

I. State Information

State Information

Plan Year

Federal Fiscal Year 2022

State Identification Numbers

DUNS Number 805346798

EIN/TIN 86-6004791

I. State Agency to be the Grantee for the PATH Grant

Agency Name Arizona Health Care Cost Containment System

Organizational Unit Division of Grants Administration

Mailing Address 801 East Jefferson

City Phoenix

Zip Code 85034

II. Authorized Representative for the PATH Grant

First Name Leslie

Last Name Mar'Na

Agency Name Arizona Healthcare Cost Containment System

Mailing Address 801 E Jefferson Street MD 1900

City Phoenix

Zip Code 85034

Telephone (602) 417-4237

Fax

Email Address leslie.marna@azahcccs.gov

III. Expenditure Period

From 7/1/2022

To 6/30/2023

IV. Date Submitted

NOTE: this field will be automatically populated when the application is submitted.

Submission Date 4/25/2022 7:08:23 PM

Revision Date 4/25/2022 7:08:34 PM

V. Contact Person Responsible for Application Submission

First Name Hazel

Last Name Alvarenga

Telephone 602-417-4023

Fax

Email Address hazel.alvarenga@azahcccs.gov

Footnotes:

I. State Information

Assurances - Non-Construction Programs

Public reporting burden for this collection of information is estimated to average 15 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0040), Washington, DC 20503.

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As the duly authorized representative of the applicant I certify that the applicant:

1. Has the legal authority to apply for Federal assistance, and the institutional, managerial and financial capability (including funds sufficient to pay the non-Federal share of project costs) to ensure proper planning, management and completion of the project described in this application.
2. Will give the awarding agency, the Comptroller General of the United States, and if appropriate, the State, through any authorized representative, access to and the right to examine all records, books, papers, or documents related to the award; and will establish a proper accounting system in accordance with generally accepted accounting standard or agency directives.
3. Will establish safeguards to prohibit employees from using their positions for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain.
4. Will initiate and complete the work within the applicable time frame after receipt of approval of the awarding agency.
5. Will comply with the Intergovernmental Personnel Act of 1970 (42 U.S.C. §§4728-4763) relating to prescribed standards for merit systems for programs funded under one of the nineteen statutes or regulations specified in Appendix A of OPM's Standard for a Merit System of Personnel Administration (5 C.F.R. 900, Subpart F).
6. Will comply with all Federal statutes relating to nondiscrimination. These include but are not limited to: (a) Title VI of the Civil Rights Act of 1964 (P.L. 88-352) which prohibits discrimination on the basis of race, color or national origin; (b) Title IX of the Education Amendments of 1972, as amended (20 U.S.C. §§1681-1683, and 1685-1686), which prohibits discrimination on the basis of sex; (c) Section 504 of the Rehabilitation Act of 1973, as amended (29 U.S.C. §794), which prohibits discrimination on the basis of handicaps; (d) the Age Discrimination Act of 1975, as amended (42 U.S.C. §6101-6107), which prohibits discrimination on the basis of age; (e) the Drug Abuse Office and Treatment Act of 1972 (P.L. 92-255), as amended, relating to nondiscrimination on the basis of drug abuse; (f) the Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation Act of 1970 (P.L. 91-616), as amended, relating to nondiscrimination on the basis of alcohol abuse or alcoholism; (g) §§523 and 527 of the Public Health Service Act of 1912 (42 U.S.C. §§290 dd-3 and 290 ee-3), as amended, relating to confidentiality of alcohol and drug abuse patient records; (h) Title VIII of the Civil Rights Act of 1968 (42 U.S.C. §§3601 et seq.), as amended, relating to non-discrimination in the sale, rental or financing of housing; (i) any other nondiscrimination provisions in the specific statute(s) under which application for Federal assistance is being made; and (j) the requirements of any other nondiscrimination statute(s) which may apply to the application.
7. Will comply, or has already complied, with the requirements of Title II and III of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 (P.L. 91-646) which provide for fair and equitable treatment of persons displaced or whose property is acquired as a result of Federal or federally assisted programs. These requirements apply to all interests in real property acquired for project purposes regardless of Federal participation in purchases.
8. Will comply with the provisions of the Hatch Act (5 U.S.C. §§1501-1508 and 7324-7328) which limit the political activities of employees whose principal employment activities are funded in whole or in part with Federal funds.
9. Will comply, as applicable, with the provisions of the Davis-Bacon Act (40 U.S.C. §§276a to 276a-7), the Copeland Act (40 U.S.C. §276c and 18 U.S.C. §874), and the Contract Work Hours and Safety Standards Act (40 U.S.C. §§327-333), regarding labor standards for federally assisted construction subagreements.
10. Will comply, if applicable, with flood insurance purchase requirements of Section 102(a) of the Flood Disaster Protection Act of 1973 (P.L. 93-234) which requires recipients in a special flood hazard area to participate in the program and to purchase flood insurance if the total cost of insurable construction and acquisition is \$10,000 or more.
11. Will comply with environmental standards which may be prescribed pursuant to the following: (a) institution of environmental quality control measures under the National Environmental Policy Act of 1969 (P.L. 91-190) and Executive Order (EO) 11514; (b) notification of violating facilities pursuant to EO 11738; (c) protection of wetland pursuant to EO 11990; (d) evaluation of flood hazards in floodplains in accordance with EO 11988; (e) assurance of project consistency with the approved State management program developed under the Coastal Zone Management Act of 1972 (16 U.S.C. §§1451 et seq.); (f) conformity of Federal actions to State (Clear Air) Implementation Plans under Section 176(c) of the Clear Air Act of 1955, as amended (42 U.S.C. §7401 et seq.); (g) protection of underground sources of drinking water under the Safe Drinking Water Act of 1974, as amended, (P.L. 93-523); and (h) protection of endangered species under the Endangered Species Act of 1973, as amended, (P.L. 93-205).
12. Will comply with the Wild and Scenic Rivers Act of 1968 (16 U.S.C. §§1271 et seq.) related to protecting components or potential components of the national wild and scenic rivers system.
13. Will assist the awarding agency in assuring compliance with Section 106 of the National Historic Preservation Act of 1966, as amended (16 U.S.C.

§470), EO 11593 (identification and protection of historic properties), and the Archaeological and Historic Preservation Act of 1974 (16 U.S.C. §§469a-1 et seq.).

14. Will comply with P.L. 93-348 regarding the protection of human subjects involved in research, development, and related activities supported by this award of assistance.
15. Will comply with the Laboratory Animal Welfare Act of 1966 (P.L. 89-544, as amended, 7 U.S.C. §§2131 et seq.) pertaining to the care, handling, and treatment of warm blooded animals held for research, teaching, or other activities supported by this award of assistance.
16. Will comply with the Lead-Based Paint Poisoning Prevention Act (42 U.S.C. §§4801 et seq.) which prohibits the use of lead based paint in construction or rehabilitation of residence structures.
17. Will cause to be performed the required financial and compliance audits in accordance with the Single Audit Act of 1984.
18. Will comply with all applicable requirements of all other Federal laws, executive orders, regulations and policies governing this program.
19. Will comply with the requirements of Section 106(g) of the Trafficking Victims Protection Act (TVPA) of 2000, as amended (22 U.S.C. 7104) which prohibits grant award recipients or a sub-recipient from (1) Engaging in severe forms of trafficking in persons during the period of time that the award is in effect (2) Procuring a commercial sex act during the period of time that the award is in effect or (3) Using forced labor in the performance of the award or subawards under the award.

HHS Assurances of Compliance (HHS 690)

ASSURANCE OF COMPLIANCE WITH TITLE VI OF THE CIVIL RIGHTS ACT OF 1964, SECTION 504 OF THE REHABILITATION ACT OF 1973, TITLE IX OF THE EDUCATION AMENDMENTS OF 1972, THE AGE DISCRIMINATION ACT OF 1975, AND SECTION 1557 OF THE AFFORDABLE CARE ACT

The Applicant provides this assurance in consideration of and for the purpose of obtaining Federal grants, loans, contracts, property, discounts or other Federal financial assistance from the U.S. Department of Health and Human Services.

THE APPLICANT HEREBY AGREES THAT IT WILL COMPLY WITH:

1. Title VI of the Civil Rights Act of 1964 (Pub. L. 88-352), as amended, and all requirements imposed by or pursuant to the Regulation of the Department of Health and Human Services (45 C.F.R. Part 80), to the end that, in accordance with Title VI of that Act and the Regulation, no person in the United States shall, on the ground of race, color, or national origin, be excluded from participation in, be denied the benefits of, or be otherwise subjected to discrimination under any program or activity for which the Applicant receives Federal financial assistance from the Department.
2. Section 504 of the Rehabilitation Act of 1973 (Pub. L. 93-112), as amended, and all requirements imposed by or pursuant to the Regulation of the Department of Health and Human Services (45 C.F.R. Part 84), to the end that, in accordance with Section 504 of that Act and the Regulation, no otherwise qualified individual with a disability in the United States shall, solely by reason of her or his disability, be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any program or activity for which the Applicant receives Federal financial assistance from the Department.
3. Title IX of the Education Amendments of 1972 (Pub. L. 92-318), as amended, and all requirements imposed by or pursuant to the Regulation of the Department of Health and Human Services (45 C.F.R. Part 86), to the end that, in accordance with Title IX and the Regulation, no person in the United States shall, on the basis of sex, be excluded from participation in, be denied the benefits of, or be otherwise subjected to discrimination under any education program or activity for which the Applicant receives Federal financial assistance from the Department.
4. The Age Discrimination Act of 1975 (Pub. L. 94-135), as amended, and all requirements imposed by or pursuant to the Regulation of the Department of Health and Human Services (45 C.F.R. Part 91), to the end that, in accordance with the Act and the Regulation, no person in the United States shall, on the basis of age, be denied the benefits of, be excluded from participation in, or be subjected to discrimination under any program or activity for which the Applicant receives Federal financial assistance from the Department.
5. Section 1557 of the Affordable Care Act (Pub. L. 111-148), as amended, and all requirements imposed by or pursuant to the Regulation of the Department of Health and Human Services (45 CFR Part 92), to the end that, in accordance with Section 1557 and the Regulation, no person in the United States shall, on the ground of race, color, national origin, sex, age, or disability be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any health program or activity for which the Applicant receives Federal financial assistance from the Department.

The Applicant agrees that compliance with this assurance constitutes a condition of continued receipt of Federal financial assistance, and that it is binding upon the Applicant, its successors, transferees and assignees for the period during which such assistance is provided. If any real property or structure thereon is provided or improved with the aid of Federal financial assistance extended to the Applicant by the Department, this assurance shall obligate the Applicant, or in the case of any transfer of such property, any transferee, for the period during which the real property or structure is used for a purpose for which the Federal financial assistance is extended or for another purpose involving the provision of similar services or benefits. If any personal property is so provided, this assurance shall obligate the Applicant for the period during which it retains ownership or possession of the property. The Applicant further recognizes and agrees that the United States shall have the right to seek judicial enforcement of this assurance.

The grantee, as the awardee organization, is legally and financially responsible for all aspects of this award including funds provided to sub-recipients in accordance with 45 CFR ? 75.351-75.352, Subrecipient monitoring and management.

Name

Karen D. MacLean

Title

Finance Administrator

Organization

Arizona Health Care Cost Containment System

Signature:

Date:

FY 2022 PATH FOA Catalog No.: 93.150 FOA No.: SM-21-F2 Approved: 02/23/2022

Footnotes:

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2. Will give the awarding agency, the Comptroller General of the United States, and if appropriate, the State, through any authorized representative, access to and the right to examine all records, books, papers, or documents related to the award; and will establish a proper accounting system in accordance with generally accepted accounting standard or agency directives.
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Name

Karen D. MacLean

Title

Finance Administrator

Organization

Arizona Health Care Cost Containment System

Signature:

Karen D. MacLean

Date:

4/14/2022

FY 2022 PATH FOA Catalog No.: 93.150 FOA No.: SM-21-F2 Approved: 02/23/2022

Footnotes:

I. State Information

Certifications

1. Certification Regarding Debarment and Suspension

The undersigned (authorized official signing for the applicant organization) certifies to the best of his or her knowledge and belief, that the applicant, defined as the primary participant in accordance with 2 CFR part 180, and its principals:

- a. Agrees to comply with 2 CFR Part 180, Subpart C by administering each lower tier subaward or contract that exceeds \$25,000 as a "covered transaction" and verify each lower tier participant of a "covered transaction" under the award is not presently debarred or otherwise disqualified from participation in this federally assisted project by:
 - a. Checking the Exclusion Extract located on the System for Award Management (SAM) at <http://sam.gov>
 - b. Collecting a certification statement similar to paragraph (a)
 - c. Inserting a clause or condition in the covered transaction with the lower tier contract

2. Certification Regarding Drug-Free Workplace Requirements

The undersigned (authorized official signing for the applicant organization) certifies that the applicant will, or will continue to, provide a drug-free workplace in accordance with 2 CFR Part 182b):

- a. Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession or use of a controlled substance is prohibited in the grantee's work-place and specifying the actions that will be taken against employees for violation of such prohibition;
- b. Establishing an ongoing drug-free awareness program to inform employees about--
 1. The dangers of drug abuse in the workplace;
 2. The grantee's policy of maintaining a drug-free workplace;
 3. Any available drug counseling, rehabilitation, and employee assistance programs; and
 4. The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace;
- c. Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph (a) above;
- d. Notifying the employee in the statement required by paragraph (a), above, that, as a condition of employment under the grant, the employee will--
 1. Abide by the terms of the statement; and
 2. Notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction;
- e. Notifying the agency in writing within ten calendar days after receiving notice under paragraph (d)(2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to every grant officer or other designee on whose grant activity the convicted employee was working, unless the Federal agency has designated a central point for the receipt of such notices. Notice shall include the identification number(s) of each affected grant;
- f. Taking one of the following actions, within 30 calendar days of receiving notice under paragraph (d) (2), with respect to any employee who is so convicted?
 1. Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or
 2. Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency;
- g. Making a good faith effort to continue to maintain a drug-free workplace through implementation of paragraphs (a), (b), (c), (d), (e), and (f).

3. Certifications Regarding Lobbying

Per 45 CFR 75.215, Recipients are subject to the restrictions on lobbying as set forth in 45 CFR part 93. Title 31, United States Code, Section 1352, entitled "Limitation on use of appropriated funds to influence certain Federal contracting and financial transactions," generally prohibits recipients of Federal grants and cooperative agreements from using Federal (appropriated) funds for lobbying the Executive or Legislative Branches of the Federal Government in connection with a SPECIFIC grant or cooperative agreement. Section 1352 also requires that each person who requests or receives a Federal grant or cooperative agreement must disclose lobbying undertaken with non-Federal (non- appropriated) funds. These requirements apply to grants and cooperative agreements EXCEEDING \$100,000 in total costs. The undersigned (authorized official signing for the applicant organization) certifies, to the best of his or her knowledge and belief, that

1. No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering

into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.

2. If any funds other than Federally appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure of Lobbying Activities," in accordance with its instructions. (If needed, Standard Form-LLL, "Disclosure of Lobbying Activities," its instructions, and continuation sheet are included at the end of this application form.)
3. The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by Section 1352, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

4. Certification Regarding Program Fraud Civil Remedies Act (PFCRA) (31 U.S.C ? 3801- 3812)

The undersigned (authorized official signing for the applicant organization) certifies that the statements herein are true, complete, and accurate to the best of his or her knowledge, and that he or she is aware that any false, fictitious, or fraudulent statements or claims may subject him or her to criminal, civil, or administrative penalties. The undersigned agrees that the applicant organization will comply with the Public Health Service terms and conditions of award if a grant is awarded as a result of this application.

5. Certification Regarding Environmental Tobacco Smoke

Public Law 103-227, also known as the Pro-Children Act of 1994 (Act), requires that smoking not be permitted in any portion of any indoor facility owned or leased or contracted for by an entity and used routinely or regularly for the provision of health, daycare, early childhood development services, education or library services to children under the age of 18, if the services are funded by Federal programs either directly or through State or local governments, by Federal grant, contract, loan, or loan guarantee. The law also applies to children's services that are provided in indoor facilities that are constructed, operated, or maintained with such Federal funds. The law does not apply to children's services provided in private residence, portions of facilities used for inpatient drug or alcohol treatment, service providers whose sole source of applicable Federal funds is Medicare or Medicaid, or facilities where WIC coupons are redeemed.

Failure to comply with the provisions of the law may result in the imposition of a civil monetary penalty of up to \$1,000 for each violation and/or the imposition of an administrative compliance order on the responsible entity.

By signing the certification, the undersigned certifies that the applicant organization will comply with the requirements of the Act and will not allow smoking within any portion of any indoor facility used for the provision of services for children as defined by the Act.

The applicant organization agrees that it will require that the language of this certification be included in any subawards which contain provisions for children's services and that all subrecipients shall certify accordingly.

The Public Health Services strongly encourages all grant recipients to provide a smoke-free workplace and promote the non-use of tobacco products. This is consistent with the PHS mission to protect and advance the physical and mental health of the American people.

Name

Karen D. MacLean

Title

Finance Administrator

Organization

Arizona Health Care Cost Containment System

Signature:

Date:

FY 2022 PATH FOA Catalog No.: 93.150 FOA No.: SM-21-F2 Approved: 02/23/2022

Footnotes:

I. State Information

Disclosure of Lobbying Activities

Are there lobbying activities pursuant to 31 U.S.C. 1352 to be disclosed? Yes No


To View Standard Form LLL, Click the link below (This form is OPTIONAL).

[Standard Form LLL \(click here\)](#)

Name: Karen D. MacLean

Title: Finance Administrator

Organization: Arizona Health Care Cost Containment System

Signature: 

Date Signed: 4/14/2022

mm/dd/yyyy

FY 2022 PATH FOA Catalog No.: 93.150 FOA No.: SM-21-F2 Approved: 02/23/2022

Footnotes:

I. State Information

Funding Agreement

FISCAL YEAR 2022

PROJECTS FOR ASSISTANCE IN TRANSITION FROM HOMELESSNESS (PATH) AGREEMENT

I hereby certify that the State/Territory of Arizona agrees to the following:

Section 522(a). Amounts received under the PATH Formula Grant Program will be expended solely for making grants to political subdivisions of the State, and to nonprofit private entities (including community-based veterans organizations and other community organizations) for the purpose of providing the services specified in Section 522(b) to individuals who:

- Are suffering from serious mental illness; or
- Are suffering from serious mental illness and from a substance use disorder; and
- Are homeless or at imminent risk of becoming homeless.

Section 522(b). Entities receiving grants under the PATH Formula Grant Program will expend funds for the following services:

- Outreach;
- Screening and diagnostic treatment;
- Habilitation and rehabilitation;
- Community mental health;
- Alcohol or drug treatment;
- Staff training, including the training of individuals who work in shelters, mental health clinics, substance abuse programs, and other sites where homeless individuals require services;
- Case management services, including:
 - Preparing a plan for the provision of community mental health services to the eligible homeless individual involved, and reviewing such plan not less than once every 3 months;
 - Providing assistance in obtaining and coordinating social and maintenance services for the eligible homeless individuals, including services relating to daily living activities, personal financial planning, transportation services, and habilitation and rehabilitation services, prevocational and vocational services, and housing;
 - Providing assistance to the eligible homeless individual in obtaining income support services, including housing assistance, food stamps, and supplemental security income benefits;
 - Referring the eligible homeless individual for such other services as may be appropriate; and
 - Providing representative payee services in accordance with Section 1631(a) (2) of the Social Security Act if the eligible homeless individual is receiving aid under Title XVI of such act and if the applicant is designated by the Secretary to provide such services.
- Supportive and supervisory services in residential settings;
- Referrals for primary health services, job training, education services and relevant housing services;
- Housing services [subject to Section 522(h)(1)] including:
 - Minor renovation, expansion, and repair of housing;
 - Planning of housing;
 - Technical assistance in applying for housing assistance;
 - Improving the coordination of housing services;
 - Security deposits;
 - The costs associated with matching eligible homeless individuals with appropriate housing situations;
 - One-time rental payments to prevent eviction; and
- Other appropriate services, as determined by the Secretary.

Section 522(c). The State will make grants pursuant to Section 522(a) only to entities that have the capacity to provide, directly through arrangements, the services specified in Section 522(b), including coordinating the provision of services in order to meet the needs of eligible homeless individuals who are both mentally ill and suffering from a substance abuse disorder.

Section 522(d). In making grants to entities pursuant to Section 522(a), the State will give special consideration to entities with a demonstrated effectiveness in serving homeless veterans.

Section 522(e). The state agrees that grants pursuant to Section 522(a) will not be made to any entity that:

- Has a policy of excluding individuals from mental health services due to the existence or suspicion of a substance use disorder; or
- Has a policy of excluding individuals from substance use services due to the existence or suspicion of mental illness.

Section 522(f). Not more than four (4) percent of the payments received under the PATH Formula Grant Program will be expended for administrative expenses regarding the payments.

Section 522(h). The State agrees that not more than 20 percent of the payments will be expended for housing services under section 522(b)(10); and the payments will not be expended for the following:

- To support emergency shelters or construction of housing facilities;
- For inpatient psychiatric treatment costs or inpatient substance use treatment costs; or
- To make cash payments to intended recipients of mental health or substance use services.

Section 523(a). The State will make available, directly or through donations from public or private entities, non-Federal contributions toward such costs in an amount that is not less than \$1 for each \$3 of funds provided in such payments. The amount of non-Federal contributions shall be determined in accordance with Section 523(b).

Section 523(c). The State will not require the entities to which grants are provided pursuant to Section 522(a) to provide non-Federal contributions in excess of the non-Federal contributions described in Section 523(a).

Section 526. The State has attached hereto a Statement that does the following:

- Identifies existing programs providing services and housing to eligible homeless individuals and gaps in the delivery systems of such programs;
- Includes a plan for providing services and housing to eligible homeless individuals, which:
 - Describes the coordinated and comprehensive means of providing services and housing to homeless individuals; and
 - Includes documentation that suitable housing for eligible homeless individuals will accompany the provision of services to such individuals;
- Describes the source of the non-Federal contributions described in Section 523;
- Contains assurances that the non-Federal contributions described in Section 523 will be available at the beginning of the grant period;
- Describes any voucher system that may be used to carry out this part; and
- Contains such other information or assurances as the Secretary may reasonably require.

Section 527(a)(1), (2), and (3). The State has attached hereto a description of the intended use of PATH Formula grant amounts for which the State is applying. This description shall:

- Identify the geographic areas within the State in which the greatest numbers of homeless individuals with a need for mental health, substance use, and housing services are located; and
- Provide information relating to the program and activities to be supported and services to be provided, including information relating to coordinating such programs and activities with any similar programs and activities of public and private entities.

Section 527(a)(4). The description of intended use for the fiscal year of the amounts for which the State is applying will be revised throughout the year as may be necessary to reflect substantial changes in the programs and activities assisted by the State pursuant to the PATH Formula Grant Program.

Section 527(b). In developing and carrying out the description required in Section 527(a), the State will provide public notice with respect to the description (including any revisions) and such opportunities as may be necessary to provide interested clients, such as family members, consumers and mental health, substance use, and housing agencies, an opportunity to present comments and recommendations with respect to the description.

Section 527(c)(1)(2). The services to be provided pursuant to the description of the intended use required in Section 527(a), have been considered in the preparation of, have been included in, and are consistent with the State Plan for Comprehensive Community Mental Health Services under P.L. 102-321.

Section 528(a). The State will, by January 31, 2023, prepare and submit a report providing such information as is necessary for the following:

- To secure a record and description of the purposes for which amounts received under the PATH Formula Grant Program were expended during fiscal year 2022 and of the recipients of such amounts; and
- To determine whether such amounts were expended in accordance with the provisions of Part C – PATH.

Section 528(b). The State further agrees that it will make copies of the reports described in Section 528(a) available for public inspection.

Section 529. Payments may not be made unless the State agreements are made through certification from the chief executive officer of the State.

Charitable Choice Provisions:

The State will comply, as applicable, with the Substance Abuse and Mental Health Services Administration's (SAMHSA) Charitable Choice statutes codified at sections 581-584 and 1955 of the Public Health Service Act (42 U.S.C. §§290kk, et seq., and 300x-65) and their governing regulations at 42 C.F.R. part 54 and 54a respectively.

Governor/Designee Name	Kristen Challacombe
Title	Deputy Director
Organization	Arizona Health Care Cost Containment System

Signature:

Date:

FY 2022 PATH FOA Catalog No.: 93.150 FOA No.: SM-21-F2 Approved: 02/23/2022

Footnotes:

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- Contains assurances that the non-Federal contributions described in Section 523 will be available at the beginning of the grant period;
- Describes any voucher system that may be used to carry out this part; and
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Governor/Designee Name	Kristen Challacombe
Title	Deputy Director
Organization	Arizona Health Care Cost Containment System

Signature: *K. Chr Challacombe*

Date: 4/25/2022

FY 2022 PATH FOA Catalog No.: 93.150 FOA No.: SM-21-F2 Approved: 02/23/2022

Footnotes:

I. State Information

Disclosure of Lobbying Activities

Are there lobbying activities pursuant to 31 U.S.C. 1352 to be disclosed? Yes No

To View Standard Form LLL, Click the link below (This form is OPTIONAL).

[Standard Form LLL \(click here\)](#)

Name: Karen D. MacLean

Title: Finance Administrator

Organization: Arizona Health Care Cost Containment System

Signature: _____

Date Signed: _____

mm/dd/yyyy

FY 2022 PATH FOA Catalog No.: 93.150 FOA No.: SM-21-F2 Approved: 02/23/2022

Footnotes:

I. State Information

Disclosure of Lobbying Activities

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To View Standard Form LLL, Click the link below (This form is OPTIONAL).

[Standard Form LLL \(click here\)](#)

Name: Karen D. MacLean

Title: Finance Administrator

Organization: Arizona Health Care Cost Containment System

Signature: 

Date Signed: 4/14/2022

mm/dd/yyyy

FY 2022 PATH FOA Catalog No.: 93.150 FOA No.: SM-21-F2 Approved: 02/23/2022

Footnotes:

I. State Information

State PATH Regions

Name	Description	Actions
Cochise County	Cochise County (vendor Good Neighbor Alliance - GNA).	
Coconino County	Coconino County (vendor Catholic Charities)	
Maricopa County	Maricopa County (vendor Community Bridges Inc - CBI).	
Mohave County	Mohave County (vendor Catholic Charities)	
Pima County	Pima County (vendor La Frontera).	
Yavapai County	Yavapai County (vendor Catholic Charities)	

FY 2022 PATH FOA Catalog No.: 93.150 FOA No.: SM-21-F2 Approved: 02/23/2022

Footnotes:

II. Executive Summary

1. State Summary Narrative

Narrative Question:

Provide an overview of the state's PATH program with key points that are expanded upon in the State Level Sections of WebBGAS.

FY 2022 PATH FOA Catalog No.: 93.150 FOA No.: SM-21-F2 Approved: 02/23/2022

Footnotes:

**Arizona Health Care Cost Containment System
Project for Assistance to Transition from Homelessness
FY 2022-2023 SM-21-F2**

The Arizona Health Care Cost Containment System (AHCCCS) is the single state Medicaid agency for the State of Arizona. AHCCCS is a \$14 billion program that operates under an integrated managed care model, through a Research and Demonstration 1115 Waiver. Contracted health plans coordinate and pay for physical and behavioral health care services delivered by more than 115,000 health care providers to more than 2 million Arizonans.

AHCCCS contracts with Managed Care Organizations (MCOs) that are responsible for providing acute, long-term care, and behavioral health services. A list of contracted plans can be found here: <https://azweb.statemedicaid.us/HealthPlanLinksNet/HPLinks.aspx>

AHCCCS has over 115,000 active providers in Arizona, such as individual medical and behavioral health practitioners, therapy disciplines, institutions, durable medical equipment companies and transportation entities. Additional information may be found on the AHCCCS website reporting page: <https://www.azahcccs.gov/Resources/Reports/federal.html>

The PATH contractors utilize best or promising practices to target street outreach and case management to serve the most vulnerable adults who are literally or chronically homeless. Once the individual is enrolled into the PATH program, the PATH Contractor will assist with applying for mainstream services such as SSI/SSDI, Housing, Temporary Assistance for Needy Families, Food Stamps, medical resources, etc. Services are documented within the individuals case plan and the case plan will be updated as needed or every three (3) months. For Fiscal Year (FY) 2022 Arizona was allotted \$1,349,288 with a minimum match of \$449,763.

**Arizona Health Care Cost Containment System
Project for Assistance to Transition from Homelessness
FY 2022-2023 SM-21-F2**

Name of Organization	Organizational Type	Federal Funds	State Funds	County Served	Number of persons to be contacted	Number of persons to be enrolled
AHCCCS	State Agency	\$53,972				
Community Bridges, Inc (CBI)	Local PATH Subrecipient	\$659,966	\$229,156	Maricopa	4,640	1,064
La Frontera	Local PATH Subrecipient	\$287,278	\$99,749	Pima	1500	120
Catholic Charities	Local PATH Subrecipient	\$287,948	\$99,982	*Coconino Mohave Yavapai	2400	210
Good Neighbor Alliance (GNA)	Local PATH Subrecipient	\$60,124	\$20,876	*Cochise	107	21
TOTAL		\$1,349,288	\$449,763		8,647	1,415

*Balance of State consists of 13 counties.

II. Executive Summary

2. State Budget

Planning Period From 7/1/2022 to 6/30/2023

A budget and budget narrative that includes the state's use of PATH funds are required. The budget can be entered directly into WebBGAS, or you can upload the budget as an attachment. The Budget Narrative is a separate document that must be uploaded as an Attachment. It must provide a justification for the basis of each proposed cost in the budget and how that cost was calculated. The proposed costs must be reasonable, allowable, allocable, and necessary for the supported activity.

* Indicates a required field

Category	Federal Dollars	Matched Dollars	Total Dollars	Comments
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a. Personnel					Federal Dollars	Matched Dollars	Total Dollars	Comments
					35,688.00	0.00	35,688.00	

Position *	Annual Salary *	% of time spent on PATH *	PATH-Funded FTE	PATH-Funded Salary *	Matched Dollars *	Total Dollars	Comments
PATH Administrator	60,000.00	50.00 %	0.50	30,000.00	0.00	30,000.00	
Other (Describe in Comments)	60,000.00	9.00 %	0.09	5,688.00	0.00	5,688.00	Fiscal Staff

Category	Percentage	Federal Dollars *	Matched Dollars *	Total Dollars	Comments
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b. Fringe Benefits		40.00 %	\$ 14,276.00	\$ 0.00	\$ 14,276.00	
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Category	Federal Dollars	Matched Dollars	Total Dollars	Comments
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c. Travel		\$ 4,008.00	\$ 0.00	\$ 4,008.00	
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Line Item Detail *	Federal Dollars *	Matched Dollars *	Total Dollars	Comments
Annual PATH Conference	\$ 800.00	\$ 0.00	\$ 800.00	Out of State - Hotel
Annual PATH Conference	\$ 543.00	\$ 0.00	\$ 543.00	Out of state travel, airfare 1 trip
Annual PATH Conference	\$ 248.00	\$ 0.00	\$ 248.00	Out of State - Per Diem
Per Diem	\$ 1,265.00	\$ 0.00	\$ 1,265.00	In State - Per Diem
Other (Describe in Comments)	\$ 1,152.00	\$ 0.00	\$ 1,152.00	In State Travel, Lodging

d. Equipment		\$ 0.00	\$ 0.00	\$ 0.00	
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No Data Available

e. Supplies		\$ 0.00	\$ 0.00	\$ 0.00	
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No Data Available

f1. Contractual (IUPs)		\$ 1,295,316.00	\$ 449,763.00	\$ 1,745,079.00	
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f2. Contractual (State)		\$ 0.00	\$ 0.00	\$ 0.00	
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No Data Available

Category	Percentage	Federal Dollars	Matched Dollars	Total Dollars	Comments
----------	------------	-----------------	-----------------	---------------	----------

PATH housing costs are limited to 20% and can only be PATH allowable costs. Personnel who are considered to be a housing cost should be entered here and not included in the Personnel line item. For questions, call your Program Officer.

g1. Housing (IUPs)		0.10 %	\$ 1,341.00	\$ 473.00	\$ 1,814.00	
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g2. Housing (State)		\$ 0.00	\$ 0.00	\$ 0.00	
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No Data Available

Category	Federal Dollars	Matched Dollars	Total Dollars	Comments
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h. Construction (non-allowable)					
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i. Other		\$ 0.00	\$ 0.00	\$ 0.00	
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No Data Available

j. Total Direct Charges (Sum of a-i minus g1)		\$ 1,349,288.00	\$ 449,763.00	\$ 1,799,051.00	
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Category	Federal Dollars *	Matched Dollars *	Total Dollars	Comments
----------	-------------------	-------------------	---------------	----------

k. Indirect Costs (Administrative Costs)	\$ 0.00	\$ 0.00	\$ 0.00	<input type="text"/>
l. Grand Total (Sum of j and k)	\$ 1,349,288.00	\$ 449,763.00	\$ 1,799,051.00	
Allocation of Federal PATH Funds	\$ 1,349,288	\$ 449,762	\$ 1,799,050	

Source(s) of Match Dollars for State Funds:

Required non-federal contributions are available from the State General Fund Non-Medicaid Seriously Mentally Ill Services appropriation. Note- WebBGAS lists match requirement as \$449,762, but the PATH NOFO required match for Arizona is \$449,763 ; Hence AHCCCS' state match provided will be \$449,763.

**PATH FFY2022 BUDGET PERIOD
SFY 2023**

Personnel

Position Title	Staff Name	Annual Cost	Level of Effort	Federal Requested	Non-Federal Match
Project Administrator	Leslie Mar'Na	\$60,000	0.50	\$30,000	\$0
Fiscal Staff	TBD	\$60,000	0.09	\$5,688	\$0
Total Personnel				\$35,688	\$0

Fringe Benefits (40%)

				\$14,276	
Total Fringe Benefits				\$14,276	\$0

Travel

<i>Out of State Travel:</i>					
1 trip for out of state TBD for 1 person				\$543	
Airfare 1 @ \$546				\$248	
Out of state per diem @ \$62 x 4 days				\$800	
Hotel for out of state travel for 1 attendee (\$200 per day x 4 days)					
<i>In State Travel:</i>					
Lodging 12 nights x \$96/night				\$1,152	
Per Diem 23 days X \$55/day				\$1,265	
Total Travel				\$4,008	\$0

Supplies

No Supplies Requested

Total Supplies				\$0	\$0
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Equipment

No Equipment Requested

Total Equipment				\$0	\$0
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Total AHCCCS Admin Request (Limited to 4% of Grant Award \$53,972)				\$53,972	\$0
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Contractual Costs (Program Implementation)

Community Bridges (Maricopa County)	\$	659,966	\$	229,156	
La Frontera (Pima County)		\$287,278		\$99,749	
Good Neighbor Alliance (Cochise County)		\$60,124		\$20,876	
Catholic Charities (Coconino, Mohave and Yavapai Counties)		\$287,948		\$99,982	
Total Contractual				\$1,295,316	\$449,763

Total PATH GRANT				\$1,349,288	\$449,763
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AHCCCS
Projects for Assistance in Transition from Homelessness (PATH)
NOFO: SM-21-F2
Budget Narrative & Justification
July 1, 2022 through June 30, 2023

A. Personnel:

Position Title (1)	Staff Name (2)	Key Staff (3)	Annual Salary/Rate (4)	Level of Effort (5)	Total Salary Charge to Award (6)	State Match (7)
Project Administrator	Leslie Mar'Na		\$60,000	0.50	\$30,000	
Fiscal Staff	TBD		\$60,000	0.09	\$5,688	
Total Request					\$35,688	\$0

JUSTIFICATION: This is the cost of staff salaries to provide oversight and monitoring of the PATH grant. The Project Administrator provides oversight, monitoring, and implementation of the PATH grant. The Project Administrator monitors contractors' compliance with grant obligations and adherence to policies and requirements. This position provides technical assistance to contractors and facilitates regular meetings with contractors to ensure they are providing the services as required by the PATH grant. The fiscal staff will provide support to the Project Administrator by assisting in the federal grants management and administration of the grant. AHCCCS has a positive time tracking module within its Human Resource Information System (HRIS) that allows personnel to charge a grant for activities during each pay cycle, as part of its Employee Time Record (ETE). This will be utilized for any fiscal staff efforts charged to the grant.

B. Employee Related Expenditure:

Position (1)	Name (2)	Rate (3)	Total Salary Charged to Award (4)	Total Fringe Charged to Award (5)	State Match (6)
Project Administrator	Leslie Mar'Na	40%	\$30,000	\$12,000	
Fiscal Staff	Varied	40%	\$5,688	\$2,276	
Total Request				\$14,276	\$0

JUSTIFICATION: This is the ERE costs for those staff performing duties for PATH grant. Fringe benefits are part of the overall compensation and are proportionate to the level of effort that will devote to the project. The costs are incurred

AHCCCS
Projects for Assistance in Transition from Homelessness (PATH)
NOFO: SM-21-F2
Budget Narrative & Justification
July 1, 2022 through June 30, 2023

under formally established and consistently applied policies of the organization. Items in this category include FICA, paid vacation or sick time, pensions, health or life insurance coverage.

Fringe Category	Rate
Retirement	11.94%
FICA	1.45%
Insurance (i.e., Health, Dental, Vision, Life, Unemployment)	Varies
Social Security	6.20%
Other (i.e., Long-term Disability, Workers Compensation)	Varies
Total	40%

C. Professional & Outside Services

Name (1)	Service (2)	Rate (3)	Total (4)	State Match (5)

JUSTIFICATION:

D. Travel:

Please note: All travel expenditures will require itemized receipts and will not exceed the State allowable rates which can be found in the State of Arizona Accounting Manual (SAAM) <https://gao.az.gov/publications/saam>.

Purpose (1)	Destination (2)	Item (3)	Calculation (4)	Travel Cost Charged to the Award (5)	State Match (6)
Out of state travel - Required Grantee Meeting	Washington D.C.	Airfare	1 @ \$546	\$543	
		Out of state per diem	\$62 x 4 days	\$248	
		Lodging	\$200 per day x 4 days	\$800	
In state travel	Statewide	Lodging	12 nights x \$96/night	\$1,152	
		Per Diem	23 days x \$55	\$1,265	

AHCCCS
Projects for Assistance in Transition from Homelessness (PATH)
NOFO: SM-21-F2
Budget Narrative & Justification
July 1, 2022 through June 30, 2023

Purpose (1)	Destination (2)	Item (3)	Calculation (4)	Travel Cost Charged to the Award (5)	State Match (6)
Total Request				\$4,008	\$0

JUSTIFICATION: This represents out of state travel for PATH conference as well as in State travel for oversight and monitoring of PATH programs by the PATH Project Administrator.

E. Contractual:

In the case of a subcontract relationship, costs must be broken down in detail and a narrative justification provided. A separate itemized budget is required for each contractor. If applicable, the number of clients should be included in the costs.

Name (1)	Service (2)	Rate (3)	Other (4)	Cost (5)	State Match (6)
Community Bridges	PATH Outreach	See attached itemized budget		\$659,966	\$229,156
Catholic Charities	PATH Outreach	See attached itemized budget		\$287,948	\$99,982
Good Neighbor Alliance	PATH Outreach	See attached itemized budget		\$60,124	\$20,876
La Frontera	PATH Outreach	See attached itemized budget		\$287,278	\$99,749
Total Request				\$1,295,316	\$449,763

JUSTIFICATION: This represents the budget allocation for each PATH provider to provide outreach services to those experiencing homelessness, serious mental illness, and/or a substance use disorder.

F. Indirect Cost Rate or Administration (See Footnote below):

Calculation (1)	Indirect Cost Charged to the Award (2)	State Match (3)
	\$0	

AHCCCS
Projects for Assistance in Transition from Homelessness (PATH)
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Calculation (1)	Indirect Cost Charged to the Award (2)	State Match (3)
Total Request	\$0	\$0

JUSTIFICATION:

FOOTNOTE:

- (1) Please specify whether utilizing indirect or administrative overhead.
(2) For administrative overhead, please provide a justification of costs included in administration.
(3) For indirect costs, please specify if using the de minimis rate or provide a copy of the approved indirect cost agreement. The de minimis rate of 10 percent for non-federal entities is subject to Uniform Guidance, 20 CFR 200.414.

G. Total Project Costs (Do not include In-Kind):

TOTAL REQUEST – TOTAL PROJECT COSTS – (Sum of Total Direct Costs and Indirect (Or Admin) Costs)	\$1,295,316
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H. BUDGET SUMMARY (this document should match the Budget Outline document):

Category	Year 1	State Match Total Project Costs	Total Project Costs
Personnel	\$35,688	\$0	\$35,688
Employee Related Expenditures	\$14,276	\$0	\$14,276
Professional & Outside Services	\$0	\$0	\$0
Travel	\$4,008	\$0	\$4,008
Contractual	\$1,295,316	\$449,763	\$1,745,079

AHCCCS
Projects for Assistance in Transition from Homelessness (PATH)
NOFO: SM-21-F2
Budget Narrative & Justification
July 1, 2022 through June 30, 2023

Category	Year 1	State Match Total Project Costs	Total Project Costs
Indirect Costs or Administration	\$0	\$0	\$0
Total PATH Grant	\$1,349,288	\$449,763	\$1,799,051

Footnotes:

II. Executive Summary

3. Intended Use Plans

Expenditure Period Start Date: **07/01/2022**

Expenditure Period End Date: **06/30/2023**

The state can either enter all the IUPs and associated budgets as in prior years, or they may allow IUP users to enter their own information into WebBGAS. For more information on allowing IUP users to enter their own details, please see the tutorial under the Training Tab in WebBGAS that instructs states and IUP providers on this new process.

Primary IUP Provider	Provider Type	Geographic Service Area	Allocations	Matching Funds	Estimated # to Contact	Estimated # to Enroll	# Trained in SOAR	# Assisted through SOAR
Catholic Charities	Social service agency	Coconino County	\$103,146.00	\$35,814.00	800	70	1	0
Catholic Charities	Social service agency	Mohave County	\$123,280.00	\$42,806.00	800	70	1	0
Catholic Charities	Social service agency	Yavapai County	\$61,522.00	\$21,362.00	800	70	1	0
Community Bridges Inc.	Social service agency	Maricopa County	\$659,966.00	\$229,156.00	4,640	1,064	1	35
Good Neighbor Alliance	Shelter or other temporary housing resource	Cochise County	\$60,124.00	\$20,876.00	107	21	1	0
La Frontera Center, Inc.	Community mental health center	Pima County	\$287,278.00	\$99,749.00	1,500	120	3	20
Grand Total			\$1,295,316.00	\$449,763.00	8,647	1,415	8	55

* IUP with sub-IUPs

Footnotes:

Catholic Charities

4747 N. 7th Avenue

Phoenix, AZ 85013

Contact: Sandi Flores

Email Address: sflores@cc-az.org

Provider Type: Social service agency

PDX ID: AZ-007

State Provider ID: AZ-007

Contact Phone #: (928) 774-9125

- **Local Provider Description** – Provide a brief description of the provider organization receiving PATH funds, including name, type of organization, region served, and the amount of PATH funds the organization will receive.
- **Collaboration with HUD Continuum of Care (CoC) Program** – Describe the organization’s participation with local HUD Continuum of Care (CoC) recipient(s) and other local planning activities and program coordination initiatives, such as coordinated entry activities. If the organization is not currently working with the Continuum(s) of Care, briefly explain the approaches to be taken by the organization to collaborate with the CoC(s) in the areas where PATH operates.
- **Collaboration with Local Community Organizations** – Provide a brief description of partnerships and activities with local community organizations that provide key services (e.g., outreach teams, primary health, mental health, substance use disorder, housing, employment) to PATH-eligible clients, and describe the coordination of activities and policies with those organizations. Provide specific information about how coordination with other outreach teams will be achieved.
- **Service Provision** – Describe the organization’s plan to provide coordinated and comprehensive services to PATH-eligible clients, including:
 - How the services to be provided using PATH funds will align with PATH goals and maximize serving the most vulnerable adults who are literally and chronically homeless, including those with serious mental illness who are veterans and experiencing homelessness, to obtain housing and mental/substance use disorder treatment services and community recovery supports necessary to assure success in long-term housing;
 - Any gaps that exist in the current service systems;
 - A brief description of the current services available to clients who have both a serious mental illness and a substance use disorder; and
 - A brief description of how PATH eligibility is determined, when enrollment occurs, and how eligibility is documented for PATH enrolled clients.
- **Data** – Describe the provider’s participation in HMIS and describe plans for continued training and how providers will support new staff. For any providers not fully participating in HMIS, please describe plans to complete HMIS implementation.
- **Housing** – Indicate the strategies that will be used for making suitable housing available for PATH clients (i.e., indicate the type of housing provided and the name of the agency).
- **Staff Information** – Describe how staff providing services to the population of focus will be sensitive to age, gender, disability, lesbian, gay, bisexual, and transgender, racial/ethnic, and differences of clients. Describe the extent to which staff receive periodic training in cultural competence and health disparities.
- **Client Information** – Describe the demographics of the client population, the projected number of adult clients to be contacted and enrolled, and the percentage of adult clients to be served using PATH funds who are literally homeless.
- **Consumer Involvement** – Describe how individuals who experience homelessness and have serious mental illnesses, and family members will be meaningfully involved at the organizational level in the planning, implementation, and evaluation of PATH-funded services. For example, indicate whether individuals who are PATH-eligible are employed as staff or volunteers or serve on governing or formal advisory boards.
- **Budget Narrative** – Provide a budget narrative that includes the local-area provider’s use of PATH funds.

I certify that the responses to this Narrative Question in the FY 2020 PATH Application are still accurate. Yes No

The state can either enter all the IUPs and associated budgets as in prior years, or they may allow IUP users to enter their own information into WebBGAS. For more information on allowing IUP users to enter their own details, please see the tutorial under the Training Tab in WebBGAS that instructs states and IUP providers on this new process.

* Indicates a required field

Category	Federal Dollars	Matched Dollars	Total Dollars	Comments
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a. Personnel 62,597.00 21,736.00 84,333.00

Position *	Annual Salary *	% of time spent on PATH *	PATH-Funded FTE	PATH-Funded Salary *	Matched Dollars *	Total Dollars	Comments
Outreach worker	34,500.00	100.00 %	0.74	25,608.00	8,892.00	34,500.00	<input type="text"/>
Outreach worker	34,500.00	100.00 %	0.74	25,608.00	8,892.00	34,500.00	<input type="text"/>
PATH Administrator	60,000.00	10.00 %	0.04	2,474.00	859.00	3,333.00	\$2,667 In-Kind dollars
Other (Describe in Comments)	50,000.00	34.00 %	0.18	8,907.00	3,093.00	12,000.00	Team Leader (\$5,000 In Kind Dollars)
Other (Describe in Comments)	45,760.00	10.00 %	0.00	0.00	0.00	0.00	Data Specialist (\$4,576 In Kind Dollars)

Category	Percentage	Federal Dollars *	Matched Dollars *	Total Dollars	Comments
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b. Fringe Benefits 21.16 % \$ 17,841.00 \$ 6,310.00 \$ 24,151.00

Category	Federal Dollars	Matched Dollars	Total Dollars	Comments
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c. Travel \$ 976.00 \$ 338.00 \$ 1,314.00

Line Item Detail *	Federal Dollars *	Matched Dollars *	Total Dollars	Comments
Gas	\$ 909.00	\$ 315.00	\$ 1,224.00	\$360 In Kind dollars
Mileage Reimbursement	\$ 67.00	\$ 23.00	\$ 90.00	<input type="text"/>

d. Equipment \$ 0.00 \$ 0.00 \$ 0.00

No Data Available

e. Supplies \$ 1,044.00 \$ 362.00 \$ 1,406.00

Line Item Detail *	Federal Dollars *	Matched Dollars *	Total Dollars	Comments
Client: Outreach Supplies/Hygiene kits/Misc.	\$ 134.00	\$ 46.00	\$ 180.00	\$540 In Kind Dollars
Client: Other Supplies (Describe in Comments)	\$ 710.00	\$ 246.00	\$ 956.00	Emergency Items Sunscreen,thongs. (\$360 In Kind Dollars)
Client: Other Supplies (Describe in Comments)	\$ 200.00	\$ 70.00	\$ 270.00	Bus token (\$270 In Kind Dollars)
Client: Other Supplies (Describe in Comments)	\$ 0.00	\$ 0.00	\$ 0.00	Petty Cash for Emergencies (\$1,030 In Kind dollars)
Client: Other Supplies (Describe in Comments)	\$ 0.00	\$ 0.00	\$ 0.00	Trac phones (\$360.00)

f. Contractual \$ 0.00 \$ 0.00 \$ 0.00

No Data Available

g. Housing \$ 0.00 \$ 0.00 \$ 0.00

Line Item Detail *	Federal Dollars *	Matched Dollars *	Total Dollars	Comments
Other (Describe in Comments)	\$ 0.00	\$ 0.00	\$ 0.00	Housing Assistance (\$2,500 In Kind Dollars)

h. Construction (non-allowable)

i. Other \$ 2,223.00 \$ 772.00 \$ 2,995.00

Line Item Detail *	Federal Dollars *	Matched Dollars *	Total Dollars	Comments
Office: Misc (Copying, Courier, Postage, etc.)	\$ 561.00	\$ 195.00	\$ 756.00	<input type="text"/>
Office: Rent Expenses	\$ 0.00	\$ 0.00	\$ 0.00	\$17,460 In Kind Dollars
Office: Utilities/Telephone/Internet	\$ 0.00	\$ 0.00	\$ 0.00	\$1,260 In Kind Dollars
Office: Other (Describe in Comments)	\$ 1,543.00	\$ 536.00	\$ 2,079.00	Cell Phone Purchase/Monthly Usage (\$1,307 In Kind Dollars)
Office: Other (Describe in Comments)	\$ 119.00	\$ 41.00	\$ 160.00	Office Supplies
Office: Other (Describe in Comments)	\$ 0.00	\$ 0.00	\$ 0.00	Depreciation (\$340 In Kind Dollars)
Staffing: Training/Education/Conference	\$ 0.00	\$ 0.00	\$ 0.00	\$393 In Kind Dollars

j. Total Direct Charges (Sum of a-i) \$ 84,681.00 \$ 29,518.00 \$ 114,199.00

Category	Federal Dollars *	Matched Dollars *	Total Dollars	Comments
k. Indirect Costs (Administrative Costs)	\$ 18,465.00	\$ 6,296.00	\$ 24,761.00	
l. Grand Total (Sum of j and k)	\$ 103,146.00	\$ 35,814.00	\$ 138,960.00	

Source(s) of Match Dollars for State Funds:

Estimated Number of Persons to be Contacted:	800	Estimated Number of Persons to be Enrolled:	70
Estimated Number of Persons to be Contacted who are Literally Homeless:	70		
Number staff trained in SOAR in grant year ending in 2021:	1	Number of PATH-funded consumers assisted through SOAR:	0

**Catholic Charities
Budget Narrative & Justification
Coconino County
July 1, 2022 through June 30, 2023**

A. Personnel:

Position Title (1)	Staff Name (2)	Key Staff (3)	Annual Salary/Rate (4)	Level of Effort (5)	Total Salary Charge to Award (6)	In-Kind (7)
PATH Administrator	Camie Rasband	X	\$60,000	10%	\$3,333	\$2,667
Team Lead	Richard Brust		\$50,000	34%	12,000	\$5,000
Outreach Specialist	Dwight Manuel		\$34,500	100%	\$34,500	
Outreach Specialist	Sarah Annibal		\$34,500	100%	\$34,500	
Data Specialist	Mary McCoy		\$45,760	10%	\$0	\$4,576
Total Request					\$84,333	\$12,243

JUSTIFICATION: 2 outreach specialists, percentage of Administrator and 1/3 of team lead. Data Specialist is in-kind

**Catholic Charities
Budget Narrative & Justification
Coconino County
July 1, 2022 through June 30, 2023**

B. Employee Related Expenditure:

Position (1)	Name (2)	Rate (3)	Total Salary Charged to Award (4)	Total Fringe Charged to Award (5)	In-Kind (6)
PATH Admin	CR	36%	\$3,333	\$133	\$2,027
Team Lead	RB	36%	\$12,000	\$4,320	\$1,800
Outreach Specialist	DM	36%	\$34,500	\$9,849	\$2,571
Outreach Specialist	SA	36%	\$34,500	\$9,849	\$2,571
Data Specialist	MM	36%	\$0	\$0	\$1,647
Total Request				\$24,151	\$10,616

JUSTIFICATION: 36% of salary costs is agency percentage

Fringe Category	Rate
Retirement	9.5
FICA	7.65
Insurance	18.85
Social Security	
Total	36%

C. Professional & Outside Services

**Catholic Charities
Budget Narrative & Justification
Coconino County
July 1, 2022 through June 30, 2023**

Name (1)	Service (2)	Rate (3)	In-Kind (4)	Other (5)

JUSTIFICATION:

D. Travel:

Please note: All travel expenditures will require itemized receipts and will not exceed the State allowable rates which can be found in the State of Arizona Accounting Manual (SAAM) <https://gao.az.gov/publications/saam>.

Purpose (1)	Destination (2)	Item (3)	Calculation (4)	Travel Cost Charged to the Award (5)	In-Kind (6)
Staff mileage using own vehicle	Various/outreach		.445 X 16.8 miles per month	\$90	\$0
Fuel	Various/outreach		3,560 miles per year X .445/mile	\$1,224	\$360
Total Request				\$1,314	\$360

JUSTIFICATION: Outreach efforts throughout Coconino County

E. Occupancy:

Item(s) (1)	Quantity (2)	Amount (3)	% Charged to the Award (4)	Total Cost Charged to the Award (5)	In-Kind (6)
Occupancy	3 offices @ \$485 per office per month	\$17,460	0%	\$0	\$17,460
Utilities	\$35 per office X3 offices X 12 month	\$1,260			\$1,260
Total Request				\$0	\$18,720

JUSTIFICATION: space costs for dedicated space for 3 staff + square footage share of common areas (ie: conference room, kitchen, lobby, file room, etc)

**Catholic Charities
Budget Narrative & Justification
Coconino County
July 1, 2022 through June 30, 2023**

F. Housing :

Housing Assistance (1)	Cost (3)	In-Kind (4)
Housing Assist for enrollees (\$250 per client X 10 clients – max 20% of total award		\$2,500
Total Request		\$2,500

JUSTIFICATION: Client assistance with move in or eviction prevention for permanent housing

G. Other Operating:

In the case of a subcontract relationship, costs must be broken down in detail and a narrative justification provided. A separate itemized budget is required for each contractor. If applicable, number of clients should be included in the costs.

Name (1)	Service (2)	Rate (3)	Other (4)	Cost (5)	In-Kind (6)
Vehicle depreciation	Owned vehicles	3 vehicles @\$113/year		\$0	\$340
Phone (cell)	4 cell phones	Cell 4 X \$70.54/month		\$2,079	\$1,307
Office supplies	Pens/paper/ Staples/files	Various		\$160	\$0
copying	Copying	630 copies X .10 X 12 month		\$756	\$0
Training	Paper/notebooks	\$98.25 X 4 emp		\$	\$393

**Catholic Charities
Budget Narrative & Justification
Coconino County
July 1, 2022 through June 30, 2023**

Name (1)	Service (2)	Rate (3)	Other (4)	Cost (5)	In-Kind (6)
PATH Enrollee assistance	Petty cash, emergency items, food, hygiene, bus tokens, trac phones			\$1,406	\$2,560
Total Request				\$4,401	\$4,600

JUSTIFICATION: vehicles depreciated per GAAP rules, cell phones for communication, office supplies and copying for client file maintenance, training for staff as required for contract and COA accreditation, assistance for enrollees per case plan. Note: Food is to be used for outreach and is limited. The contractor is required to cost allocate those budgetary items that are utilized for more than one funding source and maintain records per State of Arizona Accounting Manual and 2 CFR part 200.

H. Indirect Cost Rate (See Footnote below):

Calculation (1)	Indirect Cost Charged to the Award (2)	In-Kind (3)
Salary + ERE X Fed approved rate of 31.2%	\$24,761	\$15,906
Total Request	\$24,761	\$15,906

JUSTIFICATION: Federally approved rate (letter previously provided)

FOOTNOTE:

- (1) Please specify whether utilizing indirect or administrative overhead.**
- (2) For administrative overhead, please provide a justification of costs included in administration.**
- (3) For indirect costs, please specify if using the de minimis rate or provide a copy of the approved indirect cost agreement. The de minimis rate of 10 percent for non-federal entities is subject to Uniform Guidance, 20 CFR 200.414.**

**Catholic Charities
Budget Narrative & Justification
Coconino County
July 1, 2022 through June 30, 2023**

I. Total Project Costs (Do not include In-Kind):

TOTAL REQUEST – TOTAL PROJECT COSTS – (Sum of Total Direct Costs and Indirect Costs)	\$138,960
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J. BUDGET SUMMARY (this document should match the Budget Outline document):

Category	Year 1	In-Kind Total Project Costs	Total Project Costs
Personnel	\$84,333	\$12,243	\$96,576
Employee Related Expenditures	\$24,151	\$10,616	\$34,767
Professional & Outside Services	0	0	0
Travel	\$1,314	\$360	\$1,674
Occupancy	0	\$18,720	\$18,720
Housing (Limited to 20%)	\$	\$2,500	\$2,500
PATH Enrollee	\$1,406	\$2,560	\$3,966
Other Operating	\$2,995	\$2,040	\$5,035
Indirect Costs at fed approved rate of 31.2% of salary+ERE	\$24,761	\$15,906	\$40,667
Total Request	\$138,960	\$64,945	\$203,905

Projects for Assistance in Transition From Homelessness (PATH) Budget Outline

PATH Contractor Name

Catholic Charities - Coconino County
July 1, 2022 through June 30, 2023

County Service Area	FEDERAL PATH GRANT	NON FEDERAL STATE MATCH	TOTAL FEDERAL/STATE	IN-KIND	SUB-CONTRACTOR(S) IN-KIND, IF APPLICABLE
Coconino County					
PERSONNEL					
Position	Name	Salary	Level Of Effort		
PATH Administrator	Rasband, Camie	60,000	0.10	\$ 2,474	\$ 859
Team Leader	Brust, Richard	50,000	0.34	\$ 8,907	\$ 3,093
Outreach Specialist	C. Johns	34,500	1.00	\$ 25,608	\$ 8,892
Outreach Specialist	S. Annibal	34,500	1.00	\$ 25,608	\$ 8,892
Data Specialist	M.McCoy	45,760	0.10		
Program Supervisor					
Other					
TOTAL PERSONNEL		2.54		\$ 62,597	\$ 21,736
EMPLOYEE RELATED EXPENSES (ERE)					
				17,927	6,224
TOTAL ERE				\$ 17,927	\$ 6,224
PROFESSIONAL AND OUTSIDE SERVICES					
				\$ -	\$ -
TOTAL PROF & OUTSIDE				\$ -	\$ -
TRAVEL					
Mileage Reimbursement @.445/mile				\$ 67	\$ 23
Gas (100% PATH dedicated Vehicles)				\$ 909	\$ 315
Out of State Travel - Airfare					
Out of State Travel - Lodging					
Out of State Travel - Per Diem					
Out of State Travel - Ground Transportation/Misc					
TOTAL TRAVEL				\$ 976	\$ 338
OCCUPANCY					
Office Rent Expenses				\$ -	\$ -
Office Utilities				\$ -	\$ -
TOTAL OCCUPANCY				\$ -	\$ -
HOUSING (Limited to 20% as defined in PATH Legislation)					
Housing Assistance ⁽¹⁾				\$ -	\$ -
TOTAL HOUSING				\$ -	\$ -
PATH ENROLLEE					
Petty Cash for Emergencies (Must submit receipts with CERs)				\$ -	\$ -
Outpatient Services				\$ -	\$ -
Medication Supplies				\$ -	\$ -
Prescription Co-pays				\$ -	\$ -
Utility Turn-on's				\$ -	\$ -
Emergency Items - sunscreen, thongs				\$ 710	\$ 246
Medical Contract Services				\$ -	\$ -
Hygiene kits				\$ 134	\$ 46
Client Supplies - Bus tokens				\$ 200	\$ 70
Client Supplies - trac phones				\$ -	\$ -
TOTAL PATH ENROLLEE				\$ 1,044	\$ 362
OTHER OPERATING					
Vehicle Licenses				\$ -	\$ -
Vehicle Maintenance				\$ -	\$ -
Vehicle Insurance				\$ -	\$ -
Leased Vehicle				\$ -	\$ -
Training and Conference Fees				\$ -	\$ -
Copying				\$ 561	\$ 195
Office Supplies				\$ 119	\$ 41
Office Desk Telephones				\$ -	\$ -
Depreciation				\$ -	\$ -
Janitorial				\$ -	\$ -
Landscaping				\$ -	\$ -
Desk/Laptop				\$ -	\$ -
Computers				\$ -	\$ -
Software				\$ -	\$ -
Postage				\$ -	\$ -
Cell Phone Purchase/Monthly Usage				\$ 1,543	\$ 536
TOTAL OTHER OPERATING				\$ 2,223	\$ 772
INDIRECT COST (2)(3)(4)				\$ 18,465	\$ 6,296

Projects for Assistance in Transition From Homelessness (PATH) Budget Outline

INDIRECT COST PERCENTAGE (2)(3)(4)	31.20%	0.00%	0.00%	0.00%	0.00%
	FEDERAL	STATE	TOTAL	IN-KIND	
GRAND TOTAL	\$ 103,146	\$ 35,814	\$ 138,960	\$ 64,945	\$ -

GRANT AMOUNT REQUESTED **\$ 138,960** **PLUS IN-KIND** **\$ 64,945** =Total Budget **\$ 203,905**

FOOTNOTES:

- (1) Please specify the types of housing assistance included in this line item.
- (2) Please specify whether utilizing indirect or administrative overhead.
- (3) For administrative overhead, please provide a justification of costs included in administration.
- (4) For indirect costs, please specify if using the de minimis rate or provide a copy of the approved indirect cost agreement. The de minimis rate of 10 percent for non-Federal entities is subject to Uniform Guidance, 2 CFR 200.414.

Additional Requirements:

- A. All travel costs must comply with Arizona State Travel Policy which can be found at the following link: <https://gao.az.gov/travel/welcome-gao-travel>. AHCCCS requires detailed receipts for reimbursement of travel expenditures.
- B. Contractor must submit monthly tracking logs & receipts for Trac phones, gift cards, bus tokens, petty cash, and other items as required by AHCCCS.
- C. Contractor budget is subject to 2 CFR Grants & Agreements, Part 200, Uniform Administrative Requirements, Cost Principles, and Audit Requirements as codified by HHS 45 CFR Part 75 for federal funds.

Catholic Charities Community Services, Inc
Projects for Assistance in Transition from Homelessness (PATH)
Contractor Intended Use Plan (IUP)
Contract Period July 1, 2022 – June 30, 2023

Purpose of Intended Use Plan (IUP): Each IUP must be saved in Microsoft Word, use Times New Roman 12, line spacing single space, and all margins at least one inch each. Also, the IUP must be named with the provider agency name, and a subsequent word which indicates the content (for example: ABC agency_program narrative):

Local Provider Description: Provide a brief description of the provider organization receiving PATH funds, including name, type of organization, region served, and the amount of PATH funds the organization will receive.

Since 2006, Catholic Charities Community Services, a 501c3 Non-Profit social service agency, has provided the only adult homeless outreach services in Northern Arizona through the Projects for Assistance in Transition from Homelessness (PATH) grant. Services are currently provided in Coconino, Mohave and Yavapai Counties. In the next year this program has been awarded:

Coconino County Federal - \$63,517 State - \$22,167 Total - \$85,684
Mohave County Federal - \$140,992 State - \$49,207 Total - \$190,199
Yavapai County Federal - \$ 61,522 State - \$21,362 Total - \$82,884

Collaboration with HUD Continuum of Care (CoC) Program: Describe the organization's participation with local HUD Continuum of Care (CoC) recipient(s) and other local planning activities and program coordination initiatives, such as coordinated entry activities.

CCCS participates in the local as well as Balance of State Continuum of Care groups, as well as the Homeless Task Force in Mohave County. PATH has historically been one of the lead agencies for the annual HUD Point in Time Count across all counties. Additionally, the PATH administrator is on the governance committee for the AZ balance of state COC to ensure our voice is heard at the state level. We attend statewide conferences for networking purposes to ensure we have the most current information and have access to funders and state officials to express the needs of those we are serving. We are a member of the Arizona Housing Coalition which advocates at the state and federal level for individuals experiencing homelessness in our state and local communities. As a member we offer input related to the rural areas of Arizona and the unique needs of the populations in those areas. CCCS is also one of two lead agencies who operate the Front Door, the Coordinated Entry process in Coconino County. We opened our doors for Coordinated Entry in 2017 and have worked diligently with community partners to create and maintain a system that allows walk in intakes, Monday through Friday complete with a mobile service as needed. In addition, there is weekly Case Conferencing at the CCCS office where those experiencing homelessness are prioritized, referrals made, and followed up with by the group. In both Yavapai and Mohave counties, CCCS is one of several “no wrong doors” where intakes are completed. We participate in case conferencing with both veteran and not veteran groups, in locations where case conferencing is separate. Working together with agencies through the Coordinated Entry process is critical to serve those most vulnerable in our communities. PATH plays an important role in Coordinated Entry, as our rural areas are so geographically vast. When someone comes up on the By Name List, and is not currently working with another agency, the community relies on PATH outreach to help find them to connect to housing resources. In addition,

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PATH has the ability to do intakes in the field helping communities connect to those who would not make it into the offices on their own. This takes patience and skills the path team excels at, as this is not accomplished in just one encounter. In addition, PATH teams help get those waiting to get into housing document ready, they provide letters verifying homelessness and disability verifications. This is an important step to getting people housed in a timely manner.

If the organization is not currently working with the Continuum(s) of Care, briefly explain the approaches to be taken by the organization to collaborate with the CoC(s) in the areas where PATH operates.

N/A

Collaboration with Local Community Organizations: Provide a brief description of partnerships and activities with local community organizations that provide key services (e.g., outreach teams, primary health, mental health, substance use disorder, housing, employment) to PATH-eligible clients. Describe the coordination of activities and policies with those organizations. Provide specific information about how coordination with other outreach teams will be achieved.

A Memorandum of Understanding (MOU) is active with both Health Choice Integrated Care/Blue Cross Blue Shield and Mohave Mental Health. These documents outline service provisions for PATH clients in each of the three proposed counties through Health Choice/BCBS and specifically for Mohave County. MOUs continue to be developed with the responsible agencies in each of the other areas. These partnerships do and will include obtaining SMI assessments, determinations, and case plans. Monthly connections with Case Managers will be conducted to ensure clients are obtaining needed behavioral health services and working toward stable housing within the community. Should the responsible agencies need emergency assistance for PATH clients or potential PATH clients, Catholic Charities has a rotating on-call staff member. We anticipate formal MOUs with The Guidance Center and Southwest Behavioral in Coconino County; Spectrum Healthcare and Polara Health in Yavapai County; and Mohave Mental Health Clinics and Southwest Behavioral Health Services in Mohave County in the next few months. These MOU's will be critical to providing ongoing services to clients exiting the PATH program to ensure future success. Formal policies are in place for referrals for clients willing to engage in behavioral health services, as well as policies to ensure diagnosis are available to team members for file compliance. Staff follow policy guidelines for outreach and enrollment, ensuring program and agency compliance and as a guideline for staff to navigate through the case management process. PATH staff works closely with the Regional Behavioral Health Authority and responsible agencies to break down barriers to treatment and ensure ongoing assistance for individuals in need of housing stability. Some agencies the PATH Program collaborates with include Halo House (for victims of domestic violence), City of Flagstaff (providing additional funding for outreach activities), Flagstaff Shelter Services (shelter services for clients wishing to come in from outside), Salvation Army (providing food and housing financial assistance for clients), St. Vincent de Paul (Thrift store partnership for clothing and work items), Nation's Finest (for veteran clients to engage with VA services), The Guidance Center (for behavioral health needs), Catholic Charities internally through the Family Shelter, Housing Program, and Supportive Services for Veteran Families (SSVF), The Circle of Page (local networking group for social service providers), The Flagstaff Family Food Center (for team

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members to obtain food for outreach and clients with food insecurity), The Williams Family/Community Outreach Coordinator(to engage families experiencing homelessness), Hope Cottage (shelter for women and children encountered through outreach), Yavapai County Probation Office (to assist clients in addressing justice involvement requirements), Prescott Area Shelter Services, Southwest Behavioral Health, Northern Arizona Council of Governments (NACOG), Spectrum Healthcare, St. Mary's Food Bank, Coconino County CoC, Coconino County Community Services (in both Page and Flagstaff), Nation's Finest and the Prescott VA. In addition, we are working with Spectrum Healthcare, Verde Valley Medical Center, Mohave/Yavapai/Coconino County Jails, Mental Health Court, Mohave Mental Health Clinics, Western Arizona Council of Governments (WACOG), Victim Witness Advocates in Williams and Grand Canyon Village, the Flagstaff, Prescott, Williams, Sedona, Cottonwood, Kingman, and Bullhead City Police Departments, the Congress, Yarnell, Skull Valley, Prescott, Flagstaff, Williams, Ash Fork, Lake Havasu City, Bullhead City, Kingman Fire Departments, Flagstaff Medical Center Social Workers, the Mohave, Coconino, and Yavapai Sheriff Departments, Terros Health in Flagstaff and Mohave County, and United Way in all areas. These agency partnerships help move consumers toward self-sufficiency and improve their access to resources by (1) sharing knowledge on resource availability that is conveyed to consumers, (2) providing tangible resources to distribute to cons.

PATH staff also work closely with Catholic Charities' Veteran Services program. Clients can be dually enrolled in both PATH and Veteran Services, thereby increasing their opportunities for both behavioral health and veteran-qualified services in the area of housing and medical/behavioral health needs. Coordination with other outreach teams occurs with the Veteran Services Program in Coconino and Yavapai Counties. This coordination leads to ensuring potential clients relate to the proper program and Catholic Charities Community Services, Inc. resources and ensures a wider coverage area during outreach. Catholic Charities PATH team is the only PATH outreach service in Mohave County.

**Service Provision: Describe the organization's plan to provide coordinated and comprehensive services to PATH-eligible clients, including:
Describe the organization's plan to provide coordinated and comprehensive services to PATH-eligible clients, including:**

A brief description of the current services available to clients who have both a serious mental illness and a substance use disorder; and

How services to active duty military service members, returning veteran and military families will be considered and prioritized.

A brief description of how PATH eligibility is determined, when enrollment occurs, and how eligibility is documented for PATH enrolled clients.

Any gaps that exist in the current service systems;

How the services to be provided using PATH funds will align with PATH goals and maximize serving the most vulnerable adults who are literally and chronically homeless, including those with serious mental illness who are veterans and experiencing

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homelessness, to obtain housing and mental/substance use disorder treatment services and community recovery supports necessary to assure success in long-term housing;

The Catholic Charities PATH Outreach Program provides outreach services and interventions designed to assist individuals who meet the federal definitions of homelessness or imminent risk of homelessness in Coconino, Mohave, and Yavapai Counties. Teams of two search streets, vacant buildings, homeless shelters, river bottoms, forests, desert campsites, parks, jails, hot meal centers, food pantries, jails, hospitals (including places where veterans' services are provided), neighborhoods and anywhere else homeless individuals may camp or frequent to locate individuals experiencing homelessness. During outreach activities, the teams distribute life-sustaining supplies; provide regularly updated handouts detailing available social services; educate people on local camping rules and regulations; and transport clients directly to detoxification centers, medical treatment, and psychiatric care. Outreach is regularly conducted in inclement weather and available on-call after hours. All individuals experiencing homelessness are served, and those with serious mental illness and/or a co-occurring substance abuse disorder are enrolled in PATH. Outreach efforts include people of all faiths, backgrounds and abilities including victims of domestic violence, elderly individuals, individuals living with a serious mental illness who are incarcerated, American Indians, families, abandoned or runaway youth, veterans, active-duty military and military families, and LGBTQ populations. One team of ~~two~~ three PATH outreach staff is assigned to each geographic service area. ~~Two~~ Three staff members are formerly homeless which adds a level of understanding and empathy to service provision. PATH teams strive to maintain regular contact with the individual/family experiencing homelessness. Enrolled clients receive ongoing case management, and have access to move-in assistance, bus passes, clothing vouchers, motel assistance, eviction prevention funds, etc. They are also connected to services including, but not limited to, counseling, financial education, and identification acquisition.

Specific benefits of the program's homeless outreach services include 1) access to life-sustaining, emergency resources such as tents, sleeping bags, water, coats, gloves; 2) education on locally available social services and treatment options as well as acceptable and safe camping practices; 3) field assessments and evaluations; 4) assistance in locating cooling or heating stations during extreme weather; 5) transportation in the form of client transport to behavioral health appointments and bus passes and tickets; 6) linkage to the behavioral health crisis system; 7) case management designed to connect and enroll participants in mental health and/or substance abuse treatment; 8) completion of the VI SPDAT and entry into HMIS data system to facilitate a coordinated care approach to service provision; 9) transition into the T/RBHA case management system (Northern Arizona Regional Behavioral Health Authority); 10) assistance getting prescriptions filled; 11) assistance completing appropriate applications and necessary follow-up to ensure eligible persons are in receipt of SSI/SSDI through the SOAR program, housing resources (Section 8, Project Based Housing, UD 202/811s, HEARTH, and Low Income Housing Tax Credits), income resources (VA benefits, General Assistance, Temporary Assistance for Needy Families, Food Stamps and employment services); 12) discharge planning for individuals exiting a medical or treatment center who need resources to avoid stressors which may lead back to inpatient care (such as lack of shelter); 13) coordination with emergency services when a client requires medical attention; 14) moving assistance; 15) hotel vouchers for medically fragile individuals, particularly during inclement weather; and 16) housing dollars for permanent placements, 17) staff certified in instructing Mental Health First Aid to law enforcement, jail staff, community partners, and collaborative agency staff to expand awareness of mental illness/behavioral health concerns, 18) staff collaborates with Health Choice and NARHBA to present anti-stigma presentations to community partners to expand awareness related to homeless issues, 19) outreach teams provide bins containing life sustaining supplies and resource/contact information to rural points of interest that have interactions with homeless individuals such as food banks/drop off

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locations, sheriff departments, police departments, victim witness advocates, and fire departments which also increases collaboration efforts for PATH to interact and possibly transport homeless individuals to places with more resources.

For clients suspected to have both a serious mental illness and a substance abuse disorder, after an initial contact has generated trust, and no later than the third contact, the PATH team arranges an assessment to determine if indeed the client has mental illness and/or a substance use disorder. PATH eligible individuals with co-occurring disorders receive outreach and are referred to The Guidance Center in Flagstaff and/or Williams, Mohave Mental Health Clinics in Mohave County, Encompass in Page and Fredonia, Spectrum Healthcare in Sedona and Cottonwood, Health in Prescott and Southwest Behavioral & Health Services in Flagstaff, Mohave County, and Prescott Valley for treatment services. Those enrolled in the PATH Program receive case management services through a local behavioral health provider. Consumers receive a comprehensive assessment with emphasis on the unique needs and cultural preferences of the individual, and a consumer-driven service plan is developed to target individual needs. Navigation services include, but are not limited to, assistance with obtaining identification documents; applying for entitlements such as food stamps, general assistance, Medicare/Medicaid, or SSI/SSDI; coordination of health care or obtaining a primary care physician once healthcare benefits are in place; placement in a shelter; and mental health treatment. A rapport is built with the consumer to assist them in meeting self-identified goals of their service. Catholic Charities believes that sustained mental health treatment is unlikely to occur outside of stable living arrangements so, as much as possible, enrolled participants are encouraged to choose housing goals that lead to permanent housing.

To determine SMI within 90 days, enrolled PATH clients complete Release of Information forms during the intake process for their current behavioral health provider or where they wish to go to receive SMI determination and treatment. The form requires the chosen behavioral health agency to provide notification to Catholic Charities of an SMI diagnosis via mail, email, or fax. These documents are maintained in client files. Homeless Outreach staff inquire about a client's diagnosis during every contact with the client and by communicating with the client's assigned Case Manager. Alternatively, a Title XIX verification request can be submitted through the Regional Behavioral Health Authority. Such requests are fulfilled within one week.

Through scheduling, Catholic Charities provides a weekly on call status for each PATH Homeless Outreach staff member. In all three counties, one staff member responds to on-call emergencies every first and third week of each month, while the other staff responds every second and fourth week. During winter outreach, however, on call scheduling is dependent on the amount of location/inclement weather driving training each staff member has. The PATH Supervisor trains the outreach staff until they are adequately educated to complete an entire night leading the outreach effort with volunteers, interns, or inner-agency/outer-agency workers. During severe snowstorms, PATH utilizes an all-hands-on-deck approach, having one team outreach western Flagstaff/outlying areas and the other team outreaching eastern Flagstaff/outlying areas. In the extreme heat areas of Mohave County, PATH staff coordinates with local providers for water drives and safe daytime provisions for this population to prevent heat-related deaths.

PATH funds are leveraged to create the greatest impact possible for the program's clients. PATH funds are often combined with support from fundraisers, donations, and other funders. To boost the program's ability to serve clients with needs not covered by PATH funding, additional support is sought out through local foundations and United Way. Additionally, the PATH Program collaborates with other agencies such as behavioral health, Goodwill, Salvation Army, St. Vincent De Paul and others to assist clients in meeting their needs while maximizing program funding.

Gaps in service delivery are identified through client satisfaction surveys conducted annually and through quarterly file and program reviews as part of Catholic Charities' internal program quality improvement

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(PQI). These gaps are addressed in monthly staffing's to improve the program. Some gaps in the current service systems in the counties served by the PATH Program include the amount of time it takes in some areas to obtain the SMI diagnosis, lack of affordable housing opportunities, and the lack of available jobs. The implementation of a Coordinated Entry System in each county is helping to identify the housing gaps in each rural community.

Data: Describe the provider's participation in HMIS and describe plans for continued training and how PATH contractors will support new staff. For any providers not fully participating in HMIS, please describe plans to complete HMIS implementation.

Catholic Charities has been utilizing the HMIS system since program inception in 2006. Our efforts now include meeting the upgraded data standards, ongoing training for staff to ensure all new data standards are understood and up to date, and regular report reviews to ensure compliance with the data standards adopted by SAMSHA. We will continue to work closely with the HMIS Administrator to ensure staff trainings are current, and the program's administrative assistant will pull weekly and monthly data quality reports to ensure full compliance. All case management activities will be recorded and tracked within HMIS, and the program will ensure all new staff participate in HMIS training within 30 days of hire. HMIS collects data on not only the number of folks outreached or enrolled, but on the services and referrals provided to clients. Updates are done regularly as clients obtain mainstream benefits and income and used to demonstrate not only reportable numbers for the grant, but to demonstrate client and program successes and the volume of services provided to clients (6.14) This data assists us in driving results and making program changes to ensure we are continuing to provide the services necessary to help clients achieve stability.

SSI/SSDI Outreach, Access, Recovery (SOAR): Describe the provider's plan to ensure that PATH staff have completed the SOAR Online Course and which staff plan to assist consumers with SSI/SSDI applications using the SOAR model and track the outcomes of those applications in the SOAR Online Application Tracking (OAT) system. Please be sure to submit Certificate of Completion of the On-Line SOAR Course with IUP submission.

If the provider does not use SOAR, describe the system used to improve accurate and timely completion of mainstream benefit applications (e.g. SSI/SSDI). Also describe the efforts used to train staff on this alternative system and what technical assistance or support they receive to ensure quality applications if they do not use the SAMHSA SOAR TA Center.

Of the current six PATH staff members, one is SOAR certified, three are nearing completion of the SOAR online training. New staff are required to complete the training within the first six months of employment. The certified staff, as well as those nearing completion, screen all enrolled clients for potential SOAR services and assist them in gathering the initial documentation necessary to begin a case. Through our partnerships with local behavioral health agencies, and the new AHCCCS ruling allowing

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them to bill for SOAR services, most clients are assisted with the initial gathering of documents and information and then referred to behavioral health agencies for completion and filing of their case. Catholic Charities is not currently able to bill for SOAR services, and they are quite time consuming, so they rely on behavioral health case managers or dedicated SOAR specialists at the BH agencies to complete actual applications, allowing outreach staff to concentrate on the outreach and document gathering portion of the SOAR process. PATH staff are available to assist behavioral health CM's if needed to help obtain all items or information needed to submit successful SOAR claims (6.14.5). SOAR is critical for clients to obtain income, thus increasing their chances of housing stability. Clients not enrolled or awaiting enrollment with a partner agency are assisted with their SOAR application by either the PATH team member or the SOAR Benefit Specialist who is part of the larger Catholic Charities homeless services team across Northern Arizona.

Housing:

Indicate what strategies will be used for making suitable housing available for PATH clients Provide the types of housing and the name of the agency (ies) you will be working with.

Describe how your agency will address the housing needs of those living with serious mental illness and who are incarcerated in designing and developing your program to prioritize services upon release from jail or prison, where appropriate.

Catholic Charities operates a Housing Program with over 125 scattered site housing units throughout Northern Arizona which are utilized to house homeless or formerly homeless individuals and families who have a qualifying disability. During FY 2021 this Housing Program assisted over 625 individuals obtain housing, with over 30 of them enrolled in the PATH Program now or previously. Examples of disabilities include SMI, substance use disorder, post-traumatic stress disorder, HIV/AIDS or a physical disability. Residents pay 30% of their income (if any) in rent and receive case management and supportive services either through Catholic Charities or a collaborative partner. The Housing Program and the PATH Program work together to move participants from a crisis to a stable environment where they can thrive. In addition to these housing options, PATH staff work with the local Public Housing Authority and local landlords to increase opportunities for housing for individuals enrolled in the program. Through the Coordinated Entry System, individuals are prioritized for housing based on the VI SPDAT and referred through HMIS and Case Conferencing weekly in all areas. Preventive measures are utilized to ensure housed PATH clients do not become homeless again. This includes making referrals to other agencies that can assist with eviction prevention (Coconino County Community Services and St. Vincent de Paul In-Town Help Line), as well as a one-time only PATH-funded eviction prevention assistance (up to \$300). If a client has Title XIX status, a limited amount of funding is available through behavioral health service providers including Southwest Behavioral Health Services, Encompass, Spectrum, The Guidance Center, and West Yavapai Guidance Clinic. Catholic Charities also provides services to assist clients in obtaining or maintaining income, thereby preventing homelessness. These services consist of SOAR, Goodwill Industries One Stop Job Programs, Vocational Rehabilitation, Arizona Workforce Job Training, access to job listings and job fairs, and connection to placement agencies (Command Labor Systems, Labor Ready, Quality Connections, and the Family Food Center). The PATH Homeless Outreach Program assists clients with obtaining medical and behavioral records for SOAR purposes, paying for initial costs of GED classes (Coconino Community College/College of America), obtaining birth certificates and identification for benefits, employment, treatment, and other agency assistance purposes, and referrals to financial responsibility classes, and

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assists culinary clients in obtaining food handler permits through the counties in which PATH has coverage.

Staff Information: Describe how staff providing services to the population of focus will be sensitive to age, gender, disability, lesbian, gay, bisexual, and transgender, racial/ethnic, and differences of clients.

Even though we are faith based, Catholic Charities serves all, regardless of age, race/ethnicity, gender, disability, sexual orientation, or faith (religious affiliation). There is no requirement related to the Catholic religion to work for or receive services from Catholic Charities. In addition, our current staff members include multiple races, genders, varying ages, religious affiliations, and personal past experiences of homelessness. Catholic Charities is an equal opportunity employer and strives to hire individuals from diverse backgrounds to ensure cultural competence within the teams.

Describe how often staff receives training in cultural competence and health disparities and how is this documented.

This diversity in our team members strengthens our ability to serve diverse clients in all our programs. Additionally, Catholic Charities requires yearly cultural competency and diversity trainings, and seeks out outside trainings necessary to meet the requirements of the program. Because many our clients are from the neighboring Navajo Reservation, Catholic Charities has sought additional training from Native Americans for Community Action to be delivered to staff in the next 6 months (5.17) For the PATH Program, current standards will be reviewed regarding a strategy for addressing health disparities to ensure necessary trainings are provided on an ongoing basis to address these standards.

PATH Eligibility & Enrollment:

Describe how PATH eligibility is determined, when engagement and enrollment occurs and how each is documented. (Be detailed)

PATH eligibility is determined through outreach, conversations with potential clients, fact finding through data collection on outreach notes forms, referrals from housing entry programs and agency partners, emails/phone calls from those seeking out PATH services, self-reporting of symptoms by outreach contacts, and by the expertise of PATH Outreach Workers (non-clinical determinations) to do so.

PATH Engagement occurs when an eligible PATH Outreach Contact understands what SMI is and what services the PATH Program provides through previous outreach meetings. The PATH Outreach Contact then states an interest in becoming enrolled in the PATH Program. This is when the PATH Engagement process begins and is taken note of through the Homeless Management Information System (HMIS) secured database each PATH worker enters client and contact data into. Engagement tracking can be determined through entering the Outreach Contact name or HMIS # and proper EDA (Enter Data As) project, simple notes and sun-assessment notes through the client profile tab, assessment service through

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the client service tab, and an Engagement Date showcased after the HUD Verification section of the PATH Assessment Tab.

PATH Enrollment occurs when a newly PATH Outreached Contact or a formerly Outreached PATH Contact/current PATH Engagement completes the PATH Enrollment Intake Process with a PATH Outreach Worker. This process contains trackable data elements through the intake such as personal and identifiable information (name, social security number, race, gender, ethnicity, possible disabilities (mental, substance abuse, physical, chronic illnesses, developmental, AIDS), past education, homeless timeline, current homeless situation, domestic violence, self-disclosed/reported SMI or potential SMI diagnosis, contact information, allergies in case of medical emergencies, and other relatable information and mild PHI. Other forms completed in the intake process include necessary Releases of Information (for HMIS data entry and potential ROIs for future/current behavioral health agencies, family members, housing supports, probation/parole officers, other collaborative agency representatives representing client and/or fiduciaries), Self Sufficiency Matrix (trackable rating matrix in which the client ranks themselves in different life topics such as housing, mental health, safety, legal, food and nutrition, and others. Updated during ongoing case and a final matrix during the disenrollment process), HUD Homeless Certification form (self-disclosing current degree of homelessness), Request for Services Form (officially allows PATH to provide services related to the Client's Case Plan through Catholic Charities Community Services and states that PATH has explained and given client copies of the grievance packet/process and client rules and responsibilities, all client information given is secured in the HMIS database and everything in physical file form is secured behind multiple locked doors, lock boxes and/or file cabinets), and the Client Case Forms that contain the case plans and goals that are created/formulated by each PATH Outreach Worker and Client mutually. PATH Enrollment is documented through intake/update/closure and additional case management forms in each client's physical file form and through the HMIS database. Through the entering a client's name or HMIS number, the proper EDA, and after enrollment through the interim tab on the client entry/exit tab (after enrollment for every client/outreach worker interaction for duration of client's enrollment- in person, phone calls, texts, voicemails, emails), the PATH Outreach Worker is responsible for updating the UDE (Universal Data Element) tab, the PATH Assessment tab (including enrollment date, SMI assessment determination date and status, connection with SOAR, current housing situation, income, and HUD determination topics such as disability, health insurance, benefits), the Client Profile Tab (where AZ sub assessment notes and client notes are entered objectively), the Measurements Tab (where initial, updated, and closing self-sufficiency matrix findings are entered), the Case Managements Tab (assigning a primary PATH Outreach Worker as the PATH Client Case Manager in HMIS), the ROI Tab (exercising that the HMIS ROI has been acknowledged and signed by PATH client, allowing client related information to be entered into HMIS by client permission with the timeframe of one year, further actions require updated and signed ROIs), the Service Tab (collecting all services provided to enrolled clients only (except for Engaged and Outreach Contacts that receive Street Outreach Projects and Assessment/Screening entries)), and the Referrals Tab (collecting and tracking all referrals made to PATH Enrolled Clients by PATH Outreach Workers to other agencies and/or service providers (Given or made, Attained by Clients, Outcomes being completed or incomplete).

Describe the behavioral health needs of active duty military service members, returning veterans, and military families in designing and developing their programs and to consider prioritizing this population for services, where appropriate with will be addressed.

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PATH addresses Veterans, Military Personnel, and the families of the aforementioned needs accordingly by first determining if they as individuals qualify, if so, work towards enrollment/case planning, treatment, and housing, and also referring on a case by case basis, those that qualify, to the Department of Veterans Affairs (for Veteran Benefits, Treatment, Counseling, and VA HUD VASH Housing Opportunities), to Catholic Charities Veterans Services and TIP Programs (Further Case Management and Housing Opportunities through the Supportive Services for Veterans and their Families VA grant) or Nation's Finest for the same services (same grant funding), US Vets, and other applicable wraparound Veteran Services. There are times where not all Veterans qualify for Veteran Services due to being dropped from those program services, not meeting past active-duty requirements, or having been dishonorably discharged from active-duty status. These have been former PATH clients and PATH will continue to serve those Veterans that qualify for PATH services, but also do and do not qualify for further Veteran Program services. Regarding active-duty service men and women, it is extremely rare to enroll someone matching that criterion as on-base housing is available (waitlists have been prevalent in cities where military bases are located). PATH would not discriminate as to the needs of active-duty personnel (although more likely that a family member would qualify, as an SMI diagnosis for an active-duty member may result in a medical or psychological discharge from the military). PATH could prioritize this demographic if instructed to do so, but many Veteran Supports are and have been available through referrals, collaborative services with shared clients between PATH and other agencies, and Veterans that no longer or do not qualify for Veteran Services.

Client Information: Describe the demographics of the client population. Use the chart below to identify Projected Outreach, Engagement and Enrollment Goals.

The PATH teams across the 3 served counties will outreach, engage, and enroll clients of very diverse backgrounds, ages, and genders. Based on history of delivering the PATH Program, our typical population is male, Caucasian and in the 40-60 age range. While this is what history shows, our teams are culturally diverse and seek to serve the underserved populations in each are we provide services in. Our target population is those who are experiencing homelessness and serious mental illness, regardless of age, race, gender. We seek the most vulnerable in each county and work to engage for further services and resource referrals. In our initial application we erred in the goal section and offered the 3-year numbers instead of broken out by year. In this IUP we are projecting smaller numbers due to that error and the post covid recovery which has affected our annual numbers negatively.

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Projected Outreach, Engagement & Enrollment Goals						
Projected Number of Persons to be Contacted (Level of Effort)	Projected Number of Persons to be Contacted (Unduplicated)	Projected Number of Persons to be Engaged	Projected Number of Persons to be Enrolled	Projected Number of Persons to be “Literally Homeless”	Projected Number of Persons to be Veterans or Returning Veterans	Projected Number of Persons to be Active Military Service
Mohave 800	Mohave 600	Mohave 250	Mohave 70	Mohave 70	Mohave 15	Mohave 1
Coconino 800	Coconino 600	Coconino 250	Coconino 70	Coconino 70	Coconino 8	Coconino 1
Yavapai 800	Yavapai 600	Yavapai 250	Yavapai 70	Yavapai 70	Yavapai 10	Yavapai 1

NOTE: Include methodologies / tracking tools to be used to ensure goals are reached or exceeded.

HMIS is the primary tool to ensure goals are reached. Data will be reported out monthly through the deliverable system and monthly review will assess actuals vs. projected for the categories above.

Projected Outcomes			
Number of persons referred to and attaining housing.	Number of persons referred to and attaining mental health services.	Number of persons referred to and attaining substance use disorder services.	Number of Community Education/Awareness Events to be provided. (Provide documentation)
200	210	80	6- anticipated Homeless Conference, Veteran Stand Downs, community awareness events post covid.

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Consumer Involvement – Describe how individuals who experience homelessness and designated serious mental illnesses, and family members will be meaningfully involved at the organizational level in the planning, implementation, and evaluation of PATH-funded services. For example, indicate whether individuals who are PATH-eligible are employed as staff or volunteers or serve on governing or formal advisory boards.

Consumers are fully and meaningfully involved and informed in their treatment planning process from beginning to end, and PATH welcomes and encourages family involvement when possible. Catholic Charities utilizes customer satisfaction surveys and solicitations of consumer input, which provide input on the planning, implementation, and evaluation process annually for the PATH Program. Surveys are reviewed annually with staff to brainstorm program improvements that may be possible to address any client concerns, as well as recognize practices that are valued by the consumers we serve. Case management occurs with full participation of the client and is directed by their perceived needs in conjunction with suggestions from a team member. PATH eligible individuals are encouraged to volunteer with PATH, and current staff members have experience with personal homelessness and offer input in planning and development of program guidelines and trainings.

Catholic Charities

4747 N. 7th Avenue
Phoenix, AZ 85013

Contact: Sandi Flores

Email Address: sflores@cc-az.org

Provider Type: Social service agency

PDX ID: AZ-007

State Provider ID: AZ-007

Contact Phone #: (928) 774-9125

- **Local Provider Description** – Provide a brief description of the provider organization receiving PATH funds, including name, type of organization, region served, and the amount of PATH funds the organization will receive.
- **Collaboration with HUD Continuum of Care (CoC) Program** – Describe the organization’s participation with local HUD Continuum of Care (CoC) recipient(s) and other local planning activities and program coordination initiatives, such as coordinated entry activities. If the organization is not currently working with the Continuum(s) of Care, briefly explain the approaches to be taken by the organization to collaborate with the CoC(s) in the areas where PATH operates.
- **Collaboration with Local Community Organizations** – Provide a brief description of partnerships and activities with local community organizations that provide key services (e.g., outreach teams, primary health, mental health, substance use disorder, housing, employment) to PATH-eligible clients, and describe the coordination of activities and policies with those organizations. Provide specific information about how coordination with other outreach teams will be achieved.
- **Service Provision** – Describe the organization’s plan to provide coordinated and comprehensive services to PATH-eligible clients, including:
 - How the services to be provided using PATH funds will align with PATH goals and maximize serving the most vulnerable adults who are literally and chronically homeless, including those with serious mental illness who are veterans and experiencing homelessness, to obtain housing and mental/substance use disorder treatment services and community recovery supports necessary to assure success in long-term housing;
 - Any gaps that exist in the current service systems;
 - A brief description of the current services available to clients who have both a serious mental illness and a substance use disorder; and
 - A brief description of how PATH eligibility is determined, when enrollment occurs, and how eligibility is documented for PATH enrolled clients.
- **Data** – Describe the provider’s participation in HMIS and describe plans for continued training and how providers will support new staff. For any providers not fully participating in HMIS, please describe plans to complete HMIS implementation.
- **Housing** – Indicate the strategies that will be used for making suitable housing available for PATH clients (i.e., indicate the type of housing provided and the name of the agency).
- **Staff Information** – Describe how staff providing services to the population of focus will be sensitive to age, gender, disability, lesbian, gay, bisexual, and transgender, racial/ethnic, and differences of clients. Describe the extent to which staff receive periodic training in cultural competence and health disparities.
- **Client Information** – Describe the demographics of the client population, the projected number of adult clients to be contacted and enrolled, and the percentage of adult clients to be served using PATH funds who are literally homeless.
- **Consumer Involvement** – Describe how individuals who experience homelessness and have serious mental illnesses, and family members will be meaningfully involved at the organizational level in the planning, implementation, and evaluation of PATH-funded services. For example, indicate whether individuals who are PATH-eligible are employed as staff or volunteers or serve on governing or formal advisory boards.
- **Budget Narrative** – Provide a budget narrative that includes the local-area provider’s use of PATH funds.

I certify that the responses to this Narrative Question in the FY 2020 PATH Application are still accurate. Yes No

Planning Period From 7/1/2022 to 6/30/2023

The state can either enter all the IUPs and associated budgets as in prior years, or they may allow IUP users to enter their own information into WebBGAS. For more information on allowing IUP users to enter their own details, please see the tutorial under the Training Tab in WebBGAS that instructs states and IUP providers on this new process.

* Indicates a required field

Category	Federal Dollars	Matched Dollars	Total Dollars	Comments
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a. Personnel 61,663.00 21,666.00 83,329.00

Position *	Annual Salary *	% of time spent on PATH *	PATH-Funded FTE	PATH-Funded Salary *	Matched Dollars *	Total Dollars	Comments
Outreach worker	34,500.00	100.00 %	0.71	24,627.00	8,653.00	33,280.00	<input type="text" value="\$ 1,220 In Kind Dollars"/>
Outreach worker	34,500.00	100.00 %	0.71	24,627.00	8,653.00	33,280.00	<input type="text" value="\$1,220 In Kind Dollars"/>
PATH Administrator	60,000.00	10.00 %	0.04	2,466.00	867.00	3,333.00	<input type="text" value="\$2,667 In Kind Dollars"/>
Other (Describe in Comments)	50,000.00	33.00 %	0.19	9,651.00	3,391.00	13,042.00	<input type="text" value="Team Leader (\$3,458 In Kind Dollars)"/>
Other (Describe in Comments)	45,760.00	10.00 %	0.01	292.00	102.00	394.00	<input type="text" value="Data Specialist (\$4,182 In Kind Dollars)"/>

Category	Percentage	Federal Dollars *	Matched Dollars *	Total Dollars	Comments
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b. Fringe Benefits 22.32 % \$ 18,597.00 \$ 6,534.00 \$ 25,131.00

Category	Federal Dollars	Matched Dollars	Total Dollars	Comments
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c. Travel \$ 3,922.00 \$ 1,377.00 \$ 5,299.00

Line Item Detail *	Federal Dollars *	Matched Dollars *	Total Dollars	Comments
Gas	\$ 3,712.00	\$ 1,304.00	\$ 5,016.00	<input type="text" value="\$1,140 In Kind Dollars"/>
Mileage Reimbursement	\$ 210.00	\$ 73.00	\$ 283.00	<input type="text"/>

d. Equipment \$ 0.00 \$ 0.00 \$ 0.00

No Data Available

e. Supplies \$ 3,763.00 \$ 1,321.00 \$ 5,084.00

Line Item Detail *	Federal Dollars *	Matched Dollars *	Total Dollars	Comments
Client: Outreach Supplies/Hygiene kits/Misc.	\$ 422.00	\$ 148.00	\$ 570.00	<input type="text" value="\$1,710 In Kind Dollars"/>
Client: Other Supplies (Describe in Comments)	\$ 2,708.00	\$ 951.00	\$ 3,659.00	<input type="text" value="Emergency Items Sunscreen, Thongs (\$1,140 In Kind)"/>

					Dollars)
Client: Other Supplies (Describe in Comments)	\$ 633.00	\$ 222.00	\$ 855.00		Bus tokens (\$855 In kind dollars)
Client: Other Supplies (Describe in Comments)	\$ 0.00	\$ 0.00	\$ 0.00		Petty Cash for Emergencies (\$1,550 In Kind Dollars)
Client: Other Supplies (Describe in Comments)	\$ 0.00	\$ 0.00	\$ 0.00		Trac Phones (\$1,140 In Kind Dollars)

f. Contractual	\$ 0.00	\$ 0.00	\$ 0.00	
No Data Available				

g. Housing	\$ 1,266.00	\$ 446.00	\$ 1,712.00	
Line Item Detail *	Federal Dollars *	Matched Dollars *	Total Dollars	Comments
Other (Describe in Comments)	\$ 1,266.00	\$ 446.00	\$ 1,712.00	Housing Assistance (\$4,038 In Kind Dollars)

h. Construction (non-allowable)

i. Other	\$ 18,682.00	\$ 6,564.00	\$ 25,246.00	
Line Item Detail *	Federal Dollars *	Matched Dollars *	Total Dollars	Comments
Office: Insurance (Property, Vehicle, Malpractice, etc.)	\$ 7,131.00	\$ 2,505.00	\$ 9,636.00	
Office: Misc (Copying, Courier, Postage, etc.)	\$ 560.00	\$ 197.00	\$ 757.00	
Office: Rent Expenses	\$ 7,682.00	\$ 2,699.00	\$ 10,381.00	\$2,099 In Kind Dollars
Office: Utilities/Telephone/Internet	\$ 266.00	\$ 94.00	\$ 360.00	In Kind \$1,235
Office: Other (Describe in Comments)	\$ 1,272.00	\$ 447.00	\$ 1,719.00	Cell Phone Purchase/Usage/Monthly Usage (\$1,667 In Kind Dollars)
Office: Other (Describe in Comments)	\$ 1,110.00	\$ 390.00	\$ 1,500.00	Vehicle Maintenance (\$1,500 In Kind Dollars)
Office: Other (Describe in Comments)	\$ 252.00	\$ 88.00	\$ 340.00	Depreciation
Office: Other (Describe in Comments)	\$ 118.00	\$ 42.00	\$ 160.00	Office Supplies
Staffing: Training/Education/Conference	\$ 291.00	\$ 102.00	\$ 393.00	

j. Total Direct Charges (Sum of a-i)	\$ 107,893.00	\$ 37,908.00	\$ 145,801.00	
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Category	Federal Dollars *	Matched Dollars *	Total Dollars	Comments
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k. Indirect Costs (Administrative Costs)	\$ 15,387.00	\$ 4,898.00	\$ 20,285.00	\$20,482.00 In-Kind
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l. Grand Total (Sum of j and k)	\$ 123,280.00	\$ 42,806.00	\$ 166,086.00	
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Source(s) of Match Dollars for State Funds:				
Estimated Number of Persons to be Contacted:	800	Estimated Number of Persons to be Enrolled:		70
Estimated Number of Persons to be Contacted who are Literally Homeless:	70			
Number staff trained in SOAR in grant year ending in 2021:	1	Number of PATH-funded consumers assisted through SOAR:		0

**Catholic Charities
Budget Narrative & Justification
Mohave County
July 1, 2022 through June 30, 2023**

A. Personnel:

Position Title (1)	Staff Name (2)	Key Staff (3)	Annual Salary/Rate (4)	Level of Effort (5)	Total Salary Charge to Award (6)	In-Kind (7)
PATH Administrator	Camie Rasband	X	\$60,000	10%	\$3,333	\$2,667
Team Lead	Richard Brust		\$50,000	33%	\$13,042	\$3,458
Outreach Specialist	Patty Jacques		\$34,500	100%	\$33,280	\$1,220
Outreach Specialist	Chris Dyer		\$34,500	100%	\$33,280	\$1,220
Data Specialist	Mary McCoy		\$45,760	10%	\$394	\$4,182
Total Request					\$83,329	\$12,747

JUSTIFICATION: 2 outreach specialists, percentage of Administrator and 1/3 of team lead. Data Specialist is partially in-kind in Mohave County and fully in-kind in additional counties.

B. Employee Related Expenditure:

Position (1)	Name (2)	Rate (3)	Total Salary Charged to Award (4)	Total Fringe Charged to Award (5)	In-Kind (6)
PATH Admin	CR	36%	\$3,333	\$1,133	\$1,027
Team Lead	RB	36%	\$13,042	\$4,300	\$1,640

**Catholic Charities
Budget Narrative & Justification
Mohave County
July 1, 2022 through June 30, 2023**

Position (1)	Name (2)	Rate (3)	Total Salary Charged to Award (4)	Total Fringe Charged to Award (5)	In-Kind (6)
Outreach Specialist	PJ	36%	\$33,280	\$8,383	\$4,037
Outreach Specialist	CD	36%	\$33,280	\$11,315	\$1,105
Data Specialist	MM	36%	\$394	\$0	\$1,647
Total Request				\$25,131	\$9,456

JUSTIFICATION: 36% of salary costs is agency percentage

Fringe Category	Rate
Retirement	9.5
FICA	7.65
Insurance	18.85
Social Security	
Total	36%

Professional & Outside Services

Name (1)	Service (2)	Rate (3)	In-Kind (4)	Other (5)

JUSTIFICATION:

C. Travel:

**Catholic Charities
Budget Narrative & Justification
Mohave County
July 1, 2022 through June 30, 2023**

Please note: All travel expenditures will require itemized receipts and will not exceed the State allowable rates which can be found in the State of Arizona Accounting Manual (SAAM) <https://gao.az.gov/publications/saam>.

Purpose (1)	Destination (2)	Item (3)	Calculation (4)	Travel Cost Charged to the Award (5)	In-Kind (6)
Staff mileage using own vehicle	Various/outreach		.445 X 53 miles per month	\$283	\$0
Fuel	Various/outreach		1,152.8 miles per month X \$.445/mile	\$5,016	\$1,140
Total Request				\$5,299	\$1,140

JUSTIFICATION: Outreach efforts throughout Mohave County

D. Occupancy:

Item(s) (1)	Quantity (2)	Amount (3)	% Charged to the Award (4)	Total Cost Charged to the Award (5)	In-Kind (6)
Occupancy	2 offices @ \$520.00 per office per month	\$12,480	83%	\$10,381	\$2,099
Utilities	\$51.46/mo X 2 offices X 12 months	\$1,235			\$1,235
Total Request				\$10,381	\$3,334

JUSTIFICATION: space costs for staff including utilities, this represents 2 100% dedicated cubicle spaces for 2 staff plus a square footage based share of the common areas of the office (conference room, file room, kitchen, rest rooms, etc.) which allow space for supervisor and team lead when visiting the BHC office.

E. Housing :

**Catholic Charities
Budget Narrative & Justification
Mohave County
July 1, 2022 through June 30, 2023**

Housing Assistance (1)	Cost (3)	In-Kind (4)
Housing Assist for enrollees \$250 per client X 23 clients – max 20% of awarded funds	\$1,712	\$4,038
Total Request	\$1,712	\$4,038

JUSTIFICATION: enrolled Client assistance for move in or eviction prevention to ensure permanent housing

F. Other Operating:

In the case of a subcontract relationship, costs must be broken down in detail and a narrative justification provided. A separate itemized budget is required for each contractor. If applicable, number of clients should be included in the costs.

Name (1)	Service (2)	Rate (3)	Other (4)	Cost (5)	In-Kind (6)
Vehicle Insurance Vehicle Maintenance x 2 (lease agreement for 3 rd vehicle includes maintenance)	Owned vehicles	3 vehicles @\$267.67/month		\$9,636	\$0
		\$125/mo X 2 vehicles X 12		\$1,500	\$1,500
Phone (desk and cell)	2 desk and 4 cell phones	Desk \$15/mo Cell 4 X \$70.54/month		\$360 \$1,719	\$1,667
Office supplies	Pens/paper/ Staples/files	Various		\$161	\$0
copying	Copying	630 copies X .10 X 12 mo		\$756	\$0
Training	Paper/notebooks	\$98.25 X 4 emp		\$393	\$0

**Catholic Charities
Budget Narrative & Justification
Mohave County
July 1, 2022 through June 30, 2023**

Name (1)	Service (2)	Rate (3)	Other (4)	Cost (5)	In-Kind (6)
PATH Enrollee assistance	Petty cash, emergency items, food, hygiene, bus tokens, trac phones			\$5084	\$6,395
Vehicle depreciation	Owned vehicles \$9.44 X 3 vehicles X12 months			\$340	\$0
Total Request				\$19,949	\$9,562

JUSTIFICATION: vehicles depreciated per GAAP rules, desk and cell phones for communication, office supplies and copying for client file maintenance, training for staff as required for contract and COA accreditation, assistance for enrollees per case plan. Note: Food is to be used for outreach and is limited. The contractor is required to cost allocate those budgetary items that are utilized for more than one funding source and maintain records per State of Arizona Accounting Manual and 2 CFR part 200.

G. Indirect Cost Rate (See Footnote below):

Calculation (1)	Indirect Cost Charged to the Award (2)	In-Kind (3)
Salary + ERE X Fed approved rate of 31.2%	\$20,285	\$20,482
Total Request	\$20,285	\$20,482

JUSTIFICATION: Federally approved rate (letter previously provided)

FOOTNOTE:

(1) Please specify whether utilizing indirect or administrative overhead.

**Catholic Charities
Budget Narrative & Justification
Mohave County
July 1, 2022 through June 30, 2023**

(2) For administrative overhead, please provide a justification of costs included in administration.

(3) For indirect costs, please specify if using the de minimis rate or provide a copy of the approved indirect cost agreement. The de minimis rate of 10 percent for non-federal entities is subject to Uniform Guidance, 20 CFR 200.414.

H. Total Project Costs (Do not include In-Kind):

TOTAL REQUEST – TOTAL PROJECT COSTS – (Sum of Total Direct Costs and Indirect Costs)	\$166,086
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I. BUDGET SUMMARY (this document should match the Budget Outline document):

Category	Year 1	In-Kind Total Project Costs	Total Project Costs
Personnel	\$83,329	\$12,747	\$96,076
Employee Related Expenditures	\$25,131	\$9,456	\$34,587
Professional & Outside Services	0	0	0
Travel	\$5,299	\$1,140	\$6,439
Occupancy	\$10,381	\$3,334	\$13,715
Housing (Limited to 20%)	\$1,712	\$4,038	\$5,750
PATH Enrollee	\$5,084	\$6,395	\$11,479
Other Operating	\$14,865	\$3,167	\$18,032
Indirect Costs	\$20,285	\$20,482	\$40,767
Total Request	166,086	60,759	226,845

Projects for Assistance in Transition From Homelessness (PATH) Budget Outline

PATH Contractor Name

Catholic Charities - Mohave County
July 1, 2022 through June 30, 2023

County Service Area	Mohave			FEDERAL PATH GRANT	NON FEDERAL STATE MATCH	TOTAL FEDERAL/STATE	IN-KIND	SUB- CONTRACTOR(S) IN-KIND, IF APPLICABLE
PERSONNEL								
Position	Name	Salary	Level Of Effort					
PATH Administrator	Rasband, Camie	60,000	0.10	\$ 2,466	\$ 867	\$ 3,333	\$ 2,667	\$ -
Team Leader	Brust, Richard	50,000	0.33	\$ 9,651	\$ 3,391	\$ 13,042	\$ 3,458	\$ -
Outreach Specialist	P.Jacques	34,500	1	\$ 24,627	\$ 8,653	\$ 33,280	\$ 1,220	\$ -
Outreach Specialist	C.Dyer	34,500	1	\$ 24,627	\$ 8,653	\$ 33,280	\$ 1,220	\$ -
Data Specialist	M.McCoy	45,760	0.10	\$ 292	\$ 102	\$ 394	\$ 4,182	\$ -
Program Supervisor								
Other								
TOTAL PERSONNEL				\$ 61,663	\$ 21,666	\$ 83,329	\$ 12,747	\$ -
EMPLOYEE RELATED EXPENSES (ERE)				18,597	6,534	25,131	9,456	
TOTAL ERE				\$ 18,597	\$ 6,534	\$ 25,131	\$ 9,456	\$ -
PROFESSIONAL AND OUTSIDE SERVICES								
				\$ -	\$ -	\$ -	\$ -	\$ -
TOTAL PROF & OUTSIDE				\$ -	\$ -	\$ -	\$ -	\$ -
TRAVEL								
Mileage Reimbursement @.445/mile				\$ 210	\$ 73	\$ 283	\$ -	\$ -
Gas (100% PATH dedicated Vehicles)				\$ 3,712	\$ 1,304	\$ 5,016	\$ 1,140	\$ -
Out of State Travel - Airfare								
Out of State Travel - Lodging								
Out of State Travel - Per Diem								
Out of State Travel - Ground Transportation/Misc								
TOTAL TRAVEL				\$ 3,922	\$ 1,377	\$ 5,299	\$ 1,140	\$ -
OCCUPANCY								
Office Rent Expenses				\$ 7,682	\$ 2,699	\$ 10,381	\$ 2,099	\$ -
Office Utilities				\$ -	\$ -	\$ -	\$ 1,235	\$ -
TOTAL OCCUPANCY				\$ 7,682	\$ 2,699	\$ 10,381	\$ 3,334	\$ -
HOUSING (Limited to 20% as defined in PATH Legislation)								
Housing Assistance ⁽¹⁾				\$ 1,266	\$ 446	\$ 1,712	\$ 4,038	\$ -
TOTAL HOUSING				\$ 1,266	\$ 446	\$ 1,712	\$ 4,038	\$ -
PATH ENROLLEE								
Petty Cash for Emergencies (Must submit receipts with CERs)							\$ 1,550	\$ -
Outpatient Services				\$ -	\$ -	\$ -	\$ -	\$ -
Medication Supplies				\$ -	\$ -	\$ -	\$ -	\$ -
Prescription Co-pays				\$ -	\$ -	\$ -	\$ -	\$ -
Utility Turn-on's				\$ -	\$ -	\$ -	\$ -	\$ -
Emergency Items - sunscreen, thongs				\$ 2,708	\$ 951	\$ 3,659	\$ 1,140	\$ -
Medical Contract Services				\$ -	\$ -	\$ -	\$ -	\$ -
Hygiene kits				\$ 422	\$ 148	\$ 570	\$ 1,710	\$ -
Client Supplies - Bus tokens				\$ 633	\$ 222	\$ 855	\$ 855	\$ -
Client Supplies - trac phones				\$ -	\$ -	\$ -	\$ 1,140	\$ -
TOTAL PATH ENROLLEE				\$ 3,763	\$ 1,321	\$ 5,084	\$ 6,395	\$ -
OTHER OPERATING								
Vehicle Licenses				\$ -	\$ -	\$ -	\$ -	\$ -
Vehicle Maintenance				\$ 1,110	\$ 390	\$ 1,500	\$ 1,500	\$ -
Vehicle Insurance				\$ 7,131	\$ 2,505	\$ 9,636	\$ -	\$ -
Leased Vehicle				\$ -	\$ -	\$ -	\$ -	\$ -
Training and Conference Fees				\$ 291	\$ 102	\$ 393	\$ -	\$ -
Copying				\$ 560	\$ 197	\$ 757	\$ -	\$ -
Office Supplies				\$ 118	\$ 42	\$ 160	\$ -	\$ -
Office Desk Telephones				\$ 266	\$ 94	\$ 360	\$ -	\$ -
Depreciation				\$ 252	\$ 88	\$ 340	\$ -	\$ -
Janitorial				\$ -	\$ -	\$ -	\$ -	\$ -
Landscaping				\$ -	\$ -	\$ -	\$ -	\$ -
Desk/Laptop				\$ -	\$ -	\$ -	\$ -	\$ -
Computers				\$ -	\$ -	\$ -	\$ -	\$ -
Software				\$ -	\$ -	\$ -	\$ -	\$ -
Postage				\$ -	\$ -	\$ -	\$ -	\$ -
Cell Phone Purchase/Monthly Usage				\$ 1,272	\$ 447	\$ 1,719	\$ 1,667	\$ -
TOTAL OTHER OPERATING				\$ 11,000	\$ 3,865	\$ 14,865	\$ 3,167	\$ -
INDIRECT COST ⁽²⁾⁽³⁾⁽⁴⁾				\$ 15,387	\$ 4,898	\$ 20,285	\$ 20,482.00	\$ -

Projects for Assistance in Transition From Homelessness (PATH) Budget Outline

INDIRECT COST PERCENTAGE ⁽²⁾⁽³⁾⁽⁴⁾	31.20%	0.00%	0.00%	0.00%	0.00%
	FEDERAL	STATE	TOTAL	IN-KIND	
GRAND TOTAL	\$ 123,280	\$ 42,806	\$ 166,086	\$ 60,759	\$ -
GRANT AMOUNT REQUESTED	\$ 166,086	PLUS IN-KIND	\$ 60,759	=Total Budget	\$ 226,845

FOOTNOTES:

- (1) Please specify the types of housing assistance included in this line item.
- (2) Please specify whether utilizing indirect or administrative overhead.
- (3) For administrative overhead, please provide a justification of costs included in administration.
- (4) For indirect costs, please specify if using the de minimis rate or provide a copy of the approved indirect cost agreement. The de minimis rate of 10 percent for non-Federal entities is subject to Uniform Guidance, 2 CFR 200.414.

Additional Requirements:

- A. All travel costs must comply with Arizona State Travel Policy which can be found at the following link: <https://gao.az.gov/travel/welcome-gao-travel>. AHCCCS requires detailed receipts for reimbursement of travel expenditures.
- B. Contractor must submit monthly tracking logs & receipts for Trac phones, gift cards, bus tokens, petty cash, and other items as required by AHCCCS.
- C. Contractor budget is subject to 2 CFR Grants & Agreements, Part 200, Uniform Administrative Requirements, Cost Principles, and Audit Requirements as codified by HHS 45 CFR Part 75 for federal funds.

Catholic Charities Community Services, Inc
Projects for Assistance in Transition from Homelessness (PATH)
Contractor Intended Use Plan (IUP)
Contract Period July 1, 2022 – June 30, 2023

Purpose of Intended Use Plan (IUP): Each IUP must be saved in Microsoft Word, use Times New Roman 12, line spacing single space, and all margins at least one inch each. Also, the IUP must be named with the provider agency name, and a subsequent word which indicates the content (for example: ABC agency_program narrative):

Local Provider Description: Provide a brief description of the provider organization receiving PATH funds, including name, type of organization, region served, and the amount of PATH funds the organization will receive.

Since 2006, Catholic Charities Community Services, a 501c3 Non-Profit social service agency, has provided the only adult homeless outreach services in Northern Arizona through the Projects for Assistance in Transition from Homelessness (PATH) grant. Services are currently provided in Coconino, Mohave and Yavapai Counties. In the next year this program has been awarded:

Coconino County Federal - \$63,517 State - \$22,167 Total - \$85,684
Mohave County Federal - \$140,992 State - \$49,207 Total - \$190,199
Yavapai County Federal - \$ 61,522 State - \$21,362 Total - \$82,884

Collaboration with HUD Continuum of Care (CoC) Program: Describe the organization's participation with local HUD Continuum of Care (CoC) recipient(s) and other local planning activities and program coordination initiatives, such as coordinated entry activities.

CCCS participates in the local as well as Balance of State Continuum of Care groups, as well as the Homeless Task Force in Mohave County. PATH has historically been one of the lead agencies for the annual HUD Point in Time Count across all counties. Additionally, the PATH administrator is on the governance committee for the AZ balance of state COC to ensure our voice is heard at the state level. We attend statewide conferences for networking purposes to ensure we have the most current information and have access to funders and state officials to express the needs of those we are serving. We are a member of the Arizona Housing Coalition which advocates at the state and federal level for individuals experiencing homelessness in our state and local communities. As a member we offer input related to the rural areas of Arizona and the unique needs of the populations in those areas. CCCS is also one of two lead agencies who operate the Front Door, the Coordinated Entry process in Coconino County. We opened our doors for Coordinated Entry in 2017 and have worked diligently with community partners to create and maintain a system that allows walk in intakes, Monday through Friday complete with a mobile service as needed. In addition, there is weekly Case Conferencing at the CCCS office where those experiencing homelessness are prioritized, referrals made, and followed up with by the group. In both Yavapai and Mohave counties, CCCS is one of several “no wrong doors” where intakes are completed. We participate in case conferencing with both veteran and not veteran groups, in locations where case conferencing is separate. Working together with agencies through the Coordinated Entry process is critical to serve those most vulnerable in our communities. PATH plays an important role in Coordinated Entry, as our rural areas are so geographically vast. When someone comes up on the By Name List, and is not currently working with another agency, the community relies on PATH outreach to help find them to connect to housing resources. In addition,

Catholic Charities Community Services, Inc
Projects for Assistance in Transition from Homelessness (PATH)
Contractor Intended Use Plan (IUP)
Contract Period July 1, 2022 – June 30, 2023

PATH has the ability to do intakes in the field helping communities connect to those who would not make it into the offices on their own. This takes patience and skills the path team excels at, as this is not accomplished in just one encounter. In addition, PATH teams help get those waiting to get into housing document ready, they provide letters verifying homelessness and disability verifications. This is an important step to getting people housed in a timely manner.

If the organization is not currently working with the Continuum(s) of Care, briefly explain the approaches to be taken by the organization to collaborate with the CoC(s) in the areas where PATH operates.

N/A

Collaboration with Local Community Organizations: Provide a brief description of partnerships and activities with local community organizations that provide key services (e.g., outreach teams, primary health, mental health, substance use disorder, housing, employment) to PATH-eligible clients. Describe the coordination of activities and policies with those organizations. Provide specific information about how coordination with other outreach teams will be achieved.

A Memorandum of Understanding (MOU) is active with both Health Choice Integrated Care/Blue Cross Blue Shield and Mohave Mental Health. These documents outline service provisions for PATH clients in each of the three proposed counties through Health Choice/BCBS and specifically for Mohave County. MOUs continue to be developed with the responsible agencies in each of the other areas. These partnerships do and will include obtaining SMI assessments, determinations, and case plans. Monthly connections with Case Managers will be conducted to ensure clients are obtaining needed behavioral health services and working toward stable housing within the community. Should the responsible agencies need emergency assistance for PATH clients or potential PATH clients, Catholic Charities has a rotating on-call staff member. We anticipate formal MOUs with The Guidance Center and Southwest Behavioral in Coconino County; Spectrum Healthcare and Polara Health in Yavapai County; and Mohave Mental Health Clinics and Southwest Behavioral Health Services in Mohave County in the next few months. These MOU's will be critical to providing ongoing services to clients exiting the PATH program to ensure future success. Formal policies are in place for referrals for clients willing to engage in behavioral health services, as well as policies to ensure diagnosis are available to team members for file compliance. Staff follow policy guidelines for outreach and enrollment, ensuring program and agency compliance and as a guideline for staff to navigate through the case management process. PATH staff works closely with the Regional Behavioral Health Authority and responsible agencies to break down barriers to treatment and ensure ongoing assistance for individuals in need of housing stability. Some agencies the PATH Program collaborates with include Halo House (for victims of domestic violence), City of Flagstaff (providing additional funding for outreach activities), Flagstaff Shelter Services (shelter services for clients wishing to come in from outside), Salvation Army (providing food and housing financial assistance for clients), St. Vincent de Paul (Thrift store partnership for clothing and work items), Nation's Finest (for veteran clients to engage with VA services), The Guidance Center (for behavioral health needs), Catholic Charities internally through the Family Shelter, Housing Program, and Supportive Services for Veteran Families (SSVF), The Circle of Page (local networking group for social service providers), The Flagstaff Family Food Center (for team

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members to obtain food for outreach and clients with food insecurity), The Williams Family/Community Outreach Coordinator(to engage families experiencing homelessness), Hope Cottage (shelter for women and children encountered through outreach), Yavapai County Probation Office (to assist clients in addressing justice involvement requirements), Prescott Area Shelter Services, Southwest Behavioral Health, Northern Arizona Council of Governments (NACOG), Spectrum Healthcare, St. Mary's Food Bank, Coconino County CoC, Coconino County Community Services (in both Page and Flagstaff), Nation's Finest and the Prescott VA. In addition, we are working with Spectrum Healthcare, Verde Valley Medical Center, Mohave/Yavapai/Coconino County Jails, Mental Health Court, Mohave Mental Health Clinics, Western Arizona Council of Governments (WACOG), Victim Witness Advocates in Williams and Grand Canyon Village, the Flagstaff, Prescott, Williams, Sedona, Cottonwood, Kingman, and Bullhead City Police Departments, the Congress, Yarnell, Skull Valley, Prescott, Flagstaff, Williams, Ash Fork, Lake Havasu City, Bullhead City, Kingman Fire Departments, Flagstaff Medical Center Social Workers, the Mohave, Coconino, and Yavapai Sheriff Departments, Terros Health in Flagstaff and Mohave County, and United Way in all areas. These agency partnerships help move consumers toward self-sufficiency and improve their access to resources by (1) sharing knowledge on resource availability that is conveyed to consumers, (2) providing tangible resources to distribute to cons.

PATH staff also work closely with Catholic Charities' Veteran Services program. Clients can be dually enrolled in both PATH and Veteran Services, thereby increasing their opportunities for both behavioral health and veteran-qualified services in the area of housing and medical/behavioral health needs. Coordination with other outreach teams occurs with the Veteran Services Program in Coconino and Yavapai Counties. This coordination leads to ensuring potential clients relate to the proper program and Catholic Charities Community Services, Inc. resources and ensures a wider coverage area during outreach. Catholic Charities PATH team is the only PATH outreach service in Mohave County.

**Service Provision: Describe the organization's plan to provide coordinated and comprehensive services to PATH-eligible clients, including:
Describe the organization's plan to provide coordinated and comprehensive services to PATH-eligible clients, including:**

A brief description of the current services available to clients who have both a serious mental illness and a substance use disorder; and

How services to active duty military service members, returning veteran and military families will be considered and prioritized.

A brief description of how PATH eligibility is determined, when enrollment occurs, and how eligibility is documented for PATH enrolled clients.

Any gaps that exist in the current service systems;

How the services to be provided using PATH funds will align with PATH goals and maximize serving the most vulnerable adults who are literally and chronically homeless, including those with serious mental illness who are veterans and experiencing

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homelessness, to obtain housing and mental/substance use disorder treatment services and community recovery supports necessary to assure success in long-term housing;

The Catholic Charities PATH Outreach Program provides outreach services and interventions designed to assist individuals who meet the federal definitions of homelessness or imminent risk of homelessness in Coconino, Mohave, and Yavapai Counties. Teams of two search streets, vacant buildings, homeless shelters, river bottoms, forests, desert campsites, parks, jails, hot meal centers, food pantries, jails, hospitals (including places where veterans' services are provided), neighborhoods and anywhere else homeless individuals may camp or frequent to locate individuals experiencing homelessness. During outreach activities, the teams distribute life-sustaining supplies; provide regularly updated handouts detailing available social services; educate people on local camping rules and regulations; and transport clients directly to detoxification centers, medical treatment, and psychiatric care. Outreach is regularly conducted in inclement weather and available on-call after hours. All individuals experiencing homelessness are served, and those with serious mental illness and/or a co-occurring substance abuse disorder are enrolled in PATH. Outreach efforts include people of all faiths, backgrounds and abilities including victims of domestic violence, elderly individuals, individuals living with a serious mental illness who are incarcerated, American Indians, families, abandoned or runaway youth, veterans, active-duty military and military families, and LGBTQ populations. One team of ~~two~~ three PATH outreach staff is assigned to each geographic service area. ~~Two~~ Three staff members are formerly homeless which adds a level of understanding and empathy to service provision. PATH teams strive to maintain regular contact with the individual/family experiencing homelessness. Enrolled clients receive ongoing case management, and have access to move-in assistance, bus passes, clothing vouchers, motel assistance, eviction prevention funds, etc. They are also connected to services including, but not limited to, counseling, financial education, and identification acquisition.

Specific benefits of the program's homeless outreach services include 1) access to life-sustaining, emergency resources such as tents, sleeping bags, water, coats, gloves; 2) education on locally available social services and treatment options as well as acceptable and safe camping practices; 3) field assessments and evaluations; 4) assistance in locating cooling or heating stations during extreme weather; 5) transportation in the form of client transport to behavioral health appointments and bus passes and tickets; 6) linkage to the behavioral health crisis system; 7) case management designed to connect and enroll participants in mental health and/or substance abuse treatment; 8) completion of the VI SPDAT and entry into HMIS data system to facilitate a coordinated care approach to service provision; 9) transition into the T/RBHA case management system (Northern Arizona Regional Behavioral Health Authority); 10) assistance getting prescriptions filled; 11) assistance completing appropriate applications and necessary follow-up to ensure eligible persons are in receipt of SSI/SSDI through the SOAR program, housing resources (Section 8, Project Based Housing, UD 202/811s, HEARTH, and Low Income Housing Tax Credits), income resources (VA benefits, General Assistance, Temporary Assistance for Needy Families, Food Stamps and employment services); 12) discharge planning for individuals exiting a medical or treatment center who need resources to avoid stressors which may lead back to inpatient care (such as lack of shelter); 13) coordination with emergency services when a client requires medical attention; 14) moving assistance; 15) hotel vouchers for medically fragile individuals, particularly during inclement weather; and 16) housing dollars for permanent placements, 17) staff certified in instructing Mental Health First Aid to law enforcement, jail staff, community partners, and collaborative agency staff to expand awareness of mental illness/behavioral health concerns, 18) staff collaborates with Health Choice and NARHBA to present anti-stigma presentations to community partners to expand awareness related to homeless issues, 19) outreach teams provide bins containing life sustaining supplies and resource/contact information to rural points of interest that have interactions with homeless individuals such as food banks/drop off

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locations, sheriff departments, police departments, victim witness advocates, and fire departments which also increases collaboration efforts for PATH to interact and possibly transport homeless individuals to places with more resources.

For clients suspected to have both a serious mental illness and a substance abuse disorder, after an initial contact has generated trust, and no later than the third contact, the PATH team arranges an assessment to determine if indeed the client has mental illness and/or a substance use disorder. PATH eligible individuals with co-occurring disorders receive outreach and are referred to The Guidance Center in Flagstaff and/or Williams, Mohave Mental Health Clinics in Mohave County, Encompass in Page and Fredonia, Spectrum Healthcare in Sedona and Cottonwood, Health in Prescott and Southwest Behavioral & Health Services in Flagstaff, Mohave County, and Prescott Valley for treatment services. Those enrolled in the PATH Program receive case management services through a local behavioral health provider. Consumers receive a comprehensive assessment with emphasis on the unique needs and cultural preferences of the individual, and a consumer-driven service plan is developed to target individual needs. Navigation services include, but are not limited to, assistance with obtaining identification documents; applying for entitlements such as food stamps, general assistance, Medicare/Medicaid, or SSI/SSDI; coordination of health care or obtaining a primary care physician once healthcare benefits are in place; placement in a shelter; and mental health treatment. A rapport is built with the consumer to assist them in meeting self-identified goals of their service. Catholic Charities believes that sustained mental health treatment is unlikely to occur outside of stable living arrangements so, as much as possible, enrolled participants are encouraged to choose housing goals that lead to permanent housing.

To determine SMI within 90 days, enrolled PATH clients complete Release of Information forms during the intake process for their current behavioral health provider or where they wish to go to receive SMI determination and treatment. The form requires the chosen behavioral health agency to provide notification to Catholic Charities of an SMI diagnosis via mail, email, or fax. These documents are maintained in client files. Homeless Outreach staff inquire about a client's diagnosis during every contact with the client and by communicating with the client's assigned Case Manager. Alternatively, a Title XIX verification request can be submitted through the Regional Behavioral Health Authority. Such requests are fulfilled within one week.

Through scheduling, Catholic Charities provides a weekly on call status for each PATH Homeless Outreach staff member. In all three counties, one staff member responds to on-call emergencies every first and third week of each month, while the other staff responds every second and fourth week. During winter outreach, however, on call scheduling is dependent on the amount of location/inclement weather driving training each staff member has. The PATH Supervisor trains the outreach staff until they are adequately educated to complete an entire night leading the outreach effort with volunteers, interns, or inner-agency/outer-agency workers. During severe snowstorms, PATH utilizes an all-hands-on-deck approach, having one team outreach western Flagstaff/outlying areas and the other team outreaching eastern Flagstaff/outlying areas. In the extreme heat areas of Mohave County, PATH staff coordinates with local providers for water drives and safe daytime provisions for this population to prevent heat-related deaths.

PATH funds are leveraged to create the greatest impact possible for the program's clients. PATH funds are often combined with support from fundraisers, donations, and other funders. To boost the program's ability to serve clients with needs not covered by PATH funding, additional support is sought out through local foundations and United Way. Additionally, the PATH Program collaborates with other agencies such as behavioral health, Goodwill, Salvation Army, St. Vincent De Paul and others to assist clients in meeting their needs while maximizing program funding.

Gaps in service delivery are identified through client satisfaction surveys conducted annually and through quarterly file and program reviews as part of Catholic Charities' internal program quality improvement

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(PQI). These gaps are addressed in monthly staffing's to improve the program. Some gaps in the current service systems in the counties served by the PATH Program include the amount of time it takes in some areas to obtain the SMI diagnosis, lack of affordable housing opportunities, and the lack of available jobs. The implementation of a Coordinated Entry System in each county is helping to identify the housing gaps in each rural community.

Data: Describe the provider's participation in HMIS and describe plans for continued training and how PATH contractors will support new staff. For any providers not fully participating in HMIS, please describe plans to complete HMIS implementation.

Catholic Charities has been utilizing the HMIS system since program inception in 2006. Our efforts now include meeting the upgraded data standards, ongoing training for staff to ensure all new data standards are understood and up to date, and regular report reviews to ensure compliance with the data standards adopted by SAMSHA. We will continue to work closely with the HMIS Administrator to ensure staff trainings are current, and the program's administrative assistant will pull weekly and monthly data quality reports to ensure full compliance. All case management activities will be recorded and tracked within HMIS, and the program will ensure all new staff participate in HMIS training within 30 days of hire. HMIS collects data on not only the number of folks outreached or enrolled, but on the services and referrals provided to clients. Updates are done regularly as clients obtain mainstream benefits and income and used to demonstrate not only reportable numbers for the grant, but to demonstrate client and program successes and the volume of services provided to clients (6.14) This data assists us in driving results and making program changes to ensure we are continuing to provide the services necessary to help clients achieve stability.

SSI/SSDI Outreach, Access, Recovery (SOAR): Describe the provider's plan to ensure that PATH staff have completed the SOAR Online Course and which staff plan to assist consumers with SSI/SSDI applications using the SOAR model and track the outcomes of those applications in the SOAR Online Application Tracking (OAT) system. Please be sure to submit Certificate of Completion of the On-Line SOAR Course with IUP submission.

If the provider does not use SOAR, describe the system used to improve accurate and timely completion of mainstream benefit applications (e.g. SSI/SSDI). Also describe the efforts used to train staff on this alternative system and what technical assistance or support they receive to ensure quality applications if they do not use the SAMHSA SOAR TA Center.

Of the current six PATH staff members, one is SOAR certified, three are nearing completion of the SOAR online training. New staff are required to complete the training within the first six months of employment. The certified staff, as well as those nearing completion, screen all enrolled clients for potential SOAR services and assist them in gathering the initial documentation necessary to begin a case. Through our partnerships with local behavioral health agencies, and the new AHCCCS ruling allowing

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them to bill for SOAR services, most clients are assisted with the initial gathering of documents and information and then referred to behavioral health agencies for completion and filing of their case. Catholic Charities is not currently able to bill for SOAR services, and they are quite time consuming, so they rely on behavioral health case managers or dedicated SOAR specialists at the BH agencies to complete actual applications, allowing outreach staff to concentrate on the outreach and document gathering portion of the SOAR process. PATH staff are available to assist behavioral health CM's if needed to help obtain all items or information needed to submit successful SOAR claims (6.14.5). SOAR is critical for clients to obtain income, thus increasing their chances of housing stability. Clients not enrolled or awaiting enrollment with a partner agency are assisted with their SOAR application by either the PATH team member or the SOAR Benefit Specialist who is part of the larger Catholic Charities homeless services team across Northern Arizona.

Housing:

Indicate what strategies will be used for making suitable housing available for PATH clients Provide the types of housing and the name of the agency (ies) you will be working with.

Describe how your agency will address the housing needs of those living with serious mental illness and who are incarcerated in designing and developing your program to prioritize services upon release from jail or prison, where appropriate.

Catholic Charities operates a Housing Program with over 125 scattered site housing units throughout Northern Arizona which are utilized to house homeless or formerly homeless individuals and families who have a qualifying disability. During FY 2021 this Housing Program assisted over 625 individuals obtain housing, with over 30 of them enrolled in the PATH Program now or previously. Examples of disabilities include SMI, substance use disorder, post-traumatic stress disorder, HIV/AIDS or a physical disability. Residents pay 30% of their income (if any) in rent and receive case management and supportive services either through Catholic Charities or a collaborative partner. The Housing Program and the PATH Program work together to move participants from a crisis to a stable environment where they can thrive. In addition to these housing options, PATH staff work with the local Public Housing Authority and local landlords to increase opportunities for housing for individuals enrolled in the program. Through the Coordinated Entry System, individuals are prioritized for housing based on the VI SPDAT and referred through HMIS and Case Conferencing weekly in all areas. Preventive measures are utilized to ensure housed PATH clients do not become homeless again. This includes making referrals to other agencies that can assist with eviction prevention (Coconino County Community Services and St. Vincent de Paul In-Town Help Line), as well as a one-time only PATH-funded eviction prevention assistance (up to \$300). If a client has Title XIX status, a limited amount of funding is available through behavioral health service providers including Southwest Behavioral Health Services, Encompass, Spectrum, The Guidance Center, and West Yavapai Guidance Clinic. Catholic Charities also provides services to assist clients in obtaining or maintaining income, thereby preventing homelessness. These services consist of SOAR, Goodwill Industries One Stop Job Programs, Vocational Rehabilitation, Arizona Workforce Job Training, access to job listings and job fairs, and connection to placement agencies (Command Labor Systems, Labor Ready, Quality Connections, and the Family Food Center). The PATH Homeless Outreach Program assists clients with obtaining medical and behavioral records for SOAR purposes, paying for initial costs of GED classes (Coconino Community College/College of America), obtaining birth certificates and identification for benefits, employment, treatment, and other agency assistance purposes, and referrals to financial responsibility classes, and

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assists culinary clients in obtaining food handler permits through the counties in which PATH has coverage.

Staff Information: Describe how staff providing services to the population of focus will be sensitive to age, gender, disability, lesbian, gay, bisexual, and transgender, racial/ethnic, and differences of clients.

Even though we are faith based, Catholic Charities serves all, regardless of age, race/ethnicity, gender, disability, sexual orientation, or faith (religious affiliation). There is no requirement related to the Catholic religion to work for or receive services from Catholic Charities. In addition, our current staff members include multiple races, genders, varying ages, religious affiliations, and personal past experiences of homelessness. Catholic Charities is an equal opportunity employer and strives to hire individuals from diverse backgrounds to ensure cultural competence within the teams.

Describe how often staff receives training in cultural competence and health disparities and how is this documented.

This diversity in our team members strengthens our ability to serve diverse clients in all our programs. Additionally, Catholic Charities requires yearly cultural competency and diversity trainings, and seeks out outside trainings necessary to meet the requirements of the program. Because many our clients are from the neighboring Navajo Reservation, Catholic Charities has sought additional training from Native Americans for Community Action to be delivered to staff in the next 6 months (5.17) For the PATH Program, current standards will be reviewed regarding a strategy for addressing health disparities to ensure necessary trainings are provided on an ongoing basis to address these standards.

PATH Eligibility & Enrollment:

Describe how PATH eligibility is determined, when engagement and enrollment occurs and how each is documented. (Be detailed)

PATH eligibility is determined through outreach, conversations with potential clients, fact finding through data collection on outreach notes forms, referrals from housing entry programs and agency partners, emails/phone calls from those seeking out PATH services, self-reporting of symptoms by outreach contacts, and by the expertise of PATH Outreach Workers (non-clinical determinations) to do so.

PATH Engagement occurs when an eligible PATH Outreach Contact understands what SMI is and what services the PATH Program provides through previous outreach meetings. The PATH Outreach Contact then states an interest in becoming enrolled in the PATH Program. This is when the PATH Engagement process begins and is taken note of through the Homeless Management Information System (HMIS) secured database each PATH worker enters client and contact data into. Engagement tracking can be determined through entering the Outreach Contact name or HMIS # and proper EDA (Enter Data As) project, simple notes and sun-assessment notes through the client profile tab, assessment service through

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the client service tab, and an Engagement Date showcased after the HUD Verification section of the PATH Assessment Tab.

PATH Enrollment occurs when a newly PATH Outreached Contact or a formerly Outreached PATH Contact/current PATH Engagement completes the PATH Enrollment Intake Process with a PATH Outreach Worker. This process contains trackable data elements through the intake such as personal and identifiable information (name, social security number, race, gender, ethnicity, possible disabilities (mental, substance abuse, physical, chronic illnesses, developmental, AIDS), past education, homeless timeline, current homeless situation, domestic violence, self-disclosed/reported SMI or potential SMI diagnosis, contact information, allergies in case of medical emergencies, and other relatable information and mild PHI. Other forms completed in the intake process include necessary Releases of Information (for HMIS data entry and potential ROIs for future/current behavioral health agencies, family members, housing supports, probation/parole officers, other collaborative agency representatives representing client and/or fiduciaries), Self Sufficiency Matrix (trackable rating matrix in which the client ranks themselves in different life topics such as housing, mental health, safety, legal, food and nutrition, and others. Updated during ongoing case and a final matrix during the disenrollment process), HUD Homeless Certification form (self-disclosing current degree of homelessness), Request for Services Form (officially allows PATH to provide services related to the Client's Case Plan through Catholic Charities Community Services and states that PATH has explained and given client copies of the grievance packet/process and client rules and responsibilities, all client information given is secured in the HMIS database and everything in physical file form is secured behind multiple locked doors, lock boxes and/or file cabinets), and the Client Case Forms that contain the case plans and goals that are created/formulated by each PATH Outreach Worker and Client mutually. PATH Enrollment is documented through intake/update/closure and additional case management forms in each client's physical file form and through the HMIS database. Through the entering a client's name or HMIS number, the proper EDA, and after enrollment through the interim tab on the client entry/exit tab (after enrollment for every client/outreach worker interaction for duration of client's enrollment- in person, phone calls, texts, voicemails, emails), the PATH Outreach Worker is responsible for updating the UDE (Universal Data Element) tab, the PATH Assessment tab (including enrollment date, SMI assessment determination date and status, connection with SOAR, current housing situation, income, and HUD determination topics such as disability, health insurance, benefits), the Client Profile Tab (where AZ sub assessment notes and client notes are entered objectively), the Measurements Tab (where initial, updated, and closing self-sufficiency matrix findings are entered), the Case Managements Tab (assigning a primary PATH Outreach Worker as the PATH Client Case Manager in HMIS), the ROI Tab (exercising that the HMIS ROI has been acknowledged and signed by PATH client, allowing client related information to be entered into HMIS by client permission with the timeframe of one year, further actions require updated and signed ROIs), the Service Tab (collecting all services provided to enrolled clients only (except for Engaged and Outreach Contacts that receive Street Outreach Projects and Assessment/Screening entries)), and the Referrals Tab (collecting and tracking all referrals made to PATH Enrolled Clients by PATH Outreach Workers to other agencies and/or service providers (Given or made, Attained by Clients, Outcomes being completed or incomplete).

Describe the behavioral health needs of active duty military service members, returning veterans, and military families in designing and developing their programs and to consider prioritizing this population for services, where appropriate with will be addressed.

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PATH addresses Veterans, Military Personnel, and the families of the aforementioned needs accordingly by first determining if they as individuals qualify, if so, work towards enrollment/case planning, treatment, and housing, and also referring on a case by case basis, those that qualify, to the Department of Veterans Affairs (for Veteran Benefits, Treatment, Counseling, and VA HUD VASH Housing Opportunities), to Catholic Charities Veterans Services and TIP Programs (Further Case Management and Housing Opportunities through the Supportive Services for Veterans and their Families VA grant) or Nation's Finest for the same services (same grant funding), US Vets, and other applicable wraparound Veteran Services. There are times where not all Veterans qualify for Veteran Services due to being dropped from those program services, not meeting past active-duty requirements, or having been dishonorably discharged from active-duty status. These have been former PATH clients and PATH will continue to serve those Veterans that qualify for PATH services, but also do and do not qualify for further Veteran Program services. Regarding active-duty service men and women, it is extremely rare to enroll someone matching that criterion as on-base housing is available (waitlists have been prevalent in cities where military bases are located). PATH would not discriminate as to the needs of active-duty personnel (although more likely that a family member would qualify, as an SMI diagnosis for an active-duty member may result in a medical or psychological discharge from the military). PATH could prioritize this demographic if instructed to do so, but many Veteran Supports are and have been available through referrals, collaborative services with shared clients between PATH and other agencies, and Veterans that no longer or do not qualify for Veteran Services.

Client Information: Describe the demographics of the client population. Use the chart below to identify Projected Outreach, Engagement and Enrollment Goals.

The PATH teams across the 3 served counties will outreach, engage, and enroll clients of very diverse backgrounds, ages, and genders. Based on history of delivering the PATH Program, our typical population is male, Caucasian and in the 40-60 age range. While this is what history shows, our teams are culturally diverse and seek to serve the underserved populations in each are we provide services in. Our target population is those who are experiencing homelessness and serious mental illness, regardless of age, race, gender. We seek the most vulnerable in each county and work to engage for further services and resource referrals. In our initial application we erred in the goal section and offered the 3-year numbers instead of broken out by year. In this IUP we are projecting smaller numbers due to that error and the post covid recovery which has affected our annual numbers negatively.

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Projected Outreach, Engagement & Enrollment Goals						
Projected Number of Persons to be Contacted (Level of Effort)	Projected Number of Persons to be Contacted (Unduplicated)	Projected Number of Persons to be Engaged	Projected Number of Persons to be Enrolled	Projected Number of Persons to be “Literally Homeless”	Projected Number of Persons to be Veterans or Returning Veterans	Projected Number of Persons to be Active Military Service
Mohave 800	Mohave 600	Mohave 250	Mohave 70	Mohave 70	Mohave 15	Mohave 1
Coconino 800	Coconino 600	Coconino 250	Coconino 70	Coconino 70	Coconino 8	Coconino 1
Yavapai 800	Yavapai 600	Yavapai 250	Yavapai 70	Yavapai 70	Yavapai 10	Yavapai 1

NOTE: Include methodologies / tracking tools to be used to ensure goals are reached or exceeded.

HMIS is the primary tool to ensure goals are reached. Data will be reported out monthly through the deliverable system and monthly review will assess actuals vs. projected for the categories above.

Projected Outcomes			
Number of persons referred to and attaining housing.	Number of persons referred to and attaining mental health services.	Number of persons referred to and attaining substance use disorder services.	Number of Community Education/Awareness Events to be provided. (Provide documentation)
200	210	80	6- anticipated Homeless Conference, Veteran Stand Downs, community awareness events post covid.

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Consumer Involvement – Describe how individuals who experience homelessness and designated serious mental illnesses, and family members will be meaningfully involved at the organizational level in the planning, implementation, and evaluation of PATH-funded services. For example, indicate whether individuals who are PATH-eligible are employed as staff or volunteers or serve on governing or formal advisory boards.

Consumers are fully and meaningfully involved and informed in their treatment planning process from beginning to end, and PATH welcomes and encourages family involvement when possible. Catholic Charities utilizes customer satisfaction surveys and solicitations of consumer input, which provide input on the planning, implementation, and evaluation process annually for the PATH Program. Surveys are reviewed annually with staff to brainstorm program improvements that may be possible to address any client concerns, as well as recognize practices that are valued by the consumers we serve. Case management occurs with full participation of the client and is directed by their perceived needs in conjunction with suggestions from a team member. PATH eligible individuals are encouraged to volunteer with PATH, and current staff members have experience with personal homelessness and offer input in planning and development of program guidelines and trainings.

Catholic Charities

4747 N. 7th Avenue
Phoenix, AZ 85013

Contact: Sandi Flores

Email Address: sflores@cc-az.org

Provider Type: Social service agency

PDX ID: AZ-007

State Provider ID: AZ-007

Contact Phone #: (928) 774-9125

- **Local Provider Description** – Provide a brief description of the provider organization receiving PATH funds, including name, type of organization, region served, and the amount of PATH funds the organization will receive.
- **Collaboration with HUD Continuum of Care (CoC) Program** – Describe the organization’s participation with local HUD Continuum of Care (CoC) recipient(s) and other local planning activities and program coordination initiatives, such as coordinated entry activities. If the organization is not currently working with the Continuum(s) of Care, briefly explain the approaches to be taken by the organization to collaborate with the CoC(s) in the areas where PATH operates.
- **Collaboration with Local Community Organizations** – Provide a brief description of partnerships and activities with local community organizations that provide key services (e.g., outreach teams, primary health, mental health, substance use disorder, housing, employment) to PATH-eligible clients, and describe the coordination of activities and policies with those organizations. Provide specific information about how coordination with other outreach teams will be achieved.
- **Service Provision** – Describe the organization’s plan to provide coordinated and comprehensive services to PATH-eligible clients, including:
 - How the services to be provided using PATH funds will align with PATH goals and maximize serving the most vulnerable adults who are literally and chronically homeless, including those with serious mental illness who are veterans and experiencing homelessness, to obtain housing and mental/substance use disorder treatment services and community recovery supports necessary to assure success in long-term housing;
 - Any gaps that exist in the current service systems;
 - A brief description of the current services available to clients who have both a serious mental illness and a substance use disorder; and
 - A brief description of how PATH eligibility is determined, when enrollment occurs, and how eligibility is documented for PATH enrolled clients.
- **Data** – Describe the provider’s participation in HMIS and describe plans for continued training and how providers will support new staff. For any providers not fully participating in HMIS, please describe plans to complete HMIS implementation.
- **Housing** – Indicate the strategies that will be used for making suitable housing available for PATH clients (i.e., indicate the type of housing provided and the name of the agency).
- **Staff Information** – Describe how staff providing services to the population of focus will be sensitive to age, gender, disability, lesbian, gay, bisexual, and transgender, racial/ethnic, and differences of clients. Describe the extent to which staff receive periodic training in cultural competence and health disparities.
- **Client Information** – Describe the demographics of the client population, the projected number of adult clients to be contacted and enrolled, and the percentage of adult clients to be served using PATH funds who are literally homeless.
- **Consumer Involvement** – Describe how individuals who experience homelessness and have serious mental illnesses, and family members will be meaningfully involved at the organizational level in the planning, implementation, and evaluation of PATH-funded services. For example, indicate whether individuals who are PATH-eligible are employed as staff or volunteers or serve on governing or formal advisory boards.
- **Budget Narrative** – Provide a budget narrative that includes the local-area provider’s use of PATH funds.

I certify that the responses to this Narrative Question in the FY 2020 PATH Application are still accurate. Yes No

Planning Period From 7/1/2022 to 6/30/2023

The state can either enter all the IUPs and associated budgets as in prior years, or they may allow IUP users to enter their own information into WebBGAS. For more information on allowing IUP users to enter their own details, please see the tutorial under the Training Tab in WebBGAS that instructs states and IUP providers on this new process.

* Indicates a required field

Category	Federal Dollars	Matched Dollars	Total Dollars	Comments
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a. Personnel 49,254.00 17,306.00 66,560.00

Position *	Annual Salary *	% of time spent on PATH *	PATH-Funded FTE	PATH-Funded Salary *	Matched Dollars *	Total Dollars	Comments
Data Entry	45,670.00	10.00 %	0.00	0.00	0.00	0.00	<input type="text" value="\$4,576 In Kind Dollars"/>
Outreach worker	34,500.00	100.00 %	0.71	24,627.00	8,653.00	33,280.00	<input type="text" value="\$1,220 In Kind Dollars"/>
Outreach worker	34,500.00	100.00 %	0.71	24,627.00	8,653.00	33,280.00	<input type="text" value="\$1,220 In Kind Dollars"/>
PATH Administrator	60,000.00	10.00 %	0.00	0.00	0.00	0.00	<input type="text" value="\$6,000 In Kind Dollars"/>
Other (Describe in Comments)	50,000.00	33.00 %	0.00	0.00	0.00	0.00	<input type="text" value="Team Lead (\$16,500 In Kind Dollars)"/>

Category	Percentage	Federal Dollars *	Matched Dollars *	Total Dollars	Comments
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b. Fringe Benefits 8.25 % \$ 5,489.00 \$ 1,591.00 \$ 7,080.00

Category	Federal Dollars	Matched Dollars	Total Dollars	Comments
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c. Travel \$ 1,658.00 \$ 665.00 \$ 2,323.00

Line Item Detail *	Federal Dollars *	Matched Dollars *	Total Dollars	Comments
Gas	\$ 1,584.00	\$ 616.00	\$ 2,200.00	<input type="text" value="\$500 In Kind Dollars"/>
Mileage Reimbursement	\$ 74.00	\$ 49.00	\$ 123.00	<input type="text"/>

d. Equipment \$ 0.00 \$ 0.00 \$ 0.00

No Data Available

e. Supplies \$ 296.00 \$ 104.00 \$ 400.00

Line Item Detail *	Federal Dollars *	Matched Dollars *	Total Dollars	Comments
Client: Outreach Supplies/Hygiene kits/Misc.	\$ 74.00	\$ 26.00	\$ 100.00	<input type="text" value="\$1,000 In Kind Services"/>
Client: Outreach Supplies/Hygiene kits/Misc.	\$ 0.00	\$ 0.00	\$ 0.00	<input type="text" value="\$1,000 In Kind Dollars"/>

Client: Other Supplies (Describe in Comments)	\$ 74.00	\$ 26.00	\$ 100.00	Petty Cash (\$1,000 In Kind Dollars)
Client: Other Supplies (Describe in Comments)	\$ 74.00	\$ 26.00	\$ 100.00	Emergency Items-sunscreen, thongs (\$1,000 In Kind Dollars)
Client: Other Supplies (Describe in Comments)	\$ 74.00	\$ 26.00	\$ 100.00	Bus Tokens (\$250 In Kind Dollars)
Client: Other Supplies (Describe in Comments)	\$ 0.00	\$ 0.00	\$ 0.00	Trac Phones (\$250 In Kind Dollars)

f. Contractual	\$ 0.00	\$ 0.00	\$ 0.00	
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Line Item Detail *	Federal Dollars *	Matched Dollars *	Total Dollars	Comments
Other (Describe in Comments)	\$ 0.00	\$ 0.00	\$ 0.00	Medical Contract Services (\$335 In Kind Dollars)

g. Housing	\$ 75.00	\$ 27.00	\$ 102.00	
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Line Item Detail *	Federal Dollars *	Matched Dollars *	Total Dollars	Comments
Other (Describe in Comments)	\$ 75.00	\$ 27.00	\$ 102.00	Housing Assistance (\$2,398 In Kind Dollars)

h. Construction (non-allowable)				
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i. Other	\$ 4,676.00	\$ 1,643.00	\$ 6,319.00	
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Line Item Detail *	Federal Dollars *	Matched Dollars *	Total Dollars	Comments
Office: Insurance (Property, Vehicle, Malpractice, etc.)	\$ 2,276.00	\$ 800.00	\$ 3,076.00	
Office: Misc (Copying, Courier, Postage, etc.)	\$ 74.00	\$ 26.00	\$ 100.00	\$657 In Kind Dollars
Office: Rent Expenses	\$ 74.00	\$ 26.00	\$ 100.00	\$11,900 In Kind Dollars
Office: Utilities/Telephone/Internet	\$ 74.00	\$ 26.00	\$ 100.00	\$260 In Kind Dollars
Office: Utilities/Telephone/Internet	\$ 0.00	\$ 0.00	\$ 0.00	\$1,175 In Kind Dollars
Office: Other (Describe in Comments)	\$ 1,272.00	\$ 447.00	\$ 1,719.00	Cell Phone Purchase/Monthly Usage (\$1,667 In Kind Dollars)
Office: Other (Describe in Comments)	\$ 74.00	\$ 26.00	\$ 100.00	Office Supplies (\$60 In Kind Dollars)
Office: Other (Describe in Comments)	\$ 74.00	\$ 26.00	\$ 100.00	Depreciation (\$240 In Kind Dollars)
Staffing: Training/Education/Conference	\$ 758.00	\$ 266.00	\$ 1,024.00	\$293 In Kind Dollars

j. Total Direct Charges (Sum of a-i)	\$ 61,448.00	\$ 21,336.00	\$ 82,784.00	
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Category	Federal Dollars *	Matched Dollars *	Total Dollars	Comments
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k. Indirect Costs (Administrative Costs)	\$ 74.00	\$ 26.00	\$ 100.00	\$40,667.00 In-Kind dollars
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l. Grand Total (Sum of j and k)	\$ 61,522.00	\$ 21,362.00	\$ 82,884.00	
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Source(s) of Match Dollars for State Funds:

Estimated Number of Persons to be Contacted: 800 Estimated Number of Persons to be Enrolled: 70

Estimated Number of Persons to be Contacted who are Literally Homeless: 70

Number staff trained in SOAR in grant year ending in 2021: 1 Number of PATH-funded consumers assisted through SOAR: 0

Projects for Assistance in Transition From Homelessness (PATH) Budget Outline

PATH Contractor Name

Catholic Charities - Yavapai County
July 1, 2022 through June 30, 2023

County Service Area	Yavapai County	FEDERAL PATH GRANT	NON FEDERAL STATE MATCH	TOTAL FEDERAL/STATE	IN-KIND	SUB-CONTRACTOR(S) IN-KIND, IF APPLICABLE
PERSONNEL						
Position	Name	Salary	Level Of Effort			
PATH Administrator	Rasband, Camie	60,000	0.10		\$ 6,000	\$ -
Team Leader	Brust, Richard	50,000	0.33		\$ 16,500	\$ -
Outreach Specialist	Pauline Gonzales	34,500	1	\$ 24,627	\$ 8,653	\$ 33,280
Outreach Specialist	Evelyn Young	34,500	1	\$ 24,627	\$ 8,653	\$ 33,280
Data Specialist	M.McCoy	45,760	0.10		\$ 4,576	\$ -
Program Supervisor					\$ -	\$ -
Other					\$ -	\$ -
TOTAL PERSONNEL			2.53	\$ 49,254	\$ 17,306	\$ 66,560
EMPLOYEE RELATED EXPENSES (ERE)				5,489	1,591	7,080
TOTAL ERE				\$ 5,489	\$ 1,591	\$ 7,080
PROFESSIONAL AND OUTSIDE SERVICES						
TOTAL PROF & OUTSIDE				\$ -	\$ -	\$ -
TRAVEL						
Mileage Reimbursement @.445/mile		\$ 74	\$ 49	\$ 123	\$ -	\$ -
Gas (100% PATH dedicated Vehicles)		\$ 1,584	\$ 616	\$ 2,200	\$ 500	\$ -
Out of State Travel - Airfare						
Out of State Travel - Lodging						
Out of State Travel - Per Diem						
Out of State Travel - Ground Transportation/Misc						
TOTAL TRAVEL		\$ 1,658	\$ 665	\$ 2,323	\$ 500	\$ -
OCCUPANCY						
Office Rent Expenses		\$ 74	\$ 26	\$ 100	\$ 11,900	\$ -
Office Utilities		\$ -	\$ -	\$ -	\$ 1,175	\$ -
TOTAL OCCUPANCY		\$ 74	\$ 26	\$ 100	\$ 13,075	\$ -
HOUSING (Limited to 20% as defined in PATH Legislation)						
Housing Assistance ⁽¹⁾		\$ 75	\$ 27	\$ 102	\$ 2,398	\$ -
TOTAL HOUSING		\$ 75	\$ 27	\$ 102	\$ 2,398	\$ -
PATH ENROLLEE						
Petty Cash for Emergencies (Must submit receipts with CERs)		\$ 74	\$ 26	\$ 100	\$ 1,000	\$ -
Outreach Supplies		\$ -	\$ -	\$ -	\$ 1,000	\$ -
Medication Supplies		\$ -	\$ -	\$ -	\$ -	\$ -
Prescription Co-pays		\$ -	\$ -	\$ -	\$ -	\$ -
Utility Turn-on's		\$ -	\$ -	\$ -	\$ -	\$ -
Emergency Items - sunscreen, thongs		\$ 74	\$ 26	\$ 100	\$ 1,000	\$ -
Medical Contract Services		\$ -	\$ -	\$ -	\$ 335	\$ -
Hygiene kits		\$ 74	\$ 26	\$ 100	\$ 1,000	\$ -
Client Supplies - Bus tokens		\$ 74	\$ 26	\$ 100	\$ 250	\$ -
Client Supplies - trac phones		\$ -	\$ -	\$ -	\$ 250	\$ -
TOTAL PATH ENROLLEE		\$ 296	\$ 104	\$ 400	\$ 4,835	\$ -
OTHER OPERATING						
Vehicle Licenses		\$ -	\$ -	\$ -	\$ -	\$ -
Vehicle Maintenance		\$ -	\$ -	\$ -	\$ -	\$ -
Vehicle Insurance		\$ 2,276	\$ 800	\$ 3,076	\$ -	\$ -
Leased Vehicle		\$ -	\$ -	\$ -	\$ -	\$ -
Training and Conference Fees		\$ 758	\$ 266	\$ 1,024	\$ 293	\$ -
Copying		\$ 74	\$ 26	\$ 100	\$ 657	\$ -
Office Supplies		\$ 74	\$ 26	\$ 100	\$ 60	\$ -
Office Desk Telephones		\$ 74	\$ 26	\$ 100	\$ 260	\$ -
Depreciation		\$ 74	\$ 26	\$ 100	\$ 240	\$ -
Janitorial		\$ -	\$ -	\$ -	\$ -	\$ -
Landscaping		\$ -	\$ -	\$ -	\$ -	\$ -
Desk/Laptop		\$ -	\$ -	\$ -	\$ -	\$ -
Computers		\$ -	\$ -	\$ -	\$ -	\$ -
Software		\$ -	\$ -	\$ -	\$ -	\$ -
Postage		\$ -	\$ -	\$ -	\$ -	\$ -
Cell Phone Purchase/Monthly Usage		\$ 1,272	\$ 447	\$ 1,719	\$ 1,667	\$ -
TOTAL OTHER OPERATING		\$ 4,602	\$ 1,617	\$ 6,219	\$ 3,177	\$ -
INDIRECT COST ⁽²⁾⁽³⁾⁽⁴⁾						
INDIRECT COST		\$ 74	\$ 26	\$ 100	\$ 40,667.00	\$ -

Projects for Assistance in Transition From Homelessness (PATH) Budget Outline

INDIRECT COST PERCENTAGE ⁽²⁾⁽³⁾⁽⁴⁾	31.20%	0.00%	0.00%	0.00%	0.00%
	FEDERAL	STATE	TOTAL	IN-KIND	
GRAND TOTAL	\$ 61,522	\$ 21,362	\$ 82,884	\$ 121,675	\$ -
GRANT AMOUNT REQUESTED	\$ 82,884	PLUS IN-KIND	\$ 121,675	=Total Budget	\$ 204,559

FOOTNOTES:

- (1) Please specify the types of housing assistance included in this line item.
- (2) Please specify whether utilizing indirect or administrative overhead.
- (3) For administrative overhead, please provide a justification of costs included in administration.
- (4) For indirect costs, please specify if using the de minimis rate or provide a copy of the approved indirect cost agreement. The de minimis rate of 10 percent for non-Federal entities is subject to Uniform Guidance, 2 CFR 200.414.

Additional Requirements:

- A. All travel costs must comply with Arizona State Travel Policy which can be found at the following link: <https://gao.az.gov/travel/welcome-gao-travel>. AHCCCS requires detailed receipts for reimbursement of travel expenditures.
- B. Contractor must submit monthly tracking logs & receipts for Trac phones, gift cards, bus tokens, petty cash, and other items as required by AHCCCS.
- C. Contractor budget is subject to 2 CFR Grants & Agreements, Part 200, Uniform Administrative Requirements, Cost Principles, and Audit Requirements as codified by HHS 45 CFR Part 75 for federal funds.

**Catholic Charities
Budget Narrative & Justification
Yavapai County
July 1, 2022 through June 30, 2023**

A. Personnel:

Position Title (1)	Staff Name (2)	Key Staff (3)	Annual Salary/Rate (4)	Level of Effort (5)	Total Salary Charge to Award (6)	In-Kind (7)
PATH Administrator Team Lead	Camie Rasband	X	\$60,000	10%	\$0	\$6,000
	Richard Brust		\$50,000	33%	\$0	\$16,500
Outreach Specialist Outreach Specialist	Pauline Gonzales/Evelyn Young		\$34,500	100%	\$33,280	\$1,220
			\$34,500	100%	\$33,280	\$1,220
Data Specialist	Mary McCoy		\$45,760	10%	\$0	\$4,576
Total Request					\$66,560	\$29,516

JUSTIFICATION: 2 outreach specialists, percentage of Administrator and 1/3 of team lead. Data Specialist is in-kind

B. Employee Related Expenditure:

Position (1)	Name (2)	Rate (3)	Total Salary Charged to Award (4)	Total Fringe Charged to Award (5)	In-Kind (6)
PATH Admin	CR	36%	\$0	\$0	\$2,160
Team Lead	RB	36%	\$0	\$0	\$5,940
Outreach Specialist X 2 Data Specialist	PG/TBH	36%	\$33,280	\$7,080	\$5,340
	MM	36%	\$33,280	\$0	\$12,420
				\$0	\$1,647

**Catholic Charities
Budget Narrative & Justification
Yavapai County
July 1, 2022 through June 30, 2023**

Position (1)	Name (2)	Rate (3)	Total Salary Charged to Award (4)	Total Fringe Charged to Award (5)	In-Kind (6)
Total Request				\$7,080	\$27,507

JUSTIFICATION: 36% of salary costs is agency percentage

Fringe Category	Rate
Retirement	9.5
FICA	7.65
Insurance	18.85
Social Security	
Total	36%

Professional & Outside Services

Name (1)	Service (2)	Rate (3)	In-Kind (4)	Other (5)

JUSTIFICATION:

C. Travel:

Please note: All travel expenditures will require itemized receipts and will not exceed the State allowable rates which can be found in the State of Arizona Accounting Manual (SAAM) <https://gao.az.gov/publications/saam>.

Purpose (1)	Destination (2)	Item (3)	Calculation (4)	Travel Cost Charged to the Award (5)	In-Kind (6)
Staff mileage using own vehicle	Various/outreach		.445 X 23 miles per month	\$123	\$0
Fuel	Various/outreach		505.61 miles per month X .445	\$2,200	\$500
Total Request				\$2,323	\$500

JUSTIFICATION: Outreach efforts throughout Yavapai County

**Catholic Charities
Budget Narrative & Justification
Yavapai County
July 1, 2022 through June 30, 2023**

D. Occupancy:

Item(s) (1)	Quantity (2)	Amount (3)	% Charged to the Award (4)	Total Cost Charged to the Award (5)	In-Kind (6)
Occupancy	2 offices @ \$500.00 per office per month	\$11,999.96	.0083%	\$100	\$11,899.96
Utilities	2 offices @ 48.96 per office per month	\$1,175.04			\$1,175.04
Total Request				\$100	\$13,075

JUSTIFICATION: dedicated office space costs for 2 staff including utilities + square footage share of common areas (conference room, lobby, restrooms, file room, kitchen, etc.)

E. Housing:

Housing Assistance (1)	Cost (3)	In-Kind (4)
Housing Assist for enrollees \$250 per client X 10 clients – max 20% of awarded funds	\$102	\$2,398
Total Request	\$102	\$2,398

JUSTIFICATION: Move in or eviction prevention for enrolled clients to ensure permanent housing

F. Other Operating:

**Catholic Charities
Budget Narrative & Justification
Yavapai County
July 1, 2022 through June 30, 2023**

In the case of a subcontract relationship, costs must be broken down in detail and a narrative justification provided. A separate itemized budget is required for each contractor. If applicable, number of clients should be included in the costs.

Name (1)	Service (2)	Rate (3)	Other (4)	Cost (5)	In-Kind (6)
Vehicle Insurance	Owned vehicle	1 vehicle @\$256.33/month		\$3,076	\$0
Phone (desk and cell)	2 desk and 4 cell phones	Desk \$15/mo Cell 4 X \$70.54/month		\$100 \$1,719	\$260 \$1,667
Office supplies	Pens/paper/ Staples/files	Various		\$100	\$60
copying	Copying	630 copies X .10 X 12 mo		\$100	\$656
Training	Paper/notebooks	\$27.44 X 4 emp X 12 months		\$1,024	\$293
PATH Enrollee assistance	Petty cash, emergency items, food, hygiene, bus tokens, trac phones			\$400	\$4,835
Vehicle depreciation	Owned vehicles			\$100	240
Total Request				\$6,619	\$8,012

JUSTIFICATION: vehicles depreciated per GAAP rules, desk and cell phones for communication, office supplies and copying for client file maintenance, training for staff as required for contract and COA accreditation, assistance for enrollees per case plan.

Note: Food is to be used for outreach and is limited. The contractor is required to cost allocate those budgetary items that are utilized for more than one funding source and maintain records per State of Arizona Accounting Manual and 2 CFR part 200.

**Catholic Charities
Budget Narrative & Justification
Yavapai County
July 1, 2022 through June 30, 2023**

G. Indirect Cost Rate (See Footnote below):

Calculation (1)	Indirect Cost Charged to the Award (2)	In-Kind (3)
Salary + ERE X Fed approved Indirect rate of 31.2%	\$100	\$40,667
Total Request	\$100	\$40,667

JUSTIFICATION: Federally approved Indirect rate (letter previously provided)

FOOTNOTE:

- (1) Please specify whether utilizing indirect or administrative overhead.**
- (2) For administrative overhead, please provide a justification of costs included in administration.**
- (3) For indirect costs, please specify if using the de minimis rate or provide a copy of the approved indirect cost agreement. The de minimis rate of 10 percent for non-federal entities is subject to Uniform Guidance, 20 CFR 200.414.**

H. Total Project Costs (Do not include In-Kind):

TOTAL REQUEST – TOTAL PROJECT COSTS – (Sum of Total Direct Costs and Indirect Costs)	\$82,884
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I. BUDGET SUMMARY (this document should match the Budget Outline document):

Category	Year 1	In-Kind Total Project Costs	Total Project Costs
Personnel	\$66,560	\$29,516	\$96,076
Employee Related Expenditures	\$7,080	\$27,507	\$34,587

**Catholic Charities
Budget Narrative & Justification
Yavapai County
July 1, 2022 through June 30, 2023**

Category	Year 1	In-Kind Total Project Costs	Total Project Costs
Professional & Outside Services	\$0	\$0	\$0
Travel	\$2,323	\$500	\$2,825
Occupancy	\$100	\$13,075	\$13,175
Housing (Limited to 20%)	\$102	\$2,398	\$2,500
PATH Enrollee	\$400	\$4,835	\$5,235
Other Operating	\$6,219	\$3,177	\$9,396
Indirect Costs	\$100	\$40,667	\$40,767
Total Request	\$82,884	\$121,675	\$204,559

Catholic Charities Community Services, Inc
Projects for Assistance in Transition from Homelessness (PATH)
Contractor Intended Use Plan (IUP)
Contract Period July 1, 2022 – June 30, 2023

Purpose of Intended Use Plan (IUP): Each IUP must be saved in Microsoft Word, use Times New Roman 12, line spacing single space, and all margins at least one inch each. Also, the IUP must be named with the provider agency name, and a subsequent word which indicates the content (for example: ABC agency_program narrative):

Local Provider Description: Provide a brief description of the provider organization receiving PATH funds, including name, type of organization, region served, and the amount of PATH funds the organization will receive.

Since 2006, Catholic Charities Community Services, a 501c3 Non-Profit social service agency, has provided the only adult homeless outreach services in Northern Arizona through the Projects for Assistance in Transition from Homelessness (PATH) grant. Services are currently provided in Coconino, Mohave and Yavapai Counties. In the next year this program has been awarded:

Coconino County Federal - \$63,517 State - \$22,167 Total - \$85,684
Mohave County Federal - \$140,992 State - \$49,207 Total - \$190,199
Yavapai County Federal - \$ 61,522 State - \$21,362 Total - \$82,884

Collaboration with HUD Continuum of Care (CoC) Program: Describe the organization's participation with local HUD Continuum of Care (CoC) recipient(s) and other local planning activities and program coordination initiatives, such as coordinated entry activities.

CCCS participates in the local as well as Balance of State Continuum of Care groups, as well as the Homeless Task Force in Mohave County. PATH has historically been one of the lead agencies for the annual HUD Point in Time Count across all counties. Additionally, the PATH administrator is on the governance committee for the AZ balance of state COC to ensure our voice is heard at the state level. We attend statewide conferences for networking purposes to ensure we have the most current information and have access to funders and state officials to express the needs of those we are serving. We are a member of the Arizona Housing Coalition which advocates at the state and federal level for individuals experiencing homelessness in our state and local communities. As a member we offer input related to the rural areas of Arizona and the unique needs of the populations in those areas. CCCS is also one of two lead agencies who operate the Front Door, the Coordinated Entry process in Coconino County. We opened our doors for Coordinated Entry in 2017 and have worked diligently with community partners to create and maintain a system that allows walk in intakes, Monday through Friday complete with a mobile service as needed. In addition, there is weekly Case Conferencing at the CCCS office where those experiencing homelessness are prioritized, referrals made, and followed up with by the group. In both Yavapai and Mohave counties, CCCS is one of several “no wrong doors” where intakes are completed. We participate in case conferencing with both veteran and not veteran groups, in locations where case conferencing is separate. Working together with agencies through the Coordinated Entry process is critical to serve those most vulnerable in our communities. PATH plays an important role in Coordinated Entry, as our rural areas are so geographically vast. When someone comes up on the By Name List, and is not currently working with another agency, the community relies on PATH outreach to help find them to connect to housing resources. In addition,

Catholic Charities Community Services, Inc
Projects for Assistance in Transition from Homelessness (PATH)
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PATH has the ability to do intakes in the field helping communities connect to those who would not make it into the offices on their own. This takes patience and skills the path team excels at, as this is not accomplished in just one encounter. In addition, PATH teams help get those waiting to get into housing document ready, they provide letters verifying homelessness and disability verifications. This is an important step to getting people housed in a timely manner.

If the organization is not currently working with the Continuum(s) of Care, briefly explain the approaches to be taken by the organization to collaborate with the CoC(s) in the areas where PATH operates.

N/A

Collaboration with Local Community Organizations: Provide a brief description of partnerships and activities with local community organizations that provide key services (e.g., outreach teams, primary health, mental health, substance use disorder, housing, employment) to PATH-eligible clients. Describe the coordination of activities and policies with those organizations. Provide specific information about how coordination with other outreach teams will be achieved.

A Memorandum of Understanding (MOU) is active with both Health Choice Integrated Care/Blue Cross Blue Shield and Mohave Mental Health. These documents outline service provisions for PATH clients in each of the three proposed counties through Health Choice/BCBS and specifically for Mohave County. MOUs continue to be developed with the responsible agencies in each of the other areas. These partnerships do and will include obtaining SMI assessments, determinations, and case plans. Monthly connections with Case Managers will be conducted to ensure clients are obtaining needed behavioral health services and working toward stable housing within the community. Should the responsible agencies need emergency assistance for PATH clients or potential PATH clients, Catholic Charities has a rotating on-call staff member. We anticipate formal MOUs with The Guidance Center and Southwest Behavioral in Coconino County; Spectrum Healthcare and Polara Health in Yavapai County; and Mohave Mental Health Clinics and Southwest Behavioral Health Services in Mohave County in the next few months. These MOU's will be critical to providing ongoing services to clients exiting the PATH program to ensure future success. Formal policies are in place for referrals for clients willing to engage in behavioral health services, as well as policies to ensure diagnosis are available to team members for file compliance. Staff follow policy guidelines for outreach and enrollment, ensuring program and agency compliance and as a guideline for staff to navigate through the case management process. PATH staff works closely with the Regional Behavioral Health Authority and responsible agencies to break down barriers to treatment and ensure ongoing assistance for individuals in need of housing stability. Some agencies the PATH Program collaborates with include Halo House (for victims of domestic violence), City of Flagstaff (providing additional funding for outreach activities), Flagstaff Shelter Services (shelter services for clients wishing to come in from outside), Salvation Army (providing food and housing financial assistance for clients), St. Vincent de Paul (Thrift store partnership for clothing and work items), Nation's Finest (for veteran clients to engage with VA services), The Guidance Center (for behavioral health needs), Catholic Charities internally through the Family Shelter, Housing Program, and Supportive Services for Veteran Families (SSVF), The Circle of Page (local networking group for social service providers), The Flagstaff Family Food Center (for team

Catholic Charities Community Services, Inc
Projects for Assistance in Transition from Homelessness (PATH)
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members to obtain food for outreach and clients with food insecurity), The Williams Family/Community Outreach Coordinator(to engage families experiencing homelessness), Hope Cottage (shelter for women and children encountered through outreach), Yavapai County Probation Office (to assist clients in addressing justice involvement requirements), Prescott Area Shelter Services, Southwest Behavioral Health, Northern Arizona Council of Governments (NACOG), Spectrum Healthcare, St. Mary's Food Bank, Coconino County CoC, Coconino County Community Services (in both Page and Flagstaff), Nation's Finest and the Prescott VA. In addition, we are working with Spectrum Healthcare, Verde Valley Medical Center, Mohave/Yavapai/Coconino County Jails, Mental Health Court, Mohave Mental Health Clinics, Western Arizona Council of Governments (WACOG), Victim Witness Advocates in Williams and Grand Canyon Village, the Flagstaff, Prescott, Williams, Sedona, Cottonwood, Kingman, and Bullhead City Police Departments, the Congress, Yarnell, Skull Valley, Prescott, Flagstaff, Williams, Ash Fork, Lake Havasu City, Bullhead City, Kingman Fire Departments, Flagstaff Medical Center Social Workers, the Mohave, Coconino, and Yavapai Sheriff Departments, Terros Health in Flagstaff and Mohave County, and United Way in all areas. These agency partnerships help move consumers toward self-sufficiency and improve their access to resources by (1) sharing knowledge on resource availability that is conveyed to consumers, (2) providing tangible resources to distribute to cons.

PATH staff also work closely with Catholic Charities' Veteran Services program. Clients can be dually enrolled in both PATH and Veteran Services, thereby increasing their opportunities for both behavioral health and veteran-qualified services in the area of housing and medical/behavioral health needs. Coordination with other outreach teams occurs with the Veteran Services Program in Coconino and Yavapai Counties. This coordination leads to ensuring potential clients relate to the proper program and Catholic Charities Community Services, Inc. resources and ensures a wider coverage area during outreach. Catholic Charities PATH team is the only PATH outreach service in Mohave County.

**Service Provision: Describe the organization's plan to provide coordinated and comprehensive services to PATH-eligible clients, including:
Describe the organization's plan to provide coordinated and comprehensive services to PATH-eligible clients, including:**

A brief description of the current services available to clients who have both a serious mental illness and a substance use disorder; and

How services to active duty military service members, returning veteran and military families will be considered and prioritized.

A brief description of how PATH eligibility is determined, when enrollment occurs, and how eligibility is documented for PATH enrolled clients.

Any gaps that exist in the current service systems;

How the services to be provided using PATH funds will align with PATH goals and maximize serving the most vulnerable adults who are literally and chronically homeless, including those with serious mental illness who are veterans and experiencing

Catholic Charities Community Services, Inc
Projects for Assistance in Transition from Homelessness (PATH)
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homelessness, to obtain housing and mental/substance use disorder treatment services and community recovery supports necessary to assure success in long-term housing;

The Catholic Charities PATH Outreach Program provides outreach services and interventions designed to assist individuals who meet the federal definitions of homelessness or imminent risk of homelessness in Coconino, Mohave, and Yavapai Counties. Teams of two search streets, vacant buildings, homeless shelters, river bottoms, forests, desert campsites, parks, jails, hot meal centers, food pantries, jails, hospitals (including places where veterans' services are provided), neighborhoods and anywhere else homeless individuals may camp or frequent to locate individuals experiencing homelessness. During outreach activities, the teams distribute life-sustaining supplies; provide regularly updated handouts detailing available social services; educate people on local camping rules and regulations; and transport clients directly to detoxification centers, medical treatment, and psychiatric care. Outreach is regularly conducted in inclement weather and available on-call after hours. All individuals experiencing homelessness are served, and those with serious mental illness and/or a co-occurring substance abuse disorder are enrolled in PATH. Outreach efforts include people of all faiths, backgrounds and abilities including victims of domestic violence, elderly individuals, individuals living with a serious mental illness who are incarcerated, American Indians, families, abandoned or runaway youth, veterans, active-duty military and military families, and LGBTQ populations. One team of ~~two~~ three PATH outreach staff is assigned to each geographic service area. ~~Two~~ Three staff members are formerly homeless which adds a level of understanding and empathy to service provision. PATH teams strive to maintain regular contact with the individual/family experiencing homelessness. Enrolled clients receive ongoing case management, and have access to move-in assistance, bus passes, clothing vouchers, motel assistance, eviction prevention funds, etc. They are also connected to services including, but not limited to, counseling, financial education, and identification acquisition.

Specific benefits of the program's homeless outreach services include 1) access to life-sustaining, emergency resources such as tents, sleeping bags, water, coats, gloves; 2) education on locally available social services and treatment options as well as acceptable and safe camping practices; 3) field assessments and evaluations; 4) assistance in locating cooling or heating stations during extreme weather; 5) transportation in the form of client transport to behavioral health appointments and bus passes and tickets; 6) linkage to the behavioral health crisis system; 7) case management designed to connect and enroll participants in mental health and/or substance abuse treatment; 8) completion of the VI SPDAT and entry into HMIS data system to facilitate a coordinated care approach to service provision; 9) transition into the T/RBHA case management system (Northern Arizona Regional Behavioral Health Authority); 10) assistance getting prescriptions filled; 11) assistance completing appropriate applications and necessary follow-up to ensure eligible persons are in receipt of SSI/SSDI through the SOAR program, housing resources (Section 8, Project Based Housing, UD 202/811s, HEARTH, and Low Income Housing Tax Credits), income resources (VA benefits, General Assistance, Temporary Assistance for Needy Families, Food Stamps and employment services); 12) discharge planning for individuals exiting a medical or treatment center who need resources to avoid stressors which may lead back to inpatient care (such as lack of shelter); 13) coordination with emergency services when a client requires medical attention; 14) moving assistance; 15) hotel vouchers for medically fragile individuals, particularly during inclement weather; and 16) housing dollars for permanent placements, 17) staff certified in instructing Mental Health First Aid to law enforcement, jail staff, community partners, and collaborative agency staff to expand awareness of mental illness/behavioral health concerns, 18) staff collaborates with Health Choice and NARHBA to present anti-stigma presentations to community partners to expand awareness related to homeless issues, 19) outreach teams provide bins containing life sustaining supplies and resource/contact information to rural points of interest that have interactions with homeless individuals such as food banks/drop off

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locations, sheriff departments, police departments, victim witness advocates, and fire departments which also increases collaboration efforts for PATH to interact and possibly transport homeless individuals to places with more resources.

For clients suspected to have both a serious mental illness and a substance abuse disorder, after an initial contact has generated trust, and no later than the third contact, the PATH team arranges an assessment to determine if indeed the client has mental illness and/or a substance use disorder. PATH eligible individuals with co-occurring disorders receive outreach and are referred to The Guidance Center in Flagstaff and/or Williams, Mohave Mental Health Clinics in Mohave County, Encompass in Page and Fredonia, Spectrum Healthcare in Sedona and Cottonwood, Health in Prescott and Southwest Behavioral & Health Services in Flagstaff, Mohave County, and Prescott Valley for treatment services. Those enrolled in the PATH Program receive case management services through a local behavioral health provider. Consumers receive a comprehensive assessment with emphasis on the unique needs and cultural preferences of the individual, and a consumer-driven service plan is developed to target individual needs. Navigation services include, but are not limited to, assistance with obtaining identification documents; applying for entitlements such as food stamps, general assistance, Medicare/Medicaid, or SSI/SSDI; coordination of health care or obtaining a primary care physician once healthcare benefits are in place; placement in a shelter; and mental health treatment. A rapport is built with the consumer to assist them in meeting self-identified goals of their service. Catholic Charities believes that sustained mental health treatment is unlikely to occur outside of stable living arrangements so, as much as possible, enrolled participants are encouraged to choose housing goals that lead to permanent housing.

To determine SMI within 90 days, enrolled PATH clients complete Release of Information forms during the intake process for their current behavioral health provider or where they wish to go to receive SMI determination and treatment. The form requires the chosen behavioral health agency to provide notification to Catholic Charities of an SMI diagnosis via mail, email, or fax. These documents are maintained in client files. Homeless Outreach staff inquire about a client's diagnosis during every contact with the client and by communicating with the client's assigned Case Manager. Alternatively, a Title XIX verification request can be submitted through the Regional Behavioral Health Authority. Such requests are fulfilled within one week.

Through scheduling, Catholic Charities provides a weekly on call status for each PATH Homeless Outreach staff member. In all three counties, one staff member responds to on-call emergencies every first and third week of each month, while the other staff responds every second and fourth week. During winter outreach, however, on call scheduling is dependent on the amount of location/inclement weather driving training each staff member has. The PATH Supervisor trains the outreach staff until they are adequately educated to complete an entire night leading the outreach effort with volunteers, interns, or inner-agency/outer-agency workers. During severe snowstorms, PATH utilizes an all-hands-on-deck approach, having one team outreach western Flagstaff/outlying areas and the other team outreaching eastern Flagstaff/outlying areas. In the extreme heat areas of Mohave County, PATH staff coordinates with local providers for water drives and safe daytime provisions for this population to prevent heat-related deaths.

PATH funds are leveraged to create the greatest impact possible for the program's clients. PATH funds are often combined with support from fundraisers, donations, and other funders. To boost the program's ability to serve clients with needs not covered by PATH funding, additional support is sought out through local foundations and United Way. Additionally, the PATH Program collaborates with other agencies such as behavioral health, Goodwill, Salvation Army, St. Vincent De Paul and others to assist clients in meeting their needs while maximizing program funding.

Gaps in service delivery are identified through client satisfaction surveys conducted annually and through quarterly file and program reviews as part of Catholic Charities' internal program quality improvement

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(PQI). These gaps are addressed in monthly staffing's to improve the program. Some gaps in the current service systems in the counties served by the PATH Program include the amount of time it takes in some areas to obtain the SMI diagnosis, lack of affordable housing opportunities, and the lack of available jobs. The implementation of a Coordinated Entry System in each county is helping to identify the housing gaps in each rural community.

Data: Describe the provider's participation in HMIS and describe plans for continued training and how PATH contractors will support new staff. For any providers not fully participating in HMIS, please describe plans to complete HMIS implementation.

Catholic Charities has been utilizing the HMIS system since program inception in 2006. Our efforts now include meeting the upgraded data standards, ongoing training for staff to ensure all new data standards are understood and up to date, and regular report reviews to ensure compliance with the data standards adopted by SAMSHA. We will continue to work closely with the HMIS Administrator to ensure staff trainings are current, and the program's administrative assistant will pull weekly and monthly data quality reports to ensure full compliance. All case management activities will be recorded and tracked within HMIS, and the program will ensure all new staff participate in HMIS training within 30 days of hire. HMIS collects data on not only the number of folks outreached or enrolled, but on the services and referrals provided to clients. Updates are done regularly as clients obtain mainstream benefits and income and used to demonstrate not only reportable numbers for the grant, but to demonstrate client and program successes and the volume of services provided to clients (6.14) This data assists us in driving results and making program changes to ensure we are continuing to provide the services necessary to help clients achieve stability.

SSI/SSDI Outreach, Access, Recovery (SOAR): Describe the provider's plan to ensure that PATH staff have completed the SOAR Online Course and which staff plan to assist consumers with SSI/SSDI applications using the SOAR model and track the outcomes of those applications in the SOAR Online Application Tracking (OAT) system. Please be sure to submit Certificate of Completion of the On-Line SOAR Course with IUP submission.

If the provider does not use SOAR, describe the system used to improve accurate and timely completion of mainstream benefit applications (e.g. SSI/SSDI). Also describe the efforts used to train staff on this alternative system and what technical assistance or support they receive to ensure quality applications if they do not use the SAMHSA SOAR TA Center.

Of the current six PATH staff members, one is SOAR certified, three are nearing completion of the SOAR online training. New staff are required to complete the training within the first six months of employment. The certified staff, as well as those nearing completion, screen all enrolled clients for potential SOAR services and assist them in gathering the initial documentation necessary to begin a case. Through our partnerships with local behavioral health agencies, and the new AHCCCS ruling allowing

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them to bill for SOAR services, most clients are assisted with the initial gathering of documents and information and then referred to behavioral health agencies for completion and filing of their case. Catholic Charities is not currently able to bill for SOAR services, and they are quite time consuming, so they rely on behavioral health case managers or dedicated SOAR specialists at the BH agencies to complete actual applications, allowing outreach staff to concentrate on the outreach and document gathering portion of the SOAR process. PATH staff are available to assist behavioral health CM's if needed to help obtain all items or information needed to submit successful SOAR claims (6.14.5). SOAR is critical for clients to obtain income, thus increasing their chances of housing stability. Clients not enrolled or awaiting enrollment with a partner agency are assisted with their SOAR application by either the PATH team member or the SOAR Benefit Specialist who is part of the larger Catholic Charities homeless services team across Northern Arizona.

Housing:

Indicate what strategies will be used for making suitable housing available for PATH clients Provide the types of housing and the name of the agency (ies) you will be working with.

Describe how your agency will address the housing needs of those living with serious mental illness and who are incarcerated in designing and developing your program to prioritize services upon release from jail or prison, where appropriate.

Catholic Charities operates a Housing Program with over 125 scattered site housing units throughout Northern Arizona which are utilized to house homeless or formerly homeless individuals and families who have a qualifying disability. During FY 2021 this Housing Program assisted over 625 individuals obtain housing, with over 30 of them enrolled in the PATH Program now or previously. Examples of disabilities include SMI, substance use disorder, post-traumatic stress disorder, HIV/AIDS or a physical disability. Residents pay 30% of their income (if any) in rent and receive case management and supportive services either through Catholic Charities or a collaborative partner. The Housing Program and the PATH Program work together to move participants from a crisis to a stable environment where they can thrive. In addition to these housing options, PATH staff work with the local Public Housing Authority and local landlords to increase opportunities for housing for individuals enrolled in the program. Through the Coordinated Entry System, individuals are prioritized for housing based on the VI SPDAT and referred through HMIS and Case Conferencing weekly in all areas. Preventive measures are utilized to ensure housed PATH clients do not become homeless again. This includes making referrals to other agencies that can assist with eviction prevention (Coconino County Community Services and St. Vincent de Paul In-Town Help Line), as well as a one-time only PATH-funded eviction prevention assistance (up to \$300). If a client has Title XIX status, a limited amount of funding is available through behavioral health service providers including Southwest Behavioral Health Services, Encompass, Spectrum, The Guidance Center, and West Yavapai Guidance Clinic. Catholic Charities also provides services to assist clients in obtaining or maintaining income, thereby preventing homelessness. These services consist of SOAR, Goodwill Industries One Stop Job Programs, Vocational Rehabilitation, Arizona Workforce Job Training, access to job listings and job fairs, and connection to placement agencies (Command Labor Systems, Labor Ready, Quality Connections, and the Family Food Center). The PATH Homeless Outreach Program assists clients with obtaining medical and behavioral records for SOAR purposes, paying for initial costs of GED classes (Coconino Community College/College of America), obtaining birth certificates and identification for benefits, employment, treatment, and other agency assistance purposes, and referrals to financial responsibility classes, and

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assists culinary clients in obtaining food handler permits through the counties in which PATH has coverage.

Staff Information: Describe how staff providing services to the population of focus will be sensitive to age, gender, disability, lesbian, gay, bisexual, and transgender, racial/ethnic, and differences of clients.

Even though we are faith based, Catholic Charities serves all, regardless of age, race/ethnicity, gender, disability, sexual orientation, or faith (religious affiliation). There is no requirement related to the Catholic religion to work for or receive services from Catholic Charities. In addition, our current staff members include multiple races, genders, varying ages, religious affiliations, and personal past experiences of homelessness. Catholic Charities is an equal opportunity employer and strives to hire individuals from diverse backgrounds to ensure cultural competence within the teams.

Describe how often staff receives training in cultural competence and health disparities and how is this documented.

This diversity in our team members strengthens our ability to serve diverse clients in all our programs. Additionally, Catholic Charities requires yearly cultural competency and diversity trainings, and seeks out outside trainings necessary to meet the requirements of the program. Because many our clients are from the neighboring Navajo Reservation, Catholic Charities has sought additional training from Native Americans for Community Action to be delivered to staff in the next 6 months (5.17) For the PATH Program, current standards will be reviewed regarding a strategy for addressing health disparities to ensure necessary trainings are provided on an ongoing basis to address these standards.

PATH Eligibility & Enrollment:

Describe how PATH eligibility is determined, when engagement and enrollment occurs and how each is documented. (Be detailed)

PATH eligibility is determined through outreach, conversations with potential clients, fact finding through data collection on outreach notes forms, referrals from housing entry programs and agency partners, emails/phone calls from those seeking out PATH services, self-reporting of symptoms by outreach contacts, and by the expertise of PATH Outreach Workers (non-clinical determinations) to do so.

PATH Engagement occurs when an eligible PATH Outreach Contact understands what SMI is and what services the PATH Program provides through previous outreach meetings. The PATH Outreach Contact then states an interest in becoming enrolled in the PATH Program. This is when the PATH Engagement process begins and is taken note of through the Homeless Management Information System (HMIS) secured database each PATH worker enters client and contact data into. Engagement tracking can be determined through entering the Outreach Contact name or HMIS # and proper EDA (Enter Data As) project, simple notes and sun-assessment notes through the client profile tab, assessment service through

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the client service tab, and an Engagement Date showcased after the HUD Verification section of the PATH Assessment Tab.

PATH Enrollment occurs when a newly PATH Outreached Contact or a formerly Outreached PATH Contact/current PATH Engagement completes the PATH Enrollment Intake Process with a PATH Outreach Worker. This process contains trackable data elements through the intake such as personal and identifiable information (name, social security number, race, gender, ethnicity, possible disabilities (mental, substance abuse, physical, chronic illnesses, developmental, AIDS), past education, homeless timeline, current homeless situation, domestic violence, self-disclosed/reported SMI or potential SMI diagnosis, contact information, allergies in case of medical emergencies, and other relatable information and mild PHI. Other forms completed in the intake process include necessary Releases of Information (for HMIS data entry and potential ROIs for future/current behavioral health agencies, family members, housing supports, probation/parole officers, other collaborative agency representatives representing client and/or fiduciaries), Self Sufficiency Matrix (trackable rating matrix in which the client ranks themselves in different life topics such as housing, mental health, safety, legal, food and nutrition, and others. Updated during ongoing case and a final matrix during the disenrollment process), HUD Homeless Certification form (self-disclosing current degree of homelessness), Request for Services Form (officially allows PATH to provide services related to the Client's Case Plan through Catholic Charities Community Services and states that PATH has explained and given client copies of the grievance packet/process and client rules and responsibilities, all client information given is secured in the HMIS database and everything in physical file form is secured behind multiple locked doors, lock boxes and/or file cabinets), and the Client Case Forms that contain the case plans and goals that are created/formulated by each PATH Outreach Worker and Client mutually. PATH Enrollment is documented through intake/update/closure and additional case management forms in each client's physical file form and through the HMIS database. Through the entering a client's name or HMIS number, the proper EDA, and after enrollment through the interim tab on the client entry/exit tab (after enrollment for every client/outreach worker interaction for duration of client's enrollment- in person, phone calls, texts, voicemails, emails), the PATH Outreach Worker is responsible for updating the UDE (Universal Data Element) tab, the PATH Assessment tab (including enrollment date, SMI assessment determination date and status, connection with SOAR, current housing situation, income, and HUD determination topics such as disability, health insurance, benefits), the Client Profile Tab (where AZ sub assessment notes and client notes are entered objectively), the Measurements Tab (where initial, updated, and closing self-sufficiency matrix findings are entered), the Case Managements Tab (assigning a primary PATH Outreach Worker as the PATH Client Case Manager in HMIS), the ROI Tab (exercising that the HMIS ROI has been acknowledged and signed by PATH client, allowing client related information to be entered into HMIS by client permission with the timeframe of one year, further actions require updated and signed ROIs), the Service Tab (collecting all services provided to enrolled clients only (except for Engaged and Outreach Contacts that receive Street Outreach Projects and Assessment/Screening entries)), and the Referrals Tab (collecting and tracking all referrals made to PATH Enrolled Clients by PATH Outreach Workers to other agencies and/or service providers (Given or made, Attained by Clients, Outcomes being completed or incomplete).

Describe the behavioral health needs of active duty military service members, returning veterans, and military families in designing and developing their programs and to consider prioritizing this population for services, where appropriate with will be addressed.

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PATH addresses Veterans, Military Personnel, and the families of the aforementioned needs accordingly by first determining if they as individuals qualify, if so, work towards enrollment/case planning, treatment, and housing, and also referring on a case by case basis, those that qualify, to the Department of Veterans Affairs (for Veteran Benefits, Treatment, Counseling, and VA HUD VASH Housing Opportunities), to Catholic Charities Veterans Services and TIP Programs (Further Case Management and Housing Opportunities through the Supportive Services for Veterans and their Families VA grant) or Nation's Finest for the same services (same grant funding), US Vets, and other applicable wraparound Veteran Services. There are times where not all Veterans qualify for Veteran Services due to being dropped from those program services, not meeting past active-duty requirements, or having been dishonorably discharged from active-duty status. These have been former PATH clients and PATH will continue to serve those Veterans that qualify for PATH services, but also do and do not qualify for further Veteran Program services. Regarding active-duty service men and women, it is extremely rare to enroll someone matching that criterion as on-base housing is available (waitlists have been prevalent in cities where military bases are located). PATH would not discriminate as to the needs of active-duty personnel (although more likely that a family member would qualify, as an SMI diagnosis for an active-duty member may result in a medical or psychological discharge from the military). PATH could prioritize this demographic if instructed to do so, but many Veteran Supports are and have been available through referrals, collaborative services with shared clients between PATH and other agencies, and Veterans that no longer or do not qualify for Veteran Services.

Client Information: Describe the demographics of the client population. Use the chart below to identify Projected Outreach, Engagement and Enrollment Goals.

The PATH teams across the 3 served counties will outreach, engage, and enroll clients of very diverse backgrounds, ages, and genders. Based on history of delivering the PATH Program, our typical population is male, Caucasian and in the 40-60 age range. While this is what history shows, our teams are culturally diverse and seek to serve the underserved populations in each are we provide services in. Our target population is those who are experiencing homelessness and serious mental illness, regardless of age, race, gender. We seek the most vulnerable in each county and work to engage for further services and resource referrals. In our initial application we erred in the goal section and offered the 3-year numbers instead of broken out by year. In this IUP we are projecting smaller numbers due to that error and the post covid recovery which has affected our annual numbers negatively.

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Projected Outreach, Engagement & Enrollment Goals						
Projected Number of Persons to be Contacted (Level of Effort)	Projected Number of Persons to be Contacted (Unduplicated)	Projected Number of Persons to be Engaged	Projected Number of Persons to be Enrolled	Projected Number of Persons to be “Literally Homeless”	Projected Number of Persons to be Veterans or Returning Veterans	Projected Number of Persons to be Active Military Service
Mohave 800	Mohave 600	Mohave 250	Mohave 70	Mohave 70	Mohave 15	Mohave 1
Coconino 800	Coconino 600	Coconino 250	Coconino 70	Coconino 70	Coconino 8	Coconino 1
Yavapai 800	Yavapai 600	Yavapai 250	Yavapai 70	Yavapai 70	Yavapai 10	Yavapai 1

NOTE: Include methodologies / tracking tools to be used to ensure goals are reached or exceeded.

HMIS is the primary tool to ensure goals are reached. Data will be reported out monthly through the deliverable system and monthly review will assess actuals vs. projected for the categories above.

Projected Outcomes			
Number of persons referred to and attaining housing.	Number of persons referred to and attaining mental health services.	Number of persons referred to and attaining substance use disorder services.	Number of Community Education/Awareness Events to be provided. (Provide documentation)
200	210	80	6- anticipated Homeless Conference, Veteran Stand Downs, community awareness events post covid.

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Consumer Involvement – Describe how individuals who experience homelessness and designated serious mental illnesses, and family members will be meaningfully involved at the organizational level in the planning, implementation, and evaluation of PATH-funded services. For example, indicate whether individuals who are PATH-eligible are employed as staff or volunteers or serve on governing or formal advisory boards.

Consumers are fully and meaningfully involved and informed in their treatment planning process from beginning to end, and PATH welcomes and encourages family involvement when possible. Catholic Charities utilizes customer satisfaction surveys and solicitations of consumer input, which provide input on the planning, implementation, and evaluation process annually for the PATH Program. Surveys are reviewed annually with staff to brainstorm program improvements that may be possible to address any client concerns, as well as recognize practices that are valued by the consumers we serve. Case management occurs with full participation of the client and is directed by their perceived needs in conjunction with suggestions from a team member. PATH eligible individuals are encouraged to volunteer with PATH, and current staff members have experience with personal homelessness and offer input in planning and development of program guidelines and trainings.

Community Bridges Inc.
 1855 W Baseline Rd Ste. 101
 Mesa, AZ 85202
Contact: Anne Johnston
Email Address: ajohnston@cbridges.com

Provider Type: Social service agency
PDX ID: AZ-011
State Provider ID: AZ-011
Contact Phone #: 4808317566

- **Local Provider Description** – Provide a brief description of the provider organization receiving PATH funds, including name, type of organization, region served, and the amount of PATH funds the organization will receive.
- **Collaboration with HUD Continuum of Care (CoC) Program** – Describe the organization’s participation with local HUD Continuum of Care (CoC) recipient(s) and other local planning activities and program coordination initiatives, such as coordinated entry activities. If the organization is not currently working with the Continuum(s) of Care, briefly explain the approaches to be taken by the organization to collaborate with the CoC(s) in the areas where PATH operates.
- **Collaboration with Local Community Organizations** – Provide a brief description of partnerships and activities with local community organizations that provide key services (e.g., outreach teams, primary health, mental health, substance use disorder, housing, employment) to PATH-eligible clients, and describe the coordination of activities and policies with those organizations. Provide specific information about how coordination with other outreach teams will be achieved.
- **Service Provision** – Describe the organization’s plan to provide coordinated and comprehensive services to PATH-eligible clients, including:
 - How the services to be provided using PATH funds will align with PATH goals and maximize serving the most vulnerable adults who are literally and chronically homeless, including those with serious mental illness who are veterans and experiencing homelessness, to obtain housing and mental/substance use disorder treatment services and community recovery supports necessary to assure success in long-term housing;
 - Any gaps that exist in the current service systems;
 - A brief description of the current services available to clients who have both a serious mental illness and a substance use disorder; and
 - A brief description of how PATH eligibility is determined, when enrollment occurs, and how eligibility is documented for PATH enrolled clients.
- **Data** – Describe the provider’s participation in HMIS and describe plans for continued training and how providers will support new staff. For any providers not fully participating in HMIS, please describe plans to complete HMIS implementation.
- **Housing** – Indicate the strategies that will be used for making suitable housing available for PATH clients (i.e., indicate the type of housing provided and the name of the agency).
- **Staff Information** – Describe how staff providing services to the population of focus will be sensitive to age, gender, disability, lesbian, gay, bisexual, and transgender, racial/ethnic, and differences of clients. Describe the extent to which staff receive periodic training in cultural competence and health disparities.
- **Client Information** – Describe the demographics of the client population, the projected number of adult clients to be contacted and enrolled, and the percentage of adult clients to be served using PATH funds who are literally homeless.
- **Consumer Involvement** – Describe how individuals who experience homelessness and have serious mental illnesses, and family members will be meaningfully involved at the organizational level in the planning, implementation, and evaluation of PATH-funded services. For example, indicate whether individuals who are PATH-eligible are employed as staff or volunteers or serve on governing or formal advisory boards.
- **Budget Narrative** – Provide a budget narrative that includes the local-area provider’s use of PATH funds.

I certify that the responses to this Narrative Question in the FY 2020 PATH Application are still accurate. Yes No

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The state can either enter all the IUPs and associated budgets as in prior years, or they may allow IUP users to enter their own information into WebBGAS. For more information on allowing IUP users to enter their own details, please see the tutorial under the Training Tab in WebBGAS that instructs states and IUP providers on this new process.

* Indicates a required field

Category	Federal Dollars	Matched Dollars	Total Dollars	Comments
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a. Personnel 418,523.00 145,321.00 563,844.00

Position *	Annual Salary *	% of time spent on PATH *	PATH-Funded FTE	PATH-Funded Salary *	Matched Dollars *	Total Dollars	Comments
Data Entry	39,677.00	40.00 %	0.30	11,780.00	4,090.00	15,870.00	
Outreach worker	207,958.00	80.00 %	0.59	123,489.00	42,878.00	166,367.00	6 Navigator II's
PATH Administrator	101,810.00	7.00 %	0.00	0.00	0.00	0.00	\$7,128 In Kind Dollars
Other (Describe in Comments)	128,554.00	81.00 %	0.60	77,061.00	26,757.00	103,818.00	4 Navigator I
Other (Describe in Comments)	112,701.00	80.00 %	0.60	67,211.00	23,337.00	90,548.00	3 Lead Navigators
Other (Describe in Comments)	86,653.00	80.00 %	0.59	51,456.00	17,867.00	69,323.00	2 Behavioral Health Professionals
Other (Describe in Comments)	53,174.00	80.00 %	0.59	31,576.00	10,964.00	42,540.00	Team Leader
Other (Describe in Comments)	39,707.00	80.00 %	0.59	23,579.00	8,187.00	31,766.00	Program Supervisor
Other (Describe in Comments)	69,056.00	25.00 %	0.19	12,814.00	4,450.00	17,264.00	Clinical Lead
Other (Describe in Comments)	56,431.00	30.00 %	0.22	12,566.00	4,363.00	16,929.00	Senior Manager
Other (Describe in Comments)	62,794.00	15.00 %	0.11	6,991.00	2,428.00	9,419.00	Associate Director, HCI

Category	Percentage	Federal Dollars *	Matched Dollars *	Total Dollars	Comments
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b. Fringe Benefits 14.85 % \$ 83,704.00 \$ 29,064.00 \$ 112,768.00 \$1,354.32 In-Kind dollars

Category	Federal Dollars	Matched Dollars	Total Dollars	Comments
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c. Travel \$ 5,900.00 \$ 2,049.00 \$ 7,949.00

Line Item Detail *	Federal Dollars *	Matched Dollars *	Total Dollars	Comments
Gas	\$ 5,365.00	\$ 1,863.00	\$ 7,228.00	
Mileage Reimbursement	\$ 535.00	\$ 186.00	\$ 721.00	

d. Equipment \$ 0.00 \$ 0.00 \$ 0.00

No Data Available

e. Supplies	\$ 1,113.00	\$ 387.00	\$ 1,500.00	
Line Item Detail *	Federal Dollars *	Matched Dollars *	Total Dollars	Comments
Client: Other Supplies (Describe in Comments)	\$ 1,113.00	\$ 387.00	\$ 1,500.00	Petty Cash for Emergencies
f. Contractual	\$ 0.00	\$ 0.00	\$ 0.00	
Line Item Detail *	Federal Dollars *	Matched Dollars *	Total Dollars	Comments
Other (Describe in Comments)	\$ 0.00	\$ 0.00	\$ 0.00	Medical Director - Medical Services (\$36,400 In Kind Dollars)
Other (Describe in Comments)	\$ 0.00	\$ 0.00	\$ 0.00	Primary Care Physician - Medical Services (\$66,560 In Kind Dollars)
g. Housing	\$ 0.00	\$ 0.00	\$ 0.00	
No Data Available				
h. Construction (non-allowable)				
i. Other	\$ 67,251.00	\$ 23,351.00	\$ 90,602.00	
Line Item Detail *	Federal Dollars *	Matched Dollars *	Total Dollars	Comments
Office: Insurance (Property, Vehicle, Malpractice, etc.)	\$ 11,891.00	\$ 4,129.00	\$ 16,020.00	
Office: Rent Expenses	\$ 16,256.00	\$ 5,644.00	\$ 21,900.00	
Office: Other (Describe in Comments)	\$ 22,637.00	\$ 7,860.00	\$ 30,497.00	Leased Vehicle
Office: Other (Describe in Comments)	\$ 8,328.00	\$ 2,892.00	\$ 11,220.00	PATH Staff Cell Phone Purchase/Monthly Usage
Office: Other (Describe in Comments)	\$ 2,561.00	\$ 889.00	\$ 3,450.00	Office Supplies
Office: Other (Describe in Comments)	\$ 2,524.00	\$ 876.00	\$ 3,400.00	HMIS Licenses
Office: Other (Describe in Comments)	\$ 1,874.00	\$ 651.00	\$ 2,525.00	Desk/Laptop Computers
Office: Other (Describe in Comments)	\$ 1,180.00	\$ 410.00	\$ 1,590.00	Vehicle GPS System
j. Total Direct Charges (Sum of a-i)	\$ 576,491.00	\$ 200,172.00	\$ 776,663.00	
Category	Federal Dollars *	Matched Dollars *	Total Dollars	Comments
k. Indirect Costs (Administrative Costs)	\$ 83,475.00	\$ 28,984.00	\$ 112,459.00	
l. Grand Total (Sum of j and k)	\$ 659,966.00	\$ 229,156.00	\$ 889,122.00	

Source(s) of Match Dollars for State Funds:

Estimated Number of Persons to be Contacted: 4,640 Estimated Number of Persons to be Enrolled: 1,064

Estimated Number of Persons to be Contacted who are Literally Homeless: 862

Number staff trained in SOAR in grant year ending in 2021: 1 Number of PATH-funded consumers assisted through SOAR: 35

**Community Bridges
Budget Narrative & Justification
Maricopa County
July 1, 2022 through June 30, 2023**

A. Personnel:

Position Title (1)	Staff Name (2)	Key Staff (3)	Annual Salary/Rate (4)	Level of Effort (5)	Total Salary Charge to Award (6)	In-Kind (7)
Senior Manager	Matthew Petersen	Yes	\$56,431	30%	\$16,929	
Program Manager	Tanya Alegria	No	\$53,174	80%	\$42,539	
Program Supervisor	Sabrina Jackson	No	\$39,707	80%	\$31,766	
Lead Navigator	Koichi Buffalo, Christina Arispe, 1 Vacant	No	\$112,701	3 FTE x \$37,567 x 80%	\$90,548	
Navigator II	Natasha Leroux, Robert Lewis, Barbara Garcia, Larry Johnson, Sarah Lockhard, Natasha Suttle	No	\$207,958	6 FTE x \$34,660 x 80%	\$166,367	
Navigator I	Elizabeth Rettus, Nathan Perez, Joshua Quibell, Ralph Schioppa	No	\$128,554	4 FTE x \$32,138.50 x 81%	\$103,818	

**Community Bridges
Budget Narrative & Justification
Maricopa County
July 1, 2022 through June 30, 2023**

Position Title (1)	Staff Name (2)	Key Staff (3)	Annual Salary/Rate (4)	Level of Effort (5)	Total Salary Charge to Award (6)	In-Kind (7)
Behavioral Health Professionals	Kelly Mead, Hollie Hudson	No	\$86,653	2 FTE x \$43,326.5 x 80%	\$69,322	
Data Coordination Administrator	Kaitlin Muldner	No	\$39,677	40%	\$15,871	
Clinical Lead	Vacant	No	\$69,056	25%	\$17,264	
Assoc. Director, HCI	Jaclyn Breidt	No	\$62,794	15%	\$9,419	
Senior Director, HCI	Elizabeth DaCosta	No	\$101,810	7%		\$7,128
Total Request					\$563,844	\$7,128

JUSTIFICATION: All calculations are based on estimates.

1. The Senior Manager manages day to day contract performance and builds relationships in the community to support the PATH program.
2. The Program Manager (Team Lead) supervises the Navigator staff and daily operations.
3. The Program Supervisor works closely with the Navigators to coordinate delivery of services.
3. The Lead Navigators and the Navigator I and II positions provide the outreach and follow up services for the PATH program. Names of existing Lead Navigators and Navigator IIs: K. Buffalo, C. Arispe, one vacant Lead, N. Leroux, R. Lewis, B. Garcia, L. Johnson, S. Lockhard and N. Suttle.

The level of effort for the navigator positions is based on an estimate of vacancy savings that will occur during the program year. In past years, CBI would incur vacancies and then have difficulty spending the full budget. The intention is to bill 100% of the salary of these positions except during times of vacancies and will not expend beyond the total salary charge to award for each position category. The Director and Senior Manager monitor the budget closely throughout the year. If the expected savings do not occur, we understand that we would have to reassign some staff to another program or freeze vacant positions until we achieve the needed level of savings.

4. The Behavioral Health Professional conducts the SMI evaluations and completes biopsychosocial assessments to refer clients to mental health services. The BHP also staffs cases with Navigators. The current clinician is scheduling 2 SMI evaluations per day, which causes a time barrier to get services to those who need it. There is no capacity to get clinical services into the field (i.e. under bridges, at encampments, etc.) when only one clinician is available.

**Community Bridges
Budget Narrative & Justification
Maricopa County
July 1, 2022 through June 30, 2023**

With over 1,000 estimated enrolled participants for FY 22/23, one clinician would have to meet the needs of over 1000 participants, a ratio that is simply not feasible with one clinician.

5. The Data Coordinator assists with compiling data for reporting, and reviews HMIS data for data quality and corrections when needed.
6. The Clinical Lead provides required clinical oversight of all staff.
7. The Associate Director supervises the Senior Manager and assists with administrative functions such as approvals for recruitment and hiring, approving requests to procure, reviewing contract spending, etc.
8. The Senior Director, Housing and Community Integration oversees the contract management and performance.

B. Employee Related Expenditure:

Position (1)	Name (2)	Rate (3)	Total Salary Charged to Award (4)	Total Fringe Charged to Award (5)	In-Kind (6)
Senior Manager	Matthew Petersen	20%	\$16,929	\$3,386	
Program Manager	Tanya Alegria	20%	\$42,539	\$8,508	
PATH Supervisor	Sabrina Jackson	20%	\$31,766	\$6,353	
Lead Navigator	Koichi Buffalo, Christina Arispe, 1 Vacant	20%	\$90,548	\$18,109	
Navigator II	Natasha Leroux, Robert Lewis, Barbara Garcia, Larry Johnson, Sarah Lockhard, Natasha Suttle	20%	\$166,367	\$33,273	

**Community Bridges
Budget Narrative & Justification
Maricopa County
July 1, 2022 through June 30, 2023**

Position (1)	Name (2)	Rate (3)	Total Salary Charged to Award (4)	Total Fringe Charged to Award (5)	In-Kind (6)
Navigator I	Elizabeth Rettus, Nathan Perez, Joshua Quibell, Ralph Schioppa	20%	\$103,818	\$20,764	
Behavioral Health Professionals	Kelly Mead, Hollie Hudson	20%	\$69,322	\$13,864	
Data Coordination Administrator	Kaitlin Muldner	20%	\$15,871	\$3,174	
Clinical Lead	Vacant	20%	\$17,264	\$3,453	
Assoc. Director, HCI	Jaclyn Breidt	20%	\$9,419	\$1,884	
Senior Director, HCI	Elizabeth DaCosta	20%			\$1,354
Total Request				\$112,768	\$1,354

JUSTIFICATION:

Fringe Category	Rate
Retirement	1%
FICA (SS & Medicare)	7.65%
Insurance	10.05%
Workers Comp	.65%
State Unemployment	.65%
Total	20%

**Community Bridges
Budget Narrative & Justification
Maricopa County
July 1, 2022 through June 30, 2023**

The fringe benefits include the required state and federal tax guidelines. CBI also offers 401K and comprehensive medical and dental plan to employee salaries. The use of fringe benefits varies by individual employee. For example, the 401K match is available for up to 4% of the employee’s salary. The proposed budget includes 1% of salary for the 401K match based on actual use across all staff assigned currently to the Maricopa County PATH project. 20% is estimated for FY 22/23 based on this current actual percentage.

C. Professional & Outside Services

Name (1)	Service (2)	Rate (3)	Total Cost Charged to the Award (4)	In-Kind (5)
Medical Director	Medical Services	10%		\$36,400
Primary Care Physician	Medical Services	20%		\$66,560
Total Request				\$102,960

PATH recipients receive medical care through CBI’s operations.

D. Travel:

Please note: All travel expenditures will require itemized receipts and will not exceed the State allowable rates which can be found in the State of Arizona Accounting Manual (SAAM) <https://gao.az.gov/publications/saam>.

Purpose (1)	Destination (2)	Item (3)	Calculation (4)	Travel Cost Charged to the Award (5)	In-Kind (6)
Mileage	Local destinations within Maricopa County	Travel to meetings	135 miles per month X \$.445 / mile State rate x 12 months	\$721	
Vehicle fuel	Local destinations within Maricopa County	Fuel for outreach vehicles	\$602.33 per month x 12 months	\$7,228	

**Community Bridges
Budget Narrative & Justification
Maricopa County
July 1, 2022 through June 30, 2023**

Purpose (1)	Destination (2)	Item (3)	Calculation (4)	Travel Cost Charged to the Award (5)	In-Kind (6)
Total Request				\$7,949	\$0

JUSTIFICATION:

- The Data Coordinator travels to meetings in her own vehicle and claims mileage.

Note: Contractor is required to cost allocate those budgetary items that are utilized for more than one funding source and maintain records per State of Arizona Accounting Manual and 2 CFR part 200

E. Occupancy:

Item(s) (1)	Quantity (2)	Amount (3)	% Charged to the Award (4)	Total Cost Charged to the Award (5)	In-Kind (6)
Office space at Human Services Campus	\$1,825 per month x 12 months	\$21,900	100%	\$21,900	
Total Request				\$21,900	\$0

JUSTIFICATION:

- The office space charge represents the charges from the Human Services Campus lease for the PATH project.

F. Housing:

Housing Assistance (1)	Cost (3)	In-Kind (4)
Total Request	\$0	\$0

JUSTIFICATION:

**Community Bridges
Budget Narrative & Justification
Maricopa County
July 1, 2022 through June 30, 2023**

G. Other Operating:

In the case of a subcontract relationship, costs must be broken down in detail and a narrative justification provided. A separate itemized budget is required for each contractor. If applicable, number of clients should be included in the costs.

Name (1)	Service (2)	Rate (3)	Other (4)	Cost (5)	In-Kind (6)
Vehicle Lease	6 vehicles @ \$423.58 per month	100%		\$30,497	
Vehicle GPS	6 vehicles @ \$22.08 per month x 12 months	100%		\$1,590	
Vehicle Insurance	6 vehicles @ \$222.50 per month x 12 months	100%		\$16,020	
Phones	\$55 month x 12 months x 17 staff	100%		\$11,220	
HMIS License	\$200 per staff per year x 17 staff	100%		\$3,400	
Office Supplies	Lump sum based on previous usage	100%		\$3,450	
Laptop Computers	2 new replacement laptops	100%		\$2,525	

**Community Bridges
Budget Narrative & Justification
Maricopa County
July 1, 2022 through June 30, 2023**

Name (1)	Service (2)	Rate (3)	Other (4)	Cost (5)	In-Kind (6)
PATH Enrollee	Lump sum petty cash for emergencies, ID's, birth certificates, bus passes, etc.	100%		\$1,500	
Total Request				\$70,202	\$0

JUSTIFICATION:

1. The operating costs include the vehicles, phones, replacement laptops, office supplies, and HMIS licenses needed for the Navigators to provide outreach services. Two existing laptops need to be replaced. The useful life is three years.
2. The PATH enrollee lump sum is for emergencies for client support. Donations are made for hygiene kits and clothing.

Note: Contractor is required to cost allocate those budgetary items that are utilized for more than one funding source and maintain records per State of Arizona Accounting Manual and 2 CFR part 200

H. Indirect Cost Rate or Administration (See Footnote below):

Calculation (1)	Indirect Cost Charged to the Award (2)	In-Kind (3)
\$754,762.40 direct cost x 14.9%	\$112,460	
Total Request	\$112,460	\$0

JUSTIFICATION:

CBI has a federally approved indirect cost rate of 14.9% to cover expenses for administrative overhead such as Finance Department costs to generate invoices and track contract expenses, grant management costs to create program budgets and revisions, procurement costs to manage vehicle and phone leases, and Human Resources costs for new hires and other personnel related actions. Note: Indirect is not calculated on occupancy per approved IDC agreement.

**Community Bridges
Budget Narrative & Justification
Maricopa County
July 1, 2022 through June 30, 2023**

FOOTNOTE:

- (1) Please specify whether utilizing indirect or administrative overhead.
 (2) For administrative overhead, please provide a justification of costs included in administration.
 (3) For indirect costs, please specify if using the de minimis rate or provide a copy of the approved indirect cost agreement. The de minimis rate of 10 percent for non-federal entities is subject to Uniform Guidance, 20 CFR 200.414.

I. Total Project Costs (Do not include In-Kind):

TOTAL REQUEST – TOTAL PROJECT COSTS – (Sum of Total Direct Costs and Indirect (Or Admin) Costs)	\$889,122
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J. BUDGET SUMMARY (this document should match the Budget Outline document):

Category	Year 1	In-Kind Total Project Costs	Total Project Costs
Personnel	\$563,844	\$7,128	\$570,972
Employee Related Expenditures	\$112,768	\$1,354	\$114,122
Professional & Outside Services		\$102,960	\$102,960
Travel	\$7,949		\$7,949
Occupancy	\$21,900		\$21,900
Housing (Limited to 20%)			
PATH Enrollee	\$1,500		\$1,500
Other Operating	\$68,702		\$68,702

**Community Bridges
Budget Narrative & Justification
Maricopa County
July 1, 2022 through June 30, 2023**

Category	Year 1	In-Kind Total Project Costs	Total Project Costs
Indirect Costs or Administration (please select one)	\$112,460		\$112,460
Total Request	\$889,122	\$111,442	\$1,000,564

**Projects for Assistance in Transition From Homelessness (PATH)
Budget Outline**

PATH Contractor Name:
Contract Reporting Period:

Community Bridges
July 1, 2022- June 30, 2023

County Service Area				FEDERAL PATH GRANT	NON FEDERAL STATE MATCH	TOTAL FEDERAL/STATE	IN-KIND	SUB-CONTRACTOR(S) IN-KIND, IF APPLICABLE
PERSONNEL								
Position	Name	Salary	Level Of Effort					
PATH Administrator	Liz DaCosta	\$101,810	0.07				\$ 7,128	\$ -
Team Leader	Tanya Alegria	\$53,174	0.80	\$ 31,576	\$ 10,964	\$ 42,539	\$ -	\$ -
Outreach Specialist(s)	6 Navigator II's	\$207,958	0.80	\$ 123,489	\$ 42,878	\$ 166,367	\$ -	\$ -
Data Specialist	Kaitlin Muldner	\$39,677	0.40	\$ 11,780	\$ 4,090	\$ 15,871	\$ -	\$ -
Senior Manager	Matthew Petersen	\$56,431	0.30	\$ 12,566	\$ 4,363	\$ 16,929	\$ -	\$ -
Program Supervisor	Sabrina Jackson	\$39,707	0.80	\$ 23,579	\$ 8,187	\$ 31,766	\$ -	\$ -
Lead Navigator	3 Lead Navigators	\$112,701	0.80	\$ 67,212	\$ 23,337	\$ 90,548	\$ -	\$ -
Navigator I	4 Navigator I	\$128,554	0.81	\$ 77,061	\$ 26,757	\$ 103,818	\$ -	\$ -
Behavioral Health Professionals	Kelly Mead & Hollie Hudson	\$86,653	0.80	\$ 51,456	\$ 17,867	\$ 69,322	\$ -	\$ -
Clinical Lead	Vacant	\$69,056	0.25	\$ 12,814	\$ 4,450	\$ 17,264	\$ -	\$ -
Assoc. Director, HCI	Jaclyn Breidt	\$62,794	0.15	\$ 6,991	\$ 2,428	\$ 9,419	\$ -	\$ -
TOTAL PERSONNEL			see narrative	\$ 418,524	\$ 145,321	\$ 563,844	\$ 7,128	\$ -
EMPLOYEE RELATED EXPENSES (ERE)								
TOTAL ERE			20%	\$ 83,704	\$ 29,064	\$ 112,768	\$ 1,354	\$ -
PROFESSIONAL AND OUTSIDE SERVICES								
Medical Director	Medical Services			\$ -	\$ -	\$ -	\$ 36,400	\$ -
Primary Care Physician	Medical Services			\$ -	\$ -	\$ -	\$ 66,560	\$ -
TOTAL PROF & OUTSIDE				\$ -	\$ -	\$ -	\$ 102,960	\$ -
TRAVEL								
Mileage Reimbursement @ .445/mile				\$ 535	\$ 186	\$ 721	\$ -	\$ -
Gas (100% PATH dedicated Vehicles)				\$ 5,365	\$ 1,863	\$ 7,228	\$ -	\$ -
Out of State Travel - Airfare								
Out of State Travel - Lodging								
Out of State Travel - Per Diem								
Out of State Travel - Ground Transportation/Misc								
TOTAL TRAVEL				\$ 5,900	\$ 2,049	\$ 7,949	\$ -	\$ -
OCCUPANCY								
Office Rent Expenses				\$ 16,256	\$ 5,644	\$ 21,900	\$ -	\$ -
Office Utilities				\$ -	\$ -	\$ -	\$ -	\$ -
TOTAL OCCUPANCY				\$ 16,256	\$ 5,644	\$ 21,900	\$ -	\$ -
HOUSING (Limited to 20% as defined in PATH Legislation)								
Housing Assistance ⁽¹⁾				\$ -	\$ -	\$ -	\$ -	\$ -
TOTAL HOUSING				\$ -	\$ -	\$ -	\$ -	\$ -
PATH ENROLLEE								
Petty Cash for Emergencies (Must submit receipts with CERs)				\$ 1,113	\$ 387	\$ 1,500	\$ -	\$ -
Outpatient Services				\$ -	\$ -	\$ -	\$ -	\$ -
Medication Supplies				\$ -	\$ -	\$ -	\$ -	\$ -
Prescription Co-pays				\$ -	\$ -	\$ -	\$ -	\$ -
Utility Turn-ons				\$ -	\$ -	\$ -	\$ -	\$ -
Emergency Items - sunscreen, thongs				\$ -	\$ -	\$ -	\$ -	\$ -
Medical Contract Services				\$ -	\$ -	\$ -	\$ -	\$ -
Hygiene kits				\$ -	\$ -	\$ -	\$ -	\$ -
Client Supplies - Bus tokens				\$ -	\$ -	\$ -	\$ -	\$ -
Client Supplies - PATH Enrollee trac phones				\$ -	\$ -	\$ -	\$ -	\$ -
TOTAL PATH ENROLLEE				\$ 1,113	\$ 387	\$ 1,500	\$ -	\$ -
OTHER OPERATING								
Vehicle Licenses				\$ -	\$ -	\$ -	\$ -	\$ -
Vehicle GPS System				\$ 1,180	\$ 410	\$ 1,590	\$ -	\$ -
Vehicle Maintenance				\$ -	\$ -	\$ -	\$ -	\$ -
Vehicle Insurance				\$ 11,891	\$ 4,129	\$ 16,020	\$ -	\$ -
Leased Vehicle				\$ 22,637	\$ 7,860	\$ 30,497	\$ -	\$ -
Training and Conference Fees				\$ -	\$ -	\$ -	\$ -	\$ -
Copying				\$ -	\$ -	\$ -	\$ -	\$ -
Office Supplies				\$ 2,561	\$ 889	\$ 3,450	\$ -	\$ -
Office Desk Telephones				\$ -	\$ -	\$ -	\$ -	\$ -
Security				\$ -	\$ -	\$ -	\$ -	\$ -
Janitorial				\$ -	\$ -	\$ -	\$ -	\$ -
Landscaping				\$ -	\$ -	\$ -	\$ -	\$ -
Desk/Laptop Computers				\$ 1,874	\$ 651	\$ 2,525	\$ -	\$ -
HMIS Licenses				\$ 2,524	\$ 876	\$ 3,400	\$ -	\$ -
Software				\$ -	\$ -	\$ -	\$ -	\$ -
Postage				\$ -	\$ -	\$ -	\$ -	\$ -
PATH Staff Cell Phone Purchase/Monthly Usage				\$ 8,328	\$ 2,892	\$ 11,220	\$ -	\$ -
TOTAL OTHER OPERATING				\$ 50,995	\$ 17,707	\$ 68,702	\$ -	\$ -
INDIRECT OR ADMINISTRATIVE OVERHEAD ⁽²⁾⁽³⁾⁽⁴⁾				\$ 83,475	\$ 28,984	\$ 112,460	\$ -	\$ -
INDIRECT OR ADMINISTRATIVE OVERHEAD PERCENTAGE ⁽²⁾⁽³⁾⁽⁴⁾				14.90%	14.90%	14.90%	0.00%	0.00%
				FEDERAL	STATE	TOTAL	IN-KIND	
GRAND TOTAL				\$ 659,967	\$ 229,156	\$ 889,122	\$ 111,442	\$ -

GRANT AMOUNT REQUESTED

\$ 889,122
 PLUS IN-KIND
\$ 111,442
=Total Budget
\$ 1,000,564

FOOTNOTES:

- ⁽¹⁾ Please specify the types of housing assistance included in this line item.
- ⁽²⁾ Please specify whether utilizing indirect or administrative overhead.
- ⁽³⁾ For administrative overhead, please provide a justification of costs included in administration.

**Projects for Assistance in Transition From Homelessness (PATH)
Budget Outline**

⁽⁴⁾ For indirect costs, please specify if using the de minimis rate or provide a copy of the approved indirect cost agreement. The de minimis rate of 10 percent for non-Federal entities is subject to Uniform Guidance, 2 CFR 200.414.

Additional Requirements:

A. All travel costs must comply with Arizona State Travel Policy which can be found at the following link: <https://gao.az.gov/travel/welcome-gao-travel>. AHCCCS requires detailed receipts for reimbursement of travel expenditures.

B. Contractor must submit monthly tracking logs & receipts for Trac phones, gift cards, bus tokens, petty cash, and other items as required by AHCCCS.

C. Contractor budget is subject to 2 CFR Grants & Agreements, Part 200, Uniform Administrative Requirements, Cost Principles, and Audit Requirements as codified by HHS 45 CFR Part 75 for federal funds.

COMMUNITY BRIDGES, INC.

Projects for Assistance in Transition from Homelessness (PATH)

Contractor Intended Use Plan (IUP)

Contract Period July 1, 2022 – June 30, 2023

Purpose of Intended Use Plan (IUP): Each IUP must be saved in Microsoft Word, use Times New Roman 12, line spacing single space, and all margins at least one inch each. Also, the IUP must be named with the provider agency name, and a subsequent word which indicates the content (for example: ABC agency program narrative):

Local Provider Description: Provide a brief description of the provider organization receiving PATH funds, including name, type of organization, region served, and the amount of PATH funds the organization will receive.

Community Bridges, Inc. (CBI), a private non-profit, 501(c)(3) since 1982, has a 40-year history of providing cutting edge and nationally recognized treatment models in Arizona. CBI's mission is to maintain the dignity of human life and be an agent of positive change in our communities. CBI provides comprehensive, medically integrated behavioral health programs that use cutting-edge treatment models in the prevention, education and treatment of individuals experiencing crisis, substance use disorder, homelessness and mental illness in Arizona. Services include:

- comprehensive, medically integrated behavioral health care
- medical detoxification
- community psychiatric emergency care
- transitional support
- co-occurring enhanced outpatient treatment
- medication-assisted treatment
- homeless outreach and navigation services
- transitional and permanent supportive housing for women and families
- rapid rehousing and permanent supportive housing for chronically homeless individuals
- community education and outreach

CBI is the primary provider of crisis care, medical detoxification, and behavioral health treatment services for persons who are homeless in Maricopa County Arizona. CBI's programs are licensed through the Arizona Department of Health Services Bureau of Medical Facilities Licensing and are accredited through the Commission on Accreditation of Rehabilitation Facilities (CARF).

CBI's PATH grant will be allocated in Maricopa County. For the period of July 1, 2022 through June 30, 2023, CBI will receive \$229,156 in State funds and \$659,966 in Federal funds, a total grant of \$889,122. The target population is individuals who are homeless or at-risk of homelessness and have a serious mental illness or co-occurring disorder.

CBI's PATH team will be staffed with 3 Lead Navigators, 7 Navigator IIs, 4 Navigator Is, 2 Behavioral Health Clinicians, 40% of a Data Coordinator, and 25% of a Clinical Lead. Management staff will include a Program Manager (Team Leader) at 100%, 75% of a Senior Manager, and 15% of the Associate Director, Housing and Community Integration (HCI).

COMMUNITY BRIDGES, INC.

Projects for Assistance in Transition from Homelessness (PATH)

Contractor Intended Use Plan (IUP)

Contract Period July 1, 2022 – June 30, 2023

Collaboration with HUD Continuum of Care (CoC) Program: Describe the organization's participation with local HUD Continuum of Care (CoC) recipient(s) and other local planning activities and program coordination initiatives, such as coordinated entry activities.

CBI's Senior Director of Housing and Community Integration (HCI) serves on the Maricopa County CoC Board of Directors and the Coordinated Entry subcommittee. The Director of HCI serves on the CoC Planning Committee.

CBI's Homeless Navigation services and PATH outreach teams work with the Maricopa County Continuum of Care (CoC) coordinated assessment process. The PATH project assigns one Lead Navigator to staff the coordinated entry responsibilities. The Lead Navigator attends the weekly case conferencing meeting and brings names of PATH participants the project wants to refer into housing. The Lead Navigator answers questions and clarifies information about the participant profiles and references with their location on the By Name List. For those participants that receive a housing voucher from the case conferencing, the Lead Navigator will get the PATH enrollees document ready for housing and assist with completing the ABC housing application. Once the housing process is completed, the PATH program closes the HMIS PATH entry for the participant and the housing program adds the participant to their HMIS program.

CBI's Homeless Navigators use the assessment tools approved by the CoC (VI-SPDAT & full SPDAT) to determine participant needs and attend the weekly case conferencing meetings. The PATH outreach teams are an approved coordinated entry access point for homeless adult singles and families. In addition, CBI's crisis facilities use navigators from its Comprehensive Community Health Program (CCHP) to conduct a VI-SPDAT assessment for coordinated entry.

For its programs serving homeless Veterans, CBI collaborates with the VA's Community Resource and Referral Center (CRRC), the approved access point for Veterans, on outreach referrals through its Vet Connect and SSVF programs. CBI's Vet Connect Navigator coordinates with the CRRC to identify specific services each Veteran is eligible for, working to request eligibility review, and acquiring identification and DD214s. CBI receives the system-wide By Name List (BNL) from CoC Coordinated Entry, creates a subset of this list that includes only veterans, and facilitates the weekly veteran BNL case conferencing meetings. CBI also has weekly meetings with the HUD VASH case managers to staff cases when a Veteran has a VASH voucher or is enrolled in substance use treatment services.

CBI is a large contributor of outreach teams for the Maricopa County annual point-in-time homeless count. CBI's outreach programs provided numerous teams for this effort in 2020, and plans to continue every year. Note: The PIT count did not occur in 2021 due to the pandemic.

If the organization is not currently working with the Continuum(s) of Care, briefly explain the approaches to be taken by the organization to collaborate with the CoC(s) in the areas where PATH operates.

Not applicable. CBI is actively involved in the Maricopa County CoC.

COMMUNITY BRIDGES, INC.

Projects for Assistance in Transition from Homelessness (PATH)

Contractor Intended Use Plan (IUP)

Contract Period July 1, 2022 – June 30, 2023

Collaboration with Local Community Organizations: Provide a brief description of partnerships and activities with local community organizations that provide key services (e.g., outreach teams, primary health, mental health, substance use disorder, housing, employment) to PATH-eligible clients.

CBI's PATH outreach team works with an extensive network of organizations to provide a continuum of services that address mental health, substance use, physical health, housing, support services, and employment, etc. CBI's collaboration includes the following:

CBI's Phoenix Rise program, a collaboration between CBI's clinical services department and the Human Services Campus, offers outpatient behavioral health treatment and supportive services for those working towards treatment specific goals or needing continued therapeutic support and interventions from behavioral health, mental health, and/or drug and alcohol addictions. Phoenix Rise serves individuals experiencing homelessness on the Human Service Campus and surrounding area. Phoenix Rise conducts outreach throughout the day and receives radio calls 24/7 for behavioral health and medical emergencies. CBI has increased the services provided at Phoenix Rise by adding an additional three EMT's to serve members in and around the Human Services Campus

CBI works closely with Phoenix, Mesa, Chandler, and Glendale to reach and support homeless adults with SMI or general mental health issues in their communities. In the Phoenix CARES program, CBI provides nine street outreach teams to work with the police and the Neighborhood Services Department to reach numerous street locations including homeless encampments.

In Mesa, CBI has one fulltime Navigator to provide street outreach and link vulnerable, high acuity homeless individuals to housing (with TBRA funds for rental assistance) and other services. The City also funds one fulltime Navigator to co-locate with the Downtown Business Association and provide navigation services in the downtown and along the light rail. The City of City of Glendale funds one Navigator for street outreach. The PATH project works with the Tempe Coalition, a group of Tempe homeless providers working to address homelessness in Tempe.

In addition, CBI provides mobile outreach teams in the East and West Valley and a Crisis Response Team in Phoenix. FY 22/23 CBI has expanded a team of six navigators in the East and West Valley to serve the unincorporated areas in Maricopa County. Much of their work is responding to request for assistance from police, fire, and hospitals in these communities. When time allows, these units conduct street outreach in community areas where individuals experiencing homelessness are often found. The mobile outreach teams and outreach teams connect individuals to the PATH team when appropriate.

CBI also co-locates staff at the Lodestar Day Resource Center (LDRC) in downtown Phoenix, Arizona Housing Inc.'s 209 W. Jackson St. housing, and Victory Place Apartment Complex in Phoenix.

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CBI is an active participant in the Valley of the Sun United Way Project Connect program. PATH Navigators meet with homeless individuals to identify eligible candidates for PATH services. The Mental Health Guild meets with the CBI PATH team members to provide hygiene kits and clothing supplies for homeless individuals.

CBI also works with its existing network of housing providers serving veterans such as Cantwell Anderson, U.S. Vets, and MANA House, as well as other affordable housing providers such as Arizona Housing, Inc. and private market landlords that have a working relationship with Community Bridges. For those participants determined as SMI, CBI works with ABC Housing for housing and eviction prevention and connects the participant to Mercy Maricopa Integrated Care (MC) for supportive services.

Describe the coordination of activities and policies with those organizations.

CBI is commonly referred to as a “No Wrong Door Agency”, which means that participants can enter CBI’s system of care from any entry point. Regardless of condition, the police, fire, hospitals, urgent psychiatric centers, crisis mobile teams, other service providers, and the general public bring individuals to CBI’s facilities.

The PATH program receives referrals from anywhere in CBI’s system of care including CBI’s crisis facilities, CBI’s mobile outreach teams, and nine homeless outreach teams working in the Phoenix Cares program, homeless navigators working in Mesa, Chandler, and Glendale, the H3 Vets, Vet Connect, and SSVF programs, the Maricopa County Justice Program working in the jails, and bridge housing, as well as the FACT and ACT teams, and the Comprehensive Community Health Program (CCHP). Programs send referrals through PATH’s pathreferral@cbridges.com for consumers who have a mental health history or are showing symptoms that may indicate a need for an SMI determination evaluation. In addition, PATH also receives referrals for participants who already have an SMI determination and need assistance in assessing the consumer’s connection and communication with their SMI clinic. Sometimes PATH serves as an intermediary between a clinic and the consumer to provide an intervention to resolve a conflict. PATH also receives referrals from CBI to make a connection to coordinated entry for housing.

The PATH program also makes referrals to any place in CBI’s system of care as needed to meet the needs of those contacted through their outreach efforts.

Currently, the City of Mesa funds three full-time Navigators to work with homeless participants referred through Mesa’s Community Court and recently added three more Navigators to expand the program. The Navigators support homeless adults with multiple offenses related to their homelessness with the goal of reducing recidivism and ending their homelessness. In some cases, the participant referred by the Court must be reconnected to services he/she had been receiving from another program, but had become disconnected from their support person. In other cases, the Navigator worked to link the participant to a new service provider, either a program within CBI or another agency, when appropriate.

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Provide specific information about how coordination with other outreach teams will be achieved.

CBI employs a full team of Navigators providing daily outreach, seven days per week to places not meant for human habitation and shelters through the Phoenix CARES outreach teams, the local community-based Navigators in Mesa, Chandler, and Glendale, the Veteran Connections navigator, the Assertive Community Outreach (ACT) and Forensic Assertive Community Outreach (F-ACT) teams, the Comprehensive Community Health Program (CCHP), and CBI's mobile outreach teams. All of these programs refer directly to the PATH program for SMI evaluations through CBI's internal referral system. The PATH program also refers directly to these programs for contacts made through the PATH outreach efforts.

CBI works with other outreach teams as well, when needed. For example, Phoenix Rescue Mission prepares homeless adults for ongoing employment through their Glendale Works program. Glendale Works provides temporary employment to adults residing on the streets of Glendale. PATH and CBI's Glendale Navigator connect adults to this program through our street outreach work in Glendale.

CBI collaborates with local police departments to conduct outreach for jail diversion. Police and the PATH team conduct joint outreach to encampments or other public places where homeless street activity is prominent. The PATH team attempts to engage the homeless individuals and gain the individuals' agreement to transport to West Valley Access & Triage, a homeless shelter, or a recovery home in hopes of diverting the situation from arrest. If the outreach is not successful in gaining the individual's consent for transport, the police return at a later date without the PATH team and make the arrest. CBI has worked with police in Phoenix, Mesa, Tempe, Peoria, Avondale, Glendale, Scottsdale, Chandler and Youngstown. In addition, CBI added a question to the PATH screening tool asking participants whether they had been involved in the criminal justice system (defined as having any jail time in their history) to improve identification of the justice-involved population.

Through all of the local community outreach programs, the PATH program and Outreach Navigators work with the local police and park rangers. Twice per quarter, the PATH team does targeted outreach through Mesa's Operation Mainline, a community event sponsored by the Mesa Police to educate and connect the street homeless population to community resources. PATH works with Mesa Fire to engage the Fire Department's top 10 list of homeless individuals whose behavioral health issues result in frequent 911 calls.

Service Provision: Describe the organization's plan to provide coordinated and comprehensive services to PATH-eligible clients, including:

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How the services to be provided using PATH funds will align with PATH goals and maximize serving the most vulnerable adults who are literally and chronically homeless, including those with serious mental illness who are veterans and experiencing homelessness, to obtain housing and mental/substance use disorder treatment services and community recovery supports necessary to assure success in long-term housing;

CBI's proposed PATH budget is allocated almost entirely for PATH team salary and employee-related expenses and related operating costs such as vehicles, phones, laptop computer, HMIS licenses, and office rent. Less than 1% of the budget is allocated for outreach supplies such as heat relief in summer and blankets in winter, and participant needs such as bus passes and costs to obtain identification. The PATH Program Manager closely manages goals for contacts, enrollments, and positive exits to ensure that the project is serving the target population.

The PATH Outreach Navigators conduct intensive street outreach and engagement. CBI divided the county into three quadrants (east, west, and central) and assign teams to cover each geographically defined area. The PATH teams work in teams of two when conducting street outreach. One Navigator is assigned when conducting in-reach within a facility or when locating at the Human Services Campus, which allows PATH to provide seven day per week coverage for these areas. The street outreach teams work an 8-4, Monday through Friday schedule and the facility and HSC Navigators work a 9 AM to 7 PM schedule. CBI also has 24/7 mobile outreach teams for crisis response.

PATH teams use a variety of methods for outreach and engagement. Teams identify the densely populated areas of homelessness such as river bottoms, parks, streets, bridges, and industrial zones and determine if outreach will be on foot or mobile. CBI will partner with police if a more targeted approach is needed. PATH Outreach teams employ the use of water during summer months and blankets during the winter. Teams may provide other assistance during outreach such as bus passes or transportation assistance as a means to connect homeless individuals to resources or attend designated appointments or services. The proposed PATH program budget includes a small amount of funding for bus passes, heat relief supplies, and assistance in obtaining identification(s).

CBI PATH's management staff worked with MAG staff to create criteria for encampments throughout Maricopa County. Groupings of ten or more individuals within 50-feet of one another were defined as an encampment, were identified using Google maps, and documented in an Excel spreadsheet. The locations included parks, riverbeds, strip malls, cross streets, public fairways, churches, and places of business where a density of 10+ homeless individuals were identified. CBI's PATH team continues to evaluate and update the geographical data, as needed.

PATH Navigators conduct outreach to encampments around the Human Services Campus (HSC), specifically the SOS lots, to identify homeless individuals need for ongoing behavioral health service connections and/or need for SMI evaluation, identify individuals with a current SMI designation, connect members to community shelter services, and work collaboratively with the member's assigned clinic to ensure continuity of clinical care, and identify and

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implement the next steps in the member's housing plan. When the PATH Navigators identify a potential PATH member during this targeted outreach, they complete an HMIS intake packet to connect the participant to the PATH program.

Any gaps that exist in the current service systems;

First, the process of obtaining an SMI determination for participants who have a co-occurring mental health and substance use disorder is extremely difficult. The initial evaluation to identify and confirm the presence of a serious mental illness cannot be completed if the participant is under the influence of drugs or alcohol. Programmatic standards are set so that the evaluation is completed within 30 days or less of initial project entry. For participants with potential co-occurring diagnoses, the evaluator will often extend the period for an additional 90 days. This extended evaluation period was eliminated during the pandemic, which created another barrier for persons with co-occurring disorders. In addition, it appears that the way the criteria is applied can vary significantly depending upon the medical practitioner conducting the evaluation.

CBI changed their process by enlisting the PATH Behavioral Health Professional to complete the full bio-psycho-social intake assessment to expedite a participant's entry into general mental health services, which would accelerate CBI's assessment of whether to refer the participant for an SMI-determination. By addressing the general mental health issues up front and generating better referrals to the Crisis Response Network, CBI hoped to mitigate some of the difficulty in evaluating participants with co-occurring diagnoses for a possible SMI diagnosis. The existence of substance use issues is still the prevalent reason for denial. In some denials, the evaluator wants participants to have more time in general mental health services before the evaluation can be completed. Some cases are denied because while there was an impairment identified, the diagnosis did not qualify as a diagnosis classified as a serious mental illness. CBI PATH continues to get participants connected to community health services as quickly as possible and refer for an SMI determination when warranted. Keeping participants engaged in community mental health services is vital to the process of getting a participant evaluated and assessed for PATH-funded health and housing services.

The wait for housing for members who are not chronically homeless still remains a significant barrier as well. Unless participants have a high acuity and have lived a considerable length of time on the streets, they will be low on a very long waiting list for rapid re-housing and/permanent supportive housing. The process for obtaining the identification and documents participants need is very time consuming; however, without an Arizona ID, participants cannot get into an assigned clinic or obtain a housing voucher. Arizona's law for obtaining an ID is complex.

A brief description of the current services available to clients who have both a serious mental illness and a substance use disorder; and

CBI's system of care is licensed as co-occurring enhanced. PATH team members receive support from the entire CBI system of care, which includes outpatient services (behavioral health and medical services) and facility-based crisis services that are available 24/7/365. Also,

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CBI's ACT and FACT teams, supportive housing program in collaboration with Mercy Maricopa Integrated Care (MC) for participants with SMI, medical detox services, medication-assisted treatment, and counseling services all are available for participants served by the PATH teams.

For participants who need psychiatric medications, the PATH Outreach Navigators coordinate internally and transport patients to the PATH team psychiatric practitioner, or a CBI Access Point, where they will see a Psychiatrist or Psychiatric Nurse Practitioner. Participants will receive a full assessment and bridge script to meet their immediate needs. Based on the assessment and psychiatric evaluation, CBI will refer the participant for an SMI eligibility determination, preferably within 90 days of contacting the individual. For those participants who do not have an SMI eligibility determination within 90 days, the PATH Navigators will continue with active outreach and engagement efforts for up to six months.

PATH team Lead Navigators assist with the follow-up activities for SMI determinations, eligibility verification, coordination with the other providers, and adult clinical teams. If a participant needs behavioral health services, the PATH Navigator and/or Lead Navigator will coordinate internally with their CBI counterparts to enroll the participant in an existing behavioral health program or refer to another provider the participant chooses. Active engagement in behavioral health services is the best way to limit potential crisis episodes. PATH Lead Navigators assist with completion of AHCCCS applications in Health-E Arizona, and Social Security benefits (SOAR). PATH Lead Navigators also conduct in-reach at designated co-located sites.

The PATH team follows the same process for medical conditions to limit the possibility of a medical emergency. If the PATH Outreach Navigator finds that the participant has pre-existing medical issues that have not been addressed, or been assessed in some time, he/she will coordinate with the participant's Primary Care Physician (PCP) and/or coordinate internally with a CBI Physician or Family Nurse Practitioner to provide assessment and medical treatment as needed. In addition, participants receive medical and behavioral health services through Circle the City.

CBI's Navigators are trained in techniques to build rapport, engage, and redirect participants to prevent a crisis and to recognize when participants may be a danger to self or others. When a crisis does occur, program participants, or their families, can reach the on-call PATH Navigator through the PATH on-call number or CBI's Access to Care line, both available 24/7 for after hour emergencies. PATH Outreach Navigators can contact CBI's mobile outreach teams (one in East Valley, one in West Valley, and one in Phoenix) 24/7, 365 days per year for response to crisis situations or when the participant may be a danger to self or others. Mobile outreach teams, staffed with a Peer Support Specialist and an EMT, are connected to a Triage RN for clinical support. Both a Medical Physician and a Psychiatrist are on-call 24/7 to assist the Triage RN when needed. The mobile outreach team can conduct a baseline medical assessment and transport the participant if he/she needs to enter one of CBI's facilities for assessment, triage, and follow up care. Working with the Clinical Lead, the PATH Outreach Team is skilled in the petitioning process when issues such as danger to self or others are present. The mobile outreach

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team working with PATH navigation helps manage the immediate crisis by getting the participant to the most appropriate level of care and reduces the impact on the crisis system overall (e.g., hospitals, fire, police and urgent psychiatric care).

CBI maintains written policies for significant events reporting and incident review. A manager is on-call 24/7 and is notified immediately. The manager must notify the Chief Operating Officer immediately. Any incident where the police are called or the participant is a danger to self or others is reviewed by the Quality Management Division. The results are reviewed by the managers and clinical oversight.

How services to active duty military service members, returning veteran and military families will be considered and prioritized.

CBI operates a Supportive Service for Homeless Veterans (SSVF) program, and Project H3 Vets, a navigation program for homeless veterans with a HUD VASH voucher. We collaborate with the VA's Community Resource and Referral Center (CRRC) on outreach referrals through our Vet Connect outreach program. We also participate in weekly veteran case conferencing with the CRRC and other community partners such as U.S. Vets and MANA House. CBI also has frequent meetings with the HUD VASH case managers to staff cases when a veteran has a VASH voucher or is enrolled in substance use treatment services.

CBI's PATH program works with the Navigators from our veteran-specific programs to conduct SMI determination evaluations and makes referrals of homeless veterans identified through the PATH teams' outreach efforts.

A brief description of how PATH eligibility is determined, when enrollment occurs, and how eligibility is documented for PATH enrolled clients.

The navigation outreach process progresses through stages as the participant's readiness for change progresses. Navigators make multiple contacts with homeless participants to build a rapport and level of trust, as well as determine the homeless persons readiness for change. A contact may range from a brief conversation between the navigator and the person about the homeless person's well-being or needs, to a referral to service. Navigators document their contact notes including basic observations from the contact and contact location, which helps to inform future contacts with the homeless individual. Most importantly, Navigators document the individual's functional impairments to begin documenting the history needed to support potential SMI designation in future. A major barrier for individuals with mental illness who are homeless is that they have no documented history that can be used to support an SMI designation. The PATH Clinical Lead provides clinical oversight and support to the Navigators including training on recognizing the signs and symptoms of mental illness. The Navigators enter their observations on participant behavior in their case notes.

Engagement occurs when the participant expresses interest in pursuing housing and services. The Navigator will complete the Vulnerability Index-Service Prioritization Decision Assistance Tool (VI-SPDAT) to enter the participant into the Maricopa County Continuum of Care coordinated entry system. The participant will sign the Homeless Management Information

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System (HMIS) data sharing consent form and the Navigator will check the state roster to determine if an SMI determination already exists. Based on the results of the VI-SPDAT assessment, an appropriate housing intervention is determined. In addition to the VI-SPDAT, the PATH team uses the PATH intake screening tool to ensure appropriate enrollment for the PATH program.

When a participant is ready to formally pursue housing and services, the Navigator will enroll him/her into the project, create a participant file, and begin case management. PATH Navigators document their case notes and the PATH status determination date in HMIS.

Data: Describe the provider's participation in HMIS and describe plans for continued training and how PATH contractors will support new staff. For any providers not fully participating in HMIS, please describe plans to complete HMIS implementation.

PATH Team staff enter all PATH participant information into the Homeless Management Information System (HMIS). All PATH Navigators receive an HMIS license, which requires them to complete initial training before receiving a license receive and access to the HMIS system. PATH team staff complete refresher training at least annually to remain a licensed user and complete frequent web-based trainings throughout the year. The PATH staff meet with CBI's Data Coordination Administrator at least quarterly or more frequently when needed to discuss follow up on HMIS user issues. The PATH Manager conducts data reviews based on the HMIS reporting tool and the PATH data quality report. This allows management to assess the accuracy of documentation. The information gleaned from report reviews is shared with staff during the weekly team meetings and serves as opportunities for growth and development.

For PATH participants needing a higher level of clinical care (i.e., medical detoxification, crisis stabilization, psychiatric stabilization, etc.), CBI creates an electronic health record (EHR) in its NextGen system, which is used for coordination of care across CBI's system of care. NextGen is certified through the Office of National Coordinator's EHR certification program.

The PATH Manager creates a weekly data dashboard that tracks new contacts and enrollments for the week and for the fiscal year. The dashboard also tracks the number housed each week, intakes completed from other programs, SMI evaluations scheduled, SOAR referrals, VI-SPDATs completed, and jail pick-ups. The PATH Manager holds weekly staffings with the PATH staff to review progress in meeting program goals. The PATH Manager uses the data to set weekly performance targets for the outreach teams and keep the staff focused on program performance. The Director or Senior Director, HCI conducts weekly management team staffings where program performance data is also reviewed. The management team is able to cross reference performance data across programs, which helps strengthen connections between the programs and improve performance.

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SSI/SSDI Outreach, Access, Recovery (SOAR): Describe the provider’s plan to ensure that PATH staff have completed the SOAR Online Course and which staff plan to assist consumers with SSI/SSDI applications using the SOAR model and track the outcomes of those applications in the SOAR Online Application Tracking (OAT) system. Please be sure to submit Certificate of Completion of the On-Line SOAR Course with IUP submission.

The PATH Program Manager assigns one Lead Navigator to act as the point person and specialize in developing SOAR applications. This SOAR Lead completes SAMHSA’s seven course on-line SOAR certification program. The SOAR Lead develops the SOAR application, compiles the medical records and other paperwork to complete the application, and serves as the point of contact with the Disability Determination Office, and submits appeals, when necessary. This designated Lead Navigator is responsible for tracking outcomes in HMIS as well.

All other staff assist by prescreening and referring participants for SOAR and assisting with gathering the documentation needed to submit an application to the Disability Determination Specialist (DDS).

Based on our experience in the previous five years, CBI’s PATH program anticipates serving 30-35 SOAR applicants per year, approximately 2-3 participants per month.

CBI included the SOAR Certificate of Completion for CBI PATH staff Christina Arispe.

If the provider does not use SOAR, describe the system used to improve accurate and timely completion of mainstream benefit applications (e.g. SSI/SSDI). Also describe the efforts used to train staff on this alternative system and what technical assistance or support they receive to ensure quality applications if they do not use the SAMHSA SOAR TA Center.

Housing:

Indicate what strategies will be used for making suitable housing available for PATH clients Provide the types of housing and the name of the agency (ies) you will be working with.

As a long-standing leader in substance use/mental health services, CBI has developed and maintained relationships with housing providers who offer varied housing interventions. CBI works with its existing network of affordable housing providers and private market landlords who have a working relationship with Community Bridges to house PATH participants. CBI housing partners include U.S. Vets, Cloudbreak Communities (veteran specific), Arizona Housing Inc. (AHI) Properties, and ABC Housing. CBI’s 24-bed Center for Hope transitional housing program serves homeless pregnant women with substance use and/or co-occurring substance use and mental health issues. CBI’s Starfish program, funded by the City of Phoenix, provides permanent supportive housing and support services to fifteen women who are survivors of sex trafficking and their children.

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In addition, CBI has effectively worked with Transitional Housing programs (MANA House and UMOM) as well as emergency shelters (CASS, Watkins, East Valley Men's Center, and Human Services Campus) to serve as interim housing until permanent housing can be obtained. If PATH participants are eligible for housing programs through sub-population qualifiers (i.e. DV Victims, Lesbian, Gay, Bisexual, Transgender, Questioning (LGBTQ) Youth, Veterans, HIV-positive individuals etc.), CBI Navigators will assist participants with the housing application process and the acquisition of necessary documentation for housing specific to these sub-populations. CBI partners with several agencies that serve specific subpopulations such as Native American Connections, one-n-ten, Jewish Family Services, Ebony House, and Chicanos Por La Causa.

Since 2014, CBI has been awarded multiple contracts for rapid-re-housing and permanent supportive housing that may be appropriate for some PATH participants. In FY 21/22, CBI will manage rental assistance for 20 units of tenant-based rental assistance in Mesa, and 166 units of HUD-funded rental assistance for permanent supportive housing specifically designated for chronically homeless individuals. The PATH team and the coordinated entry system are the key sources of referrals for this housing. CBI's SSVF program provides rental assistance to at least 380 homeless veterans per year. In FY 21/22, CBI is administering \$1.4 million in CARES Act grants for rapid rehousing and the necessary navigation staff to implement the housing outreach and placement services. For FY 22-23 CBI was awarded \$3.2 million in Rapid Re-Housing funding to target members living in shelters to be matched to the Continuum RRH program and move from shelter into permanent housing.

CBI manages programs that work with other housing providers. For example, Project H3 Vets, funded by VSUW, works with the Veterans Administration to house Veterans with HUD VASH vouchers. CBI makes referrals to the provider clinics that have housing dedicated for participants with SMI designation. CBI's Comprehensive Community Health Program (CCHP) receives City of Phoenix housing vouchers to support CCHP participants. CBI's Housing Navigator in Mesa uses tenant-based rental assistance, funded by Mesa, to house vulnerable homeless adults as a long-term bridge (up to two years) and assists them with getting added to the waiting lists for section 8 and project-based housing. When the participant is selected from the waiting list, the Housing Navigator assists with the application process and moving to new housing, if needed.

In addition, CBI has formed various linkages with recovery homes that aid individuals with co-occurring diagnoses who wish to address their substance use issues. CBI maintains an internal web-based directory of recovery homes and other resources for Maricopa County.

Finally, CBI operates multiple shelters and a 34-bed bridge housing program for homeless adults who have a housing solution (i.e., voucher, self-pay). The bridge housing beds allow homeless adults to access temporary housing while they proceed through the housing search and lease up process. This program is available to all housing programs from anywhere in the Valley.

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Describe how your agency will address the housing needs of those living with serious mental illness and who are incarcerated in designing and developing your program to prioritize services upon release from jail or prison, where appropriate.

In 2015, Maricopa County's Correctional Health Services (CHS) established a partnership with CBI and other community agencies to create a warm transfer process for inmates with mental health and/or substance use conditions. CHS identifies individuals with substance use/mental health issues who are ready for discharge and contacts CBI to transport the reentry offender to CBI's Cactus Integrated Care clinic. CBI assesses the member for services, and if appropriate, will enroll the participant into outpatient services. CHS refers those released individuals who have a serious mental illness (SMI) back to their assigned provider network organization case manager for additional support services. Reentry offenders with SMI and a high risk of recidivism also are referred to CBI's Forensic Assertive Community Treatment (F-ACT) program. F-ACT delivers a full range of services including life skills, housing, employment, health care, treatment, medications, financial management, and benefits for 300 SMI participants. This warm transfer model has demonstrated a 5% reduction in recidivism for this high-risk SMI population, as measured by Maricopa County Justice Services Planning (JSPI) analysis.

CBI receives funding from Maricopa County Human Services Department to provide navigation services for the Hand in Hand (HiH) Program inside the Maricopa County jail system. CBI's two Navigators receive referrals to the project from the Correctional Health Services (CHS) staff, meet face to face with the referred participants, complete the VI-SPDAT to assess their housing needs, complete the HMIS data packet, and begin release placement planning. The Navigator presents each participant at a weekly case conferencing with providers. Providers determine which participants they will accept based on the case conferencing. For the past three years, CBI has participated in the HiH collaborative partnership with representatives from Maricopa County Correctional Health Services (CHS), Maricopa County Human Services Department (HSD), Housing Authority of Maricopa County (HAMC), Mercy Care, Southwest Behavioral Health Services (SWBH), La Frontera EMPACT, and Arizona Behavioral Health Corporation (ABC).

Since January 2019, CBI has provided peer support services, transportation, case management, and employment assistance to participants identified with housing instability through Maricopa County Adult Probation Department's (MCAPD) new Housing Outreach and Peer Engagement (HOPE) project. Project HOPE serves post-adjudication felony participants convicted of drug-related charges or crimes motivated by a substance use disorder (SUD). MCAPD administers the Adult Drug Court in Maricopa County, provides clinical services to participants, coordinates treatment referrals, and provides probation supervision.

Staff Information: Describe how staff providing services to the population of focus will be sensitive to age, gender, disability, lesbian, gay, bisexual, and transgender, racial/ethnic, and differences of clients.

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CBI uses multiple strategies to ensure cultural competency and meet the national standards for culturally and linguistically appropriate services in health and health care (CLAS) including: a racially/ethnically diverse staff, bilingual staff and access to language assistance services, and partnering with community agencies that provide culturally specific services.

Community Bridges staff recruitment and retention policies require equal consideration of all candidates. Bilingual staff who qualify, receive an additional \$1 per hour after they pass a professionally administered language test when these skills are desired for certain job categories (i.e., intake specialists, nurses, counselors, and transition managers). Information is requested about whether the candidate has language skills in addition to English. Also, staff have access to language assistance services including in-person interpreters/translators, telephonic interpretation, video relay services, and any other language assistance service retained by CBI.

Staff are retained through ongoing employee development, and supervision that includes mentoring, opportunities to refine skills, opportunities to expand experience by moving into other program areas, scholarships for staff seeking college degrees; financial assistance for getting and maintaining certifications and licensures; tuition assistance opportunities for professional development requirements, and an attractive compensation package.

CBI recognized the need to address LGBTQ issues and concerns and to create a "safespace" for both LGBTQ participants and employees. Based on the work of an internal agency LGBTQ Committee, CBI increased education on transgender issues, developed a thorough LGBTQ resource list, and created a "safespace" through visible and tangible support. Safespace signage and decals are evident throughout every CBI facility, reminding both employees and patients that CBI advocates and supports members of the LGBTQ community. Educational modules addressing discrimination, harassment and historical content of the LGBTQ community also have been incorporated into the Peer Support Certification program. CBI values collaborative efforts and partners with local community organizations such as one•n•ten, and the LGBTQ Consortium on community events and outreach efforts.

CBI provides gender-specific trauma-informed care for women through Center for Hope (CFH) transitional housing program for homeless pregnant women with a substance use disorder or co-occurring disorders, a women's intensive outpatient program, and Starfish program in Phoenix for women transitioning out of sex trafficking.

Describe how often staff receives training in cultural competence and health disparities and how is this documented.

CBI offers live annual trainings on Cultural Competency, as well as Relias online learning that is completely at time of hire and on an annual renewal requirements. To ensure CBI Housing Navigators and management are trained in equal access to program and civil rights, CBI's forty (40) hour Peer Certification Training includes sessions on Neurodiversity, History of Disability Rights, ADA, History of Civil Rights, Fair Housing Act, Cultural Experience Native American Connections, and LGBTQ.

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The PATH Management is responsible for tracking the new hire trainings and all subsequent annual trainings. CBI trainings are tracked in Relias. Trainings completed outside of training are tracked by management.

PATH Eligibility & Enrollment:

Describe how PATH eligibility is determined, when engagement and enrollment occurs and how each is documented. (Be detailed)

Upon establishing a relationship, the Navigator will conduct an initial assessment using the Vulnerability Index and Service Prioritization Decision Tool (VI-SPDAT). This is the approved assessment tool for the Maricopa County Continuum of Care coordinated entry system. Based on the results of the VI-SPDAT assessment, an appropriate housing intervention is determined. In addition to the VI-SPDAT, the PATH team uses the PATH intake screening tool to ensure appropriate enrollment for the PATH program.

Once the participant expresses interest in accessing services and signs a release of information (enrolled), the Navigator works with the participant to create a comprehensive case plan, which is updated at least every 90 days or more frequently as goals are achieved and new goals are added. PATH Navigators assist individuals who are part of the target population to meet basic needs, access treatment services provided by CBI or other community providers, as well as other community services such as shelter, housing, health care, employment, mainstream benefits (i.e., food stamps, disability benefits as appropriate), representative payee services, recreational and socialization opportunities. A key part of the process is referring participants to the Crisis Response Network (CRN) for an SMI-determination evaluation.

Navigators assess participants in sixteen domains related to improving health, wellness, and quality of life including: Self-Care and Daily Living Skills; Social Relationships and Networks; Meaningful Daily Activity; Personal Administration and Money Management; Managing Tenancy; Mental Health, Wellness & Cognitive Functioning; Medication; Interaction with Emergency Services; Involvement in High Risk and/or Exploitive Situations; Substance Use; Abuse and/or Trauma; Risk of Personal Harm/Harm to Others; Legal; and History of Homelessness and Housing.

Case plans are customized to the individual based on the issues presented, and the participant's willingness and ability to take action. The PATH Navigators work closely with other segments of CBI's and other providers' systems of care to support participants.

Daily and weekly staffing with a PATH multidisciplinary team that includes a Behavioral Health Professional provides an additional level of participant support. A Licensed Clinical Social Worker participates in the staffing to provide behavioral health oversight, psychiatric evaluation, and review of medications with an emphasis on screening for SMI eligibility.

Describe the behavioral health needs of active duty military service members, returning veterans, and military families in designing and developing their programs and to

COMMUNITY BRIDGES, INC.

Projects for Assistance in Transition from Homelessness (PATH)

Contractor Intended Use Plan (IUP)

Contract Period July 1, 2022 – June 30, 2023

consider prioritizing this population for services, where appropriate with will be addressed.

CBI operates a Supportive Service for Homeless Veterans (SSVF) program, and Project H3 Vets, a navigation program for homeless veterans with a HUD VASH voucher. We collaborate with the VA's Community Resource and Referral Center (CRRC) on outreach referrals through our Vet Connect outreach program. We also participate in weekly veteran case conferencing with the CRRC and other community partners such as U.S. Vets and MANA House. CBI also has frequent meetings with the HUD VASH case managers to staff cases when a veteran has a VASH voucher or is enrolled in substance use treatment services.

CBI's PATH program works with the Navigators from our veteran-specific programs to conduct SMI determination evaluations and makes referrals of homeless veterans identified through the PATH teams' outreach efforts.

Client Information: Describe the demographics of the client population. Use the chart below to identify Projected Outreach, Engagement and Enrollment Goals.

The FY 20/21 (July 1, 2020-June 30, 2021) year-end PATH report included 2,990 new persons contacted during the fiscal year, compared to 3,480 total persons contacted by PATH-funded staff during the fiscal year. During the year, 1,422 persons had active, enrolled PATH status at any point during the fiscal year. The following demographic data is based on the data for these 1,422 enrolled persons:

Gender: 549 (38.6%) female; 861 (60.5%) male; 6 (0.4%) no single gender; and 6 (0.4%) questioning gender

Age: 66 (4.6%) 18-23 yr old; 164 (11.5%) 24-30 yr old; 350 (24.6%) 31-40 yr old; 331 (23.2%) 41-50 yr old; 355 (23.5%) 51-61 yr old; and 156 (10.9%) 62 and over.

Race: 985 (69.2%) white; 336 (23.6%) black/African American or African; 122 (8.5%) American Indian/Alaskan Native; 11 (0.7%) Native Hawaiian or Pacific Islander; and 12 (0.8%) Asian or Asian American. Note: An individual who identifies as multiracial is counted in all applicable categories. This demographic element will not sum to total persons enrolled.

Ethnicity: 314 (22%) Hispanic/Latino and 1,108 (77.9%) non-Hispanic.

Veteran Status: 54 (3.7%) Veterans and 1,368 (96.2%) non-Veteran.

Living Situation at Project Start: 1,062 (74.6%) literally homeless; 190 (13.3%) institutional situation; 169 (11.8%) transitional or permanent housing situation; and 1 (0.07%) data not collected.

COMMUNITY BRIDGES, INC.

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Contract Period July 1, 2022 – June 30, 2023

Projected Outreach, Engagement & Enrollment Goals						
Projected Number of Persons to be Contacted (Level of Effort)	Projected Number of Persons to be Contacted (Unduplicated)	Projected Number of Persons to be Engaged	Projected Number of Persons to be Enrolled	Projected Number of Persons to be “Literally Homeless”	Projected Number of Persons to be Veterans or Returning Veterans	Projected Number of Persons to be Active Military Service
4,640	2,800	1,540	1,064	862	58	0

NOTE: Include methodologies / tracking tools to be used to ensure goals are reached or exceeded.

The estimated goals for outreach, engagement, and enrollment are based on the Maricopa County PATH program performance over the past five years. CBI is focused on balancing the number of contacts with increasing the quality of interactions with the participants. Each year, we review our estimates based on our actual experience from the prior year and current operating conditions.

The funding amount awarded reflects 11 Navigator I’s and II’s. CBI projected the number of unduplicated persons consistent with previous year’s performance ratios. In FY 20/21, CBI PATH had served 2,990 new unduplicated participants, which amounts to 332 participants per Navigator. The percentage of enrolled to unduplicated persons served has stayed consistent at 47% in FY 20/21, or 1,316 (2,800 x 47%). The remaining estimates are based on the ratio of each measure to the number of new contacts enrolled (line 14 of the PATH 19 report) experienced in FY 20/21.

CBI’s FY 22/23 project focuses on retaining the current staffing model so that Navigators have the capacity to work more closely and intensely with each enrolled member. In our experience, individuals who have experienced long-term unsheltered homelessness have significant mental health issues or concerns, often combined with substance use disorder. This population needs intensive navigation services to connect to SMI evaluations, mental health and substance use treatment, and housing to improve quality of life and focus on the social determinants of health. CBI will serve the same amount of enrolled that we served in FY 21/22 because it supports the behavioral health clinician capacity of our PATH program, and our navigation staff are stably positioned to meet the needs of this high-needs population.

Projected Outcomes

COMMUNITY BRIDGES, INC.
 Projects for Assistance in Transition from Homelessness (PATH)
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Number of persons referred to and attaining housing.	Number of persons referred to and attaining mental health services.	Number of persons referred to and attaining substance use disorder services.	Number of Community Education/Awareness Events to be provided. (Provide documentation)
92	266	85	4

Consumer Involvement – Describe how individuals who experience homelessness and designated serious mental illnesses, and family members will be meaningfully involved at the organizational level in the planning, implementation, and evaluation of PATH-funded services. For example, indicate whether individuals who are PATH-eligible are employed as staff or volunteers or serve on governing or formal advisory boards.

CBI's extensive use of certified peer supports underscores the agency's commitment to involve mental health consumers in its organization. CBI employs over 280 certified Peer Support Specialists throughout the organization and at all levels of the organization. At CBI, a Peer Support is a credentialed Behavioral Health Technician who has a personal history in recovery from substance use and mental health disorders. Many also have been homeless and/or served sentences in the criminal justice system, which helps integrate the perspective of people impacted by mental health or substance use into care delivery. All of CBI's Navigators complete a 40-hour peer support certification training program that includes motivational interviewing, assessment and triage, ASIST suicide prevention, and patient care planning, as well as awareness of discrimination and harassment facing the LGBTQ community. CBI's EMDR therapists teach an introduction to trauma care in new employee orientation and a full trauma care module in the peer certification training. Navigators are equipped to help others apply for benefits. Navigators attend periodic community-based trainings on topics related to homelessness and recovery. Each Navigator is responsible for completing continuing education and clinical supervision, regardless of professional level or certification. CBI Navigators are required to attend two sessions of Clinical Supervision with a Licensed Clinician per month. At each session the Clinician has specific curricula for training on Evidence Based Practices such as Critical Time Intervention, Motivational Interviewing, Harm Reduction, Assertive Outreach and Trauma Informed Care. The staff also engage in case study discussions based on their job experiences to help them learn and improve their skills in providing services to the community.

CBI embraces the patient-centered philosophy in which the patient is fully involved in their treatment planning process. CBI values the input of PATH family members (with informed consent) as a means to create positive outcomes and build up recipients' protective factors. The PATH Navigators seek out natural supports for each participant to engage them in the treatment process.

Good Neighbor Alliance

420 N 7th St
Sierra Vista, AZ 85635
Contact: Julie Wilson

Email Address: jwilson@goodneighboralliance.com

Provider Type: Shelter or other temporary housing resource

PDX ID: AZ-009

State Provider ID: AZ-009

Contact Phone #: 5204390776

- **Local Provider Description** – Provide a brief description of the provider organization receiving PATH funds, including name, type of organization, region served, and the amount of PATH funds the organization will receive.
- **Collaboration with HUD Continuum of Care (CoC) Program** – Describe the organization’s participation with local HUD Continuum of Care (CoC) recipient(s) and other local planning activities and program coordination initiatives, such as coordinated entry activities. If the organization is not currently working with the Continuum(s) of Care, briefly explain the approaches to be taken by the organization to collaborate with the CoC(s) in the areas where PATH operates.
- **Collaboration with Local Community Organizations** – Provide a brief description of partnerships and activities with local community organizations that provide key services (e.g., outreach teams, primary health, mental health, substance use disorder, housing, employment) to PATH-eligible clients, and describe the coordination of activities and policies with those organizations. Provide specific information about how coordination with other outreach teams will be achieved.
- **Service Provision** – Describe the organization’s plan to provide coordinated and comprehensive services to PATH-eligible clients, including:
 - How the services to be provided using PATH funds will align with PATH goals and maximize serving the most vulnerable adults who are literally and chronically homeless, including those with serious mental illness who are veterans and experiencing homelessness, to obtain housing and mental/substance use disorder treatment services and community recovery supports necessary to assure success in long-term housing;
 - Any gaps that exist in the current service systems;
 - A brief description of the current services available to clients who have both a serious mental illness and a substance use disorder; and
 - A brief description of how PATH eligibility is determined, when enrollment occurs, and how eligibility is documented for PATH enrolled clients.
- **Data** – Describe the provider’s participation in HMIS and describe plans for continued training and how providers will support new staff. For any providers not fully participating in HMIS, please describe plans to complete HMIS implementation.
- **Housing** – Indicate the strategies that will be used for making suitable housing available for PATH clients (i.e., indicate the type of housing provided and the name of the agency).
- **Staff Information** – Describe how staff providing services to the population of focus will be sensitive to age, gender, disability, lesbian, gay, bisexual, and transgender, racial/ethnic, and differences of clients. Describe the extent to which staff receive periodic training in cultural competence and health disparities.
- **Client Information** – Describe the demographics of the client population, the projected number of adult clients to be contacted and enrolled, and the percentage of adult clients to be served using PATH funds who are literally homeless.
- **Consumer Involvement** – Describe how individuals who experience homelessness and have serious mental illnesses, and family members will be meaningfully involved at the organizational level in the planning, implementation, and evaluation of PATH-funded services. For example, indicate whether individuals who are PATH-eligible are employed as staff or volunteers or serve on governing or formal advisory boards.
- **Budget Narrative** – Provide a budget narrative that includes the local-area provider’s use of PATH funds.

I certify that the responses to this Narrative Question in the FY 2020 PATH Application are still accurate. Yes No

Planning Period From 7/1/2022 to 6/30/2023

The state can either enter all the IUPs and associated budgets as in prior years, or they may allow IUP users to enter their own information into WebBGAS. For more information on allowing IUP users to enter their own details, please see the tutorial under the Training Tab in WebBGAS that instructs states and IUP providers on this new process.

* Indicates a required field

Category	Federal Dollars	Matched Dollars	Total Dollars	Comments
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a. Personnel 46,430.00 16,120.00 62,550.00

Position *	Annual Salary *	% of time spent on PATH *	PATH-Funded FTE	PATH-Funded Salary *	Matched Dollars *	Total Dollars	Comments
PATH Administrator	1,170.00	5.00 %	0.00	0.00	0.00	0.00	<input type="text" value="\$1,1170 In-Kind dollars"/>
Social Worker	6,552.00	100.00 %	0.00	0.00	0.00	0.00	<input type="text" value="Shower Attendant (\$6,552 In Kind Dollars)"/>
Other (Describe in Comments)	32,760.00	100.00 %	0.57	18,528.00	6,432.00	24,960.00	<input type="text" value="Team Leader (\$7,800 In Kind Dollars)"/>
Other (Describe in Comments)	27,300.00	100.00 %	0.53	14,358.00	4,985.00	19,343.00	<input type="text" value="Outreach Specialist (\$7957 In Kind Dollars)"/>
Other (Describe in Comments)	25,790.00	100.00 %	0.43	11,117.00	3,860.00	14,977.00	<input type="text" value="Outreach Specialist (\$10,813 In Kind Dollars)"/>
Other (Describe in Comments)	10,452.00	100.00 %	0.23	2,427.00	843.00	3,270.00	<input type="text" value="PATH Shower Attendant (\$7,182 In Kind Dollars)"/>

Category	Percentage	Federal Dollars *	Matched Dollars *	Total Dollars	Comments
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b. Fringe Benefits 5.70 % \$ 3,563.00 \$ 1,237.00 \$ 4,800.00

Category	Federal Dollars	Matched Dollars	Total Dollars	Comments
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c. Travel \$ 2,655.00 \$ 922.00 \$ 3,577.00

Line Item Detail *	Federal Dollars *	Matched Dollars *	Total Dollars	Comments
Gas	\$ 2,655.00	\$ 922.00	\$ 3,577.00	<input type="text"/>

d. Equipment \$ 0.00 \$ 0.00 \$ 0.00

No Data Available

e. Supplies \$ 0.00 \$ 0.00 \$ 0.00

No Data Available

f. Contractual \$ 0.00 \$ 0.00 \$ 0.00

No Data Available

g. Housing \$ 0.00 \$ 0.00 \$ 0.00

No Data Available

h. Construction (non-allowable)

i. Other \$ 7,476.00 \$ 2,597.00 \$ 10,073.00

Line Item Detail *	Federal Dollars *	Matched Dollars *	Total Dollars	Comments
Office: Insurance (Property, Vehicle, Malpractice, etc.)	\$ 1,698.00	\$ 589.00	\$ 2,287.00	<input type="text"/>
Office: Misc (Copying, Courier, Postage, etc.)	\$ 223.00	\$ 77.00	\$ 300.00	<input type="text"/>
Office: Other (Describe in Comments)	\$ 3,208.00	\$ 1,115.00	\$ 4,323.00	Leased Vehicle
Office: Other (Describe in Comments)	\$ 1,324.00	\$ 459.00	\$ 1,783.00	Vehicle Maintenance
Office: Other (Describe in Comments)	\$ 67.00	\$ 23.00	\$ 90.00	Vehicle Licenses
Staffing: Other (Describe in Comments)	\$ 956.00	\$ 334.00	\$ 1,290.00	PATH Staff Cell phone purchase/monthly usage

j. Total Direct Charges (Sum of a-i) \$ 60,124.00 \$ 20,876.00 \$ 81,000.00

Category	Federal Dollars *	Matched Dollars *	Total Dollars	Comments
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k. Indirect Costs (Administrative Costs) \$ 0.00 \$ 0.00 \$ 0.00

l. Grand Total (Sum of j and k) \$ 60,124.00 \$ 20,876.00 \$ 81,000.00

Source(s) of Match Dollars for State Funds:

Estimated Number of Persons to be Contacted:	107	Estimated Number of Persons to be Enrolled:	21
Estimated Number of Persons to be Contacted who are Literally Homeless:	107		
Number staff trained in SOAR in grant year ending in 2021:	1	Number of PATH-funded consumers assisted through SOAR:	0

Projects for Assistance in Transition From Homelessness (PATH) Budget Outline

PATH Contractor Name: |
Contract Reporting Period:

Good Neighbor Alliance
July 1, 2022- June 30, 2023

County Service Area	FEDERAL PATH GRANT	NON FEDERAL STATE MATCH	TOTAL FEDERAL/STATE	IN-KIND	SUB-CONTRACTOR(S) IN-KIND, IF APPLICABLE
List					
PERSONNEL					
Position	Name	Salary	Level Of Effort		
PATH Administrator	Dr. DeLuca	\$1,170.00	0.05	\$ -	\$ -
Team Leader Julie Wilson	Julie Wilson	\$32,760.00	1.00	\$ 18,528	\$ 6,432
Outreach Specialist	Carmelita Reyes	\$27,300.00	1.00	\$ 14,358	\$ 4,985
Outreach Specialist	Jerome Covington	\$25,790.00	1.00	\$ 11,117	\$ 3,860
Shower Attendant	Tammy Stone	\$10,452.00	1.00	\$ 2,427	\$ 843
Shower Attendant	Kyle Allen	\$6,552.00	1.00	\$ -	\$ -
Data Specialist				\$ -	\$ -
Program Supervisor				\$ -	\$ -
Other				\$ -	\$ -
TOTAL PERSONNEL			5.1	\$ 46,430	\$ 16,120
EMPLOYEE RELATED EXPENSES (ERE)			11.65%	\$ 3,563	\$ 1,237
TOTAL ERE				\$ 3,563	\$ 1,237
PROFESSIONAL AND OUTSIDE SERVICES					
				\$ -	\$ -
				\$ -	\$ -
TOTAL PROF & OUTSIDE				\$ -	\$ -
TRAVEL					
Mileage Reimbursement @ .445/mile				\$ -	\$ -
Gas (100% PATH dedicated Vehicles)				\$ 2,655	\$ 922
Out of State Travel - Airfare					
Out of State Travel - Lodging					
Out of State Travel - Per Diem					
Out of State Travel - Ground Transportation/Misc					
TOTAL TRAVEL				\$ 2,655	\$ 922
OCCUPANCY					
Office Rent Expenses				\$ -	\$ -
Office Utilities				\$ -	\$ -
TOTAL OCCUPANCY				\$ -	\$ -
HOUSING (Limited to 20% as defined in PATH Legislation)					
Housing Assistance ⁽¹⁾				\$ -	\$ -
TOTAL HOUSING				\$ -	\$ -
PATH ENROLLEE					
Petty Cash for Emergencies (Must submit receipts with CERs)				\$ -	\$ -
Outpatient Services				\$ -	\$ -
Medication Supplies				\$ -	\$ -
Prescription Co-pays				\$ -	\$ -
Utility Turn-on's				\$ -	\$ -
Emergency Items - sunscreen, thongs				\$ -	\$ -
Medical Contract Services				\$ -	\$ -
Hygiene kits				\$ -	\$ -
Client Supplies - Bus tokens				\$ -	\$ -
Client Supplies - PATH Enrollee trac phones				\$ -	\$ -
TOTAL PATH ENROLLEE				\$ -	\$ -
OTHER OPERATING					
Vehicle Licenses				\$ 67	\$ 23
Vehicle GPS System				\$ -	\$ -
Vehicle Maintenance				\$ 1,324	\$ 459
Vehicle Insurance				\$ 1,698	\$ 589
Leased Vehicle				\$ 3,208	\$ 1,115
Training and Conference Fees				\$ -	\$ -
Copying				\$ 223	\$ 77
Office Supplies				\$ -	\$ -
Office Desk Telephones				\$ -	\$ -
Security				\$ -	\$ -
Janitorial				\$ -	\$ -
Landscaping				\$ -	\$ -
Desk/Laptop Computers				\$ -	\$ -
HMIS Licenses				\$ -	\$ -
Software				\$ -	\$ -
Postage				\$ -	\$ -
PATH Staff Cell Phone Purchase/Monthly Usage				\$ 956	\$ 334
TOTAL OTHER OPERATING				\$ 7,474	\$ 2,599
INDIRECT OR ADMINISTRATIVE OVERHEAD ⁽²⁾⁽³⁾⁽⁴⁾					
INDIRECT OR ADMINISTRATIVE OVERHEAD PERCENTAGE ⁽²⁾⁽³⁾⁽⁴⁾				\$ -	\$ -
	FEDERAL	STATE	TOTAL	IN-KIND	
GRAND TOTAL	\$ 60,124	\$ 20,876	\$ 81,000	\$ 44,860	\$ -

**Projects for Assistance in Transition From Homelessness (PATH)
Budget Outline**

GRANT AMOUNT REQUESTED

\$ 81,000 PLUS IN-KIND \$ 44,860 =Total Budget \$ 125,860

FOOTNOTES:

- (1) Please specify the types of housing assistance included in this line item.
- (2) Please specify whether utilizing indirect or administrative overhead.
- (3) For administrative overhead, please provide a justification of costs included in administration.
- (4) For indirect costs, please specify if using the de minimis rate or provide a copy of the approved indirect cost agreement. The de minimis rate of 10 percent for non-Federal entities is subject to Uniform Guidance, 2 CFR 200.414.

Additional Requirements:

- A. All travel costs must comply with Arizona State Travel Policy which can be found at the following link: <https://gao.az.gov/travel/welcome-gao-travel>. AHCCCS requires detailed receipts for reimbursement of travel expenditures.
- B. Contractor must submit monthly tracking logs & receipts for Trac phones, gift cards, bus tokens, petty cash, and other items as required by AHCCCS.
- C. Contractor budget is subject to 2 CFR Grants & Agreements, Part 200, Uniform Administrative Requirements, Cost Principles, and Audit Requirements as codified by HHS 45 CFR Part 75 for federal funds.

**Good Neighbor Alliance
PATH
Budget Narrative & Justification
County Coverage: Cochise County
Contract Period: July 1, 2022 through June 30, 2023**

A. Personnel:

Position Title (1)	Staff Name (2)	Key Staff (3)	Annual Salary/Rate (4)	Level of Effort (5)	Total Salary Charge to Award (6)	In-Kind (7)
PATH Administrator	Dr. DeLuca			5%		\$1,170
PATH Team Lead	Julie Wilson		\$32,760	100%	\$24,960	\$7,800
Outreach Specialist 1/HMIS Admin	Carmelita Reyes		\$27,300	100%	\$19,343	\$7,957
Outreach Specialist 2/HMIS	Jerome Covington		\$25,790	100%	\$14,977	\$10,813
Shower Attendant/HMIS	Tammy Stone		\$10,452	100%	\$3,270	\$7,182
Shower Attendant	Kyle Allen		\$6,552	100%	\$0	\$6,552
Total Request					\$62,550	\$41,474

JUSTIFICATION: All calculations are estimates

Team Lead currently makes a salary of \$18. Hour @ 35 a week = 32,760.

Outreach Specialist 1/HMIS ADMIN 30 hr. week @ \$14. hr. = \$21,840. + 7 hr. week @ \$15. = \$5,460. HMIS

Outreach Specialist 2- 30 hr. week @ \$14. hr. = \$21,840. + 5 hr. week @ \$15 = \$3,900. HMIS

Shower Attendant/HMIS 9 hr. week @ 14.hr. = \$6,552. + 5 hr. week @ \$15. = \$3,900. HMIS

Shower Attendant 9 hr. week @ 14. Hr. = \$6,552.

GNA has 4 HMIS Licenses and does anywhere from 4 to 10 VI-SPDAT's a week. Due to the work volume, and because of safety reasons, there is a need to have two shower attendants. The Outreach Specialists are responsible for entering all shower and outreach VI-SPDAT into HMIS, along with tracking all new contacts, and updating current contacts. Shower Attendant/HMIS enters all shower program's needs & services and updating interims. As GNA PATH has had continuous issues with HMIS, the team would like to concentrate heavily on HMIS, insuring proper data entry and data quality. To

**Good Neighbor Alliance
PATH
Budget Narrative & Justification
County Coverage: Cochise County
Contract Period: July 1, 2022 through June 30, 2023**

make this possible, time needs to be dedicated solely on HMIS. PATH will also seek out trainings specify related to HMIS. Please note that the past contract salary rate isn't even minimum wage for any of the positions.

B. Employee Related Expenditure:

Position (1)	Name (2)	Rate (3)	Total Salary Charged to Award (4)	Total Fringe Charged to Award (5)	In-Kind (6)
PATH Administrator	Dr. DeLuca		\$0		\$136
PATH Team Lead	Julie Wilson	11.65%	\$24,960	\$2,908	
Outreach Specialist 1/HMIS Admin	Carmelita Reyes	11.65%	\$19,343	\$1,892	\$361
Outreach Specialist 2/HMIS	Jerome Covington	11.65%	\$14,977	\$0	\$1,745
Shower Attendant/HMIS	Tammy Stone	11.65%	\$3,270	\$0	\$381
Shower Attendant	Kyle Allen	11.65%	\$0		\$763
Total Request				\$4,800	\$3,386

JUSTIFICATION: The current fringe benefits include 7.65% FICA and 4% for insurance for a total of 11.65%.

Fringe Category	Rate
Retirement	
FICA	7.65%
Insurance	4.0%

**Good Neighbor Alliance
PATH
Budget Narrative & Justification
County Coverage: Cochise County
Contract Period: July 1, 2022 through June 30, 2023**

Social Security	
Total	11.65%

C. Professional & Outside Services

Name (1)	Service (2)	Rate (3)	In-Kind (4)	Other (5)
Total Request				

JUSTIFICATION:

D. Travel:

Please note: All travel expenditures will require itemized receipts and will not exceed the State allowable rates which can be found in the State of Arizona Accounting Manual (SAAM) <https://gao.az.gov/publications/saam>.

Purpose (1)	Destination (2)	Item (3)	Calculation (4)	Travel Cost Charged to the Award (5)	In-Kind (6)
Outreach	Cochise County	Gas	670 miles x .445 x12 months	\$3,577	
Total Request				\$3,577	\$0

JUSTIFICATION:

Fuel necessary for PATH Truck to outreach all of Cochise County per scope of work. PATH covers the entirety of Cochise County and estimates driving 670 miles per month to outreach.

E. Occupancy:

**Good Neighbor Alliance
PATH
Budget Narrative & Justification
County Coverage: Cochise County
Contract Period: July 1, 2022 through June 30, 2023**

Item(s) (1)	Quantity (2)	Amount (3)	% Charged to the Award (4)	Total Cost Charged to the Award (5)	In-Kind (6)
Total Request				\$0	\$0

JUSTIFICATION:

F. Housing:

Housing Assistance (1)	Cost (3)	In-Kind (4)
Total Request	\$0	\$0

JUSTIFICATION:

G. Other Operating:

In the case of a subcontract relationship, costs must be broken down in detail and a narrative justification provided. A separate itemized budget is required for each contractor. If applicable, number of clients should be included in the costs.

Name (1)	Service (2)	Rate (3)	Other (4)	Cost (5)	In-Kind (6)
PATH Vehicle Registration	MVD Registration 1 Year	\$90.		\$90	
PATH Truck Lease	Monthly Payment \$361	\$360.32 x 12 months		\$4,323	

**Good Neighbor Alliance
PATH
Budget Narrative & Justification
County Coverage: Cochise County
Contract Period: July 1, 2022 through June 30, 2023**

Name (1)	Service (2)	Rate (3)	Other (4)	Cost (5)	In-Kind (6)
Vehicle Maintenance	Yearly Up-keep	\$148.58 x 12 months		\$1,783	
Vehicle Insurance	Yearly	\$190.58 x 12 months		\$2,287	
Copy	Cost of Business Cards, Brochures, Banners	\$300.00		\$300	
Cell Phone		\$107.50 x 12 months		\$1,290	
Total Request				\$10,073	\$0

JUSTIFICATION:

Equipment required to meet the specifications set forth on the scope of work. Vehicle costs include annual registration, monthly lease payment, insurance, and estimated maintenance costs. Cell phone is necessary for outreach and safety purposes. Handouts are important for resource information.

H. Indirect Cost Rate or Administration (See Footnote below):

Calculation (1)	Indirect Cost Charged to the Award (2)	In-Kind (3)
	\$0	
Total Request	\$0	\$0

JUSTIFICATION:

FOOTNOTE:

- (1) Please specify whether utilizing indirect or administrative overhead.
 (2) For administrative overhead, please provide a justification of costs included in administration.

**Good Neighbor Alliance
PATH
Budget Narrative & Justification
County Coverage: Cochise County
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(3) For indirect costs, please specify if using the de minimis rate or provide a copy of the approved indirect cost agreement. The de minimis rate of 10 percent for non-federal entities is subject to Uniform Guidance, 20 CFR 200.414.

I. Total Project Costs (Do not include In-Kind):

TOTAL REQUEST – TOTAL PROJECT COSTS – (Sum of Total Direct Costs and Indirect (Or Admin) Costs)	\$81,000
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J. BUDGET SUMMARY (this document should match the Budget Outline document):

Category	Year 1	In-Kind Total Project Costs	Total Project Costs
Personnel	\$62,550	\$41,474	\$104,024
Employee Related Expenditures	\$4,800	\$3,386	\$8,186
Professional & Outside Services			
Travel	\$3,577	\$0	\$3,577
Occupancy			
Housing (Limited to 20%)			
PATH Enrollee	\$0	\$0	\$0
Other Operating	\$10,073	\$0	\$10,073

**Good Neighbor Alliance
PATH
Budget Narrative & Justification
County Coverage: Cochise County
Contract Period: July 1, 2022 through June 30, 2023**

Category	Year 1	In-Kind Total Project Costs	Total Project Costs
Indirect Costs or Administration (please select one)			
Total Request	\$81,000	\$44,860	\$125,860

Good Neighbor Alliance
Projects for Assistance in Transition from Homelessness (PATH)
Contractor Intended Use Plan (IUP)
Contract Period July 1, 2022 – June 30, 2023

Local Provider Description:

Good Neighbor Alliance (GNA) is a community-based 501(c) (3) nonprofit organization that operates a Samaritan Station emergency homeless shelter for men, women, families with children and veterans in Sierra Vista, Arizona. Cochise County is in southeast Arizona along the Mexican border and is 6,169.45 square miles. It is serviced by only two homeless shelters and two domestic violence shelters. The goal of GNA is to offer shelter and access to services to help stabilize guests and provide for their most basic needs throughout their transition out of homelessness. For our unsheltered neighbors, GNA provides a shower program three days per week. The PATH team has taken ownership of the shower program to provide extensive in-reach opportunities. It has been a valuable tool in creating trust and a bridge for our chronically homeless neighbors' familiarity and insight into the GNA Shelter. In addition to PATH Shower paperwork, the staff has the capability to complete SPDAT's on participants, which enables them to be entered into HMIS for housing consideration via the By-Name-List. GNA provides all toiletry items, towels, etc. Shower participants are also offered coffee, snacks, fellowship, and assistance in identifying resources. This contract year GNA was afforded funding to provide Hotel Vouchers when the shelter was full. This was another opportunity to complete SPDAT's and encounter new contacts. To date, the 2021/2022 contract, PATH has provided 2,367 total services to homeless individuals.

A recently added Day Program will allow both shelter guests and our current PATH shelter guests to remain at the shelter during the day. GNA will soon offer our guests an opportunity to participate in a variety of activities during the day designed to help encourage self-esteem, self-care, health, wellness, and self-sufficiency. The workshops will take part throughout the day, supported by community stakeholders and volunteers. GNA will also offer such activities as crafts, story time, and structured playtime for any families with children, as well as literacy information, hygiene, nonviolent conflict resolution, learning how to identify and express strengths and computer lab time for job/apartment searches.

GNA has been awarded PATH funds from the Arizona Health Care Cost Containment Services (AHCCCS) in the amount of \$60,124 in federal PATH funds and \$20,876 in matching state funds, for a total of \$81,000.00 for the 2022/2023 contract year. GNA in-kind amount is \$20,000

Collaboration with HUD Continuum of Care (CoC) Program:

Good Neighbor Alliance has been an active member of the Arizona Balance of State Continuum of Care (AZBOSCOC) for over eighteen years and works closely with Keith Denis from SEAGO who now holds the contract with the Arizona Department of Housing (ADOH). GNA staff attends monthly AZBOSCOC along with attendees from Arizona Complete Health (ACH), Regional Behavioral Health Authority (RBHA) in Cochise County; Community Partners Integrated Health (CPIH); Community Bridges Inc.; Blake Easter Seals Foundation; Primavera Foundation; Hispanic Council of Southeastern Arizona; Bisbee Coalition for the Homeless; Cochise County Reentry Coalition, Hope Inc., Housing Authority of Cochise

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County (Public Housing Authority), The Veterans Affairs Social Worker for the Homeless, the Supportive Services for Veterans Family run by the Red Cross of Southern Arizona, Chiricahua Health Center, St. Vincent De Paul.

GNA has been responsible for organizing the HUD-mandated Point in Time Count since 2005 for all of Cochise County. GNA has been involved with the Data Quality committee to establish data collection requirements and policies and procedures also to increase the effectiveness of outreach opportunities, identify gaps, and assist in proposed statewide procedures.

GNA has provided referrals for the Emergency Housing Vouchers (EHV) through the Cochise County Housing Authority. To date more than a dozen have been submitted.

Collaboration with Local Community Organizations:

GNA PATH coordinates with organizations that provide key services to PATH clients. These organizations include Arizona Complete Health, Bisbee Coalition for the Homeless, the Southeastern Arizona Behavioral Health Services and Housing Department (SEABHS), Community Partners Integrated Health Care (CPIH), Cochise College, and more. St Vincent De Paul assists clients with funding to obtain duplicate IDs that have been lost or stolen, the Lions Club of Sierra Vista and Benson provides limited eye exams and glasses. On a case-by-case basis Going to Grandmas provides boarding of a dog or cat if their owner is interested in checking into the shelter. GNA has collaborated with Arizona at Work on employment and job search training that helps clients enter the workforce. GNA participates in Sierra Vista Community Connect, a monthly collaboration of 30 different agencies coming together in one space to provide a variety of services to those in need. GNA-PATH has established working relationships with property owners, property managers, and businesses excited to help further access to housing and employment opportunities. GNA has hosted many church and youth groups for tours and community service projects. The GNA pantry is primarily stocked through community and church-sponsored food drives. Local area churches, businesses, and community-at-large volunteers offer their services to provide evening hot cooked meals daily. GNA is often sought out by community members wanting to get involved in helping the homeless or just wanting information about all things relating to local homelessness. The following organizations and services are used for referrals depending upon shelter guests and/or GNA-PATH participants needs: HACC, the AZ Department of Veterans Services (AZDVS) Benefits Counselors, the Sierra Vista VA Community Outpatient Based Clinic and Homeless Case Manager, Tucson VA Homeless program, Desert Rose Transmissional Living, Chiricahua Community Health Center, Community Intervention Associates, St. Vincent De Paul, Community Bridges Inc., Cochise County Drug Court and Cochise County Care Court for veterans and those with mental illness.

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Additionally, GNA receives referrals from most of these organizations. The PATH Team also assists local agencies servicing justice-involved individuals. Prison re-entry programs have sought out PATH resources in attempts to identify suitable housing for these individuals.

GNA-PATH is the only active outreach team in Cochise County. GNA-PATH has been sought out by church groups, the VA Social Worker, the Director of Bisbee Coalition for the Homeless, Sonoran Prevention Works and representatives from the City of Sierra Vista to go on outreach with the team.

Service Provision:

The GNA-PATH team services align with the street outreach and case management goals as a priority. As an emergency homeless shelter GNA is in a unique position to provide housing, necessities, and case management. GNA holds beds for PATH clients as we know that it is a huge step for them to agree to come indoors and accept services. GNA PATH staff provides case management services for PATH enrolled clients, including referrals to the RBHA for behavioral health and substance use treatment. Specifically, the PATH Team assists clients in obtaining intake appointments and provides transportation to/from any subsequent appointments. Additionally, the PATH Team Lead has a working relationship with Jennifer Janzen, SMI Eligibility Education and Training Coordinator with Solari Crisis & Human Services, who assists with researching the availability or existence of past medical or behavioral health records. These records provide documentation used in the SMI determination process. The PATH team assists with applying for IDs needed for access to AHCCCS (Medicaid), Food Stamps, SSA/SSI/SSDI, Veteran’s benefits, physical health treatment, and applying for permanent supportive housing. Other services include personal care assistance, pre and post job coaching, referrals to job training (workforce development), health promotion/education, substance use prevention and supports with living skills development. The PATH team helps clients re-engage into the systems which they feel have shunned them. Strategies for outreach: PATH has two outreach specialists on the team, which allows the team to be more effective and focused on the individuals served. The GNA PATH team members conduct outreach throughout rural Cochise County which includes Benson, Bisbee, Double Adobe, Douglas, Bowie, Pearce, Tombstone, Sunsites, Elfrida, Sierra Vista, and Willcox. The team also works with the guests of Good Neighbor Alliance Samaritan Station Shelter and Bisbee Coalition for the Homeless, which shelters both men and women experiencing homelessness. Programs such as GNA’s Shower Program, Hope Inc., St. Vincent De Paul, and Salvation Army are also used for identifying adults experiencing homelessness or at risk of becoming homeless. COVID funding for hotel vouchers has provided new contact and relationship building for the PATH Team. PATH has employs a “meet me where I am” strategy. The team provides food that has been donated, hygiene and health items, referrals, and advocacy and continues contact with PATH eligible individuals during the outreach process of engagement to establish a therapeutic alliance. Case management can be done “on the spot” in camps, at the GNA Shower Program, or at the GNA PATH office. The team is ready with a cell phone and a list of resources during all encounters. The PATH Team Lead is available to provide case management services as well. Appointments are set with clients on a

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weekly basis for in person or by phone to discuss and work on goals. The Team Lead is usually available for PATH clients to contact any time throughout the day.

Any gaps that exist in the current service systems:

The lack of sufficient funding for housing vouchers for those chronically homeless suffering from serious mental illness has been identified as difficulty. Over the term of this current contract, there have not been any Permit Supportive Housing Vouchers (PSH) available. The wait time for PSH also leads to periods of disengagement by participants. Additionally, the housing (vouchers) for those suffering with SMI and NOT chronically homeless is also at capacity causing people to remain homeless in their current habitat or in shelters for extended periods of time. There are openings for bricks and mortar housing units, but participants are forced to relocate to other locations throughout Cochise County. Additionally, we have people who fall through the cracks, as they are too high functioning for ALTCS services, yet not functional enough to sustain on their own. These folks seem to live a life of chronic homelessness, are in and out of jail, and impossible to house. Another identified gap includes the discharge of patients and no paperwork for their transition being done prior to them leaving the treatment center. This can cause some clients to disengage at that point. A growing problem is the cost of housing continues to rise and finding affordable housing units become increasingly more difficult.

PATH Eligibility, Determination, and Enrollment Process:

When the PATH Team encounters potential clients, an initial assessment is made by the team as to whether the client exhibits behaviors consistent with an SMI diagnosis. This is determined through observation and conversation with the client, learning about the person's history and whether any behavioral health concerns have existed in the past or present. After the team builds rapport with the person, the team explains the benefits of PATH, and the potential client appears to fit the SMI criteria, an offer of enrollment is made to the person to join the PATH program. SMI eligibility is determined by behavioral health documentation, specifically where the client was put through an evaluation and was determined to be SMI, or not. Jennifer Jansen from Solari is also available for any questions or concerns about the SMI determination process. After a release of information is exchanged, the PATH Team obtains a copy of the evaluation, and it is placed into the client's file.

Data:

GNA has been a part of the HMIS system since 2006 and began inputting PATH data into the system in 2010. GNA currently enters shelter, rapid rehousing, shower program and day program data into HIMS. GNA complies with data collection, and all other contractual obligations for working with the HMIS system as well as attending training opportunities. ADOH conducts training for all organizations inputting data into the AZBOSCOC HMIS system. The Coordinated Entry gives us the ability to share this info with housing providers and determine placement on waitlist. Clinical Services are not provided but referrals for such

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services are. The GNA HMIS Administrator ensures all data is input in a timely manner and corrects any issues that may arise. The GNA HMIS Administrator is primarily responsible for running all HMIS reports pertinent to PATH to ensure accurate data collection. Also, the GNA HMIS Administrator will connect new users to Solari, following protocol implemented by ADOH. Regarding training, Solari has offered on-going trainings to GNA staff as often as needed. ORGCODE is also another provider of trainings to the PATH Team. SAMHSA has been generous with training money to keep our PATH Team up to speed.

SSI/SSDI Outreach, Access, Recovery (SOAR):

Currently GNA has one SOAR trained employee. We refer clients needing assistance with SSI and SSDI assistance to Community Partners who has trained SOAR representatives ready to offer the service. The nearest SSA office is an hour away and remains closed since COVID. This creates a significant barrier in wait times. Approximately 98 percent of PATH clients are undereducated, which makes completing an SSI/SSDI application online on their own much more frustrating. We can aid and advocate for the client through the disability process. Also, we assist with obtaining medical and mental health records and to re-file denied claims

Housing:

Strategies for permanent housing available to PATH enrolled clients include assisting clients to apply for state and federal subsidized housing programs such as Emergency Housing Vouchers (EHV), Section 8, and Shelter Plus Care (SPC), and Supportive Housing Programs (SHP), now referred to as “HUD Housing”. Referrals are made to SEABHS and to Community Partner Care Coordination for access to HUD housing programs via the SPDAT and Coordinated Entry. Emergency shelter referrals are made to Good Neighbor Alliance shelter, Bisbee Coalition for the Homeless shelter, and Catholic Community Services domestic violence shelters. GNA PATH works directly with the local VA Homeless Case Manager for a referral to the HUD-VASH voucher program. The Housing Authority of Cochise County Board does designate the chronically homeless as a priority population for Housing Choice Vouchers Program (Section 8). GNA-PATH provides referrals to the Primavera Foundation of Tucson local provider for the Supportive System for Veteran Families program for housing assistance and eviction prevention. GNA also has a small Rapid Rehousing contract with ADOH which GNA-PATH refers clients to when applicable. GNA and members of the Cochise County Continuum of Care are collaborating on strategizing on identifying housing funding and other opportunities. GNA PATH continues to work with other housing programs in Cochise County. Occasionally, PATH clients can be housed through Rapid Re-housing.

Staff Information:

GNA has an equal opportunity policy for program entry and participation and has adopted the Social Workers Code of Ethics. These policies prohibit discrimination based on age, disability, lesbian, gay, bisexual, and transgender, racial/ethnic, and cultural differences of clients. Staff meetings include discussion about the need to be inclusionary rather exclusionary of those who

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need our help. Additionally, GNA has adapted the National Social Workers Standards for Cultural Competence. The staff receives in house training annually on cultural competence and issues of health disparities. In a rural area it is difficult to identify local training and we frequently must seek training opportunities outside of Cochise County.

The PATH Team Lead keeps record of all trainings provided to the team. Training that is provided with PATH TA funds are recorded on a CER and submitted. PATH team employees have a varied background, including having family members with mental illness and/or homeless issues, and having personal experience with homelessness.

PATH Eligibility & Enrollment:

When the PATH Team encounters potential clients, an initial assessment is made by the team whether the client exhibits behaviors consistent with an SMI diagnosis. This is determined through observation and conversation with the client, to learn more about the person's history and whether any behavioral health concerns have existed in the past or present. After the team explains the benefits of PATH, and the potential client appears to fit the SMI criteria, an offer of enrollment is made to the person to join the PATH program. SMI eligibility is ultimately determined by behavioral health documentation, specifically where the client is put through an evaluation and was determined to be SMI, or not. After a release of information is exchanged, the PATH Team obtains a copy of the evaluation, and it is placed into the client's file. Jennifer Janzen from Solari is also available for any questions regarding the SMI determination process.

Behavioral health needs of active-duty military service members, returning veterans, and military families:

Just as with all PATH clients, GNA PATH will ensure that military individuals and families experiencing homelessness are referred to local VA and military programs. GNA PATH is in Sierra Vista, which has a prominent Army base, Fort Huachuca, within its city limits. Military and Veterans are referred to the local VA office and Primavera Foundation of Tucson, which administers the VASH program. Often, qualified veterans are housed quickly.

Client Information:

From the 2019/20 fiscal year, GNA PATH client demographic is as follows: 72% male, 28% female, 91% White, and 7% African American, 1% American Indian, and .5% Asian. GNA has

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many clients “on their radar” that are being outreached to on a regular basis but have not yet chosen to engage with PATH.
 The numbers for contract year 2021 – 2022 are not available because knows how to run the report. The PATH Team Lead did attempt to run the report and it appears to have numerous errors. A training on HMIS Advanced Reporting is scheduled for March 18, 2022.

Projected Outreach, Engagement & Enrollment Goals

Projected Number of Persons to be Contacted (Level of Effort)	Projected Number of Persons to be Contacted (Unduplicated)	Projected Number of Persons to be Engaged	Projected Number of Persons to be Enrolled	Projected Number of Persons to be “Literally Homeless”	Projected Number of Persons to be Veterans or Returning Veterans	Projected Number of Persons to be Active Military Service
107	53	27	21	107	06	

NOTE: Include methodologies / tracking tools to be used to ensure goals are reached or exceeded.

In 2021/2022 we outreached/engaged approximately 27 individuals per quarter. We feel a realistic and fair estimation for 2022/2023 includes a 10% decrease in the 2022/2023 numbers. As such, we feel comfortable anticipating outreaching 107 and enrolling 21. Historically, all individuals contacted in street outreach are actively homeless. During the 2021/2022 contract, our PATH team encountered 6 veterans in outreach endeavors. Given the reduction in homeless individuals, we anticipate outreach/engaging 5 self-identifying veterans during 2022/2023.

Methodologies/Tracking Tools: The PATH Outreach Team covers all locations within Cochise County, conducting street outreach activities. Through networking and relationship building, the GNA Path Team gathers the most current data available from the varying municipalities and governmental agencies within Cochise County, regarding homeless in their respective areas. This is accomplished through CCCOC meetings, meetings with law enforcement/public safety, local church groups and other area groups. The PATH Team conducts proactive outreach efforts by searching known areas within the county, historically utilized by the homeless population. Conversely, the PATH team is oftentimes reactive, i.e., responding to reports of homeless individuals within Cochise County, from citizens and other groups. As a result of the relationships forged with agencies/municipalities listed above, the PATH team is routinely made aware of potential PATH clients and homeless situations. Each encounter is recorded and input into HMIS and the PATH Data Exchange (PDX). These tools assist the Team Lead in ensuring that team goals are reached or exceeded. Additionally, the team meets telephonically with the State PATH Administrator monthly, discussing efforts and progress

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to meet goals. It should be noted that when veterans are outreach/engaged, and after their military service has been verified, these individuals relate to VA HUD-VASH through the local VA office and Primavera Foundation of Tucson. Most often, they are housed almost immediately and are not brought into the PATH program. If the PATH Team encounters a self-identifying veteran, whose service cannot be verified or is ineligible for benefits, the team will work to enroll the individual if they appear to fit PATH SMI criteria.

Projected Outcomes			
Number of persons referred to and attaining housing.	Number of persons referred to and attaining mental health services.	Number of persons referred to and attaining substance use disorder services.	Number of Community Education/Awareness Events to be provided. (Provide documentation)
21	21	7	6

Consumer Involvement:
 Clients who are homeless and have serious mental illnesses have volunteered at the GNA PATH Shower Program. The shower program currently runs from 8:00 a.m. to 11:00 a.m., Monday, Wednesday, and Friday. As previously mentioned, the GNA PATH team members conduct outreach activities throughout rural Cochise County which includes Benson, Bisbee, Double Adobe, Douglas, Bowie, Pearce, Tombstone, Sunsites, Elfrida, Sierra Vista, and Willcox. A PATH client has been employed at GNA, part-time, since early 2018. Clients are encouraged to make decisions and utilize problem-solving skills taking the initiative to complete tasks and fulfill program goals. It also helps clients gain empowerment and self-worth. When staff meets with clients, support systems are discussed and how the client wants them involved. These could include family members, case managers, peer support, etc. GNA will engage the family to the degree the PATH participant allows them to be involved in their recovery. GNA has reached out to family members who live out of town while trying to get families reengaged with the PATH participant. Additionally, client input was sought when GNA/PATH staff was developing an information form on how to contact PATH and local shelters distributed during the 2020 PIT count. During the count, input was welcomed about PATH procedures for the shower program, laundry program, and overall outreach efforts. Cochise County is very rural, with the needs of the homeless varying from one community to another. As such, input was collected from clients

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in rural settings as well as the only somewhat urban setting, Sierra Vista. PATH provides each shower participant and every person enrolled in PATH a survey on the services they've received. The surveys are then in turn used to make improvements to the program and see what customer services are working with participants.

La Frontera Center, Inc.

502 W 29th St
Tucson, AZ 85713

Contact: Valerie Grothe

Email Address: Valerie.Grothe@lafrontera.org

Provider Type: Community mental health center

PDX ID: AZ-002

State Provider ID: AZ-002

Contact Phone #: 5208828422

- **Local Provider Description** – Provide a brief description of the provider organization receiving PATH funds, including name, type of organization, region served, and the amount of PATH funds the organization will receive.
- **Collaboration with HUD Continuum of Care (CoC) Program** – Describe the organization’s participation with local HUD Continuum of Care (CoC) recipient(s) and other local planning activities and program coordination initiatives, such as coordinated entry activities. If the organization is not currently working with the Continuum(s) of Care, briefly explain the approaches to be taken by the organization to collaborate with the CoC(s) in the areas where PATH operates.
- **Collaboration with Local Community Organizations** – Provide a brief description of partnerships and activities with local community organizations that provide key services (e.g., outreach teams, primary health, mental health, substance use disorder, housing, employment) to PATH-eligible clients, and describe the coordination of activities and policies with those organizations. Provide specific information about how coordination with other outreach teams will be achieved.
- **Service Provision** – Describe the organization’s plan to provide coordinated and comprehensive services to PATH-eligible clients, including:
 - How the services to be provided using PATH funds will align with PATH goals and maximize serving the most vulnerable adults who are literally and chronically homeless, including those with serious mental illness who are veterans and experiencing homelessness, to obtain housing and mental/substance use disorder treatment services and community recovery supports necessary to assure success in long-term housing;
 - Any gaps that exist in the current service systems;
 - A brief description of the current services available to clients who have both a serious mental illness and a substance use disorder; and
 - A brief description of how PATH eligibility is determined, when enrollment occurs, and how eligibility is documented for PATH enrolled clients.
- **Data** – Describe the provider’s participation in HMIS and describe plans for continued training and how providers will support new staff. For any providers not fully participating in HMIS, please describe plans to complete HMIS implementation.
- **Housing** – Indicate the strategies that will be used for making suitable housing available for PATH clients (i.e., indicate the type of housing provided and the name of the agency).
- **Staff Information** – Describe how staff providing services to the population of focus will be sensitive to age, gender, disability, lesbian, gay, bisexual, and transgender, racial/ethnic, and differences of clients. Describe the extent to which staff receive periodic training in cultural competence and health disparities.
- **Client Information** – Describe the demographics of the client population, the projected number of adult clients to be contacted and enrolled, and the percentage of adult clients to be served using PATH funds who are literally homeless.
- **Consumer Involvement** – Describe how individuals who experience homelessness and have serious mental illnesses, and family members will be meaningfully involved at the organizational level in the planning, implementation, and evaluation of PATH-funded services. For example, indicate whether individuals who are PATH-eligible are employed as staff or volunteers or serve on governing or formal advisory boards.
- **Budget Narrative** – Provide a budget narrative that includes the local-area provider’s use of PATH funds.

I certify that the responses to this Narrative Question in the FY 2020 PATH Application are still accurate. Yes No

Planning Period From 7/1/2022 to 6/30/2023

The state can either enter all the IUPs and associated budgets as in prior years, or they may allow IUP users to enter their own information into WebBGAS. For more information on allowing IUP users to enter their own details, please see the tutorial under the Training Tab in WebBGAS that instructs states and IUP providers on this new process.

* Indicates a required field

Category	Federal Dollars	Matched Dollars	Total Dollars	Comments
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a. Personnel 160,711.00 55,805.00 216,516.00

Position *	Annual Salary *	% of time spent on PATH *	PATH-Funded FTE	PATH-Funded Salary *	Matched Dollars *	Total Dollars	Comments
PATH Administrator	57,500.00	100.00 %	0.74	42,680.00	14,820.00	57,500.00	<input type="text"/>
Peer Support Specialist	29,432.00	100.00 %	0.74	21,846.00	7,586.00	29,432.00	<input type="text"/>
Peer Support Specialist	29,432.00	100.00 %	0.74	21,846.00	7,586.00	29,432.00	<input type="text"/>
Peer Support Specialist	29,432.00	100.00 %	0.74	21,846.00	7,586.00	29,432.00	<input type="text"/>
Other (Describe in Comments)	39,520.00	100.00 %	0.74	29,334.00	10,186.00	39,520.00	Coordinator <input type="text"/>
Other (Describe in Comments)	31,200.00	100.00 %	0.74	23,159.00	8,041.00	31,200.00	Recovery Coach <input type="text"/>

Category	Percentage	Federal Dollars *	Matched Dollars *	Total Dollars	Comments
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b. Fringe Benefits 19.61 % \$ 42,468.00 \$ 14,746.00 \$ 57,214.00

Category	Federal Dollars	Matched Dollars	Total Dollars	Comments
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c. Travel \$ 742.00 \$ 258.00 \$ 1,000.00

Line Item Detail *	Federal Dollars *	Matched Dollars *	Total Dollars	Comments
Gas	\$ 742.00	\$ 258.00	\$ 1,000.00	<input type="text"/>

d. Equipment \$ 0.00 \$ 0.00 \$ 0.00

No Data Available

e. Supplies \$ 16,330.00 \$ 5,670.00 \$ 22,000.00

Line Item Detail *	Federal Dollars *	Matched Dollars *	Total Dollars	Comments
Client: Outreach Supplies/Hygiene kits/Misc.	\$ 5,196.00	\$ 1,804.00	\$ 7,000.00	<input type="text"/>
Client: Other Supplies (Describe in Comments)	\$ 11,134.00	\$ 3,866.00	\$ 15,000.00	Bus Tokens & other Supplies <input type="text"/>

f. Contractual	\$ 0.00	\$ 0.00	\$ 0.00	
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No Data Available

g. Housing	\$ 0.00	\$ 0.00	\$ 0.00	
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No Data Available

h. Construction (non-allowable)

i. Other	\$ 40,911.00	\$ 14,202.00	\$ 55,113.00	
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Line Item Detail *	Federal Dollars *	Matched Dollars *	Total Dollars	Comments
Client: Other (Describe in Comments)	\$ 148.00	\$ 52.00	\$ 200.00	Petty Cash for Emergencies
Office: Misc (Copying, Courier, Postage, etc.)	\$ 742.00	\$ 258.00	\$ 1,000.00	
Office: Misc (Copying, Courier, Postage, etc.)	\$ 46.00	\$ 16.00	\$ 62.00	
Office: Rent Expenses	\$ 11,134.00	\$ 3,866.00	\$ 15,000.00	
Office: Security/Janitorial/Grounds Maintenance	\$ 4,454.00	\$ 1,546.00	\$ 6,000.00	
Office: Security/Janitorial/Grounds Maintenance	\$ 1,856.00	\$ 644.00	\$ 2,500.00	
Office: Utilities/Telephone/Internet	\$ 1,485.00	\$ 515.00	\$ 2,000.00	
Office: Utilities/Telephone/Internet	\$ 816.00	\$ 284.00	\$ 1,100.00	
Office: Other (Describe in Comments)	\$ 9,835.00	\$ 3,415.00	\$ 13,250.00	Software
Office: Other (Describe in Comments)	\$ 3,711.00	\$ 1,289.00	\$ 5,000.00	Vehicle Insurance
Office: Other (Describe in Comments)	\$ 1,485.00	\$ 515.00	\$ 2,000.00	Vehicle Maintenance
Office: Other (Describe in Comments)	\$ 742.00	\$ 258.00	\$ 1,000.00	Office Supplies
Office: Other (Describe in Comments)	\$ 371.00	\$ 129.00	\$ 500.00	Vehicle Licenses
Staffing: Payroll Processing/Benefit Management	\$ 742.00	\$ 255.00	\$ 997.00	
Staffing: Training/Education/Conference	\$ 375.00	\$ 129.00	\$ 504.00	
Staffing: Other (Describe in Comments)	\$ 2,969.00	\$ 1,031.00	\$ 4,000.00	PATH Staff Cell Phone Purchase/Monthly Usage

j. Total Direct Charges (Sum of a-i)	\$ 261,162.00	\$ 90,681.00	\$ 351,843.00	
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Category	Federal Dollars *	Matched Dollars *	Total Dollars	Comments
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k. Indirect Costs (Administrative Costs)	\$ 26,116.00	\$ 9,068.00	\$ 35,184.00	
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l. Grand Total (Sum of j and k)	\$ 287,278.00	\$ 99,749.00	\$ 387,027.00	
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Source(s) of Match Dollars for State Funds:

Estimated Number of Persons to be Contacted:	1,500	Estimated Number of Persons to be Enrolled:	120
Estimated Number of Persons to be Contacted who are Literally Homeless:	800		
Number staff trained in SOAR in grant year ending in 2021:	3	Number of PATH-funded consumers assisted through SOAR:	20

PATH Contractor Name:

Contract Reporting Period:

County Service Area	List		
PERSONNEL			
Position	Name	Salary	Level Of Effort
PATH Administrator	Valerie Grothe	\$57,500	1.00
Coordinator	Victoria Micharski	\$39,520	1.00
Recovery Coach	Nadia Keiser	\$31,200	1.00
Peer Support/Recovery Aide	Alyse Encinas	\$29,432	1.00
Peer Support/Recovery Aide	Stephanie Mazza	\$29,432	1.00
Peer Support/Recovery Aide	vacant	\$29,432	1.00
TOTAL PERSONNEL			6.0
EMPLOYEE RELATED EXPENSES (ERE)			
	26.425%		
TOTAL ERE			
PROFESSIONAL AND OUTSIDE SERVICES			
ADP			
TOTAL PROF & OUTSIDE			
TRAVEL			
Mileage Reimbursement @.445/mile			
Gas (100% PATH dedicated Vehicles)			
Out of State Travel - Airfare			
Out of State Travel - Lodging			
Out of State Travel - Per Diem			
Out of State Travel - Ground Transportation/Misc			
TOTAL TRAVEL			
OCCUPANCY			
Office Rent Expenses			
Office Utilities			
TOTAL OCCUPANCY			
HOUSING (Limited to 20% as defined in PATH Legislation)			
Housing Assistance ⁽¹⁾			
TOTAL HOUSING			
PATH ENROLLEE			
Petty Cash for Emergencies (Must submit receipts with CERs)			
Outpatient Services			
Medication Supplies			
Prescription Co-pays			
Utility Turn-on's			
Emergency Items - sunscreen, thongs			
Medical Contract Services			
Hygiene kits			
Client Supplies - Bus tokens & Other Supplies			
Client Supplies - PATH Enrollee trac phones			
TOTAL PATH ENROLLEE			
OTHER OPERATING			
Vehicle Licenses			

La Frontera

July 1, 2022 - June 30, 2023

FEDERAL	NON	TOTAL	IN-KIND	SUB-
\$ 42,680	\$ 14,820	\$57,500	\$ -	\$
\$ 29,334	\$ 10,186	\$39,520	\$ -	\$
\$ 23,159	\$ 8,041	\$31,200	\$ -	\$
\$ 21,846	\$ 7,586	\$29,432	\$ -	\$
\$ 21,846	\$ 7,586	\$29,432	\$ -	\$
\$ 21,846	\$ 7,586	\$29,432	\$ -	\$
\$ 160,711	\$ 55,805	\$216,516	\$ -	\$
\$ 42,468	\$ 14,746	\$57,214		
\$ 42,468	\$ 14,746	\$57,214		\$
\$ 742	\$ 258	\$1,000	\$ -	\$
			\$ -	\$
\$ 742	\$ 258	\$1,000	\$ -	\$
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\$ 742	\$ 258	\$1,000	\$ -	\$
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\$ -				
\$ -				
\$ 742	\$ 258	\$1,000	\$ -	\$
\$ 11,134	\$ 3,866	\$15,000	\$ -	\$
\$ 1,485	\$ 515	\$2,000	\$ -	\$
\$ 12,619	\$ 4,381	\$17,000	\$ -	\$
			\$ -	\$
\$ -	\$ -	\$0	\$ -	\$
\$ 148	\$ 52	\$200	\$ -	\$
\$ -	\$ -	\$0	\$ -	\$
\$ -	\$ -	\$0	\$ -	\$
\$ -	\$ -	\$0	\$ -	\$
\$ -	\$ -	\$0	\$ -	\$
\$ -	\$ -	\$0	\$ -	\$
\$ -	\$ -	\$0	\$ -	\$
\$ 5,196	\$ 1,804	\$7,000	\$ -	\$
\$ 11,134	\$ 3,866	\$15,000	\$ -	\$
\$ -	\$ -	\$0	\$ -	\$
\$ 16,478	\$ 5,722	\$22,200	\$ -	\$
\$ 371	\$ 129	\$500	\$ -	\$

\$	- \$	\$0	\$	-	\$
\$ 1,485	\$ 515	\$2,000	\$	-	\$
\$ 3,711	\$ 1,289	\$5,000	\$	-	\$
\$	- \$	\$0	\$	-	\$
\$ 371	\$ 129	\$500	\$	-	\$
\$ 742	\$ 258	\$1,000	\$	-	\$
\$ 742	\$ 258	\$1,000	\$	-	\$
\$ 816	\$ 284	\$1,100	\$	-	\$
\$ 4,454	\$ 1,546	\$6,000	\$	-	\$
\$ 1,856	\$ 644	\$2,500	\$	-	\$
\$	- \$	\$0	\$	-	\$
\$	- \$	\$0	\$	-	\$
\$	- \$	\$0	\$	-	\$
\$ 9,835	\$ 3,415	\$13,250	\$	-	\$
\$ 46	\$ 16	\$62	\$	-	\$
\$ 2,969	\$ 1,031	\$4,000	\$	-	\$
\$ 27,399	\$ 9,513	\$36,912	\$	-	\$
\$ 26,116	\$ 9,068	\$35,184	\$	-	\$
10.00%	10.00%	10.00%	0.00%	0.00%	
FEDERAL	STATE	TOTAL	IN-KIND		
\$ 287,278	\$ 99,749	\$ 387,027	\$	-	\$ -

\$ 387,027	\$	=Total Budget	\$ 387,027
	-		

that the amount billed may be billed at a lower percentage due to program non-reimbursement. The de minimis rate of 10 percent for non-Federal entities is subject to

ao.az.gov/travel/welcome-gao-travel. AHCCCS requires detailed receipts for and other items as required by AHCCCS. Cost Principles, and Audit Requirements as codified by HHS 45 CFR Part 75 for

PATH Contractor Name:

Contract Reporting Period:

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PERSONNEL			
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TOTAL ERE			
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Out of State Travel - Airfare			
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TOTAL TRAVEL			
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Office Rent Expenses			
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Projects for Assistance in Transition from Homelessness (PATH)
Contractor Intended Use Plan (IUP)
Contract Period July 1, 2022 – June 30, 2023

Purpose of Intended Use Plan (IUP): Each IUP must be saved in Microsoft Word, use Times New Roman 12, line spacing single space, and all margins at least one inch each. Also, the IUP must be named with the provider agency name, and a subsequent word which indicates the content (for example: ABCAgency_program narrative):

Local Provider Description: Provide a brief description of the provider organization receiving PATH funds, including name, type of organization, region served, and the amount of PATH funds the organization will receive.

La Frontera Center, founded in 1968, is one of the original community mental health centers in Tucson. With numerous locations in Arizona and New Mexico, La Frontera has operated the PATH Program in Tucson and Pima County for almost 30 years. The region served will be the City of Tucson and other areas of Pima County where individuals who are homeless may be identified such as Marana, Oro Valley, Picture Rocks, Three Points, Littleton, and Green Valley. The PATH team will receive \$287,278 in Federal funds, \$99,749 in State funds for a Total of \$387,027 for the FY 2022-2023.

Collaboration with HUD Continuum of Care (CoC) Program: Describe the organization's participation with local HUD Continuum of Care (CoC) recipient(s) and other local planning activities and program coordination initiatives, such as coordinated entry activities.

The RAPP Team Path Program is an active participant in the Continuum of Care in Tucson and Pima County-Tucson/Pima Collaboration to End Homelessness (TPCH). The RAPP Center is a site for Coordinated Entry; staff are also able to conduct mobile assessments in the community, and schedule appointments on a community-wide shared calendar for those preferring to complete an assessment over the phone. Within the CoC, one PATH Team staff currently co-chairs the Diversity, Equity, and Inclusion (DEI) Committee, and another staff chairs the HMIS Committee, holds a seat on the Coordinated Entry Committee, and participates as an "alternate" voting member in the LAPP State Data Warehousing Committee. Staff participate in other

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meetings including the Outreach Coalition, Case Conferencing, Built for Zero, LAPP Analytics Subcommittee, Housing First Community Collaboration, Coordinated Entry Equity Initiative, and the imminent formation of a Data Quality Forum.

If the organization is not currently working with the Continuum(s) of Care, briefly explain the approaches to be taken by the organization to collaborate with the CoC(s) in the areas where PATH operates.

N/A

Collaboration with Local Community Organizations: Provide a brief description of partnerships and activities with local community organizations that provide key services (e.g., outreach teams, primary health, mental health, substance use disorder, housing, employment) to PATH-eligible clients.

The PATH Program has a formal relationship with the Crisis Response Network, which involves requesting a Mobile Crisis Response Team to assess a client who may be a danger to themselves or others, and submitting a Title 36 petition for involuntary evaluation of an individual who presents as a danger to themselves or others and refuses care or treatment. The PATH Team also has a formal partnership with La Frontera Center which gives the staff access to the full array of services that La Frontera has to offer for PATH clients which includes, but is not limited to Mental Health Evaluation and Treatment, Substance Abuse Treatment, Medication, Medication Assisted Treatment, Residential Treatment Services, Safe Haven for Homeless Services, Veterans Court and Veterans Housing services, Individual and Group Counseling and Therapy Services, Employment Services, and Subsidized Housing. La Frontera also provides training for the PATH Team staff, accounting and other administrative services, purchasing, maintenance, and payroll processing services for the PATH Program. The PATH Team continues to make every effort to establish more formal agreements with other AHCCCS Complete Care Providers such as Cope Community Services, CODAC Health Recovery and Wellness, and Community Bridges to expedite services for individuals experiencing

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*homelessness and to give the ACC Providers direct access to PATH Team staff for the purpose of referring homeless members. The PATH Team has a formal arrangement with The Community Food Bank of Southern Arizona and Caridad Community Kitchen who provides 50 sack lunches per day, Monday-Friday, during the Summer Sun Program months of June and July for PATH clients. The PATH Team is planning to relocate to the Center of Opportunity **before** this FY **begins**. This location will be a One-Stop Shop for individuals and families experiencing homelessness and will include over 300 shelter beds; family shelter space; 100 units of permanent supportive low-income housing which will be developed and operated by La Frontera; **employment services from Sullivan-Jackson Employment Center and Arizona@Work**; medical and dental clinics operated by El Rio Health; Department of Economic Security offices; Tucson Veterans Serving Veterans; The Homeless ID Project; Pima County Community Services; advocacy and ministry from Bridge Prison Ministry, The SOBER Project, Hope of Glory, and J17 Ministries; food, clothing, and furniture banks; and other services to be determined. Through its presence at this location, the PATH Team will gain formal partnerships with programs offering off-site including Pima County Attorney Office, Pima County Consolidated Justice Court, Tucson City Court, Southern Arizona Legal Aid, United Way of Southern Arizona, Portable Practical Education Preparation Inc (PPEP), Hope Inc, Tucson Refugee Ministry, and Emerge Center Against Domestic Abuse. The PATH Team has informal partnerships with all community partners that provide services and/or work with individuals and/or families experiencing homelessness such as the City of Tucson's Homeless Outreach Team; Tucson Police Department's Homeless Outreach Team; Pima County HMIS; Our Family Services; Old Pueblo Community Services; Primavera Foundation; and homeless shelters including Gospel Rescue Mission Center of Opportunity, Gospel Rescue Mission Women's Recovery Center, Salvation Army Hospitality House, Primavera Men's Shelter, CBI Toole Shelter, Casa Paloma Women's Shelter, and Sister Jose Women's Shelter.*

Describe the coordination of activities and policies with those organizations.

The PATH Team continues to create a network of contacts with other agencies or organizations in the community by maintaining up-to-date contact information and open communication to determine any changes in available services. As a member of TPCH the PATH Team is actively involved in developing policies used by the homeless service field at large in Tucson and Pima County. PATH staff make every effort to be present at any meetings regarding these matters including Coordinated Entry Committee, HMIS Users Committee, Outreach Coalition, as well as any other opportunities for community collaboration.

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Provide specific information about how coordination with other outreach teams will be achieved.

The PATH Team coordinates with other outreach teams by participating in the Outreach Coalition monthly but also has developed both formal and informal collaboration with specific outreach teams including CBI's outreach team which may help in particular with transporting clients to substance use treatment facilities, Downtown Tucson Partnership, Tucson Police Department's Homeless Outreach Team which can assist by accompanying PATH Staff to areas that may otherwise have been out of reach, and La Frontera's ROSE Project who can assist clients who are experiencing homelessness and a substance use disorder, but not necessarily mental health symptoms, to obtain income through employment or SOAR applications.

Service Provision: Describe the organization's plan to provide coordinated and comprehensive services to PATH-eligible clients, including:
Describe the organization's plan to provide coordinated and comprehensive services to PATH-eligible clients, including:

How the services to be provided using PATH funds will align with PATH goals and maximize serving the most vulnerable adults who are literally and chronically homeless, including those with serious mental illness who are veterans and experiencing homelessness, to obtain housing and mental/substance use disorder treatment services and community recovery supports necessary to assure success in long-term housing;

To ensure that the PATH Team is reaching the most vulnerable literally and chronically homeless adults, outreach to unpopulated areas will be prioritized and the team will use a feature in a shared Google Maps account to track the locations such as washes and culverts in which homeless encampments have been found or where those experiencing homelessness have been found to congregate, as well as how many were in that place on a certain date. Tucson Police Department's Homeless Outreach Team will continue to provide the PATH Team with information regarding areas receiving the highest number of complaints to police and emergency services from community members, in an effort to offer these individuals services before they are asked to vacate. This data will be built upon and used to determine the most effective places to perform outreach and ensure that there are no areas being ignored. Once clients have been located, teams of at least two PATH staff will make contact and will have available a mobile internet connection to provide real-time resource information,

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especially information pertinent to any specific population including veterans, as well as any relevant assessments a client may want to complete such as the Vulnerability-Index Service Prioritization and Decision Assistance Tool (VI-SPDAT). Focusing on this form of outreach will allow the team to maximize services provided to the most vulnerable adults who are literally and chronically homeless as opposed to individuals who are able to seek out services by self-referring to a drop-in center or other homeless services.

Any gaps that exist in the current service systems;

Gaps that exist in the current service system include: a limited amount of subsidized housing in the community which can be made available for PATH clients; a lack of shelter/housing for registered sex offenders or those with pets; and a lack of low-demand shelter, especially that which can accommodate those with symptoms of a Serious Mental Illness. Due to the number of people entering homelessness for the first time after evictions have been delayed over the pandemic, shelter resources are limited and individuals are currently struggling to obtain emergency shelter beds at all. Family shelter is even more difficult to find and many families have been forced to sleep in their vehicles or camp outside. There is a lack of transitional housing to prepare those who may find it difficult to adjust to living outside after a long period of living in a homeless situation for independent living. A lack of appropriate supportive services provided after someone is housed results in frequent returns to homelessness.

A brief description of the current services available to clients who have both a serious mental illness and a substance use disorder; and

Current services available to clients who have a serious mental illness and a substance use disorder are: integrated mental health, physical health, and substance abuse treatment, individual and group counseling, residential substance abuse treatment services, DUI screening and education classes, assistance obtaining shelter and housing, assistance obtaining items to meet basic needs such as food and clothing, medication management, medication assisted treatment such as Methadone and Suboxone, primary health services, etc. The PATH Team is familiar with the high rate of comorbidity between mental illness and substance use disorders and uses evidence-based practices such as the Stages of Change model when providing

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case management services to clients with co-occurring disorders.

How services to active duty military service members, returning veteran and military families will be considered and prioritized.

Those experiencing homelessness who are veterans will be identified as soon as possible after contact and all veteran-dedicated services and resources will be explored including completing the VI-SPDAT which prioritizes veterans. The PATH Team continues a formal relationship with La Frontera's project Rally Point Arizona which provides a crisis hotline, peer support, and navigator services for veterans and military service members and their families.

A brief description of how PATH eligibility is determined, when enrollment occurs, and how eligibility is documented for PATH enrolled clients.

The PATH Team will make contact with potentially PATH-eligible individuals through street outreach, inreach, or at the RAPP drop-in center. Eligibility is determined during the PATH screening and an individual may be enrolled if they report or display symptoms of an SMI and are either literally homeless or at-risk of homelessness. Eligibility is documented in the HMIS system by creating a profile with a PATH project entry. SMI status will be documented in the goal plan section of the profile.

Data: Describe the provider's participation in HMIS and describe plans for continued training and how PATH contractors will support new staff. For any providers not fully participating in HMIS, please describe plans to complete HMIS implementation.

The PATH Team collects and reports all program data in the HMIS system. One team member currently chairs the monthly HMIS Committee meetings and serves as the HMIS Administrator for La Frontera as an agency. All staff will attend yearly training with the HMIS Lean to update HMIS skills, as well as continuous in-service training from the HMIS Administrator. Any newly-hired staff will attend the next regularly scheduled HMIS New User Training that is available after completion of LFC New Employee Orientation. All outreach contacts and services provided to potential and PATH enrolled clients is documented by staff in the HMIS system. This includes the PATH intake paperwork which includes client release of information and all demographic information, client contact information, SMI status, goals, progress notes, and assessments such as VI-SPATS. At present the only referrals that are "live" in the HMIS system are the referrals

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related to Coordinated Entry. This results in PATH Team staff being required to track the outcomes of their referrals instead of being able to see this information in the HMIS system. Part of the problem is that not all referral sources are users of the HMIS system. The PATH Team Supervisor will continue to work with Pima County, the HMIS Lead, to explore options to address and hopefully resolve this issue. This issue has continued to be a challenge due to the pandemic as well as the last-minute cancellation of the Housing Inventory Chart/Point in Time Count or "Street Count" which has resulted in much more time-consuming work for the HMIS Lead. There is also the time-consuming effort being undertaken by the HMIS Committee, chaired by PATH staff, to organize many HMIS users into four forum groups to discuss methods of improving data quality in HMIS.

SSI/SSDI Outreach, Access, Recovery (SOAR): Describe the provider's plan to ensure that PATH staff have completed the SOAR Online Course and which staff plan to assist consumers with SSI/SSDI applications using the SOAR model and track the outcomes of those applications in the SOAR Online Application Tracking (OAT) system. Please be sure to submit Certificate of Completion of the On-Line SOAR Course with IUP submission.

All current PATH Team members are SOAR certified and one newly-hired team members will be expected to complete the online SOAR training course and become SOAR-certified within the first 90 days of employment with the PATH Team. Four out of five team members will be available to assist PATH clients with SOAR applications. It is anticipated that PATH Team staff will be able to assist 20 PATH clients with the SOAR process per FY.

If the provider does not use SOAR, describe the system used to improve accurate and timely completion of mainstream benefit applications (e.g. SSI/SSDI). Also describe the efforts used to train staff on this alternative system and what technical assistance or support they receive to ensure quality applications if they do not use the SAMHSA SOAR TA Center.

N/A

Housing:

Indicate what strategies will be used for making suitable housing available for PATH clients Provide the types of housing and the name of the agency (ies) you will be working with.

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Strategies that will be used for making suitable housing available for assisting the PATH enrolled individuals with locating housing include but are not limited to the following: PATH Team staff will assist each PATH enrolled individual to locate and access any housing that they are interested in obtaining that is available to them such as shelter beds, Sonora House Safe Haven beds, subsidized rental housing that may be available through the coordinated entry system, low cost rental housing, shared housing accommodations, etc. Staff will utilize an individualized approach that takes into consideration the needs, desires, income, cultural factors, etc. of the person we are assisting, and staff will utilize any available community funds and/or PATH funds to prevent eviction of imminently homeless PATH clients and to pay deposits and move in costs for PATH clients attempting to secure housing. PATH Team staff will take an individualized approach to assisting each PATH client to obtain housing, understanding that the desires and needs of individual PATH clients may be different. Some PATH clients who are already receiving income may not be interested in “traditional” housing and may need assistance locating and securing non-traditional housing such as a travel trailer or motorhome. PATH clients will initially be assisted to obtain shelter through one of our shelter partners. PATH Team staff will advocate for the client, when necessary, to obtain a bed in a shelter that meets the individual needs of the client—for instance—a client who is actively using substance will not be referred to a shelter that prohibits substance use, and a client who is trying to abstain from using substances will be assisted to locate sober shelter/housing. PATH Team staff will utilize La Frontera’s Sonora House Safe Haven to house PATH clients whenever beds are available—this shelter is based on a harm-reduction model and is designed for individuals who are experiencing homelessness and serious mental illness with or without a co-occurring substance use disorder. PATH Team staff will conduct a VI-SPDAT assessment and make a housing referral to Coordinated Entry System for all PATH clients who are interested, and staff will assist clients to apply for other housing that is available to them by making the client aware of the housing, assisting with transportation to the housing office if needed, accompanying the client to the housing appointment and assisting with paperwork if needed, and assisting with the actual move-in process once client is approved for housing. Staff will also assist the client to obtain needed furniture and housewares by applying for an SOS Kit (Starting Over Supplies) from the Tucson Urban League,

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assisting client to obtain donated furniture from the Gospel Rescue Mission or Catholic Community Services, and or purchasing furniture and having it delivered to the client if the client has an income. Staff will also assist by teaching client how to use household appliances, how to change mailing address and receive mail, what to do in an emergency situation, who to call for maintenance issues, how to be a good neighbor, how to access transportation, where to obtain groceries, how to budget money, where to shut off water in the unit, when and what to report to landlord, etc. Staff will make regular follow visits after client is housed to ensure that they are safely meeting their basic needs, that the unit is reasonably clean and free of pests, and that the client has adequate food and household supplies. Staff will also assist client to access mainstream supportive services that will be in place after client is discharged from the PATH program. Some of the agencies that may provide housing for PATH clients are La Frontera, COPE, CODAC, Primavera Foundation, Community Bridges, Catholic Community Services, Our Family Services, Old Pueblo Community Services, and the Gospel Rescue Mission Center of Opportunity. In addition to the Coordinated Entry process, clients will be assisted to apply for any housing in the community for which they qualify and they can afford, always keeping in mind the needs and preferences of the individual.

Describe how your agency will address the housing needs of those living with serious mental illness and who are incarcerated in designing and developing your program to prioritize services upon release from jail or prison, where appropriate.

The PATH Team will make information available to those who have been incarcerated regarding PATH eligibility and the PATH services available to them. While engaging these individuals, staff will utilize trauma-informed care/service models and work to better understand the impact of incarceration-related trauma. The PATH Team will develop policies that specifically address appropriate responses to this trauma, identify resources to assist individuals in adjusting to life after release from incarceration, form connections with landlords who are willing to consider renting to this population, and maintain an up-to-date list of felon-friendly employers in the community. PATH staff will assist with establishing mental and physical healthcare if needed; as well as with obtaining public benefits if necessary, including Nutrition Assistance, medical insurance, and SSI/SSDI. Staff will particularly utilize relationships with programs such as Old Pueblo Community Services which provides services for reentry, La Frontera's employment team, La Frontera- ROSE Project, La Frontera's housing department, and any other available resources that may support these individuals in obtaining and maintaining housing.

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Staff Information: Describe how staff providing services to the population of focus will be sensitive to age, gender, disability, lesbian, gay, bisexual, and transgender, racial/ethnic, and differences of clients.

PATH Team staff will be sensitive to the unique characteristics of PATH clients by making a culturally competent effort every day to understand their perspective and the challenges of living on the streets while experiencing or managing symptoms of mental illness. Staff will also consider the intersectionality of discrimination that occurs when a person is a member of multiple communities such as the LGBTQ+ community; a racial or ethnic minority; elderly or transition-aged youth; deaf or hard-of-hearing; vision-impaired; wheelchair-bound; and others. Staff strive to understand each client's strengths but also their triggers and other reasons that may cause a client to have an adverse experience while participating in services. Staff are trained in de-escalation techniques and trauma-informed care which grants them the ability to more effectively identify and respond to a client's needs. The PATH Team strives to provide an atmosphere of transparency and inclusion where PATH clients feel comfortable voicing their needs and satisfaction (or lack thereof), and this is discussed at weekly team meetings. In the event that these interventions and measures are ineffective for a client, the client is informed of appropriate ways to communicate their concerns. PATH Team staff also have lived experience as members of marginalized groups which gives them some added insight into the struggles clients may be experiencing.

Describe how often staff receives training in cultural competence and health disparities and how is this documented.

PATH Team staff receive these trainings at New Employee Orientation and yearly thereafter.

PATH Eligibility & Enrollment:

Describe how PATH eligibility is determined, when engagement and enrollment occurs and how each is documented. (Be detailed)

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The PATH Team will attempt to locate individuals who meet program eligibility criteria and work with them to identify and alleviate barriers that resulted in homelessness. PATH program staff will focus, primarily, on individuals who have been determined to be seriously mentally ill in the State of Arizona as verified by the AHCCCS website, or individuals who are clearly suffering from a serious mental illness and are willing and able to participate in the SMI evaluation process. If a potential PATH client has no SMI determination and no history of mental health treatment, staff will assess client for symptoms and encourage client to enroll in mental health treatment so that a diagnosis may be determined. The PATH Team Supervisor will attempt to enter into an MOU with the Crisis Response Network to ensure that PATH clients have access to timely SMI Determinations upon award of the contract. If a potential PATH client is unwilling to participate in the SMI Determination process the person will be assisted to access any other services and/or resources for which they may be eligible. Homeless persons who deny any symptoms of mental illness will be continually assessed to determine if there may be underlying symptoms of which the client is not aware and staff will attempt to educate client on these findings and assist them to access an assessment to determine whether or not mental health symptoms may be present. Staff will utilize a “meet me where I am” approach and will treat everyone encountered with dignity and respect regardless of PATH eligibility, and/or any other factors. A client’s SMI status will be documented by uploading a file which confirms their SMI status into their chart in HMIS, attached to the mental health goal in their case plan. This file will be the client’s SMI determination paperwork if available, a printout from the AHCCCS portal which confirms their eligibility for SMI behavioral health services, or equivalent documentation.

Describe the behavioral health needs of active duty military service members, returning veterans, and military families in designing and developing their programs and to consider prioritizing this population for services, where appropriate with will be addressed.

The PATH Team will assist veterans, or active-duty military service members and their families, who are experiencing homelessness with exploring any appropriate resources and services including enrolling with behavioral health services to address mental health

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symptoms, either related to their military service or otherwise. Other available services include veteran-dedicated housing/shelter, access to VA benefits, and programs such as those provided by Old Pueblo Community Services and La Frontera’s Rally Point Arizona.

Client Information: Describe the demographics of the client population. Use the chart below to identify Projected Outreach, Engagement and Enrollment Goals.

These demographics are based on 271 PATH enrolled clients from 07/01/2020-06/30/2021.

107 Male; 36 Female; and 1 Transgender female to male.

Age: 18-23=1, 24-30=9, 31-40=33, 41-50=49, 51-61=40, and 62 and over=12

Race: American Indian or Alaskan Native-25, Asian-2, Black or African American-19, Native Hawaiian or Other Pacific Islander-2, White-110

Ethnicity-Hispanic-51, Non-Hispanic-93

Veteran Status-Non-Veteran-255, Veteran-14

Projected Outreach, Engagement & Enrollment Goals

Projected Number of Persons to be Contacted (Level of Effort)	Projected Number of Persons to be Contacted (Unduplicated)	Projected Number of Persons to be Engaged	Projected Number of Persons to be Enrolled	Projected Number of Persons to be “Literally Homeless”	Projected Number of Persons to be Veterans or Returning Veterans	Projected Number of Persons to be Active Military Service
1500	1000	500	120	800	20	1

NOTE: Include methodologies / tracking tools to be used to ensure goals are reached or exceeded.

The PATH dashboard will be used to track contacts and enrollments; HMIS will be used to track client numbers, demographics, and other data captured by the PATH Team.

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Projected Outcomes			
Number of persons referred to and attaining housing.	Number of persons referred to and attaining mental health services.	Number of persons referred to and attaining substance use disorder services.	Number of Community Education/Awareness Events to be provided. (Provide documentation)
90	30	10	10

Consumer Involvement – Describe how individuals who experience homelessness and designated serious mental illnesses, and family members will be meaningfully involved at the organizational level in the planning, implementation, and evaluation of PATH-funded services. For example, indicate whether individuals who are PATH-eligible are employed as staff or volunteers or serve on governing or formal advisory boards.

The current PATH Team includes two members who have experienced homelessness in the past and four members with lived experience of mental illness, one of whom was in the SMI system and on SSDI benefits prior to joining the PATH Team. La Frontera has hired PATH-eligible persons in numerous capacities within the agency for many years, starting with the Peer Support movement. La Frontera currently trains and hires peers in a variety of positions within the agency and encourages and supports their service on governing and formal advisory boards. Two staff members are Certified Peer Support Specialists and one will obtain Certification before the start of the FY.

III. State Level Information

A. Operational Definitions

Term	Definition
Individual Experiencing Homelessness:	<p>The Arizona Health Care Cost Containment System (AHCCCS) defines an individual experiencing homelessness utilizing U.S. Department of Housing and Urban Development (HUD)'s Literally Homeless definition:</p> <ul style="list-style-type: none"> • Individual or family who lacks a fixed, regular, and adequate nighttime residence, meaning: • Has a primary nighttime residence that is a public or private place not meant for human habitation; • Is living in a publicly or privately operated shelter designated to provide temporary living arrangements (including congregate shelters, transitional housing, and hotels and motels paid for by charitable organizations or by federal, state and local government programs); • Is exiting an institution where (s)he has resided for 90 days or less and who resided in an emergency shelter or place not meant for human habitation immediately before entering that institution
Imminent Risk of Becoming Homeless:	<p>AHCCCS defines an individual experiencing homelessness utilizing U.S. Department of Housing and Urban Development (HUD)'s definition:</p> <ul style="list-style-type: none"> • Imminent Risk of Homelessness includes one or more of the following criteria: • Doubled up living arrangements where the individual's name is not on the lease, • Living in a condemned building without a place to move, • Arrears in rent/utility payments, • Having received an eviction notice without a place to move, • Living in temporary or transitional housing that carries time limits, • Being discharged from a health care or criminal justice institution without a place to live.
Serious Mental Illness:	<p>AHCCCS defines Seriously Mentally Ill (SMI) – A designation as defined in A.R.S. §36-550 and determined in an individual 18 years of age or older.</p> <p>Definition: "Seriously mentally ill" means persons who as a result of a mental disorder as defined in section A.R.S. §36-550 exhibit emotional or behavioral functioning that is so impaired as to interfere substantially with their capacity to remain in the community without supportive treatment or services of a long-term or indefinite duration. In these persons mental disability is severe and persistent, resulting in a long-term limitation of their functional capacities for primary activities of daily living such as interpersonal relationships, homemaking, self-care, employment and recreation.</p> <p>For additional information refer to AHCCCS Medical Policy Manual (AMPM) Serious Mental Illness Eligibility Determination at https://www.azahcccs.gov/shared/Downloads/MedicalPolicyManual/300/320P.pdf</p>
Co-occurring Disorders:	<p>AHCCCS defines an individual with co-occurring with SMI and SUD as individual(s) who have a qualifying SMI diagnosis and co-occurring substance use, for purposes of SMI Eligibility Determination, presumption of functional impairment is as follows:</p> <p>For psychotic diagnoses (bipolar I disorder with psychotic features, delusional disorder, major depression, recurrent, severe, with psychotic features, schizophrenia, schizoaffective disorder and psychotic disorder not due to a substance or known psychological condition) functional impairment is presumed to be due to the qualifying psychiatric diagnosis.</p> <p>For other major mental disorders (bipolar disorders, major depression, and obsessive compulsive disorder), functional impairment is presumed to be due to the psychiatric diagnosis, unless:</p> <ol style="list-style-type: none"> a. The severity, frequency, duration or characteristics of symptoms contributing to the functional impairment cannot be attributed to the qualifying mental health diagnosis, or b. The assessor can demonstrate, based on a historical or prospective period of treatment, that the

functional impairment is present only when the individual is abusing substances or experiencing symptoms of withdrawal from substances.

For all other mental disorders not covered above, functional impairment is presumed to be due to the co-occurring substance use unless:

- a. The symptoms contributing to the functional impairment cannot be attributed to the substance use disorder, or
- b. The functional impairment is present during a period of cessation of the co-occurring substance use of at least 30 calendar days, or
- c. The functional impairment is present during a period of at least 90 calendar days of reduced use and is unlikely to cause the symptoms or level of dysfunction.

<https://www.azahcccs.gov/shared/Downloads/MedicalPolicyManual/300/320P.pdf>

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Footnotes:

III. State Level Information

B. Collaboration

Narrative Question:

Describe how the state will implement a collaborative relationship with the department/office responsible for providing housing to qualifying residents. Describe how PATH funds supporting care and treatment of the homeless or marginally housed seriously mentally ill population will be served such that there is coordination of service provision to address needs impacted by serious mental illness and provision of permanent housing for those being served with grant funds is prioritized and assured.

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B. Collaboration

Describe how the state will implement a collaborative relationship with the department/office responsible for providing housing to qualifying residents.

There are a number of programs at the State, County, and City offices responsible for providing housing for qualifying residents including persons experiencing homelessness and those determined SMI. There is no single office or department, therefore the PATH program administered by Arizona Health Care Cost Containment System (AHCCCS) and the contracted PATH providers implement collaborative relationships at multiple levels as described here.

AHCCCS is Arizona's Medicaid program, a federal health care program jointly funded by the federal and state governments for individuals and families who qualify based on income level.

Built on a system of competition and choice, AHCCCS is a \$14 billion program that operates under an integrated managed care model, through a Research and Demonstration 1115 Waiver. Contracted health plans coordinate and pay for physical and behavioral health care services delivered by more than 115,000 health care providers more than 2 million Arizonans.

- **Mission:** Reaching across Arizona to provide comprehensive, quality health care to those in need.
- **Vision:** Shaping tomorrow's managed care...from today's experience, quality, and innovation.
- **Values:** Passion, Community, Quality, Respect, Accountability, Innovation, Teamwork, Leadership
- **Credo:** Our first care is your health care.

AHCCCS receives approximately \$28 million in State funds to provide almost 3,000 units of permanent supportive housing for persons determined SMI and a limited number of GMHSUD persons experiencing homelessness. AHCCCS contracts out for the delivery of housing services, the development, implementation and management of housing programs and related funds for the eligible populations to Regional Behavioral Health Authorities (RBHAs). AHCCCS Housing and AHCCCS administered PATH leadership coordinate closely on strategies to identify, engage the target PATH population. In addition to targeting housing to persons determined SMI and other high risk, high needs populations, AHCCCS Housing also prioritizes homelessness for its housing programs. AHCCCS Housing and PATH staff participate in each other's workgroups and planning activities and coordinate activities to ensure coordination of care and housing for qualifying members.

Arizona Department of Housing (ADOH)

The department established for the state government in Arizona to assist in addressing needs for home for working families. ADOH administers programs for Housing Partners who apply to the department for funding. The majority of the agency's programs are federally funded. The agency is also home to the Arizona Housing Finance Authority and the Arizona Home Foreclosure Prevention Funding Corporation.

AHCCCS currently receives federal funding from the Department of Housing and Urban Development (HUD) Continuum of Care program for the Arizona Balance of State. ADOH also administers the State Housing Trust fund to develop affordable housing, including units targeted to person experiencing homelessness and other special populations.

The Arizona Health Care Cost Containment System (AHCCCS) and the Arizona Department of Housing Administration (ADOH) currently work together on a number of housing initiatives. While there is no formal Inter Governmental Agreement (IGA) in place there is a mutual understanding of the importance of working together collaboratively. AHCCCS PATH Administrator (APA) attends the Balance of State (BOS) Continuum of Care (CoC) meetings to assist in prioritization, coordination, and prioritization of SMI members for CoC Housing opportunities. AHCCCS also work closely with ADOH to develop additional housing options for the qualifying population. The projects and coordination are documented in IGAs when necessary.

Continuums of Care (CoC) – Arizona has three HUD Continuums of Care (Maricopa, Tucson/Pima and Balance of State). The AHCCCS PATH Administrator (APA) participates in all three Continuums of Care leadership and governance. PATH teams are also required to participate in CoC housing coordination activities to identify, engage and house the qualifying population of homeless persons determined SMI or needing assessment. PATH teams also participate in the CoC HMIS systems and Coordinated Entry systems to ensure that PATH identified members are prioritized and included for eligible housing in the CoC housing pool. All three CoC's have some number of designated units restricted for SMI members and by participating in CoC activities, PATH coordinates for these housing opportunities for qualifying members. Through CoC coordination, the PATH teams are also in communication and coordination with local Public Housing Authorities and locally managed federal pass-through housing programs including HUD CDBG and HCV programs, locally funded programs and veterans programs.

Through these multiple efforts, the PATH team coordinates all levels to ensure that qualifying members have access to adequate and appropriate housing efforts. Some other funding sources that PATH coordinates with include:

- Housing Acquisition and/or Renovation Programs
- HUD Housing Choice Voucher Program
- Independent Community Housing
- Public Housing Authority (PHA)

Types of housing:

- Rapid Rehousing
- Section 8/Housing Choice Vouchers
- Supportive Housing
- Tenant-Based Housing
- Transitional Housing

For more information on the policy for housing, please visit:

<https://www.azahcccs.gov/shared/Downloads/ACOM/PolicyFiles/400/448.pdf>

Describe how PATH funds supporting care and treatment of the homeless or marginally housed seriously mentally ill population will be served such that there is coordination and provision of permanent housing for those being served with grant funds is prioritized and assured.

AHCCCS allows PATH funds to be used for housing those individuals who meet the PATH eligibility criteria. Once the individual consents to being enrolled in the PATH program, the enrollee and the PATH outreach worker will create a case plan. Each case plan often includes housing as a goal to be reached. We also have the PATH contractor provide AHCCCS with a sustainability plan to ensure the PATH enrollee can sustain their new housing.

AHCCCS contractually requires each PATH contractor to develop relationships with all housing agencies within their geographic service area. This is evident in each PATH contractors intended use plan and monitored through monthly, quarterly, and annual reports.

Activities PATH contractors conduct includes, but not limited to:

- Coordinate SMI/Co-Occurring health care, benefits assistance, medical care, emergency, transitional, and permanent housing,
- Conduct and/or participate in community events,
- Attend Housing and Urban Development (HUD) Continuum of Cares meetings (Local Coalitions to End Homelessness),
- Develop a partnership with the respective geographic services area's County Association of Governments, HUD Continuum of Care Homeless Service Providers,
- Develop a working relationship with the respective awarded area's local police, County Sheriff's Departments, ACC/AIHP/RBHA/TRBHA's and homeless service providers at the homeless resource centers and shelters,
- Develop working relationships with various faith-based organization, homeless veteran groups, food bank, clothing banks and other non-profit providers who are operating housing and meal programs for homeless individuals,
- Referrals: All referrals must be tracked in the Homeless Management Information System (HMIS), These referrals include, Relevant Housing Services, Permanent Housing, and Temporary Housing,
- Track in HMIS the number of persons referred to and attaining housing.

III. State Level Information

C. Veterans

Narrative Question:

Describe how the state gives consideration in awarding PATH funds to entities with demonstrated effectiveness in serving veterans experiencing homelessness.

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Footnotes:

C. Veterans

Describe how the state gives consideration in awarding PATH funds to entities with demonstrated effectiveness in serving veterans experiencing homelessness.

AHCCCS/Division of Grants Administration (DGA) has made it a contractual requirement that all PATH contractors form working relationships with the Veterans Agencies in the areas they serve. Partnerships are evident by memorandum of understanding, letters of commitments, or letters of support submitted yearly along with their intended use plans.

Partnerships include but are not limited to Veterans Administration Medical Center, the State Veterans Services, and the veterans in their community to assist with the coordinator of services for homeless veterans.

This includes coordination of physical and behavioral health services, main stream benefits assistance, emergency, transitional and permanent housing to homeless vets as well as participation in StandDowns and other events in their respective community. PATH providers collaborate with each of their veteran agencies and hospitals in their respective area to increase the location and services to Veterans who meet the PATH eligibility criteria.

This is monitored through quarterly reporting by PATH contractors to AHCCCS.

III. State Level Information

D. Alignment with PATH Goals

Narrative Question:

Describe how the services to be provided using PATH funds will target outreach and case management as priority services, and maximize serving the most vulnerable adults who are literally and chronically homeless.

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Footnotes:

D. Alignment with PATH Goals- Describe how the services to be provided using PATH funds will target street outreach and case management as priority services and maximize serving the most vulnerable adults who are literally and chronically homeless.

PATH funding is available for the PATH providers and their staff to build their knowledge, awareness and skills around street outreach and case management for all Arizonans experiencing homelessness.

PATH provider outreach teams prioritize **street outreach** for vulnerable adults who are literally and chronically homeless. Focus is on those individuals who are hardest to serve regularly leading them to outreach in places they camp in order to engage them with the purpose of referring them for behavioral health treatment. PATH teams use a variety of methods for outreach; the majority of their time is spent outreaching in densely populated areas of homelessness such as river bottoms, parks, streets, bridges, and industrial zones and determine if outreach will be on foot or mobile. PATH outreach teams may provide other assistance during outreach such as bus passes or transportation assistance as a means to connect PATH enrolled individuals to resources or attend designated appointments or services.

It often takes multiple contacts and intensive **case management** to get individual(s) to apply for services. Once the individual is enrolled into the PATH program, the outreach team will conduct an initial assessment utilizing the Vulnerability Index and Service Prioritization Decision Tool (VI-SPDAT).

AHCCCS defines case management as a supportive service provided to enhance treatment goals and effectiveness. Activities may include:

Case Management (provider level) is a supportive service provided to improve treatment outcomes. Examples of case management activities to meet member's Service Plan goals include:

- Assistance in maintaining, monitoring, and modifying behavioral health services,
- Assistance in finding necessary resources other than behavioral health services,
- Coordination of care with the member's healthcare providers, Family, community resources, and other involved supports including educational, social, judicial, community and other State agencies,
- Coordination of care activities related to continuity of care between levels of care (e.g. inpatient to outpatient care) and across multiple services (e.g. personal assistant, nursing services, and Family counseling).
- Assisting members in applying for Social Security benefits when using the SSI/SSDI Outreach, Access, and Recovery (SOAR) approach. SOAR activities may include:
 - Face-to-face meetings with member,
 - Phone contact with member, and
 - Face-to-face and phone contact with records and data sources (e.g. jail staff, hospitals, treatment providers, schools, Disability Determination Services, Social Security Administration, physicians).

- For provider case management used to facilitate a Child and Family Team (CFT), the modifier U1 is required,
- SOAR services shall only be provided by staff who have been certified in SOAR through SAMHSA SOAR Technical Assistance Center. Additionally, when using the SOAR approach, billable activities do not include completion of SOAR paperwork with member present, copying of faxing paperwork, assisting members with applying for benefits without using the SOAR approach, and email.
- For provider case management utilized when assisting members in applying for Social Security benefits (using the SSI/SSDI Outreach, Access, and Recovery (SOAR) approach) the modifier HK is required. Billing T1016 with an HK modifier indicates the specific usage of the SOAR approach and it cannot be used for any other service,
- Outreach and follow-up of crisis contacts and missed appointments, and
- Participation in staffing, case conferences, or other meetings with or without the member or their Family participating.

For more information, please visit

<https://www.azahcccs.gov/shared/Downloads/MedicalPolicyManual/300/310B.pdf>

Arizona PATH contractors have identified the Best Practices their agencies use to implement their programs within their individual Intended Use Plan (IUP) to achieve the programs goals. Each provider is responsible for participating in the necessary training for the Best Practices identified.

SSI/SSDI Outreach, Access and Recovery (SOAR) is funded by the **Substance Abuse and Mental Health Services Administration (SAMHSA)** and is a national program designed to increase access to the disability income benefit programs administered by the **Social Security Administration (SSA)** for eligible adults who are experiencing or at risk of homelessness and have a serious mental illness, medical impairment, and/or a co-occurring substance use disorder.

Motivation Interviewing (MI) is a counseling method that helps people resolve ambivalent feelings and insecurities to find the internal motivation they need to change their behavior. It is a practical, empathetic, and short-term process that takes into consideration how difficult it is to make life changes. MI has evidence that it is effective with individuals who are homeless, addiction, integrated health (physical and mental health), etc.

Critical Time Intervention (CTI) is a time-limited evidence-based practice that mobilizes support for society's most vulnerable individuals during periods of transition. It facilitates community integration and continuity of care by ensuring that a person has enduring ties to their community and support systems during these critical periods. CTI has been applied with veterans, people with mental illness, people who have been homeless or in prison, and many other groups. The model has been widely used on four continents

Harm Reduction is a set of strategies and ideas aimed to reduce the adverse health, social and economic consequences of the use of legal and illegal psychoactive drugs without necessarily reducing drug consumption.

Trauma Informed Care (TIC) according to SAMHSA is, “A program, organization, or system that is trauma-informed: (1) *Realizes* the widespread impact of trauma and understands potential paths for recovery; (2) *Recognizes* the signs and symptoms of trauma in clients, families, staff, and others involved with the system; (3) *Responds* by fully integrating knowledge about trauma into policies, procedures, and practices; and (4) *Seeks* to actively resist *re-traumatization*.”

A trauma-informed approach can be implemented in any type of service setting or organization and is distinct from trauma-specific interventions or treatments that are designed specifically to address the consequences of trauma and to facilitate healing. SAMHSA also promotes trauma-informed care for people experiencing homelessness that has been exposed to physical and sexual abuse.

Housing First (HF) is a homeless assistance approach that prioritizes providing permanent housing to people experiencing homelessness, thus ending their homelessness and serving as a platform from which they can pursue personal goals and improve their quality of life. This approach is guided by the belief that people need basic necessities like food and a place to live before attending to anything less critical, such as getting a job, budgeting properly, or attending to substance use issues. Additionally, Housing First is based on the theory that client choice is valuable in housing selection and supportive service participation, and that exercising that choice is likely to make a client more successful in remaining housed and improving their life.

Other task/services PATH Outreach teams perform:

- Being the point of contact for food, clothing, water, blankets, shelter and basic living skills;
- Linkages with the behavioral health system;
- Assistance in getting prescriptions filled;
- Assistance with the behavioral health system and/or substance use treatment enrollment;
- Referral for aftercare support including but not limited to case management, housing and transportation;
- Assistance in obtaining medical records, picture identification, social security cards and affordable housing;
- Field assessment and evaluations;
- Intake assistance/emergent and non-emergent triage;
- Transportation assistance (bus tokens and transporting);
- Assistance in meeting basic living skills;
- Move In assistance;
- Housing dollars for permanent placements;
- Transition into the AHCCCS Complete Care (ACC) Health Plan, the American Indian Health Program (AIHP), Regional Behavioral Health Authority (RBHA) and/or Tribal Regional Behavioral Health Authority (TRBHA) for physical and/or behavioral health treatment; and
- Assistance in locating cooling or heating and water stations during extreme heat and winter alerts.

For more information, please visit:

<https://azahcccs.gov/PlansProviders/Downloads/GM/SMIPortalUserManual.pdf>

III. State Level Information

E. Alignment with State Comprehensive MH Services Plan

Narrative Question:

Describe how the services to be provided using PATH funds are consistent with the State Comprehensive Mental Health Services Plans.

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Footnotes:

E. Alignment with State Comprehensive Mental Health Services Plan-

Describe how the services to be provided using PATH funds are consistent with the State Comprehensive Mental Health Services Plans.

AHCCCS is the single state Medicaid agency for the State of Arizona. In that capacity it is responsible for operating the Title XIX and Title XXI programs through the State's 1115 Research and Demonstration Waiver, which was granted by the Centers for Medicare and Medicaid Services (CMS), U.S. Department of Health and Human Services (HHS). Built on a system of competition and choice, AHCCCS is a \$14 billion program that operates under an integrated managed care model. Contracted health plans coordinate and pay for physical and behavioral health care services delivered by more than 115,000 health care providers to more than 2 million Arizonans. provides coverage to approximately 1.9 million members in Arizona. As of July 1, 2016, AHCCCS now administers several Non-TXIX programs through federal grant funds received from the Substance Abuse and Mental Health Services Administration (SAMHSA) under HHS.

The AHCCCS Strategic Plan for 2018-2023 begins with the AHCCCS vision, mission, and core values. This is followed by an overview of the programs and populations served and a review of accomplishments during the past fiscal year, and a description of the strategic goals which drive AHCCCS operations.

The Plan identifies four strategic goals for AHCCCS. These are:

1. AHCCCS must pursue and implement long term strategies that bend the cost curve while improving member health outcomes.
2. AHCCCS must pursue continuous quality improvement.
3. AHCCCS must reduce fragmentation driving towards an integrated sustainable healthcare system.
4. AHCCCS must maintain core organizational capacity, infrastructure and workforce planning that effectively serves AHCCCS operations

For more information about the AHCCCS Strategic Plan and successes, please visit https://www.azahcccs.gov/AHCCCS/Downloads/Plans/StrategicPlan_18-23.pdf

AHCCCS offers a comprehensive array of behavioral health services to assist, support and encourage each PATH enrolled individual to achieve and maintain the highest possible level of health and self-sufficiency.

The PATH Grant can work in tandem with the AHCCCS strategic plan by working towards:

1. Increasing access to behavioral health services for persons diagnosed with a serious mental illness;
2. Decreasing the number of adults who are chronically and/or literally homeless or living in shelters.

III. State Level Information

F. Process for Providing Public Notice

Narrative Question:

Describe the process for providing public notice to allow interested parties (e.g., family members; individuals who are PATH-eligible; mental health, substance use disorder, and housing agencies; the general public) to review the proposed use of PATH funds including any subsequent revisions to the application. Describe opportunities for these parties to present comments and recommendations prior to submission of the state PATH application to SAMHSA.

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Footnotes:

F. Describe the process for providing public notice to allow interested parties, (e.g., family members, individuals who are PATH-eligible and mental health, substance use disorder and housing agencies; and the general public) to review the proposed use of PATH fund (including any subsequent revisions to the application). Describe opportunities for these parties to present comments and recommendations prior to submission of the State PATH application to SAMHSA.

Upon completion of the PATH application, the AHCCCS/Division of Grants Administration posts the PATH application on its website.

[\(https://www.azahcccs.gov/Resources/Grants/\)](https://www.azahcccs.gov/Resources/Grants/)

The AHCCCS PATH Administrator (APA) will accept public comments throughout the year as they relate to the posted application and assess recommendations for incorporation into the following year's application.

Contact information for the APA is included on all posted PATH Applications as well as general communications, for any interested parties to provide feedback. AHCCCS will post the PATH application for public comment three to five business days prior to submission.

<https://www.azahcccs.gov/AHCCCS/PublicNotices/>

III. State Level Information

G. Programmatic and Financial Oversight

Narrative Question:

Describe how the state will provide necessary programmatic and financial oversight of PATH-supported providers, such as site visits, evaluation of performance goals, audits, etc. In cases where the state provides funds through intermediary organizations (i.e., county agencies, regional behavioral health authorities), describe how these organizations will monitor the use of PATH funds.

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G. Programmatic and Financial Oversight-

Describe how the state will provide necessary programmatic and financial oversight of the PATH-supported providers, such as site visits, evaluation of performance goals, audits, etc. In cases where the state provides funds through intermediary organization (i.e. County agencies or regional behavioral health authorities), describe how these organizations conduct monitoring of the use of PATH funds.

AHCCCS PATH Administrator and each PATH contractor have individual monthly check-in calls. During these call funding is an item of discussion, this includes, spending to date and spending barriers. The AHCCCS PATH Administrator also will have meetings with the internal finance team to ensure each contractor is on track for spending down of all funds. If there is a contractor underspending, this is discussed during our monthly check-in call. Reviews of contractor spending with the internal finance team are at three months, six months, nine months and monthly thereafter until the end of the fiscal year.

AHCCCS/DGA monitors PATH activities through the implementation of monthly, quarterly and annual deliverables. PATH contractors are required to submit monthly reports utilizing the PATH Data Exchange (PDX) detailing the number of individuals receiving PATH services by census and demographic. These deliverables allow the AHCCCS PATH Administrator track progress and ensure Intended Use Plan goals are on track to be achieved. An annual narrative and statistical report is due each January to SAMHSA and AHCCCS/DGA. Monthly and annual detailed expenditures reports and a copy of the contractor's audit report (2 CFR 200.501 – Audit Requirements) are also required.

In addition to reporting, PATH contractors are subject to a bi-annual program review per geographic service area. The review consists of an analysis of all aspects of the PATH program for compliance; including chart review, interviews with PATH enrolled individuals and PATH staff, and an outreach ride along for direct observation of outreach and engagement techniques used in enrollment.

AHCCCS/DGA communicates regularly throughout the year with PATH contractors to identify areas of strength and areas that require improvement to ensure the needs of homeless individuals with a Serious Mental Illness (SMI) designation are addressed in each region. These program reviews allow AHCCCS to ensure implementation currently occurring is aligning with program goals and needs.

III. State Level Information

H. Selection of PATH Local-Area Providers

Narrative Question:

Describe the method(s) used to allocate PATH funds to areas and providers with the greatest number of individuals who experience homelessness with serious mental illnesses or co-occurring substance use disorders (i.e., through annual competitions, distribution by formula, data driven or other means).

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H. Selection of PATH Local-Area Providers

Describe the method(s) used to allocate PATH funds to areas and providers with the greatest number of individuals who experience homelessness with serious mental illness or co-occurring substance use disorders (i.e. through annual competitions, distribution by formula, data driven or other means.)

Four non-profit providers are applying to the 2022-2023 NOFO. For the purpose of providing outreach services to people who are suffering from a Serious Mental Illness (SMI) and/or are suffering from a SMI and a substance use disorder (co-occurring disorder) who are homeless or at imminent risk of becoming homeless in each county across the state.

To determine areas of need, AHCCCS relies on annual street count data, PATH monthly reports, PATH quarterly reports, PATH annual report data, and population by census data.

III. State Level Information

I. Location of Individuals with Serious Mental Illnesses who are Experiencing Homelessness

Narrative Question:

Indicate the number of individuals with serious mental illnesses experiencing homelessness by each region or geographic area of the entire state. Indicate how the numbers were derived and where the selected providers are located on a map.

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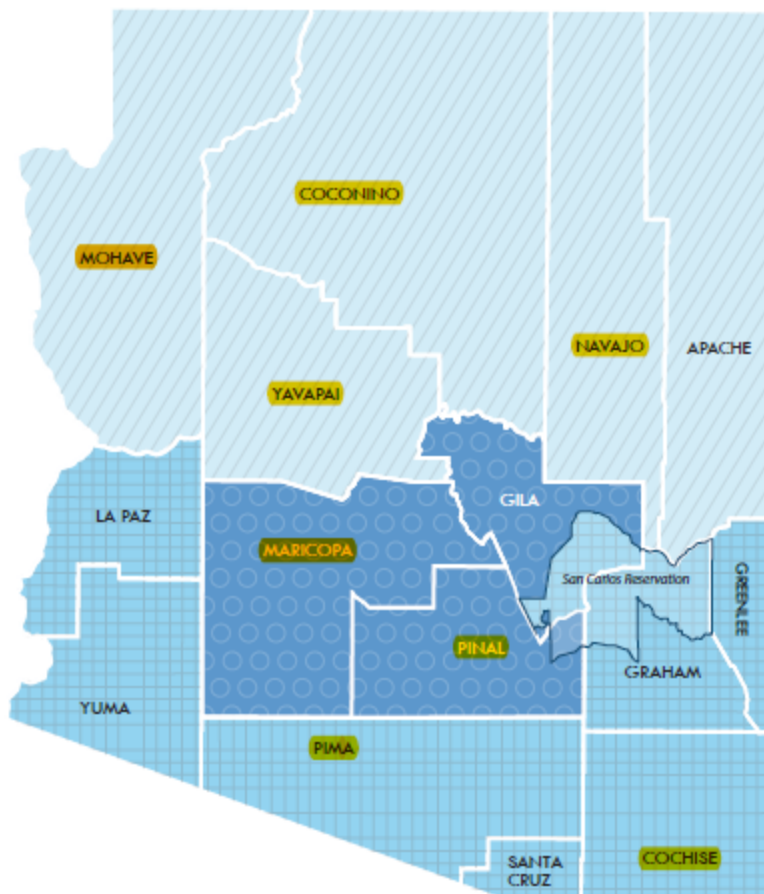
AZ 3/10/22: Due to barriers caused by Covid-19, the 2020 and 2021 Point In Time (PIT) Shelter and Street Count were cancelled. AZ continues to use the data provided by the 2019 PIT Count to help inform statewide PATH efforts, and will update this information as the PIT Count has resumed for 2022.

- I. Location of Individuals with Serious Mental Illnesses who are Experiencing Homelessness- Indicate the number of individuals with serious mental illnesses experiencing homelessness by each region or geographic area of the entire state. Indicate how the numbers were derived and where the selected providers are located on a map.

2019 Point in Time Street & Shelter Count*

GSA	Adults Homeless Unsheltered	Homeless Unsheltered with Serious Mental Illness (data is self-reported)	Homeless Unsheltered with Substance Use Disorder (data is self-reported)
Balance of State (BOS), encompasses 13 counties	893	194	265
Maricopa County	3188	966	1116
Pima County	361	157	95

*2021 Point in Time data was not provided at this time as each Continuum of Care was granted an extension to February 2022 to submit their final data to HUD due to the COVID-19 pandemic.



III. State Level Information

J. Matching Funds

Narrative Question:

Describe the sources of the required PATH match contributions and provide assurances that these contributions will be available at the beginning of the grant period.

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J. Matching Funds

Describe the sources of the required PATH match contributions and provide assurances that these contributions will be available at the beginning of the grant period.

Required non-federal contributions are available from the State General Fund Non-Medicaid Seriously Mentally Ill Services appropriation. Funds will be available at the beginning of the grant period.

III. State Level Information

K. Other Designated Fundings

Narrative Question:

Indicate whether the mental health block grant, substance abuse block grant, or general revenue funds are designated specifically for serving people who experience homelessness and have serious mental illnesses.

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K. Other Designated Funding

Indicate whether the mental health block grant, substance abuse block grant, or general revenue funds are designated specifically for serving people who experience homelessness and have Serious Mental Illnesses.

1. Mental Health Block Grant - Funds provided by the mental health block grant are utilized for services to individuals with serious mental illness and children with serious emotional disturbance, which can be used for those who are homeless or at imminent risk of being homeless.
2. Substance Abuse Block Grant- Provisions are made through the substance abuse block grant for services to be delivered through street outreach/drop in centers serving homeless individuals with substance use disorder at high risk for HIV, in addition to other community settings such as probation offices, domestic violence facilities and homeless shelters.
3. State General Fund Revenue- State general funds allocated as match for PATH federal funds are specifically targeted for individual persons who are experiencing homeless and have a Serious Mental Illness designation or co-occurring substance use disorder.

While the focus of the PATH grant is to reduce or eliminate homelessness for individuals with Serious Mental Illness, co-occurring substance use disorders , and who are experiencing homelessness or at imminent risk of becoming homeless, AHCCCS has other grant funding sources that can assist the same population as the PATH Grant.

If the person outreached does not met eligibility criteria for PATH, the PATH contractor will refer or connect the individuals with the Regional Behavioral Health Authority (RBHA) in their respective service area who provides the oversight of the above mentioned grant funds.

III. State Level Information

L. Data

Narrative Question:

Describe the state's and providers' participation in HMIS and describe plans for continued training and how the state will support new local-area providers. For any providers not fully participating in HMIS, please include a transition plan with an accompanying timeline for collecting all PATH data in HMIS.

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L. Data

Describe the state's and providers' status on HMIS transition plan, with accompanying timelines for collecting all PATH data in HMIS. If the state is fully utilizing HMIS for PATH services, please describe plan for continued training and how the state will support new local-area providers.

All Arizona PATH providers are fully utilizing HMIS for documenting all PATH services. AHCCCS/DGA continues to support HMIS trainings and activities for its contractors, which will include alerting them of SAMHSA Homeless and Housing Resource Network webinars, and the Learning Community Webinars. Each PATH contractor has a line item budget for HMIS support, licenses and trainings.

The State of Arizona has three different U.S. Department of Housing and Urban Development (HUD) Continuums of Care (CoC) and each is the HMIS Lead Agency for their respective region. These CoCs complete their own program coordination and planning to end homelessness. PATH contractors are contractually required to actively collaborate and participate on any committees or sub-committees as they relate to PATH. The AHCCCS PATH Administrator monitors this activity through receipt of Quarterly Reports.

If any data quality issues arise, the HMIS Lead Agency will notify the AHCCCS PATH Administrator and issue(s) will be resolved with collaboration between the PATH contractor, HMIS Lead Agency and the AHCCCS PATH Administrator to remedy.

Arizona CoCs:

Maricopa Association of Governments is the HMIS Lead Agency for Maricopa County. Community Bridges, Inc. PATH program staff member(s) take part in various committees and/or sub-committees. More information regarding various committees they participate on can be found in their respective Intended Use Plan (IUP).

Tucson Pima Collaboration to End Homelessness is the HMIS Lead Agency for Pima County. La Frontera PATH program staff member(s) take part in various committees and/or sub-committees. More information regarding various committees they participate on can be found in their respective Intended Use Plan (IUP).

Arizona Department of Housing, Balance of State Continuum of Care is the HMIS Lead Agency for the remaining thirteen counties. Catholic Charities (Mohave, Coconino and Yavapai Counties) and Good Neighbor Alliance (Cochise County) PATH program staff member(s) take part in various committees and/or sub-committees. More information regarding various committees they participate on can be found in their respective Intended Use Plan (IUP).

III. State Level Information

M. Supplemental Security Income/Social Security Disability Insurance (SSI/SSDI) Outreach, Access, Recovery (SOAR)

Narrative Question:

Describe how the state encourages provider staff to be trained in SOAR. Indicate the number of PATH providers who have at least one trained SOAR staff. If the state does not use SOAR, describe state efforts to ensure client applications for mainstream benefits are completed, reviewed, and a determination made in a timely manner.

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M. SSI/SSDI Outreach, Access and Recovery (SOAR)

Describe how the state encourages provider staff to be trained in SOAR. Indicate the number of PATH providers who have a least one trained SOAR staff. If the state does not use SOAR, describe State efforts to ensure client applications for mainstream benefits are completed, reviewed and a determination made in a timely manner.

AHCCCS has made it contractual requirement every PATH funded staff be trained in SOAR. This is monitored by each contractor submitting their staff’s certificate of completion of the on-line SOAR training. Any new staff hired after the annual application date will have 90 days to complete the on-line SOAR training and submit their certificate of completion to the AHCCCS PATH Administrator.

PATH Contractor	County	Number of Staff Trained
Community Bridges, Inc.	Maricopa County	1
La Frontera	Pima County	3
Good Neighbor Alliance	Cochise County	1
Catholic Charities Community Services	Mohave, Coconino & Yavapai County	1

By completing the 20 hours of on-line training, it allows the street outreach worker to have a better understanding of the process and can assist by prescreening and referring participants for SOAR. The PATH contractors either have or are working on establishing good working relationship with the Social Security Administration (SSA) offices in their respective counties.

III. State Level Information

N. PATH Eligibility and Enrollment

Narrative Question:

Describe how PATH eligibility is determined, when enrollment occurs, and how eligibility is documented.

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N. PATH Eligibility and Enrollment

Describe how PATH eligibility is determined, when enrollment occurs and how eligibility is documented.

The purpose of the PATH Grant is to provide funds for eligible services to individuals who are: (1) living with Serious Mental Illness (SMI) designation and /or have a co-occurring Substance Use Disorder; and (2) homeless or at imminent risk of becoming homeless.

PATH Contractors conduct an initial assessment of a potential PATH client by exhibiting client behaviors that are consistent with a SMI diagnosis; this can be over multiple contacts. PATH contractors document the overview of the contact, observed signs and contact location (assists with future contacts) with the homeless individual.

Enrollment begins when the PATH Eligible individual verbalizes an interest in participation in the PATH program, signs the Homeless Management Information System (HMIS) consent form and an individual record is created in the HMIS system. The PATH contractor will also ensure the PATH enrollee applies for mainstream physical and behavioral health services such as Medicaid/Medicare, SSI/SSDI, Housing, Temporary Assistance for Needy Families, Food Stamps, medical resources, etc. Services are documented within the individuals case plan and the case plan will be updated as needed or every three (3) months.

The PATH contractor will either complete (or refer out) for the individual to participate in the screening process to determine service eligibility and need for a SMI determination. The PATH contractor ensures the screening process is completed and a SMI determination is completed within ninety days of enrollment. Those individuals who do not complete an SMI determination within ninety days can remain enrolled up to six months with evidence of documentation from the PATH Contractor.

A critical component of the AHCCCS service delivery system is the effective and efficient identification of individuals who have special behavioral health service needs due to significant functional impairments resulting from a behavioral health disorder. One such population is individuals designated as having an SMI. Without receipt of appropriate care, these individuals are at a high risk for further deterioration of their physical and mental condition, increased hospitalizations and potential homelessness and incarceration.

AHCCCS has developed a standardized process and criteria to determine SMI Eligibility Determination to ensure individuals designated as SMI are promptly identified and enrolled for services. Community Information and Referral Network (CRN) is responsible for rendering the final SMI Eligibility Determination statewide, any applicable grievances and appeal requirements, and all administrative responsibilities related thereto.

For more information about the SMI Determination Process, please visit:
<https://www.azahcccs.gov/shared/Downloads/MedicalPolicyManual/300/320P.pdf>

PATH contractors are obligated to have a Memorandum of Understanding (MOU) with each of the Regional Behavioral Health Authorities (RBHA) in their respective geographic service area.

The MOU allows for a working relationship to be built and collaboration efforts for engaging and/or reengaging the PATH individual for the needed behavioral health service(s).

PATH Reported Activities

Charitable Choice for PATH

Does your state use PATH funds to fund religiously-affiliated providers to provide substance use treatment services? Yes No

If "Yes" is selected please list providers in text box below and complete the rest of the table

Expenditure Period Start Date: Expenditure Period End Date:

Notice to Program Beneficiaries - Check all that apply

- Used model notice provided in final regulation.
- Used notice developed by State (please attach a copy to the Report).
- State has disseminated notice to religious organizations that are providers.
- State requires these religious organizations to give notice to all potential beneficiaries.

Referrals to Alternative Services - Check all that apply

- State has developed specific referral system for this requirement.
- State has incorporated this requirement into existing referral system(s).
- SAMHSA's Treatment Facility Locator is used to help identify providers.
- Other networks and information systems are used to help identify providers.
- State maintains record of referrals made by religious organizations that are providers.
- Enter total number of referrals necessitated by religious objection to other substance abuse providers ("alternative providers"), as defined above, made in previous fiscal year. Provide total only; no information on specific referrals required.

Brief description (one paragraph) of any training for local governments and faith-based and community organizations on these requirements.

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