Projects for Assistance in Transition from Homelessness Guidance Document
Program and Budget Guidelines
Ohio Mental Health and Addiction Services: Projects for Assistance in Transition from Homelessness (PATH)

Ohio Path Sites
July 2018
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Overview
The purpose of this guidance document is to provide consistency amongst Ohio’s local behavioral health boards and provider organizations with day-to-day operations of PATH programs. Information has been provided to assist in the completion of the programmatic and expenditure reporting requirements, included but not limited to; Funding Opportunity Announcement (FOA), Intended Use Plans (IUP), quarterly reporting, annual reporting, etc.

Scope of Award
It is the responsibility of Ohio’s Department of Mental Health and Addiction Services (OhioMHAS) under the direction of the Governor’s office by way of SAMHSA to implement the Projects for Assistance in Transition from Homelessness (PATH) program, also to provide guidance and technical assistance that detail the grant application and administration process. This guidance document and other essential information to the PATH program can be located at:

https://mha.ohio.gov/Schools-and-Communities/Community-and-Housing/Housing-Resources/Homelessness-and-PATH

Additionally, states are expected to fund organizations in areas with the highest concentration of people who are experiencing homelessness.

Ohio has managed the funding process by using a formula comprising of national/state census data by county with poverty and population to determine appropriate board areas. Using the most recent census data it has been determined that we are currently funding 11 of the top 15 counties in Ohio with our target population.

This guidance document is not a comprehensive listing of all rules, regulations, or laws relating to grant administration, but is a guide of standardized procedures to assist county board personnel in the pursuit, application, and management of PATH funds.

Goal
Projects for Assistance in Transition from Homelessness (PATH), a formula-based program, is designed to be an outcome driven grant program to support service delivery to individuals with severe mental illnesses (SMI), co-occurring SMI and substance use disorders, persons experiencing homelessness or at imminent risk of homelessness. The Substance Abuse and Mental Health Services Administration (SAMHSA), along with Ohio’s Department of Mental Health and Addiction Services, awards funds to programs to reduce or eliminate homelessness for one of Ohio’s most vulnerable populations, with the goals being to connect individuals to community mental health services, mainstream benefits, and transition people from homelessness as a way of working towards functional zero.

Eligible Applicants
Applicants must be county/regional mental health or alcohol, drug addiction and mental health services boards, or providers partnering with a board. Boards must sub-award funds to a non-profit agency to deliver PATH services. Boards receiving PATH allocations and their sub-awarded PATH provider organizations must participate in their community’s HUD Continuum of Care.
Note: No program will be funded that has a policy of excluding individuals from mental health services due to the existence or suspicion of substance use; or has a policy of excluding individuals from substance use services due to the existence or suspicion of mental illness.

Term of Award
Awards for the program will be determined annually, based on the Sandbox Tool (Ohio’s Fair Share), despite SAMHSA implementing the biennial application. The grant funding period will align with the State Fiscal Year (SFY), beginning July 1 and ending June 30 of a given year. Reimbursements will be completed in GFMS, based on eligible expenses that occur within the terms of the grant. Funding may vary and is subject to change based on availability of funding from SAMHSA. Additionally, board and providers are required to sign federal and local program assurances annually.

Matching Funds
Matching Funds (Cost Sharing) is required as specified in Section 523 (a) of the Public Health Service (PHS) Act. The state must match directly or through donations from public or private entities, non-Federal contributions toward such cost in an amount that is not less than $1 for each $3 of federal PATH funds. Non-Federal contributions required in subsection (a) may be in cash or in kind, fairly evaluated, including plant, equipment, or services. Amounts provided by the Federal Government, or services assisted or subsidized by any significant extent by the Federal Government, shall not be included in determining the amount of such non-Federal contribution. An example of calculating match funds for PATH;

Example: If your program is awarded $160,000.00 ($160,000 divided by 3 equals 1/3 or $53,333.33); therefore, total project amount is $213,333.33.

Purpose and Use of Funds
In General
The State PATH Contact (SPC) may not grant reimbursement in GFMS unless the local behavioral health board and providers involved agrees that the payments will be expended solely for providing the services specified below in this section to individuals who are 18 years or older, who:

1. Have a serious mental illness (SMI); or have co-occurring diagnosis of SMI and substance use disorder and;
2. Are homeless or at imminent risk of becoming homeless.
3. OhioMHAS also provides exceptions for programs to serve persons already linked to community mental health services, under the following stipulations
   • PATH providers in the Balance of State Continuum of Care (BOS CoC) can enroll up to 30% of persons contacted who are already linked to community mental health in PATH, under the expectation the program will utilize funds to increase engagement with behavioral health services and increase housing outcomes for PATH-enrolled clients;
   • PATH providers in a Continuum of Care outside of the BOS CoC can enroll up to 20% of persons contacted who are already linked to community mental health services in PATH, under the expectation that the program will utilize funds to increase engagement with behavioral health services and increase housing outcomes for PATH-enrolled clients.

SERVICES—While the United States’ Substance Abuse and Mental Health Services Administration (SAMHSA),
whom is responsible for administering the grant at the federal level, permits the use of PATH funds for services and referrals, OhioMHAS is permitted to limit funds for specific services outlined in the PHS.

1. Re-engagement Services;
2. Screening Services;
3. Clinical Assessment;
4. Habilitation and Rehabilitation Services;
5. Community Mental Health Services;
6. Substance Use Treatment;
7. Case Management Services;
8. Residential Supportive Services;
9. Housing Services;
   • Housing Minor renovation
   • Housing Moving Assistance
   • Housing Eligibility Determination
   • Security Deposits
   • One-time rent for eviction prevention

Referrals
1. Community mental health
2. Substance use treatment
3. Primary health/dental care
4. Job training
5. Education services
6. Housing services
7. Permanent Housing
8. Temporary Housing
9. Income Assistance
10. Employment Assistance
11. Medical Insurance

SOAR (SSI/SSDI Outreach, Access, and Recovery) – SOAR connections are not captured as a service or a referral, however income assistance is a referral category. If the program provides SOAR as a service, or referral, report on data element “Income Assistance” (Q18a9) and SOAR Connections (Q26g), however;
1. OhioMHAS requires SOAR Specialist to collect data in the Online Application Tracking system (OAT);
   • Or other OhioMHAS approved reporting tools, regarding program outcomes of their disability application.
2. SOAR funds are not reflected in Sandbox outcomes.

**Limitations and Restrictions**
Federal PATH and local match funds will NOT be used for the following items/activities1:

- Support or operation of emergency shelters or construction of housing facilities
- Immediate access housing; unless it is used as an outreach tool to support a person who, because of their mental illness, might be victimized in a shelter
- Inpatient psychiatric treatment or inpatient substance abuse treatment costs

1 This is not an all-inclusive list of prohibited uses. See Cost Principles for Non-Profit Organizations site for further explanation (www.whitehouse.gov.omb/circulars/a122/1122_2004.html)
• Cash payments to recipients of mental health or substance abuse services
• The ongoing purchase of Groceries
• Purchase or improvement of land, a building, or other facility (other than minor remodeling)
• Purchase or construction of any building or structure to house any part of the grant program
• Purchase of durable or major medical equipment
• To satisfy a requirement for the expenditure of non-federal funds as a condition for the receipt of federal funds (local funds used as federal match may only be counted once for a single federal program)
• Financial assistance to any entity other than a public or nonprofit, private entity
• Lease arrangements in association with the proposed project utilizing PATH funds beyond the project period nor any portion of the space leased with PATH funds be used for purposes not supported by the grant
• Funds must be used for purposes and services described in this document.
• No more than 20% of the federal PATH funds allocated to the state may be expended for eligible housing services as specified in Section 522(h)(1) of the PHS act.

Funding any entity that a) has a policy or practice of excluding individuals from mental health services due to the existence or suspicion of substance abuse; or b) has a policy of practice of excluding individuals from substance abuse services due to the existence or suspicion of mental illness.

PATH Providers are encouraged to seek written approval for any initiative which is not clearly understood as an eligible use of funds.

For further explanation and an exhaustive list of prohibited uses of funds, see Cost Principles for Non-Profit Organizations: [http://www.whitehouse.gov/omb/circulars/a122/a122_2004.html](http://www.whitehouse.gov/omb/circulars/a122/a122_2004.html).

**Training Requirements for PATH Outreach Workers**

Each PATH supervisor is encouraged to develop an individualized workforce development plan to ensure that all PATH outreach workers are trained in the following areas, at a minimum:

1. How to make a good faith determination of severe mental illness
   - Major Mental Illnesses / Clinical symptoms of mental illness and effective interventions
   - Substance Abuse / Clinical symptoms of substance use disorders and effective interventions
   - Co-occurring Substance Abuse / Mental Illness Issues
2. The definition of homelessness and at risk of homelessness and how to apply these definitions
3. Identifying/linking to resources (i.e., housing, entitlement benefits, food, clothing, medical substance abuse counseling, mental health services, employment and employment services, and psychiatric care)
4. Crisis prevention and intervention, including safety issues for outreach workers
5. How to conduct presentations and train community members and organizations on homelessness and/or mental illness
6. Ohio Benefits Bank
7. HMIS
8. HIV/AIDS Awareness and Treatment
9. Recovery and Community Integration
10. Evidence Based Practices:
    - Trauma Informed Care
    - Housing First
Accountability: Roles and Responsibilities
County/Regional Mental Health and Recovery Boards:
Local behavioral health boards are required to perform annual program audits of local PATH providers to assure compliance with program guidelines. The results of such audits must be made available to OhioMHAS upon request.

Local boards should analyze and be prepared to report on PATH provider performance trends. Trends found unacceptable should be brought to the attention of the PATH agency and specific action steps should be identified or a board review of a county-wide competitive process should be undertaken.

A representative from both the respective PATH provider organization and the county mental health board are required to attend and actively participate in all quarterly PATH Meetings.

Local boards are required to:
1. Create reimbursement request in GFMS;
2. To attend, at minimum, two quarterly meetings
3. Review or complete;
   - Quarterly Expenditure Tracking Report, utilizing OhioMHAS provided template.
   - PATH Data Exchange (PDX);
   - Quarterly progress reports;
   - Annual Report.
   - Annual site monitoring
     - Completed by August 31, annually.

PATH Provider Organization(s):
OhioMHAS and the mental health boards will conduct annual on-site reviews, which will focus on project outcomes and best practices. Additionally, each board should address needed follow-up, in an action-plan format with specific follow-up timelines, if applicable.

Providers must obtain OhioMHAS certification as a provider of “Other Mental Health Services.”

Providers are required to collect data in HMIS. Additionally, providers are required to submit annual electronic performance reports to SAMHSA via PDX. See the PATH Annual Report Provider’s Guide for a more detailed explanation of this requirement.

Providers are required to administer PATH-funded services, as outlined in this guidance document. If there are questions or concerns regarding service delivery, providers are encouraged to reach out to board personnel and/or the State PATH Contact.

Providers are expected to attend all quarterly meetings.

- Each reporting period ends annually on June 30th
- Each report is open between October and December, is due to be submitted in January (generally the first or second week); however, the State PATH Contact (SPC) has the option of setting the due
date earlier, as necessary
• Providers must annually report on their progress in achieving the following key performance outcomes:
  • Increase the number of homeless persons contacted
  • Increase the percentage of contacted homeless persons with severe mental illness who become enrolled in services
  • Increase the percentage of enrolled homeless persons who receive community mental health services
  • Maintain the average Federal cost of enrolling a homeless person with severe mental illness in services

Grant Administration/Management
Funds for PATH are federal dollars allocated to states from SAMHSA, administered by Ohio’s Department of Mental Health and Addiction Services for the State of Ohio. It is OhioMHAS’ responsibility to implement grant activities to accomplish objectives, while adhering to regulatory and budgetary terms and conditions outlined in the Notice of Award (NOA) by SAMHSA. OhioMHAS carries a significant ethical and legal responsibility when participating in PATH program implementation and failure to do so exposes the department to liabilities and compromises current and future funding opportunities. Therefore, the administration and management of funding is OhioMHAS’ priority and requires heightened awareness through program areas.

As of FY2019, SAMHSA implemented the biennial application process for PATH funding. Participating PATH board areas and provider organizations complete full applications every other year. Years when the full application is not required, SAMHSA releases a mini-application to inform awardees of the state allocation, funding may increase or decrease based on funding availability at the national level.

OhioMHAS will review application submissions based on the information outlined in the Funding Opportunity Announcement or mini-application. Additionally, OhioMHAS will ensure all submitted information supports the funding outcomes for each board area and provider organization.
Pre-Award

- SAMHSA Releases FOA
  - FOA will be released biennially.
  - Typically released between March - June

Preparing for Application Submission

- Complete Sandbox Tool
- Intended Use Plan (if applicable)
- Budget/Budget Narrative (Excel Document)
- Federal and Local Assurances

Submit Application to OhioMHAS/WebBGAS

- OhioMHAS reviews application based on eligibility of funds outlined in the Budget/Budget Narrative.

Receiving the Award

- If approved, SAMHSA will provide OhioMHAS with a Notice of Award (NoA)
- Typically occurs in July-August

Award Management

- Board completes application in GFMS
- OhioMHAS distributes Notice of Sub-Award (NOSA)
- Board provides local administrative oversight of the award

Reporting

- Quarterly Expenditure Tracking Report
  - PATH Data report (PDX)
  - GFMS Reimbursement drawdown

Award Close Out

- Annual Report (PDX)
- Final Fiscal Report
**Notification, Review and Acceptance**

The award notification, review and acceptance process has four components: (1) Funding Opportunity Announcement, (2) award review and submission, (3) SAMHSA Notice of Award (NOA), (4) OhioMHAS Notice of Sub-Award (NOSA).

1. **Funding Opportunity Announcement (FOA)** is a publicly available document in which Federal agencies announce the award of discretionary grants or cooperative agreements. FOA’s contain information, included but not limited to, purpose, expectations, eligibility, reporting, etc. pertaining to an award.
   - SAMHSA began biennial PATH applications in FFY2018-19, which requires recipients to submit full applications every two years. During alternate years, states/territories submit an abbreviated application, including but not limited to:
     - Signed assurances (federal and state);
     - Budget information;
     - Other documentation as required by SAMHSA’s Division of Grants Management or OhioMHAS
2. **Award review and submission** is initially completed by the Ohio State PATH Contact prior to submitting the application to SAMHSA electronically through WebBGAS.
3. **SAMHSA issues the Notice of Award to OhioMHAS**, once the state application is approved.
4. Once OhioMHAS receives the NoA from SAMHSA, the State PATH Contact will notify PATH sub-awardees to complete an application in GFMS. After the State PATH Contact reviews approves the GFMS application, a NOSA will be awarded to the program.
   - SAMHSA began biennial PATH applications in FFY2018-19, which requires recipients to submit full applications every two years. During alternate years, states/territories submit an abbreviated application, including but not limited to:
     - Signed assurances (federal and state);
     - Budget information;
     - Other documentation as required by SAMHSA’s Division of Grants Management or OhioMHAS

**Pre-Award**

The PATH pre-award process consists of submitting; (1) Sandbox Tool, Ohio’s Fair Share, (2) Intended Use Plan, (3) Budget and budget narrative, (4) Disparities Impact Statement and Disaster Plan, (5) Federal assurances and State insurances.

1. The Sandbox Tool is implemented on an annual basis to determine outcomes for the fiscal year. OhioMHAS utilizes a partial formula and partial competitive (outcomes) based process for PATH sub-awards. The premise of the Sandbox Tool is to meet or exceed the national GPRA Measures based on the FOA from SAMHSA.
2. OhioMHAS must submit an Intended Use Plan for each PATH-funded board areas and provider organizations.
   - Intended Use Plans consist of a series of questions regarding the services offered through the provider organizations. (pg. )
3. Budget and budget narratives are submitted annually to the State PATH Contact prior to submission in WebBGAS.
   - Board and provider organizations are required to match federal funding no less than one dollar for every three federal dollars awarded, directly or through contributions from local public or private non/federal contributions.
   - Board and provider organizations do not have to match each local line item to a federal line item.
• To calculate local match funds, boards and providers will divide their federal allocation by three.
• Federal PATH allocations nor local match funds may be used for costs associated with the administration of the program.
• A maximum of 25% of federal and local funds can be utilized for indirect costs associated with the program.
• Sources of match requirements must be identified in the budget narrative.
• Direct cost are cost directly associated with assisting clients and engaging in outreach activities. Indirect cost are cost used for indirect services or services provision, such as commercial rent, general office expenses, etc.

4. Disparity impact statements and disaster plans are submitted to OhioMHAS annually.
5. Assurances are submitted to OhioMHAS electronically and by paper. Assurances must be submitted to OhioMHAS prior to the submission of the PATH application to SAMHSA.

The Ohio State PATH Contact shall conduct a review of eligibility requirements and services outlined in the above documents in accordance with Section 522 of the Public Health Services Act (PHS). Upon approval from the SPC, board and provider organizations will submit approved documentation in WebBGAS and manually enter budget information in the system.

**Note:** Submitted IUPS and Budget/Budget Narratives are viewed as annual grant application. Programs who do not follow the submission requirements and deadlines will be returned and may put the project at risk of losing part of all funding.

**Award-GFMS Application**
SAMHSA formally notifies OhioMHAS with a Notice of Award (NoA). Upon receiving the NoA, OhioMHAS will facilitate the Notice of Sub-Award (NOSA) process at the state level. PATH board areas will update the existing application in OhioMHAS’ Grants and Funding Management System (GFMS), additionally, GFMS is utilized to report expenditures and draw-down reimbursable funds. When completing the application, use the below guidance to assist for mandatory fields:

1. **Face-Sheet**
   • Service Type: Treatment and Recovery
   • Project Area: PATH
2. **Project Narrative**
   • Example: OhioMHAS’s PATH program targets persons experiencing homelessness, or persons at imminent risk of homelessness with a serious mental illness and/or co-occurring substance use disorder and serious mental illness. OhioMHAS’ PATH program intends to contact 5,702 persons, enroll 2,800 persons, and connect 1,900 persons to community mental health services.
3. **Community Assessment**
   • Provide a summary of findings from the assessment strategy.
     • Contact SPC for instruction
     • Tool Used: Community Plan
     • Description: CoC Con Plan.
4. **Service Capacity**
   • Behavioral Health Areas Addressed
     • At minimum, select Housing, Peer Services, SMI Symptomology
   • Target Populations
5. Implementation Plan
   - Project Model Type: Other
   - Project Model: Projects for Assistance in Transition from Homelessness
   - Project Model Description will self-populate and disable.
   - Level of Care: Not Applicable (please select this option and not NA or N/A)
   - Start Date: 07/01/20xx
   - End Date: 06/30/20xx
   - Define NOM(s): Select Access/Capacity
   - Define Objectives: “Increase access to services and service capacity”

6. Line Item Budget
   - Enter total allocation in the Contractual line item for Personal Service Contracts
   - Narrative: for PATH services and supports.

7. Submit the complete application to the OhioMHAS Program Lead
8. Lead will approve
9. Fiscal Lead will approve
10. NOSA will be awarded for reimbursement.

**Award Monitoring**
OhioMHAS monitors awards reimbursements based on three quarterly reports, additionally, reports are due to OhioMHAS on or before:

- First quarter -- October 31, annually;
- Second quarter -- January 31, annually;
- Third quarter -- April 30, annually;
- Fourth quarter -- July 31, annually.

1. Quarterly Expenditure Tracking Report
   - First tab captures federal and local expenditures per line item.
   - Second tab details persons served utilizing Housing Service Dollars

2. PATH Data Exchange (PDX)
   - PATH board and provider organizations are required to submit cumulative quarterly PDX reports and an Annual Report.

3. GFMS reimbursement request
   - Boards must request reimbursement request in alignment with their Quarterly Expenditure Tracking Report.
   - Board may request an advance of federal funds for the first quarterly only, all quarters following will be granted on quarterly reimbursement basis.

4. Request for reallocation of funds
   - Reallocation of line items from the original budget must be submitted to the State PATH Contact no later than June 1, annually.
   - Each reallocation request must address the reason for the request (i.e. an unexpected position vacancy, etc.), a copy of the original budget and budget narrative, and the new budget and budget narrative with the reallocation.
   - State PATH Contact has 3 business days to review the information, approval or disapproval will be sent to the board via email.
**Carry-Over Request**
OhioMHAS expects and encourages all funds disbursed to PATH programs will be spent within the state fiscal year in which they were issued. However, we recognize that expending every dollar in this timeframe is not always possible, for a myriad of reasons, and we want to leave funds in the community, when possible. It is to OhioMHAS’ discretion if funding will be carried over from the previous fiscal year. If board and/or provider organizations anticipate the need for carry-over funds, they must:

1. Notify the SPC as soon as possible, however no later than May 15 of the fiscal year via email.
2. Once SPC approves the request, the board and/or provider organization shall complete the Carry-over Request form.
   - Send the form to MHAS_FiscalReview@mha.ohio.gov with the subject line “OhioMHAS Carryover Request Form and Board/Provider Organization name”, additionally copy the SPC on the email.

**Post-Award**
All PATH awardees have reporting requirements specified in the FOA and Guidance Document. It is critical that all reports are complete, accurate, and submitted per the specified dates outlined below. SAMHSA requires awardees to establish procedures to ensure funding is expended and accounted for, as well as monitor program outcomes, based on GPRA measures, in a method that provides accuracy and consistency. Inaccurate, late, or under-performance may negatively impact current or future funding.

Additionally, OhioMHAS completes annual site visits to; analyze program performance in alignment with their IUP and budget, identify strengths and areas of improvement, offer technical assistance for program improvement and/or development. Site visits are announced via email 30 days prior to the visit and include information pertaining to needed documentation, needed personnel, interviews, etc.

During the post-award process, OhioMHAS requires two reports to complete the close-out of PATH sub-awards; (1) Final Fiscal Report (FFR), (2) PATH Annual Report.

1. Final Fiscal Report capture grant specific expenditures data for each sub-awardee.
   - FFR is due to OhioMHAS no later than August 31 of a given year.
2. PATH Annual Report data is collected in PDX. SAMHSA will notify SPCs when the reporting period is open and of the date of the federal deadline. SPC have the discretion to establish an earlier date than the federal deadline to ensure of the appropriate time needed to review report data. (see Appendices).
3. PATH Street Outreach and Services Only Annual Report from HMIS must be submitted to OhioMHAS no later than July 31, annually.
   - Reports must be generated from HMIS.

**Street Outreach HMIS Workflow**
1. First contact with potential client occurs by Street Outreach staff.
2. If eligible, the potential client will be enrolled into the Street Outreach or Services Only project in HMIS.
   - Program entry date is the same date as engagement.
     - Engagement is defined as, a deliberate interactive relationship resulting in a client assessment or the beginning of a case plan.
3. When enrolled, record a service transaction for outreach and a contact. The service start, and end date should be consistent with the project start date.
   - If other services occurred during the initial contact, i.e. transportation, screening, or referral, capture
the information in the services transaction screen.

4. Each face-to-face interaction with the client should be documented as a contact. The interaction could occur at the agency, on the streets, in a service setting such as a drop-in center, emergency shelter, etc.

5. When providing housing services, PATH program should collect the following data in HMIS
   - Enter the service type (i.e. housing eligibility determination, security deposit, etc.)
   - Number of units will equal 1
   - Cost per unit will equal the amount spent.
   - Total cost will equal the amount spent.
   - No follow up information needed.
   - Need Information:
     - Need Status—Identified.
     - Status—Fully Met.

6. Automatic Project Exits occur when program staff do not have contact with a PATH-enrolled client for 60 days. Projects should automatically exit clients and document the exit date as the date after the last service or contact was provided/made.
Data Collection for Service & Referrals

1. **Re-engagement** occurs with a PATH-enrolled client, prior to discharge and when the program has not provided a service or contacted the client for a minimum of **45 days, not to exceed 59 days**.

2. **Screenings** occur at the time PATH eligibility occurs. Every PATH enrolled client should be screened for program eligibility. Screenings also occur when PATH staff assess PATH-enrolled client’s needs and how they can be addressed.

3. **Clinical assessments** are captured when psychosocial needs and concerns are being addressed, resulting in a diagnosis (preliminary or definite).

4. **Community mental health services** are services that are direct activities provided in a non-institutional setting to facilitate an individual’s recovery. Examples of services include but are not limited to:
   - Clinical intake evaluation
   - Physician/medical assessment and treatment
   - Diagnostic testing
   - Crisis intervention
   - Individual, Group, or Family Counseling

5. **PATH Case Management services** include, but are not limited to:
   - Providing assistance in obtaining and coordinating social and maintenance services for eligible individuals who experience homelessness, including services related to daily living activities, peer support services, individual financial planning, transportation services, habilitation and rehabilitation services, prevocational and vocational services, and housing services; and providing assistance to eligible individuals who are experiencing homelessness in obtaining income support services, including housing assistance, food stamps, etc.

6. **Housing Services** are provided on a case by case basis. When programs are not sure of what is allowable or excessive, consult with the State PATH Contact before expending funds on services.
   - Housing Minor Renovations
     - Assistance provided on behalf of a PATH-enrolled client to ensure a housing unit is accessible and/or ensure the unit or home meets housing quality standards.
   - Housing Moving Assistance
     - Assistance provided on behalf of PATH-enrolled clients to help establish the household. (i.e. utility deposits/assistance, movers, furnishing (not to exceed $250) pots/pans, etc.)
     - Housing Eligibility Determination
     - Assistance provided on behalf of PATH-enrolled clients to meet financial requirements to enter housing. (i.e. application fees)
   - Security Deposits
     - Assistance provided on behalf of PATH-enrolled clients to pay up to two months’ rent or other security deposits to secure housing.
   - One-time rent for eviction prevention
     - Assistance provided on behalf of a PATH-enrolled client who is at imminent risk of homelessness, 30 days or less.

**Disclaimer:** Community mental health services and case management services differ by the type of services directly being provided to the PATH-enrolled client. Community mental health services are clinically driven to assist with the maintenance of symptoms of mental illness. Case management services are assistance and/or coordination driven. Case management services are not clinical and aim to assist PATH-enrolled clients with navigating the homeless and/or behavioral health system (i.e. referring to direct service providers, working with community partner to facilitate services, etc.)
Minimum PATH Documentation
Acceptable forms of PATH files are electronic (HMIS only) or paper files. Some PATH providers utilize Electronic Health Record systems, which must be available to OhioMHAS when conducting annual site visits. PATH files consist of, at minimum, the following documents:

1. Project Entry
   - All Universal Data Elements should be complete.
   - ROI for HMIS on file, as well as ROI for any other services needs for PATH.
2. Service and referral transactions
   - If the program keeps paper files, services and referral transactions should be present.
   - When providing housing services, program should document, at minimum, the following services:
     - Lease with the PATH-enrolled client’s name.
     - When providing housing minor renovations, a lease with the PATH-enrolled clients and documentation from the contracting business supporting the renovations of the PATH-enrolled client’s new home.
     - When providing eviction prevention, lease with the PATH-enrolled client’s name and an eviction or intend to evict notice/letter.
3. Project Exit
   - All Universal Data Elements should be complete.

Annual Report Submission
Historically, SAMHSA allows for Annual Report submissions from providers in October, with a due date of January 1, annually. OhioMHAS will notify board and provider organizations immediately after receiving notification from our federal partners.

Presently, SAMHSA recognizes two options for completing the PATH Annual Report:

1. Using the Comma Separated Value tool (CSV), built into HMIS, or;

SAMHSA utilizes the PATH Annual Report for an abundance of reason, included but not limited to; accountability, describe and evaluate programs, and program planning purposes.

Tips for Annual Report Submission
Information included in this section, align with the Annual Report format and manual which expires on November 31, 2021.

Budget Information

1. Question 1 (Federal Budget )
   a. Enter the amount of federal PATH funds expended for the reporting period, including carry-over funds.
2. Question 2 (Local/Match Funding)
   a. Enter the amount of local/matching funds expended for the reporting period, including carry-over funds.
3. Question 3 (Total funds)
   a. All funds from the program that are dedicated to homeless persons and have a serious mental illness.
   b. The amount could be equivalent to Q1 + Q2 or exceed the sum of Q1 and Q2, if the agency provides other funding or services to PATH’s target population.

4. Question 4 (# of staff supported)
   a. Data will be a whole number. This question is not based on FTE status, just the number of persons supported by funding.

5. Question 5 (Full-time equivalent)
   a. Data could be a decimal based on calculation of time personnel spend supporting the PATH programs.

6. Question 6 (Trainings)
   a. Trainings captured in this question pertain to trainings the PATH staff provide, not attend.

7. Question 7 (Type of organization)
   a. Organization type will be consistent with the organization type selected during the pre-award process, in the IUP.

**Persons Served During this Reporting Period**

8. Question 8
   a. Number of persons contacted, regardless of their enrollment status (data will include those who are not eligible), project type, etc.

9. Question 9
   a. Persons contacted who were engaged during street outreach/places not meant for human habitation (does not account for persons contacted during shelter in reach).

10. Question 10
    a. Persons contacted who were engaged in a service setting/ during in reach.

11. Question 11
    a. Total of Q9 and Q10

12. Question 12
    a. Contacts made prior to enrolling the client in a project.
       i. If PATH staff only contact a person once because they are ineligible, the number of contacts documented will be 1.
       ii. If PATH staff contact an individual five times before they consent to HMIS, the amount for the individual will be 5.
    b. Contacts made prior to, during, and after the date of enrollment.
       i. Using example 12aii, if the client was contacted 5 times before consenting to enrollment, once during the time of enrollment, and 25 times after the date of enrollment. Question 12b will reflect 31 contacts for the one client.
       1. It is extremely important to document a contact in HMIS when case managers/outreach staff meet with a client to facilitate services or referrals.

13. Question 13
    a. Outreaches and contacts are ineligible under the following criteria;
       i. Are not homeless, or at imminent risk of homelessness;
       ii. Do not have a mental health diagnosis, or a co-occurring mental illness and substance use.
       iii. Contacted through outreach or in-reach and present with a substance use disorder only.
14. Question 14  
a. Of Question 11, how many persons were enrolled in PATH.

15. Question 15  
a. PATH-enrolled individuals who have an active enrollment status during the reporting period.  
Number could consist of new enrollments, stayers from previous reporting year.

16. Question 16  
a. Number of PATH-enrolled individuals who were connected to community mental health services  
through direct services provision, or referrals.  
i. If the provider agency does not provide direct community mental health services, ensure the  
HMIS data administrator or staff document the referral was attained.

Services Provided

17. Question 17  
a. Services documented are accounted for in HMIS. Additionally, only capture services provided to  
PATH-enrolled clients that are supported by the agencies budget.

Referrals Provided

18. Question 18  
a. Referrals are accounted for in HMIS. To receive a positive outcome for referrals made, ensure to enter  
the referral workflow to attain the referral prior to project exit.

Outcomes

19. Question 19  
a. Income from any source, including SSI/SSDI.

20. Question 20  
a. From those who have income from any source (Q19a1), how many persons have SSI/SSDI.

21. Question 21  
a. Non-cash benefits from any source.

22. Question 22  
a. Of the PATH-enrolled clients, the number of people with insurance coverage.

23. Question 23  
a. Of the PATH-enrolled clients with insurance coverage (Q22a1), the number of people with Medicaid  
and/or Medicare.

24. Question 24  
a. Of the PATH-enrolled clients who do not have Medicaid and/or Medicare (23b1), the number of  
people with “All other health insurance”.

25. Question 25  
a. The total number provided for the subset of questions should total Question 15.
Appendix

Intended Use Plan
Federal Budget Narrative
Local Budget Narrative
Federal PATH Assurances
PATH Annual Report Manual

OhioMHAS PATH Staff Contacts
Bureau of Recovery Supports
Office of Housing and Homelessness

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