

- **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.
- **Selection of PATH Local-Area Providers** – Describe how PATH funds are allocated to areas and providers with the greatest number of individuals who are homeless with serious mental illnesses or co-occurring substance use disorders (i.e., through annual competitions, distribution by formula, or other means).
- **Location of Individuals with Serious Mental Illnesses who are Experiencing Homelessness** – Indicate the number of homeless individuals with serious mental illnesses 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.
- **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.
- **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 are homeless and have serious mental illnesses.
- **Data** – Describe the state’s and providers’ status on HMIS migration and a plan, with accompanying timeline for migrating data in the next 1 to 3 years. If you are fully utilizing HMIS for PATH services, please describe plans for continued training and how you will support new local-area providers.
- **Training** – Indicate how the state provides, pays for, or otherwise supports evidenced-based practices and other trainings for local PATH-funded staff.

### **Section C: Local-Area Provider Intended Use Plans**

**NOTE:** The state must submit an Intended Use Plan for each PATH-funded organization. If the state has not selected the organizations to receive PATH funding before the PATH application is due for submission to SAMHSA’s Center for Mental Health Services, provide as much information as possible about the intended use of PATH funds. For example, if the same organizations funded in the prior year will be funded in the current year, but the RFP process has not been completed, you may

submit information about the organizations from the prior year. Once the selection process has been completed, submit a revised Intended Use Plan to SAMHSA. Indicate any changes in providers compared to FY 2012 and the state rationale for the change(s).

The state must include the following information for each agency that provides services with PATH funds in the Intended Use Plan:

- **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 Program** – Describe the organization’s participation in the HUD Continuum of Care program and any other local planning, coordinating or assessment activities.
- **Collaboration with Local Community Organizations** – Provide a brief description of partnerships with local community organizations that provide key services (i.e., primary health, mental health, substance abuse, housing, employment, etc.) to PATH eligible clients and describe coordination of activities and policies with those organizations.
- **Service Provision** – Describe the organization’s plan to provide coordinated and comprehensive services to eligible PATH clients, including:
  - Describe how the services to be provided using PATH funds will align with PATH goals to target street outreach and case management as priority services and maximize serving the most vulnerable adults who are literally and chronically homeless.
  - Describe any gaps that exist in the current service systems.
  - Provide a brief description of the current services available to clients who have both a serious mental illness and a substance use disorder.
  - Describe how the local provider agency pays for providers or otherwise supports evidenced-based practices, trainings for local PATH-funded staff, and trainings and activities to support migration of PATH data into HMIS.
- **Data** – Describe the provider’s status on HMIS migration and a plan, with accompanying timeline, to migrate data in the next 1 to 3 years. If you are fully utilizing HMIS for PATH services, please describe plans for continued training and how you will support new staff.

- **SSI/SSDI Outreach, Access, Recovery (SOAR)** – Describe the provider’s plan to train PATH staff on SOAR. Indicate the number of PATH staff trained in SOAR during the grant year ended in 2012 (2011- 2012), the number of PATH funded consumers assisted through SOAR, and the approximate number of staff to be trained in SOAR for grant year 2013 (2013-2014).
- **Access to Housing** – Indicate what strategies are 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 the demographics of staff serving the clients; 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; and the extent to which staff receive periodic training in cultural competence and health disparities. A strategy for addressing health disparities is use of the recently revised national Culturally and Linguistically Appropriate Services (CLAS) standards: (<http://www.ThinkCulturalHealth.hhs.gov>).
- **Client Information** – Describe the demographics of the client population, the projected number of adult clients to be contacted, enrolled, and the percentage of adult clients served using PATH funds to be literally homeless.
- **Consumer Involvement** – Describe how individuals who are homeless and have serious mental illnesses, and family members will be 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. See [Appendix J](#) “Guidelines for Consumer and Family Participation”.
- **Budget Narrative** – Provide a budget narrative that includes the local-area provider’s use of PATH funds. See [Appendix C](#) for a sample detailed budget.

## 2. REVIEW AND SELECTION PROCESS

Decisions to award state allotments will be based on a determination that all of the documents and attachments described under “Required Application Components” have been included and meet program requirements.