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STATE OF NEW HAMPSHIRE  
DEPARTMENT OF HEALTH AND HUMAN SERVICES  
DIVISION OF COMMUNITY BASED CARE SERVICES

Nicholas A. Toumpas  
Commissioner  
  
Nancy L. Rollins  
Associate Commissioner

*BUREAU OF BEHAVIORAL HEALTH*  
105 PLEASANT STREET, CONCORD, NH 03301  
603-271-5000 1-800-852-3345 Ext. 5000  
Fax: 603-271-5058 TDD Access: 1-800-735-2964

November 8, 2013

Her Excellency, Governor Margaret Wood Hassan  
and the Honorable Council  
State House  
Concord, NH 03301

Sole Source  
100% Federal funds

**Requested Action**

Authorize the Department of Health and Human Services, Division of Community Based Care Services, Bureau of Behavioral Health, to **amend** an agreement (purchase order 1030514) with H.E.A.R.T.S. Peer Support Center of Greater Nashua Region VI, 5 Pine Street Extension, Unit 2K, PO Box 1564, Nashua, New Hampshire 03060, vendor number 209287, to provide a peer-operated crisis respite program in an amount not to exceed \$75,195 from January 1, 2014, or date of Governor and Council approval, whichever is later, through June 30, 2014. Funds are available in the following accounts in State Fiscal Year 2014:

05-95-92-920010-7011 HEALTH AND SOCIAL SERVICES, HEALTH AND HUMAN SVCS DEPT OF, HHS:BEHAVIORAL HEALTH DIV OF, DIV OF BEHAVIORAL HEALTH, PEER SUPPORT SERVICES

<u>Class/</u> <u>Object</u>	<u>Class Title</u>	<u>Activity Code</u>	<u>Current</u> <u>Modified</u> <u>Budget</u>	<u>Increase</u> <u>(Decrease)</u> <u>Amount</u>	<u>Revised</u> <u>Modified</u> <u>Budget</u>
102-0731	Contracts for Program Svs	92207011	\$95,565	\$0	\$95,565

05-95-92-920010-7143 HEALTH AND SOCIAL SERVICES, HEALTH AND HUMAN SVCS DEPT OF, HHS: BEHAVIORAL HEALTH DIV OF, DIV OF BEHAVIORAL HEALTH, MENTAL HEALTH BLOCK GRANT

<u>Class/</u> <u>Object</u>	<u>Class Title</u>	<u>Activity Code</u>	<u>Current</u> <u>Modified</u> <u>Budget</u>	<u>Increase</u> <u>(Decrease)</u> <u>Amount</u>	<u>Revised</u> <u>Modified</u> <u>Budget</u>
102-0731	Contracts for Program Svs	92207143	\$129,269	\$ 75,195	\$204,464
	<b>Total</b>	<b>Total</b>	<b>\$224,834</b>	<b>\$75,195</b>	<b>\$300,029</b>

**Explanation**

The purpose of this request is to provide funds to H.E.A.R.T.S. Peer Support Center of Greater Nashua Region VI to open and run a two-bed peer-operated crisis respite program. The program will be located in the Nashua area but will accept individuals from all over the state. A crisis respite program is temporary acute housing for those individuals in psychiatric crisis who would prefer to maintain their tenure out of a psychiatric hospital and work on their recovery goals with their peers rather than in a medical setting. In a peer support agency, members are well known to each other. While asymptomatic, members identify what types of interventions work best for

them in the event of a psychiatric crisis. Should a crisis occur, fellow peers know best how to help them toward recovery. The agency often needs to utilize short-term crisis respite housing, which allows the member to stay in their home community and eliminates the cost of higher levels of care. The funding provided in this amendment will primarily be used to pay the peer support members staffing the two crisis respite beds and for the rental cost of the site.

Opening these beds will help alleviate the bed shortage at New Hampshire Hospital and is part of the Department's Ten-Year Plan to restore the state's mental health system.

The H.E.A.R.T.S. Peer Support Center of Greater Nashua Region VI provides community-based education, outreach and other peer support services to adults in Region 6 with long-term and/or severe mental illness. These community services seek to enhance personal wellness, independence, and recovery by reducing crises due to symptoms of mental illness through skills teaching in wellness self-management, outreach support, assistance in accessing community resources, warm line and other supports. The Bureau of Behavioral Health monitors the peer support agencies through annual quality assurance reviews, monthly meetings, and quarterly financial and statistical reporting.

Should Governor and Council determine not to approve this Request, the state would be foregoing the opportunity to help reduce the pressure on hospital emergency rooms across the state who are experiencing lengthy wait times in admitting persons in need of mental health care into New Hampshire Hospital.

Area served: Statewide.

Source of funds: 0% General Funds and 100% Federal Funds.

In the event that the Federal Funds become no longer available, General Funds will not be requested to support this program.

Respectfully submitted,



Nancy L. Rollins  
Associate Commissioner

Approved by



Nicholas A. Toumpas  
Commissioner

NLR/PBR/sl

PSA FY14 HEARTS Amendment #1

Enclosures

## **Region VI**

# **HEARTS Peer Support Center of Greater Nashua Region 6**

### Communities Served:

Amherst  
Brookline  
Hollis  
Hudson  
Litchfield  
Mason  
Merrimack  
Milford  
Mont Vernon  
Nashua

# Amendment to Agreement

This Amendment to Agreement (hereinafter called the "Amendment") is dated this 7th day of November, 2013, between the State of New Hampshire, Division of Community Based Care Services, Bureau of Behavioral Health of the Department of Health and Human Services (hereinafter called "BBH") and **HEARTS Peer Support Center of Greater Nashua Region VI**, a non-profit corporation organized under the laws of the State of New Hampshire with a place of business at 3 Pine Street, Unit 2K, PO Box 1564, Nashua, New Hampshire 03060 (hereinafter referred to as the "Contractor").

**WHEREAS**, pursuant to an Agreement dated April 18, 2013, the Contractor has agreed to provide certain services upon the terms and conditions specified in the Agreement, in consideration of payment by BBH of certain sums specified therein; and

**WHEREAS**, pursuant to Paragraph 17. of the Agreement, the Agreement may be amended, waived or discharged only by an instrument in writing signed by the parties thereto and only after approval of such amendment, waiver, or discharge by the Governor and Executive Council of the State of New Hampshire;

**WHEREAS**, BBH and the Contractor have agreed to amend the Agreement in certain respects;

**NOW THEREFORE**, in consideration of the foregoing and of the covenants and conditions contained in the Agreement and set forth herein, the parties hereto do hereby agree as follows:

## 1. Amendment and Modification of Agreement.

1.1. The Agreement is hereby amended as follows:

By deleting, in Subparagraph 1.8. of the General Provisions the amount of \$224,834. and substituting therefore the amount of \$300,029.

## 2. Amendment and Modification to Exhibit A, Scope of Work

2.1. Add: **Section I. PEER SUPPORT SERVICES** before Paragraph 1.

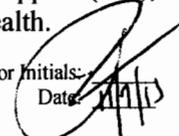
2.2. Delete from Section I., Paragraph 25. Commencement Date of Agreement.

2.3. Add the following: **Section II. PEER OPERATED CRISIS RESPITE PROGRAM** after Paragraph 24. of Section I.

## Section II. PEER OPERATED CRISIS RESPITE PROGRAM

1. **Crisis Respite Program:** The Contractor shall provide a 2-bed peer operated crisis respite program. The program shall allow for early intervention for individuals (18) years of age and older who have a mental illness and are experiencing a crisis in the community. It will provide a short-term crisis response in a safe environment staffed by peers, which provides the opportunity to avoid the need for hospitalization and maintain placement in the community. Crisis interventions offer individuals in psychiatric crisis an alternative to hospitalization. This intervention is done using a model of Intentional Peer Support (IPS), which utilizes an individual's strengths and assists in their personal recovery for better mental health.

Contractor Initials: \_\_\_\_\_  
Date: \_\_\_\_\_



- 2. Goals and Objectives:** The peer operated crisis respite program shall incorporate the following goals and objectives:
- 2.1. The program shall demonstrate support of the goals and objectives detailed in New Hampshire's 10-Year Olmstead Plan.
  - 2.2. Commence operations within sixty (60) days of approval of the contract by Governor and Council.
  - 2.3. The provision of services and supports within a crisis respite apartment in the community are designed to provide a safe environment for the individual to remain in the community, and reduce the need for hospitalization through an early intervention model.
  - 2.4. A referral process for individuals to the local community mental health center who require a higher level of care or evaluation for hospitalization if services are not effective, or the individual's crisis or level of functioning has declined to the point that they may require hospitalization or additional services and supports not available through the peer support agency.
  - 2.5. Linkage to other services and supports offered by the peer support agency during the course of that individual's stay at the peer operated crisis respite program.
  - 2.6. Provision of limited transportation to and from the crisis respite program, and to appointments with the community mental health center, primary care and other services and supports as appropriate to the individual's needs.
  - 2.7. Incorporate an objective functional assessment measure to be administered by the peer support agency at the time of entry into the program and exit from the program.
  - 2.8. Supports to the individual will be provided within the context of a person-centered approach ensuring that the individual's personal recovery goals are incorporated into the individual's Wellness, Recovery, Action Plan (WRAP), if applicable.
  - 2.9. Support the individual to returning to full participation in community activities, services and supports.
  - 2.10. Ensure the individual's health needs are addressed during the course of their stay in the crisis respite program.
  - 2.11. Ensure open communication with any service providers involved in the individual's care, with their written consent.
- 3. Staffing:** The peer operated crisis respite program shall be staffed with trained personnel (24) twenty-four hours per day when participants are in the program.
- 4. Staff Training:** The Contractor shall provide staff training in Intentional Peer Support (IPS); Wellness, Recovery, Action Plan (WRAP) and Crisis Intervention. Individuals trained shall be documented on the Approved Staff Training Quarterly Report Form which will be submitted quarterly along with the Quarterly Statistical Reports.
- 5. Documentation:** It is the Contractor's responsibility to maintain up-to-date personnel files documenting participation in trainings staff have attended and keeping certifications up-to-date.
- 6. Program Statistics:** The Contractor shall submit monthly the Peer Operated Crisis Respite Program Statistics Form documenting participants in the program.
- 7. Reporting:** All services shall be reported quarterly on the Quarterly Statistical Report.
- 8. Assessment Measures:** The Contractor shall implement an objective functional assessment measure for each individual, pre-and post-stay, in order to measure efficacy of program. This shall be re-identified and submitted in a report to BBH every (6) six months.
- 9. Program Tracking Log:** The Contractor shall submit the Peer Operated Crisis Respite Program Tracking Log quarterly along with the Quarterly Statistical Reports.
- 10. Policies and Procedures:** Written agency policies and procedures specific to the operation of the peer operated crisis respite program shall be developed within three (3) months of the award of this contract. All policies and procedures developed are subject to BBH approval.

Contractor Initials:  
Date: 1/7/13

11. **Chart of Required Reporting:** Please refer to *Exhibit A, Addendum A* for assistance with required reports that are due to BBH.

12. **Commencement Date:** The Commencement Date of this Amendment shall be the Effective Date, that is January 1, 2014, or date of Governor and Council of the State of New Hampshire approval, whichever is later. The Contractor shall not be paid for any services that may be provided prior to the Effective Date.

3. **Amendment and Modification to Exhibit B, Methods of Payment.**

3.1. By changing Paragraph 2. to read, "The following Program funds shall only be expended by the Contractor as directed by BBH. Failure to expend Program funds as directed may, at the discretion of BBH, result in financial penalties not greater than the amount of the directed expenditure:

Two-bed Peer Operated Crisis Respite Program	\$75,195
Retirement	\$ 1,917
<b>Total</b>	<b>\$77,112</b>

3.2. By deleting Paragraph 12. and replacing it with the following:

12. This Contract is funded by the New Hampshire General Fund and by federal funds made available under the Catalog of Federal Domestic Assistance (CFDA), as follows:

NH General Fund: ~~\$170,760~~ \$95,565 *MAC*  
Federal Funds: ~~\$129,269~~ \$204,464 *MAC*  
CFDA #: 93.958  
Federal Agency: U.S. Department of Health and Human Services  
Program Title: Block Grants for Community Mental Health Services  
Amount: ~~\$129,269~~ \$204,464 *MAC*

4. **Effective Date of Amendment:** The Effective Date of this action is January 1, 2014, or date of Governor and Council approval through June 30, 2014.

5. **Continuance of Agreement:** Except as specifically amended and modified by the terms and conditions of this Agreement, the Agreement and the obligations of the parties there under shall remain in full force and effect in accordance with the terms and conditions set forth therein.

IN WITNESS WHEREOF, the parties have hereunto set their hands as of the day and year written above.

DHHS/Division of Community Based Care Services  
The Bureau of Behavioral Health

HEARTS Peer Support Center of Greater  
Nashua Region VI

By: Nancy L. Rollins  
Nancy L. Rollins  
Associate Commissioner

By: Patricia A. Worsley  
Patricia A. Worsley  
Board President

Contractor Initials: *AK*  
Date: 1/7/14

*Mary Ann Cunningham MAC*

STATE OF NEW HAMPSHIRE  
COUNTY OF HILLSBOROUGH

The forgoing instrument was acknowledged before me this 7th day of November, 2013, by:

Ann Fisher  
Board Secretary

*Susan M. Cordwell Beland*  
Notary Public / Justice of the Peace  
Commission Expires: *November 27, 2016*

Approved as to form, execution and substance:

OFFICE OF THE ATTORNEY GENERAL

By: *Jeanne C Herrick*  
Jeanne Herrick, Attorney  
Date: *14 NOV. 2013*

Contractor Initials: *[Signature]*

Date: *11/7/13*

# CERTIFICATE OF VOTE

I, Ann Fisher, do hereby certify that:

1. I am the duly elected Clerk of HEARTS Peer Support Center of Greater Nashua Region VI
2. The following are true copies of two resolutions duly adopted at a meeting of the Board of Directors of the Corporation duly held on the 7<sup>th</sup> day of November, 2013.

**RESOLVED:** That this Corporation enter into a contract with the State of New Hampshire, acting through its Department of Health and Human Services, Division of Community Based Care Services, Bureau of Behavioral Health, concerning the following matter:

**To Provide: Peer Support Services and Peer Operated Crisis Respite Program.**

**RESOLVED:** That the Pat Worsley hereby is authorized on behalf of this Corporation to enter into the said contract with the State and to execute any and all documents, agreements and other instruments, and any amendments, revisions, or modifications thereto, as (s)he may deem necessary, desirable or appropriate.

3. The foregoing resolutions have not been amended or revoked and remain in full force and effect as of 7<sup>th</sup> day of November, 2013.

4. Patricia A. Worsley is duly elected President of the Corporation.

(Seal)  
(Corporation)

  
\_\_\_\_\_  
(Signature of Board Secretary)

State of New Hampshire

County of Hillsborough

The foregoing instrument was acknowledged before me this 7th day of November, 2013

by Ann Fisher, Board Secretary.



Name: Diane Beland/  
Title: Notary Public/Justice of the Peace

(Seal)  
(Notary Public)

Commission Expires: September 17, 2016



# MELANSON HEATH & COMPANY, PC

CERTIFIED PUBLIC ACCOUNTANTS  
MANAGEMENT ADVISORS

## INDEPENDENT AUDITORS' REPORT

To the Board of Directors of  
H.E.A.R.T.S. Peer Support Center of Greater Nashua  
Nashua, New Hampshire

We have audited the accompanying statement of financial position of H.E.A.R.T.S. Peer Support Center of Greater Nashua (a nonprofit organization) as of June 30, 2012, and the related statements of activities, functional expenses, and cash flows for the year then ended. These financial statements are the responsibility of the Organization's management. Our responsibility is to express an opinion on these financial statements based on our audit.

We conducted our audit in accordance with auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation. We believe that our audit provides a reasonable basis for our opinion.

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of H.E.A.R.T.S. Peer Support Center of Greater Nashua as of June 30, 2012, and the changes in its net assets and its cash flows for the year then ended in conformity with accounting principles generally accepted in the United States of America.

In accordance with *Government Auditing Standards*, we have also issued our report dated December 7, 2012 on our consideration of the H.E.A.R.T.S. Peer Support Center of Greater Nashua's internal control over financial reporting and on our tests of its compliance with certain provisions of laws, regulations, contracts and grant agreements and other matters. The purpose of that report is to describe the scope of our testing of internal control over financial reporting and compliance and the results of that testing, and not to provide an opinion on the internal control over financial reporting or on compliance. That report is an integral part of an audit performed in accordance with *Government Auditing Standards* and should be considered in assessing the results of our audit.

Our audit was conducted for the purpose of forming an opinion on the financial statements as a whole. The supplementary information on page 13 is presented for purposes of additional analysis and is not a required part of the financial statements. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the information is fairly stated in all material respects in relation to the financial statements as a whole.

*Melanson, Heath + Company P.C.*  
December 7, 2012

H.E.A.R.T.S. Peer Support Center of Greater Nashua

Statement of Financial Position

June 30, 2012

<u>ASSETS</u>	<u>Unrestricted</u>	<u>Temporarily Restricted</u>	<u>Total</u>
Current Assets:			
Cash and cash equivalents	\$ 19,567	\$ 801	\$ 20,368
Accounts receivable	6,383	-	6,383
Other current assets	900	-	900
Total Current Assets	<u>26,850</u>	<u>801</u>	<u>27,651</u>
Property and Equipment, net of accumulated depreciation of \$ 6,355	<u>10,529</u>	<u>-</u>	<u>10,529</u>
Total Assets	<u>\$ 37,379</u>	<u>\$ 801</u>	<u>\$ 38,180</u>
<u>LIABILITIES AND NET ASSETS</u>			
Current Liabilities:			
Accounts payable	\$ 3,608	\$ -	\$ 3,608
Accrued expenses	2,709	-	2,709
Refundable advance - BBH	41,803	-	41,803
Total Current Liabilities	<u>48,120</u>	<u>-</u>	<u>48,120</u>
Net Assets	<u>(10,741)</u>	<u>801</u>	<u>(9,940)</u>
Total Liabilities and Net Assets	<u>\$ 37,379</u>	<u>\$ 801</u>	<u>\$ 38,180</u>

See accompanying notes to the financial statements

H.E.A.R.T.S. Peer Support Center of Greater Nashua

Statement of Activities

For the Year Ended June 30, 2012

	Unrestricted			Temporarily Restricted	Total
	BBH	Non-BBH	Total		
Support and Revenue:					
Federal grants	\$ 134,299	\$ -	\$ 134,299	\$ -	\$ 134,299
Bureau of Behavioral Health	54,258	-	54,258	-	54,258
Other public support	-	8,773	8,773	-	8,773
Interest income	-	3	3	-	3
Net assets released from restriction	-	123	123	(123)	-
Total Support and Revenue	<u>188,557</u>	<u>8,899</u>	<u>197,456</u>	<u>(123)</u>	<u>197,333</u>
Expenses:					
Program services	145,349	10,388	155,737	-	155,737
General and administrative	43,208	3,112	46,320	-	46,320
Fundraising	-	10,727	10,727	-	10,727
Total Expenses	<u>188,557</u>	<u>24,227</u>	<u>212,784</u>	<u>-</u>	<u>212,784</u>
Change in Net Assets Before Depreciation	-	(15,328)	(15,328)	(123)	(15,451)
Depreciation (see note 5)	<u>3,000</u>	<u>628</u>	<u>3,628</u>	<u>-</u>	<u>3,628</u>
Change in Net Assets	(3,000)	(15,956)	(18,956)	(123)	(19,079)
Net Assets, Beginning of Year	<u>12,750</u>	<u>(4,535)</u>	<u>8,215</u>	<u>924</u>	<u>9,139</u>
Net Assets, End of Year	<u>\$ 9,750</u>	<u>\$ (20,491)</u>	<u>\$ (10,741)</u>	<u>\$ 801</u>	<u>\$ (9,940)</u>

See accompanying notes to the financial statements

H.E.A.R.T.S. Peer Support Center of Greater Nashua

Statement of Functional Expenses

For the Year Ended June 30, 2012

	<u>Program Services</u>	<u>General and Administrative</u>	<u>Fundraising</u>	<u>Total</u>
Accounting fees	\$ -	\$ 6,702	\$ -	\$ 6,702
Advertising and promotion	-	753	432	1,185
Building and household supplies	1,826	-	-	1,826
Client food	1,386	-	-	1,386
Client travel and transportation	4,623	-	-	4,623
Employee benefits	14,771	5,738	2,279	22,788
Insurance	2,928	3,999	-	6,927
Office supplies and equipment	-	4,402	-	4,402
Other expenses	9,402	-	-	9,402
Payroll taxes	7,049	1,640	644	9,333
Postage and shipping	-	239	-	239
Rent	34,776	3,024	-	37,800
Repairs and maintenance	457	-	-	457
Salaries and wages	71,357	18,777	7,372	97,506
Staff development	3,776	-	-	3,776
Staff travel and transportation	1,073	1,046	-	2,119
Telephone	2,139	-	-	2,139
Utilities	174	-	-	174
	<u>155,737</u>	<u>46,320</u>	<u>10,727</u>	<u>212,784</u>
Total expenses before depreciation				
Depreciation (see note 5)	<u>3,000</u>	<u>628</u>	<u>-</u>	<u>3,628</u>
Total expenses	<u>\$ 158,737</u>	<u>\$ 46,948</u>	<u>\$ 10,727</u>	<u>\$ 216,412</u>

See accompanying notes to the financial statements

H.E.A.R.T.S. Peer Support Center of Greater Nashua

Statement of Cash Flows

For the Year Ended June 30, 2012

<u>Cash Flows From Operating Activities:</u>	
Change in net assets	\$ (19,079)
Adjustments to reconcile change in net assets to net cash from operating activities:	
Depreciation	3,628
(Increase) Decrease In:	
Accounts receivable	(5,314)
Other current assets	(900)
Increase (Decrease) In:	
Accounts payable	2,862
Accrued expenses	(2,483)
Refundable advance - BBH	<u>25,571</u>
Net Cash Provided By Operating Activities and Net Increase in Cash and Cash Equivalents	<u>4,285</u>
Cash and Cash Equivalents, Beginning of Year	<u>16,083</u>
Cash and Cash Equivalents, End of Year	<u><u>\$ 20,368</u></u>

See accompanying notes to the financial statements

**H.E.A.R.T.S.**  
**Peer Support Center of Greater Nashua Region VI**

**Mission Statement**

Our mission, as peers, is to support one another as people who are challenged by the daily effects of living with, coping with, and recovering from mental health issues. Everyone will be encouraged to develop relationships that will enable and empower each other to learn, to grow, and to understand each other's world view. In addition, our aim is to develop greater awareness of personal and relational patterns and to support and challenge each other through peer support, self-advocacy, empowerment, and education. Our ultimate goal is to achieve recovery and ongoing wellness.

# KEY ADMINISTRATIVE PERSONNEL - FY2014

## H.E.A.R.T.S. CRISIS RESPITE

Position	Name	FTEs	Salary	Salary contributed from BBH	% of Salary from BBH
Program Director	TBD	0.80	\$ 8,320.00	\$ 8,320.00	100%

# Ken Lewis

## OBJECTIVE

Secure a position working with people challenged by disabilities, using my knowledge, supervisory skills and past experiences with individuals who are mentally challenged, chemically dependent, homeless, and/or hearing impaired.

## EXPERIENCE

### **2010-2013** Executive Director of H.E.A.R.T.S. Peer Support Center of Greater Nashua Region VI

Moved and opened a 900 sq. ft. Peer Support Center at 3 Pine St. Ext. Unit B with an Asst. Director, Members, and Participants on July 1 2010. Overseen daily operations of this Peer Support Center, which is open 8:00 am to 4:00 pm Monday thru Friday. Provided peer support, literature, and training to one paid/peer staff, volunteers, and all its members. Facilitated groups, attended training, complete and maintain certifications, attend required meeting, imputed and submitted all statistical reports and documents. I continued to develop the H.E.A.R.T.S. program and a Board of Directors, reporting to the BOD, as well as registering and submitted all required paperwork. On July 1, 2011 moved and open a larger center of 1,540 sq. due to increased membership size. Continue to develop programming, promoting in all regional areas and community providers working with the members communities and the BOD to insure and improve the communication of a Consumer run organization. Working hard on collaboration with local mental health center and lamprey health clinic on a Healthy Connections and Whole Health and Wellness Program and continuing to support, and grow these groups to be more of a peer supportive model. Oversee increased Staff of 1 full time Assistant and 6 part-time staff hired from within membership to support a continue population growth to date. I am aggressively making great strides developing community collaborations and connections with community provider within its Continuum of Care, community stakeholders, and our two local hospitals to ensure peer support and H.E.A.R.T.S. PSC is represented. I am a new member of the NH State Behavioral Health Advisory Council.

### **2009-2010** Executive Director of H.E.A.R.T.S. Peer Support Center of Greater Nashua Region VI /HHI

Overseen daily operations of this Peer Support Center, which is open 8:00 am to 4:00 pm Monday thru Friday. Provided peer support, literature, and training to one paid/peer staff, volunteers, and all its members. Facilitated groups, attended training, complete and maintain certifications, attend required meeting, imputed and submitted all statistical reports and documents. Continued to develop the H.E.A.R.T.S. program and a Board of Directors, reporting to the BOD, as well as registering and submitted all required paperwork to allow H.E.A.R.T.S. PSA to become a totally peer run Independent 501(C)3 corporation by end of Fiscal year FY10 June 30, 2010.

### **2007-2009** Program Manager of Connections at Harbor Homes (HHI) 45 High St. Nashua, NH 03060

Became the program manager and was responsible for the day-to-day supervision and operation of the peer support / information resource program for HHI. Knowledge of available services and proved proficient in referring mentally challenged and homeless individuals to the proper agencies. Supervised mentally challenged individuals satisfactory and maintained proper boundaries. Duties include but not limited to; supervising staff, volunteers, and members daily, tracking data necessary for grant outcomes and information where tracking would be needed; assurance of facility operating in a safe manner; help create and organize new program emphasizing peer support; organizing and facilitating groups using IPS and WRAP training methods. Responsible for evolving the peer support program to becoming its own independent 501©3 PSA Center, and developing a Interim Board of Directors and reporting directly to the BOD.

### **2005-2007** Program Coordinator of Connections at Harbor Homes (HHI) 45 High St. Nashua, NH 03060

Assisted the program manager in the day-to-day supervision and operation of the peer support / information resource program for HHI. Knowledge of available services and proved proficient in referring mentally challenged and homeless individuals to the proper agencies. Supervised mentally challenged individuals satisfactory and maintained proper boundaries. Duties include but not limited to; supervising staff, volunteers, and members daily, tracking data necessary for grant outcomes and information where tracking would be needed; assurance of facility operating in a safe manner; help create and organize new program emphasizing peer support; Organizing and facilitating groups using IPS and WRAP training methods.

**2003-2005** Machine Operator/NC Operator at Sanmina-Sci Corp. in Wilmington, MA

**2002-2003** Assistance Manager at Spring Glow Services in Oroville, CA

**1998-2002** Craftsman-Pipe Fitter/Boilermaker at NEPCO Corp. in Sacramento, CA

**1989-1998** Engineering Technician at HADCO Corp. in Hudson, NH

**1986-1989** Incoming Inspection QA/QC at Digital Corp. in Nashua, NH

**1984-1986** Electronic Technician at Wang Corp. in Haverhill, MA

**1983-1984** Electronic Technician at Lockheed/Sanders in Nashua, NH

## EDUCATION

**2004 – 2007** New Hampshire Community Technical College, Nashua, NH  
Certificate in American Sign Language I, II, III, IV; Deaf Culture I, II

**1974-1978** Sunnyvale High School, Sunnyvale, CA                      Graduated 1978

## TRAININGS

Certified in IPS Training and Co-Supervision  
IPS/WRAP Facilitators Training  
Certified in WRAP Training  
Substance Abuse State of New Hampshire Training  
Planting the Seeds for Health and Wholeness Training  
Smoking Cessation Program  
Certified in SOAR Program  
Certified in First-Aid and CPR  
Certification in American Sign Language  
Safe Food Handling Class from NHFB  
Administrative Training  
Members Rights and Responsibilities  
Sexual Harassment

 **H.E.A.R.T.S.**  
**BOARD OF DIRECTORS**  
November 1, 2013

**PRESIDENT**  
Patricia A. Worsley

**VICE PRESIDENT**  
Ed Bowman

**SECRETARY**  
Ann Fisher

**TREASURER**  
Claire Peddle

Cindy Moher

Christine Graham

Kathy Paquette

Terry Manges

Ruth Morgan

Steve Farr

Jack Harkins

Jim Balchunis

Kathryn Dutton

**ALTERNATIVE BOARD MEMBER**  
Jill O'Neill

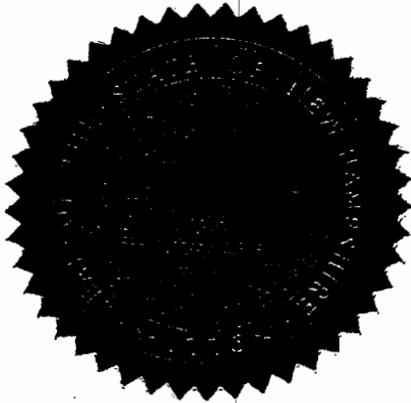
**EXECUTIVE DIRECTOR**  
Ken Lewis

**ASST. EXECUTIVE DIRECTOR**  
Tom Doucette

State of New Hampshire  
Department of State

CERTIFICATE

I, William M. Gardner, Secretary of State of the State of New Hampshire, do hereby certify that H.E.A.R.T.S. Peer Support Center of Greater Nashua Region VI is a New Hampshire nonprofit corporation formed February 19, 2009. I further certify that it is in good standing as far as this office is concerned, having filed the return(s) and paid the fees required by law.



In TESTIMONY WHEREOF, I hereto  
set my hand and cause to be affixed  
the Seal of the State of New Hampshire,  
this 3<sup>rd</sup> day of April A.D. 2013

A handwritten signature in cursive script, appearing to read "William M. Gardner".

William M. Gardner  
Secretary of State



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
8/1/2013

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

**IMPORTANT:** If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

<b>PRODUCER</b> E & S Insurance Services LLC 21 Meadowbrook Lane P O Box 7425 Gilford NH 03247-7425	<b>CONTACT NAME:</b> Fairley Kenneally <b>PHONE (A/C No. Ext):</b> (603) 293-2791 <b>FAX (A/C No.):</b> (603) 293-7188 <b>E-MAIL ADDRESS:</b> fairley@esinsurance.com																				
	<table border="1"> <tr> <th colspan="2">INSURER(S) AFFORDING COVERAGE</th> <th>NAIC #</th> </tr> <tr> <td>INSURER A: Nautilus Insurance Company</td> <td></td> <td></td> </tr> <tr> <td>INSURER B: United Financial Casualty</td> <td></td> <td>11770</td> </tr> <tr> <td>INSURER C: FirstComp</td> <td></td> <td>27626</td> </tr> <tr> <td>INSURER D: United States Liability</td> <td></td> <td></td> </tr> <tr> <td>INSURER E: The Hartford</td> <td></td> <td></td> </tr> <tr> <td>INSURER F:</td> <td></td> <td></td> </tr> </table>	INSURER(S) AFFORDING COVERAGE		NAIC #	INSURER A: Nautilus Insurance Company			INSURER B: United Financial Casualty		11770	INSURER C: FirstComp		27626	INSURER D: United States Liability			INSURER E: The Hartford			INSURER F:	
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<b>INSURED</b> H.E.A.R.T.S. Peer Support Center of Greater P O Box 1564 Nashua NH 03061																					

**COVERAGES**      **CERTIFICATE NUMBER:** 2013-2014      **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS								
A	<b>GENERAL LIABILITY</b> <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GENL AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC			NN363902	7/1/2013	7/1/2014	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 50,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COM/OP AGG \$ included \$								
	<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO ALL OWNED AUTOS <input type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS			08116464-2	7/15/2013	7/15/2014	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ Uninsured motorist combined \$ 1,000,000								
	<b>UMBRELLA LIAB</b> <input type="checkbox"/> OCCUR <b>EXCESS LIAB</b> <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$								
C	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N N	N/A	WC0112725-04	7/1/2013	7/1/2014	<table border="1"> <tr> <td>WC STATUTORY LIMITS</td> <td>OTHER</td> </tr> <tr> <td>E.L. EACH ACCIDENT</td> <td>\$ 100,000</td> </tr> <tr> <td>E.L. DISEASE - EA EMPLOYEE</td> <td>\$ 100,000</td> </tr> <tr> <td>E.L. DISEASE - POLICY LIMIT</td> <td>\$ 500,000</td> </tr> </table>	WC STATUTORY LIMITS	OTHER	E.L. EACH ACCIDENT	\$ 100,000	E.L. DISEASE - EA EMPLOYEE	\$ 100,000	E.L. DISEASE - POLICY LIMIT	\$ 500,000
WC STATUTORY LIMITS	OTHER														
E.L. EACH ACCIDENT	\$ 100,000														
E.L. DISEASE - EA EMPLOYEE	\$ 100,000														
E.L. DISEASE - POLICY LIMIT	\$ 500,000														
D	<b>Directors &amp; Officers</b>			NDO2010584	07/01/2012	07/01/2015	\$1,000,000								
E	<b>Employee Dishonesty</b>			04BDDGB6960	07/27/2011	07/27/2014	\$14,000								

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

<b>CERTIFICATE HOLDER</b>  NH DHHS Bureau of Behavioral Health 105 Pleasant Street Concord, NH 03301-6504	<b>CANCELLATION</b>  SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.  AUTHORIZED REPRESENTATIVE  F Kenneally/SARA <i>Fairley Kenneally</i>
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**STATE OF NEW HAMPSHIRE  
DEPARTMENT OF HEALTH AND HUMAN SERVICES  
DIVISION OF COMMUNITY BASED CARE SERVICES**

**BUREAU OF BEHAVIORAL HEALTH**

105 PLEASANT STREET, CONCORD, NH 03301  
603-271-5000 1-800-852-3345 Ext. 5000  
Fax: 603-271-5058 TDD Access: 1-800-735-2964

Nicholas A. Toumpas  
Commissioner

Nancy L. Rollins  
Associate Commissioner

May 15, 2013

Her Excellency, Governor Margaret Wood Hassan  
and the Honorable Council  
State House  
Concord, NH 03301

**Requested Action**

Authorize the Department of Health and Human Services, Division of Community Based Care Services, Bureau of Behavioral Health to enter into Agreements with vendors to provide peer support services in an amount not to exceed \$2,298,830 in the aggregate, effective July 1, 2013, or the date of Governor and Council approval, whichever is later, through June 30, 2014.

Summary of contracted amounts by vendor:

<b>Vendor</b>	<b>Amount</b>
The Alternative Life Center	\$ 410,218
The Stepping Stone Drop-In Center Association	\$ 361,803
Lakes Region Consumer Advisory Board	\$ 331,666
Monadnock Area Peer Support Agency	\$ 147,644
H.E.A.R.T.S. Peer Support Center of Greater Nashua Region VI	\$ 224,834
On The Road To Recovery, Inc.	\$ 432,212
Seacoast Consumer Alliance Peer Support Center	\$ 237,828
Tri-City Consumers' Action Co-operative	\$ 152,625
<b>TOTAL</b>	<b>\$2,298,830</b>

Funds are anticipated to be available in the following accounts in state fiscal year 2014 based upon the availability and continued appropriation of funds in the future operating budget:

**05-95-92-920010-7011 HEALTH AND SOCIAL SERVICES, HEALTH AND HUMAN SVCS DEPT OF, HHS: BEHAVIORAL HEALTH DIV OF, DIV OF BEHAVIORAL HEALTH, PEER SUPPORT SERVICES (100% General Funds)**

**05-95-92-920010-7143 HEALTH AND SOCIAL SERVICES, HEALTH AND HUMAN SVCS DEPT OF, HHS: BEHAVIORAL HEALTH DIV OF, DIV OF BEHAVIORAL HEALTH, MENTAL HEALTH BLOCK GRANT (100% Federal Funds)**

**Explanation**

This package includes 8 of the 8 contracts the Bureau of Behavioral Health has negotiated with the Peer Support Agencies for a total of \$2,298,830. This represents the complete procurement of peer support services for state fiscal year 2014.

The Contractors above will provide community-based education, outreach and other peer support services to adults with long-term and/or severe mental illness. Six contractors will cover one geographic region each while

two contractors will cover two regions each. The community services provided will seek to enhance personal wellness, independence, and recovery by reducing crises due to symptoms of mental illness through skills teaching in wellness self-management, outreach support, assistance in accessing community resources, warm line and other supports. The eight peer support agency contractors expect to serve a total of 2,621 consumers during fiscal year 2014.

A legal notice seeking proposals to provide peer support services in all 10 geographic regions was published on the Department of Health and Human Services website from March 30, 2012 to April 3, 2012. An option in the request for proposals allowed for a one-year renewal pending the availability of funding, the agreement of the parties, and approval by Governor and Council. A competitive review process was utilized to evaluate all proposals submitted by the deadline. Participants in the review process included Department of Health and Human Services staff from the Bureau of Behavioral Health and the Bureau of Improvement and Integrity. This process involved an assessment of the proposal submitted including an evaluation of staff education, training and experience, program descriptions, scope of services, statistical projections, and the financial plan. The contractors above were the only respondents and all scored above the minimum score of 65 points.

The Bureau of Behavioral Health monitors the peer support agencies through annual quality assurance reviews, monthly meetings, and quarterly financial and statistical reporting. As these contractors have amply demonstrated their ability to provide high-level peer support services in prior years to individuals with mental illness, the Bureau of Behavioral Health requests that these contracts be funded to allow the agencies to continue providing services in the state during fiscal year 2014.

Should Governor and Council determine not to approve this Request, 2,621 persons will lose a valuable support they have come to rely on to manage their symptoms of mental illness. The success of peer support services in facilitating wellness and recovery from mental illness is well established. Some individuals will end up hospitalized, and inevitably many others will end up requiring mental health services from the local community mental health centers - a much more costly alternative to peer support services.

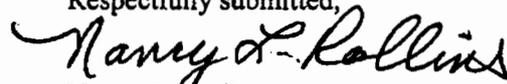
Any advance payments initiated under these contracts will only be approved after an extensive financial review has determined their necessity to assure continuity of programs and services to clients.

Area served: Statewide

Source of funds: 43% General Funds and 57% Federal Funds.

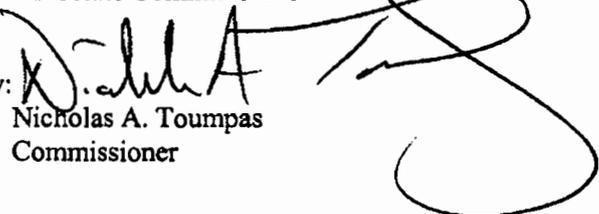
In the event that the Federal Funds become no longer available, General Funds will not be requested to support this program.

Respectfully submitted,



Nancy L. Rollins  
Associate Commissioner

Approved by:



Nicholas A. Toumpas  
Commissioner

**BUREAU OF BEHAVIORAL HEALTH  
STATE FISCAL YEAR 2014 PEER SUPPORT AGENCY (8) CONTRACTS  
FINANCIAL DETAIL**

**05-95-92-920010-7011 HEALTH AND SOCIAL SERVICES, HEALTH AND HUMAN SVCS DEPT OF, HHS: BEHAVIORAL HEALTH DIV OF, DIV OF BEHAVIORAL HEALTH, PEER SUPPORT SERVICES (100% General Funds)**

**The Alternative Life Center (Vendor number 168081)**

<u>Class/Object</u>	<u>Class Title</u>	<u>Activity Code</u>	<u>FY 2014</u>
102-0731	Contracts for Program Services	92207011	\$174,363

**The Stepping Stone Drop-In Center Association (Vendor number 157967)**

<u>Class/Object</u>	<u>Class Title</u>	<u>Activity Code</u>	<u>FY 2014</u>
102-0731	Contracts for Program Services	92207011	\$153,783

**Lakes Region Consumer Advisory Board (Vendor number 157060)**

<u>Class/Object</u>	<u>Class Title</u>	<u>Activity Code</u>	<u>FY 2014</u>
102-0731	Contracts for Program Services	92207011	\$140,974

**Monadnock Area Peer Support Agency (Vendor number 157973)**

<u>Class/Object</u>	<u>Class Title</u>	<u>Activity Code</u>	<u>FY 2014</u>
102-0731	Contracts for Program Services	92207011	\$62,756

**H.E.A.R.T.S. Peer Support Center of Greater Nashua Region VI (Vendor number 209287)**

<u>Class/Object</u>	<u>Class Title</u>	<u>Activity Code</u>	<u>FY 2014</u>
102-0731	Contracts for Program Services	92207011	\$95,565

**On The Road To Recovery, Inc. (Vendor number 158839)**

<u>Class/Object</u>	<u>Class Title</u>	<u>Activity Code</u>	<u>FY 2014</u>
102-0731	Contracts for Program Services	92207011	\$183,711

**Seacoast Consumer Alliance Peer Support Center (Vendor number 157070)**

<u>Class/Object</u>	<u>Class Title</u>	<u>Activity Code</u>	<u>FY 2014</u>
102-0731	Contracts for Program Services	92207011	\$101,088

**Tri-City Consumers' Action Co-operative (Vendor number 157797)**

<u>Class/Object</u>	<u>Class Title</u>	<u>Activity Code</u>	<u>FY 2014</u>
102-0731	Contracts for Program Services	92207011	\$64,873

<b>Subtotal</b>	<b>\$977,113</b>
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**05-95-92-920010-7143 HEALTH AND SOCIAL SERVICES, HEALTH AND HUMAN SVCS  
DEPT OF, HHS: BEHAVIORAL HEALTH DIV OF, DIV OF BEHAVIORAL HEALTH,  
MENTAL HEALTH BLOCK GRANT (100% Federal Funds)**

**The Alternative Life Center (Vendor number 168081)**

<u>Class/Object</u>	<u>Class Title</u>	<u>Activity Code</u>	<u>FY 2014</u>
102-0731	Contracts for Program Services	92207143	\$235,855

**The Stepping Stone Drop-In Center Association (Vendor number 157967)**

<u>Class/Object</u>	<u>Class Title</u>	<u>Activity Code</u>	<u>FY 2014</u>
102-0731	Contracts for Program Services	92207143	\$208,020

**Lakes Region Consumer Advisory Board (Vendor number 157060)**

<u>Class/Object</u>	<u>Class Title</u>	<u>Activity Code</u>	<u>FY 2014</u>
102-0731	Contracts for Program Services	92207143	\$190,692

**Monadnock Area Peer Support Agency (Vendor number 157973)**

<u>Class/Object</u>	<u>Class Title</u>	<u>Activity Code</u>	<u>FY 2014</u>
102-0731	Contracts for Program Services	92207143	\$84,888

**H.E.A.R.T.S. Peer Support Center of Greater Nashua Region VI (Vendor number 209287)**

<u>Class/Object</u>	<u>Class Title</u>	<u>Activity Code</u>	<u>FY 2014</u>
102-0731	Contracts for Program Services	92207143	\$129,269

**On The Road To Recovery, Inc. (Vendor number 158839)**

<u>Class/Object</u>	<u>Class Title</u>	<u>Activity Code</u>	<u>FY 2014</u>
102-0731	Contracts for Program Services	92207143	\$248,501

**Seacoast Consumer Alliance Peer Support Center (Vendor number 157070)**

<u>Class/Object</u>	<u>Class Title</u>	<u>Activity Code</u>	<u>FY 2014</u>
102-0731	Contracts for Program Services	92207143	\$136,740

**Tri-City Consumers' Action Co-operative (Vendor number 157797)**

<u>Class/Object</u>	<u>Class Title</u>	<u>Activity Code</u>	<u>FY 2014</u>
102-0731	Contracts for Program Services	92207143	\$87,752

**Subtotal** **\$1,321,717**

**Total** **\$2,298,830**