

2024 - 2025

BETHESDA HOUSE OF SCHENECTADY ANNUAL REPORT



BETHESDA HOUSE

ANNUAL REPORT

2024 - 2025

Bethesda House is an interfaith ministry to the homeless, disabled, and economically disadvantaged citizens of Schenectady County. We strive to build a just, hospitable, and inclusive community one person at a time, by affirming the dignity and addressing the needs of each guest that enters this **House of Mercy**.

WITH GRATITUDE

At Bethesda House, hope is never the work of one person or one agency alone—it is a shared effort, woven together by the compassion and generosity of many.

We extend our heartfelt thanks to our Board of Directors, staff, and volunteers whose dedication makes this work possible every single day. Your commitment ensures that every number in this report represents not just a service delivered, but a life touched.

We are deeply grateful to the interfaith community, donors, partner organizations, and countless friends who give their time, resources, and talents. Your generosity fills our pantry shelves, keeps our clothing room open, strengthens our outreach efforts, and sustains our shelters and residences.

Bethesda House was founded on the belief that everyone deserves hope and help. That belief has carried us forward, upheld by your continued support and faith in our mission. Because of you, hope is not just an idea—it is an action, alive in our community.

Together, we are building a future where dignity, compassion, and stability are within reach for all.

A LETTER FROM OUR EXECUTIVE DIRECTOR

Dear Friends,

Every day at Bethesda House, we see what it means to put hope into action. Hope is not an idea—it is alive in the daily work of our staff, volunteers, and community partners, and in the courage of each person who walks through our doors.

This past year, Bethesda House provided more than 43,000 points of connection—moments when lives were touched, burdens were lifted, and futures began to shift. In our first full year with Cara House, our newest residential program, we expanded our services and our care for Schenectady County. By expanding our outreach, we continue to bring food, clothing, and medical care to some of the most vulnerable members of our community. And together—with you—we built a stronger, more compassionate community.

The challenges are still great. Homelessness in our region continues to affect families, veterans, and individuals struggling with mental health, trauma, and poverty. Yet we know the answer is not despair, but action. Guided by our mission, we remain committed to meeting each person with dignity, addressing immediate needs, and walking alongside them toward stability and healing.

As you read this report, I invite you to see not just the numbers, but the stories of transformation behind them. With your continued partnership, we can ensure that hope is not just offered, but experienced—one meal, one bed, one life at a time.



KIMARIE SHEPPARD
EXECUTIVE DIRECTOR



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BETHESDA HOUSE AT A GLANCE



CONSUMERS SERVED

While the statistics capture scope, they cannot capture the full impact. Every number represents thousands of hours of case management, clinical services, emergency response, life skills training, and residential care—all of which bring dignity and stability to our guests.

Guests Served	Total 2024 - 2025
Number of Contacts	69,760
Unduplicated Guests Receiving Services	7,674
First Time Guests	2,000
Homeless Guests	4,120

PROGRAM DEPARTMENT

AT A GLANCE

Program Department Services The numbers reflect cumulative totals of services provided.	Total 2024 - 2025
*Consumer Choice Food Pantry – Meals Served	22,100
P.G. Wright Food Pantry – Meals Served	14,500
Clothing Room	1,500
Showers	13,360
Telephone	600
Hygiene Kits	420
**Mailboxes	45,910
Daily Meal	48,640
Laundry	5,200
Lockers	7,023

*CoC is community-wide, includes 13 area providers.

**Mailbox calculation: 85 (3+82) mailboxes, 3 general, 95 individual; 95 individuals use the general mailboxes; 82 individuals have their own mailbox, available to users 249 days a year; 96% utilization rate

CASE MANAGEMENT AT A GLANCE

Case Management Services The numbers reflect cumulative totals of scheduled appointments.	Total 2024 - 2025
Housing, Permanent and Emergency	9,404
Representative Payee	3,650
Case Management Services	5,200
Emergency Services	4,925
Referred for Income	700
Secured Income	180
Social Work avg monthly caseload / contacts /month	85 / 6,185
Outreach Case Management: individuals / contacts	500 / 4,115

Case Management and Program staff referred 230 consumers to area providers to best meet the needs of the individuals.

Area providers referred 2,900 individuals to Bethesda House for: Case Management, all programs – 1,120, Emergency Services – 1,200, Social Work and Mental Health stabilization- 960, and 60 Residential Services

RESIDENTIAL AT A GLANCE

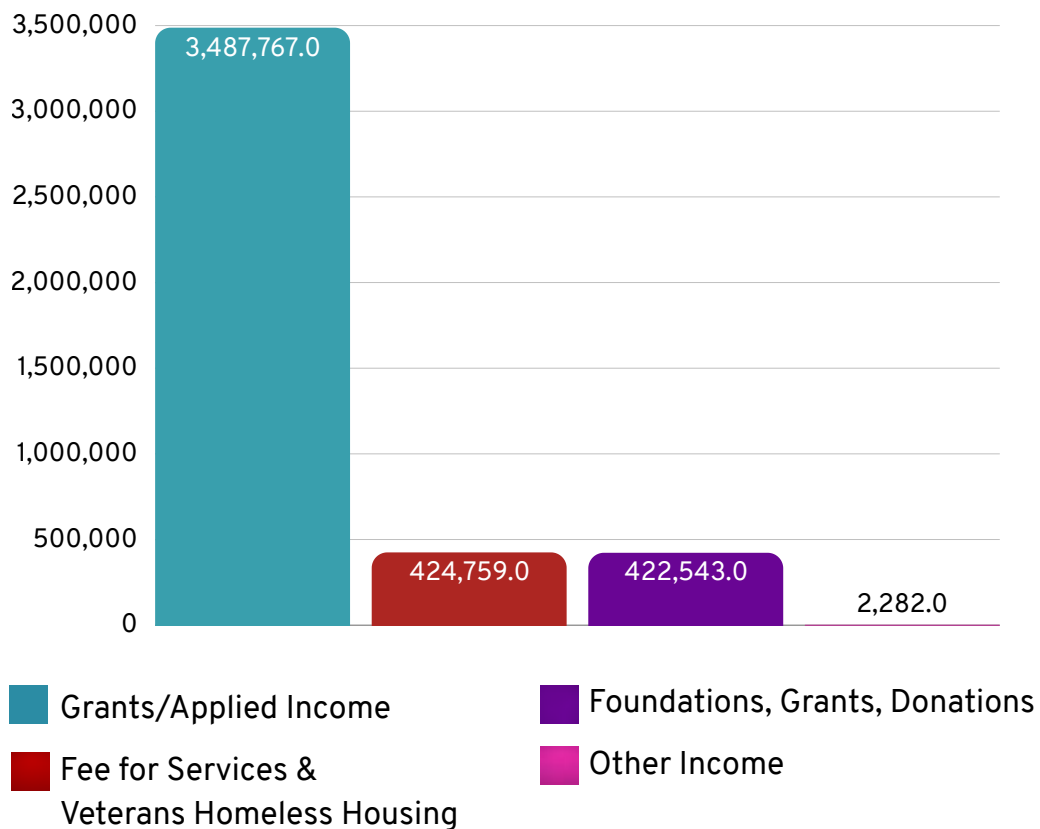
Residential Services	Total Served
Lighthouse: Supportive Housing & Veterans	13
Liberty Apartments	18
Beacon Scattered Sites	9
Cara House	40

Emergency Overnight Shelter	Total
Program Shelter participants (unduplicated)	2,920
Total utilization of shelter beds	100%
Total beds approved for shelter	16

REVENUE

Revenue	Amount
Grants/Applied Income	3,487,767
Fee for Services & Veterans Homeless Housing	424,759
Foundations, Grants, Donations	422,543
Other Income	2,282
Total Income	4,337,351

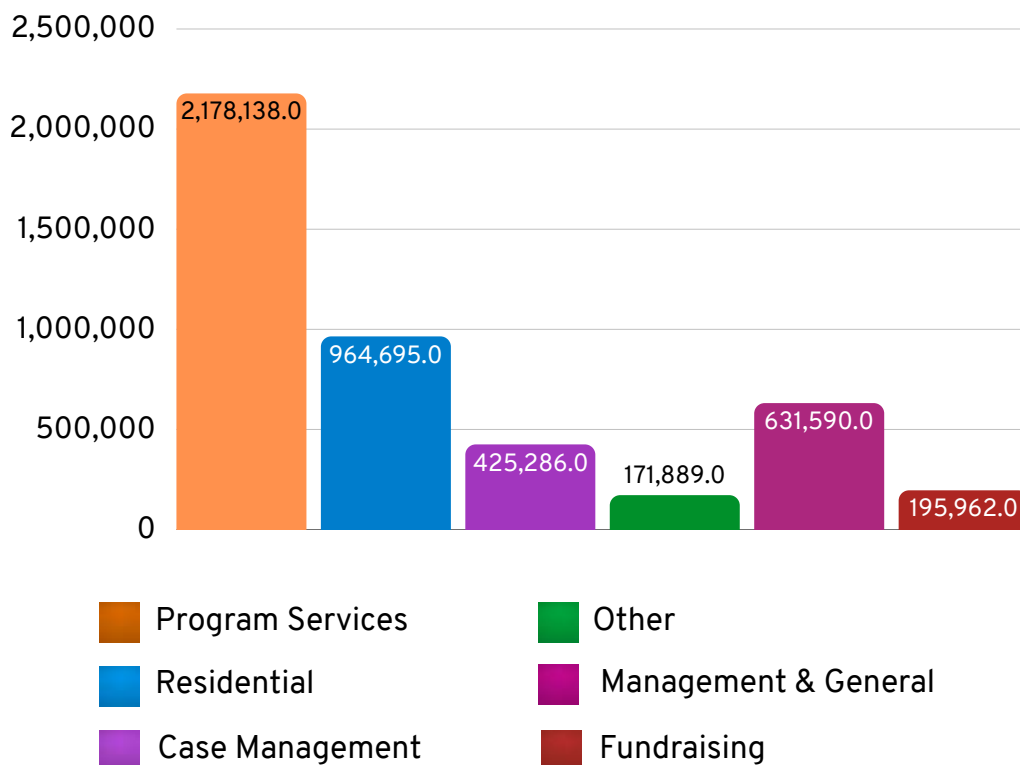
Revenue for Operations



EXPENSES

Expense	Amount
Program Services	2,178,138
Residential	964,695
Case Management	425,286
Other	171,889
Management & General	631,590
Fundraising	195,962
Total Expense	4,567,560

Expenses for Operations



INTRODUCTION

HOPE IN ACTION

The staff and administration of Bethesda House of Schenectady, Inc. are pleased to share with you this Annual Report for fiscal year July 1, 2024 through June 30, 2025. Each page reflects not only the services we provide, but also the spirit of hope in action—the daily commitment of our staff, our board, and our community to stand with those experiencing homelessness, poverty, and hardship.

Accountability remains central to who we are. To the consumers who trust us, and to the community that sustains us, we owe transparency, integrity, and a willingness to learn and grow. Guided by the values of the interfaith community that gave life to Bethesda House, we continue to see our agency as a living body—responsive, resilient, and always evolving. This year’s report reflects both the challenges we faced and the lessons we carry forward, better preparing us to meet tomorrow’s needs.

With the rate of homelessness tripling in New York State in the last three years, Bethesda House remains an essential agency, providing in-house, face-to-face services that adapt as the needs of our community change.





In response to growing need, our services have expanded dramatically in the last year. This annual report marks the first full-year of Cara House being open to our community. After three application submissions to New York State Office of Temporary and Disability Assistance, Bethesda House with community support broke ground in April 2022. The long road from construction to completion began in June 2022 and ended October 2023. With its grand opening in November 2023, Cara House created 26 additional permanent supportive housing apartments and 16 emergency shelter beds for the chronically homeless in Schenectady. Cara House also facilitates re-entry rehabilitation and has a fully equipped medical care office including medical respite beds.

In partnership with the Heathy Alliance, we began the process of the 1115 waiver program which aims to improve Medicaid members' health by building networks for health-related social needs.

Our outreach staff continued to meet people where they are—whether in encampments, on the streets, or at the margins—bringing food, clothing, and connections to medical and mental health care. As a member of the Schenectady HUB, we partnered with local agencies, coordinating action plans to ensure that no one in crisis was left unseen or unsupported.

Because of the comprehensive care Bethesda House provides, we continue to receive referrals for individuals who require higher levels of oversight, consistent engagement with medical and mental health treatment, and wrap-around support. Our commitment is to meet these needs fully, while maintaining safety and dignity for every guest who enters our doors.

As you read this report, you will see the hard data that demonstrates our commitment to our community. Yet behind every number is a human story. Our true measure of success is not found in statistics, but in the voices of those who tell us they feel more hopeful about the future, more prepared to face life's daily adversity, and more capable of caring for themselves and their families. That is what drives our work and inspires us to keep putting hope into action, one life at a time.



PROGRAMS & SERVICES

This Annual Program Report covers eight service dimensions of the agency: the Program Department (Day Drop-in Center and Essential Services), Overnight Emergency Shelter, Code Blue Shelter, Coordinated Entry, Case Management, Street Outreach, Clinical Services (Social Work, Medical Care, and Psychiatric Nurse Practitioner), and Residential Services.

PROGRAM DEPARTMENT

The Program Department offers a wide range of services to meet the needs of Schenectady's homeless and working poor populations. The goal of the Drop-in Center and Essential Services programs is to provide crisis management, harm reduction, and stabilization for individuals who are seeking support and guidance while facing overwhelming life challenges.

These services are supported by multiple funding sources, including the City of Schenectady, the NYS Office of Temporary Disability Assistance (OTDA) Solutions to End Homelessness Program (STEHP), the Regional Food Bank, Concern for the Hungry, private foundations, and individual donors.

OVERNIGHT EMERGENCY AND CODE BLUE SHELTERS

Bethesda House's Emergency Shelter operations are located at Cara House, open 365 days a year from 4:30 pm to 8:00 am. Cara House offers 16 shelter beds, including 6 medical respite beds. Our Code Blue Shelter is open from November 1 to April 30 each year. Our shelters provide not only safe shelter but also case management and higher-level support from Social Workers, Outreach staff, and Medical Care professionals.

The Overnight Emergency Shelter is funded by the Schenectady County Department of Social Services. The Code Blue Shelter is approved and funded by both New York State and Schenectady County DSS.

COORDINATED ENTRY

The Coordinated Entry program is designed to support the most vulnerable homeless families and individuals, guiding them from their first point of contact to stable housing. Coordinated Entry works to identify and track those needing this support from their point of entry into the Continuum of Care tracking and wait-list system to the moment when they secure housing. Bethesda House serves as the lead agency, partnering with the Legal Aid Society of Northeastern New York and CARES of NY. This program is funded by the U.S. Department of Housing and Urban Development (HUD).

CASE MANAGEMENT

Bethesda House's Case Management team provides critical support to individuals experiencing or at risk of homelessness. The goal is to address immediate critical needs and help people move beyond the cycle of homelessness into long-term stability. Services include intake, crisis management, housing navigation, and financial case management.

Funding is provided by the City of Schenectady, Schenectady County DSS, and private donors.

STREET OUTREACH

Street Outreach services are designed to reach people experiencing homelessness in unsheltered locations by connecting them to emergency shelter, housing, health and mental health services, and transportation. The program emphasizes engagement, crisis response, and building trust with those most at risk.

Funding comes from NYS OTDA's STEHP program, private foundations, and donors.

CLINICAL SERVICES

Our Clinical Department offers Social Work, Medical Care, and mental health services to guests and residents. Staff provide evaluations, in-house counseling, and referrals to area providers. By offering walk-in counseling without barriers, the program helps reduce the use of Emergency Service Departments.

Bethesda House also hosts a robust student internship program. Interns include graduate students from the University at Albany, Fordham University, and Simmons College, along with undergraduate students from Siena College and the Ellis Medical Center Nursing Program. Under the supervision of licensed staff, interns gain hands-on experience working with our community's homeless and impoverished citizens who are working through critical issues including substance use, mental illness (which typically involves self-medicating with illegal drugs), those experiencing trauma, and those struggling with other chronic crisis driven issues.

The Clinical and Social Work programs are supported by multiple funding partners, including NYS Office of Mental Health (via Schenectady County Office of Community Services), Healthy Alliance and NYS OTDA's Empire State Supportive Housing Initiative (ESSHI).

RESIDENTIAL SERVICES

Since adopting the “Housing First” model in 1998, Bethesda House has prioritized stable housing as the first step toward recovery and independence. Bethesda House recognizes that housing is not the only barrier that the chronically homeless face in accessing stability which is why we also provide supportive treatment services in the areas of mental and physical health, substance abuse, education, and employment. The Agency opened its first residential program in 2002, followed by additional residential programs in 2010, 2017 and 2023. Across all our residential programs and services, we maintain the mission of our “Housing First” model. Our staff work diligently with residents to help provide a safe, comfortable, and welcoming home for everyone to enjoy and find solace.

Our four residential programs include:

- **Lighthouse** – 7 supportive housing beds and 3 transitional beds for veterans
- **Liberty Apartments** – 16 supportive housing beds
- **The Beacon** – 8 scattered-site apartments
- **Cara House** – 26 supportive housing beds

All residential programs provide permanent supportive housing for chronically homeless adults with severe mental illness, disabilities, or recent incarceration histories. We provide advocacy, housing, and a safety net for our residents. Staff address the needs of the whole person focusing on empowerment, personal growth, skill building, and discovery of an individual’s strengths.

The Lighthouse program’s transitional beds for veterans are operated in partnership with the Albany Veterans Administration, offering a safe, stable environment while veterans begin treatment and work toward financial independence.

Residential Services are supported by HUD, OTDA’s NYS Supportive Housing Program (NYSSHP), the Veterans Administration, OTDA’s ESSHI initiative, and private donors.

COMMUNITY PARTNERSHIPS AND LEADERSHIP

Bethesda House ministers to a vulnerable, diverse, and challenging population. Our success depends on strong partnerships and our incredible network of generous volunteers. Our staff participate in collaborative groups and regularly attend meetings with:

- Housing and Supportive Services Network
- Homeless Veterans
- Single Point of Access Committee (SPOA)
- Schenectady Homeless Services Planning Board (HSPB)
- HSPB – Data Committee

- Eviction Task Force
- Schenectady Coalition for a Healthy Community
- Coordinated Entry
- Mental Health Sub-Committee
- Concerned for the Hungry
- Schenectady County Re-entry Task Force
- Adults at Risk – Schenectady County
- The Food Pantries of the Capital District

Through these partnerships and formal linkage agreements, Bethesda House avoids duplication of services and ensures that our community's needs are met effectively. Bethesda House's Administration is fully invested in the freedom to be creative, pioneer useful solutions, and implement positive changes within the agency. We embrace working collaboratively, knowing this practice is in the best interest of the population we serve.

COMMITMENT TO SAFETY AND GRATITUDE

Worker safety remains a top priority across all departments. Agency leadership is committed to innovation, collaboration, and creativity in addressing the ever-changing needs of our community.

We extend our deepest gratitude to the Bethesda House Board of Directors for their unwavering support and dedication. Together, we are partners in ending homelessness and bringing hope into the lives of Schenectady County's most vulnerable population.





PROGRAM DEPARTMENT PURPOSE

Our goal is to provide a safe, supportive environment for homeless, vulnerable, and at-risk individuals to have access to a wide variety of services under one roof. The Program Department's Drop-in Center is the point of entry to all Agency services, which range from basic living needs to intensive case management.

SERVICES OFFERED

Drop-In Center – Everyone in need of services is welcome to sit and be in a secure, welcoming environment. It is a place that provides non-judgemental social support, and a sense of belonging. It is known to the community as a safe place and is often the only connection that our population has to services and trusting relationships. Hours of operation are Monday through Friday; 9:00 am – 11:30 am & 1:00 pm – 4:30 pm. All services are free.

Food Programs – the Agency has a nutrient dense, nutritional platform in all of the food programs offered. Healthy, low sugar, and low sodium foods are offered at the daily meal and at our two food pantries.

SNAP benefits are discussed, as well as the importance of budgeting food resources. Other community services and resources are reviewed and explained which also help to stretch a SNAP budget.

Daily Community Meal (Soup Kitchen) – healthy, nutritional meals are prepared by our experienced and talented Chef, and his team. The daily meal is served Monday – Friday from 1:30 pm – 3:00 pm. Staff prepare hypoallergenic alternatives daily so that allergy-based needs can be met in the moment.

Client Choice Food Pantry – The main food pantry at 834 State Street and our satellite food pantry located at the Northside Village apartment complex in the 12308 zip code, offer a variety of food items. The Regional Food Bank’s annual award and donated dollars, specifically allocated to the food program, support food item purchases. In the past two years, there has been an increase in referrals and requests for food bag deliveries.

Other Pantry Partners – Concerned for the Hungry, Food Pantries of the Capital District, and the Regional Food Bank have food drives and food donations to supplement both our food pantries. Day Program guests are offered support from Licensed Clinical and Masters Social Workers, and our Medical Care staff-RN who are available to explain the direct connection between nutrition and health. Healthy food choices are suggested along with education on the impact of nutrition on health. We have found that this approach is met with enthusiasm.

Basic Living Needs – Laundry, showers, mailbox (use of Agency address), telephone, and fax services are available daily. Program staff are available to assist in these services as needed. The availability of phones has allowed numerous people the opportunity to arrange for job interviews, and follow up contacts with critical outside institutions such as the Social Security Administration and Schenectady County Department of Social Services for benefits and monthly cash assistance.

Clothing Room – Donated clean, gently used or new clothing is provided in our easy access clothing room. The clothing room is openly available on Thursdays and available for emergencies and area provider’s referrals Monday – Friday.

Critical Services – Bethesda House is known for offering a wide range of critical services to the public. The Agency works with community providers and several outside facilitators to provide on-site education and service connection to those who access the Drop-In Center. Program and services such as: Safety Counts, STD testing and education, and substance use disorder referrals are a part of the Day Program.

Bethesda House partners with local justice officials to provide opportunities for individuals to complete community service hours and to receive on-the-job training.

Schenectady Job Training Agency (SJTA) is active in referring high school students to the Agency for on-the-job training opportunities through the Federal Work Study Program. Each summer the agency is able to work with a maximum of three (3) high school youth on specific job skills through coaching and mentoring. These youths gain a greater understanding of what it means to work for the first time in a professional setting.

A monthly House Meeting is held to address areas of concern with guests and also allows guests a forum to discuss issues or items of interest that need to be brought to the attention of staff.

Administration and Program staff continue to actively reach out to local colleges and high schools, offering opportunities for internships and community service hours. We would not be able to offer the variety of services we do without the generosity of the community.

HOW THE PROGRAM DEPARTMENT WORKS

The department is low-barrier and provides an atmosphere of acceptance where individuals feel that they will be safe as they grow in self-worth, dignity, and self-respect. Individuals meet with staff to obtain services or simply to sit and be safe. Engagement is a critical component to gain trust and begin the process of accepting in-house referrals or referrals to area providers to improve and stabilize individual's lives.



THE FUTURE OF THE PROGRAM DEPARTMENT

The goal of this department is to strengthen its use of role models or examples of healthy behavior, appropriate social skills and decision-making skills to promote overall wellness. Staff will work with facilitators to support individual and group sessions on grief and loss, effective communication, and consequential thinking. This is an effort to improve self-awareness and reduce the risk of repeated mistakes or common pitfalls.





SCHENECTADY COORDINATED ENTRY PURPOSE

To provide a uniformed approach in identifying, engaging, and assisting homeless individuals and families effectively, and to ensure that those who request assistance are connected to proper housing programs and services. The Coordinated Entry program is designed to support the most vulnerable homeless families and individuals, guiding them from their first point of contact to stable housing.

HOW COORDINATED ENTRY WORKS

Coordinated Entry uses a standardized assessment tool and incorporates a system-wide housing first, client choice approach, prioritizing housing for those with the highest service needs.

Coordinated Entry is a HUD funded program that is facilitated by Bethesda House, the Legal Aid Society, and CARES of NY. The partnering agencies are New Choices Recovery Center, SCAP, YMCA, YWCA, Mohawk Opportunities, Schenectady Municipal Housing, SAFE Inc., Soldier On, VCHC, the Alliance for Positive Health, and the Re-entry Task Force. Individuals are able to access this program through multiple agencies and will receive the same consideration.

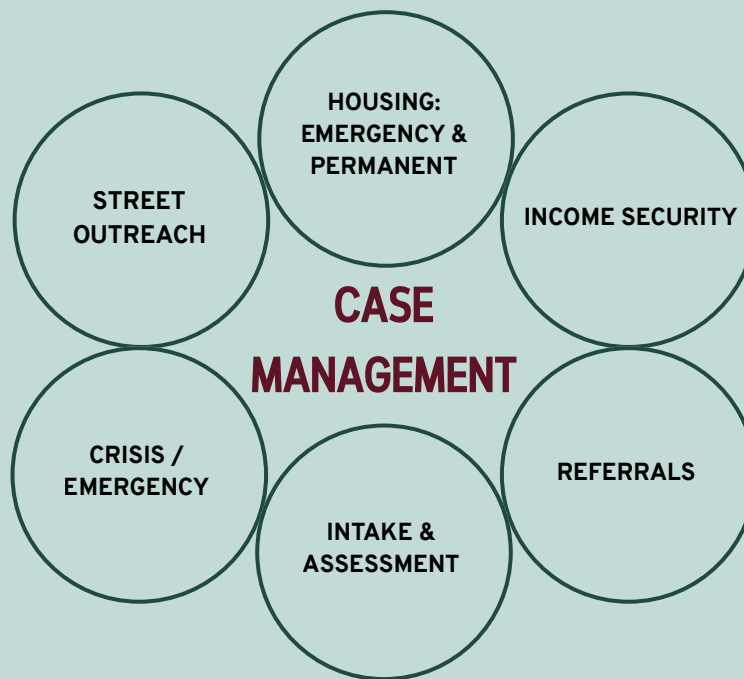
OVERNIGHT EMERGENCY SHELTER

In January 2024, Cara House Overnight Emergency Shelter opened offering 16 shelter beds, including 6 medical respite beds. The shelter is expanded during cold weather for the State mandated Code Blue program. The shelter is designed to provide a safe and secure environment to homeless single adults in Schenectady County while incorporating higher-level support and case management with Social Workers, Medical Care staff-RN, Outreach staff and Mental Health professionals. Hours of operation are from 4:30 pm to 8:00 am, seven days a week.

SERVICES OFFERED DURING SHELTER HOURS:

- **Shelter bed** – A clean space, bed, and blanket in a secure setting monitored by Shelter Aides and Agency Front Desk/Security.
- **Food** – a light meal is prepared by the Agency Chef and offered for breakfast and dinner.
- **Clothing** – access to the clothing room is available and staff encourage use of weather appropriate attire.
- **Shower** – personal hygiene is encouraged and showers are available up to 9 pm.
- **Laundry** – services are available upon request.
- **Storage Lockers** – Shelter offers locked and monitored lockers to keep personal belongings.
- **Medication Storage** – Shelter offers a locked medication storage system and assists shelter guests with prompts and reminders.
- **Intake and Assessment** – is processed by Agency Shelter Aides and Case Management. In-house referrals are completed for housing, medical, mental health, and substance use engagement and connection. Social Work Services – Licensed Social Workers meet with individuals to complete a psych-social assessment and work to connect each individual to appropriate services.





CASE MANAGEMENT PURPOSE

Our approach is a collaborative process involving those we serve, outside agencies, and community service providers. The process encompasses assessment, planning, facilitation, care management, evaluation and advocacy for options and services to meet an individual's crisis and housing placement needs.

SERVICES OFFERED

Initial Intake and Assessment – Case Management is available through Schenectady County Department of Social Services referrals, in-house referrals, and for those walking in for services and reporting a need. Case Managers will triage and assess immediate needs, eligibility for entitlement programs, and review both in-house services and area providers for possible service referrals.

Financial Case Management/Representative Payee Program – Proper financial management has been shown to be a pivotal component to stabilization in the community.

Bethesda House is able to act as a Representative Payee for those who are unable to manage or direct the use of his or her SSI/SSD benefits. Staff meet with program participants regularly and as needed to create a budget to pay bills, address wellness needs, and review personal essentials so that all aspects of their lives are being appropriately addressed.

The program is extremely successful in reaching the goals of continued housing and income stabilization. Program participants benefit from on-going encouragement and education.

Staff provide counseling, crisis management, and consequential thinking to participants, and as individual lives change, so will their budget.

In addition to Financial Management, staff establish proactive relationships with landlords to ensure a stable housing situation. Staff will work in collaboration with clients to address any issues regarding Independent Living Skills, rental agreements, and safety in order to advocate for them to prevent risk of eviction.

Case Managers will also identify individuals who may be eligible for SSI benefits and will assist in the completion of SSI/SSD Outreach, Access, and Recovery (SOAR) application, which expedites the process. The SOAR application is at no cost to the person.

Shelter/Housing – The Housing First model, which is employed by all departments within the agency, continues to be our guiding principle as we search to find permanent housing options for the most vulnerable.

Case Managers connect and engage with single adults utilizing the Agency's emergency shelter, community emergency shelters, walk-ins, and community referrals. Staff have a strong partnership with Schenectady County DSS, which aids with the transitions from emergency shelter to permanent housing in the community.

Case Managers prioritize serving the entirety of the individual and focus on wrapping comprehensive services before, during and after housing is secured. Contact with individuals following placement in permanent housing is maintained for twelve months and longer if needed. Connection to in-house services and to area providers is initiated immediately in order to encourage engagement in stabilizing treatment. The Social Work/Case Management Team successfully collaborate in order to address the totality of need and provide intensive support in order to have a positive impact.

Case Management staff work with a landlord database and are continually looking to improve and expand such relationships. The Agency has observed the effectiveness of maintaining strong, sustaining relationships with landlords in their efforts to house the chronically homeless. The primary responsibilities of the Case Managers are homeless prevention, transitioning emergency shelter guests to permanent housing, rapid re-housing placement, and providing stabilizing aftercare.

Street Outreach – The Street Outreach Case Management program was implemented in 2018. Street Outreach activities are designed to meet the immediate needs of people experiencing homelessness in unsheltered locations by connecting them with emergency shelter, housing, or critical services, and providing them with urgent, non-facility-based care.

Street outreach programs provide services directly or by collaborating with other agencies. The Outreach staff primarily work in the community providing food, clothing, and connection to area providers. The Outreach Case Manager works to establish a strong relationship and line of communication to provide basic living needs, but with the intention to address the factors contributing to homelessness. Outreach Case Manager introduces support, information sharing, crisis management, and advocacy and education on pertinent services. As appropriate, Outreach staff will bring a person or persons to the Agency to meet with Case Management or Social Work staff.

Street outreach is critical for a number of reasons. Street outreach programs can help young people get off the streets and into safe shelter and help prevent the sexual exploitation and abuse of youth on the streets. These programs can also help young people rebuild connections with caring adults and promote their social and emotional well-being.

Communities who have successfully reduced unsheltered homelessness emphasize the importance of ensuring their homeless response system is effective, efficient, and equitable. Achieving this goal involves preventing homelessness before it happens – and swiftly providing housing if it does – through safe and appropriate interventions, all while preserving the dignity and resilience of those facing housing crises. The role of street outreach is critical to this effort. Outreach is core to identifying and connecting the most vulnerable individuals who, for several reasons, are unable to access an existing system.

STREET OUTREACH SERVICES INCLUDE:

- Street-based education and outreach
- Access to emergency shelter
- Survival aid
- Individual assessments
- Trauma-informed treatment and counseling
- Information and referrals
- Crisis intervention
- Follow-up support

Rental Supplement Program (RSP) Case Management and Subsidy – this program was established to provide vital rental assistance to individuals and families, regardless of immigration status, who are experiencing homelessness or are facing an imminent loss of housing. The RSP is available to eligible individuals and families both with and without children.

HOW CASE MANAGEMENT WORKS

Under the premise that no two people experience homelessness or manage crisis in the same way, Case Managers approach their work with sensitivity and respect for each person's individuality. Meeting with a person to build trust and understanding of a mutual goal, while obtaining critical information begins the case management process.

An in-depth assessment is processed and a service plan with individualized goals and follow up is developed. The plan offers enrollment in the Representative Payee program for financial management, engagement with the in-house Social Work, Medical Care Program, and if appropriate enrollment in the Health Home program. This team wrap-around approach has proven to provide greater stability for the individual and increases their chance to successfully integrate into the community.

BH's strong partnership with DSS has allowed for greater insight into the deficiencies of the service delivery system and has paved the way for improved relationships with other area agencies in the community. Barriers have been identified allowing greater communication to address the growing needs of the homeless population.

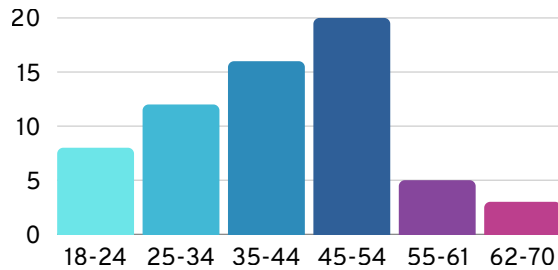
THE FUTURE OF CASE MANAGEMENT AT BETHESDA HOUSE

Effective case management positively impacts the healthcare system, especially in aligning with the goals of improving health outcomes of individuals/populations, enhancing the experience of care, and reducing the costs of care. Bethesda House has a comprehensive Case Management team who will enhance the level of services and client interaction to facilitate the achievement of client wellness and autonomy through advocacy, assessment, planning, communication, education, and resource management.

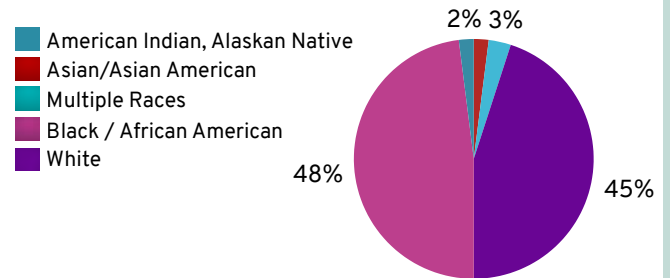


CASE MANAGEMENT

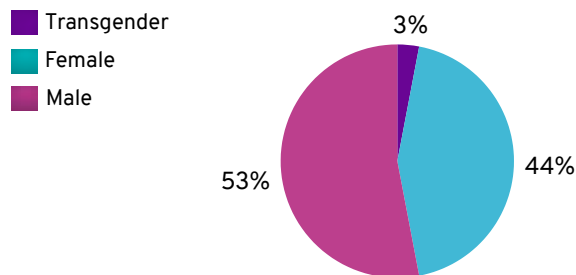
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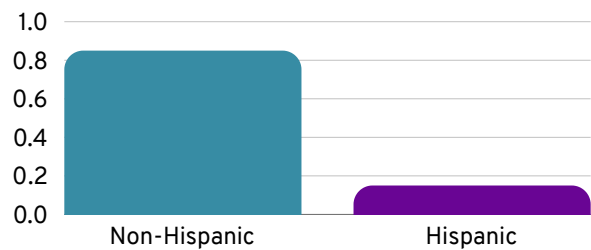
RACE



GENDER



ETHNICITY



Disability	% of Population
Development Disability	34%
Development Disability	70%
Development Disability	71%
Mental Illness	96%
HIV/AIDS	3%
Physical Disability	46%

Disability	% of Population
1 Condition	15.32%
2 Conditions	36.33%
3+ Conditions	48.33%

SERVICES

- Stabilize emergencies
- Reduce obstacles
- Access to community resources
- Referrals to area providers
- Emergency placement
- Supportive long-term housing
- Housing Subsidy
- Eviction Prevention
- On-going support
- Wrap around services



CLINICAL PROGRAM PURPOSE

The Program offers Social Work, Medical Care and Mental Health stabilization, supportive counseling, and referral services to the disenfranchised, impoverished and homeless individuals of Schenectady County.

SERVICES OFFERED

Walk-in Hospitality Center – There is a dedicated space available daily to the public. Individuals in the community can walk in between the hours of 9 - 11:30am and 1:00 - 4:30pm, Monday through Friday for respite, access to basic needs, and assistance with emergency services. If the individual elects, they will be connected with in-house or community resources. Social Work services are offered to those walking in and seeking support or advocacy.

Outreach – The Clinical staff work closely with the Outreach staff. This collaboration has been highly successful in meeting homeless people living on the street where they are, providing counseling and medical need services, and advocating and encouraging people to agree to emergency shelter services.

Medical Services – Agency Licensed Clinical Social Workers, Medical Care – RN staff, and Psychiatric Nurse Practitioner triage the need and proceed appropriately. The Ellis Medical Center's Residency Program Doctors return and work on-site two afternoons a month to work with the clients who were referred for engagement and treatment. This service is offered to Bethesda House day program guests, residents, and individuals who are accessing services.

Psychiatric Nurse Practitioner – The Bethesda House PNP Program provides Psychiatric stabilization services on-site. Those referred to the PNP Program will also meet with a Social Worker who screens for services and provides a comprehensive treatment plan. The PNP

will complete a thorough Psychiatric evaluation and provide treatment as appropriate. Social Work staff work with the PNP to assist in connecting to additional services and provide case management and consistent supportive counseling. This position is currently vacant as we search for a new PNP who can fit into our network of community support.

Medical/Mental Health/Substance Use Disorder Care – The population accessing services at Bethesda House consistently present issues related to Significant Mental Illness, Substance Use Disorder, Trauma, and untreated Chronic Health Conditions. The Social Work and Case Management Staff are dedicated to engaging individuals in all means of support in order to assess the needs of individuals and provide guidance and information in order to connect to services and community providers. Staff have established strong relationships with community agencies/programs such as Project Safe Point, Ellis Hospital, New Choices, Ellis Mental Health Clinic, and Schenectady DSS in order to best serve the population and have an impact. A main component of the service is that individuals often interact with Social Work staff quite frequently as shelter guests and Drop-in Center guests are able to see staff on a daily basis. This intense support allows for greater engagement and effectiveness.

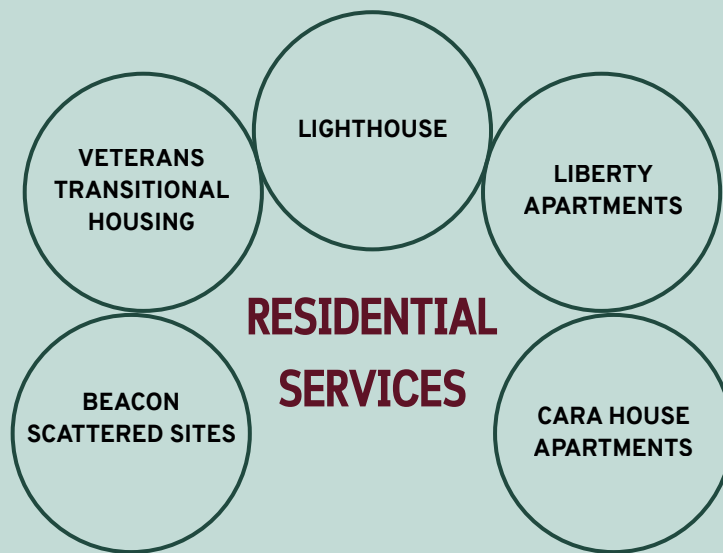
HOW OUR SOCIAL WORK DEPARTMENT WORKS

We believe that it begins with valuing the individual's experience, choices, and priorities. Meeting the individual 'where they are at' and listening to what is important to them is the most effective process of engagement. Being available to address a need or problem in the moment and building trust is a key component of how our Social Work staff operate. Staff hold the belief that individuals have the desire and the ability to change that which is causing them distress. Our Social Workers also understand that sabotaging incidents and behaviors are a response to a physical and/or psychological pain or condition. Staff foremost offer comfort, care, and safety, thus cultivating opportunities for treatment to begin. Staff want clients to experience and remember Bethesda House as a place to return to when in need. Bethesda House finds value in working and collaborating with each other and area human resource agencies for the common good, and for the safety of the individual and the greater community.

THE FUTURE OF SOCIAL WORK AT BETHESDA HOUSE

Social Work staff will continue to be a bridge and safety net for individuals disconnected from life, stabilizing services, and supports. The overarching goal is to expand to provide and strengthen existing programs that have proven effective with the population.

The Agency's new facility, Cara House includes an on-site social work office designed to address the needs of the re-entry residents, working to stabilize each person so that they are able to successfully re-enter society. We plan to continue our decades-long process of listening to the needs of our community and expanding to match that need as best we can.



HOUSING FIRST

Housing First is a homeless assistance approach that prioritizes providing housing as the foundation for stability and recovery. This model is at the heart of every service Bethesda House provides and was first implemented in 2002, when the Agency’s first residential program began operations.

RESIDENTIAL PROGRAM PURPOSE

The Lighthouse, Beacon, Liberty, and Cara House programs provide supportive housing for chronically homeless single adults. Our model combines low-barrier, affordable housing with access to healthcare and supportive services to help individuals lead more stable and fulfilling lives.

The Agency’s Veterans Program offers transitional housing for veterans referred by the Veterans Administration.

Our newest facility—Cara House—provides supportive housing for chronically homeless single adults and those recently released from incarceration.

SERVICES OFFERED

Supportive Housing – Chronically homeless single adults are housed first, then work with residential staff to develop an Individualized Service Plan (ISP). Continued housing is not contingent on following the ISP.

Harm Reduction – is a set of practical strategies and ideas aimed at reducing negative consequences and is built on a belief in, and respect for, the rights of people who experience

substance abuse disorder and use drugs. Staff provide non-judgmental support, resources, and compassion to help individuals stabilize and, when ready, pursue sobriety.

Life Skills – Residents are encouraged to strengthen essential life skills such as self-care, vocational readiness, financial management, self-advocacy, and independence.

Money Management – Residents receiving SSI or SSD benefits are encouraged to participate in the Agency’s Representative Payee Program, which assists with budgeting and financial stability.

Support Services – Liberty Apartments, Lighthouse, and Cara House are staffed 24/7, ensuring ongoing support and safety. Residents interact with staff on a regular basis; Beacon residents interact with staff at least weekly. During scheduled meetings, the discussions between staff and residents focus on immediate concerns, goal progress, and updates to their service plans. All residents have access to the Agency’s Clinical Services, including Social Work, Medical Care, and Psychiatric Nurse Practitioner support.

Day Program / Drop-In Center – All residents have access to Bethesda House’s Day Program and essential services, including daily meals, food pantry, clothing room, hygiene kits, and resource facilitators.

HOW THE RESIDENTIAL DEPARTMENT WORKS

The Agency operates five specific residential programs:

- **Liberty Apartments** – 16 beds
- **The Lighthouse** – 7 supportive housing beds and 3 transitional beds for Veterans
- **The Beacon** – 8 scattered-site apartments
- **Cara House** – 26 beds

Staff meet monthly to review issues affecting programming and staffing. The Director of Homeless and Residential Programs, and the Associate and Assistant Director of Residential Services regularly attend Single Point of Access (SPOA) meetings, which provide a collaborative forum to:

- Identify residents’ needs
- Seek community services
- Build accountability among service providers
- Develop treatment recommendations and review medications
- Set social, vocational, and employment goals
- Address representative payee issues
- Create personal goals and objectives
- Evaluate employment and vocational options
- Review mainstream benefits
- Explore opportunities for independence and self-sufficiency

The design of the program allows residents autonomy, while fostering connection and community. Most residents engage actively with their neighbors, Day Program participants, and staff. Currently, 96% of residents have developed individualized goals for their service plans with a Residential Program Leader.

Obtaining secure and stable housing is the first step in healing from the long-term trauma of living on the streets. Trust and self-worth take a great deal of time to rebuild, and progress is rarely linear. With each step forward, there can be several steps back, but with patience, persistence, and consistent support no goal is out of reach.

Residents also take part in a variety of social and community activities. Over 60% participate in outings and programs such as movie nights, nutrition classes, grocery shopping, community gatherings, and on-site events—activities that nurture confidence, community, and connection.

THE FUTURE OF THE RESIDENTIAL PROGRAM

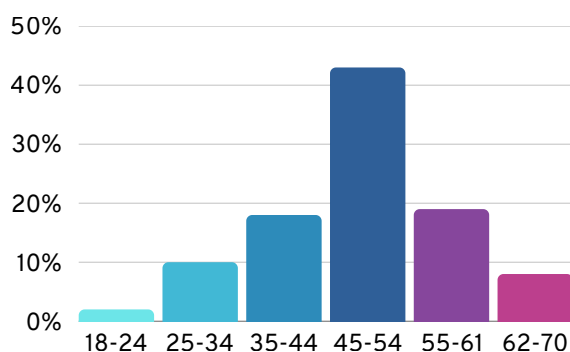
Looking ahead, Bethesda House will continue expanding its multifaceted residential activities to help residents gain independence and confidence in community living. Staff will encourage seasonal activities that promote growth, communication, and stress relief, while enhancing residents' ability to navigate community resources.

The Agency also plans to further develop the Resident Volunteer Program, empowering residents to contribute to Bethesda House and the wider community. Through engagement, purpose, and opportunity, our Residential Services will continue to put hope in action—turning housing into healing, and stability into strength.

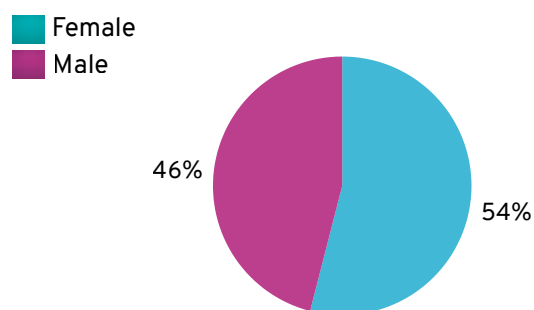


RESIDENTIAL PROGRAMS

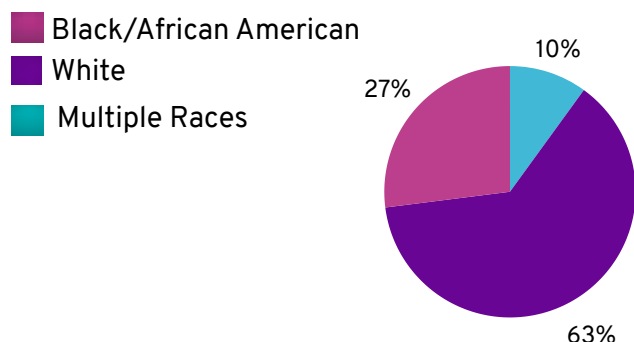
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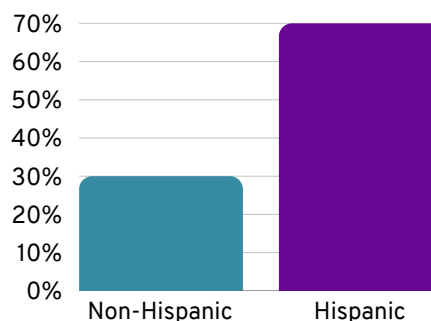
GENDER



RACE



ETHNICITY



Disability	% of Residents*
Development Disability	21%
Chronic Health	35%
Substance Use Disorder	70%
Mental Illness	94%
HIV/AIDS	2%
Physical Disability	35.59%

Number of Conditions	
1 Condition	17.76%
2 Conditions	31%
3+ Conditions	51.24%

*Based on 60 residents

LOOKING BACK

The 2024–2025 year was filled with moments that reflected hope in action—from successful fundraisers and community celebrations to the everyday generosity of donors and volunteers who make our work possible.

Fundraisers and Milestones

This year, Bethesda House hosted three successful fundraising events that brought our community together in both spirit and purpose:

- Cheers! for Bethesda in August
- Light Up Bethesda House in October
- Bowl for Bethesda in May

Together, these events raised over **\$52,670** in support of our mission, demonstrating the power of compassion and collective action.

Another major highlight was the passing of the first full year of Cara House being opened to our community. Cara House will continue to be a place where hope and healing begin for individuals rebuilding their lives.

THE POWER OF GENEROSITY

Bethesda House could not be the full-service agency it is today without the generosity of our in-kind donors. Your contributions keep our kitchen stocked, our clothing room functional, our medical care office equipped, and our outreach teams ready to meet people where they are each day.

We are deeply grateful to the organizations and congregations that continue to keep Bethesda House in their hearts and minds. Thank you for sharing your time, resources, and compassion in support of our mission.

Thank you to St. Joseph's Church and Holy Redeemer Church – for lovingly prepared sandwiches.

Thank you to AllTown Fresh, City Mission, St. Luke's Parish, and Lansing's Farm Market & Greenhouses – for fresh, healthy food donations.

Thank you to Sisters & Brothers Church of the Latter-day Saints, Lynnwood Reformed Church, Eastern Parkway United Methodist Church, Comfort Inn & Suites Schenectady–Scotia, and St. Gabriel's Church – for providing clothing, linens, and street outreach items.

Thank you to Rivers Casino and Resort – for this year's generous turkey donations.

VOLUNTEERS: HOPE IN ACTION, EVERY DAY

We also extend our heartfelt thanks to the groups of volunteers from Anthem Insurance, Elevance Health, NYS Department of Environmental Conservation (DEC), St. Madeleine Sophie Church, Eastern Parkway United Methodist Church, Lynnwood Reformed Church, First United Methodist Church, and Hannaford.

Your hands and hearts make an extraordinary difference, and we love welcoming you into our Bethesda House family.

To our Volunteer Team of 20 dedicated volunteers—**thank you**. Every hour you give brings warmth, compassion, and dignity to those we serve. Your kindness is hope in action.

COMMUNITY PARTNERSHIPS WITH SHARED PURPOSE

Our continued partnerships with Concern for the Hungry, The Food Pantries of the Capital District, and the Schenectady County Food Providers ensure that our food programs are sustained with non-perishable items and essential funding.

The Agency's holiday meals were once again a reflection of true community—filled with camaraderie, laughter, and great food. We are deeply thankful to the supporters who made these celebrations possible. Your generosity nourishes both body and spirit.



LOOKING AHEAD

In 2025–2026, we are putting hope into action through our continued commitment and innovative growth. The Agency will expand our marketing efforts and continue special fundraising events to reach new donors, build deeper community partnerships, and ensure long-term sustainability.

We are also investing in the expansion of our Street Outreach Program and the continued development of the Education Program at Cara House – a holistic, forward-thinking model designed to empower individuals experiencing homelessness, poverty, or re-entry challenges in Schenectady County. We look forward to discovering how we can learn and grow along with the program. Through a blend of education, life skills, and creative expression, the Education Program provides the tools and support needed to overcome the social determinants that prevent safe, stable housing and independent living. Participants will engage in learning opportunities that range from basic and higher education to job training, grief and loss support, and peer support groups.

In response to recent cuts to SNAP benefits and the resulting rise in food insecurity, we remain steadfast in our commitment to supporting our most vulnerable neighbors. We are actively working with local government officials and community providers to ensure that every resident of Schenectady County has access to available food resources and nutritious meals. By standing together, we are turning compassion into action and ensuring that no one faces hunger alone.

By fostering empowerment, self-sufficiency, and connection, we're transforming hope into real, lasting change – one person, one step, one action at a time.

Bethesda House of Schenectady, Inc .

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Executive Director

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Deputy Director of Program Operations

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