2,305	430	1,475
High school graduate (includes equivalency)	8,935	635	2,350
Some college or Associate's degree	11,850	960	1,950
Bachelor's degree or higher	15,405	405	2,480

Table 41 - Educational Attainment by Employment Status

Data Source: 2011-2015 ACS

Educational Attainment by Age

	Age				
	18–24 yrs	25–34 yrs	35–44 yrs	45–65 yrs	65+ yrs
Less than 9th grade	285	255	275	1,055	1,045
9th to 12th grade, no diploma	810	840	500	1,285	865
High school graduate, GED, or alternative	2,655	3,215	2,410	6,310	3,385
Some college, no degree	2,765	2,850	2,120	5,205	2,000
Associate's degree	450	885	1,190	2,505	840
Bachelor's degree	920	3,715	2,830	5,265	1,830
Graduate or professional degree	95	1,620	1,660	3,205	1,530

Table 42 - Educational Attainment by Age

Data Source: 2011-2015 ACS

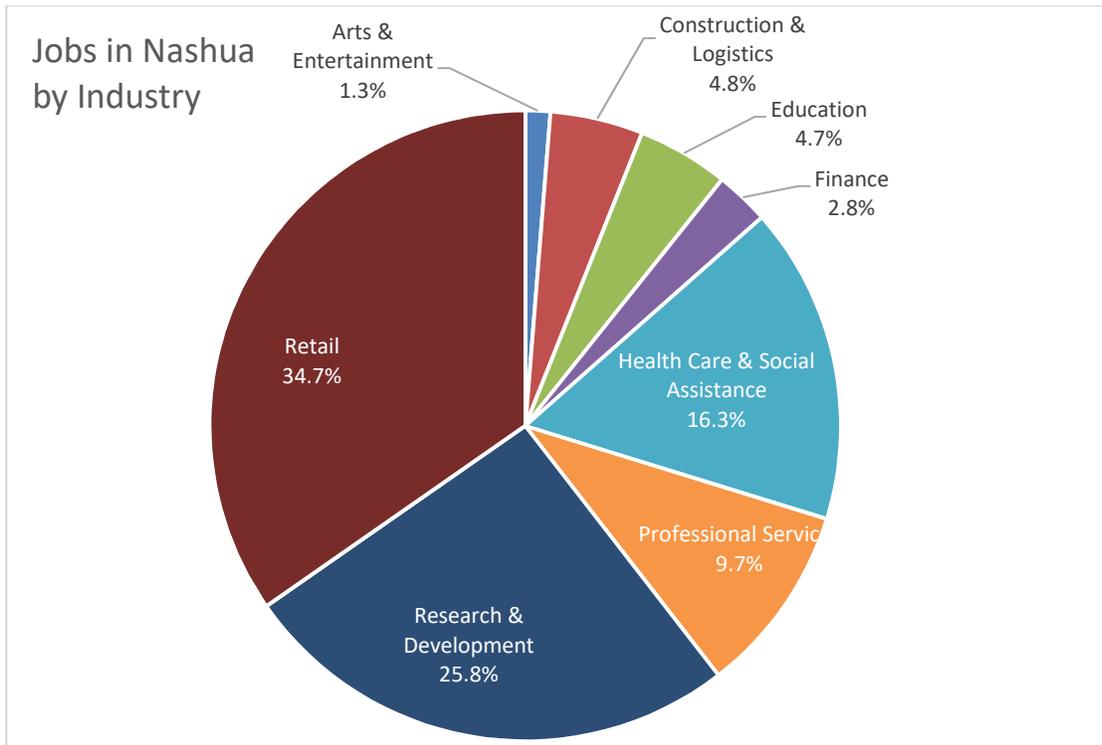
Educational Attainment – Median Earnings in the Past 12 Months

Educational Attainment	Median Earnings in the Past 12 Months
Less than high school graduate	19,648
High school graduate (includes equivalency)	31,129
Some college or Associate's degree	38,337
Bachelor's degree	54,335
Graduate or professional degree	74,452

Table 43 – Median Earnings in the Past 12 Months

Data Source: 2011-2015 ACS

Based on the Business Activity table above, what are the major employment sectors within your jurisdiction?



Retail: Nashua is a premier shopping destination in the region and ranks second only to Boston among New England communities in terms of sales and square footage of retail space. Shoppers from all over the northeast are attracted to Nashua stores for their variety of goods and status as a sale-tax-free destination.

Retail in Nashua is distributed among three primary business districts — the South Nashua, Downtown, and Amherst Street. Each retail district enjoys convenient access to the F.E. Everett Turnpike and US 3, which is the major highway that connects Nashua to Manchester and Concord to the north and Boston to the south.

Research & Development (Manufacturing): Nashua’s booming textile industry in the mid-19th century was just the beginning of its renowned reputation as a leading center of manufacturing in New Hampshire and the metro-Boston region. While the companies, products, and production methods have changed over the past 150 years, the city’s manufacturing economy has remained steadfast and resilient.

Today, Nashua is home to an eclectic variety of companies which make goods that are shipped all over the world. These products range from simple metal pins and commercial food products to precision machined mechanical parts and printed circuit boards.

Education & Healthcare: Health care plays a critical role in local economic development. Nashua has a well-developed healthcare industry and serves as the medical hub for much of southern New Hampshire. The three major hospital systems in Nashua serve as major employers for our region, as well as attractions for new businesses and workers who make access to top-notch medical services a priority.

) Southern New Hampshire Medical Center

-) St. Joseph Hospital
-) Dartmouth-Hitchcock Nashua

Southern New Hampshire Medical Center and St. Joseph Hospital constitute the second and third largest employers in Nashua with 2,174 and 1,741 employees respectively.

Our local colleges and universities have strong academic and training programs that support the continued infusion of skilled workers into this industry.

-) Rivier University offers a number of programs in nursing and health care management that include two-year, four-year, and graduate degree programs. Rivier also offers a B.S. program in biology with a concentration in allied health
-) Nashua Community College offers students an associate’s degree in Nursing program, as well as professional development training
-) Daniel Webster College offers a B.S. in health care management
-) St. Joseph School of Nursing offers and Associate of Science in Nursing and a Health Occupations Nursing Assistant program

Describe the workforce and infrastructure needs of the business community:

New Hampshire has a well-earned reputation as a destination for growing businesses and is able to attract the necessary employees to sustain them. Across all industries, NH’s skilled workforce is one of the most educated in America. As the fastest growing population in New England, New Hampshire offers 1.3 million potential employees, the majority of them are living within 35 miles of Nashua.

Greater Nashua’s colleges and universities produce thousands of newly-trained graduates ready to work in the fields of engineering, business, technical fields, business communications, and product management, among hundreds of other industries. iUGO, the Nashua area’s premier young professionals organizations, boasts over 230 members between the ages of 20 and 40.

The labor force of the Boston area is less than an hour’s drive away. Nashua’s proximity to Boston offers local companies access to an educated and dynamic workforce. Students graduating from Harvard, MIT, Boston College, Boston University, Northeastern, and many other universities often search for jobs in Nashua.

As discussed earlier in this Plan, the labor workforce is strong, but affordable housing options are limited. Companies have reached out to the City indicating their workers often locating out of the city in order to obtain their desired housing at affordable price points.

Describe any major changes that may have an economic impact, such as planned local or regional public or private sector investments or initiatives that have affected or may affect job and business growth opportunities during the planning period. Describe any needs for workforce development, business support or infrastructure these changes may create.

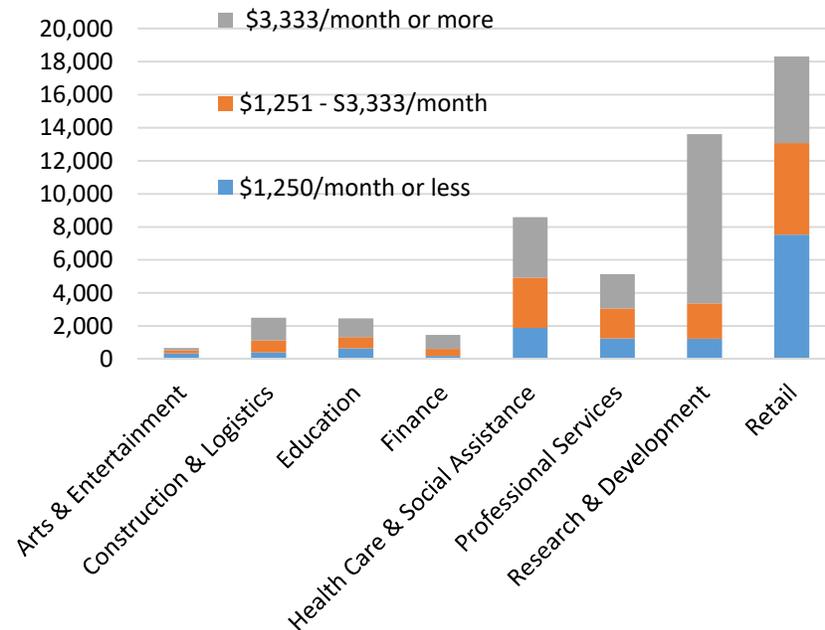
The City of Nashua recently completed construction of the Broad Street Parkway, a two-lane roadway approximately 1.8 miles long that improved access between the Broad Street interchange with the F.E. Everett Turnpike and the westerly edge of Downtown Nashua.

The Broad Street Parkway has opened development opportunities in the heart of Nashua, including the Nashua Millyard, the Mohawk Tannery site and the Front and Franklin Mill District. All of these areas are formerly industrial areas in transition. Once thriving industrial areas, these sites languished due to concerns over brownfields, poor access and disinvestment. Nashua’s brownfields program has helped provide funding for cleanup. The Broad Street Parkway has connected these areas to a modern transportation infrastructure for the first time in decades, setting the stage for redevelopment of sites and vacant buildings into people-intensive uses, including housing, office uses and high tech manufacturing. New employment opportunities will be created just steps away from Nashua’s target neighborhoods.

Progress continues to be made on the Exit 36 South Planning Study to assess the effectiveness of a south bound off-ramp at exit 36 on the F.E. Everett Turnpike, near the New Hampshire and Massachusetts border. Once constructed, the project will help to alleviate traffic bottlenecks in Nashua’s south end, facilitate growth on development sites and help maximize multi-modal transportation opportunities. The study is currently evaluating traffic flows and potential economic benefits to businesses in the area.

How do the skills and education of the current workforce correspond to employment opportunities in the jurisdiction?

It is important to note, that while there is a strong job market in Nashua, retail jobs are often low-paying and hold the largest share of labor market. See graph below:



Describe any current workforce training initiatives, including those supported by Workforce Investment Boards, community colleges and other organizations. Describe how these efforts will support the jurisdiction's Consolidated Plan.

Does your jurisdiction participate in a Comprehensive Economic Development Strategy (CEDS)?

If so, what economic development initiatives are you undertaking that may be coordinated with the Consolidated Plan? If not, describe other local/regional plans or initiatives that impact economic growth.

MA-50 Needs and Market Analysis Discussion

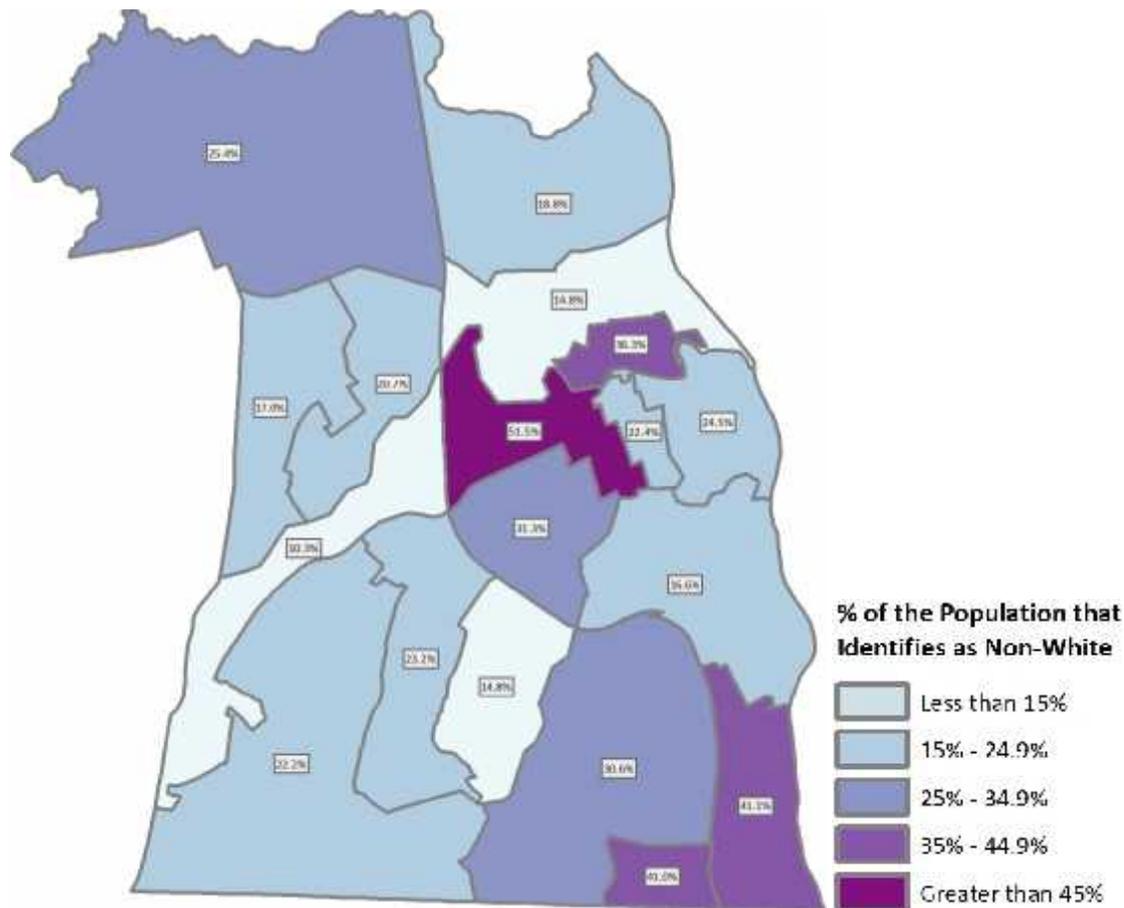
Are there areas where households with multiple housing problems are concentrated? (include a definition of "concentration")

For this discussion, a concentration is defined as a Census Tract is experiencing multiple housing problems at a rate of 50% or greater. This means that more than half of the households have a housing problem.

The rate of housing problems varies, depending on the income level. Moderate income households in Census Tract 104 experience housing problems at a rate of 49-76%. Extremely low-income households are affected in a wider area. 70-80% of extremely low-income households in Tracts 104, 105, 106 and 110 experience housing problems.

Are there any areas in the jurisdiction where racial or ethnic minorities or low-income families are concentrated? (include a definition of "concentration")

The definition of concentration used by the City of Nashua means that a census tract experiences race/ethnic rates at 10% or higher than the city wide percentage. Tract 108 continues to appear.



What are the characteristics of the market in these areas/neighborhoods?

While these neighborhoods are primarily residential, they are dotted with non-residential uses such as churches, corner stores and nearby schools. The neighborhoods are also within walking distance to downtown which includes amenities such as the library, restaurants, and the bus station. Commercial areas are also accessible by foot along West Hollis and Main Streets.

Are there any community assets in these areas/neighborhoods?

Many assets exist in these areas. Both of the City's hospitals, who are major employers in Nashua are located in this area; there is well maintained open and recreation space, including the Nashua Heritage Rail Trail and a newly constructed bridge allowing pedestrian access to Mine Falls park. People are the major assets in these neighborhoods, having a strong sense of community and deep roots. Resident surveys indicate many households prefer to live in these neighborhoods due to access to family, friends and walkable markets.

Are there other strategic opportunities in any of these areas?

There are many opportunities to improve the quality of the housing stock and help property managers to increase the variety and affordability of housing options through implementing programs that focus on property maintenance and education.

Property Maintenance: work with landlords to maintain and enhance their properties; ensure continued funding of the CDBG Rental Rehab program; continue to support agencies like Neighbor Works of Southern NH to target reinvestment and redevelopment opportunities.

Education: Establish a program to coordinate hiring carpenters at reasonable rates to renovate houses while teaching a trade to teenagers who are not considering college; Educate residents about proper steps involved in removing lead from their property; Educate residents about their rights to live in properly maintained rental unit; Translate the current "Nashua Housing Authority Referral List" into Spanish and Portuguese and widely distribute this list; Establish a program to assist landlords and renters to deal with bedbugs to help prevent and resolve the problems

Another key opportunity, already discussed in this Plan is the redevelopment of public housing at Bronstein. This large scale public housing site occupies a large swath of land and will dramatically improve the area once complete.

SP-10 Geographic Priorities – 91.215 (a)(1)

Geographic Area

Table 44 - Geographic Priority Areas

General Allocation Priorities

Describe the basis for allocating investments geographically within the jurisdiction (or within the EMSA for HOPWA)

The basis for allocating resources geographically is driven by need. Those areas with the highest concentrations of poverty, with the least access to opportunity and in greatest need of revitalization will be the focus of area improvements. All activities funded will primarily benefit low- and moderate-income persons or households, either as direct service or financial assistance or by making improvements in areas benefitting primarily low- and moderate- income persons. Some activities, for reasons of qualification and/or desired beneficiaries, will be focused geographically. Some examples of how the City anticipates geographically focused investments are: public infrastructure improvements, park and green space improvements and other area benefit activities. Although the City is not designating a formal target area, there is a clear distinction of need in Census Tracts 104-109, which is where the majority of these improvements will occur.

A strong partner in addressing needs, Neighborworks of Southern NH, has focused its attention to the area known as the “Tree Streets”. Funds under prior plans have been directed to NWSNH to assist in these efforts. NWSNH’s real estate investment in the Tree Streets neighborhood began in 2012 with the acquisition of two units at the corner of Pine and Central Streets. These HOME assisted units were developed by the NHS of Greater Nashua and NWSNH was able to acquire the units and continue to operate them as affordable rental housing. More recently, in 2018 NWSNH acquired eight additional units in the neighborhood at the corner of Ledge and McLaren Streets. These units needed significant capital improvements and we were improved by the City’s investment of HOME funds for renovations at these apartments. NWSNH acquired an additional four-unit property on Ash Street that they are currently working on a plan for renovating. They have also acquired a vacant lot that was owned by the City on the corner of Pine and Central Streets where they have approvals to build a two-family home that will be for-sale to a first time homebuyer with a supplemental rental unit. Construction is scheduled to begin in the summer of 2020. Finally, demolition is scheduled for the burned-out property at 38.5 West Hollis Street that was also purchased from the City of Nashua. The redevelopment plan for this prominent corner includes a new four to six unit building and the schedule for completion is in 2021. NWSNH is also seeking to acquire the former homeless shelter property located on Ash Street from the Nashua Soup Kitchen and Shelter upon the completion of their new facility on Spring Street. This is anticipated to be a major renovation or new construction of a two family similar to that planned at 40 Pine Street. (A map of NWSNH’s efforts is attached in the Appendices)

Strategic Plan

SP-05 Overview

Strategic Plan Overview

The Strategic Plan presents the priority needs and goals determined through consultation with the public, City departments, and service providers. The community's priority needs in housing, public improvements, public services, and economic development are highlighted describing where and how the City will geographically distribute its federal grant funding. The City of Nashua's homelessness and anti-poverty strategies are presented along with the Nashua Housing Authority's provision of public housing. Findings from the City's Analysis of Impediments to Fair Housing Choice (conducted as an Assessment of Fair Housing) is the basis for the barriers to affordable housing in Nashua along with the report's recommendations to remove these barriers. Additionally, the Strategic Plan addresses the City's strategy for eliminating lead-based paint hazards in housing.

The anticipated resources and allocation of funding demonstrates the City's strategic approach to accomplishing its goals. The goals are based on the highest community priority needs. Anticipated resources focus on federal resources and it is important to note that the City is not the grantee for all the funding listed. For example, the Nashua Housing and Redevelopment Authority and the GNCOC receive HUD funding directly according to applications they submit.

SP-25 Priority Needs - 91.215(a)(2)

Priority Needs

Table 45 – Priority Needs Summary

1	Priority Need Name	Production of Affordable Rental Housing
	Priority Level	High
	Population	Extremely Low Low Moderate Large Families Families with Children Elderly Chronic Homelessness Individuals Families with Children Mentally Ill Chronic Substance Abuse veterans Persons with HIV/AIDS Victims of Domestic Violence Elderly Frail Elderly Persons with Mental Disabilities Persons with Physical Disabilities Persons with Developmental Disabilities Persons with Alcohol or Other Addictions Persons with HIV/AIDS and their Families Victims of Domestic Violence
	Geographic Areas Affected	City-wide
	Associated Goals	Rental Housing

	Description	A high need for increased affordable rental housing and access to affordable rental housing was identified through the consultation and citizen participation process. Nashua's low and moderate income community, including the homeless and special needs population, have difficulty securing affordable rental housing. HUD maximum rents are not affordable to low and very-low income households - provide deeper subsidy to reduce rents at assisted housing. Redevelop rather than new construction to maximize funds, ensure housing is located accessible to services being mindful not to increase poverty density, encourage affordable housing with supportive services.
	Basis for Relative Priority	Data shown in housing needs and market analysis, supported by community input and consultations.
2	Priority Need Name	Rehabilitation of Existing Units
	Priority Level	High
	Population	Extremely Low Low Moderate Large Families Families with Children Elderly
	Geographic Areas Affected	City-wide
	Associated Goals	Homeowner Rehab Rental Rehab Ensure safe sanitary housing Fair Housing
	Description	Rehabilitation of existing rental and owner-occupied units to improve/correct life and safety issues for low-moderate income residents.
	Basis for Relative Priority	The majority of Nashua's housing stock, 63% of owner-occupied housing units and 71% of renter occupied housing units was constructed prior to 1980. Furthermore, 50% of total units were built prior to 1940. Consultations and citizen input indicated rehab of existing units as a high priority.
	3	Priority Need Name
Priority Level		High

	Population	Extremely Low Large Families Families with Children Elderly Chronic Homelessness Individuals Families with Children Mentally Ill Chronic Substance Abuse veterans Persons with HIV/AIDS Victims of Domestic Violence
	Geographic Areas Affected	City-wide
	Associated Goals	Rental Assistance Fair Housing
	Description	Temporary rental assistance under programs such as HOME TBRA.
	Basis for Relative Priority	Fair Market Rent and market rents are not affordable to low-moderate income individuals. Subsidy is needed to help bridge the gap.
4	Priority Need Name	Public Facilities
	Priority Level	High

	Population	Extremely Low Low Moderate Large Families Families with Children Elderly Chronic Homelessness Individuals Families with Children Mentally Ill Chronic Substance Abuse veterans Persons with HIV/AIDS Victims of Domestic Violence Unaccompanied Youth Elderly Frail Elderly Persons with Mental Disabilities Persons with Physical Disabilities Persons with Developmental Disabilities Persons with Alcohol or Other Addictions Persons with HIV/AIDS and their Families Victims of Domestic Violence Non-housing Community Development
	Geographic Areas Affected	City-wide
	Associated Goals	Improvements to facilities for youth Improvements to facilities for special needs pop Public facility improvements - general
	Description	There exists a need to improve and maintain public facilities. For the purpose of this Plan, public facilities are considered community, neighborhood or non-profit owned facilities that are open and available to the public. Public input indicated an emphasis on facilities for at-risk youth, elderly and special needs populations.
	Basis for Relative Priority	Input received from the community and citizen participation indicated a high priority.
5	Priority Need Name	Public Improvements and Infrastructure

	Priority Level	Medium
	Population	Extremely Low Low Moderate
	Geographic Areas Affected	Low-moderate income neighborhoods
	Associated Goals	Infrastructure improvements Parks/Trails/Green space
	Description	Public Improvements and Infrastructure including: sidewalks, transportation infrastructure, lighting, parks and recreation space.
	Basis for Relative Priority	Input received from the community and citizen participation ranked this a moderate priority.
6	Priority Need Name	Public Services
	Priority Level	High
	Population	Extremely Low Low Moderate
	Geographic Areas Affected	City-wide
	Associated Goals	Public Services - Youth Public Services - Special Needs Public Services - Transportation Public Services - General
	Description	The need to maintain support toward public services ranked extremely high through consultations and citizen input. Certain services were specifically noted, such as youth services (especially mental health for youth), senior, disabled and special population services. Transportation services was ranked highest need.
	Basis for Relative Priority	Input received from the community and citizen participation indicated this as a high priority.
7	Priority Need Name	Economic Development

	Priority Level	High
	Population	Extremely Low Low Moderate
	Geographic Areas Affected	City-wide
	Associated Goals	Business Assistance Economic Development - general
	Description	A need exists for workforce development and job training in order to provide economic opportunities for the low and moderate individuals. A top need related to economic development was transportation related, including extending commuter rail service from Lowell, MA, expanded fixed route hours, expanded locations to employment hubs (i.e. Merrimack Premium Outlets). Although in most cases, transportation is considered a public service, its connection to economic development is noted. Support businesses that provide jobs for low-income individuals as well as micro-enterprise development.
	Basis for Relative Priority	Input received from community and citizen participation indicated this as a high priority.
8	Priority Need Name	Homelessness
	Priority Level	High
	Population	Extremely Low Chronic Homelessness Individuals Families with Children Mentally Ill Chronic Substance Abuse veterans Persons with HIV/AIDS Victims of Domestic Violence Unaccompanied Youth
	Geographic Areas Affected	City-wide
	Associated Goals	Homelessness Fair Housing

	Description	There is a high need for additional facilities and beds for homeless individuals. Consultations indicated a need to diversify homeless facility types, such as families, single women, individuals with pets, young adults (18-22 years of age) who have aged out of foster care, employment programs, SRO housing with intensive supportive services.
	Basis for Relative Priority	Data from the Continuum of Care and input from community and citizen participation indicated this as a high priority.
9	Priority Need Name	Homeownership
	Priority Level	High
	Population	Low Moderate Large Families Families with Children Elderly
	Geographic Areas Affected	City-wide
	Associated Goals	Homeownership Fair Housing
	Description	There is a high need to assist low-moderate income households purchase a home.
	Basis for Relative Priority	Single family (1-4 units) costs are not attainable for low-moderate income households. Housing needs analysis and input from the community and citizen participation indicated this as a high priority.
10	Priority Need Name	Brownfields Remediation
	Priority Level	Low
	Population	Other
	Geographic Areas Affected	Commercial areas of the city
	Associated Goals	Brownfields Redevelopment
	Description	Remediation of sites that are contaminated, or perceived to be contaminated.

<p>Basis for Relative Priority</p>	<p>There are many contaminated sites in Nashua, where historically asbestos was dumped in vacant areas. Nashua's history as a mill and manufacturing city also created waste products that have contaminated many industrial sites. Priority was assigned based on consultations, public input and weighting against other higher need priorities.</p>
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Narrative (Optional)

The priority needs presented above represent the greatest challenges faced by the City of Nashua that can be addressed with funds under this Plan. Through consultation and community input the City was able to determine the priority needs of the community and how best to address those needs.

The high cost of housing in the City of Nashua creates the need for affordable rental housing for the community's low and moderate income residents. As seen in the needs assessment, housing cost burden impacts renters and homeowners alike. Utilizing CDBG and HOME funds will allow the City to maintain and improve existing rental and homeowner housing in order to maintain the affordability of living in Nashua. Increasing the access and availability of the rental housing supply will also enable homeless or those at-risk of homelessness the opportunity to have safe, decent, sanitary, and affordable housing. In addition, homeownership assistance is needed for low and moderate income residents, supported by both HOME and local funding sources.

Additionally, greater economic opportunities are needed throughout the low and moderate income areas of the City. Workforce development and job training will best serve those members of the community who do not have the resources or opportunity to fulfill their potential. Assistance to existing or new businesses will allow for increased job opportunities within the low and moderate income areas of Nashua and improve the overall economic climate of the City.

Transportation related improvements and services were noted across all sectors of need. Nashua's existing transit network is strong and residents indicated having adequate access to the bus system. However, rail service, by extension of the Lowell, MA line; extending bus service to the Merrimack, NH Premium Outlets; and expanded late-night/weekend hour bus service were all top needs identified. Transportation has far reaching effects to Nashua's low-income population and where possible, funds covered by this Plan should be sought and applied to transportation needs.

Finally, the need is high for improvements to public facilities, and services. Improving the quality of low and moderate income community areas through sidewalk improvements, street lighting, etc. will serve to create a safe and sustainable community. The use of CDBG funds to create and improve public facilities serving the low and moderate income community will foster greater community development. Improved and greater access to public services is a high priority need reflected through consultation and evidence by the lack of resources and support to sufficiently meet the needs of those reliant upon support from the public or nonprofit sector.

SP-30 Influence of Market Conditions – 91.215 (b)

Influence of Market Conditions

Affordable Housing Type	Market Characteristics that will influence the use of funds available for housing type
Tenant Based Rental Assistance (TBRA)	The City has not used HOME funds toward TBRA in previous years. However, due to the increase in housing costs, there is not only a need, but an interest in exploring HOME funds toward TBRA.
TBRA for Non-Homeless Special Needs	If the City pursues TBRA under this Plan, assistance may be directed to special populations (i.e. elderly, homeless, disabled, HIV/Aids, etc). Subsidies may be for 12 months, with the option to renew an additional 12 months, but may not exceed 24 months. Funds may cover security deposits, asgrants or loans. If loans, funds are considered program income.
New Unit Production	Nashua is a nearly fully built out community which limits availability of practical land for new construction. This, paired with high building costs, makes it financially burdensome to produce new affordable housing units. Subsidies are needed to make affordable housing development feasible.
Rehabilitation	The fully built out nature of Nashua necessitates the need for rehabilitation of the existing housing supply. The overall aged quality of Nashua’s housing stock is an additional reason for the need for rehabilitation. Rehab of existing rental and homeowner housing will preserve and maintain the affordable housing supply and create the opportunity for low and moderate income residents to stay within the community.
Acquisition, including preservation	The HOME Program is a source used to assist in acquiring and/or preserving affordable housing units. Due to the limited funding of the City’s HOME program, acquisition and preservation activities will likely be feasible only if leveraged with other subsidy programs, such as the LIHTC, historic tax credit, or state HOME programs.

Table 46 – Influence of Market Conditions

SP-35 Anticipated Resources - 91.215(a)(4), 91.220(c)(1,2)

Introduction

Anticipated Resources

Program	Source of Funds	Uses of Funds	Expected Amount Available Year 1				Expected Amount Available Remainder of ConPlan \$	Narrative Description
			Annual Allocation: \$	Program Income: \$	Prior Year Resources: \$	Total: \$		
CDBG	public - federal	Acquisition Admin and Planning Economic Development Housing Public Improvements Public Services	664,515	45,000	Pending		2,542,457	Prior year pending for final update. Expected Remainder of Consolidated Plan: Past 5-year annual average for 4 years.

Program	Source of Funds	Uses of Funds	Expected Amount Available Year 1				Expected Amount Available Remainder of ConPlan \$	Narrative Description
			Annual Allocation: \$	Program Income: \$	Prior Year Resources: \$	Total: \$		
HOME	public - federal	Acquisition Homebuyer assistance Homeowner rehab Multifamily rental new construction Multifamily rental rehab New construction for ownership TBRA	427,876	0	635,617	1,063,493	1,402,898	Prior year funding based on PR27 report. Development funds avail=\$450,485; CHDO =\$152,449; Admin = \$32,683. Expected amt remainder of Consolidated Plan: 5-year past average for 4 years.
Continuum of Care	public - federal	Housing	1,936,674	0	0	1,936,674	7,200,000	HUD funds awarded to the Greater Nashua Continuum of Care to address homeless needs (rental, transitional, supportive housing and services). Est remaining = \$1.8M*4 years
General Fund	public - local	Public Services	522,000	0	0	522,000	2,090,088	Local funds through the Mayor's budget for human service activities. Remaining est = \$522k*4 years + inflation increase

Program	Source of Funds	Uses of Funds	Expected Amount Available Year 1				Expected Amount Available Remainder of ConPlan \$	Narrative Description
			Annual Allocation: \$	Program Income: \$	Prior Year Resources: \$	Total: \$		
Public Housing Capital Fund	public - federal	Housing	12,999,463	0	0	12,999,463	0	2019 Operating Subsidy: \$2,113,200; 2019 Capital Fund Program: \$1,331,913 2019 Housing Choice Voucher Program (includes PBV):\$9,179,950 2019 Single Room Occupancy: \$374,400
Other	private	Housing	75,000	0	0	75,000	300,000	Private funds, in the form of property owner contributions, toward Lead Hazard Control Grant projects. Anticipated new grant for remainder of Plan period
Other	public - federal	Housing	750,000	0	0	750,000	4,000,000	HUD Lead Paint & Healthy Homes grant. Current grant end 12/2020, new grant estimated and anticipated.
Other	Public-state	Housing	100,000			100,000	400,000	State lead paint loan fund. Used as supplement/gap filler to HUD lead grant projects

Table 47 - Anticipated Resources

Explain how federal funds will leverage those additional resources (private, state and local funds), including a description of how matching requirements will be satisfied

Resources from private and non-Federal public sources are expected to leverage the federal funds detailed above, such as private contributions to Subrecipients, Low Income Housing Tax Credits, historic tax credits, and conventional mortgage products. Many of the City's grants require

non-federal match. In these cases the federal grants leverage private resources (as described above) such as owner contributions, in-kind and donated/discounted services.

HOME Match: Each HOME project is evaluated to determine the amount of match provided during the underwriting phase by reviewing the proposal to identify eligible match. Since match can be “banked” and credited to future projects, some projects will offer higher or lower amounts of match. The City tracks match on a cumulative basis to ensure the minimum 25% is met.

Match is tracked using an Excel spreadsheet identifying the project contributing match, the value of match, date recognized, match source, annual Disbursement Requiring Match (from PR-33) and running match balance (credit). Documentation of match varies depending on type. Income receipted would be checks received; value of volunteer labor/materials documented through a final report upon project completion; cash match/private funds would be proof of grant awards/distributions, etc.

Eligible match can be cash (but not owner equity), services, labor and donated materials/equipment, waived taxes or fees, value of donated land, cost of infrastructure improvements, or other resources that become a permanent contribution to affordable housing. Direct costs of supportive services to residents of HOME projects can also be considered as match.

If appropriate, describe publically owned land or property located within the jurisdiction that may be used to address the needs identified in the plan

pending

SP-40 Institutional Delivery Structure – 91.215(k)

Explain the institutional structure through which the jurisdiction will carry out its consolidated plan including private industry, non-profit organizations, and public institutions.

Responsible Entity	Responsible Entity Type	Role	Geographic Area Served
Neighborworks of Southern NH	CHDO	Ownership Rental public services	Region
SOUTHERN NEW HAMPSHIRE SERVICES	CHDO – CAP Agency	Ownership Rental Weatherization Public services	Region
HOME HEALTH AND HOSPICE CARE	Non-profit organizations	public services	Region
NEW HAMPSHIRE LEGAL ASSISTANCE	Non-profit organizations	public services	State
Greater Nashua Mental Health Center	Non-profit organizations	public facilities public services	Region
PLUS Company	Non-profit organizations	Non-homeless special needs public facilities public services	Region
Nashua Youth Council	Non-profit organizations	public services	Region
HARBOR HOMES	Non-profit organizations	Homelessness public services	Region
Bridges	Non-profit organizations	Homelessness public services	Region
Lamprey Health Care	Non-profit organizations	public services	Region
Tolles St. Mission	Non-profit organizations	public services	Jurisdiction
NASHUA SOUP KITCHEN AND SHELTER	Non-profit organizations	Homelessness public services	Jurisdiction
BOYS AND GIRLS CLUB OF GREATER NASHUA	Non-profit organizations	public facilities public services	Jurisdiction
COMMUNITY COUNCIL OF NASHUA	Non-profit organizations	public facilities public services	Region
Greater Nashua Interfaith Hospitality	Non-profit organizations	public services	Region

Responsible Entity	Responsible Entity Type	Role	Geographic Area Served
Marguerite's Place	Non-profit organizations	Homelessness public facilities public services	Jurisdiction
Front Door Agency	Non-profit organizations	Homelessness public services	Jurisdiction
Adult Learning Center	Non-profit organizations	public facilities public services	Jurisdiction
Girls Inc.	Non-profit organizations	public facilities public services	Jurisdiction
Nashua Senior Center	Non-profit organizations	public services	Jurisdiction
NH Housing Finance Authority	Non-profit organizations	Ownership Public Housing Rental public services	State
Nashua Housing Authority	Non-profit organizations	Public Housing Rental public services	Region
Nashua Center for Multiply Handicapped	Non-profit organizations	Non-homeless special needs public facilities public services	Region
Nashua PAL (Police Athletic League)	Non-profit organizations	public facilities public services	Jurisdiction
Nashua Children's Home	Non-profit organizations	Homelessness public services	Region
Greater Nashua Habitat for Humanity	Non-profit organizations	Ownership	Region
Opportunity Networks	Non-profit organizations	Non-homeless special needs public facilities public services	Region
E for All	Non-profit organizations	Economic Development	Jurisdiction
Private Financial	Lending Institutions	Housing Economic Development	Jurisdiction

Table 48 - Institutional Delivery Structure

Assess of Strengths and Gaps in the Institutional Delivery System

Strengths

1. Involvement of private sector in financing affordable housing
2. A full-service housing authority
3. Capacity for housing rehabilitation
4. Municipal planning and building code staff
5. Emergency shelter network
6. Community support of nonprofit organizations
7. Housing experience of nonprofits serving special needs clients
8. Collaboration among non-profits

Gaps

1. Development of mixed income housing & neighborhood opportunities
2. Focus needed on providing decent employment/training to LMI individuals to earn a livable wage
3. Resident “champions” to drive change at the grass roots level
4. A highly participative and diverse resident community that serves on boards of nonprofits
5. Programs to lift families out of poverty, long-term solutions rather than crisis intervention

Availability of services targeted to homeless persons and persons with HIV and mainstream services

Homelessness Prevention Services	Available in the Community	Targeted to Homeless	Targeted to People with HIV
Homelessness Prevention Services			
Counseling/Advocacy	Yes	Yes	*Orange from Bob Mack
Legal Assistance	Yes		
Mortgage Assistance	Yes		
Rental Assistance	Yes		
Utilities Assistance	Yes		
Street Outreach Services			
Law Enforcement			
Mobile Clinics	Yes		
Other Street Outreach Services	Yes	Yes	

Supportive Services			
Alcohol & Drug Abuse	Yes	Yes	
Child Care	Yes		
Education	Yes		
Employment and Employment Training	Yes	Yes	
Healthcare	Yes	Yes	
HIV/AIDS	Yes	Yes	Yes
Life Skills	Yes		
Mental Health Counseling	Yes	Yes	
Transportation	Yes		
Other			
Other			

Table 49 - Homeless Prevention Services Summary

Describe how the service delivery system including, but not limited to, the services listed above meet the needs of homeless persons (particularly chronically homeless individuals and families, families with children, veterans and their families, and unaccompanied youth)

The GNCOC has been successful in having a high rate of individuals and persons in families in permanent housing projects, other than rapid rehousing, retain their permanent housing or exit to permanent housing destinations. The percentage last year was 96% to which they plan to meet or exceed this program year.

The number exiting to permanent housing projects which included Rapid Rehousing was much lower at 51%. In order to increase this percentage, the GNCOC is placing a concentrated focus on exits to permanent housing. Client destination is a primary factor examined on the CoC's Data Quality and Completeness Report. Along with this, the CoC is also refining its by-name list procedure to make the list more accurate, simpler, and actionable thereby increasing the speed and volume of persons exiting from the street, ES, and TH to permanent housing destinations. The CoC continues to work on delivering evidence-based, high quality case management training. This includes training case managers to utilize the CoC-required Full SPDAT assessment, Motivational Interviewing, and Housing Stabilization. Harbor Homes Inc. a funded agency is responsible for overseeing this measurement.

The GNCOC is part of the state's Homeless Youth Subcommittee, which provides overarching strategy and TA to end youth homelessness. Additionally, GNCOC is working with the neighboring Manchester COC, and the consultant they hired to set benchmarks and receive TA around ending youth homelessness. The model closely follows GNCOC's efforts around ending veteran homelessness, achieved in 2017. Of note, there is significant underfunding to address youth homelessness in NH, partly because the state lacks data to demonstrate the need for federal funding in particular. To address this, Harbor Homes and several other GNCOC member agencies actively fundraise to support an end to youth homelessness. NH is the only state in New England that does not have a youth homeless shelter. The Youth Homelessness Committee is researching strategies implemented in other States, such as "Host Homes" to start as a pilot here. Harbor Homes also joined forces with the Nashua School District four years to co-employ a Homeless Student Liaison who identifies homeless youth in the schools and provide them with assistance.

The GNCOC Data Collection Committee conducts monthly reviews of Coordinated Entry calls from homeless youth, youth who visit GNCOC's Resource who identify as being literally homeless, and annual

information from the Department of Education on students who are literally homeless. The GNCOC selected these measures as they represent the places that homeless youth are most likely to be accessed and where good data can be captured to reduce duplication and target additional services as necessary (e.g. pregnant/parenting youth).

The GNCOC's Coordinated Entry refers Veterans to Harbor Homes' Veterans FIRST programming and/or NH211 which provides services from one point. Harbor Homes has the following programs: SSVF, HVRP, VASH, GPD, emergency, and permanent housing for Veterans. Harbor Homes works in collaboration with the VA, other government agencies, GNCOC and the community to ensure the needs of the homeless veterans are met. The various agencies that work with the Veterans meet and communicate regularly to exchange information, create strategies, and make and track referrals for those on the list. Of note, the GNCOC achieved an effective end to veteran homelessness in 2017. This is the result of collaborative and dynamic outreach efforts with multi-funded outreach streams. The GNCOC and its Vet Subcommittee is focusing on community education and information to the community on how to align in our mission to build and maintain a robust system VFW, American Legion and DAV conventions; with connections provided with handouts for each posts with statewide 211 information.

Describe the strengths and gaps of the service delivery system for special needs population and persons experiencing homelessness, including, but not limited to, the services listed above

The delivery system for special needs and persons experiencing homelessness, is by and large the same system as the institutional structure for delivering mainstream services. The strengths include:

-) Services are well coordinated amongst the members of the GNCOC
-) Strong services for homeless and at-risk of homelessness veterans
-) Good coordination of assistance to persons with Aids/HIV to access services
-) Strong service providers in the community who provide day-time enrichment to disabled individuals, connecting them to community resources (including jobs and volunteer opportunities)
-) Through the two HUD Housing Opportunities for Persons with AIDS (HOPWA) programs operating in Nashua, the Southern NH HIV/AIDS Task Force has not had an unsheltered person living with HIV/AIDS in over 10 years during the annual Point in Time count.

Gaps in the system for homeless and special needs individuals includes:

-) Reaching individuals and families who are living “doubled-up or couch surfing”
-) Limited availability of mental health treatment, including preventative care and medication subsidies. This often results in acute treatment in the emergency room with one-time prescription vouchers.
-) Resources for the elderly to afford housing and medication
-) A need for increased funding

The members of the GNCOC recognize that emergency shelter and transitional housing do not meet the needs of our City’s homeless individuals and families. The GNCOC continues to increase access to affordable permanent housing by making certain that service providers have access to information regarding available permanent units and/or subsidies to make these units affordable. The GNCOC’s work in expanding community-based services increase the opportunities for people to feel comfortable making that change to permanent housing, knowing that there will be necessary supports available, should they need them.

Provide a summary of the strategy for overcoming gaps in the institutional structure and service delivery system for carrying out a strategy to address priority needs

The City actively seeks partnerships with agencies in the community who can help overcome the gaps listed above. Leveraging not only funding, but expertise is an intentional outcome of partnerships. Neighborworks of Southern NH developed a strategic plan to focus their efforts in the “Tree Streets” neighborhood and has been working to revitalize that neighborhood. Habitat for Humanity recently completed two projects on Chestnut Street and other non-profits are carrying out similar work.

The Continuum of Care application articulates its homeless and homeless prevention strategies, based on the data collected, its consultation with homeless assistance providers, homeless persons and other organizations collecting and analyzing relevant information. These strategies include the ongoing development and maintenance of a funnel-shaped continuum, beginning with outreach and assessment efforts, aimed at identifying homeless in the community and assessing their needs; connecting them to their most urgent shelter and service needs; assisting them to transition from emergency shelter to transitional, permanent supportive or independent housing; and aggressively pursuing methods and strategies to prevent homelessness-both for the chronic homeless and for those at risk of homelessness.

The GNCOC meets monthly to prioritize unmet service needs and work to develop a system of prevention, intervention, outreach assessment, direct care and aftercare for homeless individuals and families. Recently, there has been an increased push to promote the “2-1-1” system. This comprehensive system is available online or by phone and connect individuals to services throughout the community. The GNCOC has also been working to increase the level of wrap-around services for homeless and at-risk households, and have started a “Coordinated Access” line for homeless individuals to call for better connection to resources. There have been arrangements to conduct outreach in hospital emergency departments that has shown some success in linking individuals to needed services. Lastly, the GNCOC members, service agencies and the City are always seeking new/increased funding opportunities and ways to implement creative programs with the limited funding available.

SP-45 Goals Summary – 91.215(a)(4)

Goals Summary Information

Sort Order	Goal Name	Start Year	End Year	Category	Geographic Area	Needs Addressed	Funding	Goal Outcome Indicator
1	Rental Housing	2020	2025	Affordable Housing		Production of Rental Housing		Rental units constructed: 25 Household Housing Unit
2	Homeowner Rehab	2020	2025	Affordable Housing		Rehabilitation of Existing Units		Homeowner Housing Rehabilitated: 50 Household Housing Unit
3	Rental Rehab	2020	2025	Affordable Housing		Rehabilitation of Existing Units		Rental units rehabilitated: 75 Household Housing Unit
4	Rental Assistance	2020	2025	Affordable Housing Homeless		Rental Assistance		Tenant-based rental assistance: 30 Households Assisted
5	Improvements to facilities for youth	2020	2025	Non-Homeless Special Needs		Public Facilities		Public Facility or Infrastructure Activities other than Low/Moderate Income Housing Benefit: 1250 Persons Assisted
6	Improvements to facilities for special needs pop	2020	2025	Non-Homeless Special Needs		Public Facilities		Public Facility or Infrastructure Activities other than Low/Moderate Income Housing Benefit: 125 Persons Assisted
7	Public facility improvements - general	2020	2025	Non-Housing Community Development		Public Facilities		Public Facility or Infrastructure Activities other than Low/Moderate Income Housing Benefit: 10,000 Persons Assisted
8	Ensure safe sanitary housing	2020	2025	Affordable Housing		Rehabilitation of Existing Units		Rental units rehabilitated: 350 Household Housing Unit

Sort Order	Goal Name	Start Year	End Year	Category	Geographic Area	Needs Addressed	Funding	Goal Outcome Indicator
9	Ensure safe sanitary housing	2020	2025	Affordable Housing		Rehabilitation of Existing Units		Homeowner Housing Rehabilitated: 25 Household Housing Unit
10	Infrastructure improvements	2020	2025	Non-Housing Community Development		Public Improvements and Infrastructure		Public Facility or Infrastructure Activities other than Low/Moderate Income Housing Benefit: 5000 Persons Assisted
11	Parks/Trails/Green space	2020	2025	Non-Housing Community Development		Public Improvements and Infrastructure		Public Facility or Infrastructure Activities other than Low/Moderate Income Housing Benefit: 5000 Persons Assisted
12	Public Services - Youth	2020	2025	Non-Housing Community Development		Public Services		Public service activities other than Low/Moderate Income Housing Benefit: 6000 Persons Assisted
13	Public Services - Special Needs	2020	2025	Non-Housing Community Development		Public Services		Public service activities other than Low/Moderate Income Housing Benefit: 625 Persons Assisted
14	Public Services - Transportation	2020	2025	Non-Housing Community Development		Public Services		Public service activities other than Low/Moderate Income Housing Benefit: 500 Persons Assisted
15	Public Services - General	2020	2025	Non-Housing Community Development		Public Services		Public service activities other than Low/Moderate Income Housing Benefit: 7500 Persons Assisted

Sort Order	Goal Name	Start Year	End Year	Category	Geographic Area	Needs Addressed	Funding	Goal Outcome Indicator
16	Business Assistance	2020	2025	Non-Housing Community Development		Economic Development		Jobs created/retained: 10 Jobs
17	Business Assistance	2020	2025	Non-Housing Community Development		Economic Development		Businesses assisted: 25 Businesses Assisted
18	Brownfields Redevelopment	2020	2025	Non-Housing Community Development		Brownfeilds Remediation		Brownfield acres remediated: 5 Acre
19	Economic Development - general	2020	2025	Non-Housing Community Development		Economic Development		Facade treatment/business building rehabilitation: 5 Business
20	Homeownership	2020	2025	Affordable Housing		Homeownership		Homeowner Housing Added: 10 Household Housing Unit
21	Homelessness	2020	2025	Homeless		Homelessness		Homeless Person Overnight Shelter: 60 Persons Assisted Overnight/Emergency Shelter/Transitional Housing Beds added: 100 Beds Homelessness Prevention: 500 Persons Assisted

Sort Order	Goal Name	Start Year	End Year	Category	Geographic Area	Needs Addressed	Funding	Goal Outcome Indicator
22	Fair Housing	2020	2025	Fair Housing		Production of Rental Housing Rehabilitation of Existing Units Rental Assistance Homelessness Homeownership		Other: 1000 Individuals

Table 50 – Goals Summary

Goal Descriptions

1	Goal Name	Rental Housing
	Goal Description	Production of new affordable rental housing units
2	Goal Name	Homeowner Rehab
	Goal Description	Rehabilitation of existing owner-occupied properties to address life and safety issues as well as accessibility modifications.
3	Goal Name	Rental Rehab
	Goal Description	Rehabilitation of existing investor-owned rental units, occupied by low income households
4	Goal Name	Rental Assistance
	Goal Description	Temporary rental assistance to very-low income individuals; Goal may be addressed under this Plan using TBRA if identified through annual action planning.

5	Goal Name	Improvements to facilities for youth
	Goal Description	Public facility improvements for youth
6	Goal Name	Improvements to facilities for special needs pop
	Goal Description	Public facility improvements to facilities for special needs population, including disabled, elderly, frail elderly, victims of domestic violence, persons living with AIDS and others.
7	Goal Name	Public facility improvements - general
	Goal Description	Improvements to general public facilities that benefit low-moderate income individuals, with particular focus on health facilities and a new public health building.
8	Goal Name	Ensure safe sanitary housing
	Goal Description	Addressing health and safety issues including lead hazard control, air quality, pest infestation, trips and falls. Achieved through code enforcement and/or lead hazard control/healthy homes programs.
9	Goal Name	Infrastructure improvements
	Goal Description	Infrastructure improvements including streets, sidewalks and lighting
10	Goal Name	Parks/Trails/Green space
	Goal Description	Provide LMI residents with accessible open space, neighborhood playgrounds and parks. Ensure LMI neighborhoods have access to schools, community centers and open space via sidewalks or trails.
11	Goal Name	Public Services - Youth
	Goal Description	Improve or increase access and availability of services for LMI youth & teens, especially at-risk youth.
12	Goal Name	Public Services - Special Needs
	Goal Description	Improve or increase services for special needs population

13	Goal Name	Public Services - Transportation
	Goal Description	Improve or increase transportation services to special needs population and low-moderate income individuals to improve access to employment and services.
14	Goal Name	Public Services - General
	Goal Description	Improve or increase services to low and moderate income individuals
15	Goal Name	Business Assistance
	Goal Description	Stimulate the growth of new enterprises, including micro-enterprises to benefit low-moderate income business owners or create new jobs for LMI individuals. Resources include existing economic development revolving loan.
16	Goal Name	Brownfields Redevelopment
	Goal Description	Reclaim brownfields and other abandoned or underutilized sites. Section 108 Loan funds may be sought to achieve this goal.
17	Goal Name	Economic Development - general
	Goal Description	General economic development activities, including enhancing the vitality of neighborhood business districts and Downtown Nashua, facade programs, job training, job transportation, etc. Note, some of these activities may be subject to the Public Service cap.
18	Goal Name	Homeownership
	Goal Description	Direct assistance to low-moderate income individuals to purchase a home.
19	Goal Name	Homelessness
	Goal Description	Improve or expand services and capacity to address homelessness, including increasing shelter beds, transitional housing, counseling and other services needed to rapidly re-house or break the cycle of homelessness.

20	Goal Name	Fair Housing
	Goal Description	Fair housing activities regarding federal and local laws prohibiting housing discrimination based on race, color, national origin, religion, sex, familial status, or disability.

Estimate the number of extremely low-income, low-income, and moderate-income families to whom the jurisdiction will provide affordable housing as defined by HOME 91.315(b)(2)

Approximately 25 extremely low and low-income households through rental production; approx. 30 extremely low-income through TBRA; and approx. 10 low-moderate income households through home ownership.

SP-50 Public Housing Accessibility and Involvement – 91.215(c)

Need to Increase the Number of Accessible Units (if Required by a Section 504 Voluntary Compliance Agreement) N/A

Activities to Increase Resident Involvements

The Nashua Housing and Redevelopment Authority has a Resident Advisory Board (RAB) consisting of public housing residents and Section 8 participants. The Executive Director meets with the RAB annually to discuss any programmatic opportunities and plans for new initiatives. RAB members participate in the creation and acceptance of NHRA's Annual PHA Plan, and work together with NHRA staff to address common goals and objectives. Should any opportunities present themselves to encourage home ownership, NHRA will act on those opportunities. The NHRA does not currently have a program in place to encourage home ownership. However there may be opportunity to partner with the City to target marketing of the HOME-funded home buyer assistance program to public housing residents. This effort is contingent on whether that program launches in the plan year.

The NHRA plans to continue the following initiatives to involve residents:

- J Meetings with residents to encourage and promote the start-up of Resident Associations to promote socialization and special community activities run by the resident leadership of the Association.
- J Meetings with residents to encourage and assist in starting Crime Watch groups at developments showing a need or desire to have one.
- J NHRA representation at all Resident Association meetings with management acting as a liaison between residents and NHRA.
- J Involvement from the Resident Advisory Board (group of individuals from public housing and Section 8 selected to serve on this Board) in the planning and development of NHRAs required Annual and Five-Year Plan.
- J Educational sessions provided to residents on site on important health and safety topics (bed bug awareness, fire prevention, etc.)
- J Management will work closely with local and state agencies such as the Welfare Dept., Health Dept., mental health providers, and family services providers to determine assistance needed for NHRA families.
- J Management will collaborate with local community agencies to provide services and programs for NHRA residents.
- J Monthly review of all criminal activity reports supplied by the local police department to coordinate efforts to resolve and/or prevent further problems.
- J Management develops and conducts efforts to involve families in community activities such as development beautification events.
- J NHRA representation at a multitude of community networking and service provider meetings.

Is the public housing agency designated as troubled under 24 CFR part 902?

No, NHRA is designated a “Standard Performer”.

Plan to remove the ‘troubled’ designation N/A

SP-55 Barriers to affordable housing – 91.215(h)

Barriers to Affordable Housing

NH Housing Finance Authority's 2019 Rental Survey, conducted by the University of New Hampshire Survey Center, polled the owners and managers of more than 23,000 unsubsidized (market rate) rental housing units around the state (15% of the total number of units). The survey found the median two bedroom rent in Nashua increased from \$1,310 per a month in 2015 to \$1,506 per month in 2019. A 19% increase in the last four years and 28% increase since 2009.

Nashua's vacancy rate in 2019 is 0.3% for a two bedroom in Nashua, whereas a vacancy rate of 4% to 5% is considered a balanced market for supply and demand. The availability of units in the southern tier counties (Hillsborough, Merrimack, Rockingham and Strafford) as well as in the Upper Valley's Hanover/Lebanon area is especially low.

The highest rents are located in the southern counties near the state's largest cities and close to employers as well as the Boston job market. This is also where most of the state's rental housing properties are located. The average renter in the Nashua region makes \$15.63 per hour, or about \$32,000 per year. This would allow for a maximum of \$800 per month for housing expenses. This is half of the income needed to afford a rental unit at the 2019 median rent of \$1,506 per unit.

Furthermore, fair housing and affordable housing are closely intertwined. The most recent Analysis of Impediments to Fair Housing (conducted as an Assessment of Fair Housing) revealed there are some public policies that affect the limited availability of affordable housing. Examples include single family zoning restrictions, lot and green space restrictions, limitations on parking, etc. Other barrier examples include families opting to house multiple households in one unit, due to rising rents and economic downturns. Nashua does not restrict the number of related persons in one dwelling unit, however there can only be up to three unrelated people. The City's most affordable housing, namely rental, is coterminous with the inner city where the housing is dense, the population is predominately low-income and open space is limited. Parking in higher density areas or for homes with large families is a problem as parking space is limited. Nashua generally does not allow overnight parking on city streets, however recently revised its parking ban to allow certain streets (those in the most dense/low-income neighborhoods) to park on the street.

Strategy to Remove or Ameliorate the Barriers to Affordable Housing

Many communities in New Hampshire during the height of population growth established incentives for the development of housing for older persons as permitted under state and federal law. Given that the State has an aging population the development of age restricted housing was partially in response to meeting a growing demand. Additionally, senior housing theoretically had lower tax implications to municipalities than housing with children, making it more desirable. While such developments are exempt from familial status and age discrimination complaints, their proliferation came at the detriment of meeting housing demands for families with children. This past year the City amended its Senior Housing Ordinance to tighten the definitions and criteria to qualify as senior housing. The legislation better regulates where this housing can be developed and its suitability within the proposed neighborhood.

Recent studies identified a serious mismatch between the existing housing stock in the state and the needs and desires of our changing population. NH's Accessory Dwelling Unit (ADU) law, which took

effect on June 1, 2017 permits a residential living unit that is within or attached to a single-family dwelling and that provides independent living facilities for one or more persons, including provisions for sleeping, eating, cooking, and sanitation on the same parcel of land as the principal dwelling unit it accompanies. ADU's increase the housing supply without further land development, are an affordable housing option for many low-moderate income residents, improves homeowner cash flow and are helpful to the elderly and/or disabled people who may want to live close to family members.

Regarding development, the City has a AAA bond rating and comparatively low building fees, which creates a positive lending environment. The result of which can be seen in a recent uptick in affordable housing development throughout the city. During this plan year we expect to see the completion of 22 Marshall Street, containing 152 affordable housing units (100% of the project)/10 of which are HOME units.

The City has also adopted The Community Revitalization Tax Relief where property owners who intend to substantially rehabilitate a building located in downtown may apply to the City for a period of temporary, finite, tax relief during which the property tax on the structure would not increase as a result of its substantial rehabilitation (between 5 and 13 years). In exchange for the relief, the property owner grants a covenant ensuring there is a public benefit to the rehabilitation. Given that downtown Nashua contains mill building ripe for conversion this incentive may facilitate affordable housing development (as was the case for 30 Front Street/Cotton Mill). The City also offers tax exemptions for many segments of the community reducing the assessed value of the property as follows: blind exemption \$75,000; disabled exemption \$155,000; elderly exemption ranges from \$155,000-\$225,000. In the past year, the city increased the elderly exemption amount and will continue to review credits to determine increases as necessary.

The Housing Appeals Board was signed into law in the summer of 2019 and will become effective January 1, 2021 providing an expedited route for appeals to land use board decisions. This law requires decisions be made in 90 days, instead of the current system which takes more than a year and many times several years for a decision.

Lastly, the City worked with the Governor's Office for the successful designation of two of our most distressed Census Tracts as Opportunity Zones to spur economic development. Opportunity Fund investors will receive a deferral of taxes owed on unrealized capital. Further after 10 years, the investor will be eligible for an increase in the basis of their original investment, meaning significantly lower taxes at the end of the term.

SP-60 Homelessness Strategy – 91.215(d)

Reaching out to homeless persons (especially unsheltered persons) and assessing their individual needs

The City is represented at the GNCOC by the Manager of the Welfare Department, a department within the City of Nashua's Division of Public Health & Community Services (DPHCS). The Welfare Officer is a member of the GNCOC Executive Board and also chairs the GNCOC Ending Homelessness sub-committee. The Ending Homelessness sub-committee was very active in the creation and implementation of the Coordinated Entry process for the Greater Nashua community, working with partner agencies to provide clients access to necessary homeless prevention and shelter services, including chronically homeless individuals and families and veteran populations. The City's DPHCS also provides outreach to homeless and at-risk members of the community through health activities on the Outreach Van.

Three barriers identified by the COC for those who are unsheltered are: reluctance to go to shelter, lack of transportation, and lack of ID. To address these barriers, outreach providers can house individuals directly from unsheltered situations, provide transportation and bus tickets to services, and purchase birth certificates and ID cards.

The GNCOC will continue to implement several strategies which include: providing clients with documents needed for employment (identification cards and birth certificate), refer to job employment programs which help clients to obtain their GED-TASC and assist with resume writing, allow the homeless to use their address of job applications, SOAR Team Members assist by walking people through the process of signing up for benefits. GNCOC will also provide clients with a list of agencies that will hire sex offenders and those with a criminal background.

Specific outreach to the LGBT population and training to providers is also a priority. Southern NH HIV/AIDS Task Force is a non-profit AIDS Service Organization providing affordable housing, case management, and supportive services including access to medical care and medications to individuals and families living with HIV/AIDS and offers HIV testing and counseling to those at risk of HIV infection. As a member of the GNCOC, this agency offers a unique, holistic approach to care and prevention resulting in better outcomes for clients and community. While this Task Force is the lead agency, no GNCOC agency discriminates with regards to LGBT, and these agencies are trained on a regular basis on providing equal access to HUD Programs. Agencies also receive a list of resources to refer LGBT individuals to depending upon their need. Any client or community member with a discrimination claim due to HIV status or LGBTQIA identity are referred to GLAD – Gay and Lesbian Advocates and Defenders – New Hampshire.

In order to better identify and assess the needs of homeless youth, the GNCOC has partnered with the Balance of State COC (BOSCO) where COC leadership engaged the statewide Youth Subcommittee, which includes COC funded programs, child protection and juvenile justice staff, NH's Runaway and Homeless Youth programs (administered by Child and Family Services – CFS), and members of the former NH Homeless Teen Task Force, State Representatives, the Department of Education, and school district McKinney Vento homeless liaisons to increase PIT count participation by youth centered providers.

The GNCOC conducts an event, the Employment Connect annually at the Nashua Public Library. This event is targeted toward at-risk and homeless individuals to link with employment resources.

Addressing the emergency and transitional housing needs of homeless persons

The Greater Nashua Continuum of Care continues to work to improve and streamline their Coordinated Entry process. Currently a phone line offers 24-hour response. A caller leaves a message with pertinent information and the assigned provider returns the call with shelter availability information. Plans to improve and streamline the process are ongoing. Goals include refining the intake form, continued training for participating providers and better data collection.

There are three emergency shelters operating in Nashua, two receiving some Emergency Solutions Grant (ESG) funds as well as several agencies with transitional housing programs. The shelter programs have relationships with the two local hospitals to provide support for individuals seeking services from the Emergency Department for behavioral health issues, and provide emergency shelter once they are discharged from the hospital.

All GNCOC participating agencies have programs established for the purpose of providing emergency or transitional housing. Each of these programs offers supportive services tailored to the client's needs. Services provided will include case management covering education, daycare, budgeting, interviewing, resume writing, employment skills, legal aid and counseling to assist individuals and families.

Under the ESG program the GNCOC has a goal that 70% of participating households will achieve housing stability for six months following the end of rental assistance and that 50% of participants will maintain or have increased their income at program exit, demonstrating sufficient income to maintain housing.

The GNCOC has established a practice of using the "no-wrong" door approach for families entering the systems. Clients are addressed in the Coordinated Entry System to identify a person's barriers to achieve stable housing. Families are prioritized based upon their complex, co-occurring issues that are likely to impact housing stability. This approach involves quickly connecting homeless families within 30 days to permanent housing without preconditions and barriers to entry by performing intake, assessment, prioritization, housing location, move-in, case management, and on-going follow-up. Supportive services help to maximize housing stability and work to prevent the return to homelessness. Coordinated entry/shelters work with families on reunification with friends and/or family that may help while connecting them to resources to improve their situation to assist with housing stability on their own.

Helping homeless persons (especially chronically homeless individuals and families, families with children, veterans and their families, and unaccompanied youth) make the transition to permanent housing and independent living, including shortening the period of time that individuals and families experience homelessness, facilitating access for homeless individuals and families to affordable housing units, and preventing individuals and families who were recently homeless from becoming homeless again.

Help low-income individuals and families avoid becoming homeless, especially extremely low-income individuals and families who are likely to become homeless after being discharged from a publicly funded institution or system of care, or who are receiving assistance from public and private agencies that address housing, health, social services, employment, education or youth needs

During the past year, GNCOC experienced an almost 2 percent reduction (1.88% or 11 people) in the number of first-time homeless from 584 to 573 persons. This reduction can be attributed to the GNCOC's Coordinated Entry Team which has placed diversion as its top priority when meeting with homeless individuals. Through diversion the Team is able to determine if an individual is truly homeless, has no other place to go and needs to be in a homeless facility. Some are more on the "risk of becoming homeless" due to payments owed on utility bills, rent, etc. In these cases the team works to find resources to address this issue so the individual can remain housed. The CoC continues to educate providers order to identify risk factors for homelessness through a diversion process. These risks include safety, employment/income status, family dynamics, mental and physical health, substance use, and history of housing and homelessness.

Diversion is attempted before entering an emergency shelter and several diversion attempts may occur before the client is fully assessed. All these diversion attempts are documented in HMIS, and clients are not engaged for permanent housing placement until all diversion options have been exhausted. Diversion also helps to determine if there are other locations such as a relative or friend's house where they can stay. When prevention funds are available, they are used to respond to service issues. Harbor Homes Inc. a funded agency, with the GNCOC Board is responsible for overseeing this Assessment Team and its strategy.

Harbor Homes Inc. will begin a 5 year \$400,000 grant from USDHHS (Substance Abuse and Mental Health Services Administration), to assist youth ages 18-24 with permanent housing. Approximately 150 individuals will be assisted. The funding will allow Harbor Homes to implement a comprehensive recovery and treatment program to individuals with a history of substance use disorders, and include permanent housing to further support a healthy transition to self-sufficiency and sustainability.

The GNCOC's adopted discharge protocols, which covers discharge from foster care, health care, mental health and corrections can be found at their website <http://nashua-coc.org/>

SP-65 Lead based paint Hazards – 91.215(i)

Actions to address LBP hazards and increase access to housing without LBP hazards

Since 2007, the City, through the Urban Programs Department, has been successful in securing grant funding from HUD's Office of Healthy Homes and Lead Hazard Control to address lead paint and other health hazards in units occupied by low-moderate income households. As of this writing the City has been awarded a total of \$11,780,000 through four separate grants. The City anticipates applying for a new grant imminently, with an anticipated value of \$4M.

The City addresses lead hazards through targeted grant funding, as well as through the Housing Improvement Program. Complying with HUD's Lead Safe Housing Rule, certain work will trigger the need to address lead paint (interim controls or abatement). In all other projects, the City requires contractors to use lead safe work practices and EPA's Renovate, Repair and Paint protocols.

At the state level, recent changes to the law are phasing in lower blood lead levels as the trigger for investigation. As of July 1, 2019 the action level is 7.5 µg/dL and all children (not just high risk) shall be tested at age one and two. The City has also worked closely with the Nashua Housing and Redevelopment Authority when cases of EBLL are identified in their Housing Choice Voucher units. The action level under the federal Lead Safe Housing Rule is 5 µg/dL. Under our Lead Grant program we are able to assist these units within the extremely quick timeline dictated by the LSHR.

The City was one of seven communities selected to participate in the "Community of Action for Lead Safety" initiative, funded by the Endowment for Health and NH Listens at the Carsey School of Public Policy at the University of New Hampshire. The overall goal is to collaborate state-wide and implement local strategies to reduce lead poisoning. Local teams will convene with their project leads two to three times to: (1) begin the process of setting goals and direction and (2) to share progress, lessons learned, etc. Each team determines their criteria for success and measuring progress. NH Listens, Conservation Law Foundation, and NH Legal Assistance will provide technical support to each of the teams in their local efforts to prevent lead poisoning, including advice about implementation strategies. Communities may receive up to \$1000 for their local efforts. Cross-community learning exchanges: All teams will gather three times to learn more about the causes and impacts of childhood lead poisoning, applicable laws and regulations, potential local strategies, and resources for outreach or education. Community teams will have ample time to talk together, and share experiences and thinking about what it means to design frameworks for action. NH Listens will facilitate the process of building a framework for action based on local assets and solutions in the context of new laws.

The City of Nashua's Division of Public Health and Community Services provided free blood lead screenings, education and home visits with a specialist from the Environmental Health Department. Nurses offered one-on-one education with parents of children with elevated blood lead levels. The City's Code Enforcement Department has been trained to recognize potential lead hazards, especially in homes where young children reside, and make referrals to the Urban Programs Department.

How are the actions listed above related to the extent of lead poisoning and hazards?

The actions undertaken by the City are meant to eliminate the health hazards posed by lead based paint in Nashua's housing stock. The large number of housing built before 1980 highlights the high probability that the housing contains lead hazards. Education is a strong component of the planned activities to reduce the incidence of lead poisoning.

How are the actions listed above integrated into housing policies and procedures?

All housing assisted with CDBG and HOME are considered for lead-paint hazards. These projects inherently comply with lead safe work practices and result in housing that is safe for families with young children. Furthermore, changes to the Lead Safe Housing Rule require action when a child's blood lead level is 5 µg/dL or higher. The City partners with the NHRA if voucher-related units contain a child with an EBL, by offering expedient enrollment in our HUD Lead-Paint Grant as well as expertise to carry out the remediation.

SP-70 Anti-Poverty Strategy – 91.215(j)

Jurisdiction Goals, Programs and Policies for reducing the number of Poverty-Level Families

There are a variety of actions the City undertakes throughout the year in an effort to reduce the number of poverty-level families and increase self-sufficiency. Both CDBG and general fund support public service activities and agencies that are providing services to break the cycle of poverty. These services include job training, counseling, budgeting/life skills, child care and more. CDBG & HOME also directly impacts households, living at or below the poverty level, by reducing the cost of housing, improving energy efficiency, public transportation and health care assistance.

Additionally, the City's Economic Development Department works diligently to grow the City's economy, specifically by working to redevelop vacant or underperforming commercial corridors. Developing a variety of businesses in Nashua is critical to providing living-wage jobs for a diverse population with multiple jobs skills and experiences. Economic Development is accomplished by utilizing many different funding sources including, but not limited to, the CDBG Economic Development Fund, tax-increment financing (TIF) and local funds. Urban Programs has been working more closely with EcoDev to explore HUD funded opportunities that may improve economic opportunities for low income individuals.

How are the Jurisdiction poverty reducing goals, programs, and policies coordinated with this affordable housing plan

The City's poverty-reducing goals, programs, and policies work to provide support and develop at-risk individuals and families. This Plan will serve as the framework for the City and service providers to adhere to in order to address the needs of the community. Poverty reduction is tied to multiple aspects of this plan and the various affordable housing strategies and other initiatives put forth will work towards reducing the number of families and individuals facing poverty.

SP-80 Monitoring – 91.230

Describe the standards and procedures that the jurisdiction will use to monitor activities carried out in furtherance of the plan and will use to ensure long-term compliance with requirements of the programs involved, including minority business outreach and the comprehensive planning requirements

The City recently drafted Uniform Grant Guidance Policies & Procedures, developed consistent with 2 CFR Part 200. Within that document Section VI. addresses Subrecipient Monitoring. In addition, the UPD will use *supplemental* Policies & Procedures specific to its CDBG Subrecipients. Prior to award, UPD will conduct a risk assessment to help identify any high risk activities that will require full scale on-site monitoring visits. High risk factors might include: Subrecipients who are new to the HUD programs implemented; Subrecipients who have experienced high turnover in key staff positions; Subrecipients who previously struggled to meet schedules, submit performance reports, submit timely invoices. At the start of each year staff will meet with CDBG Subrecipients individually to review their record-keeping and intake procedures prior to award and each Subrecipient will complete an on-site monitoring form as a self-check (provided back to City). This initial meeting will provide an opportunity for the City to ensure the Subrecipient collects the correct information to document compliance with National Objective eligibility and accurate accounting procedures. The up-front meeting will include an evaluation of internal controls (i.e. separation of duties) as well as a review of the financial procedures/software.

Historically, most Subrecipient activities fall into either Public Service or Public Facility activities, each with their own reporting requirements. Public Services are required to submit quarterly reports that document beneficiaries and contain supporting documentation for all reimbursement requests (i.e. invoices). Public Facility activities submit beneficiary data and progress reports. The financial portion is controlled within UPD as we oversee these physical projects and approve release of funds directly to the contractors on behalf of the Subrecipient.

Internal (i.e. Park and Rec.) activities are monitored through ongoing internal communications. Only the Urban Programs Department can encumber and authorize payment of CDBG funds. Therefore no internal projects are conducted without oversight of the UPD.

CDBG Desk Audits are performed quarterly to confirm national objective compliance, verify expenditures, monitor progress and to identify high risk Subrecipients. Quarterly reports are comprehensive and reviewed in detail before any funds are reimburse to the Subrecipient.

CDBG Consultation/Technical Assistance: Staff offers workshops prior to application. Following that, staff visits each Subrecipient before the activity begins as described above. Throughout the year, UPD provides technical assistance to Subrecipients as needed or at staff turnover. For those Subrecipients that cannot submit client records due to privacy, or when it is impractical due to number served, staff visit to review client files on-site. Please see our Supplemental Policy for additional detail on determining level of monitoring.

HOME: Desk audits of tenant occupancy and compliance with other regulatory terms is conducted annually as well as site visits to ensure compliance with property standards. On-site monitoring includes verification of tenant information submitted by owners to determine compliance with the requirements of 24 CFR 92.252, review leases, source tenant qualification documentation and tenant selection plans.

Annual Goals and Objectives

AP-20 Annual Goals and Objectives

Goals Summary Information

Sort Order	Goal Name	Start Year	End Year	Category	Geographic Area	Needs Addressed	Funding	Goal Outcome Indicator

Table 51 – Goals Summary

Goal Descriptions

Projects

AP-35 Projects – 91.220(d)

Introduction

Projects/activities that will take place during the program year to address the priority needs and specific objectives identified in the Consolidated Plan can be found listed in the attached Resolution(s). Some prior year projects have been pulled into this Plan. In certain instances the planned project/activity experienced unforeseen delays, technical issues or was planned to occur in a later year. Particulars are noted in the individual project narratives. **R-20-126 is pending final approval.**

Public Services (15% cap)	\$99,677.00
UPD Project Delivery	\$122,111.00
UPD, Administration (20% cap)	\$141,903.00
Ash Street Futsal Court - lighting	\$10,000.00
Boys & Girls Club - Pool decking/locker room rehab	\$39,000.00
Front Door Agency - Heat/hot water conversion @ 12 Concord St	\$30,000.00
Los Amigos Park improvements	\$15,000.00
Marguerite's Place - Window replacement 85-87 Palm St	\$30,000.00
Opportunity Networks - Bathrooms in Unit A	\$33,000.00
Owner Occupied Housing Improvement	\$50,000.00
PLUS Company - ADA bathroom and entry	\$15,000.00
Rental Improvement Program	\$150,000.00
Sandy Pond Park improvements	\$10,000.00
Contingency	\$5,351.69
HOME Administration	\$42,787.60
HOME CHDO	\$64,181.40
HOME Affordable Housing Development	\$320,907.00

Describe the reasons for allocation priorities and any obstacles to addressing underserved needs

The primary objectives of the activities listed are to benefit low-income and moderate-income residents. The resources covered by this Plan will be directed to those areas of the City where the highest concentrations of low-moderate income individuals reside.

The public facility and improvement projects that will receive funding meet eligibility criteria by providing services that directly benefit low and moderate-income served at the facility.

The greatest obstacle to meeting underserved needs is the limited availability of funding. The HOME Program suffered a 50% reduction in 2012 and has yet to be fully reinstated since that time. This year's allocation is still 27% lower than the pre-2012 cut. The cost to developing affordable housing continues to increase, creating greater discrepancies each year. Yet the program is still 20% lower than in 2012. The City's CDBG program was funded less than last year and has been nearly level funded for the past several years, which erodes the City's ability to meet needs.

The City of Nashua addresses this obstacle by pursuing other grant opportunities, such as the Lead Paint & Healthy Homes Program; collaborating with neighboring communities to share "lessons learned"; using best practice guidelines, systems, and previously created documents. Despite these efforts, Nashua, like all communities, continues to be faced with increased reporting requirements and compliance issues. Maintaining transparency and a high level of conduct requires extensive staff time.

AP-50 Geographic Distribution – 91.220(f)

Description of the geographic areas of the entitlement (including areas of low-income and minority concentration) where assistance will be directed

At this time, the City does not have a formal target area. The primary objectives of the activities within this Plan are to benefit low-income and moderate-income residents. The resources covered by this Plan will be directed to those areas of the City where the highest concentrations of low-moderate income individuals reside. As previously discussed, Census Tracts 104-108 have the highest need and although not formal, by default most of the activities are targeted to that area.

The public facility and improvement projects that receive funding meet eligibility criteria by providing services that benefit low and moderate-income persons living throughout the community.

Rationale for the priorities for allocating investments geographically

By nature activities occur in low-income areas. The City has not prioritized based on a geographic area, rather the priority is driven by the beneficiary (i.e. youth, homeless, special needs, etc).

Affordable Housing

AP-55 Affordable Housing – 91.220(g)

Introduction

This section reflects households provided affordable housing that meets the definition at 24 CFR 92.252. The # of units reflects the estimated households assisted under the HOME program. We estimate 6 rental units through general affordable housing development; 2 rental units under CHDO development; and 2 units under home ownership development, for a total of 10 units. Since proposals are accepted on a rolling basis, it is difficult to estimate whether these units will be new construction, rehab of existing units, acquisition or a combination. The distribution below is an estimate.

One Year Goals for the Number of Households to be Supported	
Homeless	
Non-Homeless	12
Special-Needs	
Total	12

Table 52 - One Year Goals for Affordable Housing by Support Requirement

One Year Goals for the Number of Households Supported Through	
Rental Assistance	
The Production of New Units	12
Rehab of Existing Units	
Acquisition of Existing Units	
Total	12

Table 53 - One Year Goals for Affordable Housing by Support Type

Discussion

Applications for HOME development projects are accepted on a rolling basis throughout the year. The numbers above reflect projects in the pipeline or inquiries that we anticipate becoming projects during the year. Estimate above reflects 10 rental units coming online through 22 Marshall Street; and 2 homeowner units through Habitat for Humanity at Paxton Terrace.

Although the NHRA Bronstein redevelopment may seek HOME funds; the units produces would likely be claimed in next year's Action Plan.

AP-60 Public Housing – 91.220(h)

Introduction

The City has limited resources to assist the needs of the Nashua Housing and Redevelopment Authority (NHRA) and its clients, especially when compared with the needs of those who do not have access to affordable housing. However, as the quality of the living environment for residents is critical to the neighborhoods where public housing is placed, the City will do everything it can to support revitalization efforts. HOME funds may be allocated to the Bronstein Redevelopment. Further the City is assisting to help this project through the permitting process including land use considerations.

As the Responsible Entity, the City conducts the environmental reviews for the NHRA. These are done according to the terms of an Agreement. The City recently added the NHRA to our Programmatic Agreement with NH SHPO to streamline historic review. The City dedicates significant time to preparing these reviews and considers this support critical to the NHRA's operations and ability to maintain its housing stock.

Actions planned during the next year to address the needs to public housing

The Nashua Housing and Redevelopment Authority (NHRA) is planning a major redevelopment that will have a significant (positive) impact on the number of affordable housing units, will greatly improve the layout of the area and living conditions of its current residents. The Bronstein Apartments (the "Property") is a 48-unit public housing development located on a 4.2-acre site at 41 Central Street, Nashua, NH and is owned and operated by the NHRA. The Property was built in 1971 and is in poor physical condition. NHRA has partnered with Boston Capital to redevelop Bronstein Apartments utilizing competitive 9% and 4% low-income housing tax credits, bond financing, and the HUD Section 18 Demolition/Disposition Program. The development team is proposing to replace the obsolete public housing with approximately 204 newly constructed units of mixed-income rental housing. Seventy (70) units will be affordable to extremely-low and low-income individuals and families.

The demolition and disposition of public housing is authorized under Section 18 of the Housing Act of 1937, as amended. NHRA will submit a Section 18 Demo/Dispo application to HUD in 2020. The application will meet all of the administrative steps and requirements of 24 CFR Part 970 and HUD Notice PIH 2018-04 including justification that the Property is obsolete as to physical condition, location, or other factors, making it unsuitable for housing purposes, and no reasonable program of modifications is cost-effective to return the public housing project or portion of the project to its useful life.

Once the Section 18 application is approved by HUD, the Declaration of Trust will be released from the Property and it will no longer operate under the public housing program, but under HUD's Project-Based Voucher Program. The Property will continue to operate with rental subsidy under Section 8 of the Housing Act of 1937.

The timeline for the redevelopment of Bronstein Apartments will be approximately 24-months.

Other actions during the next year to address public housing needs and Section 8 Housing Choice Voucher Program include:

- J Apply for additional Section 8 Housing Choice Vouchers, should they become available.
- J Utilize Project Based Vouchers to provide additional low income housing choices to the community.
- J Continue to achieve acceptable scores within the Public Housing Assessment (PHAS)

system. NHRA was designated a Standard Performer in 2018 – NHRA will make every effort to increase its designation.

- J Strive to maintain high performer status under the existing Section Eight Management Assessment Program (SEMAP) standards. A High Performer Status was achieved under SEMAP during 2019
- J Plan for alternative affordable housing opportunities under HUDs Rental Assistance Demonstration program, or any other programs available to the NHRA.
- J Ongoing oversight and incorporation of bi-annual development and unit inspections to ensure properties meet or exceed HUD standards.
- J Plan and assess capital improvements to NHRA’s public housing stock in order to improve the sustainability of its properties. A full review of NHRA's five-year capital improvement plan was completed, and work is ongoing to address some of these needs. Recent work completed included roof, siding, window and door replacements at multiple developments. Upcoming work will continue to address the building envelopes at public housing developments.
- J Finalize environmental site assessments (and any required mitigation) at all housing sites.

Actions to encourage public housing residents to become more involved in management and participate in homeownership

The Nashua Housing and Redevelopment Authority has a Resident Advisory Board (RAB) consisting of public housing residents and Section 8 participants. The Executive Director meets with the RAB annually to discuss any programmatic opportunities and plans for new initiatives. RAB members participate in the creation and acceptance of NHRA’s Annual PHA Plan, and work together with NHRA staff to address common goals and objectives. Should any opportunities present themselves to encourage home ownership, NHRA will act on those opportunities. The NHRA does not currently have a program in place to encourage home ownership. However there may be opportunity to partner with the City to target marketing of the HOME-funded home buyer assistance program to public housing residents. This effort is contingent on whether that program launches in the plan year.

The NHRA plans to continue the following initiatives to involve residents:

- J Meetings with residents to encourage and promote the start-up of Resident Associations to promote socialization and special community activities run by the resident leadership of the Association.
- J Meetings with residents to encourage and assist in starting Crime Watch groups at developments showing a need or desire to have one.
- J NHRA representation at all Resident Association meetings with management acting as a liaison between residents and NHRA.
- J Involvement from the Resident Advisory Board (group of individuals from public housing and Section 8 selected to serve on this Board) in the planning and development of NHRAs required Annual and Five-Year Plan.
- J Educational sessions provided to residents on site on important health and safety topics (bed bug awareness, fire prevention, etc.)
- J Management will work closely with local and state agencies such as the Welfare Dept., Health Dept., mental health providers, and family services providers to determine assistance needed

for NHRA families.

-) Management will collaborate with local community agencies to provide services and programs for NHRA residents.
-) Monthly review of all criminal activity reports supplied by the local police department to coordinate efforts to resolve and/or prevent further problems.
-) Management develops and conducts efforts to involve families in community activities such as development beautification events.
-) NHRA representation at a multitude of community networking and service provider meetings.

If the PHA is designated as troubled, describe the manner in which financial assistance will be provided or other assistance

NHA achieved a designation of *Standard Performer* in 2019.

AP-65 Homeless and Other Special Needs Activities – 91.220(i)

Introduction

Introduction

The Greater Nashua Continuum of Care (GNCOOC) is the primary decision making group that manages the overall planning effort for the entire COC. The communities served by the COC include Nashua, Brookline, Amherst, Hollis, Merrimack, Milford, Mont Vernon, Hudson, Litchfield and Mason. The GNCOOC utilizes federal, state and private funds to address the needs of the homeless, including competitive HOPWA grants. Limited resources covered by this Plan are directed toward Homelessness. However, the City as a whole and many of its Divisions work to address this need outside of Plan resources. Information relating to the GNCOOC's goals was obtained from their annual HUD reports.

For virtually all homeless individuals and families, decent, safe, affordable housing is a critical step in ending homelessness. In some cases, this is their only need. Often, in addition to affordable housing, the homeless also need supportive services to make the transition to independent living or to deal with other problems. Common issues include substance abuse, mental illness, childcare, transportation, life skills, job training and other basic life skills.

Describe the jurisdictions one-year goals and actions for reducing and ending homelessness including:

Reaching out to homeless persons (especially unsheltered persons) and assessing their individual needs

The City is represented at the GNCOOC by the Manager of the Welfare Department, a department within the City of Nashua's Division of Public Health & Community Services (DPHCS). The Welfare Officer is a member of the GNCOOC Executive Board and also chairs the GNCOOC Ending Homelessness sub-committee. The Ending Homelessness sub-committee was very active in the creation and implementation of the Coordinated Entry process for the Greater Nashua community, working with partner agencies to provide clients access to necessary homeless prevention and shelter services, including chronically homeless individuals and families and veteran populations. The City's DPHCS also provides outreach to homeless and at-risk members of the community through health activities on the Outreach Van.

Three barriers identified by the COC for those who are unsheltered are: reluctance to go to shelter, lack of transportation, and lack of ID. To address these barriers, outreach providers can house individuals directly from unsheltered situations, provide transportation and bus tickets to services, and purchase birth certificates and ID cards.

The GNCOOC will continue to implement several strategies which include: providing clients with documents needed for employment (identification cards and birth certificate), refer to job employment programs which help clients to obtain their GED-TASC and assist with resume writing, allow the homeless to use their address of job applications, SOAR Team Members assist by walking people through the process of signing up for benefits. GNCOOC will also provide clients with a list of agencies that will hire sex offenders and those with a criminal background.

Specific outreach to the LGBT population and training to providers is also a priority. Southern NH

HIV/AIDS Task Force is a non-profit AIDS Service Organization providing affordable housing, case management, and supportive services including access to medical care and medications to individuals and families living with HIV/AIDS and offers HIV testing and counseling to those at risk of HIV infection. As a member of the GNCOC, this agency offers a unique, holistic approach to care and prevention resulting in better outcomes for clients and community. While this Task Force is the lead agency, no GNCOC agency discriminates with regards to LGBT, and these agencies are trained on a regular basis on providing equal access to HUD Programs. Agencies also receive a list of resources to refer LGBT individuals to depending upon their need. Any client or community member with a discrimination claim due to HIV status or LGBTQIA identity are referred to GLAD – Gay and Lesbian Advocates and Defenders – New Hampshire.

In order to better identify and assess the needs of homeless youth, the GNCOC has partnered with the Balance of State COC (BOSCO) where COC leadership engaged the statewide Youth Subcommittee, which includes COC funded programs, child protection and juvenile justice staff, NH's Runaway and Homeless Youth programs (administered by Child and Family Services – CFS), and members of the former NH Homeless Teen Task Force, State Representatives, the Department of Education, and school district McKinney Vento homeless liaisons to increase PIT count participation by youth centered providers.

The GNCOC conducts an event, the Employment Connect annually at the Nashua Public Library. This event is targeted toward at-risk and homeless individuals to link with employment resources.

Addressing the emergency shelter and transitional housing needs of homeless persons

The Greater Nashua Continuum of Care continues to work to improve and streamline their Coordinated Entry process. Currently a phone line offers 24-hour response. A caller leaves a message with pertinent information and the assigned provider returns the call with shelter availability information. Plans to improve and streamline the process are ongoing. Goals include refining the intake form, continued training for participating providers and better data collection.

There are three emergency shelters operating in Nashua, two receiving some Emergency Solutions Grant (ESG) funds as well as several agencies with transitional housing programs. The shelter programs have relationships with the two local hospitals to provide support for individuals seeking services from the Emergency Department for behavioral health issues, and provide emergency shelter once they are discharged from the hospital.

All GNCOC participating agencies have programs established for the purpose of providing emergency or transitional housing. Each of these programs offers supportive services tailored to the client's needs. Services provided will include case management covering education, daycare, budgeting, interviewing, resume writing, employment skills, legal aid and counseling to assist individuals and families.

Under the ESG program the GNCOC has a goal that 70% of participating households will achieve housing stability for six months following the end of rental assistance and that 50% of participants will maintain or have increased their income at program exit, demonstrating sufficient income to maintain housing.

The GNCOC has established a practice of using the "no-wrong" door approach for families entering the systems. Clients are addressed in the Coordinated Entry System to identify a person's barriers to achieve stable housing. Families are prioritized based upon their complex, co-occurring issues that are likely to impact housing stability. This approach involves quickly connecting homeless families within 30 days to permanent housing without preconditions and barriers to entry by performing intake,

assessment, prioritization, housing location, move-in, case management, and on-going follow-up. Supportive services help to maximize housing stability and work to prevent the return to homelessness. Coordinated entry/shelters work with families on reunification with friends and/or family that may help while connecting them to resources to improve their situation to assist with housing stability on their own.

Helping low-income individuals and families avoid becoming homeless, especially extremely low-income individuals and families and those who are: being discharged from publicly funded institutions and systems of care (such as health care facilities, mental health facilities, foster care and other youth facilities, and corrections programs and institutions); or, receiving assistance from public or private agencies that address housing, health, social services, employment, education, or youth needs.

During the past year, GNCOC experienced an almost 2 percent reduction (1.88% or 11 people) in the number of first-time homeless from 584 to 573 persons. This reduction can be attributed to the GNCOC's Coordinated Entry Team which has placed diversion as its top priority when meeting with homeless individuals. Through diversion the Team is able to determine if an individual is truly homeless, has no other place to go and needs to be in a homeless facility. Some are more on the "risk of becoming homeless" due to payments owed on utility bills, rent, etc. In these cases the team works to find resources to address this issue so the individual can remain housed. The CoC continues to educate providers order to identify risk factors for homelessness through a diversion process. These risks include safety, employment/income status, family dynamics, mental and physical health, substance use, and history of housing and homelessness.

Diversion is attempted before entering an emergency shelter and several diversion attempts may occur before the client is fully assessed. All these diversion attempts are documented in HMIS, and clients are not engaged for permanent housing placement until all diversion options have been exhausted. Diversion also helps to determine if there are other locations such as a relative or friend's house where they can stay. When prevention funds are available, they are used to respond to service issues. Harbor Homes Inc. a funded agency, with the GNCOC Board is responsible for overseeing this Assessment Team and its strategy.

Harbor Homes Inc. has begun a 5 year \$400,000 grant from USDHHS (Substance Abuse and Mental Health Services Administration), to assist youth ages 18-24 with permanent housing. Approximately 150 individuals will be assisted. The funding will allow Harbor Homes to implement a comprehensive recovery and treatment program to individuals with a history of substance use disorders, and include permanent housing to further support a healthy transition to self-sufficiency and sustainability.

The GNCOC's adopted discharge protocols, which covers discharge from foster care, health care, mental health and corrections can be found at their website <http://nashua-coc.org/>

Discussion

CDBG funding was allocated last Plan year to the Nashua Soup Kitchen & Shelter to assist in redeveloping a former school building into new a shelter facility, offering emergency shelter for single adults and families with children, as well as the creation of 10 units of permanent housing for individuals experiencing homelessness. This project will begin this year.

In response to the opioid drug crisis facing New Hampshire, a new task force on Substance Use

Prevention, Treatment and Recovery was formed in January 2016 in Nashua, and began meeting to discuss how various organizations and agencies can work together to combat the opioid crisis. After 14 overdose deaths occurred in Nashua within a 2-month period (the highest number to date at that point in time), the task force proposed the creation of a safe station initiative that would serve those who are seeking treatment and recovery from drugs and substance misuse.

The City of Nashua (notably its Fire Department) has partnered with Harbor Homes, Ambulance Medical Rescue (AMR), St. Joseph's Hospital, Southern NH Health System and Revive Recovery Resource Center to implement a unique and successful strategy for helping individuals in need of substance use disorder treatment. Since late November 2016, 24 hours a day, an individual in need of help can go to any Nashua fire station ("Safe Station") and ask for assistance. The firefighters provide a quick assessment to determine if emergency medical care may be needed. Within 20 minutes, through texts, emails, and phone calls, a Harbor Homes trained recovery support provider responds in person to transport the participant to one of three locations where substance use disorder treatment, behavioral and primary health care, and emergency shelter will be provided.

As most City hospital Emergency Rooms may be overwhelmed with patients, this program assists all by weeding out those individuals seeking assistance that may not need immediate medical attention, but need immediate help. In its first year, over 1,100 individuals received assistance and the incidence of overdoses was reduced by 24%. The City plans to expand the network and services offered to increase the number emergency shelter beds available.

AP-75 Barriers to affordable housing – 91.220(j)

Introduction: This section repeats SP-55 above, but becomes part of the stand-alone Action Plan.

NH Housing Finance Authority's 2019 Rental Survey, conducted by the University of New Hampshire Survey Center, polled the owners and managers of more than 23,000 unsubsidized (market rate) rental housing units around the state (15% of the total number of units). The survey found the median two bedroom rent in Nashua increased from \$1,310 per a month in 2015 to \$1,506 per month in 2019. A 19% increase in the last four years and 28% increase since 2009.

Nashua's vacancy rate in 2019 is 0.3% for a two bedroom in Nashua, whereas a vacancy rate of 4% to 5% is considered a balanced market for supply and demand. The availability of units in the southern tier counties (Hillsborough, Merrimack, Rockingham and Strafford) as well as in the Upper Valley's Hanover/Lebanon area is especially low.

The highest rents are located in the southern counties near the state's largest cities and close to employers as well as the Boston job market. This is also where most of the state's rental housing properties are located. The average renter in the Nashua region makes \$15.63 per hour, or about \$32,000 per year. This would allow for a maximum of \$800 per month for housing expenses. This is half of the income needed to afford a rental unit at the 2019 median rent of \$1,506 per unit.

Furthermore, fair housing and affordable housing are closely intertwined. The most recent Analysis of Impediments to Fair Housing (conducted as an Assessment of Fair Housing) revealed there are some public policies that affect the limited availability of affordable housing. Examples include single family zoning restrictions, lot and green space restrictions, limitations on parking, etc. Other barrier examples include families opting to house multiple households in one unit, due to rising rents and economic downturns. Nashua does not restrict the number of related persons in one dwelling unit, however there can only be up to three unrelated people. The City's most affordable housing, namely rental, is coterminous with the inner city where the housing is dense, the population is predominately low-income and open space is limited. Parking in higher density areas or for homes with large families is a problem as parking space is limited. Nashua generally does not allow overnight parking on city streets, however recently revised its parking ban to allow certain streets (those in the most dense/low-income neighborhoods) to park on the street.

Strategy to Remove or Ameliorate the Barriers to Affordable Housing

Many communities in New Hampshire during the height of population growth established incentives for the development of housing for older persons as permitted under state and federal law. Given that the State has an aging population the development of age restricted housing was partially in response to meeting a growing demand. Additionally, senior housing theoretically had lower tax implications to municipalities than housing with children, making it more desirable. While such developments are exempt from familial status and age discrimination complaints, their proliferation came at the detriment of meeting housing demands for families with children. This past year the City amended it's Senior Housing Ordinance to tighten the definitions and criteria to qualify as senior housing. The legislation better regulates where this housing can be developed and it's suitability within the proposed neighborhood.

Recent studies identified a serious mismatch between the existing housing stock in the state and the

needs and desires of our changing population. NH's Accessory Dwelling Unit (ADU) law, which took effect on June 1, 2017 permits a residential living unit that is within or attached to a single-family dwelling and that provides independent living facilities for one or more persons, including provisions for sleeping, eating, cooking, and sanitation on the same parcel of land as the principal dwelling unit it accompanies. ADU's increase the housing supply without further land development, are an affordable housing option for many low-moderate income residents, improves homeowner cash flow and are helpful to the elderly and/or disabled people who may want to live close to family members.

Regarding development, the City has a AAA bond rating and comparatively low building fees, which creates a positive lending environment. The result of which can be seen in a recent uptick in affordable housing development throughout the city. During this plan year we expect to see the completion of 22 Marshall Street, containing 152 affordable housing units (100% of the project)/10 of which are HOME units.

The City has also adopted The Community Revitalization Tax Relief where property owners who intend to substantially rehabilitate a building located in downtown may apply to the City for a period of temporary, finite, tax relief during which the property tax on the structure would not increase as a result of its substantial rehabilitation (between 5 and 13 years). In exchange for the relief, the property owner grants a covenant ensuring there is a public benefit to the rehabilitation. Given that downtown Nashua contains mill building ripe for conversion this incentive may facilitate affordable housing development (as was the case for 30 Front Street/Cotton Mill). The City also offers tax exemptions for many segments of the community reducing the assessed value of the property as follows: blind exemption \$75,000; disabled exemption \$155,000; elderly exemption ranges from \$155,000-\$225,000. In the past year, the city increased the elderly exemption amount and will continue to review credits to determine increases as necessary.

The Housing Appeals Board was signed into law in the summer of 2019 and will become effective January 1, 2021 providing an expedited route for appeals to land use board decisions. This law requires decisions be made in 90 days, instead of the current system which takes more than a year and many times several years for a decision.

Lastly, the City worked with the Governor's Office for the successful designation of two of our most distressed Census Tracts as Opportunity Zones to spur economic development. Opportunity Fund investors will receive a deferral of taxes owed on unrealized capital. Further after 10 years, the investor will be eligible for an increase in the basis of their original investment, meaning significantly lower taxes at the end of the term.

Appendix - Alternate/Local Data Sources

Stakeholder Presentation – with results

Stakeholder ranking of priorities

Neighborworks Tree Street Map

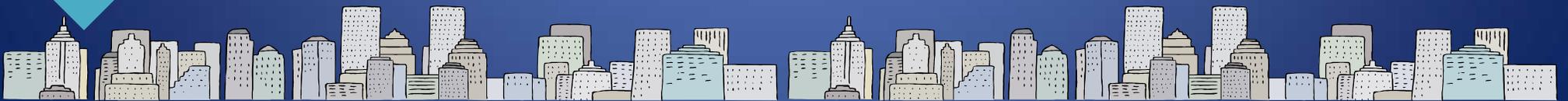
City of Nashua, NH 2020-2025 Consolidated Plan

For
HUD Programs, including the
Community Development Block Grant and
HOME Investment Partnership Program



The Consolidated Plan Process

- Develop a 5-year [Consolidated Plan](#)
- Create an [Action Plan](#) for each of the 5 years
- Select eligible activities that meet a National Objective
- Oversee the activities (contracts, progress, etc)
- Enter Results into IDIS
- Report end of year accomplishments ([CAPER](#))



What is in the ConPlan?

Housing Needs & Market Analysis:

- Housing units with problems (defects)
- Housing Cost burden
- Type of HH's in need of housing (i.e. single person, disabled, victims of DV)
- HH's at imminent risk of homelessness (characteristics of housing instability)/homeless needs
- Type of housing vs. types of households
- Affordability of Housing
- Public Housing

Community & Economic Development:

- Need for improving public facilities and services
- Need for improving community facilities
- Labor Force analysis – jobs available, educational attainment, skills, wages
- Areas of disproportionate need

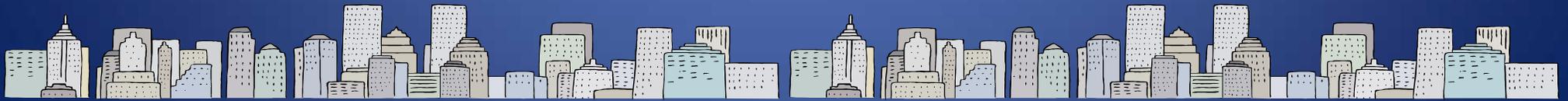
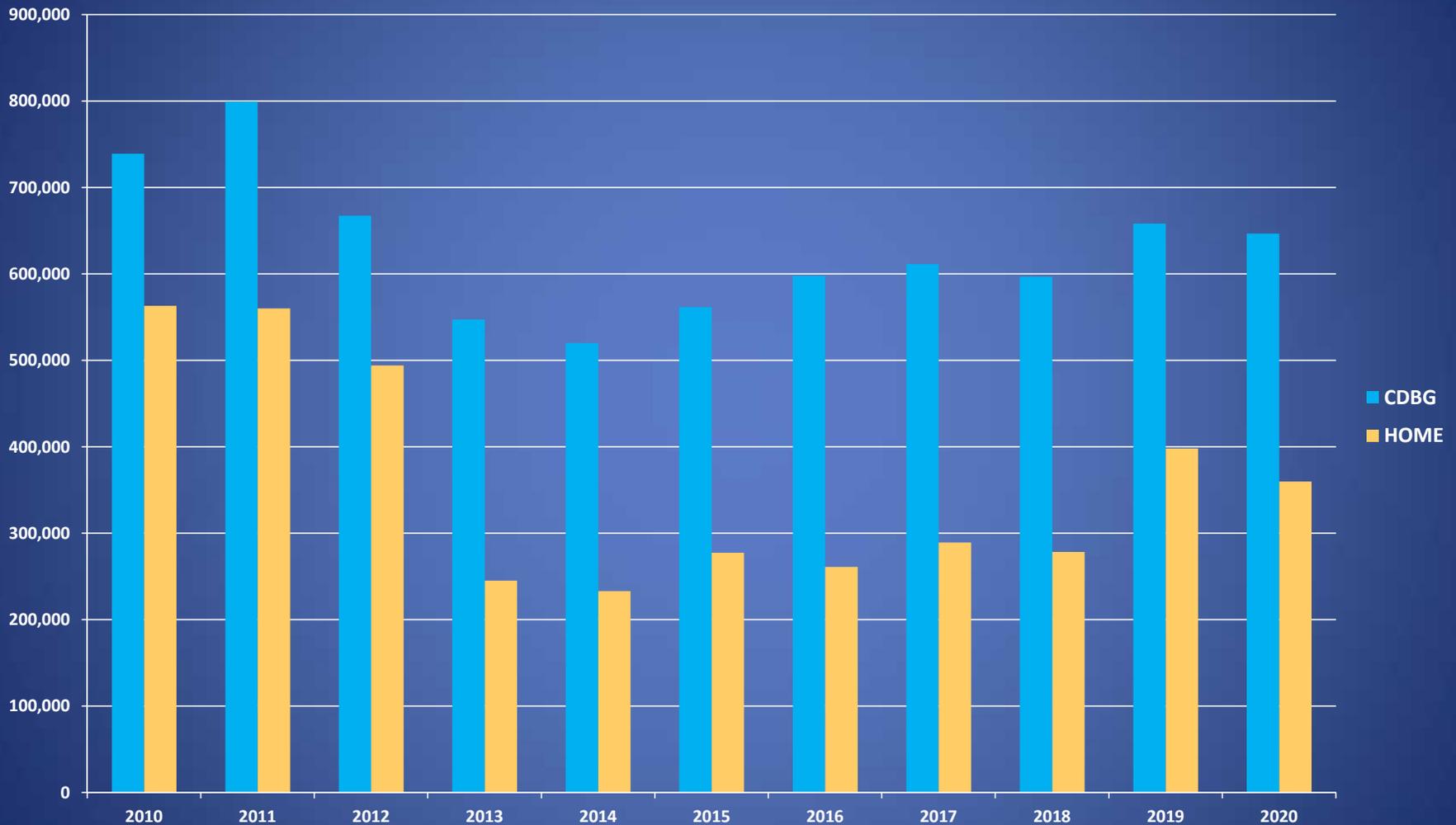
How do we prioritize needs?

- Stakeholder input
- Community surveys
- Resident surveys
- Other recent plans & studies
 - NH Housing Finance Authority
 - Nashua Regional Planning Commission
 - GNCOC
 - United Way
 - Neighborhood & strategic plans
 - And more!

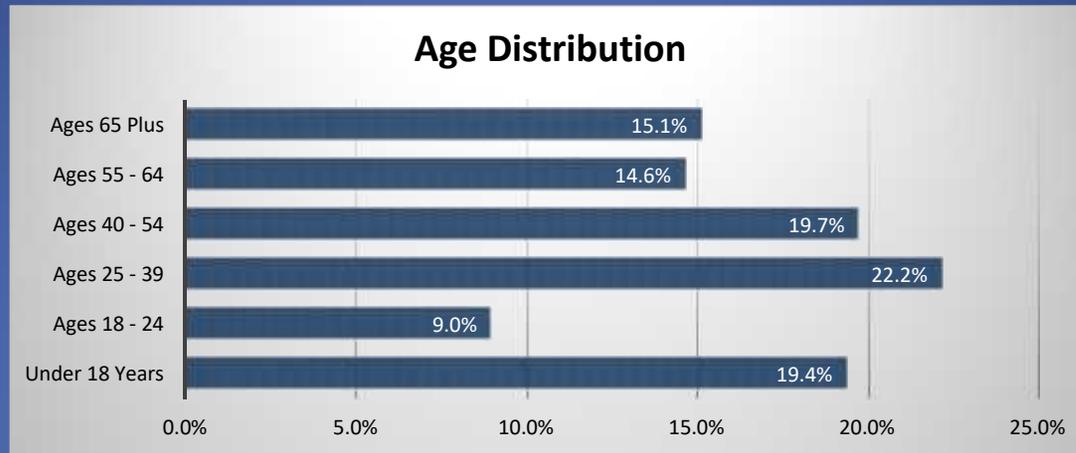
What can ConPlan funds do?



10-year Funding History



Demographic Summary - Age



Income by Tract

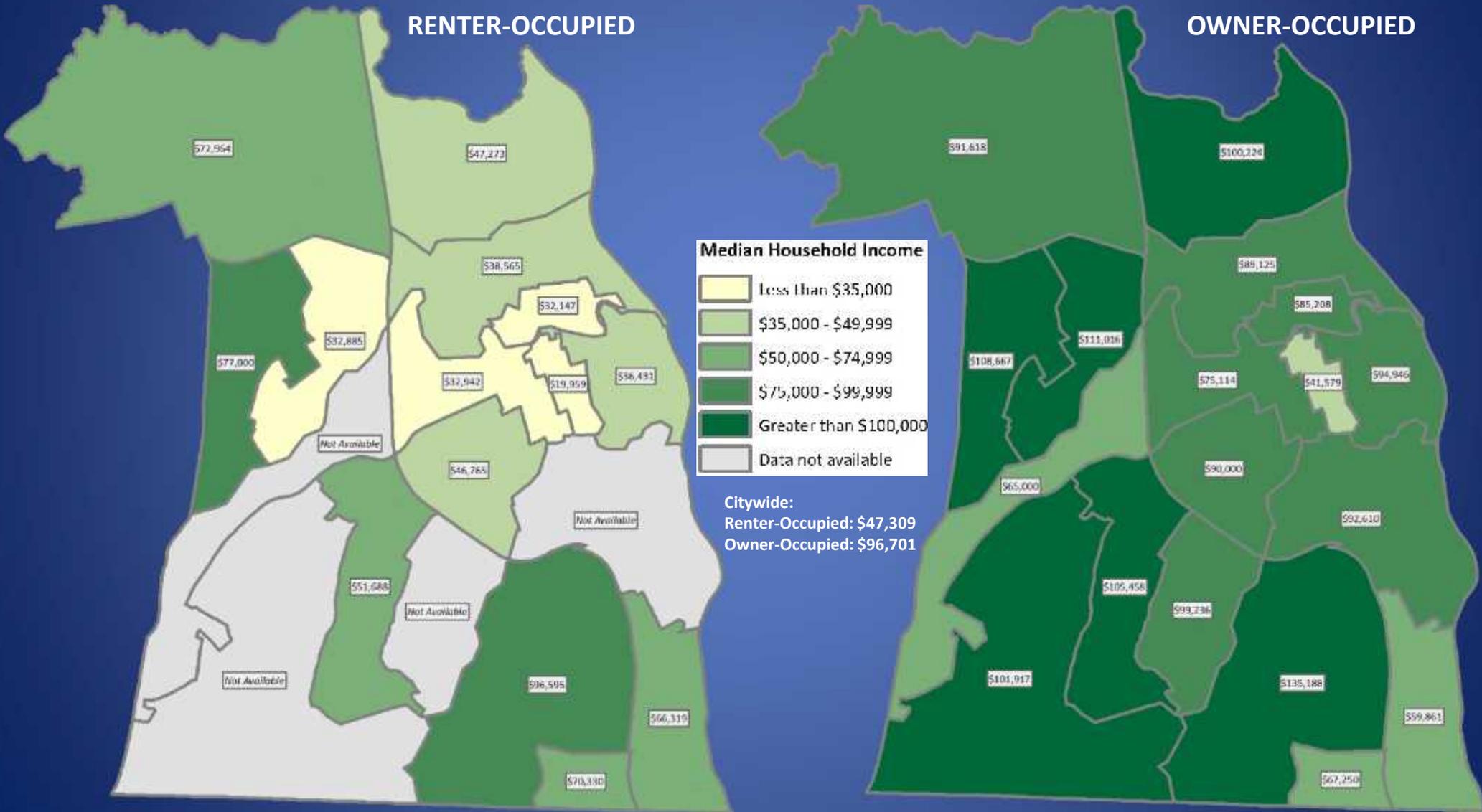
RENTER-OCCUPIED

OWNER-OCCUPIED

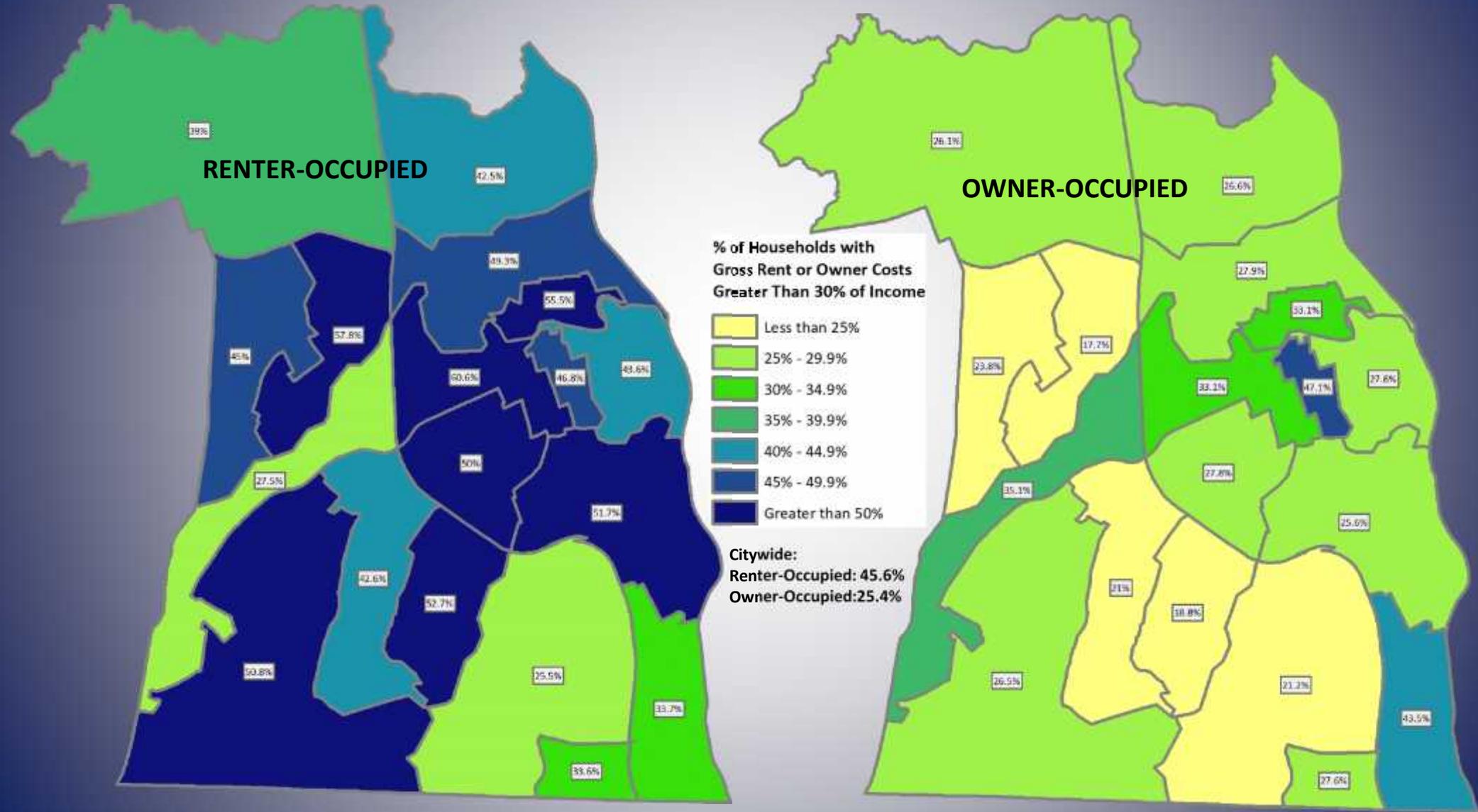
Median Household Income



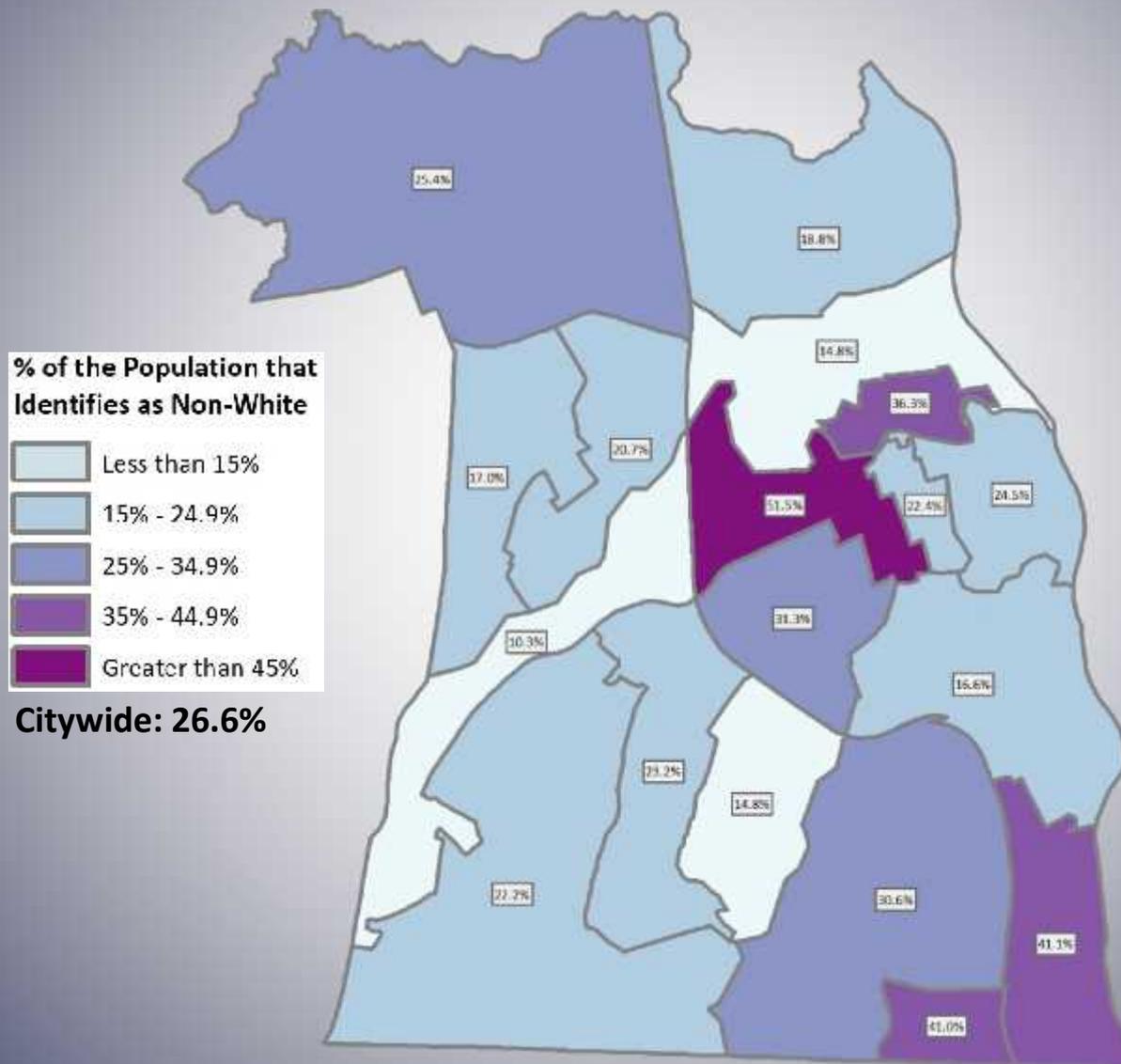
Citywide:
 Renter-Occupied: \$47,309
 Owner-Occupied: \$96,701



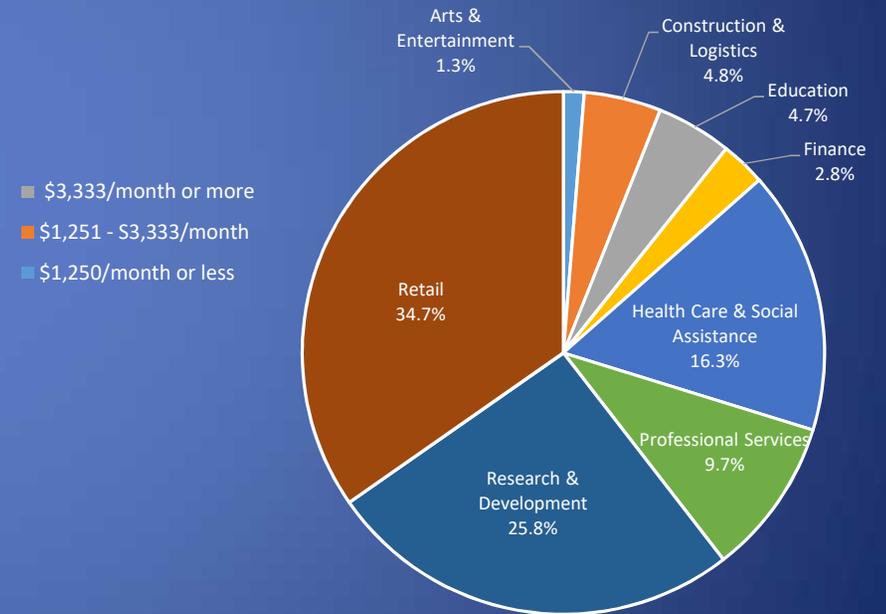
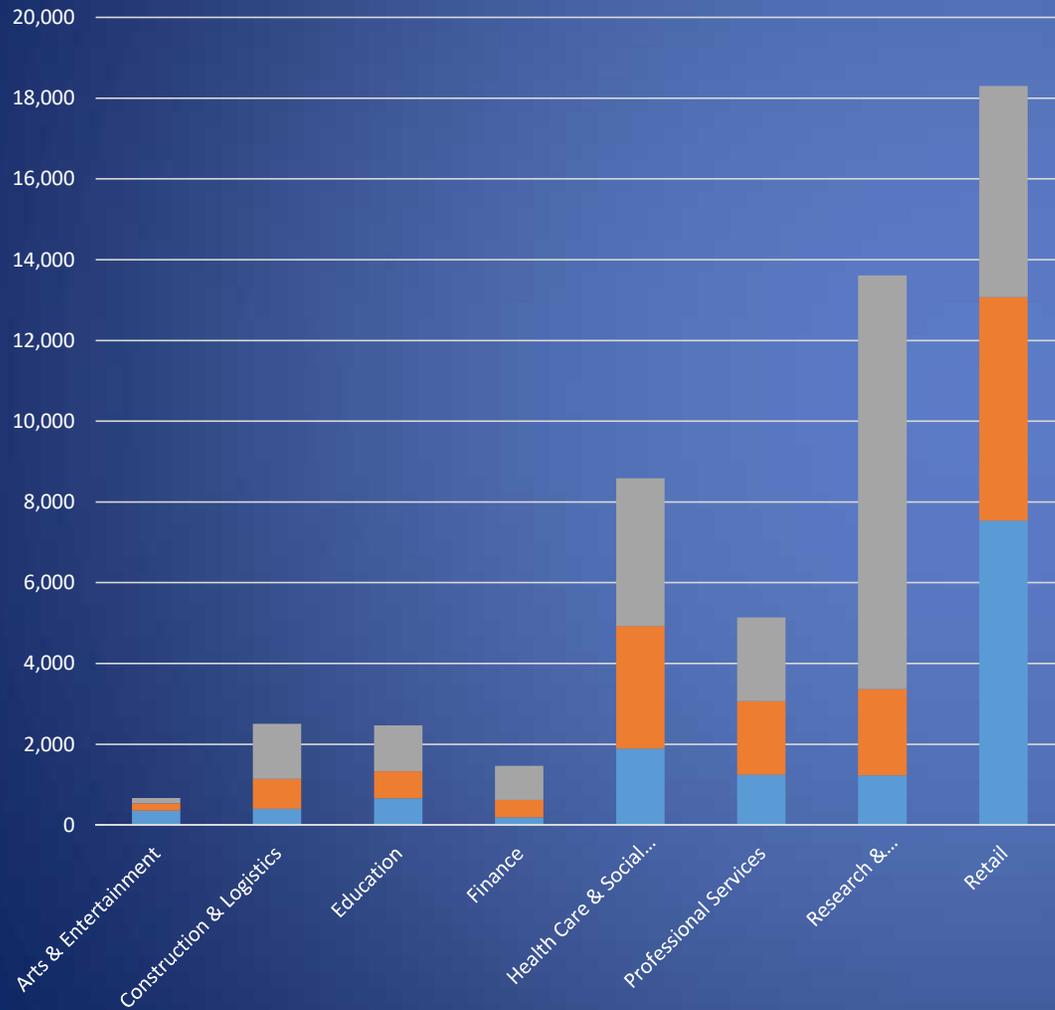
Housing Cost Burden



Race & Ethnicity



Jobs in Nashua by Industry & Salary



Areas of Concern

The data shows many areas of concern for Nashua's inner city...

- High concentration of poverty
- High housing cost burden
- High ethnicity concentrations
- High % of rental units, oldest housing stock
(also most affordable)

Areas of Concern Factors: Pop age 75+, Minority pop, Single parents w/ children, HH w/o access to vehicle, Poverty level, Limited English Proficiency, Rent exceeds 50% of income, Disabled population



Ranking Needs

Using data and real-life experiences:

- What are the greatest housing needs?
- Who has the greatest housing needs?
- What are the community development needs?
- How do we serve homeless individuals?
- What are the highest needs for the limited public service (operating) funds?

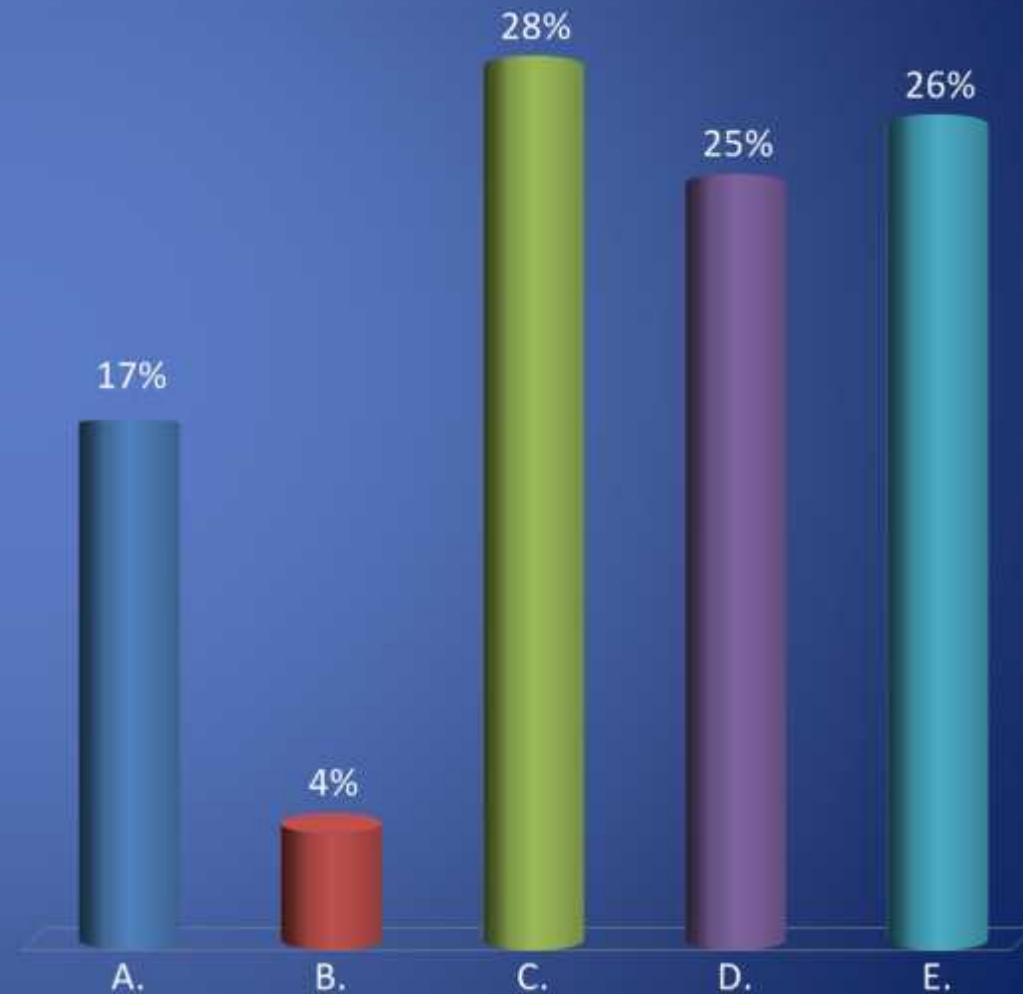
Polling

- Select up to three options per slide
- All needs are important, which do you think are most critical
- There is not enough money to solve all the problems, we need to prioritize

Let's Go!

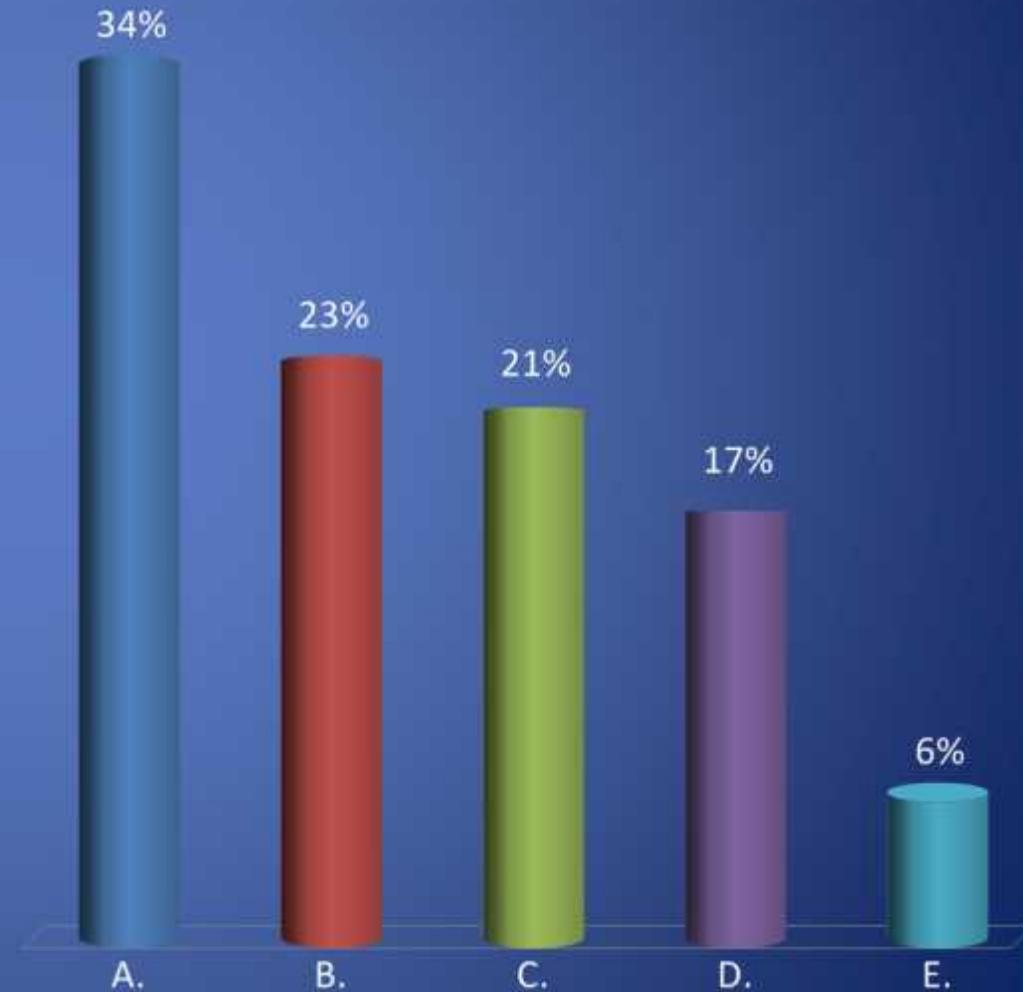
Community & Economic Development

- A. Infrastructure: Streets, sidewalks, lighting, etc.
- B. Parks, greenspace, trails
- C. Economic Development: Job training, business development, new jobs
- D. Transportation services
- E. Neighborhood facilities



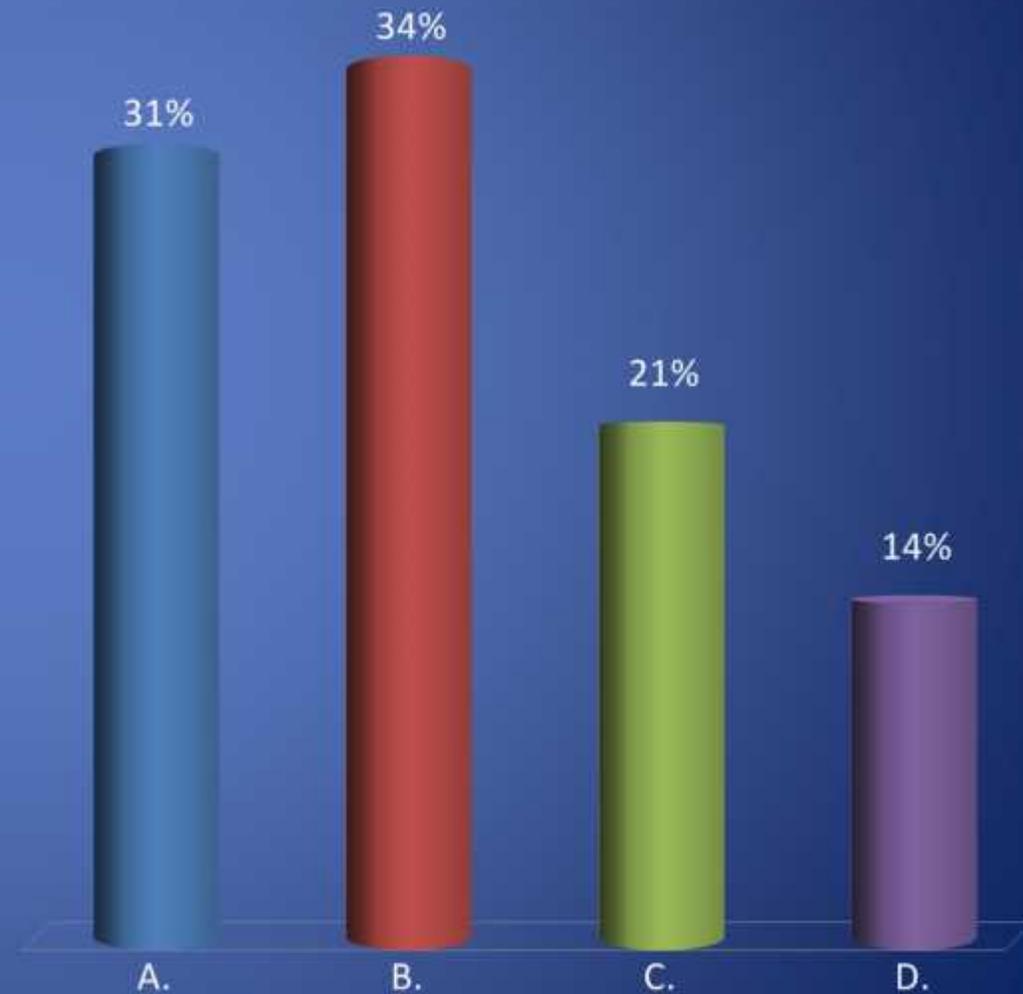
Housing

- A. Affordable rental housing development
- B. Residential Rehab: owner occupied and/or rental
- C. Homeless facilities
- D. Homeownership assistance
- E. Fair housing education



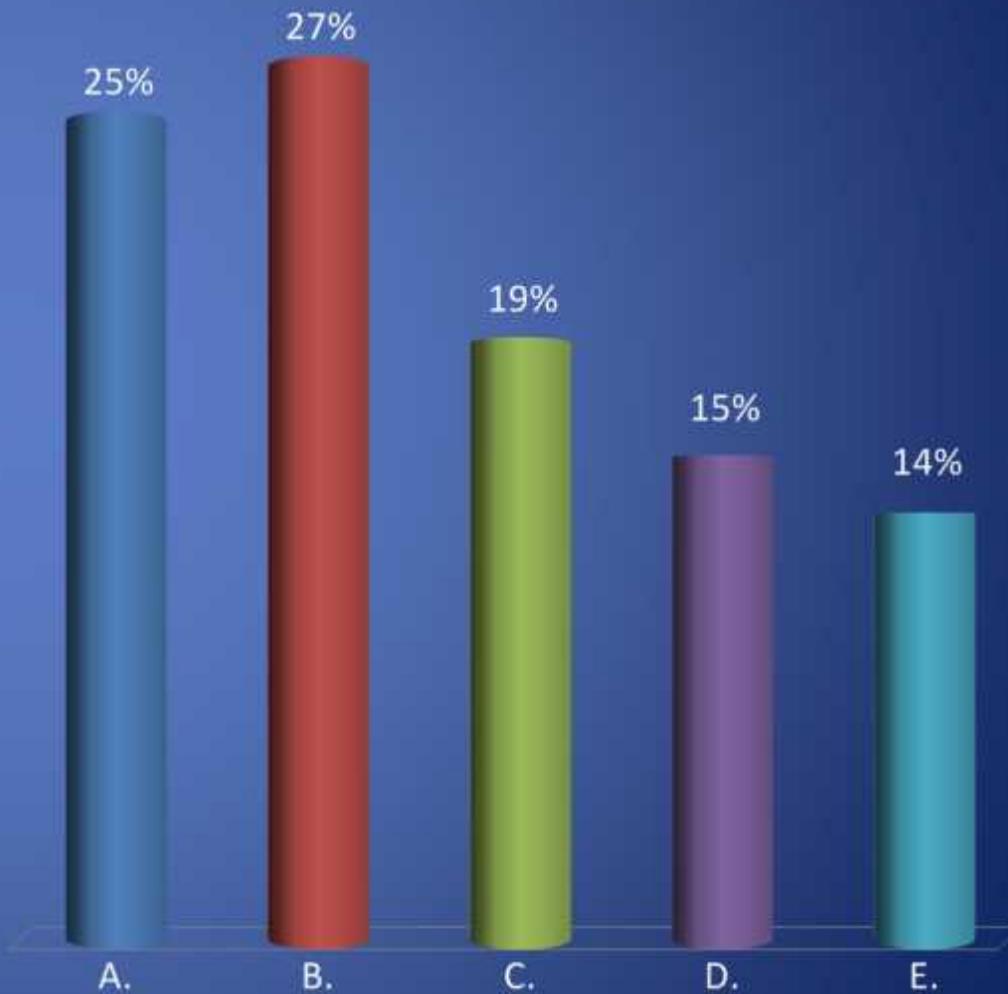
Youth

- A. Childcare programs/subsidies
- B. Services/facilities for high risk youth (abused, neglected, criminal, etc)
- C. General youth programs/facilities
- D. Services/facilities for disabled or special needs youth



Seniors

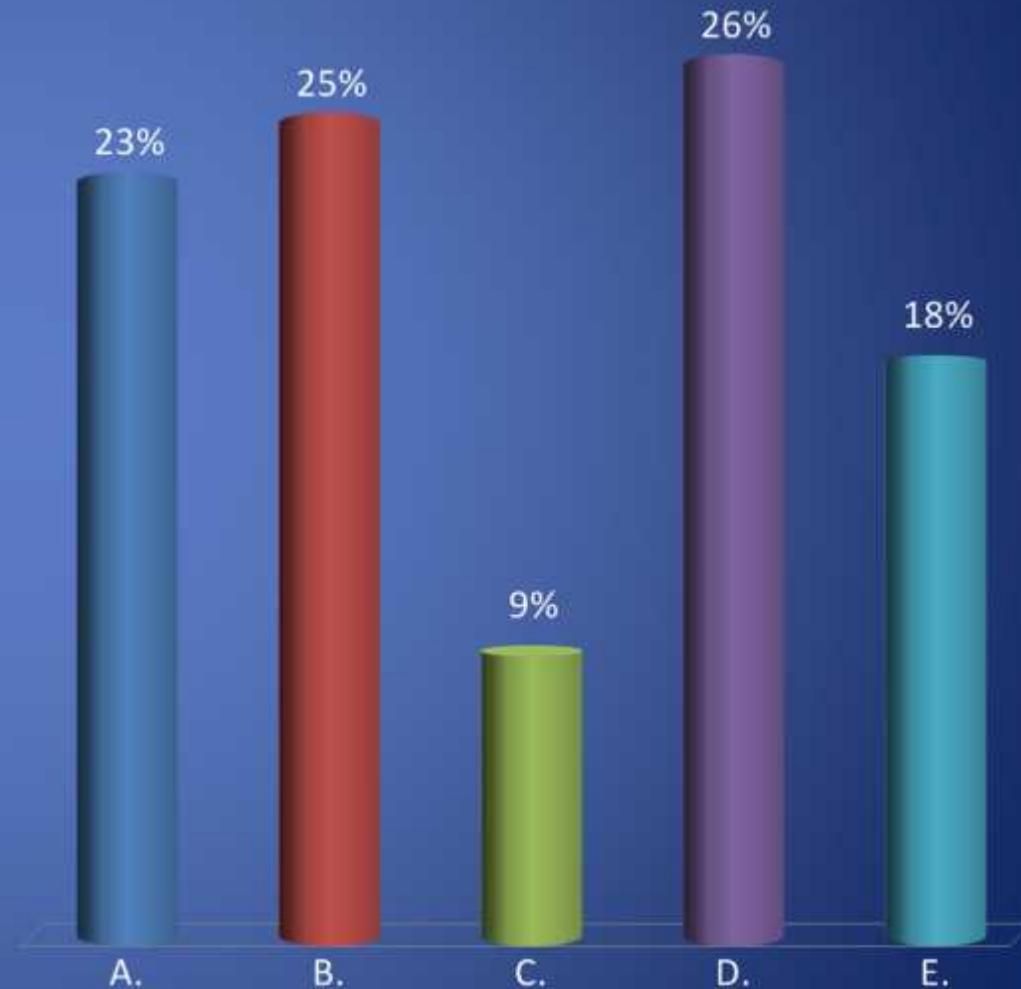
- A. Affordable housing
- B. Transportation services
- C. Health services
- D. Senior facility improvements
- E. General senior programs



Disabled/Special Needs

- A. Affordable housing
- B. Services (day programs, etc)
- C. Improvements to special care facilities
- D. Transportation services
- E. Childcare/employment training

*Special needs category includes victims of domestic violence, persons living with AIDS, mental/physically challenged, substance misusers and others



General Category	Top Needs	Goals	Votes		
Housing	Affordable Rental	Increase affordable housing by 20%	4		
		Enhance quality of existing housing stock	4		
		Federal rent caps	3		
		ADA compliant housing/shelters	1		
		Promote congregate living	1		
		Housing opportunities to move people from shelters C.E. (coordinated entry)	-		
		Residential Rehab	Employment opportunities (i.e. trades)	-	
			Subsidize cap rents allowed via voucher	-	
			Homelessness	"Bank" developable land	-
				Local tax credit to low income LLD's	-
				Est./dedicate local AHTF	-
Coop housing dev. Using students in trades (partner with Habitat)	-				
SUBTOTAL	13				
Youth	Services/Facilities for high risk Childcare programs/subsidies	More clinicians – Connect college to youth – volunteer hours needed – loan forg	7		
		Gap – strategy to reach the youth who fall through the cracks	2		
		Accessible – parent/child education	1		
		Increased access to after school programs/resources (family workshops)	1		
		Trauma/mental health challenges	-		
		Waypoint – GNMHC – Lamprey – Youth Council (Student Liaison)	-		
		Reduce gap time between identifying and treatment	-		
		Gap – communication among resources	-		
		Foster youth Ind. Vouchers	-		
		School 5 year strategic plan - ACES	-		
SUBTOTAL	11				
Community & Economic Development	Economic Development Neighborhood Facilities Transportation	Expansion of transportation system over next two years	6		
		More frequent loops (routes)	1		
		Expansion of geographic area within and out of the city	1		
		(Gap) Job training – low barrier/high track	1		
		Expanded hours	-		
		Feasibility assessment *	-		
		Financial implications *	-		
		Continue/expand free bus passes youth/senior *	-		
		Working parent – child drop off at work locations: Childcare accessible	-		
		Expand our thinking to Greater Nashua	-		
		Ensure neighborhood facilities in all tracts of the city for youth	-		
		Build empowerment and preventative services (bring services to where the youth/families) i.e. Girls scouts outreach troupe program	-		
SUBTOTAL	9				

General Category	Top Needs	Goals	Votes
Seniors	Tranportation Services	Ride-share app to utilize available vehicles and drivers (CTS partnership, volunteers? First student? other drivers)	5
		Affordable day programs using available facilities or livable facilities	1
		Formal council/coordinator for seniors	1
		More data on senior transit's needs	-
		Meals on wheels services link	-
	Health Services	Safety, accountability, finance, accommodating health needs	-
		LNA's	-
		Subsidize (generic) medicine	-
		Partner with churches – ride share	-
		SUBTOTAL	7
Disabled/Special Needs	Transportation	Develop a transportation app that gets information into hands of users that provide realistic information and a way to pay	1
	Services	Expand the capacity of existing services, service centers to meet the full needs of the community	1
		Apply for more grants and seek more public/private partnerships to meet current and future needs	-
		Address work force shortage – employment training on job skills training for human service fields	-
	Affordable Housing	Collaboration between organizations to meet needs of community – public and private	-
SUBTOTAL	2		



40 Pine St

34 Central / 19 Ash St

40 Ash St

48 Ledge St

38.5 West Hollis St

4-14 McLaren Ave

**NASHUA TREE STREETS REVITALIZATION
ACQUIRED PROPERTIES**

