#### Revised Exhibit X

## (Guidance 15)

# Projects for Assistance in Transition from Homelessness (PATH)

**Reference:** Prime Contract, Sections A.1.1.2 and C.1.2.6.11, and Guidance 15, effective July 1, 2005,

or the latest revision thereof

**Authority:** 42 U.S.C. s. 290cc-22 et. seq.

Frequency: Ongoing

Due Date: Not Applicable

#### Discussion:

The purpose of this document is to provide guidance to Managing Entities for the implementation and administration of the Projects for Assistance in Transition from Homelessness (PATH) Grant. The PATH grant funding varies annually and is a non-competitive, formula grant distributed to all states and U.S. territories by the Substance Abuse and Mental Health Services Administration (SAMHSA). PATH grant funds are the only funds dedicated specifically for individuals with mental health or co-occurring substance use disorders who are experiencing homelessness or at risk of homelessness. PATH programs are required to provide matching funds of no less than \$1 match funds for every \$3 federal funds received. PATH grant funds are distributed to the Managing Entities which in turn allocate funds to contracted community providers.

#### I. Goal

The goal of the PATH grant is to reduce or eliminate homelessness for individuals with serious mental illnesses and co-occurring substance use disorders who are experiencing homelessness or at imminent risk of becoming homeless. Grant funds are used for outreach to adults with serious mental illness or co-occurring mental health and substance use disorders who are homeless or at imminent risk of becoming homeless, and connect them to behavioral health services, housing supports, and services that are not traditionally funded by behavioral health programs.

### II. Eligibility

PATH eligible consumers must be:

- 18 years or older,
- Have a serious mental illness or a serious mental illness and co-occurring substance use issue, and
- Experiencing or at imminent risk of becoming homeless.

## III. Managing Entity Responsibilities

The Managing Entity shall subcontract with entities who qualify under 42 U.S. Code § 290cc–22 and have the capacity to provide, directly or through arrangements, allowable services including coordinating the provision of services to meet the needs of eligible individuals. The Managing Entity shall conduct quarterly monitoring activities to ensure compliance with PATH Grant regulations and the standards set forth herein.

To be considered for PATH Grant funding a Managing Entity must ensure the following:

- 1. Program Requirements
  - a. PATH- funded case managers must:
    - Provide individualized support by helping each PATH-enrolled individual develop a
      personalized service plan to address any barriers to obtaining and maintaining permanent
      housing.
    - ii. Provide employment linkage, benefits establishment, linkage to community providers for substance use treatment, primary medical and mental health care, and all other services needed to assist individuals in reaching their recovery goals.
    - iii. Perform community outreach to business owners, realtors, landlords, housing developers and other service providers to build strong relationships and identify new and existing opportunities to better assist individuals in accessing resources, employment, supportive services, and housing opportunities.
    - iv. Review service plans every three months, and the plan must include:
      - Community mental health services;
      - Coordination and referrals for needed services such as shelter, daily living activities, personal and benefits planning, transportation, habilitation and rehabilitation services, prevocational and employment services, and permanent housing; and
      - Assistance obtaining income and income support services, Supplemental Nutrition Assistance Program (SNAP) benefits, and Supplemental Security Income/Social Security Disability Insurance (SSI/SSDI).
  - b. Maintain individual case records for each PATH participant containing an intake form, a determination of eligibility for PATH-funded services, a service plan, and progress notes.
  - c. Submit the PATH Annual Report no later than November 1<sup>st</sup> via the PDX system located here: https://pathpdx.samhsa.gov/
  - d. Train designated staff on SSI/SSDI Outreach, Access, and Recovery (SOAR) using the SOAR Online Course, available at: <a href="https://soarworks.samhsa.gov/">https://soarworks.samhsa.gov/</a>. In the event PATH staff do not provide SOAR services, PATH staff must link potentially eligible individuals to non-profit or advocacy organizations assisting with applications for Social Security benefits.
  - e. Enter SSI/SSDI application data into the SOAR Online Application Tracking (OAT) database at <a href="https://soartrack.samhsa.gov/">https://soartrack.samhsa.gov/</a>, in accordance with Managing Entity Contract Guidance 9.
  - f. Provide at least one dollar of local match contribution for every three dollars of PATH funds received and expend local matching funds to provide eligible services to PATH participants. Matchfunded expenditures must align with the services identified in the local IUP budget.
  - g. Calculating Match contributions:
    - i. Example: \$300,000 federal award
    - ii. Calculation: \$300,000/3 = \$100,000 minimum match to be provided
    - iii. TOTAL PATH EXPENDITURES = \$400,000
  - h. Employ policies and procedures that ensure priority use of other available funding sources for services (i.e., Medicaid).
  - Include consideration of continuity of care needs specifically for people experiencing homelessness in disaster response plans. PATH Providers shall assess, at least annually, and amend as appropriate, their disaster response plan to ensure it continues to meet the service needs of the target population.

- j. Participate and collect consumer data in the Homeless Management Information System (HMIS) and establish plans for new hire training and continued training. Adhere to data quality target measures as established by the Managing Entity.
- k. Adhere to the standards established in the Florida PATH Program Manual.
- 2. The Department reserves the right to exclude any entity seeking to apply for PATH Grant funding.
- 3. Required Activities
  - a. The Managing Entity shall:
    - i. Review for accuracy, approve, and submit a draft Local Intended Use Plan (IUP) to the State PATH Contact (SPC) by October 1<sup>st</sup> of each year. The IUP must clearly and completely respond to each question in the most recent PATH Grant Notice of Funding Opportunity published by the Substance Abuse and Mental Health Services Administration available here: Grants | SAMHSA.
    - ii. The IUP must meet the formatting requirements outlined in the Notice of Funding Opportunity and be free from grammatic and mechanical errors, missing information, numbers, service description, etc. If the IUP must be returned to the Managing Entity or provider more than three times for revisions, the provider will not be considered for the upcoming PATH Grant award.
    - iii. Managing Entities must submit a local IUP budget and a separate budget narrative, including all sources of match contributions on or before the due date specified by the SPC. If the Budget must be returned to the Managing Entity more than three times for corrections, the provider will not be considered for the upcoming PATH Grant award.
    - iv. During a PATH Grant mini-application year (biennial) or if no significant changes to PATH programs are anticipated for the upcoming Grant period, the Managing Entity must email the SPC by October 1st certifying that the response to the previous year's IUP has not changed. A local IUP budget, budget narrative, and updated data on Fiscal Year outcomes, demographics, and projected numbers and percentages must be submitted annually.
      - 1. For budget submission requirements, please see section III.1.a.ii. above.
    - v. Review instructions and participate in training(s) on data entry into the Web Block Grant Application System (WebBGAS) data system and annually check for any changes that may have been updated since prior years.
    - vi. Review and become familiar with the Notice of Funding Opportunity (NOA) requirements for the Grant Fiscal Year. The NOA is accessible in the PATH Data Exchange (PDX) portal.
    - vii. Submit approved PATH application documents (e.g., local IUP, budget, and budget narrative, etc.) for each participating provider into WebBGAS by the deadline specified by the SPC.
    - viii. Ensure budget costs charged to the grant are allowable as authorized under 45 CFR § 75.403, no more than four percent of funds are used for administrative expenses, and that housing expenses do not exceed the maximum 20 percent allowable per section 522(h) (42 U.S. Code § 290cc–22).
    - ix. Develop data quality metrics to ensure high-quality and reliable PATH program data. Policies should assure that essential data quality metrics will be monitored, at a minimum, for accuracy, completeness, consistency, integrity, timeliness, and duplication.
    - x. Compare HMIS data and PDX reports and remediate any errors quarterly and annually, when possible.
    - xi. Review the most recent version of the PATH Program HMIS Manual for updates at least quarterly and ensure HMIS for respective providers is designed according to the specifications. The PATH Program HMIS Manual is available on HUD's website here: <a href="https://www.hudexchange.info/resource/4446/path-program-hmis-manual/">https://www.hudexchange.info/resource/4446/path-program-hmis-manual/</a>.

- xii. Review and approve the PATH Provider's annual report in PDX prior to submitting to SPC no later than November 10<sup>th</sup>. "Review" and "approval" include verification of PATH funds received, matching funds used in support of PATH, staffing, services, referrals, and activities.
- xiii. Ensure all PDX warning messages are addressed in the comments and all error messages are fully resolved prior to submission to the SPC.
- xiv. Designate a lead staff responsible for managing, reviewing, and ensuring accurate data input by PATH Provider's in PDX.
- b. Require PATH Providers to develop and implement a quality improvement plan for the use of program data on access, use, and outcomes to support efforts to decrease the differences in access to, use, and outcomes of service activities. Providers may incorporate the quality improvement (QI) plan as part of their larger QI plan provided that the PATH eligible population is considered. PATH Providers are encouraged to collect and use data to:
  - i. Identify the number of individuals to be served during the grant period,
  - ii. Identify subpopulations (i.e., veterans, women with children) vulnerable to behavioral health disparities to target during outreach, and
  - iii. Identify methods for the development of policies and procedures to ensure adherence to the National Standards for Culturally and Linguistically Appropriate Services (CLAS) in Health and Health Care.
- c. Assist PATH Providers with collaborating with local stakeholders and accessing resources to link individuals with safe, affordable housing.
- d. Inform the SPC within three business days of any significant program changes or anticipated changes. If determined to be necessary by the SPC, a request detailing the planned revisions and justification must be submitted. Implementation of any significant changes are contingent upon Department approval. An example of a significant change includes, but is not limited, to the following: a corrective action issue, adding a new or withdrawing of a PATH Provider, or changes in funding allocation.
- e. Select PATH Providers based on areas in the state in which the greatest number of individuals who are experiencing homelessness with a need for mental health, substance use disorder, and housing services are located.
- f. Use Section 4 and Appendix F in the most current SPC Welcome Manual when conducting PATH program monitoring. The manual is available in PDX here: <a href="https://pathpdx.samhsa.gov">https://pathpdx.samhsa.gov</a>.
- g. Ensure both street outreach and case management are provided in each of the county(ies) served.
- h. Conduct annual reviews of PATH programs to ensure that PATH services are only provided to eligible consumers.
- i. Conduct annual reviews of PATH provider admission policies and revise as needed to ensure PATH services are only provided to eligible consumers.
- j. Ensure PATH providers conduct quarterly reviews of consumers' case files to determine if consumers are eligible and disensolled ineligible consumers from the PATH program.

#### IV. PATH Enrollment

For consistency across programs, providers shall use the PATH Enrollment Checklist below and file the completed document in the medical record when enrolling participants.

### **PATH Enrollment Checklist**

**Enrollment**: PATH enrollment implies that there is the intent to provide services for an individual other than those provided in the outreach setting. The term enrolled means that there is a mutual intent for the services to begin. PATH enrollment is when:

- 1) The individual has been determined to be PATH eligible,
- 2) The individual and the PATH Provider have reached a point of engagement where there is a mutual agreement that services will be provided, and
- 3) The PATH Provider has started an individual file or record for the individual that includes, at a minimum:
  - a. Basic demographic information needed for reporting,
  - b. Documentation by the Provider of the determination of PATH eligibility,
  - c. Documentation by the Provider of the mutual agreement for the provision of services,
  - d. Documentation of services provided, and

e. Service plan if the PATH enrollee is receiving case management services.	
	has been determined eligible for PATH
(ivame o	f Person Served)
enrollme	nt based on meeting the following criteria:
	He/she has a mental health diagnosis ofOR  There is an informed presumption that the individual has a serious mental illness because: He/she is experiencing or displaying symptoms of mental illness and is experiencing difficulty in functioning as a result of these symptoms that indicates severity, He/she has shared or has a known history of engagement with mental health services, He/she has symptoms and functioning that indicates there is a history of or expected tenure of significant mental health concerns
ANI	D
	<ul> <li>☐ He/she lacks any housing, OR</li> <li>☐ His/her primary residence during the night is a supervised public or private facility that provides temporary living accommodations, OR</li> <li>☐ He/she is a resident in temporary or transitional housing that caries time limits, OR</li> <li>☐ He/she is in a doubled-up living arrangement where his/her name is not on the lease, OR</li> <li>☐ He/she is living in a condemned building without a place to move, OR</li> <li>☐ He/she has received an eviction notice without a place to move, OR</li> <li>☐ He/she is being discharged from a health care or criminal justice institution without a place to live, OR</li> <li>☐ He/she is living in substandard conditions that could result in homelessness due to local code</li> </ul>
	enforcement, police action, voluntary action by the person, or inducements by service providers to go to

alternatives like short-term shelters whose residents are considered to be homeless.