

**Monadnock Regional
Coordinating Council
for Community
Transportation**

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Date: September 3, 2026

To: NH State Coordinating Council for Community Transportation

From: Monadnock Regional Coordinating Council for Community Transportation (MRCC)

RE: Community Transportation Region Realignment

On August 3rd, SCC members and RCC chairs were made aware that SCC leadership is planning on holding a discussion at September's SCC meeting regarding a proposal to realign the current (8) RCC boundaries to be in line with the (10) county boundaries. In preparation for this discussion and subsequent vote in November, the Monadnock Regional Coordinating Council for Community Transportation (MRCC) would like to share the rationale that leads the group to oppose the change.

Region 5 spans over Cheshire County and ten communities in Hillsborough County. This region is commonly referred to as the Monadnock Region. The region is proud of its unified identity that incorporates Keene- and Peterborough-centric services.

The General Court established the Regional Coordination Councils for Community Transportation in 2010 and the State Coordinating Council was given authority to define the regions. Ten regions were established and in March of 2012, Eastern Monadnock Regional Coordinating Council (Region 6) and the Cheshire County Region Coordinating Council (Region 5), petitioned to merge.

In a letter dated 2/2012, the groups said *"Discussion about merging Regions 5 and 6 among each Region's RCC stakeholders has been recurrent since the formation of Region 5 in March of 2010. Initially, stakeholders from Region 6 were concerned that the unique needs of the Eastern Monadnock Region would be undermined by the needs of communities nearer to the City of Keene, where more services are available, including the Region's only public transit service, the Keene City Express. However, after a year of operating independently it has become increasingly apparent that the regions share similar if not identical transportation needs, services, providers, and stakeholders. Since March 2011, the two RCCs have held joint meetings, share executive officers, and have developed a draft set of bylaws for a potential 'Monadnock RCC.'"*

The reasoning shared at the time is applicable today. Organizations housed in Peterborough and participating in the MRCC indicate that they feel close ties to Keene and Cheshire County. Member Erika Alusic-Bingham from Community Action Partners Hillsborough and Rockingham Counties states 'Being housed in Peterborough, we are more in line with Keene and Peterborough, which are connected. When you say 'Monadnock Region' people know what that means.'

The Monadnock region shares the Monadnock Collaborative Regional Chamber of Commerce. It shares the Monadnock United Way. It shares the Monadnock Region Aging and Disability Resource Center and all developmental and mental health services in Department of Health and Human Services (DHHS) Region 5 span across both Keene and Peterborough, as does the footprint of Southwest Region Planning Commission (SWRPC). These organizations have longstanding relationships with MRCC that would be diluted if it were necessary for said organizations to work with more than one RCC. Their own funding is distributed according to their respective boundaries and splitting that support greatly complicates their work and the work of the RCC.

The region also shares hospital catchment areas. MRCC participant Chris Weeks from Monadnock Community Hospital reminds us that Monadnock Community Hospital sees visitors from Keene as frequently as Cheshire Medical Center sees patients from Peterborough. Most Medicare patients in Keene must go to Peterborough for care because Dartmouth Hitchcock does not accept Humana health plans. Many patients schedule testing in Peterborough because it can get completed more quickly there. Patients in Peterborough schedule specialist visits that are not

offered in town. People in the Cheshire County towns of Rindge, Jaffrey, and Dublin almost always gravitate toward Peterborough. The two 'watersheds' have undeniable overlap.

Cheshire County's boundaries were established in 1769 based on colonial settlement patterns and natural geographic features that are no longer relevant. In the view of the Council, County lines are not as meaningful as they once were and using them to 'simplify' the general public's understanding of RCC boundaries is misguided. Regional boundaries would be truly simplified if clients could hear 'if you're served by human service agency x, you are in our region'. If the goal is to simplify, MRCC urges SCC to consider DHHS or Regional Planning Commission (RPC) boundaries, both of which are relevant to our work. The DHHS boundaries will no doubt come into play as GO-NORTH funding is distributed across systems.

Furthermore, in the spirit of coordination, the general public should not need to know RCC boundaries. It is the work of the RCCs to ensure that to the greatest extent possible, people can move seamlessly from place to place without realizing they have crossed a boundary.

The MRCC would like to call out its specific concern for its Peterborough members, should this realignment take place. Member Erica Alusic-Bingham states "towns should be located in a region that will pay attention to them and make sure they are getting what they need." If Peterborough were placed in the same RCC as Manchester and Nashua, there is fear that they would be in competition for resources to a greater extent than they already are. Member Allan Gillis, Executive Director of Community Volunteer Transportation Company (CVTC) says "We should not be putting all providers in a competitive environment but a supportive environment of each other." Chris Weeks states "We at Monadnock Community Hospital are trying to pull resources into Peterborough and finding it difficult. We are a desert and are definitely not getting resources diverted from Manchester or Nashua."

The group also shares concern about the fate and complexity of its ongoing projects. One of the projects is called CARS (derived from Crucial Appointment Ride Service). The premise of CARS is to offer guaranteed rides to patients attending specific life sustaining appointment types like dialysis, cancer care, and rehabilitation, when the region's volunteer driver programs (primarily CVTC) have an overflow. CVTC Executive Director Allan Gillis says, "this will create more red tape to make CARS work smoothly."

Perhaps most importantly, MRCC is resistant to disrupting the decade-old relationships that have been built by group participants and its Mobility Manager with providers, human services agencies, social services, employers, and other community organizations. A change as proposed would put one of the Council's officers and the region's largest Volunteer Driver program out of area. "This could muddy the water if CVTC is not looked at as a Monadnock Region Provider (and converts) to a Hillsborough County based provider." According to Executive Director Allan Gillis.

Lastly, it is worth mentioning that Cheshire County is MRCC's Lead Agency. If the goal is "Potential for Stronger County Engagement", we are already in a good place.

Thank you for your time and consideration as you move forward with this important decision.

Charlie Pratt, Acting Chair
on behalf of the MRCC