



JULY 1, 2021

**CAPIC'S FY'21-'23  
COMMUNITY ASSESSMENT REPORT &  
STRATEGIC PLAN**

COMMUNITY ACTION PROGRAMS INTER-CITY, INC. (CAPIC).  
100 EVERETT AVENUE, UNIT 14  
Chelsea, MA 02150



# TABLE OF CONTENTS

Table of Contents	Page 1
Executive Summary	Pages 2-4
Board Authorization	See attached -*issues with formatting
Agency Description	Pages 5-7
Mission Statement	Page 5
Vision Statement	Pages 7-8
Community Profile	Pages 9-21
▪ City of Chelsea	Pages 9-10
▪ City of Revere	Pages 11-12
▪ Town of Winthrop	Pages 12-14
▪ Undesignated Service Areas	Pages 14-20
Community & Internal Assessment Process	Pages 21-24
Key Findings: Community Assessment	Pages 24-33
Key Findings: Internal Assessment	Pages 34-37
Strategic Three-Year Goals	Pages 37-47
Specific Objectives	Pages 47-49
Plan Monitoring & Reporting	Pages 49-50



## EXECUTIVE SUMMARY

---

Community Action Programs Inter-City, Inc.'s (CAPIC) FY'21-'23 Community Assessment Report and Strategic Plan (CARSP) reflects CAPIC's proposed direction over a three-year period that is based on the priority needs identified through comprehensive internal and community needs assessments. Specifically, this document provides a detailed description of the Agency's approach to identifying and addressing the needs, problems, and concerns of individuals and families who are living in Chelsea, Revere, and Winthrop.

The Plan includes the following components: agency description, mission statement, vision statement, detailed community profiles for each municipality served by CAPIC, the community and internal assessment process, key findings from the community and internal assessments, three-year strategic goals (includes funding strategies, service delivery system, linkages, and service gaps), detailed objectives, as well as CARSP monitoring and reporting. This document was created through a comprehensive collaborative process led by CAPIC's Director of Planning, Development, & Operations, and included input and feedback from clients, residents of CAPIC's service area, senior management team members, program directors, direct service staff, Board Members, and community stakeholders. It is important to note that due to the COVID-19 pandemic, DHCD informed all community action agencies that the original deadline of July 2020 for the FY'21-'23 CARSP was extended until July 2, 2021, with the plan being divided into two separate components; Community Needs Assessment, which was due December 31, 2020 and the Strategic Plan. The Community Needs Assessment component was approved by the Board of Directors in December 2020.

The strategic plan process started back in the fall of 2019 with CAPIC's Executive Director, Director of Planning, Development, & Operations, and the previous Fiscal Director attending the DCHD/MASSCAP sponsored "CARSP Training Day" on October 16, 2019. Previously, in the spring of 2019, CAPIC's Planning & Evaluation Committee (comprised of Board and staff members) came together to review and revise the Agency's mission statement. This resulted in a revised statement that was approved by the full Board of Directors on June 20, 2019. This process was directed by CAPIC's ROMA Certified Implementer contractor Catherine Apostoleris.

CAPIC conducted an extensive Community Needs Assessment in preparation for the FY'21-'23 three-year Community Assessment Report & Strategic Plan (CARSP). The process relied on both primary and secondary data to determine need as well as community priority areas, strengths, and weaknesses. A set of common network-wide community needs survey questions were developed with support from a DHCD/MASSCAP consultant. CAPIC utilized the network-wide survey questions for the community needs assessment. CAPIC also utilized common core data sets collected and prepared by the consultant in combination with other data sources. CAPIC's Director of Planning, Development, & Operations was part of the process (active participant in the MASSCAP Planners Group) to determine the final set of survey questions.

CAPIC's Director of Planning, Development, & Operations oversaw the collection, analysis, organization, and reporting of data. CAPIC gathered information from other key sectors of the community, such as the private sector and public sector. The analysis and inclusion of this data enhanced the Agency's ability to make sound decisions about what we as an Agency need to do to provide comprehensive services that meet the emerging needs of our clients and the communities that we serve, while at the same time align with our mission statement. These surveys captured individual, family, and community needs and provided staff and board members the ability to prioritize needs and identify resources for each group. Board members were provided with monthly updates at each regular Board of Directors' meeting throughout the entire process; both verbal and written reports were presented to members. Board members reviewed drafts of the plan throughout the process and were presented with results of all surveys, as well as community profile data and demographics.

The strategic Plan was organized around four identified top priority area/needs:

- **Affordable Housing**
- **Ability to Pay Heating/Utility Bills**
- **Access to Food**
- **Jobs**

The determination and designation of priority areas was driven by extensive research, analysis of both primary and secondary data, as well as meaningful discussions between CAPIC's Executive Director, the Senior Management Team, Program Directors, board members, Planning & Evaluation Committee members, and local city/town leaders and service providers via task force and collaborative meetings. CAPIC utilized information gathered from key sectors within each community to determine and assess the needs, resources, and the strengths and weaknesses of each town/city served by the Agency.

It should be noted that CAPIC conducted and completed its Community Needs Assessment survey prior to the COVID-19 pandemic. The COVID-19 pandemic has had a severe impact on CAPIC's service area; Chelsea and Revere are two of the hardest hit cities in the Commonwealth of Massachusetts. This has had devastating effects in both communities. Due to COVID-19, CAPIC was not able to conduct focus groups as planned or conduct in person interviews. In mid-March CAPIC had to shift all operations to remote capacity and focus on providing critical resources and services to those impacted by the pandemic. The Community Needs Assessment component highlights the realities of the impact of the pandemic to both the Agency and its capacity to meet the drastic increase in calls for service as well as the effects on each community.

Throughout the CARSP process, discussion about the long-term responsibility the Agency has to the communities we serve coincided with the emphasis on Results-Oriented Management Accountability (ROMA), also known as Outcome-Based Management. National indicators and outcomes are an integral part of CAPIC's internal and external assessment on a quarterly and a semi-annual basis. Such information promotes more focus on connecting needs, outcomes, and strategies to the Agency's mission statement, and the results that programming provides on individual/family, agency, and community levels. This Plan serves as a "road map" for how CAPIC will implement change and address gaps in services, outlines what activities are required and what resources are needed to be successful in meeting goals and objectives, highlights the

development and implementation of activities/programs to meet those needs at a Community level, a Family level, and at an Agency level. It also provides information that was used to measure organizational improvement with an aim to enhance client/customer experience.

The Executive Director, Planning & Evaluation Committee, Management Team, Director of Planning, Development, & Operations, Program Managers, staff, and the Board of Directors worked together to develop strategic three-year goals that will guide the Agency's programs and operations to meet the needs of low-income individuals, families and communities, as well as how CAPIC will address the top four identified needs.

Data was compiled and reviewed by the Director of Planning, Development, & Operations and then shared with the Executive Director, the Planning & Evaluation Committee (staff and Board members), and the full Board of Directors in detailed written and verbal reports.

CAPIC conducts a Client Satisfaction Survey, Health Care Access Survey, and a Housing/Homelessness Survey. These surveys captured individual, family, and community needs data that provided CAPIC staff and Board members with the ability to further prioritize needs and identify resources for each group. CAPIC's Director of Planning, Development, & Operations oversaw the collection, analysis, organization, and reporting of results and data from each of these surveys.

CAPIC also conducted an Internal Needs Assessment for staff and a Board of Director's Self-Evaluation. The Internal Needs Survey tool was updated since the previous CARSP/Community Needs Assessment process and was transcribed into Survey Monkey to make it easier for employees to complete online, especially with more staff working remotely due to COVID. The link for the survey was distributed via email by the Director of Planning, Development, & Operations to all CAPIC employees. CAPIC also utilized a Board Self-Evaluation Survey tool, to determine the Board's knowledge of its role, knowledge of the agency (programs, services, mission), and its judiciary responsibilities. This information is an important piece of the overall analysis of the agency and its strengths and weaknesses. Information tallied from both survey tools was reviewed and analyzed by CAPIC staff and Board members.

In order to identify other threats to resources outside of the agency CAPIC gathered information from local government and partners, such as information pertaining to funding, proposed budgets, and current resources/services being offered in the Agency's geographic area. Over the next three years, CAPIC will work to enhance the collection of information regarding outside threats to resources so that all gaps and/or potential gaps in services will be identified and analyzed so as to better serve the needs of our clients.

The Community Assessment Report was approved by the CAPIC Board of Directors on December 1, 2021 and the Strategic Plan component was approved by the CAPIC Board at the June 23, 2021 meeting.



## COMMUNITY & INTERNAL ASSESSMENT PROCESS

---

### AGENCY DESCRIPTION

Community Action Programs Inter-City Inc., (CAPIC) is a private, non-profit corporation that was chartered in 1967 to identify and eradicate the root causes of poverty in Chelsea and Revere. In 1978, the Commonwealth of Massachusetts expanded CAPIC's designated area to include Winthrop. CAPIC has been designated by the State and Federal Government as a Community Action Agency. In 2019, CAPIC provided a myriad of services to 12,000 local area-wide residents annually. ***The mission of CAPIC is to identify and address the needs, problems, and concerns of those in poverty and to enable the individually poor to achieve and maintain self-sufficiency.***

CAPIC is governed by a twenty-one member, community-based Board of Directors, comprised of representatives from public, private, and low-income sectors of Chelsea, Revere, and Winthrop. CAPIC is administered by an Executive Director, who reports to the Board of Directors. A full-time Fiscal Director, Director of Planning & Development, Human Resource Director, and IT Director work with the Executive Director to manage operational functions. Major programs are supervised by on-site Program Directors, who are responsible for day-to-day operations and report to the Executive Director. CAPIC maintains a competent administrative structure that plays a key role in executive decision-making functions.

CAPIC employs 120 persons (many of whom are local area residents) in a variety of capacities and programs, all of which strive to assist low-income residents attain self-sufficiency. CAPIC maintains a proven track record of accomplishment in helping residents achieve self-sufficiency by identifying and eliminating causes of poverty. CAPIC recognizes the importance of effective and accurate communication between its employees and the communities that we serve. CAPIC's staff is bi-lingual (primarily Spanish speaking with one Portuguese speaking staff member, and one who speaks French and Moroccan) and has the resources to work directly with individuals who have LEP while being culturally sensitive. CAPIC also utilizes a Somali consultant, as well as an Arabic consultant in the Head Start Program. In addition, CAPIC works with the Massachusetts General Hospital (MGH) as a resource for languages that are not spoken by staff or consultants.

It should be noted that CAPIC is an active member of various local and regional groups, as well as statewide associations, such as: the Massachusetts Association for Community Action (MASSCAP), MASSCAP Communications Community of Practice, MASSCAP Planner's Group, MASSCAP Human Resources Group, MASSCAP Fiscal Directors Group, Benefit Enrollment Coordination System (BECS) Working Group, the Chelsea Eviction Task Force, the Chelsea and Revere Pandemic Response Teams, and the Massachusetts Energy Director's Association (MEDA).

## **AGENCY PROGRAMS & SERVICES**

CAPIC administers comprehensive Head Start services for local area low-income children and families, as well as After-School services for area youth; a City-Wide Summer Camp Program; a Child Development Center serving infants, toddlers, and preschoolers; a Fuel Assistance Program providing households with energy assistance from April-November; a Weatherization Program that installs energy conservation measures in households, throughout an eighteen community area, annually; a heating system maintenance and repair service; and a Responsible Payee Program that assists individuals manage Social Security Disability benefits. In addition, CAPIC operates an Emergency Assistance Program, a Domestic Violence/Crisis Intervention Program, a free IRS VITA Tax Preparation Program, the Chelsea/Revere Family Network, the City of Chelsea Inspectional Services Department Referral Program, and the Chelsea Substance Use Disorder Program, as well as the Chelsea Mobile Outreach Program.

## **AGENCY HISTORY**

Since 1995 CAPIC has worked directly with the City of Revere, in particular the Revere Police Department to expand community-wide opportunities to increase public safety and provide services to at-risk youth. CAPIC has a solid working relationship with the Revere Police Department and has worked on numerous initiatives with the Department

Throughout fifty-four years of community service, CAPIC has made numerous contributions to the surrounding communities of Chelsea, Revere, and Winthrop. Many of these contributions have included educational services and programs for low-income residents. Among CAPIC's significant contributions and achievements are the signing of the Head Start Program as a year round program into authorization by Lyndon Johnson in 1968 (CAPIC began operating the Head Start Program on a school year calendar); comprehensive health services were secured for children enrolled in the Head Start Program in 1972; the relocation of 200 homeless families displaced by the Chelsea conflagration of 1973; the implementation of the Department of Commerce Manpower Program; the operation of the Youth Activities Program serving 1,500 youth per year with job training and GED preparation, a ten year ESL initiative that assisted hundreds of Latino residents learn English; the implementation of the Childhood Lead Paint Poisoning Prevention Program (funded by the Department of Health and Human Services), which over a three year period beginning in 1976, screened all Chelsea children for lead paint and subsequently decreased the incidence of lead poisoning from 22% to 3%. In 1975, CAPIC organized a community-based effort that led to the establishment of the Revere Health Center as well as the establishment of the MGH Chelsea Health Center. In 1980 the Head Start Program opened in newly renovated facilities serving 80 low-income children. In 1992, CAPIC purchased the principal office site for the Corporation, located at 100 Everett Avenue, Chelsea, MA. Head Start was authorized to expand the scope of the program again, bringing its total enrollment to 210 in 1994.

More recent accomplishments:

- Partnership with Chelsea Housing Authority & LARE/American Training, Inc. to provide computer training and job readiness skills to federal housing tenants
- Published "Know Where To Go" Community Resource Guides
- Chelsea Family Network expanded to include Revere

- Expanded Child Development Programs to meet infant and toddler needs
- After School Program BONES Research Project to enhance bone development in children
- Established DeLeo Scholarship Program for summer camp kids
- Selected by Chelsea Black Community to receive “Trailblazer” Award
- Established Chelsea Community Navigator Program/Chelsea Housing & Basic Support Services Program
- Formed Partnership with East Boston Neighborhood Health Center to provide free health screenings
- Partnership with MGH on the Merck Foundation: Alliance to Advance Patient-Centered Cancer Center grant
- Establishment of Chelsea Mobile Outreach Team
- 2017 -Celebrated 50 years of service to those in need
- Designated by DHCD as Balance of State Homelessness Coordinator for Chelsea, Revere and Winthrop
- 2019 - Partnership with the City of Chelsea Inspectional Services Department through a referral process to provide multi-lingual capacity and deliver direct assistance to solve problems related to homelessness, substance use disorders, employment, emergency needs, hunger, hoarding, relocation assistance, emergency heating system repair, heating assistance, energy conservation, childcare, substance use disorders, preservation of tenancies and other needs that households experience; providing City inspectors with the ability to refer an at-risk resident to social services.



## VISION STATEMENT

---

CAPIC vision is to improve the quality of life for all individuals and families living in the communities that we serve by promoting and advocating for methods that assist residents, in particular vulnerable populations achieve self-sufficiency throughout all programming and services.

CAPIC prides itself on the diverse community we serve and our diverse staff, who reflects the best of what CAPIC and community action has to offer. CAPIC stands firm in the belief that all people should be treated equally, with dignity & respect. We acknowledge that structural race, gender & other inequities remain barriers that must be addressed. Community Action has always stood for the promise of equal opportunity for all and has been a voice for those in need.

**CAPIC’s strategic three-year goals include the following:**

- Implement a tenant training certificate program to educate individuals and families on tenant rights and responsibility.
- Support initiatives on local municipal levels for developing affordable housing.
- Support initiatives and advocate at the state level for more housing subsidies/rental vouchers and scattered sites/MRVP vouchers.

- Expand CAPIC's Emergency Services Program to include extensive case management and a Housing Search Specialist position.
- Leverage funding with community partners to secure long-term stability for residents with limited incomes who are seeking safe and affordable housing.
- Secure additional funding sources/seek private funders to maintain support for food assistance and basic necessities.
- Partner with real estate to seek funding to purchase real estate to provide affordable housing for residents.
- Continue Partnerships with MASSSAVE and utility companies to provide residents with energy efficient homes.
- Expand the Energy Department to increase capacity to provide services to a greater number of residents.
- Partner with technology firms/private business to offer employment-related training/certificate programs to residents.
- Create one-time job opportunities for residents in need of immediate cash assistance.
- Partner with BEST HT to offer training and opportunity to residence who are in the hospitality industry.
- Expand upon existing partnerships with City of Chelsea to administer funding to mitigate the impact of the pandemic; access to food, housing, utilities, basic necessities, and work force development.
- Strengthen the work that we do by advocating for equal access, social justice, and equality for all members of our community to education, health, employment, and economic systems. Continue to work closely with local government, elected officials, law enforcement, the faith community, and local service providers to support initiatives that strengthen the communities that we serve as well as work to improve the quality of life for all residents

## **COMMUNITY PROFILES – CSBG-DESIGNATED SERVICE AREAS**

### **Chelsea – Revere- Winthrop**

*CAPIC utilized the SMC Partner Community Data, in particular the town-level core data set as derived from The American Community Survey 5-Year Estimates (2014-2018), as well as data from the Massachusetts Department of Elementary & Secondary Education, The Harvard Public School of Health, & the Metropolitan Area Planning Council's (MAPC), "Next Stop Revere" Master Plan.*

#### **Chelsea**



The City of Chelsea, Massachusetts is located in Suffolk County directly across the Mystic River from the City of Boston. Chelsea was first settled in 1624, established itself as a town in 1739 and was incorporated as a city in 1857. The city has an estimated population of 39,852 and occupies a land area of 1.8 square miles. It is the smallest city in Massachusetts in land area, and the 26th most densely populated incorporated place in the country. A charter change in 1995 designed an efficient council-manager form of government, which has focused on improving the quality of service the city provides to its residents and businesses, while establishing financial policies that have significantly improved the city's financial condition. Chelsea is one of three (3) designated sanctuary cities in Massachusetts.

Chelsea is a diverse gateway city; nearly half of the community members are foreign-born and over two thirds are Hispanic/Latinx. At least 10% of homes are overcrowded in Chelsea; the highest rate in Massachusetts, as families are forced to double and triple up to afford local rents. A recent study conducted by the Harvard School of Public Health found that 50% of Hispanic/Latinx immigrant residents of Chelsea have lost their jobs due to COVID-19; 40% lost hours. This has been devastating to the community and any jobs that previously employed Chelsea residents will never come back. Compounding this issue, about 15,000 Chelsea residents are undocumented and not eligible for Unemployment Insurance.

#### **POPULATION – 39,852**

Median Age: 33.2

Male: 20,344

Female: 19,508

White: 50.8%  
Black/African American: 6.9%  
Asian:3.2%  
Two or More Races: 31%  
Hispanic/Latinx: 66.9%  
Median Income: \$53,280.00  
Per Capita Income: \$24,338.00

**Poverty-Related Data**

Persons in Poverty: 18.8% *\*double state rate of 9.4%*  
Children Under 18 in Poverty: 25.7%  
Males in Poverty: 15.9%  
Females in Poverty: 21.8%  
Ages 5-17 Rate: 26.6%  
Ages 18-34 Rate: 15.3%  
Ages 35-64 Rate: 16.6%  
Ages 65 +: 18.4%  
White: 15.4% in poverty  
Black/African American: 17.6% in poverty  
Asian:21.7% in poverty  
Two or More Races: 24.6% in poverty  
Hispanic/Latinx: 20.1% in poverty

The Massachusetts Department of Unemployment, Economic Research Department reports that the unemployment rate in November 2020 for the City of Chelsea was 9.6%; higher than the state rate of 7.7%. This is a direct reflection on the impact of the pandemic on the City's workforce. The Massachusetts Department of Elementary and Secondary Education reports that during the 2019-2020 school year 70.6% of children enrolled in Chelsea Public Schools were economically disadvantaged; far exceeding the statewide average of 36.62%. The Department reports that English is not the first language for 83.4% of children enrolled; far exceeding the state average of 23.4%; with 87.7% of children enrolled being Hispanic (state average is 22.3%). These numbers have all increased since CAPIC's last CARSP.

## Revere



Revere is situated on the Massachusetts Bay, five miles northeast of Boston. Revere was incorporated as an independent town in 1871 and later became a city in 1915. The City occupies a land area of 10 square miles. 4.1 square miles are open water and protected wetlands not suitable for development. Of the 5.9 square miles of developed land, 70% is occupied by residential dwellings. The City of Revere is in a unique location, serving as a gateway between the North Shore and Greater Boston. Revere's geographic characteristics and local businesses cemented its crucial role as a recreational and entertainment destination within the Boston Metro area. During the 19th and 20th centuries, Revere's entertainment industry centered around Revere Beach, America's first public beach, Suffolk Downs, and the Wonderland Race Track. Today, Revere's amenities such as Revere Beach, proximity to Logan Airport and transit access, have attracted new residents as well as businesses in the leisure and entertainment industries. Recently, new tech and e-commerce firms have located in Revere, such as the Amazon distribution center.

As reported in the Metropolitan Area Planning Council's (MAPC), "Next Stop Revere" Master Plan Draft, many renters and owners in Revere are cost-burdened, meaning they spend more than 30% of their income on housing; 4,300 out of 9,734 owners (44%) are cost-burdened and 5,559 out of 10,498 renters (53%) are also cost-burdened. Of the 20,485 households in Revere, 12,205 earn less than 80% of the Area Median Income and are considered low-income, representing more than half of all households in the city. Most low-income households are extremely low-income, earning only 30% of the Area Median Income.

### **POPULATION – 53,966**

Median Age: 39.8

Male: 27,229

Female: 26,737

White: 79%

Black/African American: 5.6%

Asian: 4.7%

Two or More Races: 5.5%

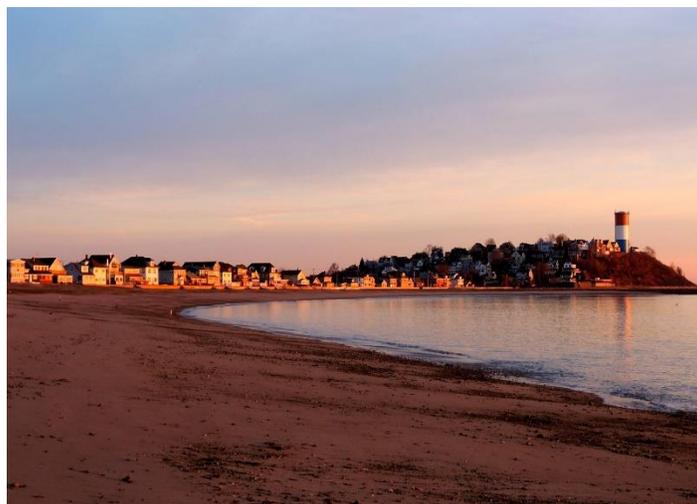
Hispanic/Latino: 32.5%  
Median Income: \$55,020  
Per Capita Income: \$28,383

### **Poverty-Related Data**

Persons in Poverty: 13.1%  
Children Under 18 in Poverty: 20.8%  
Males in Poverty: 11.3%  
Females in Poverty: 15%  
Ages 5-17 Rate: 20.2%  
Ages 18-34 Rate: 11.2%  
Ages 35-64 Rate: 10.7%  
Ages 65 +: 12.8%  
White: 13.1% in poverty  
Black/African American: 11.5% in poverty  
Asian: 20.1% in poverty  
Two or More Races: 11.8% in poverty  
Hispanic/Latinx: 10.8% in poverty

The Massachusetts Department of Unemployment, Economic Research Department reports that the unemployment rate in November 2020 for the City of Revere was 10.3%; much higher than the state rate of 7.7%. This is a direct reflection on the impact of the pandemic on the City's workforce. The Massachusetts Department of Elementary and Secondary Education reports that during the 2019-2020 school year 56.1% of children enrolled in Revere Public Schools were economically disadvantaged; exceeding the state average of 36.6%. The Department also reports that English was not the first language for 68.6% of youth enrolled in Revere Public Schools; more than double the state average of 23.4; with 57.7% of children enrolled being Hispanic (state average is 22.3%). These numbers have significantly increased since CAPIC's last CARSP.

## **Winthrop**



Winthrop is an ocean-side suburban community in Greater Boston situated at the north entrance to Boston Harbor, close to Logan International Airport. It is located on a peninsula, 1.6 square miles in area, connected to Revere by a narrow isthmus and to East Boston by a bridge over the harbor inlet to the Belle Isle Marsh Reservation. Settled in 1630, Winthrop is one of the oldest communities in the United States. It is also one of the smallest and most densely populated municipalities in Massachusetts. It is one of the four cities in Suffolk County (the others are Boston, Revere, and Chelsea), and is the southernmost part of the North Shore, with a 7-mile (11 km) shoreline that provides views of the Atlantic Ocean to the east and of the Boston skyline to the west.

**POPULATION – 18,535**

Median Age: 45.3

Male: 8,498

Female: 10,037

White: 93.3%

Black/African American: 2%

Asian: 6%

Two or More Races: 2.4%

Hispanic/Latino: 8.8%

Median Income: \$68,332

Per Capita Income: \$ 41,953

**Poverty-Related Data**

Persons in Poverty: 9.9%

Children Under 18 in Poverty: 13.1%

Males in Poverty: 8%

Females in Poverty: 11.6%

Ages 5-17 Rate: 12.8%

Ages 18-34 Rate: 4%

Ages 35-64 Rate: 11.8%

Ages 65 +: 8.2%

White: 9.6% in poverty

Black/African American: 3.5% in poverty

Asian: 13.2% in poverty

Two or More Races: 10.8% in poverty

Hispanic/Latinx: 9.3% in poverty

In 2005, the Town of Winthrop voted to change its governance from a representative town meeting adopted in 1920 to a council-manager form of government. Under Massachusetts law, as of 2006 when the new Town Charter took effect, Winthrop became a city. However, it is one of 14 cities in Massachusetts that choose to remain known as a 'town.'

The Massachusetts Department of Unemployment, Economic Research Department reports that the unemployment rate in November 2020 for the Town of Winthrop was 8.1%; higher than the state rate of 7.7%. The Massachusetts Department of Elementary and Secondary Education

reports that during the 2019-2020 school year 31.9% (increase from 2017) of children attending Winthrop public schools were economically disadvantaged; slightly below the state average of 36.6%. The Department also reports that English was not the first language for 21.7% of children enrolled, which is just below the state average of 23.4%; 16.1% of children enrolled being Hispanic (state average is 22.3%).

**COMMUNITY PROFILES – UNDESIGNATED SERVICE AREAS**  
**Arlington – Belmont – Cambridge – Everett – Lexington – Malden -Medford –**  
**Melrose -Somerville – Stoneham – Waltham -Watertown -Winchester - Woburn**

---

<u>Arlington</u>	
<u>Population</u>	45,147
<u>Median Age</u>	42.3
<u>18 and over</u>	34,612
<u>Male</u>	21,008 <i>4.8% in poverty</i>
<u>Female</u>	24,139 <i>5.9% in poverty</i>
<u>Median Income</u>	\$165,133
<b><u>Percent in Poverty</u></b>	<b>5.4%</b>
<b><u>5-17 yrs. 4%</u></b>	<b><u>35-64 yrs. 3.6%</u></b>
<b><u>18-34 yrs. 6.6%</u></b>	<b><u>65+ 10.5%</u></b>
<u>Ethnicity</u>	
<u>White</u>	36,371 -80.6% <i>*4.4% in poverty</i>
<u>Black/African American</u>	1,200 - 2.7% <i>*2.5% in poverty</i>
<u>Asian</u>	5,321 – 11.8% <i>*11.5% in poverty</i>
<u>Hispanic or Latino</u>	2,286 -5.1% <i>*5.9% in poverty</i>
<u>Belmont</u>	
<u>Population</u>	26,043
<u>Median Age</u>	41.5
<u>18 and over</u>	19,166
<u>Male</u>	12,058 <i>4.7% in poverty</i>
<u>Female</u>	13,985 <i>6.3% in poverty</i>
<u>Median Income</u>	\$120,208
<b><u>Percent in Poverty</u></b>	<b>3.8%</b>
<b><u>5-17 yrs. 5.4%</u></b>	
<b><u>18-34 yrs. 9%</u></b>	
<b><u>35-64 yrs. 4.3%</u></b>	
<b><u>65+ 5.5%</u></b>	
<u>Ethnicity</u>	
<u>White</u>	20,465 - 78.6% <i>*3.3% in poverty</i>
<u>Black/African American</u>	384 -1.5% <i>*14.6% in poverty</i>
<u>Asian</u>	4,207 -16.2% <i>*13.5% in poverty</i>
<u>Hispanic or Latino</u>	1,311 -5% <i>*8.8% in poverty</i>

<b>Cambridge</b>	
<u>Population</u>	<u>115,655</u>
<u>Median Age</u>	<u>30.5</u>
<u>18 and over</u>	<u>95,164</u>
<u>Male</u>	<u>57,088</u> <i>12.2% in poverty</i>
<u>Female</u>	<u>58,577</u> <i>13.6% in poverty</i>
<u>Median Income</u>	<u>\$105,371</u>
<b><u>Percent in Poverty</u></b>	<b><u>5.1%</u></b>
<b><u>5-17 yrs. 14.1%</u></b>	<b><u>35-64 yrs. 9.8%</u></b>
<b><u>18-34 yrs. 16.1%</u></b>	<b><u>65+ 13.1%</u></b>
<u>Ethnicity</u>	
<u>White</u>	<u>77,487 – 67%</u> <i>*10.3% in poverty</i>
<u>Black/African American</u>	<u>12,697 – 11%</u> <i>*24.3% in poverty</i>
<u>Asian</u>	<u>18,466 -16%</u> <i>*16.6% in poverty</i>
<u>Hispanic or Latino</u>	<u>10,672 -9.2%</u> <i>*26.4% in poverty</i>

<b>Everett</b>	
<u>Population</u>	<u>45,856</u>
<u>Median Age</u>	<u>30.5</u>
<u>18 and over</u>	<u>33,850</u>
<u>Male</u>	<u>22,444</u> <i>10.4% in poverty</i>
<u>Female</u>	<u>23,412</u> <i>16% in poverty</i>
<u>Median Income</u>	<u>\$60,482</u>
<b><u>Percent in Poverty</u></b>	<b><u>13%</u></b>
<b><u>5-17 yrs. 17%</u></b>	<b><u>35-64 yrs. 10%</u></b>
<b><u>18-34 yrs. 12.6%</u></b>	<b><u>65+ 8.4%</u></b>
<u>Ethnicity</u>	
<u>White</u>	<u>27,15 – 59.2%</u> <i>*13.7% in poverty</i>
<u>Black/African American</u>	<u>8,730 -19%</u> <i>*10.9% in poverty</i>
<u>Asian</u>	<u>3,161 -6.9%</u> <i>*9.9% in poverty</i>
<u>Hispanic or Latino</u>	<u>12,143 – 26.5%</u> <i>*15.5% in poverty</i>

<b>Lexington</b>	
<u>Population</u>	<u>33,480</u>
<u>Median Age</u>	<u>45.3</u>
<u>18 and over</u>	<u>21,165</u>
<u>Male</u>	<u>16,252</u> <i>2.8% in poverty</i>
<u>Female</u>	<u>17,228</u> <i>4.4% in poverty</i>

<u>Median Income</u>	<u>\$172,750</u>
<b><u>Percent in Poverty</u></b>	<b><u>2.5%</u></b>
<b><u>5-17 yrs. 2.9%</u></b> <b><u>18-34 yrs. 6.7%</u></b>	<b><u>35-64 yrs. 3.2%</u></b> <b><u>65+ 3.4%</u></b>
<u>Ethnicity</u>	
<u>White</u>	<u>21,889 – 65.4%</u> <i>*3.1% in poverty</i>
<u>African American</u>	<u>337 – 1%</u> <i>*2.4% in poverty</i>
<u>Asian</u>	<u>9,795 – 29.3%</u> <i>*5% in poverty</i>
<u>Hispanic or Latino</u>	<u>675 – 2%</u> <i>*2.3% in poverty</i>

<u>Malden</u>	
<u>Population</u>	<u>61,094</u>
<u>Median Age</u>	<u>35.3</u>
<u>18 and over</u>	<u>49,232</u>
<u>Male</u>	<u>29,343</u> <i>14.4% in poverty</i>
<u>Female</u>	<u>31,751</u> <i>18.2% in poverty</i>
<u>Median Income</u>	<u>\$64,178</u>
<b><u>Percent in Poverty</u></b>	<b><u>13.3%</u></b>
<b><u>5-17 yrs. 19.7%</u></b> <b><u>18-34 yrs. 18.9%</u></b>	<b><u>35-64 yrs. 12%</u></b> <b><u>65+ 18.1%</u></b>
<u>Ethnicity</u>	
<u>White</u>	<u>32,962 – 54%</u> <i>*13% in poverty</i>
<u>Black/African American</u>	<u>10,289 – 16.8%</u> <i>*21.3% in poverty</i>
<u>Asian</u>	<u>14,281 – 23.4%</u> <i>*20% in poverty</i>
<u>Hispanic or Latino</u>	<u>5,684 – 9.3%</u> <i>*28.9% in poverty</i>

<u>Medford</u>	
<u>Population</u>	<u>57,771</u>
<u>Median Age</u>	<u>35.9</u>
<u>18 and over</u>	<u>48,316</u>
<u>Male</u>	<u>27,630</u> <i>8.4% in poverty</i>
<u>Female</u>	<u>30,141</u> <i>10% in poverty</i>
<u>Median Income</u>	<u>\$76,445</u>
<b><u>Percent in Poverty</u></b>	<b><u>9.2%</u></b>
<b><u>5-17 yrs. 10.3%</u></b> <b><u>18-34 yrs. 13.3%</u></b>	<b><u>35-64 yrs. 6.9%</u></b> <b><u>65+ 6.5%</u></b>
<u>Ethnicity</u>	
<u>White</u>	<u>43,321 -75%</u> <i>*8.3% in poverty</i>
<u>Black/African American</u>	<u>5,428 – 9.4%</u> <i>*8% in poverty</i>
<u>Asian</u>	<u>6,151 -10.6%</u> <i>*16.5% in poverty</i>

<u>Hispanic or Latino</u>	<u>3,051 – 5.3% *17.4% in poverty</u>
---------------------------	---------------------------------------

Melrose	
Population	28,116
Median Age	39.6
18 and over	21,675
Male	13,525 <i>3.7% in poverty</i>
Female	14,591 <i>4.5% in poverty</i>
Median Income	\$85,521
<b>Percent in Poverty</b>	<b>4.1%</b>
<b>5-17 yrs. 5.3%</b>	<b>35-64 yrs. 3.4%</b>
<b>18-34 yrs. 3.5%</b>	<b>65+ 6.8%</b>
Ethnicity	
White	24,982-88.9% <i>*3.9% in poverty</i>
Black/African American	740-2.6% <i>*12.4% in poverty</i>
Asian	1,670-5.9% <i>*5.5% in poverty</i>
Hispanic or Latino	1053-3.7% <i>*1.8% in poverty</i>
Somerville	
Population	80,434
Median Age	31.2
18 and over	68,727
Male	40,483 <i>10.6% in poverty</i>
Female	39,951 <i>13.3% in poverty</i>
Median Income	\$91,168
<b>Percent in Poverty</b>	<b>11.9%</b>
<b>5-17 yrs. 21.2%</b>	<b>35-64 yrs. 7.9%</b>
<b>18-34 yrs. 12.8%</b>	<b>65+ 12.9%</b>
Ethnicity	
White	61,130-76% <i>*10% in poverty</i>

Black/African American	5,470-6.8% <i>*28.7% in poverty</i>
Asian	7,835-9.7% <i>*16.7% in poverty</i>
Hispanic or Latino	8,667-10.8% <i>*17% in poverty</i>

Stoneham	
Population	22,144
Median Age	43.6
18 and over	17,934
Male	10,815 <i>5.8% in poverty</i>
Female	11,329 <i>4.9% in poverty</i>
Median Income	\$94,835
<b>Percent in Poverty</b>	<b>5.3%</b>
<b>5-17 yrs. 4.2%</b>	<b>35-64 yrs. 6%</b>
<b>18-34 yrs. 2.8%</b>	<b>65+ 7.4%</b>
Ethnicity	
White	20,402 - 92.9% <i>*5.1% in poverty</i>
Black/African American	602-2.7% <i>*1.4% in poverty</i>
Asian	727 - 3.3% <i>*13.3% in poverty</i>
Hispanic or Latino	828 - 3.7% <i>*8.4% in poverty</i>

Waltham	
Population	62,979
Median Age	33.9
18 and over	53,911
Male	31,034 <i>10% in poverty</i>
Female	31,945 <i>11.8% in poverty</i>
Median Income	\$85,677
<b>Percent in Poverty</b>	<b>10.9%</b>
<b>5-17 yrs. 10.3%</b>	<b>35-64 yrs. 6.1%</b>
<b>18-34 yrs. 16.5%</b>	<b>65+ 9.4%</b>

Ethnicity	
White	45,555-72.3% <i>*7.6% in poverty</i>
Black/African American	4,842-7.7% <i>*11.5% in poverty</i>
Asian	7,150-11.4% <i>*23.3% in poverty</i>
Hispanic or Latino	8,495-13.5% <i>*23.3% in poverty</i>

Watertown	
Population	35,103
Median Age	38.9
18 and over	28,327
Male	16,028 <i>7.2 in poverty</i>
Female	18,855 <i>8.5% in poverty</i>
Median Income	\$97,929
<b>Percent in Poverty</b>	<b>7.9%</b>
<b>5-17 yrs. 10.9%</b>	<b>35-64 yrs. 5.6%</b>
<b>18-34 yrs. 9.6%</b>	<b>65+ 8.8%</b>
Ethnicity	
White	29,357 - 83.6% <i>*8.3% in poverty</i>
Black/African American	712 - 2% <i>*4.2% in poverty</i>
Asian	2,980 - 8.5% <i>*6.7% in poverty</i>
Hispanic or Latino:	3,398 - 9.7% <i>*21.2% in poverty</i>

Winchester	
Population	22,677
Median Age	42.9
18 and over	15,773
Male	11,098 <i>2.3% in poverty</i>
Female	11,579 <i>2.6% in poverty</i>
Median Income	\$159,356

<b>Percent in Poverty</b>	<b>2.5%</b>
<b>5-17 yrs. 1.1%</b>	<b>35-64 yrs. 1.7%</b>
<b>18-34 yrs. 6.2%</b>	<b>65+ 4.5%</b>
Ethnicity	
White	29,357 - 83.6% <i>*1.8% in poverty</i>
Black/African American	712 - 2% <i>*10.4% in poverty</i>
Asian	2,980 - 8.5% <i>*5.5% in poverty</i>
Hispanic or Latino:	484 - 2.1% <i>*.8% in poverty</i>

Woburn	
Population	39,104
Median Age	42.9
18 and over	15,775
Male	7,413 <i>4.4% in poverty</i>
Female	8,360 <i>7.3% in poverty</i>
Median Income	\$88,745
<b>Percent in Poverty</b>	<b>5.8%</b>
<b>5-17 yrs. 5.9%</b>	<b>35-64 yrs. 4.2%</b>
<b>18-24 yrs. 6.6%</b>	<b>65+ 7.1%</b>
Ethnicity	
White	32,167 - 79.8% <i>*4.4% in poverty</i>
Black/African American	2,874 - 7.1% <i>*18% in poverty</i>
Asian	3,196 - 7.9% <i>*1.2% in poverty</i>
Hispanic or Latino:	1,957 - 4.9% <i>*17.4% in poverty</i>

Community Action Programs Inter-City, Inc. (CAPIC) delivers anti-poverty services to low-income residents of Chelsea, Revere & Winthrop. Since its inception, the agency has initiated numerous anti-poverty strategies that have resulted in restoring self-sufficiency for thousands of

area residents. The goal has always been and continues to be to assist low-income individuals and families break free from their dependence on public assistance, achieve self-sufficiency, and improve their quality of life. CAPIC serves a diverse and multi-cultural population. The vast majority of CAPIC clients are low-income and in need of numerous financial and support services.

In addition to Chelsea, Revere, and Winthrop, CAPIC also delivers energy-related services to various cities and towns through sub-contractual agreements. CAPIC's Weatherization Program (DOE and Utility funded) serves: Chelsea, Revere, Winthrop, Arlington, Belmont, Cambridge, Everett, Lexington, Malden, Medford, Melrose, Somerville, Stoneham, Waltham, Watertown, Winchester, and Woburn. CAPIC's HEARTWAP program serves: Chelsea, Revere, Winthrop, Everett, Malden, Medford, Melrose, Stoneham, Winchester, Woburn, while National Grid electric assessments are performed in Revere, Winthrop, Everett, Malden, and Medford; and Ever Source electric assessments in Chelsea, Cambridge, and Somerville. CAPIC's Responsible Payee Program also serves these additional communities.

### **COMMUNITY NEEDS ASSESSMENT SURVEY – DISTRIBUTION & COLLECTION SUMMARY**

CAPIC conducted an extensive Community Needs Assessment in preparation for the FY'21-'23 three-year Community Assessment Report & Strategic Plan (CARSP). The process relied on both primary and secondary data to determine need as well as community priority areas, strengths, and weaknesses. A set of common network-wide community needs survey questions were developed with support from a MASSCAP consultant. CAPIC utilized the network-wide survey questions for the FY'21-'23 CARSP. CAPIC also utilized common core data sets collected and prepared by the consultant in combination with other data sources. CAPIC's Director of Planning, Development, & Operations was part of the process (active participant in the MASSCAP Planners Group) to determine the final set of survey questions.

CAPIC's Community Needs Assessment reflects Chelsea, Revere & Winthrop, which constitutes CAPIC's designated CSBG service area. It highlights the needs, problems, and concerns of those individuals and families living in poverty in Chelsea, Revere, and Winthrop which is the Agency's geographic area. The survey captured individual, family, and community needs; these findings were highlighted by each category. This provided staff and Board members the ability to prioritize needs and identify resources for each group.

When conducting an extensive community needs assessment it is extremely important to gather as much data as possible from as many sources as possible. This allows you to get a complete understanding of the needs, problems, and concerns of the individuals and families who are living in that community, while at the same time see the strengths and weaknesses of a community. Data that is gathered provides the Agency with the knowledge to identify the needs of the community, prioritize these needs, and develop measurable outcomes that can be achieved.

CAPIC also gathered information from other key sectors of the community, such as the private sector and public sector. The analysis and inclusion of this data has enhanced the Agency's ability to make sound decisions about what we as an Agency need to do to provide

comprehensive services that meet the needs of our clients and the community, while at the same time align with our mission statement. These surveys captured individual, family, and community needs and provided staff and Board members the ability to prioritize needs and identify resources for each group.

Due to COVID-19, CAPIC was not able to conduct focus groups as planned or conduct in person interviews. However, CAPIC is an active participant/member of various community-based task forces, groups, and coalitions, such as the Massachusetts Energy Director's Association (MEDA), the Revere CARES Substance Abuse Coalition, the Revere DTA Advisory Board, Winnisimmet Regional Opioid Collaborative (WROC), the Healthy Chelsea Coalition, CASA Divert (Chelsea Domestic Violence High Risk Team), Chelsea Domestic Violence Task Force, the Women's Encouraging Empowerment Advisory Board, the Winthrop Quality of Life Team, the Chelsea Substance Use Disorders Leadership Team, Chelsea Hunger Network, and Balance of State –Continuum of Care, and the Chelsea HUB – a team of community & local government agencies who meet weekly to address specific situations re: clients facing elevated risk levels. CAPIC is also an active member of the Chelsea Downtown Task Force. This involvement has provided information and community needs related data to the Agency; especially during COVID-19 as Chelsea and Revere were two of the hardest hit communities in the Commonwealth. This information was utilized while completing the Community Needs Assessment Report.

Approximately 2,000 bi-lingual (English and Spanish) surveys were sent out to the communities CAPIC serves (Chelsea, Revere & Winthrop), representing a large random population and reasonable representation of the Agency's client base as well as the residents of each community (giving the agency a 95% confidence level in data collected). The Needs Assessment was also available on-line through the agency's website, and was also distributed by CAPIC staff and Program Managers to distribute to clients. In addition, staff who live in CAPIC's service area were also asked to complete the survey. CAPIC also partnered with the Winthrop Senior Center and the Chelsea Housing Authority to distribute and collect surveys to local residents, complete survey, as were other residents of each of the communities. CAPIC's Energy Outreach Coordinator also assisted with the distribution of surveys to local residents. In addition, staff who live in CAPIC's service area were also asked to complete the survey, as were other residents of each of the communities (a total of 18 surveys were returned by non-clients). A total of 201 completed surveys were returned to the Agency.

CAPIC's Director of Planning, Development, & Operations oversees the collection, analysis, organization, and reporting of data. Such information plays a critical role in the identification of needs, the establishment of priorities, as well as the development and implementation of activities/programs to meet those needs at a community level and at an Agency level. It also provides information that is used to measure organizational improvement with an aim to enhance client/customer experience.

The surveys were registered into a computer program by CAPIC Administrative staff with oversight from the Director of Planning, Development, & Operations as well as the IT Director. Once computed, the data was presented to the Director of Planning, Development, & Operations for review and then shared with the Executive Director and the Board of Directors in a concise format. The information gathered was analyzed with secondary data, such as US Census information, Massachusetts Department of Education data, MGH health reports, WIC data,

MGH Community Health Needs Assessment, COVID-19- related data sources and reports, Massachusetts Executive Office of Labor and Workforce Development, Project Bread, and the Massachusetts Department of Public Health data. CAPIC also gathered information from various community sectors in all three communities, such as local government, faith-based, law enforcement, education, etc.

CAPIC is committed to providing comprehensive support services and resources to low-income individuals and families who need to improve their quality of life. CAPIC values our clients and their feedback. In order to evaluate their satisfaction with the services and resources that the Agency is providing, CAPIC implemented a Client Satisfaction Survey. This survey was revised in 2019 to be more user friendly. The Director of Planning, Development, & Operations worked with CAPIC's Management Team to review and revise the survey. Surveys are completed from an individual who receives a service or resource from CAPIC. The survey is available in English and Spanish, and is distributed to clients by caseworkers/staff at the time of intake. All survey information will be highlighted in the Key Findings: Community Assessment section.

### **INTERNAL NEEDS ASSESSMENT DISTRIBUTION & COLLECTION**

CAPIC's Internal Needs Assessment is distributed to all staff members. The intent of the Internal Needs Assessment/Employee Survey is to provide employees with an opportunity to share their opinions and views regarding their experience as a CAPIC employee as well as their direct work with clients. This input is extremely helpful because of the employee's experience in dealing with at-risk, low-income clients and the chronic problems facing them and their families. The employee's perspective captures what some clients themselves cannot recognize as a barrier. The Planning and Evaluation Committee/Management Team utilizes this information to both improve employee satisfaction and job performance as well as improve service delivery to ultimately improve the lives of those served by the agency, promoting the quality of life for individuals and families agency-wide.

- The Internal Assessment was completed by 40 (33.3%) employees a decrease from 57% in FY'17. This is due to COVID-19 and the vast majority of employees working remotely since April 2020. Also, it should be noted that 14 CAPIC staff members were infected with the coronavirus. This does not take in to account the staff who had family members impacted by COVID. In previous strategic planning processes, the Director of Planning, Development, & Operations had the ability to meet with programs and employees in person and in turn get a higher response rate.
- The Internal Needs Survey tool was updated since the previous CARSP/Community Needs Assessment process and was transcribed into Survey Monkey to make it easier for employees to complete online, especially with more staff working remotely due to COVID. The link for the survey was distributed via email by the Director of Planning, Development, & Operations to all CAPIC employees. The intent of the Internal Needs Assessment/Employee Survey is to provide employees with an opportunity to share their opinions and views regarding their experience as a CAPIC employee. The survey gives employees a platform in which to increase their engagement and provide another way for them to inform management as to how they perceive their work environment.

- The survey tool asked questions ranging from satisfaction with employment at CAPIC to identification of chronic client problems. Results were then collected and analyzed by the Director of Planning, Development, & Operations and shared with the Executive Director, Director of Human Resources, as well as the Management Team. Results are extremely beneficial in analyzing current agency strengths and weaknesses. On-going analysis of this assessment tool will aid in the development of policies, strategies and service delivery methods throughout the Agency.



## KEY FINDINGS: COMMUNITY ASSESSMENT

### **SURVEY DEMOGRAPHICS – 201 RESPONDENTS**

Of the 201 Community Needs Assessment Survey respondents 53% were Hispanic. This is an increase from 36% in FY’17. The majority of respondents were between the ages of 25-44 (42%), with 35% between the ages of 45-65. In addition, 66.87% were female (consistent with 66.5% in FY’17) and 33.13% of respondents were male (consistent with 33.4% in FY’17). The race breakdown of respondents is as follows: 71.5% white, 7.76% Black, 7.76% Multi-Race, 3.45% Asian, 3.45% American Indian or Alaskan Native, and 6.03% other. 56.1% of respondents were Chelsea residents, 27.4% Revere residents, and 13.5% Winthrop residents.

The survey also captured income-related data; 69% of respondents’ monthly income before taxes was under \$2,000 a month (under \$24,000 annually); 19.72% was \$2,000 - \$4,000 a month (\$24,000 - \$48,000 annually); 7.04% was \$4,001 - \$6,000 a month (\$48,012-\$72,000 annually). Based on this information it is clear to that the vast majority of respondents are low-income and living below the poverty level. Furthermore, 41.4% indicated that they are not able to pay their bills on time each month; with 11% being unsure if they are able to do so; 69% do not have \$500 set aside for an emergency.

### **Community Needs Assessment – Results & Findings**

<b>GREATEST BARRIER</b>	<b>CAPIC RESPONDENTS</b>
Affordable Housing*	70.1%
Ability to Pay Heating/Utility Bills	49.1%
Access to Food*	48.5%
Jobs	45.6%

\*Denotes the same barrier (not same order) as indicated by respondents three years ago.

## **1.Affordable Housing**

Individual or Family Level & Community Level (due to COVID) Need Statement: Affordable housing opportunities throughout the local area; the absence of safe, affordable housing stock, resulting in homeless crisis, overcrowding, and increase in hotel/motel population as well as an emotional crisis for low-income at-risk individuals and families.

Affordable housing was the top need identified in the Community Needs Assessment survey conducted by CAPIC in early 2020; 70.1% of respondents indicated this was the biggest need facing their community. Housing has been a critical problem for many years, and it continues to challenge CAPIC and its clients (*individual, family & community need*). The face of homelessness continues to change and the problem is more difficult to address with the lack of rental assistance funds, lack of affordable housing, overcrowded living situations, looming evictions, increase in food costs, and the continuous rise of fair market rents. 56% of survey respondents indicated that their living expenses (rent/mortgage, heat, and food) are too high with 41.4% not able to pay their bills on time each month. Housing instability is a direct result of high rents and has resulted in multiple households doubling and tripling up in order to be able to afford an apartment.

The chart below depicts the 2020 fair market rents for Chelsea, Revere, and Winthrop as reported by HUD. All rents reflect an increase since the previous Community Needs Assessment was conducted. The vast majority of CAPIC clients are not able to afford these rents.

### **2020 Fair Market Rents**

<b>Unit Size</b>	<b>Monthly Rent</b>
Efficiency	\$1,715
One -Bedroom	\$1,900
Two-Bedroom	\$2,311
Three-Bedroom	\$2,880

Per the US Census there is a shortage of available units in CAPIC's service area; 95.8% of housing units are occupied in Chelsea; 94.3% in Revere, and 93.6% in Winthrop. Preliminary results (released December 2020) from the "Chelsea Eats Survey Project conducted by the Harvard Kennedy School/Rappaport Institute indicates that 68.2% of respondents are concerned that they do not have enough income to pay rent or mortgage; 37% were not confident that they could pay their next month's rent or mortgage. Additionally, Continuum of Care/Balance of State (CAPIC is an active member) reports that there are 1,119 total homeless households in the Balance of State areas; 806 are in emergency shelter, 155 in transitional housing and 158 are unsheltered.

During 2019, the City of Revere partnered with the Metropolitan Area Planning Council to conduct a city visioning and master planning process called "Next Stop Revere". In this process more than 70 percent of residents listed affordable housing as a top priority. The "report" states that on average, housing costs reach to 28.65% of the median income, with low-income individuals on average spending 115.65% of their income on housing in Revere.

In 2019 MGH conducted the Community Health Needs Assessment (CHNA). CAPIC was an active participant in this process with membership in working groups and the steering committee; reviewing data and survey tools. The report notes, that this was the first CHNA ever in which housing (safe, affordable, and stable) and economic issues rose to the top of the priority needs list. The report goes on to state: “Unaffordable housing increases risk of eviction and gentrification. According to the ACS 2012-2016 data, 37% of all households in Massachusetts—renter and owner—were cost burdened (meaning they pay 30-50% of their monthly income on housing). In North Suffolk, residents in Chelsea (41%), Revere (51%) and Winthrop (47%) indicated they are cost burdened.” The CHNA also discussed evictions and the disparities in fears of eviction. “Compared to 11% of non-Hispanic/Latino survey respondents, 23% of Hispanic-Latino survey respondents fear they will be evicted or foreclosed due to lack of rent or mortgage payment. Survey respondents in Revere (44%), Chelsea (30%), and Winthrop (23%) expressed fear of homelessness in the next year.”

The MA Department of Elementary and Secondary Education estimates that in the 2017-2018 school year, there were 463 homeless youth in Chelsea (including those doubled up with others), 191 in Revere, and 14 homeless youth in Winthrop.” It should also be noted that in 2018, CAPIC worked closely with the Revere Public Schools to identify homeless youth. CAPIC worked with a total of sixteen (16) youth (ages 16-24); all of whom were homeless (couch surfing) due to substance use/alcohol-related issues. CAPIC provided these youth with clothing, food, comprehensive intake, referral to legal services, as well as substance use support, counseling, etc. One of the biggest barriers is lack of funding to enhance services that are directed at this specific population of homeless youth who are 16-24. Also, lack of shelters and transitional housing for youth in Chelsea and Revere as well as appropriate housing options for youth are lacking in CAPIC’s service area. Prior to COVID-19, CAPIC conducted a Homelessness Survey; 38.3% of respondents are not able to pay their rent or mortgage each month, 47% fear that they might get evicted due to no-payment of rent, and 8% report being homeless over the past two years.

The available housing stock in the tri-community area is modest, average of 3.3% as opposed to an average 10% national figure, making finding available safe housing difficult, let alone securing safe, *affordable* housing for people on fixed incomes paying far more than 50% of income on housing expense. Nationally, an average of 67% of US citizens own their home, a much higher rate than the 38.9% of Chelsea residents who are homeowners. (Per US Census data)

### **COVID-19 Impact**

***\*It should be noted that CAPIC conducted and completed its Community Needs Assessment survey prior to the COVID-19 pandemic.***

The COVID-19 pandemic has had a severe impact on CAPIC’s service area; Chelsea and Revere are two of the hardest hit cities in the Commonwealth of Massachusetts and continue to see increases in positive cases. This has had devastating effects in both communities. Since mid-March, CAPIC has seen an alarming increase in calls for rent/mortgage assistance as well as food and basic necessities. CAPIC’s request for rental assistance has quadrupled since the pandemic hit in March; with a waiting list of those who are need of help to avoid displacement.

Chelsea is in the throes of the most serious housing crisis the city has seen in decades. Revere is close behind. This housing crisis had been building as Boston-area rents skyrocketed in the past few years; however, the COVID-19 pandemic exacerbated the crisis and brought a sense of despair to a community already struggling and burdened by a myriad of issues.

- In July 2020, the Boston Foundation reported that the City of Chelsea had both the Commonwealth’s highest rate of overcrowded housing and by far the highest rate of COVID-19 infections “much more than in cities such as Somerville and Cambridge which have similarly dense populations but far less crowding in housing.”
- Due to the pandemic, individuals and families are unexpectedly out of work, without an income, and having to make difficult decisions between rent, food, basic necessities, utilities, etc. Many of these individuals and families are immigrant families and were living pay-check-to-pay-check before the pandemic and experiencing financial hardships. The current situation has only exacerbated these issues for at-risk individuals and families. Prior to the pandemic, the crisis of housing affordability heavily impacted Chelsea and Revere, the impact of COVID has worsened the housing crisis.
- High rates of asthma in these communities combined with the fact that many service-sector employees live in crowded or multigenerational homes, conditions in which the virus flourishes, has proved devastating. There are a high number of “essential” workers in these communities so many families have continued to be exposed to the virus even as members of the same household faced layoffs.
- A Boston Globe article from August 19, 2020, highlighted housing crisis concerns in Revere “At the same time, other parts of Revere, away from the beach, are wrestling with an economic crisis brought on by the virus. Unemployment tops 27 percent in Revere, where many residents work in hotels, restaurants, and other industries devastated by COVID-19. Worries about a wave of evictions — when the state’s moratorium on them eventually ends — loom large. Many are concerned about the sort of rapid turnover that has pushed working-class immigrants out of neighboring East Boston.”
- Due to the outbreak of the coronavirus, residents of Chelsea are facing critical economic hardship. In October 2020, the City of Chelsea, in collaboration with community partners, funded a bi-lingual housing legal clinic to assist residents with a variety of housing issues ranging from landlord mediation to legal representation and services for eviction proceedings. Revere and Chelsea have also established rental assistance programs for residents facing eviction. CAPIC is also a member of the Chelsea and Revere Pandemic Response Teams.

## **2. Ability to Pay Heating or Utility Bills**

Individual or Family Level Need Statement: The escalating cost of heat and utilities coupled with the absence of energy conservation measures in low-income homes place many low-income households in financial crisis and possible ill-health.

The second top need identified in the Community Needs Assessment survey was the inability to pay heating and utility bills – 49.1% of respondents indicated that this is their greatest concern (*individual & family need*). In addition, 41.4% of needs assessment respondents indicated that

they are not able to pay their bills on time each month. This can also be interpreted as a lack of income. In the needs assessment conducted in FY'17, 41% of respondents indicated that lack of income was their greatest problem.

In FY'20, CAPIC provided 2,105 households with emergency utility payments. Many vulnerable households facing high energy costs are forced to make household budget trade-offs that jeopardizes health, including choosing heat over food or health care. CAPIC anticipates fuel assistance numbers to increase over the next three years as more individuals and families are unemployed and many have seen a decrease in hours and benefits. It should also be noted that undocumented individuals are not eligible for fuel assistance benefits due to federal regulations. This has directly impacted CAPIC's energy assistance programs as many individuals and families in the service area are undocumented. There is a lack of energy-related resources for these individuals and families.

CAPIC is aware that the vast majority of their clients are living below the poverty level and struggle to cover monthly bills, rent/mortgage, and provide food and basic necessities for themselves and their families. 26.8% of Needs Assessment survey respondents indicated that they work full-time but their pay doesn't cover their expenses and 31% are living on a fixed income (pension, Social Security benefits, etc.).

### **COVID-19 Impact**

The pandemic has brought on an economic crisis in Chelsea, Revere, and Winthrop. Many residents work in hotels, restaurants, and other industries devastated by COVID-19. Many of the local areas hospitality jobs are gone, and most won't be coming back. The latest figures show Revere now has the second highest unemployment rate of any city in the state. Its jobless rate of 25.6 percent puts it behind only Lawrence.

- Many local (especially in Chelsea) residents are ineligible for government assistance like unemployment and federal stimulus checks and, consequently, families need urgent help as they face health and financial hardship. *MGH Report: Impact of COVID-19 on Underserved Communities: Chelsea and Revere.*
- Lack of public benefits—two-thirds of the Chelsea population is Latinx, and some residents have an undocumented immigration status; while undocumented workers may contribute to social security, they do not receive public benefits, such as stimulus checks – *MGH Report: Impact of COVID-19 on Underserved Communities: Chelsea and Revere.* It should also be noted that undocumented individuals are not eligible for fuel assistance benefits due to federal regulations.

### **3. Access to Food**

Individual or Family Level & Community Level (due to COVID) Need Statement: Increase access to food and basic needs for at-risk individuals and families.

The majority of CAPIC clients live between 75% and 100% of the poverty level. In the Community Needs Assessment, 48.5% of survey respondents indicated “access to food” as the top need impacting people in their community. 56% of survey respondents indicated that their living expenses (rent/mortgage, heat, and food) are too high. The Harvard Kennedy Rappaport Institute “Chelsea Eats Survey Project” preliminary report notes that 50% of respondents replied

that it's "true/sometimes true" *that their children were not eating enough because we couldn't afford enough food.* 70.2% of survey respondents stated that "during the last seven days that they or someone from their household got free groceries or a free meal." Furthermore, 69.45 stated that they don't have enough income for food. It is clear that food insecurity has escalated in recent years and continues to be a critical need in Chelsea, Revere, and Winthrop.

According to the 2019 WIC Needs Assessment, only 50.3% of eligible individuals in Winthrop received benefits; 58.9% in Revere; and 67.7% in Chelsea. Hunger and food insecurity negatively impact health and are associated with a higher risk of chronic health problems. MGH reports that this is a significant issue in Chelsea, where one in eight residents struggles with food insecurity. Food insecurity has greatly impacted all aspects of CAPIC programming and direct services. All programs have clients who are in need of assistance with food and basic necessities. CAPIC is dedicated to understanding the factors that contribute to hunger and how it impacts all aspects of one's life.

### **COVID-19 Impact**

Since mid-March, CAPIC has seen an alarming increase in calls for food and basic necessities. CAPIC's request for assistance with food has quadrupled since the pandemic hit in March. Due to the pandemic, many individuals and families are unexpectedly out of work, without an income, and having to make difficult decisions between rent, food, basic necessities, utilities, etc. Many of these individuals and families are immigrant families and were living pay-check-to-pay-check before the pandemic and experiencing financial hardships. The current situation has only exacerbated these issues for at-risk individuals and families.

- Massachusetts has experienced the largest relative increase of food-insecure individuals in the nation due to COVID-19. And the highest increase of food-insecure children at 102%, according to analysis by Feeding America.
- Food insecurity was already an issue that existed pre-pandemic, it is now even more dire and urgent than ever before. *MGH Report: Impact of COVID-19 on Underserved Communities: Chelsea and Revere.*
- Calls to food assistance hotlines have also risen during the pandemic. Project Bread, a Massachusetts statewide anti-hunger organization that connects people to reliable sources of food, while advocating for policies that make food more accessible so that no one goes hungry, coordinates a hotline for people struggling with food insecurity. Data from the FoodSource Hotline show that calls from around the state increased more than five times comparing July and August 2019 to the same period in 2020. The implementation of the state's Pandemic EBT program prompted a large share of the new calls. There was also an increase in calls about SNAP (including SNAP pre-screens, application assistance and help with recertification). *Project Bread and Boston Indicators Report*
- One of the many challenges that the Town of Winthrop has faced in the wake of COVID-19 is an increase in food insecurity. More residents are relying on the local food pantry for weekly food and this has put a strain on local resources.
- CAPIC has partnered with the Chelsea Public Schools to provide free breakfast, lunch, and a snack for children enrolled in CAPIC's After School Program – once a part-time program for children/youth during out of school hours, this program is now full day;

providing remote learning to all children/youth who are enrolled so that parents/guardians can work.

**4.Jobs**

Individual or Family Level Need Statement: To advance economic opportunities for low-income residents who lack sufficient income and the education/job skills to increase their income and quality of life.

Many low-income individuals are unemployed and in need of employment skills, training, career counseling, and career awareness services. In the FY’20 Community Needs Assessment 45.6% of respondents indicated that “jobs” was the top need impacting the local community. 11.5% of Needs Assessment survey respondents indicated that they can’t find a job; 13.4% can only find part-time work. In addition, 32.1% of respondents reported that they need job training/education or training. Issues around obtaining and retaining income can include: barriers to employment, education, stable housing, health, social/emotional health, transportation, and safety issues etc. 23.1% of respondents stated that childcare is too expensive and/or interferes with their ability to work.

As previously mentioned, the FY’20 Community Needs Assessment, 69% of respondent’s indicated that their monthly income before taxes is under \$2,000 a month, which is under \$24,000 annually. 19.7% of respondents indicated that their monthly income before taxes is \$2,000 - \$4,000 a month (\$24,000 - \$48,000 annually). The vast majority of CAPIC clients are earning minimum wage, resulting in an extremely vulnerable population who is in need of numerous financial support services and resources. CAPIC fully understands the increasing challenges for working families to meet their most basic needs and the importance of helping individuals gain the right education and skills that will allow them to earn income sufficient to make ends meet. A family’s basic needs include: housing and utilities, food, transportation, health care, personal and household items such as clothing, and for families with young children, child care. Education and employment skills will allow them to earn income sufficient to make ends meet.

The MA Department of Education reports the following enrollment data for the 2019-2020 school year: Chelsea Public Schools – 70.6% of children enrolled are economically disadvantaged; Revere Public Schools – 56.1% of children enrolled are economically disadvantaged; and Winthrop Public Schools – 31.9% of children enrolled are economically disadvantaged. It is important to note that the state average is 36.6%.

**Employment & Poverty - Related Data**

<b>Unemployment Rate</b>	<b>Chelsea</b>	<b>Revere</b>	<b>Winthrop</b>	<b>State</b>
Persons unemployed *November 2020	7.8%	8.3%	6.5%	6.2%

*\* Massachusetts Dept. of Unemployment Assistance*

Poverty Level	Chelsea	Revere	Winthrop
Persons in Poverty	19%	13.1%	9.9%
People in poverty or near poverty	43%	34.8%	21.2%

\* Based on US Census- denotes 2014-2018 5-Year Estimate data.

The 2019 MGH Community Health Needs Assessment/North Suffolk Community Survey, 23% of all respondents selected poverty as a top health concern. Participants suggested more and better employment and educational opportunities are needed to support higher incomes and cultivate a more financially stable community.

### **COVID-19 Impact**

The pandemic has brought on an economic crisis in Chelsea, Revere, and Winthrop. Many residents work service jobs in the food and hospitality industries; during the pandemic many of these jobs disappeared, leaving people unemployed without a social safety net. The economic, social, and health impacts of the COVID-19 pandemic were immediate and dire for the many individuals and families who live one paycheck away from serious financial hardship. COVID-19 has magnified the challenges within these communities that have long struggled with unstable and unaffordable housing, food insecurity, low wages, lack of English proficiency, and high rates of uninsured.

A Washington Post article on immigrant communities battling the coronavirus shared a quote by Roy Avellaneda, President of the Chelsea City Council and a local business owner: “The people who live here are people who can’t afford to take a month off work. People who need that check because they don’t have savings; people who either go to work or they don’t eat,” noting that the thousands of undocumented people in the city do not receive unemployment compensation. “All of the assistance that was being offered on the federal level for stimulus checks was not going to happen here, was not going to our crowd.” This sums up the reality for residents of Chelsea, Revere, and Winthrop during this unprecedented time.

- “While rates of unemployment were already high, they skyrocketed as a result of the pandemic.” The unemployment rate in Chelsea is now 24%, which is one of the highest unemployment rates in the country, if not the highest,” says Ronald Fishman, community coordinator at the Healthy Chelsea Coalition.’ *MGH Report: Impact of COVID-19 on Underserved Communities: Chelsea and Revere.*
- Many residents are at risk due to their work; working in essential sectors (food establishments) and engaged with high levels of public interaction, such as healthcare and personal services.
- Many residents work in hotels, restaurants, and other industries devastated by COVID-19. Many of the local areas hospitality jobs are gone, and most won’t be coming back.

The latest figures show Revere now has the second highest unemployment rate of any city in the state. Its jobless rate of 25.6 percent puts it behind only Lawrence.

- “By mid-March, layoffs caused by the pandemic had exacerbated deep-seated economic insecurity among Chelsea’s residents, 20 percent of whom live in poverty, according to the U.S. Census. Those who suddenly could not work — because they were sick or had been laid off — faced hunger and destitution. Those who could fill essential roles worried about catching the virus and infecting their family members.” Washington Post Article

### **OTHER NOTABLE NEEDS ASSESSMENT FINDINGS**

- 38.6% of respondents indicated mental health services as a top priority (*individual & family need*)
- 31.5% of respondents indicated drug and alcohol services as a top priority (*community need*)
- 29.25 of respondents indicated immigration issues as a priority. (*individual & community need*)
- 18% of respondents don’t have reliable transportation (*individual need*) – this is a slight decrease from the FY’17 Needs Assessment in which 28.3% indicated that transportation was a problem. This decrease could be a result of the MBTA Silver Line being extended into Chelsea in 2018. Also, the emergence of Uber and other ride share options have provided residents with better access to transportation.
- 68.7% of respondents don’t have at least \$500 set aside for emergencies (*individual and family need*)
- At-risk, street-involved individuals took part in the Needs Assessment through CAPIC’s Substance Use Disorders/Mobile Outreach Program; giving a voice to a population that rarely has its needs documented.
- 98.5% of clients were satisfied with the assistance they received from CAPIC (CAPIC Client Satisfaction Survey)

### **STAKEHOLDER SURVEY FEEDBACK**

CAPIC asked community stakeholders to take part in the FY’20 Community Needs Assessment process to better determine what problems and priorities face the individuals and families that we/they serve. The survey also asked stakeholders to list what they see as the strengths and weaknesses of the community in which they represent. Individuals from health care organizations, faith-based organizations, local government, school committees, public schools, local human service agencies and organizations are among those who completed surveys. Below is a synopsis of the Stakeholder Survey responses.

**Stakeholder list by sector:** *Health Care:* MGH Chelsea and Healthy Chelsea; *Community & Faith-Based:* Those Who Can for Those in Need (Winthrop), Chelsea Eviction Task Force, & Light of Christ Chelsea; *Private & Public Sector:* Revere Police Department & Chelsea Inspectional Services Department; *Education:* Chelsea School Committee & Chelsea Public Schools

Below is a synopsis of the Stakeholder Survey responses.

**Top three most significant issues facing your community:**

Unemployment/underemployment, food insecurity, housing, health disparities, English language skills, education deficiency, & undocumented status of many residents,

- COVID-19 related issues – evictions, lack of jobs, and food insecurity
- CAPIC’s Executive Director & Dir. Planning, Development, & Operations are active members of the Chelsea Eviction Task Force that meets weekly. The goal of the task force is to coordinate communications and direct services related to emergency housing, legal services, and eviction prevention as a result of COVID-19. This group has identified emergency rental assistance and emergency shelter availability as two critical gaps in Chelsea (and Revere) and is working on drafting a housing resource guide.

**COMMUNITY STRENGTHS**

- Active inter-agency communication and collaboration to tackle the diversity of the community
- Community coming together to help those most vulnerable
- Collaboration between community-based agencies
- Diversity
- Close proximity to Boston
- Good public transportation system
- Plentiful workforce

**COMMUNITY WEAKNESSES**

- Poverty
- Lack of assistance for rental needs and utility emergencies
- Aging housing stock
- High number of undocumented residents without government resources/under constant threat of ICE
- Lack of shelters for homeless
- High pollution
- Dense population (COVID-19)
- Unbalanced gentrification



## KEY FINDINGS: INTERNAL ASSESSMENT

---

CAPIC conducted an extensive Community Needs Assessment in preparation for the FY'21-'23 CARSP. This included an Internal Needs Assessment that was distributed to all CAPIC employees. The Assessment was completed by 40 (33.3%) employees a decrease from 57% in FY'17. This is due in part to COVID-19 and the vast majority of employees working remotely since April 2020. Also, it should be noted that 14 CAPIC staff members were infected with the coronavirus. This does not take into account the staff who had family members impacted by COVID. In previous strategic planning processes, the Director of Planning, Development, & Operations had the ability to meet with programs and employees in person and in turn get a higher response rate.

The Internal Needs Survey tool was updated since the previous CARSP/Community Needs Assessment process and was transcribed into Survey Monkey to make it easier for employees to complete online, especially with more staff working remotely due to COVID. The link for the survey was distributed via email by the Director of Planning, Development, & Operations to all CAPIC employees. The intent of the Internal Needs Assessment/Employee Survey is to provide employees with an opportunity to share their opinions and views regarding their experience as a CAPIC employee. The survey gives employees a platform in which to increase their engagement and provide another way for them to inform management as to how they perceive their work environment.

CAPIC understands the importance of letting employees know that their voice is being heard and that it can make a difference within the Agency. The Planning and Evaluation Committee/Management Team utilizes this information to both improve employee satisfaction and job performance as well as improve service delivery to ultimately improve the lives of those served by the agency, promoting self-sufficiency agency-wide.

The survey tool asked forty-two (42) questions ranging from satisfaction with employment at CAPIC to identification of chronic community-based problems. Surveys could be completed anonymously if desired, however, employees were given the option to note which program they work in at the Agency. Results were then collected and analyzed by the Director of Planning, Development, & Operations and shared with the Board of Directors as well as the Executive Director, Director of Human Resources, and the Management Team. Results are extremely beneficial in analyzing current agency strengths and weaknesses. On-going analysis of this assessment tool will aid in the development of policies, strategies and service delivery methods throughout the Agency. CAPIC's Management Team will continue to discuss these results and use them to further evaluate and improve the work environment for all employees.

**FY’21-’23 INTERNAL NEEDS ASSESSMENT RESULTS**

**Employees identified the following as the prominent barriers facing CAPIC clients.**

<b>Top Need</b>	<b>2<sup>ND</sup> Top Need</b>	<b>3<sup>RD</sup> Top Need</b>
Housing	Food	Heat/Energy Assistance
(same as 3 years ago)	(was perceived as 3 <sup>rd</sup> biggest need 3 years ago)	

Employees also indicated that the following services are not being provided in the communities that we serve:

- **Housing (access to affordable housing & rental assistance) *\*this was noted by employees 3 years ago as well***
- **Adequate medical/health services for immigrants**
- **Employment – lack of access to job opportunities**
- **Financial guidance**
- 

A scan of the internal and external environment is an important part of the strategic planning process. Environmental factors internal to the Agency can be classified as strengths and weaknesses. The Internal Needs Assessment continues to be a valuable tool in CAPIC’s self-analysis as an agency. Results/feedback includes both agency strengths and weaknesses.

**STRENGTHS**

- 100% of CAPIC respondents said they know and understand CAPIC’s Mission (increase from 90% 3 years ago)
- 96% believe CAPIC is fulfilling its mission (increase from 89% 3 years ago)
- 95.2% believe they have seen an improvement in CAPIC’s delivery of service since their date of hire (increase from 78% 3 years ago)
- 95% report having a positive relationship with management (Executive Director, Human Resources, Fiscal, and Planning, Development, & Operations)
- 48% of employees have relationships with other community-based organizations that covers many different areas of expertise and support
- Dedication of staff and colleagues cited most often in narrative as agency’s greatest strength.

**WEAKNESSES**

- 40% of employees indicated that compensation/wage practices are not fair within their program. This was primarily within early education programs and in relation to low wages for teachers.
- Internal communications across all programs – more consistent messaging
- Lack of funding for client emergencies, such as housing, shelters, etc.

CAPIC will work to overcome cited weaknesses, using this as an opportunity to promote better service delivery and employee relations. Increased communication has been a focus over recent

years and will continue to be over the next three years. CAPIC is dedicated to identifying and securing alternative funding sources to meet the needs of the local residents, as well as increase programming to address gaps in services and resources for local individuals and families.

### **COVID-19 Impact**

It should be noted that CAPIC also conducted a COVID-19 Employee Survey to better understand employees' thoughts and concerns surrounding the COVID-19 pandemic and CAPIC's efforts to provide a safe environment for all employees. CAPIC's Head Start Program conducted its own survey before re-opening the program and bringing staff back to classrooms, etc.

- In response to the COVID-19 pandemic, CAPIC had to make numerous adjustments to operations in order to continue to provide at-risk individuals and families with critical resources and services during this challenging time. For the first time in the Agency's fifty-three years of operation, all locations and offices were closed to the general public. The majority of CAPIC programs and offices are located in Chelsea and Revere. Chelsea is the hardest hit community in the Commonwealth. Revere is the seventh hardest hit with positive COVID tests. In order to adhere to guidance from local elected officials, the Governor of Massachusetts, the Center for Disease Control (CDC), and the Department of Early Education and Care (EEC), all staff worked remotely; working diligently to transition from in person meetings and engagement with clients to virtual engagement and provision of resources.
- All CAPIC meetings were shifted from in person to ZOOM meetings (including Board of Director's meetings); remote technology capabilities were enhanced for staff so that remote work could take place in an efficient manner and communication with clients could continue while offices were closed/closed to the public. Also, in response to the pandemic, CAPIC's Management Team meetings went from monthly in person meetings to weekly Zoom meetings. This has provided a forum for administrative staff (Executive Director, Human Resource Director, Director Planning, Development, & Operations, IT Director, & the Finance Director) and Program Directors to discuss the impact of COVID on overall agency operations as well as employees and their families, direct services for clients, and the communities the agency serves.

### **Board Self-Evaluation Survey**

CAPIC is governed by a twenty-one member community-based Board of Directors that represents the public, private, and low-income sectors of Chelsea, Revere, and Winthrop. CAPIC utilized a Board Self-Evaluation Survey tool, to determine the Board's knowledge of its role, knowledge of the agency (programs, services, mission), and its judiciary responsibilities. This information is an important piece of the overall analysis of the agency and its strengths and weaknesses. The Director of Planning, Development, & Operations developed the Board survey tool.

The Board Self-Evaluation Survey Tool was comprised of a total of 22 questions. Board members were asked to anonymously (if desired) fill out the survey and return it to the Executive Director. The survey reflected members involvement with the agency, their relationship with the

Executive Director and other board members, participation in meetings and the decision making process for the agency, and members satisfaction of being on the board. It should be noted that CAPIC Board members have been engaged in all aspects of the Agency's response to COVID-19. The following are findings of the survey.

## **STRENGTHS**

- 100% of board members find their experience serving on the board to be a satisfying and rewarding experience
- 100% of board members understand and support CAPIC's mission
- 100% respect the confidentiality of the Board's Executive Sessions
- 100% of board members are knowledgeable of CAPIC's programs and services
- 100% report that they have a good working relationship with the Executive Director and other board members
- 100% report that they understand CAPIC's financial statements



## **STRATEGIC THREE-YEAR GOALS**

---

Over the next three years, specific goals will guide CAPIC's programming, services, and operations to meet the needs of the low-income individuals, families, and communities that the Agency serves. The common goal among all CAPIC programs is to assist low-income individuals and families improve their quality of life and promote self-sufficiency so that they can reach their full potential.

The Strategic Goal component of the three-year plan is based on CSBG National Indicators, Goals, and Agency Outcomes. The goals stem directly from the top four needs identified from the Community Needs Assessment and the Internal Needs Assessment; developed using ROMA guidelines and principles. These key areas are where CAPIC will concentrate efforts and resources over the next three years.

The Executive Director, Director of Planning, Development, & Operations, Planning & Evaluation Committee, Management Team, Program Managers, staff, and the Board of Directors focused on the development of three-year goals and strategy development, specifically identifying priority areas. This process was led by the Director of Planning, Development, & Operations who kept the focus on the Agency's mission statement while utilizing data, both primary and secondary to inform decision making and the determination of priority areas.

The overall goal is to meet the Agency's mission in all that we do, while at the same time work to advance the mission to meet the changing environments in the communities that we serve. This has been critical during the pandemic, as the Agency had to shift to remote work and continue to provide services and resources in a safe manner, while at the same time being closed to the general public for the first time in over fifty years of operation. Under this new strategic plan CAPIC will organize and measure activities and results under the National Indicators of Community Action Performance.

## Identified Priority Areas

### AFFORDABLE HOUSING

*\*Individual or Family Need, & Community Need (due to COVID)*

- **Need Statement:** The vast majority of local residents are extremely low or very low income and struggle to find affordable, stable, and safe housing; many are at-risk of displacement, especially those disproportionately affected by COVID-19. Affordable housing opportunities throughout the local area; the absence of safe, affordable housing stock, resulting in homeless crisis, overcrowding, and increase in hotel/motel population as well as an emotional crisis for low-income at-risk individuals and families.
- **Goal/Strategy Statement:** CAPIC will work to adapt to the changing policies that govern funding for housing and homelessness services and create a prevention model that identifies at-risk tenants and homeowners. CAPIC will also meet the growing housing/eviction crisis through the expansion of the current Emergency Housing Services Program and partnerships with local municipalities, and service providers.

### Service Delivery

- CAPIC will work with local partners to prevent the eviction and displacement of residents.
- CAPIC will provide at-risk individuals and families who are facing displacement or are displaced with rental/mortgage assistance to pay for costs associated with first, last, and/or security deposit, and sustain/obtain permanent housing and avert shelter placement. CAPIC will utilize available funds such as FY'21 CAA Line Item funds, United Way Chelsea One Funds, The Boston Foundation, Eastern Bank Charitable Foundation funds, FHO Collaborative Grant with TND, donations, and available grant funds. CAPIC will also leverage other resources and refer clients to Lend-A-Hand, Just-A-Start, Mass Coalition for the Homeless, Mystic Valley Elder Services, Mi Amore, TND, La Colaborativa, and MBHP's RAFT Program for rental assistance when funds are available.
- The Mass Coalition for the Homeless will be continue to provide the HomeLink Mobile Homelessness Prevention Clinic at CAPIC's Main Office one day per week. This will provide CAPIC clients with direct access to prevention services and resources in their own community. \*Pending to start again in the fall – in person was suspended due to COVID-19 protocols.
- CAPIC will continue active participating in the Chelsea HUB - team of community & local government agencies who meet weekly to address specific situations re: clients facing elevated risk levels. Team develops immediate, coordinated, & integrated responses thru mobilization of resources and mitigate risk within 24-48 hours. Over the past year, CAPIC has worked with numerous clients on housing-related issues and will continue to do so over the next two years.
- Since 2019, CAPIC has worked with the City of Chelsea/Inspectional Services Department (ISD) to develop a referral system that provides multi-lingual capacity and

delivers direct assistance to solve problems related to homelessness, substance use disorders, employment, emergency needs, hunger, hoarding, relocation assistance, emergency heating system repair, heating assistance, energy conservation, childcare, substance use disorders, preservation of tenancies and other needs that households experience; providing City inspectors with the ability to refer an at-risk resident to social services. CAPIC will continue to partner with the City of Chelsea ISD over the next two years to work to maintain housing for residents involved with the ISD Department.

- CAPIC will work to increase access for homeless individuals through the Coordinated Entry (CE) process; created by the Massachusetts Balance of State Continuum of Care (BoS CoC) to facilitate the process of assessing the housing needs of individuals experiencing homelessness, and meeting those housing needs. The goal of the CE process is to provide each consumer with adequate services and supports to meet their housing needs, with a focus on returning them to housing as quickly as possible. This process standardizes the assessment of housing needs and prioritize the referrals of those most vulnerable to the most appropriate housing interventions. CAPIC's Substance Use Disorder (SUDS) Program Director oversees this process and works with individuals to complete the online "survey". It should be noted that over the past two years, fifty homeless individuals have gained housing through the CE process.
- CAPIC's Emergency Assistance Program will continue to work closely with landlords, local housing authorities, Suffolk Legal Services, Greater Boston Legal Services (GBLS), and the newly established Chelsea Legal Clinic to access additional resources and mediate on behalf of at-risk clients. CAPIC will also continue to partner with local housing authorities, and other transitional housing programs to develop initiatives around increasing and/or creating affordable housing units. CAPIC's Executive Director has been working closely with local and state officials to determine the feasibility and identify funding for homelessness prevention services for CAPIC's service area, as well as reinstating programming statewide. Preventing displacement of families is critical in averting shelter placement and homelessness. CAPIC is dedicated to continue its work with state and local officials to ensure that residents of Chelsea, Revere, and Winthrop have access to safe, affordable, and permanent housing.
- In January 2021, CAPIC facilitated a virtual Point-in-Time Count of Unsheltered Persons in Chelsea and Revere in January; working with the police departments and local agencies including DHCD. CAPIC's Mobile Outreach Team worked to identify homeless individuals they have worked with. CAPIC's Mobile Outreach Team will continue to facilitate the Point-in-Time Count over the next two years.
- CAPIC's SUDS Program/Mobile Outreach Program will continue management of the Chelsea Selah Resource Center to provide valuable resources to persons experiencing substance use disorders, homelessness, hunger and poverty, and ensure the consistency of services to this vulnerable population while in a safe and clean environment. The primary goal is for CAPIC to enhance the services being offered to individuals who suffer from addiction, mental health and homelessness and provide direct services and support in a more effective manner. Comprehensive wraparound services will be provided to those in need in a more direct and effective way; access to detox beds will happen in a timely manner (during breakfast) as to better assure the availability of beds for those in need, the Selah Day Resource Center staff will refer persons to CAPIC who are in need of

treatment for alcohol and substance use disorders, temporary housing/shelter and partners will work together to serve the community in a more effective and positive way.

## **ABILITY TO PAY HEATING/UTILITY BILLS**

*\* Individual or Family Level Need*

- **Need Statement:** The escalating cost of heat and utilities coupled with the absence of energy conservation measures in low-income homes place many low-income households in financial crisis and possible ill-health.
- **Goal/Strategy Statement:** Long term self-sufficiency relies on income, and management of budget to best utilize financial resources. CAPIC will work to increase access to energy-related assistance for households while at the same time increase the income for these households. Specifically, CAPIC will increase the income/financial assets of low-income households through energy conservation measures; HEARTWAP & Utility Programs. CAPIC will assist low-income households with heating their home during the winter months, in turn, promoting good health for the household; LIHEAP Program.

### **Service Delivery**

- CAPIC will administer its Fuel Assistance Program (LIHEAP) to approximately 2,800 local households annually, paying heating expenses for low-income families and individuals. CAPIC will directly link these low-income households to Weatherization and energy services to increase effectiveness of future LIHEAP dollars as well as client income spent on heating and cooling expenses.
- CAPIC will maintain sub-contract with ACTION, Inc.; CAPIC receives National Grid funding through ACTION for Weatherization, Heating System and Appliance Management Program services for National Grid clients within CAPIC's service territory.
- CAPIC will maintain sub-contract with ABCD; CAPIC receives Eversource funding through ABCD to support Weatherization, Heating System and Appliance Management Programming for Eversource clients within CAPIC's service territory. CAPIC will also provide HEARTWAP services for the ABCD Malden Fuel Assistance territories (Everett, Malden, Medford, Melrose, Wakefield, Stoneham, Woburn, Winchester).
- CAPIC will maintain its new partnership with the City of Chelsea, All in Energy, and MassSave to provide residents of Chelsea with greater access to low cost, energy efficient programs. This partnership will allow CAPIC to address some of the inequities that exist for clients who live in Chelsea.
- CAPIC's energy programs will work toward a more sustainable future while promoting the health, safety and self-sufficiency of our communities through energy conservation work; all Energy program components will play a role in this initiative.
- In 2019 CAPIC's Energy Program hired an Outreach Worker, who has worked to identify potential new clients and inform residents of the specific energy programs offered by CAPIC. This has been very helpful in increasing services provided to the local communities. Although in person outreach efforts were diminished over the past year due to the pandemic, CAPIC's Energy Director will be working with the Outreach Worker to

enhance efforts over the next year plus, such efforts will include presentations to local schools. During the spring of 2021, the Energy Department partnered with the Chelsea Public Schools and presented an informational workshop to middle school families. CAPIC will be working to expand presentations this fall to other schools and to include Revere and Winthrop. The Outreach Coordinator will also provide presentations to CAPIC's Head Start Management Team and Family Advocates so that they can identify families and refer to energy programs.

- CAPIC's Emergency Services Program Director works closely with the Energy Program Director (and will continue to do over the next two years) to identify resources for individuals and/or families who are in need of assistance with home heating costs, utility termination notices and arrearages. All of these issues are barriers to someone securing and/or leasing a new apartment and affect their ability to cover monthly housing expenses.

## **ACCESS to FOOD**

*\*Individual or Family Need, & Community Need (due to COVID)*

- **Need Statement:** CAPIC has seen an alarming increase in calls for food as the number of food-insecure households continues to increase due to the pandemic. Many individuals and families are unexpectedly out of work, without an income, and having to make difficult decisions between rent, food, basic necessities, utilities, etc. Many of these individuals and families are immigrant families who were living pay-check-to-pay-check before the pandemic and experiencing financial hardships.
- **Goal/Strategy Statement:** To increase funding resources to meet the needs of food insecure individuals and families through the distribution of gift cards to address hunger. CAPIC will also work to increase community awareness and resources regarding food insecurity. CAPIC is dedicated to encouraging better nutrition through advocacy and education; conducting outreach and more effective coordination of resources so that low-income, at-risk individuals and families can have access to food and basic necessities.

## ***Service Delivery***

- CAPIC's Emergency Services Program will distribute food gift cards (to local supermarket) to at-risk individuals and families in emergency situations in need of access to food. This will be accomplished through the use of DHCD City of Chelsea Food Security Grant funds, MGB United Against Racism Grant funds, Eastern Bank Charitable Foundation funds, The Boston Foundation funds, and FY'21 CAA Line Item funds. The current need, exacerbated by the pandemic, far exceeds available resources, in turn, CAPIC will actively work to identify and secure additional funding to support such efforts.
- The CAPIC Head Start Program partners with the American Red Cross to provide healthy food to all families of children who are enrolled in the program. Each month the Red Cross delivers a healthy variety of fresh foods to Chelsea & Revere Head Start centers at no cost. CAPIC is committed to maintaining this partnership over the next three years and beyond so that low-income at-risk families can have access to free

healthy food options. The Head Start Program will offer “Lunch Time Tastings” at each center once per month. The Program's Nutritionist prepares specific low-cost food items that are healthy. Children and parents are able to sample the food, such as smoothies, hummus, veggie stir fry, etc.; introducing children and families to healthy foods.

- CAPIC will continue active participation in Healthy Chelsea Coalition that explores healthy eating practices, behaviors around food preferences, and purchasing patterns, etc.
- CAPIC will maintain active membership on the Chelsea Hunger Network to address food insecurity and access to healthy food for low-income populations. It should be noted that CAPIC also serves as the fiscal conduit for the Chelsea Hunger Network.

## **JOBS (includes job training/education & employment supports)**

*\* Individual or Family Level Need & Agency Level Need*

- **Need Statement:** Many low-income individuals are unemployed and in need of employment skills, training, career counseling, and career awareness services. There are not enough advanced economic opportunities for low-income residents who lack sufficient income and the education/job skills to increase their income and quality of life. There is also a need for increased capacity within CAPIC’s Workforce Development Program in order to provide employment-related supports and resources.
- **Goal/Strategy Statement:** Promote job skills for low-income individuals to obtain and maintain long-term employment, while at the same time expand current community-based learning opportunities. CAPIC will maintain and expand upon its foundation of programming that serves to advance economic opportunity for residents. This will include the fostering of new relationships with local businesses and employers, as well as renewing an employment partnership with the City of Revere, Town of Winthrop and City of Chelsea in consideration of potential economic development and employment opportunities.

### **Service Delivery**

- CAPIC will provide job readiness trainings for clients and the local community. This will be accomplished through the utilization of FY’21 CAA Line Item funds. These trainings will be coordinated with other local service providers and provided in English and Spanish.
- The Chelsea/Revere Family & Community Network Program will provide adult education activities, literacy activities, and leadership and advocacy activities and training. These activities/trainings are designed to help parents achieve academic goals and develop specific job skills. These activities will be provided in both English and Spanish.
- CAPIC’s IRS VITA Program will provide basic financial literacy knowledge, money management skills, and extensive budgetary and financial training for clients will be offered to clients who participate in these programs. The delivery of financial literacy education through this program will remove a major barrier to financial stability and daily fiscal struggles for clients.

- Over the next two years CAPIC will work to identify viable partnerships with technology firms/private business to offer employment-related training/certificate programs to residents. CAPIC will also work to create one-time job opportunities for residents in need of immediate cash assistance through CAPIC's programs and the maintenance of Agency properties.
- CAPIC will partner with BEST HT to offer training and opportunity to residents who are in the hospitality industry.
- CAPIC will continue to provide quality child care for employed parents or parents who are enrolled in training through the following programs: After School Program, Child Development Center, Summer Camp, and Head Start. These programs allow parents/guardians to maintain full year employment, and or seek employment and training to gain employment, confident that their child is receiving structured care and direction from a team of dedicated staff.
- American Training/LARE will continue to host DESE Adult Basic Education classes two times per week at CAPIC's Irene O'Connell Center in Revere. The Center is staffed by an experienced assessment counselor, who has an established working relationship with the LARE Training Center and local employers. CAPIC will continue to partner with LARE Training to provide necessary employment related services and resources to local residents.
- CAPIC will distribute two scholarship awards annually. Scholarship awards are presented to one Chelsea resident and one Revere resident. Nominees must have some recent connection with CAPIC, reside in Chelsea or Revere, and be pursuing education/training beyond high school.
- SUDS Stipends – job placement –
- The Head Start Program will provide On the Job Training for Head Start parents, assigning them to volunteer throughout classrooms and other activities; promoting job ready skills and positive work ethic.
- CAPIC will interview and assess job training needs of DTA referred individuals interested in Community Service work (program was able to run during the past year due to COVID-19 protocols). Once assessed, individuals will receive on-going training (as needed) and be assigned to appropriate work sites. This will be coordinated by the Director of Human Resources.

## **NATIONAL PERFORMANCE INDICATORS**

### **GOAL 1: Low-income people become more self-sufficient**

*Child Development Center, DTA Community Service, Head Start on the Job Training, Workforce Development-related programs*

### **GOAL 2: The condition in which low-income people live are improved**

*After School Program, Chelsea/Revere Family Network, Head Start Program, & Summer Camp Program*

### **GOAL 3: Low-income people own a stake in their community**

*Responsible Payee Program*

### **GOAL 4: Partnerships among supporters and providers of service to low-income people are achieved**

*Crisis Intervention Program, Emergency Services/Disaster Relief, HEARTWAP, LIHEAP, all housing-related work (rental/mortgage assistance), Mobile Outreach Program, SUDS Program, Utility Programs, & Weatherization*

**GOAL 5: Agencies increase their capacity to achieve results**

*Head Start Health Services*

The following programs fall under “Services Supporting Multiple Domains”: Clothing Distribution, Coats for Kids, Self-Sufficiency, and Transportation (for early education programs). CAPIC’s Community Action Plan outlines activities for each program year under each of the aforementioned National Performance Indicators and specific domains as appropriate.

**STRATEGIC THREE-YEAR GOALS – FUNDING STRATEGIES**

CAPIC receives funding from state, federal, and local entities, as well as from private foundations, state and federal grants, and donations via the Agency’s web-site. This year specifically, CAPIC established a COVID-19 relief fund to help support the increase in need for direct services for those impacted by the pandemic. CAPIC leverages funds to diversify funding and increase revenues. This has historically been accomplished by utilizing Community Services Block Grant (CSBG) dollars to leverage both private and public resources. CSBG provides both direct and indirect funding to multiple service delivery systems within CAPIC. CSBG funding is approximately 2% of CAPIC’s overall budget. However, CAPIC utilizes this funding to support administrative work across all programs. This enables the agency to support administrative costs associated with managing numerous programs, while supporting efforts to explore new funding opportunities to grow and improve the delivery of services.

Specifically, CSBG funds are used to support administrative management and the fiscal oversight of the Agency. More importantly, CSBG funds allow CAPIC to pursue funding to support and maintain critical services and resources for at-risk low-income clients. CAPIC utilizes CSBG funding to supplement its after school and child development center programs; Head Start program; energy conservation programs; emergency assistance; fuel assistance; crisis intervention/domestic violence advocacy; public safety initiatives; summer camp programming, SUDS and mobile outreach programs, workforce development, Benefit Enrollment Coordination System (BECS), VITA free tax preparation, after school programming, the Responsible Payee Program, and the Chelsea/Revere Family Network.

It is important to note that during the past year, CAPIC has received Coronavirus Aid, Relief, and Economic Security Act (CARES Act) funding; CSBG CARES Act funds (\$470,076.00 over two years) – CAPIC is utilizing this funding to provide emergency rental assistance and access to food to those impacted by the pandemic, cover personnel costs for an Emergency Assistance Program Caseworker, implement facility enhancements to address COVID-19-related health and safety measures, and IT support for remote work. Shifting all work to a remote capacity in a short period of time was a huge challenge for the Agency, however, we were able to continue to provide all services to clients during this time and utilized CSBG CARES Act funds to support these changes with no interruption of services/resources for those in need. CAPIC also received LIHEAP CARES Act funds (\$570,031) which support LIHEAP related activities.

Under the direction of CAPIC's new Director of Finance, CAPIC's FY'22 Agency-Wide Budget was presented to the Board of Directors and approved on June 23, 2021. The budget is approximately \$12 million dollars, and CAPIC anticipates the FY'23 Agency-Wide Budget to be in a similar range. CAPIC has a diverse revenue stream from public, private, and philanthropic sources. CAPIC's Director of Planning, Development, & Operations will continue to work with the Executive Director and Fiscal Director to explore the Agency's ability to grow non-federal funding through grants and corporate partners, as well as through private foundations. Additionally, the Executive Director will convene key partners to identify opportunities for joint grant applications. Over the past year, particularly in response to the pandemic, CAPIC has joined new collaborations and this has resulted in joint grant opportunities and new alternative funding for CAPIC. The Agency will continue to pursue such funding streams.

### **STRATEGIC THREE YEAR GOALS - LINKAGES**

As an agency, CAPIC is always looking for ways to diversify services and find creative ways to improve the lives of low-income individuals, families, and the communities we serve. CAPIC has spent much time over the years fostering and strengthening relationships in the communities that we serve to ensure that we are meeting the mission of the agency. CAPIC continues to establish new partnerships with governmental and social service providers, in particular antipoverty programs, to assure the effective delivery of services. These partnerships also serve as a way in which to expand upon resources that are available and accessible to those in need, while avoiding duplication of CSBG services.

During the past year, CAPIC has established new partnerships and collaborations, in particular with La Colaborativa, TND (Revere and Chelsea), Green Roots Chelsea, the United Way, Chelsea Eviction Task Force, the Chelsea Anti-Displacement Round Table, the Chelsea and Revere Pandemic Response Teams, and The Boston Foundation. CAPIC is working with these agencies/foundations to address the impacts of the pandemic. The COVID-19 pandemic has had a severe impact on CAPIC's service area; Chelsea and Revere are two of the hardest hit cities in the Commonwealth of Massachusetts and continue to see increases in positive cases. This has had devastating effects in both communities. Since mid-March, CAPIC has seen an alarming increase in calls for rent/mortgage assistance as well as food and basic necessities. These new partnerships and collaborations provide access to leverage other funds and work together to address and meet the needs of at-risk individuals and families.

CAPIC is also an active member of various local and regional groups, as well as statewide associations, such as: the Massachusetts Association for Community Action (MASSCAP), MASSCAP Communications Community of Practice, MASSCAP Planner's Group, MASSCAP Human Resources Group, Benefit Enrollment Coordination System (BECS) Working Group, the Massachusetts Energy Director's Association (MEDA), MASSCAP VITA Round Table, the Revere CARES Substance Abuse Coalition, the Revere DTA Advisory Board, Winnisimmet Regional Opioid Collaborative (WROC), Healthy Chelsea Coalition, CASA Divert (Chelsea Domestic Violence High Risk Team), Chelsea Domestic Violence Task Force, the Women's Encouraging Empowerment Advisory Board, the Chelsea Substance Use Disorders Leadership Team, Chelsea Hunger Network, Balance of State –Continuum of Care, the Chelsea Downtown Task Force, Chelsea Navigator Team (SUDS work), and the Latino SUDS Support Group

(founding member). Since 2016, CAPIC has been active member of the Chelsea HUB – a team of community & local government agencies who meet weekly to address specific situations re: clients facing elevated risk levels. The HUB Team develops immediate, coordinated, & integrated responses thru mobilization of resources and mitigate risk within 24-48 hours.

CAPIC is a part of numerous formal and informal community partnerships. As an agency, CAPIC continues to look for ways to diversify services and find creative ways to help eliminate poverty. The following agencies, providers, and businesses have worked with CAPIC to provide additional services/resources and address the on-going needs of low-income individuals and families.

- American Red Cross
- Anton’s Cleaners Coats for Kids
- Boston Foundation
- Boston University
- Cambridge Health Alliance
- Chelsea Chamber of Commerce
- Chelsea Police Department
- Chelsea Public Library
- Chelsea Public Schools
- Chelsea Senior Center
- Chelsea Soldier’s Home
- City of Chelsea Planning & Development Office
- City of Revere Planning & Development Office
- Cradles to Crayons
- Eastern Bank (Chelsea)
- HarborCOV (crisis intervention/domestic violence support)
- Kids Clothes Club
- Marine Toys for Tots
- Masis Staffing Solutions
- Massport
- MGH Chelsea
- MGH Chelsea Help Steps Initiative
- MGH Haven (crisis intervention/domestic violence support)
- MGH Healthy Beginnings
- MGH Health Care Center for Community Research
- MGH Revere
- Millions of Muscles
- Mystic Valley Elder Services
- New Life Christian Center
- North Suffolk Mental Health Association
- People’s AME Church
- Raising a Reader (early education programs)
- Regis College Occupational Therapy Program (early education programs)
- Revere Chamber of Commerce
- Revere Police Department and Revere Police Activities League (PAL)

- Revere Public Library
- Revere Public Schools
- Robert A. DeLeo Senior Center – Winthrop
- Roca, Inc.
- Revere Rossetti-Cowan Senior Center
- The Salvation Army
- Saint Luke’s/San Lucas Episcopal Church
- Social Security Administration
- Suffolk County District Attorney’s Office
- The Greater Boston Food Bank
- Those Who Can For Those in Need
- WIC Program
- Winthrop Police Department
- Winthrop Public Schools



## SPECIFIC OBJECTIVES

---

CAPIC is committed to providing comprehensive support services and resources to low-income individuals and families who need to improve their quality of life. In turn, CAPIC will work diligently to achieve our stated “Strategic Three-Year Goals”. In order to meet these goals CAPIC will partner and collaborate with other organizations and local government in order to leverage resources and support for low-income individuals and families in need. CAPIC will work to expand and improve the delivery of services so as to assure the availability and accessibility of critical resources to low-income individuals and families while at the same time avoid the duplication of such services within CAPIC’s service area.

CAPIC will also continue to work closely with our statewide community action agencies. CAPIC’s Executive Director is an active participant in the MASSCAP Executive Director’s group, CAPIC’s Director of Planning, Development, & Operations is an active member of the MASSCAP Planner’s Community of Practice and the MASSCAP Communications & Development Community of Practice, CAPIC’s Director of Human Resources is an active member of the MASSCAP Human Resources Community of Practice, and CAPIC’s Fiscal Director is an active member of the MASSCAP Finance Community of Practice. These groups provide CAPIC with on-going communication with other local community action agencies, valuable information from local, state, and federal levels, and regional approaches to advocacy and resources.

### **Year One – FY21 CAP**

### **Year Two- FY’22 CAP**

### **Year Three – FY’23 CAP**

Each Community Action Plan (CAP) will lay out the steps that CAPIC will take to achieve our strategic three year goals and objectives. There is a direct link between the Community Needs Assessment, Strategic Plan, and the Community Action Plan. All of these documents are

elements of the strategic process and are used to measure and manage short and long-term organizational growth.

CAPIC will work to meet goals, identify and secure funding, implement new programs and resources, track program successes and weaknesses, and evaluate programs and services over the next two years. This plan demonstrates four areas of need: housing, ability to pay heating/utility bills, access to food, and jobs (includes job training/education & employment supports). During the next two years, CAPIC will work to address all of these needs at the individual/family level, two of these needs at the community level, and one of these needs at the agency level.

### **Goals for Top Needs Identified**

#### **NEED 1 – Affordable housing opportunities throughout the local area (Individual and Family Level Goal Community Level Goal)**

CAPIC will work to adapt to the changing policies that govern funding for housing and homelessness services and create a prevention model that identifies at-risk tenants and homeowners. CAPIC will also meet the growing housing/eviction crisis through the expansion of the current Emergency Housing Services Program and partnerships with local municipalities, and service providers.

#### **OBJECTIVES**

- prevent the eviction and displacement of low-income individuals and families; provide rental and mortgage assistance (as funds allow) to 300 at-risk clients annually
- support housing stability by pairing rental assistance services with housing search services, food and income supports, employment supports, and comprehensive case management.

#### **NEED 2 - Long term self-sufficiency relies on income, and management of budget to best utilize financial resources. (Individual or Family Level Goal)**

#### **OBJECTIVES:**

- CAPIC will increase the financial assets and financial skills of low-income households through energy conservation measures; HEARTWAP & Utility Programs
- CAPIC will assist 2,500 (annually) low-income households with heating their home during the winter months, in turn, promoting good health for the household; LIHEAP Program

#### **NEED 3 – Increase awareness and resources regarding hunger and food insecurity. (Individual or Family Level Goal and Community Level Goal)**

CAPIC is dedicated to encouraging better nutrition through advocacy and education; conducting outreach and more effective coordination of resources so that low-income, at-risk individuals and families can have access to food and basic necessities.

**OBJECTIVES:**

- increase food security through partnerships with local municipalities and service providers to leverage funding to increase the Agency’s capacity to decrease food insecurity
- provide 300-400 (annually – as funds allow) at-risk individuals/families in crisis mode with a gift card to purchase food and basic necessities

**NEED 4- Advance economic opportunities for low-income residents. (Individual and Family Level Goal and Agency Level Goal)**

CAPIC will Maintain and expand upon its foundation of programming that serves to advance economic opportunity for residents. This will include the fostering of new relationships with local businesses and employers, as well as renewing an employment partnership with the City of Revere, Town of Winthrop and City of Chelsea in consideration of potential economic development and employment opportunities for local residents.

**OBJECTIVE:**

- increase employment/job readiness-related skills for residents to increase their ability to obtain living-wage jobs through offering trainings/workshops for local residents



**PLAN MONITORING & REPORTING**

---

CAPIC’s Executive Director, Director of Planning, Development, and Operations, in conjunction with CAPIC’s Board of Directors will work to implement the FY’21-’23 Community Assessment Report and Strategic Plan (CARPS) and will monitor the progress on a monthly basis. The Director of Planning, Development, and Operations will prepare written programmatic and agency-wide operations reports and present them (verbally and written) at monthly board meetings. CSBG Semi-Annual Community Action Plan reports, CSBG Annual Reports, and other CSBG-related information as it pertains to the CARSP will also be shared with the Board of Directors on a regular basis. This will include the CSBG Organizational Standards reporting. The Director of Planning, Development, & Operations will provide periodic progress reports at Management Team Meetings as well. This will help to promote accountability across all levels of the organization

The Director of Planning, Development, & Operations will continue to maintain responsibility for the preparation, submission, and presentation of these reports and plans and will continue to work closely with all Program Directors to track and evaluate program progress.

All strategic goals will be evaluated and analyzed (semi-annual basis – 9/21 and 3/22) by Program Directors and the Executive Director; this will be led by the Director of Planning, Development, & Operations. Program progress reports are also provided during Management Team Meetings (monthly), in which all Program Directors participate, including the Fiscal and Human Resources Directors. These meetings are facilitated by the Executive Director. CAPIC’s

ROMA Certified contractor will also provide guidance and oversight for the monitoring and evaluation of the three-year plan.

CAPIC's CSBG Community Action Plan includes all programming as administered by the Agency. This document will be assessed on a semi-annual basis (9/21 & 3/22) by reviewing the progress made towards the plan's goals, and discussions with program directors regarding outcomes; met and unmet. CAPIC's Planning & Evaluation Committee, facilitated by the Director of Planning, Development, & Operations will also play a key role in the monitoring of the FY'21-'23 CARSP.

The aforementioned reporting/activities are in accordance with CSBG Organizational Standards 9.2 and 9.3.

- **9.2:** The agency has a system or systems in place to track family, agency, and/or community outcomes.
- **9.3:** The agency has presented to the tripartite board/advisory body for review or action, at least within the past 12 months, an analysis of the agency's outcomes and any operational or strategic program adjustments and improvements identified as necessary.

### **Role of Board Members**

It is important to note that board members fully participate in the development, planning, implementation, and evaluation of the programs administered by CAPIC to serve the low-income individuals and families within the communities that we serve. They also play a key role in the monitoring of the FY'21-'23 Community Assessment Report and Strategic Plan (CARPS). All members are presented with a monthly report on programming (included on monthly Board meeting agendas) and the CARPS by Kerry Wolfgang, Director of Planning, Development, & Operations, as well as a detailed programming report by Richelle Cromwell, Executive Director as part of her monthly Executive Director's Report.

### **KEY DATES:**

- Implementation Update of FY'21-'23 CARSP – 10/21 – 12/21 by K. Wolfgang to full Board
- Semi Annual CSBG Community Action Plan (CAP) report presentations -11/21, 5/22, 11/22, & 5/23 by K. Wolfgang \*Members review reports before presentations for full review.
- Finance/Funding Strategy Reports and Updates – monthly by K. Gallagher, Director of Finance & Tammy Glivinski, Fiscal Contractor to full Board, with Treasurer's Report by Louis Ciarlone, Board Treasurer