

## I. State Information

### State Information

#### Plan Year

Federal Fiscal Year 2025

#### State Identification Numbers

Unique Entity ID LJGVPF5ULHJ3

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 Jennifer

Last Name Gonzales

Agency Name Arizona Healthcare Cost Containment System

Mailing Address 801 E Jefferson Street

City Phoenix

Zip Code 85039

Telephone (602) 417-4933

Fax

Email Address jennifer.gonzales@azahcccs.gov

#### III. Expenditure Period

From 7/1/2025

To 6/30/2026

#### IV. Date Submitted

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

Submission Date 3/21/2025 11:16:37 AM

Revision Date 3/21/2025 11:16:56 AM

#### V. Contact Person Responsible for Application Submission

First Name Ali

Last Name De La Trinidad

Telephone (602) 417-4706

Fax

Email Address ali.delatrinidad@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.

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Name

Alisa Randall



Title

Assistant Deputy Director and Mental Health Commissioner

Organization

Arizona Health Care Cost Containment System

Signature:

Date:

FY 2025 PATH FOA Catalog No.: 93.150 FOA No.: SM-24-F2

**Footnotes:**

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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).
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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.

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Name

Alisa Randall

Title

Assistant Deputy Director and Mental Health Commissioner

Organization

Arizona Health Care Cost Containment System

Signature:



Date: 03/17/2025

FY 2025 PATH FOA Catalog No.: 93.150 FOA No.: SM-24-F2

**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 182by:

- 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

Alisa Randall

Title

Assistant Deputy Director and Mental Health Commissioner

Organization

Arizona Health Care Cost Containment System

---

Signature:

Date:

FY 2025 PATH FOA Catalog No.: 93.150 FOA No.: SM-24-F2

**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 182by:

- 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

Alisa Randall

Title

Assistant Deputy Director and Mental Health Commissioner

Organization

Arizona Health Care Cost Containment System

Signature:



Date: 03/17/2025

FY 2025 PATH FOA Catalog No.: 93.150 FOA No.: SM-24-F2

**Footnotes:**



# I. State Information

## Funding Agreement

### FISCAL YEAR 2025

#### 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, 2026, 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 2025 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	Alisa Randall
Title	Assistant Deputy Director and Mental Health Commissioner
Organization	AHCCCS

Signature:

Date:

FY 2025 PATH FOA Catalog No.: 93.150 FOA No.: SM-24-F2

**Footnotes:**



KATIE HOBBS  
GOVERNOR

STATE OF ARIZONA  
OFFICE OF THE GOVERNOR

EXECUTIVE OFFICE

March 19, 2024

Grants Management Specialist  
Division of Grants Management  
Substance Abuse and Mental Health Services Administration  
5600 Fisher Lane  
Rockville, MD 20857

Dear Grants Management Specialist:

Arizona Health Care Cost Containment System (AHCCCS) is Arizona's Medicaid agency that offers health care programs to serve Arizona residents. As the Governor of the State of Arizona, for the duration of my tenure, I delegate all Single State Agency (SSA) for substance abuse authority to the current Assistant Director, Alisa Randall, for administrative transactions required of the Substance Abuse and Mental Health Services Administration's (SAMHSA) Substance Abuse Block Grant (SABG). I delegate all State Mental Health Authority (SMHA) to Alisa Randall for administrative transactions required of the Substance Abuse and Mental Health Services Administration's (SAMHSA) Mental Health Block Grant (MHBG) and Projects to Assistance in Transition to Homelessness (PATH) grant.

If you have any questions, please contact Andrea Lustfiel, Deputy Assistant Director, Division of Grants Administration at [Andrea.Lustfield@azahcccs.gov](mailto:Andrea.Lustfield@azahcccs.gov) or (602) 417- 7792.

Sincerely,

Katie Hobbs  
Governor  
State of Arizona

# I. State Information

## Funding Agreement

### FISCAL YEAR 2025

#### PROJECTS FOR ASSISTANCE IN TRANSITION FROM HOMELESSNESS (PATH) AGREEMENT

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- 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.
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- 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;
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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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**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, 2026, 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 2025 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.

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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

Alisa Randall

Title

Assistant Deputy Director and Mental Health Commissioner

Organization

AHCCCS

Signature:



Date: 03/17/2025

FY 2025 PATH FOA Catalog No.: 93.150 FOA No.: SM-24-F2

**Footnotes:**



STATE OF ARIZONA  
OFFICE OF THE GOVERNOR

EXECUTIVE OFFICE

KATIE HOBBS  
GOVERNOR

March 19, 2024

Grants Management Specialist  
Division of Grants Management  
Substance Abuse and Mental Health Services Administration  
5600 Fisher Lane  
Rockville, MD 20857

Dear Grants Management Specialist:

Arizona Health Care Cost Containment System (AHCCCS) is Arizona's Medicaid agency that offers health care programs to serve Arizona residents. As the Governor of the State of Arizona, for the duration of my tenure, I delegate all Single State Agency (SSA) for substance abuse authority to the current Assistant Director, Alisa Randall, for administrative transactions required of the Substance Abuse and Mental Health Services Administration's (SAMHSA) Substance Abuse Block Grant (SABG). I delegate all State Mental Health Authority (SMHA) to Alisa Randall for administrative transactions required of the Substance Abuse and Mental Health Services Administration's (SAMHSA) Mental Health Block Grant (MHBG) and Projects to Assistance in Transition to Homelessness (PATH) grant.

If you have any questions, please contact Andrea Lustfiel, Deputy Assistant Director, Division of Grants Administration at [Andrea.Lustfield@azahcccs.gov](mailto:Andrea.Lustfield@azahcccs.gov) or (602) 417- 7792.

Sincerely,

Katie Hobbs  
Governor  
State of Arizona

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: Alisa Randall  
Title: Assistant Deputy Director and Mental Health Commissioner  
Organization: Arizona Health Care Cost Containment System

Signature: \_\_\_\_\_

Date Signed: \_\_\_\_\_

mm/dd/yyyy

FY 2025 PATH FOA Catalog No.: 93.150 FOA No.: SM-24-F2

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: Alisa Randall  
Title: Assistant Deputy Director  
Organization: Arizona Health Care Cost Containment System

Signature:  Date Signed: 03/18/2025  
mm/dd/yyyy

FY 2025 PATH FOA Catalog No.: 93.150 FOA No.: SM-24-F2

Footnotes:

I. State Information

State PATH Regions

Name	Description	Actions
Cochise County	Cochise County (vendor TBD).	
Coconino County, Mohave County and Yavapai County	Coconino, Mohave and Yavapai County (vendor TBD)	
Maricopa County	Maricopa County (vendor TBD).	
Pima County	Pima County (vendor TBD).	

FY 2025 PATH FOA Catalog No.: 93.150 FOA No.: SM-24-F2

Footnotes:

Arizona is in the process of soliciting new contracts for PATH Services through a competitive Request for Proposal. The awards will be made after the Arizona PATH Application is submitted. Arizona will provided updated information via a revision request.

## 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 2025 PATH FOA Catalog No.: 93.150 FOA No.: SM-24-F2

**Footnotes:**

**Arizona Health Care Cost Containment System  
Project for Assistance to Transition from Homelessness  
FY 2025-2026 Arizona**

The Arizona Health Care Cost Containment System (AHCCCS) serves as both the SSA and state Medicaid system for Arizona. AHCCCS provides comprehensive integrated health care services for individuals with co-occurring mental and substance use disorders through Managed Care Organizations (MCOs). The majority of AHCCCS members receive integrated health services through their chosen acute care program, one of six AHCCCS Complete Care (ACC) plans throughout the state. Services include, but are not limited to, primary health care, mental health individual and group counseling, case management, psychiatric and psychologist services, peer support services, family support services, individual and group skills training, vocational rehabilitation, substance use disorder treatment, medication for opioid use disorder (MOUD), and medication for the treatment of alcohol use disorder. The ACC Contractors with a Regional Behavioral Health Agreement (ACC-RBHAs) specifically serve individuals with a Serious Mental Illness (SMI) designation, Serious Emotional Disturbance (SED) and Early Serious Mental Illness (ESMI) including First Episode Psychosis (FEP) while also providing crisis, other grant-funded, and state-only funded services. Additionally, the Arizona Long Term Care System (ALTCS) program provides health insurance for individuals who are age 65 or older or who have a disability. American Indians and Alaska Natives (AI/AN) enrolled in AHCCCS or CHIP (KidsCare) may choose to receive their coverage through the American Indian Health Program (AIHP), Tribal ALTCS, or Tribal RBHAs (TRBHAs enter into Intergovernmental Agreements with AHCCCS for behavioral health care management) or one of the AHCCCS-contracted managed health plans.

The Arizona Health Care Cost Containment System (AHCCCS) is awarded the Project for Assistance to Transition from Homelessness (PATH) funding from SAMHSA. Arizona is currently soliciting bids through a Request for Proposal (RFP) PATH; contractors will be selected by June 30, 2025. The contract shall be for three (3) initial years with two (1) one-year options to extend, not to exceed a total contracting period of five (5) years.

Currently, the PATH contractors utilize best or promising practices to target individuals experiencing or at imminent risk for homelessness through street outreach, in-reach activities, and case management to serve our most vulnerable adults. Once an 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, Medicaid, an SMI determination, medical resources as assessed to best meet the holistic needs of the individual. Referrals and services for behavioral health and/or substance use recovery services are additionally coordinated by PATH providers. Services are documented within the individual's case plan and the case plan will be updated as needed or at least every three (3) months. The PATH providers offer a variety of efforts to establish a therapeutic alliance with individuals experiencing or at imminent risk for homelessness including emergency homeless shelters, a shower program, hotel vouchers, basic need / health and hygiene items, transportation, eviction prevention, advocacy, completion of the VI SPDAT and evaluation of each person's Social Determinants of Health. PATH providers consistently provide information and assist to connect members to community resources including heating/cooling stations, medical services, behavioral health/substance use services, harm reduction resources, thrift store partnerships for

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clothing items, domestic violence advocacy resources, veterans' services programs, and food pantries. Arizona's PATH providers are actively engaged in their communities and collaborate with local community resources to assist each person to successfully transition out of homelessness.

For Fiscal Year (FY) 2025, Arizona was allotted \$1,385,438 and State match will be \$461,813.

<b>Name of Organization</b>	<b>Organizational Type</b>	<b>Federal Funds</b>	<b>State Funds</b>	<b>County Served</b>	<b>Number of persons to be contacted</b>	<b>Number of persons to be enrolled</b>
AHCCCS	State Agency	\$55,417				
TBD	TBD	\$1,330,021	\$461,813	TBD	Projected 6,070*	Projected 1,215*
<b>TOTAL</b>		<b>\$1,385,438</b>	<b>\$461,813</b>		6,070	1,215

\*These numbers contacted and enrolled represent projections from current contractors, Arizona is in the process of soliciting new contracts for PATH Services through a competitive Request for Proposal (RFP). The awards will be made after the PATH application is submitted. Arizona will provide updated information via a revision request.



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**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.

La Frontera Center is a non-profit organization and behavioral health provider in Tucson. LFC offers a large variety of services with locations in Arizona and New Mexico. LFC has operated the PATH project RAPP (Readily Accessible People Program) for over 30 years. RAPP serves the City of Tucson and all other areas of Pima County where individuals who may be experiencing homelessness reside 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 2024-2025.

**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.

RAPP plays an integral part in the Tucson-Pima Collaboration to End Homelessness (TPCH) Continuum of Care. The RAPP drop-in center is a site for Coordinated Entry where RAPP staff complete more Coordinated Entry assessments than any other program in the CoC. Staff also complete these assessments during regular outreach, collaborative outreach with other agencies, and in response to community requests and concerns. Staff schedule appointments on a community-wide shared calendar for those preferring to complete an assessment over the phone. In accordance with the TPCH governance charter, the CoC has a board and multiple committees to oversee various aspects of the collaborative effort to end homelessness in Pima County. One staff member currently serves as the chairperson of the Coordinated Entry Committee and is a voting member of the HMIS Committee. Through the CE Committee this staff member has worked with a small, diverse group of community members to create a new Coordinated Entry assessment tool to replace the currently used SPDAT. This tool is being tested in the field in conjunction with the SPDAT to provide data for University of Arizona-SIROW to analyze prior to implementation in the system. RAPP staff frequently serves as a representative of TPCH in meetings regarding the development of DWEL, the statewide homelessness data warehouse. Staff participate in other meetings including the Coordinated Outreach and Housing Navigator Coalition, Case Conferencing, and Built for Zero.

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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.

LFC provides integrated mental and physical healthcare, allowing RAPP to streamline coordination for PATH clients who are enrolled in services with LFC. RAPP transports clients presenting to the drop-in to Magnotto House Safe Haven, which houses a day program with services including showers, laundry, a television lounge, a nap area, outdoor and indoor areas for socializing, and breakfast and lunch. La Frontera also provides training for RAPP, accounting and other administrative services, purchasing, maintenance, and payroll processing services for the PATH program. Annually, RAPP has a formal arrangement with the Community Food Bank of Southern Arizona and Caridad Community Kitchen to hand out 50 sack lunches per day, Monday-Friday, during the Summer Sun Relief Program months of June-September for clients at the drop-in. RAPP is located in the first floor of the Center of Hope which is a 100-unit low-income apartment building owned by LFC, and RAPP regularly places PATH clients in these units. Next to the Center of Hope is the Gospel Rescue Mission Center of Opportunity which is a 300-bed shelter for individuals and families. RAPP has informal partnerships with all community partners that provide services to people 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, Sister Jose Women's Shelter, and Cloud Covered Streets.

Describe the coordination of activities and policies with those organizations.

RAPP staff work to have a "seat at the table" within TPCH by making commitments to opportunities for program and community growth, attending meetings, and volunteering for work groups. While doing this work, relationships are formed with staff from an array of other actively-participating agencies which allows for easy coordination by more the more informal methods of text and email along with phone calls. As a member of the CE Committee and HMIS Committee, RAPP's Clinical Supervisor is involved in the review and development of policies and procedures throughout the year.

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

RAPP made an announcement at the most recent General Council meeting that we would like to organize new collaborative outreach outings in order to complete the new Coordinated Entry assessment tool tests in a timely manner. We made plans with three outreach teams to have their staff complete the SPDAT with each person and if the person is willing, RAPP staff will complete the test tool and give the person a TPCCH-provided \$10 McDonald's gift card in compensation for the extra time. Three RAPP staff are trained to complete the assessment tool being tested, out of ten total in the CoC.

**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;

RAPP will particularly seek out people living outside in areas with less easily-accessible services for those experiencing homelessness. RAPP will help clients identify the most convenient modes of transportation, especially if their camp is far off the bus lines. Staff will revisit clients to continue engagement in PATH, and will provide transportation when safe and appropriate to the situation. PATH clients will be encouraged to utilize the RAPP drop-in center which offers computers, phone, electronics charging, water, snacks, resource information, and easy access to RAPP staff. RAPP will assist clients in enrolling in mental and physical health treatment, and substance abuse treatment. RAPP will guide clients in navigating the system and tailor assistance to the needs of each individual. Clients will be encouraged to identify their own goals and staff will help to create SMART goals from these.

Any gaps that exist in the current service systems;

The largest service gap is the lack of affordable permanent housing. There is also not enough emergency shelter and transitional housing available to clients as they work towards living independently. Shelters frequently have many barriers for the most vulnerable people experiencing homelessness.

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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.

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

Veteran status will be identified by self-report after contact and all veteran-dedicated services and resources will be explored including completing the Coordinated Entry assessment which prioritizes veterans. RAPP 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. Rally Point is adept at retrieving documentation of veteran status.

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 serves on the HMIS Committee and as the HMIS Agency Administrator for La Frontera. All staff will attend yearly training with the HMIS Lead 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

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contact information, SMI status, goals, progress notes, and assessments such as Coordinated Entry.

**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.

Four PATH staff are certified in SOAR. One staff is working to find assistive devices as disabling conditions are interfering with their ability to complete the training. 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.

RAPP will assist PATH enrollees all housing options that may be available to them which, aside from mainstream rental housing, include shelter beds, Magnotto 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. Some PATH clients who are already receiving income may not be interested in “traditional” housing and may request 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 substances 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 and housing. PATH Team staff will utilize La Frontera’s Magnotto 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.

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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.

RAPP will make information available to those who have been incarcerated regarding PATH eligibility and the 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 has on individuals. Staff 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. 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.

**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.

LFC prioritizes cultural competency and RAPP staff strive every day to understand each individual's perspective and the challenges of living on the streets and 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. RAPP provides 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. RAPP staff also have lived experience of homelessness, mental health struggles, and substance abuse, and as members of marginalized groups which gives them some added insight into the struggles clients may be experiencing.



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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)

RAPP will locate individuals and assess them for observed and/or reported signs and symptoms of mental illness which includes many possibilities such as lack of motivation, avoidance of people or situations, low mood, irritability, elevated mood not appropriate to the situation, inability to concentrate, exaggerated startle response. Engagement occurs when the individual's information in the HMIS street outreach project fields has been gathered and the "Date of Engagement" has been filled out at the bottom of this project entry. Enrollment occurs when the client agrees to receive PATH services and the "Date of PATH Enrollment" has been filled out, which is located directly under the Date of Engagement in the HMIS project entry. and work with them to identify and break down barriers that resulted in homelessness. 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 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.

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These demographics are based on 442 PATH enrolled clients from 07/01/2022-06/30/2023:

244 Male; 190 Female; 2 No Single Gender; 1 Questioning; 5 Transgender

Age: 18-23=14, 24-30=31, 31-40=114, 41-50=118, 51-61=121, and 62 and over=44

Race: American Indian or Alaskan Native-46, Asian-6, Black or African American-67, Native Hawaiian or Other Pacific Islander-9, White-340

Ethnicity-Hispanic-146, Non-Hispanic-296

Veteran Status-Non-Veteran-414, Veteran-25

### 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	0

**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.

### 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)
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90	30	10	10
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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.

The current PATH Team includes three members who have experienced homelessness in the past and five members with lived experience of mental illness, one of whom is in the SMI system and was receiving SSI benefits prior to joining the PATH Team. One staff member was a PATH enrollee previously. The CoC currently operates a Lived Experience Board that reviews policies and decisions and provides insight to the TPCB Board and committees. 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.

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**PATH Budget Narrative & Justification**  
**County Coverage: Pima County**  
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**A. Personnel:**

<b>Position Title (1)</b>	<b>Staff Name (2)</b>	<b>Annual Salary/Rate (3)</b>	<b>Level of Effort (LOE) (4)</b>	<b>Federal PATH Request (5)</b>	<b>Non- Federal State Match (6)</b>	<b>Total Federal/State Cost (7)</b>
PATH Administrator/Clinical Supervisor	Valerie Grothe	\$57,500	100%	\$42,682	\$14,818	\$57,500
PATH Team Coordinator	Christopher Jordan	\$39,520	100%	\$29,336	\$10,184	\$39,520
PATH Team Recovery Coach	Nadia Keiser	\$31,200	100%	\$23,160	\$8,040	\$31,200
PATH Team Recovery Aide	Alyse Encinas	\$29,432	100%	\$21,847	\$7,585	\$29,432
PATH Team Recovery Aide	Stephanie Mazza	\$29,432	100%	\$21,847	\$7,585	\$29,432
PATH Team Recovery Aide	Guadalupe Hernandez	\$29,432	100%	\$21,847	\$7,585	\$29,432
<b>Total Request</b>				<b>\$160,719</b>	<b>\$55,797</b>	<b>\$216,516</b>

**Personnel Narrative:** This is the cost of staff salaries to operate the PATH grant. A significant increase in the number of people presenting to the drop-in after being referred by other community agencies has impeded the PATH team's ability to engage PATH-eligible clients through outreach. The Recovery Aide position allows the team to increase outreach efforts, but also to triage the needs of those coming into the drop-in more efficiently, resulting in shorter wait times and a higher quality of service for both those being referred to mainstream resources and PATH- enrollees.

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**B. Fringe Benefits:**

Position Title (1)	Staff Name (2)	Total Personnel Cost from above (3)	Total Fringe Rate (4)	Federal Request (5)	Non- Federal State Match (6)	Total Federal/State Cost (7)
PATH Administrator / Clinical Supervisor	Valerie Grothe	\$57,500	26.425%	\$11,279	\$3,916	\$15,195
PATH Team Coordinator	Christopher Jordan	\$39,520	26.425%	\$7,752	\$2,691	\$10,443
PATH Team Recovery Coach	Nadia Keiser	\$31,200	26.425%	\$6,120	\$2,125	\$8,245
PATH Team Recovery Aide	Alyse Encinas	\$29,432	26.425%	\$5,773	\$2,004	\$7,777
PATH Team Recovery Aide	Stephanie Mazza	\$29,432	26.425%	\$5,773	\$2,004	\$7,777
PATH Team Recovery Aide	Guadalupe Hernandez	\$29,432	26.425%	\$5,773	\$2,004	\$7,777
<b>Total Request</b>				<b>\$42,470</b>	<b>\$14,744</b>	<b>\$57,214</b>

**Fringe Benefits Narrative:** This is the cost of PATH Team employee-related expenses.

Fringe Category	Rate
Retirement	6%
FICA	7.65%
Insurance	12.775%
Social Security	
Total Fringe Rate	26.425%

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**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)	Federal PATH Request (5)	Non-Federal State Match (6)	Total Federal/State Cost (7)
Outreach & Other PATH Activities	Pima County	Fuel for PATH Vehicles	2 vehicles @ \$83.33 per month x 12 months	\$1,485	\$515	\$2,000
<b>Total Request</b>				<b>\$1,485</b>	<b>\$515</b>	<b>\$2,000</b>

**Travel Narrative:** This is the cost of gasoline for the PATH program vehicles to perform PATH activities including outreach, picking up blankets and other items provided by TPCH (Tucson-Pima Collaboration to End Homelessness), transportation to staff trainings, and transporting PATH-enrolled individuals to appointments when necessary.

**D. Equipment**

Item (1)	Calculation (2)	Federal PATH Request (3)	Non-Federal State Match (4)	Total Federal/State Cost (5)
<b>Total Request</b>		<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

**Equipment Narrative:**

**E. Supplies**

Item (1)	Calculation (2)	Federal PATH (3)	Non-Federal (4)	Total (5)
Hygiene Kits	1 case = 30 kits @\$84 plus \$25.69 shipping & tax  This gives us approximately 64 cases of kits for clients	\$5,211	\$1,809	\$7,020

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Bus Passes/Various client supplies	Trip and monthly bus passes, supplies i.e. scarves, beanies, socks, underwear, water, granola bars, backpacks, sunglasses, reading glasses	\$11,244	\$3,903	\$15,147
<b>Total Request</b>		<b>\$16,455</b>	<b>\$5,712</b>	<b>\$22,167</b>

**Supplies Narrative:** Hygiene kits and other supplies for clients provide for minor but immediate needs.

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**F. Housing:**

*If requesting rent, please fill out & submit rent worksheet.*

Housing Assistance (1)	Calculation (2)	Federal PATH Request (3)	Non- Federal State Match (4)	Total Federal/State Cost (5)
<b>Total Request</b>		<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

***Housing Narrative:***

**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, the number of clients should be included in the costs. Also, please break down PATH enrollee expenses here.

Item (1)	Calculation (2)	Federal PATH Request (3)	Non-Federal State Match (4)	Total Federal/State Cost (5)
Drop-In Center Rent Expenses	\$1,250 per month x 12 months, 50% charged to the drop-in center	\$5,567	\$1,933	\$7,500
Drop-In Center Utilities	\$166.67 per month x 12 months, 50% charged to the drop-in center	\$742	\$258	\$1,000
Training and Conference Fees	5 staff @ \$100 each	\$371	\$129	\$500
Emergency program Supplies (Birth Certificates and others)	For emergency needs (receipts will be submitted)	\$148	\$52	\$200
Vehicle License	2 Vehicles x \$250 per year	\$371	\$129	\$500
Vehicle Maintenance	\$1,000 x 2 Vehicles	\$1,485	\$515	\$2,000

**La Frontera**  
**PATH Budget Narrative & Justification**  
**County Coverage: Pima County**  
**Contract Period: July 1, 2024 through June 30, 2025**

Vehicle Insurance	\$383 per month x 12 months -> rounded up to allow for possible increase of insurance policy	\$3,712	\$1,288	\$5,000
Drop-in center phones	\$91.67 per month x 12 months	\$817	\$283	\$1,100
Software	Total Software cost x 1.10%	\$9,093	\$3,157	\$12,250
Staff Cell Phones	6 staff x \$55.28 per month x 12 months	\$2,954	\$1,026	\$3,980
<b>Total Request</b>		<b>\$25,260</b>	<b>\$8,770</b>	<b>\$34,030</b>

**La Frontera**  
**PATH Budget Narrative & Justification**  
**County Coverage: Pima County**  
**Contract Period: July 1, 2024 through June 30, 2025**

**Other Narrative:** These items include rent and utilities that will be billed for the drop-in center portion of the program space. Staff office rent and utilities costs and Central Alarm to provide security services to the PATH drop-in and offices are factored into the indirect rate. The vehicle license, maintenance, and insurance costs ensure that two PATH vehicles are available for PATH-related activities including outreach, picking up blankets and other items provided by TPC (Tucson-Pima Collaboration to End Homelessness), transportation to staff trainings, and transporting PATH-enrolled individuals to appointments when necessary. Computer software and phones are used to conduct PATH activities such as maintaining PATH program data records, assisting PATH enrolled clients with housing assessments and finding up-to-date resource information both at the office and in the field. Funds for training and conferences will be used to equip staff with knowledge and skills that enrich the services being provided to PATH-enrolled clients and improve the quality of the HMIS data that represents those services. Emergency supplies are used for emergency needs- for example, urgently required birth certificates or IDs when other resources cannot be utilized in a timely manner.

**H. Total Direct Charges**

Total Direct Charges (1)	Federal PATH Request (2)	Non-Federal State Match (3)	Total Federal/State Cost (4)
(sum of A-I)	\$246,389	\$85,538	\$331,927

**I. Indirect Cost Rate (See Footnote below):**

Calculation (1)	Federal PATH Request (2)	Non-Federal State Match (3)	Total Federal/State Cost (4)
16.6% Indirect x \$331,926	\$40,889	\$14,211	\$55,100
<b>Total Request</b>	<b>\$40,889</b>	<b>\$14,211</b>	<b>\$55,100</b>

**Indirect Narrative:** The current IDC will expire 6/30/23, and La Frontera will provide an updated copy to AHCCCS upon availability.

**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.**



**La Frontera**  
**PATH Budget Narrative & Justification**  
**County Coverage: Pima County**  
**Contract Period: July 1, 2024 through June 30, 2025**

**J. Total Project Costs:**

<b>TOTAL REQUEST – TOTAL PROJECT COSTS (1)</b>	<b>Federal Request (2)</b>	<b>Non-Federal Match (3)</b>	<b>Total Cost (4)</b>
<b>(Sum of Total Direct Costs and Indirect (Or Admin) Costs)</b>	<b>\$287,278</b>	<b>\$99,749</b>	<b>\$387,027</b>

**Community Bridges  
Budget Narrative & Justification  
County Coverage: Maricopa County  
Contract Period: July 1, 2024 through June 30, 2025**

**A. Personnel:**

<b>Position Title (1)</b>	<b>Staff Name (2)</b>	<b>Annual Salary/Rate (3)</b>	<b>Level of Effort (LOE) (4)</b>	<b>Federal PATH Request (5)</b>	<b>Non-Federal State Match (6)</b>	<b>Total Federal/State Cost (7)</b>
Associate Director	Ollie Nyman	\$68,600	0.15	\$7,638	\$2,652	\$10,290
BHP	Hollie Hudson	\$51,975	1.00	\$38,581	\$13,394	\$51,975
Data Coordinator	Amber Morris	\$47,819	0.50	\$17,748	\$6,161	\$23,909
Lead Navigator	Vacant	\$37,492	1.00	\$27,830	\$9,662	\$37,492
Lead Navigator	Ashley Lehmer	\$39,891	1.00	\$29,611	\$10,280	\$39,891
Lead Navigator	Christina Arispe	\$43,105	1.00	\$31,997	\$11,108	\$43,105
Navigator I	Isabel Delgato	\$34,278	1.00	\$25,445	\$8,833	\$34,278
Navigator II	Andrew Losey	\$34,578	1.00	\$25,667	\$8,911	\$34,578
Navigator II	Brittany Curdie	\$39,934	1.00	\$29,643	\$10,291	\$39,934
Navigator II	James Arnold	\$37,877	1.00	\$28,116	\$9,761	\$37,877
Navigator II	Lisa Cooper	\$37,877	1.00	\$28,116	\$9,761	\$37,877
Navigator II	Vanessa Stiller	\$42,312	1.00	\$31,408	\$10,904	\$42,312

**Community Bridges  
Budget Narrative & Justification  
County Coverage: Maricopa County  
Contract Period: July 1, 2024 through June 30, 2025**

Position Title (1)	Staff Name (2)	Annual Salary/Rate (3)	Level of Effort (LOE) (4)	Federal PATH Request (5)	Non-Federal State Match (6)	Total Federal/State Cost (7)
PATH Manager	Darin Jahries	\$59,087	1.00	\$43,860	15,227	\$59,087
Sr Program Manager	Tyler Babilonia	\$62,387	0.50	\$23,155	\$8,039	\$31,194
Program Supervisor	Vacant	\$43,680	1.00	\$32,424	\$11,256	\$43,680
<b>Total Request</b>				<b>\$421,239</b>	<b>\$146,240</b>	<b>\$567,479</b>

**Personnel Narrative: This is the cost of staff salaries to operate the PATH grant.**

1. *The Lead Navigators and the Navigator I and II positions* provide the outreach and follow up services for the PATH program.
2. *The PATH Program Manager* (Team Lead) supervises the Navigator staff and daily operations.
3. *The PATH Senior Manager* manages day-to-day contract performance and builds relationships in the community to support the PATH Program.
4. *The PATH Program Supervisor's* role is to oversee the staff and operations for the programs assigned. The Supervisor will be responsible for the day-to-day operations of the program, providing guidance and direction for all staff including but not limited to training staff, scheduling staff, ensuring staff have the necessary skills and knowledge to perform their job, and ensuring staff adhere to agency policy and procedure.
5. *The Associate Director* is responsible for the contract compliance, direct funder interactions and day-to-day support and supervision of the team leadership (Manager, Sr. Manager, Supervisor).
6. *The Behavioral Health Professionals (BHPs)* conduct the SMI evaluations and complete the biopsychosocial assessments to refer clients to mental health services. The BHP also staff's cases with Navigators.
7. *The Data Coordinator* assists with compiling data for reporting, and reviews HMIS data for data quality and corrections when needed.

**Community Bridges  
Budget Narrative & Justification  
County Coverage: Maricopa County  
Contract Period: July 1, 2024 through June 30, 2025**

**B. Fringe Benefits:**

<b>Position Title (1)</b>	<b>Staff Name (2)</b>	<b>Total Personnel Cost from above (3)</b>	<b>Total Fringe Rate (4)</b>	<b>Federal Request (5)</b>	<b>Non-Federal State Match (6)</b>	<b>Total Federal/State Cost (7)</b>
Associate Director	Ollie Nyman	\$10,290	23%	\$1,757	\$610	\$2,367
BHP	Hollie Hudson	\$51,975	23%	\$8,873	\$3,081	\$11,954
Data Coordinator	Amber Morris	\$23,909	23%	\$4,082	\$1,417	\$5,499
Lead Navigator	Vacant	\$37,492	23%	\$6,401	\$2,222	\$8,623
Lead Navigator	Ashley Lehmer	\$39,891	23%	\$6,810	\$2,365	\$9,175
Lead Navigator	Christina Arispe	\$43,105	23%	\$7,359	\$2,555	\$9,914
Navigator I	Isabel Delgato	\$34,278	23%	\$5,852	\$2,032	\$7,884
Navigator II	Andrew Losey	\$34,578	23%	\$5,903	\$2,050	\$7,953
Navigator II	Brittany Curdie	\$39,934	23%	\$6,818	\$2,367	\$9,185
Navigator II	James Arnold	\$37,878	23%	\$6,467	\$2,245	\$8,712
Navigator II	Lisa Cooper	\$37,878	23%	\$6,467	\$2,245	\$8,712
Navigator II	Vanessa Stiller	\$42,312	23%	\$7,224	\$2,508	\$9,732

**Community Bridges  
Budget Narrative & Justification  
County Coverage: Maricopa County  
Contract Period: July 1, 2024 through June 30, 2025**

Position Title (1)	Staff Name (2)	Total Personnel Cost from above (3)	Total Fringe Rate (4)	Federal Request (5)	Non-Federal State Match (6)	Total Federal/State Cost (7)
PATH Manager	Darin Jahries	\$59,087	23%	\$10,087	\$3,503	\$13,590
Sr Program Manager	Tyler Babilonia	\$31,197	23%	\$5,326	\$1,849	\$7,175
Program Supervisor	Vacant	\$43,680	23%	\$7,457	\$2,589	\$10,046
<b>Total Request</b>				<b>\$96,883</b>	<b>\$33,638</b>	<b>\$130,521</b>

**Fringe Benefits Narrative:** The fringe benefits include the required state and federal tax guidelines. CBI also offers 401K and comprehensive medical and dental plans 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. Across all ERE expenditures, ERE expenditures have been 23 % on average. This is used for the 24/25 budget year.

Fringe Category	Rate
Retirement	4%
FICA	6.2%
Insurance	10.47%
Social Security	1.45%
Workers Comp	0.77%
SUTA	.11%
Total Fringe Rate	23%

**C. Travel:**

**Community Bridges  
Budget Narrative & Justification  
County Coverage: Maricopa County  
Contract Period: July 1, 2024 through June 30, 2025**

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)	Federal PATH Request (5)	Non-Federal State Match (6)	Total Federal/State Cost (7)
Vehicle fuel	Local destinations in Maricopa County	Fuel for outreach vehicles	\$900 per month for 12 months	\$8,017	\$2,783	\$10,800
<b>Total Request</b>				<b>\$8,017</b>	<b>\$2,783</b>	<b>\$10,800</b>

**Travel Narrative:** The vehicle fuel is for the navigator staff to do outreach throughout Maricopa County using the vehicles assigned to the PATH program. Navigators can provide transport to members, access services and connect to resources.

**D. Equipment**

Item (1)	Calculation (2)	Federal PATH Request (3)	Non-Federal State Match (4)	Total Federal/State Cost (5)
<b>Total Request</b>		<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

**Equipment Narrative:** N/A

**E. Supplies**

**Community Bridges  
Budget Narrative & Justification  
County Coverage: Maricopa County  
Contract Period: July 1, 2024 through June 30, 2025**

Item (1)	Calculation (2)	Federal PATH Request (3)	Non-Federal State Match (4)	Total Federal/State Cost (5)
2 Replacement Laptops for staff	\$1,300 x 2	\$1,930	\$670	\$2,600
<b>Total Request</b>		<b>\$1,930</b>	<b>\$670</b>	<b>\$2,600</b>

***Supplies Narrative:***

*FTE Supplies:* Includes two replacement laptops for staff. Laptops face a three-year life span and often need to be replaced.

**F. Contractual:**

Name of Organization or Consultant (1)	Type of Agreement (2)	Federal PATH Request (3)	Non-Federal State Match (4)	Total Federal/State Cost (5)
<b>Total Request</b>		<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

***Contractual Narrative:***

**G. Housing:**

*If requesting rent, please fill out & submit rent worksheet.*

Housing Assistance (1)	Calculation (2)	Federal PATH Request (3)	Non- Federal State Match (4)	Total Federal/State Cost (5)
<b>Total Request</b>		<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

***Housing Narrative: N/A***

**H. Other Operating:**

**Community Bridges  
Budget Narrative & Justification  
County Coverage: Maricopa County  
Contract Period: July 1, 2024 through June 30, 2025**

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. Also, please break down PATH enrollee expenses here.

Item (1)	Calculation (2)	Federal PATH Request (3)	Non-Federal State Match (4)	Total Federal/State Cost (5)
Vehicle Leases	5 vehicles @ 400 per month plus 1 vehicle @ \$620 per month x 12 months	\$23,338	\$8,102	\$31,440
Vehicle Insurance	6 vehicles @ \$130 per month x 12 months	\$6,948	\$2,412	\$9,360
GPS	6 vehicles @ \$25 per month x 12 months	\$1,336	\$464	\$1,800
Cell phones	11 phones @ \$70 per month x 12 months	\$6,859	\$2,381	\$9,240
HMIS Licenses	13 HMIS annual licenses x \$200	\$1,930	\$670	\$2,600
Client Supplies - Bus Tokens	Bus passes	\$1,834	\$671	\$2,478
Petty Cash for Client Emergencies	Birth certificates, ID's needed for establishing work/housing	\$3,707	\$1,287	\$4,994
Client Supplies – PATH Enrollee	Trac phones, PPE, hygiene kits and basic clothing as needed	\$1,856	\$644	\$2,500
Office space at Human Services Campus	\$1,725 per month x 12 months	\$15,365	\$5,335	\$20,700
<b>Total Request</b>		<b>\$63,173</b>	<b>\$21,966</b>	<b>\$85,139</b>



**Community Bridges  
Budget Narrative & Justification  
County Coverage: Maricopa County  
Contract Period: July 1, 2024 through June 30, 2025**

**Other Narrative:**

1. The operating costs include the vehicle expenses including GPS, insurance, and lease. Phones for the staff to complete their day-to-day tasks including coordination of care and accessing resources. HMIS licenses are needed for the Navigators to provide outreach services.
2. The PATH enrollee petty cash line and client supplies are for emergencies for client support including helping members to get documents ready and for purchasing PPE/hygiene kits and basic clothing. Budget is based on historical costs.
3. *Client Supplies:* Bus Tokens for clients to assist them with transportation to appointments and job searches/work
4. The office space charge represents the charges from the Human Services Campus lease for the PATH project.

**I. Total Direct Charges**

<b>Total Direct Charges (1)</b>	<b>Federal PATH Request (2)</b>	<b>Non-Federal State Match (3)</b>	<b>Total Federal/State Cost (4)</b>
<b>(sum of A-I)</b>	<b>\$591,242</b>	<b>\$205,297</b>	<b>\$796,539</b>

**J. Indirect Cost Rate (See Footnote below):**

<b>Calculation (1)</b>	<b>Federal PATH Request (2)</b>	<b>Non-Federal State Match (3)</b>	<b>Total Federal/State Cost (4)</b>
IDC rate at 10% on direct costs of \$796,539 less cost of Office Space \$20,700 = \$775,839	\$57,590	\$19,993	\$77,583
<b>Total Request</b>	<b>\$57,590</b>	<b>\$19,993</b>	<b>\$77,583</b>

**Indirect/Administrative Narrative:** CBI allocated 10% to cover expenses for administrative overhead such as Finance Department costs to generate invoices and track contract expenses, grant consultant 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.

**Community Bridges  
Budget Narrative & Justification  
County Coverage: Maricopa County  
Contract Period: July 1, 2024 through June 30, 2025**

**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.*

**K. Total Project Costs:**

<b>TOTAL REQUEST – TOTAL PROJECT COSTS (1)</b>	<b>Federal PATH Request (2)</b>	<b>Non-Federal State Match (3)</b>	<b>Total Federal/State Request (4)</b>
<b>(Sum of Total Direct Costs and Indirect (Or Admin) Costs)</b>	<b>\$648,832</b>	<b>\$225,290</b>	<b>\$874,122</b>

## COMMUNITY BRIDGES, INC.

Projects for Assistance in Transition from Homelessness (PATH)

Contractor Intended Use Plan (IUP)

Contract Period July 1, 2024 – June 30, 2025

**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 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, 2024 through June 30, 2025, CBI will receive \$225,290 (25.77%) in State funds and \$648,832 (74.23%) in Federal funds, a total grant of \$874,122. 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, 5 Navigator II's, 1 Navigator I, 1 Behavioral Health Clinician, .50 FTE of a Data Coordinator. Management staff will include a PATH Program Manager (Team Leader) at 100%, a PATH Program Senior Manager at 50%, a PATH Program Supervisor at 100%, 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, 2024 – June 30, 2025

**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 CBI staff below has served on most of the MAG CoC committees, board and workgroups. In FY 2023, CBI's Chief of Clinical and Program Development is on the MAG COC Board of Directors. CBI's Senior Director of Housing and Community Integration (HCI) serves on the CoC Planning Committee and the CoC Emergency Shelter Workgroup. Collectively, the CBI PATH Team also serves on the following within the MAG CoC:

1. Domestic violence workshop
2. Avondale collaborative partner meeting
3. Lived experience of homelessness advisory council
4. HSC Campus programs meeting
5. Sex Trafficking Outreach Projects Events
6. Cultural competency committee
7. Coordinated entry case conferencing for youth (bi-weekly), Native Americans (bi-weekly), and single adults (weekly meeting)
8. Monthly SACE entry point meeting
9. Coordinated entry/ Domestic Violence Workgroup
10. MAG Outreach Collaborative meeting

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 conference 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 Navigators use the assessment tool approved by the CoC (VI-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

## COMMUNITY BRIDGES, INC.

Projects for Assistance in Transition from Homelessness (PATH)

Contractor Intended Use Plan (IUP)

Contract Period July 1, 2024 – June 30, 2025

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 January 2024, and plans to continue every year.

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.

**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 areas such as mental health, substance use, physical health, housing, support services, and employment. 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 for 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 works closely with Phoenix, Mesa, Scottsdale, and Avondale to reach and support homeless adults with SMI or general mental health issues in their communities. In the Phoenix CARES program, CBI provides multiple 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 full-time 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 full-time Navigator assigned to the Mesa Library and the community court. The PATH project works with the Tempe Coalition, a group of Tempe homeless providers working to address homelessness in Tempe.

## COMMUNITY BRIDGES, INC.

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In addition, CBI provides mobile outreach teams in the East and West Valley and a Crisis Response Team in Phoenix. 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.

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 (MMIC) 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 an individual’s 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; nine homeless outreach teams working in the Phoenix Cares program; homeless navigators working in Mesa, Scottsdale, and Avondale; the H3 Vets, Vet Connect, and SSVF programs; the Maricopa County Justice Program, working in the jails, and bridge housing; the FACT and ACT teams; and the Comprehensive Community Health Program (CCHP). Programs send referrals through PATH’s [pathreferral@cbridges.com](mailto: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.

## COMMUNITY BRIDGES, INC.

Projects for Assistance in Transition from Homelessness (PATH)

Contractor Intended Use Plan (IUP)

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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, Scottsdale, and Avondale; 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 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 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 later 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 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 provides 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.

**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;**

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



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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 individuals experiencing homelessness 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 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



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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 hopes 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, CBI's ACT and FACT teams, supportive housing program, in collaboration with Mercy Maricopa Integrated Care (MMIC) for participants with SMI, medical detox services, medication-assisted treatment, and counseling services are all 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 prescription to meet their immediate needs. Based on the

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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 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. 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.

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### **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 SSVF-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 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.

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**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 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 completes 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.

**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 online 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

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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 six 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 (attached at the end of the IUP).

**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.

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.



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Since 2014, CBI has been awarded multiple contracts for rapid-re-housing and permanent supportive housing that may be appropriate for some PATH participants. As of January 2024 CBI manages over 1,000 units of PSH, RRH, and Shelter housing units. 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 a minimum of 300 Veterans experiencing homelessness per year.

CBI manages programs that work with other housing providers. For example, CBI 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.

**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 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.

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CBI receives funding from the 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.

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. 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, 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 safe space for both LGBTQ participants and employees. Based on the work of an internal agency LGBTQ

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Committee, CBI increased education on transgender issues, developed a thorough LGBTQ resource list, and created a safe space through visible and tangible support. Safe space 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 completed 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.

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



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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 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 22/23 (July 1, 2022-June 30, 2023) year-end PATH report included 2,914 new persons contacted and 3,149 unduplicated persons contacted by PATH-funded staff during the fiscal year. Of the 3,149 unduplicated participants, 1,264 persons had active, enrolled PATH status at

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any point during the fiscal year. The following demographic data is based on the data for these 1,264 enrolled persons:

Sex: 524 (41%) Female; 729 (58%) Male; 3 (0.2%) No single gender; and 8 (0.6%) Transgender

Age: 74 (6%) 18-23 yr old; 130 (10%) 24-30 yr old; 319 (25%) 31-40 yr old; 304 (24%) 41-50 yr old; 297 (23%) 51-61 yr old; and 140 (11%) 62 and over.

Race: 790 (%) white; 337 (%) black/African American or African; 168 (%) American Indian/Alaskan Native; 16 (%) Native Hawaiian or Pacific Islander; and 9 (%) 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: 279 (22%) Hispanic/Latino and 985 (78%) non-Hispanic

Veteran Status: 38 (3%) Veterans and 1,226 (97%) non-Veteran.

Living Situation at Project Start: 968 (77%) literally homeless; 101 (8%) institutional situation; 154 (12%) transitional or permanent housing situation; and 41 (3%) data not collected.

### 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
2,800	2,500	1,200	900	866	40	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 since beginning in 2015. 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 9 Lead Navigator’s, Navigator I’s and Navigator II’s. CBI projected the number of unduplicated persons consistent with previous year’s performance ratios. In FY 22/23, CBI PATH had served 3,149+ new unduplicated participants, which

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amounts to 350 participants per Navigator. The percentage of enrolled to unduplicated persons served was 40% (n=1,264) in FY 22/23.

CBI's FY 24/25 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 is projected to serve a slightly smaller amount than we served in FY 23/24 because the staffing model has been decreased by one navigator to adhere to the budget amount of \$874,122.

### 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)
80	695	100	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 ~500 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 (Peer Supports) 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

**COMMUNITY BRIDGES, INC.**

Projects for Assistance in Transition from Homelessness (PATH)

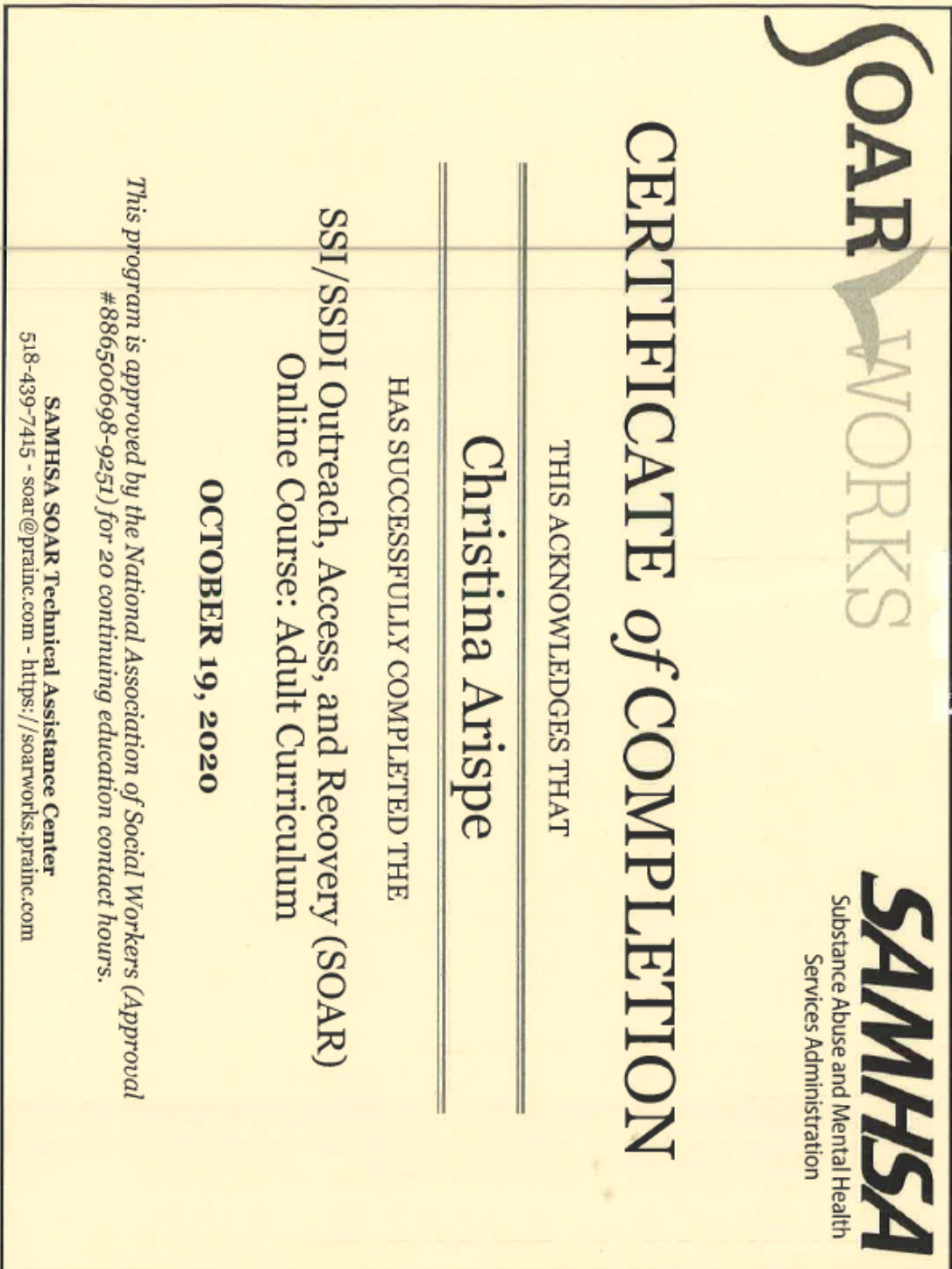
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per month. At each session the Clinician has specific curricula for training on Evidence-Based Practices such as Critical Time Intervention, Motivational Interviewing, Harm Reduction, Assertive Outreach, and Trauma-Informed Care. The staff also engage 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.

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**Good Neighbor Alliance  
Budget Narrative & Justification  
County Coverage: Cochise  
Contract Period: July 1, 2024 through June 30, 2025**

**A. Personnel:**

Position Title (1)	Staff Name (2)	Annual Salary/Rate (3)	Level of Effort (LOE) (4)	Federal PATH Request (5)	Non- Federal State Match (6)	Total Federal/State Cost (7)
PATH Team Lead	Kyle Allen	\$32,760	1	\$17,402	\$15,358	\$32,760
Outreach Specialist	Matt James	\$27,300	1	\$14,502	\$12,798	\$27,300
Outreach Specialist	TJ Ortega	\$27,300	1	\$14,502	\$12,798	\$27,300
Shower Attendant	Tammi Stone	\$7,020	1	\$3,729	\$3,291	\$7,020
Shower Attendant	Jeremy Clayton	\$7,020	1	\$3,729	\$3,291	\$7,020
<b>Total Request</b>				<b>\$53,864</b>	<b>\$47,536</b>	<b>\$101,400</b>

***Personnel Narrative:***

GNA has 4 HMIS Licenses and does anywhere from 4 to 10 VI-SPDAT's a week. Due to the volume of work, and for safety reasons, there is a need to have two shower attendants, as well as two Outreach Specialists. 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. The Team Lead ensures accuracy and attends to contract requirements.

**B. Fringe Benefits:**

Position Title (1)	Staff Name (2)	Total Personnel Cost from above (3)	Total Fringe Rate (4)	Federal Request (5)	Non- Federal State Match (6)	Total Federal/State Cost (7)
PATH Team Lead	Kyle Allen	\$32,760	7.67%	\$1,335	\$1,178	\$2,513
Outreach Specialist	Matt James	\$27,300	7.67%	\$1,112	\$982	\$2,094
Outreach Specialist	TJ Ortega	\$27,300	7.67%	\$1,112	\$982	\$2,094

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Position Title (1)	Staff Name (2)	Total Personnel Cost from above (3)	Total Fringe Rate (4)	Federal Request (5)	Non- Federal State Match (6)	Total Federal/State Cost (7)
Shower Attendant	Tammi Stone	\$7,020	7.67%	\$286	\$252	\$538
Shower Attendant	Jeremy Clayton	\$7,020	7.67%	\$286	\$252	\$538
<b>Total Request</b>				<b>\$4,131</b>	<b>\$3,646</b>	<b>\$7,777</b>

***Fringe Benefits Narrative:***

Good Neighbor Alliance does not offer any benefits other than sick/personal time. The ERE rate is 7.67% for FICA taxes.

Fringe Category	Rate
Retirement	
FICA	7.67%
Insurance	
Social Security	
Total Fringe Rate	7.67%

**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>.**

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Purpose (1)	Destination (2)	Item (3)	Calculation (4)	Federal PATH Request (5)	Non-Federal State Match (6)	Total Federal/State Cost (7)
Outreach	Cochise County	Monthly Fuel	\$267 per month X 12 months	\$1,700	\$1,500	\$3,200
<b>Total Request</b>				<b>\$1,700</b>	<b>\$1,500</b>	<b>\$3,200</b>

***Travel Narrative:***

Fuel necessary for PATH Truck to outreach all of Cochise County per scope of work. PATH covers the entirety of Cochise County, with the average price of gas nearing \$4 per gallon currently.

**D. Equipment**

Item (1)	Calculation (2)	Federal PATH Request (3)	Non-Federal State Match (4)	Total Federal/State Cost (5)
		<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

***Equipment Narrative:***

**E. Supplies**

Item (1)	Calculation (2)	Federal PATH Request (3)	Non-Federal State Match (4)	Total Federal/State Cost (5)



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<b>Total Request</b>		<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

***Supplies Narrative:***

**F. Contractual:**

<b>Name of Organization or Consultant (1)</b>	<b>Type of Agreement (2)</b>	<b>Federal PATH Request (3)</b>	<b>Non-Federal State Match (4)</b>	<b>Total Federal/State Cost (5)</b>
N/A				
<b>Total Request</b>		<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

***Contractual Narrative:***

**G. Housing:**

***If requesting rent, please fill out & submit rent worksheet.***

<b>Housing Assistance (1)</b>	<b>Calculation (2)</b>	<b>Federal PATH Request (3)</b>	<b>Non- Federal State Match (4)</b>	<b>Total Federal/State Cost (5)</b>
N/A				
<b>Total Request</b>		<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

***Housing Narrative:***

**H. Other Operating:**

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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. Also, please break down PATH enrollee expenses here.

Item (1)	Calculation (2)	Federal PATH Request (3)	Non-Federal State Match (4)	Total Federal/State Cost (5)
Vehicle Maintenance	\$159.17 per month x 12 months	\$1,015	\$895	\$1,910
Vehicle Lease	\$360.25 per month x 12 months	\$2,296	\$2,027	\$4,323
Cell Phone	\$107.50 per month x 12 months	\$685	\$605	\$1,290
Professional Printing/Copying		\$53	\$47	\$100
<b>Total Request</b>		<b>\$4,049</b>	<b>\$3,574</b>	<b>\$7,623</b>

**Other Narrative:**

Equipment required to meet the specifications set forth regarding the scope of work. Vehicle costs are fixed. The Cell phone is necessary for outreach and safety purposes. The vehicle is leased and utilized 100% for PATH work. Maintenance costs include oil changes, parts, tires, and general maintenance. All maintenance is necessary to remain in compliance with the lease agreement. The GNA cell phone is utilized for outreach and safety purposes. The two outreach specialists share one cell phone. Professional printing/copy costs include the cost of having handouts printed to be used as an informational resource at weekly and monthly events and at shower program encounters.

**I. Total Direct Charges**

Total Direct Charges (1)	Federal PATH Request (2)	Non-Federal State Match (3)	Total Federal/State Cost (4)
(sum of A-I)	\$63,744	\$56,256	\$120,000

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

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Calculation (1)	Federal PATH Request (2)	Non-Federal State Match (3)	Total Federal/State Cost (4)
De minimis rate of 10% x 120,00	\$6,379	\$5,621	\$12,000
<b>Total Request</b>	<b>\$6,379</b>	<b>\$5,621</b>	<b>\$12,000</b>

**Indirect/Administrative Narrative:**

Good Neighbor Alliance requests the de minimis rate of 10% to administer the entirety of this grant.

**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.*

**K. Total Project Costs:**

TOTAL REQUEST – TOTAL PROJECT COSTS (1)	Federal Request (2)	Non-Federal State Match (3)	Total Federal/State Cost (4)
(Sum of Total Direct Costs and Indirect (Or Admin) Costs)	\$70,123	\$61,877	\$132,000

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**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 unhoused community members, GNA provides a shower program three days per week. The PATH team is responsible for the shower program that helps to provide extensive out-reach opportunities. It continues to be a valuable tool in creating trust and a bridge for our chronically homeless neighbors for familiarity and insight into the GNA Shelter as an option. 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 as well as an opportunity to do one load of laundry. For the past three contract years GNA has been granted funding to provide hotel vouchers when the shelter was full or other exigent circumstances arise. This is another opportunity to complete SPDAT's and encounter new contacts. GNA does not yet have funding for this contract year. During the 2022-2023 fiscal year PATH provided services to 3,633 homeless individuals. This year-to-date PATH has already provided services to 2,550 homeless individuals.

Our Day Program is no longer funded as of December 2023; however, the shelter guests can remain on site during the weekend days. GNA continues to offer guests an opportunity to participate in a variety of activities during the weekend days designed to help encourage self-esteem, self-care, health, wellness, and self-sufficiency. The workshops are supported by community stakeholders and volunteers. GNA offers activities such 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 \$70,123 in federal PATH funds and \$61,877 in matching state funds, for a total of \$132,000 for the 2024/2025 contract year.

**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 nearly 20 years and works closely with Terrance Watkins from Community Partners Integrated Healthcare (C.P.I.H.) 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

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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 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, Cochise Serving Veterans, and the Warrior Healing Center. GNA is a new service provider for the Homeless ID project through our By Name list case manager position.

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. When an opening is available, the CCHA reaches out to us for a referral.

**Collaboration with Local Community Organizations:**

GNA PATH actively participates in networking and coordination of efforts with several 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. PATH refers clients to our in-house case manager with the Homeless ID project 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. However, GNA has obtained funding to build an onsite kennel to be completed this contract year. GNA has an MOU 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

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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 Transitional 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. The Path Lead has also collaborated with SEABHS / La Frontera and can send a referral to get seen for mental illness or substance abuse. SABHS / LaFrontera also has Ocotillo Unit housing available for path clients with a severe mental illness determination which provides them with somewhere to live and continue receiving the help they need.

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 remains the only active outreach team in Cochise County. We are often joined by Outreach team specialists from the BNL case manager team and community health workers from 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,

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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. Additional funding for hotel vouchers has provided new contact and relationship building for the PATH Team. PATH has employed 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 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:**

One of the most notable differences this contract year includes the increase in the number of elderly and disabled community members that have become unhoused. At times, there is a gap in service surrounding unhoused members that are not suitable for our shelter but better served with placement in a care facility. 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 been extremely limited Permanent Supportive Housing Vouchers (PSH) available. There aren't any "new" openings, only those open through attrition. 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 the 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 has become increasingly more difficult. Additionally, several rapid Rehousing programs were ended through the last half of this contract year.

**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



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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. Solari is 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 services are. The GNA HMIS Administrator ensures all data is inputted 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 for 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, with two other employees in the training process. We refer clients needing assistance with SSI and SSDI assistance to Community Partners who have trained SOAR representatives ready to offer the service. The nearest SSA office is an hour away and office hours remained reduced.

This creates a significant barrier in wait times. A significant number of PATH clients are undereducated, which makes completing an SSI/SSDI application online on their own challenging. We aid and advocate for the client through the disability process as well as 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



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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, the local provider for the Supportive System for Veteran Families program for housing assistance and eviction prevention. GNA currently has a Rapid Rehousing contract with ADOH and Arizona Housing Coalition in 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. SEABHS / La Frontera also has housing for homeless individuals with severe mental illness or substance abuse problems.

**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 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 or online.

The PATH Team Lead keeps a record of all training provided to the team. Training provided with PATH TA funds are recorded on a CER and submitted to AHCCCS for reimbursement. 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.

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**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, The Warrior Healing Center, Primavera Foundation of Tucson, which administers the VASH program. Often, qualified veterans are housed quickly.

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**Client Information and Demographics 06/30/2022 – 02/21/2023:**

Path has 26 actively enrolled individuals throughout this reporting period, year to date. The percentage reflects the 26 individuals who were enrolled throughout the reporting period.

**Gender:** Female= 34.61% Male= 65.38% Transgender= 0%

**Age:** 18-23 year olds= 3.84% 24-30= 11.53% 31-40 = 26.92% 41-50= 27.076%  
51-61= 19.23% 62 and over = 15.38%

**Race:**

American Indian, Alaska Native, or Indigenous = 7.69%

Black, African American, or African = 0%

Native Hawaiian or Pacific Islander = 3.84%

White = 61.53%

Data Not Collected = 0%

**Ethnicity:**

Non-Hispanic / Non-Latin (a)(o)(x) = 96.15%

Hispanic / Latin (a)(o)(x) 3.84%

Data Not Collected = %

**Veteran Status:**

Veteran = 3.84%

Non-Veteran = 96.16%

Data Not Collected = 0%

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<b>Projected Outreach, Engagement &amp; Enrollment Goals</b>						
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
260	175	50	31	240	05	

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

In 2023/2024, year to date, we have outreached/engaged 157 unduplicated individuals. We have exceeded our goals of outreaching 107 and enrolling 21. Historically, individuals contacted in street outreach are actively homeless. During the 2022/2023 contract, our PATH team encountered 5 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 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.

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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)
30	30	9	12

**Consumer Involvement:**

GNA/PATH shower program utilizes clients who are homeless and have serious mental illnesses and have demonstrated the ability, as volunteers 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 2023-24 PIT count. The questionnaire is updated annually based upon current trends, with a lower emphasis on the conditions that might have been present during COVID. 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 in rural settings as well as the somewhat urban setting of 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 used to make improvements to the program and see what customer services are useful for participants. The PIT count numbers for the January 2023 count have not been released yet.

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**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.**

Beginning in 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 year 2024, this program has been awarded:

CCCS awarded: Federally is \$324,043 and State is \$112,515 for total award of \$436,558.

**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/Collective Impact groups, as well as the Homeless Task Forces in Mohave County and Verde Valley Homeless Coalition in Cottonwood. PATH has historically been one of the leading programs for the annual HUD Point in Time Count across all the counties it serves. 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, 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

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housing documents 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.**

PATH is currently working with all of its regional Continuums and even invites other agencies that are not a part of the local Continuums to attend and/or join.

**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 Health Services in Coconino County; Spectrum Healthcare, Polara Health and Southwest Behavioral Health Services 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 and to ensure diagnosis is 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 Northland Family Help Center (for victims of domestic violence and unsheltered youths), 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), 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 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



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outreach), Yavapai County Probation Office (to assist clients in addressing justice involvement requirements), Coconino County Probation Office, Prescott Area Shelter Services, Northern Arizona Council of Governments (NACOG), 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 Verde Valley Medical Center, Mohave/Yavapai/Coconino County Jails, Mental Health Court, Western Arizona Council of Governments (WACOG), Victim Witness Advocates in Flagstaff, Williams and Grand Canyon Village, the Flagstaff, Prescott, Williams, Sedona, Cottonwood, Kingman, Lake Havasu City, 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, Hope Lives in Flagstaff, Sunshine Rescue Mission in Flagstaff, Set Free Church in Paulden, CCJ and Project Aware Shelters in Prescott, the Verde Valley Homeless Coalition Day Center and Shelter in Cottonwood, the Sedona, Cottonwood, Prescott, Flagstaff, Page, Bullhead City, Kingman, and Lake Havasu City- City Governments and Mayoral Offices, the Camp Verde, Sedona, Cottonwood, Prescott, Prescott Valley, Flagstaff x2, Page, Bullhead City, Lake Havasu City, and Kingman City Libraries, Church on the Street in Kingman (allows PATH to utilize an office at their location on Mondays and Tuesdays for walk-ins, outreach assistance, and case management), Center for Hope and the Salvation Army in Lake Havasu City (allows PATH and other CCCS programs to utilize an office for walk-ins, case management on Tuesdays), Camp Verde City Library (allows PATH to utilize a meeting room every other Wednesday from 1-3pm). 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 consumers, (3) pre-screening for possible enrollment into PATH services.

PATH staff also work closely with Catholic Charities' Veteran Services program. Clients can be dually enrolled in both PATH and Veteran Services, increasing their opportunities for behavioral health and veteran-qualified services in 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. PATH in Mohave works once a week (Wednesdays) with the Bullhead City Municipal Court's Quality of Life Court Judges and Attorneys (as well as other service providers) to assist homeless individuals minimize and quash fines and/or records by enrolling in the variety of services offered within the community. The very next day, those individuals are responsible for their own progress and utilize PATH services for potential enrollment, completing VI-SPDATS to initially begin the housing process, and enrollment in MRT (Moral Recognition Therapy conducted by a certified MRT trained and PATH Staffer that is usually a 6 week long, one day per week (Thursdays) class that covers moral reasoning, better decision making, and more appropriate behavior in social settings as well as in daily life).

**Service Provision: 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**

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**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 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, alleys, homeless shelters, river bottoms, forests, mountain valleys and foothills, desert campsites, parks, jails, hot meal centers, food pantries, hospitals urban and BNSF (train) tunnels, 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 resource lists detailing available social services; educate people on local camping rules and regulations (National Forests, County, City Limits, Bureau of Land Management); and transport clients directly to detoxification centers, medical treatment, and psychiatric care. Outreach is regularly conducted during inclement weather and available on-call after hours. All individuals experiencing homelessness are served, and those with serious mental illnesses and/or co-occurring substance abuse disorders are provided program information about the future possibilities of enrollment into 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 family members, registered sex offenders and LGBTQ populations. One team of at least two PATH outreach staff is assigned to each geographic service area. Four 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 (co-pays for psych meds only); 11) assistance completing appropriate applications and necessary follow-up to ensure eligible persons are in receipt of SSI/SSDI through the SOAR program, medical insurance (AHCCCS/MEDICAID),

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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; 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 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, Mohave Mental Health Clinics in Mohave County, Encompass in Page and Fredonia, Spectrum Healthcare in Sedona, Cottonwood, Camp Verde, Prescott Valley, and Prescott, Polara Health in Prescott and Prescott Valley, and Southwest Behavioral & Health Services in Flagstaff, Mohave County, and Prescott/Prescott Valley for treatment services. Those enrolled in the PATH Program receive case treatment 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 Behavioral Health Case Manager. Alternatively, a Title XIX verification request can be submitted through the Regional Behavioral Health Authority. Such requests are fulfilled within one week (Solari requests). This system is liable to change with the better understanding of a client's right to obtain an SMI assessment from a behavioral health provider within seven days of each client's request.

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

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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 outreaches eastern Flagstaff/outlying areas. Currently one team is covering Prescott/Prescott Valley with agency interaction assistance from Set Free Church Volunteers covering Prescott/Chino Valley corridor. In the extreme heat areas of Mohave County, PATH staff coordinates with local providers for water drives, safe daytime provisions, and the creation of cooling stations 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, the Arizona Community Foundation, and the 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 (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 training is 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 that 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, maintain HIPAA guidelines, and protect client PHI during and after enrollment.

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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.**

**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 seven PATH staff members, four are SOAR certified and two 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 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 Case Managers 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. Other options for SOAR services are referrals to pro-bono law firms with attorneys that specialize in disability claims. This is usually an option reserved for outreach contacts or current/former PATH clients that are wanting to file an appeal after their initial disability claims had been denied.

**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 2023 this Housing Program assisted over 812 individuals obtain housing, with approximately over 50 of them previously enrolled in the PATH Program.

Examples of disabilities include SMI, substance use disorder, post-traumatic stress disorder, HIV/AIDS



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or a physical disability. Residents pay a portion of their income 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 \$250). 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 Polara. 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, referrals to financial responsibility classes, and 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.**

Catholic Charities serves all, regardless of age, race/ethnicity, gender, disability, sexual orientation, or faith (religious affiliation). Even though CCCS is faith-based, 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. The PATH program remains proactive in terms of connecting with partnering agencies that also specialize in these descriptors in order to better collaborate and coordinate client care.

**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. These trainings are provided through CCCS's Relias training module in the agency's ADP website. Because many of our clients are from the neighboring Navajo, Hopi, Havasupai, Hualapai, Kaibab, Ft. Mohave, and Yavapai-Apache Nations/Reservations, Catholic Charities has sought additional training from Native Americans for Community Action (NACA) and has made inroads with the Hualapai Nation Tribal Government in

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terms of service provision and community integration for social services. 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. In person training of DEI for PATH and other CC Programs was conducted by the Tribal Liaison of HCIC in their Cultural Competency Training to understand cultural disparities and awareness of diversity, equity, and inclusion.

**PATH Eligibility & Enrollment:**

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

PATH follows the requirements needed for potential clients to qualify such as being 18 years of age or older, homeless (newly and chronically), and if the participant thinks they are or have ever been diagnosed with an SMI determination (or equivalent to SMI as designated in other states, previous to arriving in the AZ counties we serve). 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 that 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 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 contact 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, history of or current 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 advocating for 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

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explained and given client copies of the grievance packet/process, client and service provider rights and responsibilities, and terms of service, 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, domestic violence status, 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 and entered into HMIS at least 48 hours after each referral interaction or else the system will not tabulate/recognize the data entered).

**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.**

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



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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. PTSD and social anxiety disorders are common amongst this population. It is important to treat Veterans and their families with respect knowing that they once served and it is our turn to serve them in their time of need. PATH has participated in various planning committees and provided services such as information booths and transportation for Veterans Stand Downs since 2012 in Flagstaff, Williams, Prescott, Prescott Valley, Kingman, and Bullhead City.

**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 diverse backgrounds, ages, and genders. Based on the history of delivering the PATH Program, our typical population is male, Caucasian and in the 40-60 age range. While this is what past precedence shows, our teams are culturally diverse and seek to serve the underserved populations in each area 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.

**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 400	Mohave 20	Mohave 53	Mohave 53	Mohave 8	Mohave 0
Coconino 800	Coconino 400	Coconino 20	Coconino 54	Coconino 54	Coconino 6	Coconino 0
Yavapai 800	Yavapai 400	Yavapai 20	Yavapai 53	Yavapai 53	Yavapai 10	Yavapai 0

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<b>NOTE: Include methodologies / tracking tools to be used to ensure goals are reached or exceeded.</b>  HMIS is the primary tool to ensure goals are reached. Data will be reported out monthly and quarterly through the deliverable system and monthly/quarterly reviews 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)
160	160	65	12- anticipated Homeless Conference, Veteran Stand Downs, Mental Health First Aid Trainings, community awareness events.

<b>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.</b>  Consumers are included in the case planning process during the enrollment intake process as well as during follow-ups and updates throughout the duration of their active enrollment. PATH welcomes and encourages family involvement, when possible, at the request of the consumer and with proper Release of Information documentation in place. 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 and maintain or improve upon 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. Former PATH clients that become successfully housed 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.
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**A. Personnel:**

Position Title (1)	Staff Name (2)	Annual Salary/Rate (3)	Level of Effort (LOE) (4)	Federal PATH Request (5)	Non- Federal State Match (6)	Total Federal/State Cost (7)
PATH Supervisor	Richard Brust-C,Y,M	\$54,760	50%	\$20,323	\$7,057	\$27,380
Outreach Specialist	Sarah Annibal-C	\$39,733	50%	\$14,746	\$5,120	\$19,866
Outreach Specialist	Dwight Manuel-C	\$39,720	50%	\$14,741	\$5,119	\$19,860
Outreach Specialist	Daja Dorsey-Y	\$39,733	100%	\$29,493	\$10,240	\$39,733
Outreach Specialist	Brynn Merz-C	\$38,563	50%	\$14,312	\$4,969	\$19,281
Outreach Specialist	TBH-Y	\$39,720	100%	\$29,483	\$10,237	\$39,720
Outreach Specialist	Patricia Jacques-M	\$42,227	50%	\$15,672	\$5,442	\$21,114
Outreach Specialist	Christine Lee-M	\$39,720	50%	\$14,741	\$5,119	\$19,860
<b>Total Request</b>				<b>\$153,511</b>	<b>\$53,303</b>	<b>\$206,814</b>

**Personnel Narrative:** 7 outreach specialists for outreach, engagement, and case management and 1 FTE supervisor. All staff are providing 100% of their effort into the program however, 50% of 6 specialists and supervisor time is covered by agency in kind.

**B. Fringe Benefits:**

Position Title (1)	Staff Name (2)	Total Personnel Cost from above (3)	Total Fringe Rate (4)	Federal Request (5)	Non-Federal State Match (6)	Total Federal/State Cost (7)
PATH Supervisor	Richard Brust	\$27,380	38%	\$7,724	\$2,682	\$10,406
Outreach Specialist	Sarah Annibal	\$19,866	38%	\$5,603	\$1,946	\$7,549

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Position Title (1)	Staff Name (2)	Total Personnel Cost from above (3)	Total Fringe Rate (4)	Federal Request (5)	Non-Federal State Match (6)	Total Federal/State Cost (7)
Outreach Specialist	Dwight Manuel	\$19,860	38%	\$5,602	\$1,945	\$7,547
Outreach Specialist	Daja Dorsey	\$39,733	38%	\$11,207	\$3,891	\$15,098
Outreach Specialist	Brynn Merz	\$19,281	38%	\$5,438	\$1,888	\$7,326
Outreach Specialist	TBH	\$39,720	38%	\$11,203	\$3,890	\$15,093
Outreach Specialist	Patricia Jacques	\$21,114	38%	\$5,954	\$2,068	\$8,022
Outreach Specialist	Christine Lee	\$19,860	38%	\$5,602	\$1,945	\$7,547
<b>Total Request</b>				<b>\$58,333</b>	<b>\$20,255</b>	<b>\$78,588</b>

**Fringe Benefits Narrative:** 38% of salary above for ERE broken out as shown below.

Fringe Category	Rate
Retirement	10%
FICA	7.65%
Insurance	20.35%
Social Security	Incl w/FICA
Total Fringe Rate	38%

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**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)	Federal PATH Request (5)	Non-Federal State Match (6)	Total Federal/State Cost (7)
<b>Total Request</b>				<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

*Travel Narrative:*

**D. Equipment**

Item (1)	Calculation (2)	Federal PATH Request (3)	Non-Federal State Match (4)	Total Federal/State Cost (5)
<b>Total Request</b>		<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

*Equipment Narrative:* N/A

**E. Supplies**

Item (1)	Calculation (2)	Federal PATH Request	Non-Federal State Match	Total Federal/State

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		(3)	(4)	Cost (5)
Outreach Supplies	5% of expected total	\$557	\$195	\$752
Enrollee Assistance	5% of expected total	\$557	\$195	\$752
<b>Total Request</b>		<b>\$1,114</b>	<b>\$390</b>	<b>\$1,504</b>

**Supplies Narrative:**

- Outreach supplies including hygiene items, weather-related gear (gloves, socks, scarves, hats, etc.)
  - Enrollee assistance approved by contract (ID, Birth Cert, petty cash for co-pays).
- Note: These amounts are only what is charged to the contract as this is primarily covered by agency in kind (actuals are approx. \$15,000 each category)

**F. Contractual:**

Name of Organization or Consultant (1)	Type of Agreement (2)	Federal PATH Request (3)	Non-Federal State Match (4)	Total Federal/State Cost (5)
<b>Total Request</b>		<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

**Contractual Narrative:**

**G. Housing:**

*If requesting rent, please fill out & submit rent worksheet.*

Housing Assistance (1)	Calculation (2)	Federal PATH Request (3)	Non- Federal State Match (4)	Total Federal/State Cost (5)
Housing Assist for enrollees	10 clients X \$250	\$1,856	\$644	\$2,500
<b>Total Request</b>		<b>\$1,856</b>	<b>\$644</b>	<b>\$2,500</b>

**Housing Narrative:** Assistance to prevent enrolled clients from becoming homeless including rent, utilities etc. These costs are primarily covered by agency in kind through additional housing programs. The maximum allowed to be charged to the grant is 20% of the total award and \$250 per client.

**H. Other Operating:**

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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. Also, please break down PATH enrollee expenses here.

Item (1)	Calculation (2)	Federal PATH Request (3)	Non-Federal State Match (4)	Total Federal/State Cost (5)
Cell phones	8 X \$60/mo X 12 months	\$4,275	\$1,485	\$5,760
General Liability Insurance	Allocated at \$750 per staff person per year  \$750 X 8	\$4,454	\$1,546	\$6,000
Vehicle Insurance	\$608.15 x 5 vehicles x 12 months	\$27,085	\$9,404	\$36,489
Vehicle Maintenance	Estimates based on prior year actuals for 5 PATH vehicles in service	\$9,413	\$3,269	\$12,682
<b>Total Request</b>		<b>\$45,227</b>	<b>\$15,704</b>	<b>\$60,931</b>

**Other Narrative:**

- A cell phone for each 8 staff members at \$60 per month.
- The general liability is allocated by number of employees so for PATH it's \$750 X 8 employees for the PATH portion of the insurance.
- Vehicle insurance for 4 owned and 1 leased vehicle, combined average is \$608.15 per month.
- Maintenance for the same 5 vehicles is requested based on previous fiscal year actuals.

**I. Total Direct Charges**

Total Direct Charges (1)	Federal PATH Request (2)	Non-Federal State Match (3)	Total Federal/State Cost (4)
(Sum of A-I)	\$260,041	\$90,296	\$350,337



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**J. Indirect Cost Rate (See Footnote below):**

Calculation (1)	Federal PATH Request (2)	Non-Federal State Match (3)	Total Federal/State Cost (4)
Fed approved indirect rate of 30% of Sal + ERE = \$151,689 (total salary + ERE = \$505,631)  Balance is agency in kind	\$64,002	\$22,219	\$86,221
<b>Total Request</b>	<b>\$64,002</b>	<b>\$22,219</b>	<b>\$86,221</b>

**Indirect Narrative:** Fed approved indirect rate of 30% of Sal + ERE, agency in kind is applied. The current IDC will expire 6/30/24, and Catholic Charities will provide an updated copy to AHCCCS upon availability.

**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.

**K. Total Project Costs:**

TOTAL REQUEST – TOTAL PROJECT COSTS (1)	Federal PATH Request (2)	Non-Federal State Match (3)	Total Federal/State Cost (4)
(Sum of Total Direct Costs and Indirect Costs)	\$324,043	\$112,515	\$436,558

## II. Executive Summary

### 2. State Budget

Planning Period From 7/1/2025 to 6/30/2026

**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
a. Personnel	\$ 36,301	\$ 0	\$ 36,301	

Position *	Annual Salary *	% of time spent on PATH *	PATH-Funded FTE	PATH-Funded Salary *	Matched Dollars *	Total Dollars	Comments
PATH Administrator	66,000.00	45.00 %	0.45	29,701.00	0.00	29,701.00	
Other (Describe in Comments)	66,000.00	10.00 %	0.10	6,600.00	0.00	6,600.00	Fiscal Staff

Category	Percentage	Federal Dollars *	Matched Dollars *	Total Dollars	Comments
b. Fringe Benefits	40.00%	\$ 14,520.00	\$ 0.00	\$ 14,520.00	

Category	Federal Dollars	Matched Dollars	Total Dollars	Comments
c. Travel	\$ 4,596.00	\$ 0.00	\$ 4,596.00	

Line Item Detail *	Federal Dollars *	Matched Dollars *	Total Dollars	Comments
Mileage Reimbursement	\$ 255.00	\$ 0.00	\$ 255.00	Mileage - In State ( 380 miles x \$0.67/mile = \$255.00)
Per Diem	\$ 1,035.00	\$ 0.00	\$ 1,035.00	Per Diem for in state travel (15 days x \$69/day = \$1,035)
Per Diem	\$ 272.00	\$ 0.00	\$ 272.00	Out of state per diem (\$68 x 4 = \$272)
Other (Describe in Comments)	\$ 1,500.00	\$ 0.00	\$ 1,500.00	Lodging for 10 nights x \$150/night = \$1,500
Other (Describe in Comments)	\$ 784.00	\$ 0.00	\$ 784.00	Airfare
Other (Describe in Comments)	\$ 750.00	\$ 0.00	\$ 750.00	Hotel for out of state travel for 1 attendee (\$250 per day x 3 days = \$750)

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

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

f1. Contractual (IUPs)	\$ 0.00	\$ 0.00	\$ 0.00	
f2. Contractual (State)	\$ 1,330,021.00	\$ 461,813.00	\$ 1,791,834.00	

Line Item Detail *	Federal Dollars *	Matched Dollars *	Total Dollars	Comments
Other (Describe in Comments)	\$ 1,330,021.00	\$ 461,813.00	\$ 1,791,834.00	Contractors - TBD - AHCCCS is currently utilizing an RFP to determine the contractors to be utilized

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)	0.00%	\$ 0.00	\$ 0.00	\$ 0.00	
g2. Housing (State)		\$ 0.00	\$ 0.00	\$ 0.00	
No Data Available					

Category	Federal Dollars	Matched Dollars	Total Dollars	Comments
h. Construction (non-allowable)				
i. Other	\$ 0.00	\$ 0.00	\$ 0.00	

No Data Available

j. Total Direct Charges (Sum of a-i minus g1)	\$ 1,385,438.00	\$ 461,813.00	\$ 1,847,251.00	
Category	Federal Dollars *	Matched Dollars *	Total Dollars	Comments
k. Indirect Costs (Administrative Costs)	\$ 0.00	\$ 0.00	\$ 0.00	
l. Grand Total (Sum of j and k)	\$ 1,385,438.00	\$ 461,813.00	\$ 1,847,251.00	
Allocation of Federal PATH Funds	\$ 1,385,438	\$ 461,813	\$ 1,847,251	

Source(s) of Match Dollars for State Funds:  
AHCCCS will utilize state general fund dollars to provide the state match component.

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**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	Ali De La Trinidad		\$66,000	0.45	\$29,701	
Fiscal Staff	Varied		\$66,000	0.10	\$6,600	
<b>Total Request</b>					<b>\$36,301</b>	<b>\$0</b>

**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	Ali De La Trinidad	40%	\$29,701	\$11,880	
Fiscal Staff	Varied	40%	\$6,600	\$2,640	
<b>Total Request</b>				<b>\$14,520</b>	<b>\$0</b>

**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

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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 - Grantee Meeting	Washington D.C.	Airfare	1 @ \$784	\$784	
		Out of state per diem	\$68 x 4 days	\$272	
		Lodging	\$250 per day x 3 days	\$750	
In state travel	Statewide	Lodging	10 nights x \$150/night	\$1,500	
		Per Diem	15 days x \$69	\$1,035	
		Mileage	380 miles x \$0.67	\$255	

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Purpose (1)	Destination (2)	Item (3)	Calculation (4)	Travel Cost Charged to the Award (5)	State Match (6)
<b>Total Request</b>				<b>\$4,596</b>	<b>\$0</b>

**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)
To Be Determined	PATH Outreach			\$1,330,021	\$461,813
<b>Total Request</b>				<b>\$1,330,021</b>	<b>\$461,813</b>

**JUSTIFICATION:** This represents the budget allocation for PATH providers to provide outreach services to those experiencing homelessness, serious mental illness, and/or a substance use disorder. AHCCCS is in an RFP year. Once the RFP is complete and the PATH contractors are awarded, AHCCCS will submit contractor budgets to SAMHSA.

**F. Indirect Cost Rate (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)**  
**FY2024 Application**  
**Budget Narrative & Justification**  
**July 1, 2025 through June 30, 2026**

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):**

<b>TOTAL REQUEST – TOTAL PROJECT COSTS – (Sum of Total Direct Costs and Indirect (Or Admin) Costs)</b>	<b>\$1,885,135</b>
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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	\$36,301	\$0	\$36,301
Employee Related Expenditures	\$14,520	\$0	\$14,520
Professional & Outside Services	\$0	\$0	\$0
Travel	\$4,596	\$0	\$4,596
Contractual	\$1,330,021	\$461,813	\$1,791,834

**AHCCCS**  
**Projects for Assistance in Transition from Homelessness (PATH)**  
**FY2024 Application**  
**Budget Narrative & Justification**  
**July 1, 2025 through June 30, 2026**

Category	Year 1	State Match Total Project Costs	Total Project Costs
Indirect Costs or Administration	\$0	\$0	\$0
<b>Total PATH Grant</b>	<b>\$1,385,438</b>	<b>\$461,813</b>	<b>\$1,847,251</b>



**Footnotes:**

II. Executive Summary

3. Intended Use Plans

Expenditure Period Start Date: 07/01/2025

Expenditure Period End Date: 06/30/2026

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, Mohave County and Yavapai County	\$0.00	\$0.00	0	0	0	0
Community Bridges Inc.	Social service agency	Maricopa County	\$0.00	\$0.00	0	0	0	0
Community Bridges Inc.	Social service agency	Maricopa County	\$0.00	\$0.00	0	0	0	0
Community Bridges Inc.	Social service agency	Maricopa County	\$0.00	\$0.00	0	0	0	0
La Frontera Center, Inc.	Community mental health center	Pima County	\$0.00	\$0.00	0	0	0	0
Grand Total			\$0.00	\$0.00	0	0	0	0

\* IUP with sub-IUPs

**Footnotes:**  
Arizona is in the process of soliciting new contracts for PATH Services through a competitive Request for Proposal. The awards will be made after the Arizona PATH Application is submitted. Arizona will provided updated information via a revision request.

II. Executive Summary

Intended Use Plans

**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 CoC Program** – HUD's **Continuum of Care (CoC) Program** is designed to promote communitywide commitment to the goal of ending homelessness by providing funding for efforts by nonprofit providers and State and local governments and promoting access to mainstream programs by homeless individuals and families. Describe the organization's participation with local HUD 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 CoC(s), 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 care, mental health, substance use, 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 COD, 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 a COD; and
  - A brief description of how PATH eligibility is determined, when enrollment occurs, and how eligibility is documented for PATH enrolled clients.
- **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).
- **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 illness, and their 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 and budget narrative that includes the local-area provider's use of PATH funds.

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\* Indicates a required field

Category	Federal Dollars	Matched Dollars	Total Dollars	Comments
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a. Personnel	\$ 0	\$ 0	\$ 0	
No Data Available				

Category	Percentage	Federal Dollars *	Matched Dollars *	Total Dollars	Comments
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b. Fringe Benefits	0.00%	\$ 0.00	\$ 0.00	\$ 0.00	
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Category	Federal Dollars	Matched Dollars	Total Dollars	Comments
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c. Travel	\$ 0.00	\$ 0.00	\$ 0.00	
No Data Available				

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	\$ 0.00	\$ 0.00	\$ 0.00	
No Data Available				

j. Total Direct Charges (Sum of a-i)	\$ 0.00	\$ 0.00	\$ 0.00	
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Category	Federal Dollars *	Matched Dollars *	Total Dollars	Comments
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k. Indirect Costs (Administrative Costs)	\$ 0.00	\$ 0.00	\$ 0.00	
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l. Grand Total (Sum of j and k)	\$ 0.00	\$ 0.00	\$ 0.00	
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Source(s) of Match Dollars for State Funds:

Estimated Number of Persons to be Contacted: 0 Estimated Number of Persons to be Enrolled: 0

Estimated Number of Persons to be Contacted who are Literally Homeless: 0

Number staff trained in SOAR in grant year ending in 2024: 0 Number of PATH-funded consumers assisted through SOAR: 0

FY 2025 PATH FOA Catalog No.: 93.150 FOA No.: SM-24-F2

Footnotes:

Arizona is in the process of soliciting new contracts for PATH Services through a competitive Request for Proposal. The awards will be made after the Arizona PATH Application is submitted. Arizona will provided updated information via a revision request.

II. Executive Summary

Intended Use Plans

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 CoC Program** – HUD's **Continuum of Care (CoC) Program** is designed to promote communitywide commitment to the goal of ending homelessness by providing funding for efforts by nonprofit providers and State and local governments and promoting access to mainstream programs by homeless individuals and families. Describe the organization's participation with local HUD 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 CoC(s), briefly explain the approaches to be taken by the organization to collaborate with the CoC(s) in the areas where PATH operates.
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- **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 COD, 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 a COD; and
  - A brief description of how PATH eligibility is determined, when enrollment occurs, and how eligibility is documented for PATH enrolled clients.
- **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).
- **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 illness, and their 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 and budget narrative that includes the local-area provider's use of PATH funds.

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	\$ 0	\$ 0	\$ 0	
No Data Available				

Category	Percentage	Federal Dollars *	Matched Dollars *	Total Dollars	Comments
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b. Fringe Benefits	0.00%	\$ 0.00	\$ 0.00	\$ 0.00	
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Category	Federal Dollars	Matched Dollars	Total Dollars	Comments
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c. Travel	\$ 0.00	\$ 0.00	\$ 0.00	
No Data Available				

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)				
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i. Other	\$ 0.00	\$ 0.00	\$ 0.00	
No Data Available				

j. Total Direct Charges (Sum of a-i)	\$ 0.00	\$ 0.00	\$ 0.00	
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Category	Federal Dollars *	Matched Dollars *	Total Dollars	Comments
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k. Indirect Costs (Administrative Costs)	\$ 0.00	\$ 0.00	\$ 0.00	
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l. Grand Total (Sum of j and k)	\$ 0.00	\$ 0.00	\$ 0.00	
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Source(s) of Match Dollars for State Funds:

Estimated Number of Persons to be Contacted: 0 Estimated Number of Persons to be Enrolled: 0

Estimated Number of Persons to be Contacted who are Literally Homeless: 0

Number staff trained in SOAR in grant year ending in 2024: 0 Number of PATH-funded consumers assisted through SOAR: 0

FY 2025 PATH FOA Catalog No.: 93.150 FOA No.: SM-24-F2

Footnotes:

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II. Executive Summary

Intended Use Plans

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.
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Category	Federal Dollars	Matched Dollars	Total Dollars	Comments
a. Personnel	\$ 0	\$ 0	\$ 0	
No Data Available				

Category	Percentage	Federal Dollars *	Matched Dollars *	Total Dollars	Comments
b. Fringe Benefits	0.00%	\$ 0.00	\$ 0.00	\$ 0.00	

Category	Federal Dollars	Matched Dollars	Total Dollars	Comments
c. Travel	\$ 0.00	\$ 0.00	\$ 0.00	
No Data Available				
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	\$ 0.00	\$ 0.00	\$ 0.00	
No Data Available				
j. Total Direct Charges (Sum of a-i)	\$ 0.00	\$ 0.00	\$ 0.00	

Category	Federal Dollars *	Matched Dollars *	Total Dollars	Comments
k. Indirect Costs (Administrative Costs)	\$ 0.00	\$ 0.00	\$ 0.00	
l. Grand Total (Sum of j and k)				
	\$ 0.00	\$ 0.00	\$ 0.00	

Source(s) of Match Dollars for State Funds:

Estimated Number of Persons to be Contacted:	0	Estimated Number of Persons to be Enrolled:	0
Estimated Number of Persons to be Contacted who are Literally Homeless:	0		
Number staff trained in SOAR in grant year ending in 2024:	0	Number of PATH-funded consumers assisted through SOAR:	0

FY 2025 PATH FOA Catalog No.: 93.150 FOA No.: SM-24-F2

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II. Executive Summary

Intended Use Plans

<b>Community Bridges Inc.</b> 1855 W Baseline Rd Ste. 101 Mesa, AZ 85202 <b>Contact:</b> Anne Johnston <b>Email Address:</b> ajohnston@cbridges.com	<b>Provider Type:</b> Social service agency <b>PDX ID:</b> AZ-011 <b>State Provider ID:</b> AZ-011 <b>Contact Phone #:</b> 4808317566
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- **Budget Narrative** – Provide a budget and budget narrative that includes the local-area provider's use of PATH funds.

Category	Federal Dollars	Matched Dollars	Total Dollars	Comments
a. Personnel	\$ 0	\$ 0	\$ 0	
No Data Available				

Category	Percentage	Federal Dollars *	Matched Dollars *	Total Dollars	Comments
b. Fringe Benefits	0.00%	\$ 0.00	\$ 0.00	\$ 0.00	

Category	Federal Dollars	Matched Dollars	Total Dollars	Comments	
c. Travel	\$ 0.00	\$ 0.00	\$ 0.00		
No Data Available					
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	\$ 0.00	\$ 0.00	\$ 0.00		
No Data Available					
j. Total Direct Charges (Sum of a-i)		\$ 0.00	\$ 0.00	\$ 0.00	

Category	Federal Dollars *	Matched Dollars *	Total Dollars	Comments	
k. Indirect Costs (Administrative Costs)	\$ 0.00	\$ 0.00	\$ 0.00		
l. Grand Total (Sum of j and k)		\$ 0.00	\$ 0.00	\$ 0.00	

Source(s) of Match Dollars for State Funds:

Estimated Number of Persons to be Contacted:

0

Estimated Number of Persons to be Enrolled:

0

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

0

Number staff trained in SOAR in grant year ending in 2024:

0

Number of PATH-funded consumers assisted through SOAR:

0

FY 2025 PATH FOA Catalog No.: 93.150 FOA No.: SM-24-F2

Footnotes:

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II. Executive Summary

Intended Use Plans

La Frontera Center, Inc.

502 W 29th St

Tucson, AZ 85713

Contact: Guillermo Andrade

Email Address: guillermo.andrade@lafrontera.org

Provider Type: Community mental health center

PDX ID: AZ-002

State Provider ID: AZ-002

Contact Phone #: 5204047162

- **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 CoC Program** – HUD's **Continuum of Care (CoC) Program** is designed to promote communitywide commitment to the goal of ending homelessness by providing funding for efforts by nonprofit providers and State and local governments and promoting access to mainstream programs by homeless individuals and families. Describe the organization's participation with local HUD 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 CoC(s), briefly explain the approaches to be taken by the organization to collaborate with the CoC(s) in the areas where PATH operates.
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\* Indicates a required field

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

a. Personnel	\$ 0	\$ 0	\$ 0	
No Data Available				

Category	Percentage	Federal Dollars *	Matched Dollars *	Total Dollars	Comments
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b. Fringe Benefits	0.00%	\$ 0.00	\$ 0.00	\$ 0.00	
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Category	Federal Dollars	Matched Dollars	Total Dollars	Comments
----------	-----------------	-----------------	---------------	----------

c. Travel	\$ 0.00	\$ 0.00	\$ 0.00	
No Data Available				

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	\$ 0.00	\$ 0.00	\$ 0.00	
No Data Available				

j. Total Direct Charges (Sum of a-i)	\$ 0.00	\$ 0.00	\$ 0.00	
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Category	Federal Dollars *	Matched Dollars *	Total Dollars	Comments
----------	-------------------	-------------------	---------------	----------

k. Indirect Costs (Administrative Costs)	\$ 0.00	\$ 0.00	\$ 0.00	
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l. Grand Total (Sum of j and k)	\$ 0.00	\$ 0.00	\$ 0.00	
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Source(s) of Match Dollars for State Funds:

Estimated Number of Persons to be Contacted: 0 Estimated Number of Persons to be Enrolled: 0

Estimated Number of Persons to be Contacted who are Literally Homeless: 0

Number staff trained in SOAR in grant year ending in 2024: 0 Number of PATH-funded consumers assisted through SOAR: 0

FY 2025 PATH FOA Catalog No.: 93.150 FOA No.: SM-24-F2

**Footnotes:**  
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### III. State Level Information

#### A. Operational Definitions

Term	Definition
Individual Experiencing Homelessness:	<p>AHCCCS defines an individual experiencing homelessness utilizing U.S. Department of Housing and Urban Development (HUD)'s Literally Homeless definition:</p> <p>Individual or family who lacks a fixed, regular, and adequate nighttime residence, meaning:</p> <p>Has a primary nighttime residence that is a public or private place not meant for human habitation,</p> <p>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), and</p> <p>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.</p>
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> <p>Imminent Risk of Homelessness includes one or more of the following criteria:</p> <p>Doubled up living arrangements where the individual's name is not on the lease,</p> <p>Living in a condemned building without a place to move,</p> <p>Arrears in rent/utility payments,</p> <p>Having received an eviction notice without a place to move,</p> <p>Living in temporary or transitional housing that carries time limits, and</p> <p>Being discharged from a health care or criminal justice institution without a place to live.</p>
Serious Mental Illness (SMI):	<p>AHCCCS defines Serious Mentally Illness (SMI) as:</p> <p>Definition</p> <p>"Seriously mentally ill" means persons who as a result of a mental disorder as defined in section A.R.S. §36-501 to 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, the 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 regarding Arizona's Serious Mental Illness (SMI) designation, refer to AHCCCS Medical Policy Manual (AMPM) Serious Mental Illness Eligibility Determination at:</p> <p><a href="https://www.azahcccs.gov/shared/Downloads/MedicalPolicyManual/300/320P.pdf">https://www.azahcccs.gov/shared/Downloads/MedicalPolicyManual/300/320P.pdf</a></p>
	<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 for individuals with co-occurring substance use:</p> <p>For psychotic diagnoses other than substance-induced psychosis (bipolar I disorder with psychotic</p>

Co-occurring Disorders (COD):

features, delusional disorder, major depression, recurrent, severe, with psychotic features, schizophrenia, schizoaffective disorder, and any other diagnosis of persistent psychotic disorder) functional impairment is presumed to be due to the qualifying mental health diagnosis.

For other qualifying psychiatric disorders, functional impairment is presumed to be due to the psychiatric diagnosis, unless:

- 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 actively using substances or experiencing symptoms of withdrawal from substances. In order to make such determinations, the assessor shall first look at a period of either 30 days or longer of abstinence, or 60 days or longer of reduced use that is less than the threshold expected to produce the resulting symptoms and disability and establish that the symptoms and resulting disability were no longer present after the 30 or 60 day period and/or no longer required mental health treatment to prevent recurrence of symptoms.

A diagnosis of substance-induced psychosis can only be made if both of the following conditions are present:

- a. There is no psychosis present before a period of substance use that is of sufficient type, duration, and intensity to cause psychotic symptoms, and
- b. The psychosis remits completely (not partially) after a period of abstinence of 30 days or less.

Additional information can be found:

<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 for individuals experiencing homelessness or individuals with serious mental illness who are marginally housed will be served such that there is coordination of service provision to address needs impacted by SMI and provision of permanent housing for those being served with grant funds is prioritized and assured.

I certify that the response to this Narrative Question in the FY 2024 PATH Application is still accurate. Yes ☒ No ☐

If No, please upload documentation with changes for FY 2025.

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**Footnotes:**



### 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.

I certify that the response to this Narrative Question in the FY 2024 PATH Application is still accurate. Yes ☒ No ☐

If No, please upload documentation with changes for FY 2025.

FY 2025 PATH FOA Catalog No.: 93.150 FOA No.: SM-24-F2

**Footnotes:**

### 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; including serving the most vulnerable adults who are **literally** and **chronically** homeless, and to individuals with a history of incarceration.

I certify that the response to this Narrative Question in the FY 2024 PATH Application is still accurate. Yes ☒ No ☐

If No, please upload documentation with changes for FY 2025.

FY 2025 PATH FOA Catalog No.: 93.150 FOA No.: SM-24-F2

**Footnotes:**

### III. State Level Information

#### E. Alignment with State Comprehensive Mental Health Services Plan

Narrative Question:

Describe how the services to be provided using PATH funds are consistent with the State Comprehensive Mental Health Services Plans.

I certify that the response to this Narrative Question in the FY 2024 PATH Application is still accurate. Yes ☒ No ☐

If No, please upload documentation with changes for FY 2025.

FY 2025 PATH FOA Catalog No.: 93.150 FOA No.: SM-24-F2

**Footnotes:**

### 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.

I certify that the response to this Narrative Question in the FY 2024 PATH Application is still accurate. Yes ☒ No ☐

If No, please upload documentation with changes for FY 2025.

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**Footnotes:**

### 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.

I certify that the response to this Narrative Question in the FY 2024 PATH Application is still accurate. Yes ☒ No ☐

If No, please upload documentation with changes for FY 2025.

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**Footnotes:**

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).

I certify that the response to this Narrative Question in the FY 2024 PATH Application is still accurate.    Yes ☒    No ☐

If No, please upload documentation with changes for FY 2025.

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Footnotes:

## **Resource**

### **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.)

Arizona's current contracts for PATH services will be expiring on June 30, 2025. AHCCCS is currently seeking to contract with one (1) or more qualified non-profit providers/organizations as required under the Projects for Assistance in Transition from Homelessness (PATH) Grant with a competitive Request for Proposal (RFP) for the purpose of providing outreach services to people who are suffering from a serious mental illness and/or are suffering from a SMI and a co-occurring disorder who are homeless or at imminent risk of becoming homeless in each county across the State. For this RFP AHCCCS solicited PATH services statewide in hopes to expand PATH funding to other counties throughout Arizona. The solicitation closes on April 1, 2025 and the evaluation period of bids will be completed after the PATH Application is submitted to SAMHSA.

Arizona will submit updated information once the RFP has been awarded via a request a revision request in WebBgas.

To determine areas of need, Arizona relies on annual street count data, PATH annual report data and population by census data. In addition, an independent contractor has been hired to assess the current areas of need and an appropriate allocation methodology

### III. State Level Information

#### I. Location of Individuals with Serious Mental Illnesses or Co-Occurring Disorders who are Experiencing Homelessness

Narrative Question:

Indicate the number of individuals with SMI/COD 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.

I certify that the response to this Narrative Question in the FY 2024 PATH Application is still accurate. Yes ☒ No ☐

If No, please upload documentation with changes for FY 2025.

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**Footnotes:**



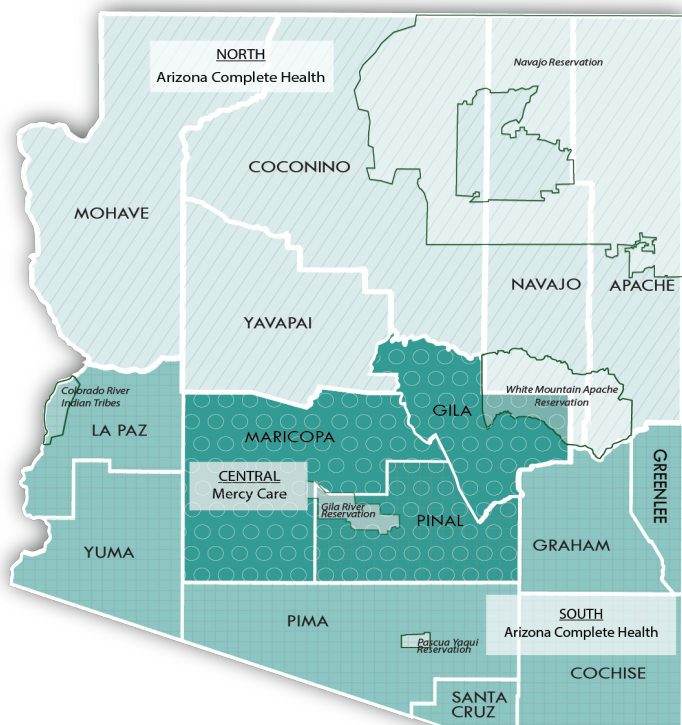
I. Location of Individuals with SMI or Co-Occurring Disorders who are Experiencing Homelessness.

Indicate the number of individuals with SMI/COD 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.

**Arizona 2023 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	1642	312	432
Maricopa County	9435	1309	1300
Pima County	2102	687	639

# ACC-RBHA/TRBHA Map Effective October 1, 2024



Note: Zip codes 85542, 85192, 85550 representing San Carlos Tribal area are included in the South GSA.

### 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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**Footnotes:**

Arizona’s required PATH match contributions are made available via the State General Fund Non-Medicaid Seriously Mentally Ill Services appropriation. These funds are protected by state statute and the contribution is and will be available at the beginning of each grant period.

### III. State Level Information

#### K. Other Designated Fundings

Narrative Question:

Indicate whether the mental health block grant, substance use prevention, treatment, and recovery services block grant, or general revenue funds are designated specifically for serving eligible individuals.

I certify that the response to this Narrative Question in the FY 2024 PATH Application is still accurate. Yes ☒ No ☐

If No, please upload documentation with changes for FY 2025.

FY 2025 PATH FOA Catalog No.: 93.150 FOA No.: SM-24-F2

**Footnotes:**

### III. State Level Information

#### L. Data

Narrative Question:

Describe the state/territories' 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.

I certify that the response to this Narrative Question in the FY 2024 PATH Application is still accurate. Yes ☒ No ☐

If No, please upload documentation with changes for FY 2025.

FY 2025 PATH FOA Catalog No.: 93.150 FOA No.: SM-24-F2

**Footnotes:**

#### L. Data

Describe the state/territories and providers' participation in HMIS and describe plans for continued training and how the state will support new local 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.

All Arizona PATH providers are fully utilizing HMIS for documenting all PATH services. AHCCCS continues to support HMIS training and activities for its contractors, which includes alerting them of SAMHSA Homeless and Housing Resource Network webinars, the Learning Community Webinars, or other beneficial technical assistance opportunities as they become available or as needed. Each PATH contractor has a budgeted line item for HMIS support, licenses, and training.

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 and annual 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. The PATH Administrator at AHCCCS meets with the providers monthly to address any identified issues, review successes, and provide guidance/technical support if/as needed.

#### **Arizona CoCs:**

**Maricopa Association of Governments** is the HMIS Lead Agency for Maricopa County.

**Tucson Pima Collaboration to End Homelessness** is the HMIS Lead Agency for Pima County.

**Arizona Department of Housing, Balance of State Continuum of Care** is the HMIS Lead Agency for the remaining thirteen counties within the state of Arizona.

### 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.

I certify that the response to this Narrative Question in the FY 2024 PATH Application is still accurate. Yes ☐ No ☒

If No, please upload documentation with changes for FY 2025.

FY 2025 PATH FOA Catalog No.: 93.150 FOA No.: SM-24-F2

**Footnotes:**



### **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 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.

Arizona is currently in a Request for Proposal (RFP) process to award PATH Services. Once the RFP is awarded, those staff not trained in SOAR, will have 90 days from award to submit their certificate of completion of the on-line SOAR training.

AHCCCS has made it a contractual requirement that every PATH funded contractor have staff trained in SOAR. This is monitored by each contractor submitting their staff's certificate of completion of the online SOAR training. Any new staff hired after the annual application date will have 90 days to complete the online SOAR training and submit their certificate of completion to the AHCCCS PATH Administrator.

<b>PATH Contractor</b>	<b>County</b>	<b>Number of Staff Trained</b>
TBD	TBD	TBD
TBD	TBD	TBD
TBD	TBD	TBD
TBD	TBD	TBD

By completing the 20 hours of online 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 must establish positive collaborative relationships with the Social Security Administration (SSA) offices in their respective counties/Geographic Service Areas (GSAs).

### 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.

I certify that the response to this Narrative Question in the FY 2024 PATH Application is still accurate. Yes ☒ No ☐

If No, please upload documentation with changes for FY 2025.

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**Footnotes:**

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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Footnotes: