



PATH

Projects for Assistance in
Transition from Homelessness



**Formula Grant Program
FFY 2022 – SFY 2023**

Kentucky Department for Behavioral Health, Developmental and Intellectual Disabilities
Division of Behavioral Health

March 9, 2023



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I. Executive Summary

The Kentucky Department for Behavioral Health, Developmental and Intellectual Disabilities (KDBHDID) will continue PATH Grant funding in SFY 2024 to the Community Mental Health Centers (CMHC) currently providing PATH services. PATH Formula Grant funds will be contracted to the selected CMHCs for project implementation and each will provide a \$1 non-federal match for every \$3 in PATH funds. All persons served in these programs will be adults, age 18 and above.

Organization	PATH Funding/ Match	Service Area	Number Contacted	Number Enrolled	Services Funded by PATH
LifeSkills	\$118,500/ \$39,500	Bowling Green and surrounding area	150 40% literally homeless	86	Outreach, case management, staff training, referral to community resources and supportive services
Seven Counties	\$100,000/ \$33,333	Jefferson County	400 100% literally homeless	50	Outreach, case management, staff training, referral to community resources and supportive services
New Vista /Hope Center (Shelter)	\$100,000/ \$45,065	Fayette County	70 90% literally homeless	65	Outreach, case management, staff training, referral to community resources and supportive services
NorthKey	\$73,000/ \$256,478	Covington and surrounding area	150 60% literally homeless	120	Outreach, case management, referral to community resources and supportive services
Kentucky River Community Care	\$38,000/ \$12,667	Hazard and surrounding area	75 65% literally homeless	45	Outreach, case management, staff training, housing support services, and referral to community resources and supportive services
Cumberland River	\$38,000/ \$19,506	Laurel County	125 30% literally homeless	25	Outreach, case management, housing support services

Kentucky’s PATH Grant process includes, as criteria for funding, an emphasis on serving literally homeless persons and on providing outreach and case management services, as well as staff training.

The CMHCs provide matching funds through the use of existing facilities, equipment, supplies, region-wide administrative support, as well as matching funds for salary, benefits and travel. Matching funds are provided through state general funds, community resources and in-kind donations from community partners. All funds are available at the beginning of the grant period.

All providers are required to enter PATH data in the Homeless Management Information System (HMIS). Kentucky’s HMIS administrator continues to provide PATH-specific HMIS training to the providers, as well as ongoing training in utilizing the system.

State Budget

PROPOSED BUDGET												
STATE												
Administrative Fee \$14,059												
PROVIDER												
	LifeSkills		Seven Counties		New Vista/ HOPE Center		NorthKey		Kentucky River		Cumberland River	
	PATH	Match	PATH	Match	PATH	Match	PATH	Match	PATH	Match	PATH	Match
Personnel	69,873		53,102	17,523	69,685	37,625	47,421	170,881	23,881	11,479	18,117	7,937
Fringe Benefits	24,457		13,275	4,381	20,315	7,440	12,329	44,429	7,164	37	12,655	5,543
Travel	1,200		1,000	330			225	675	1,000			
Equipment	300		500	165								
Supplies	200		20,000	6,600			2,275	6,825	1,000			
Contractual	200											
Housing	6,750											
Other Operating	6,600	39,500	2,123	701			3,450	10,350	1500		3,773	4,251
Region-wide Administrative Support	8,920		10,000	3,633	10,000		7,300	23,316	3455	1152	3,455	1,775
Total	118,500	39,500	100,000	33,333	100,000	45,065	73,000	256,476	38,000	12,668	38,000	19,506

Contractual: \$467,500

State Admin. Fee: \$ 14,059

PATH Funding: \$481,559

Match Funds: \$406,548



II. State Level Information

Definitions

For the purposes of the PATH Formula Grant Program, the KDBHDID has adopted the following definitions for homelessness, imminent risk of becoming homeless, serious mental illness, and dual diagnosis:

- **Individual Experiencing Homelessness**

Kentucky has adopted the definition from Section 103 of the McKinney-Vento Act, as amended by the HEARTH Act: The categories are:

- (1) Individuals and families who lack a fixed, regular, and adequate nighttime residence and includes a subset for an individual who resided in an emergency shelter or a place not meant for human habitation and who is exiting an institution where he or she temporarily resided;
- (2) individuals and families who will imminently lose their primary nighttime residence;
- (3) unaccompanied youth and families with children and youth who are defined as homeless under other federal statutes who do not otherwise qualify as homeless under this definition; and
- (4) individuals and families who are fleeing, or are attempting to flee, domestic violence, dating violence, sexual assault, stalking, or other dangerous or life-threatening conditions that relate to violence against the individual or a family member.

- **Imminent Risk of Becoming Homeless**

"At risk" is operationally defined as a person who meets the definition of serious mental illness and who:

- has a history of unstable or inadequate housing arrangements;
- resides in transitional or temporary housing;
- has a basic unmet need for such things as adequate income, stable housing, and employment;
- is presently in a psychiatric hospital with discharge pending and a history of not engaging in the mental health system; or
- has a substance abuse problem.

- **Serious Mental Illness (SMI)**

Kentucky law (KRS 210.005) defines serious (a.k.a. chronic) mental illness as follows:

Mental illness is a diagnostic term that covers many clinical categories, typically including behavioral or psychological symptoms, or both, along with impairment of personal and social function. It is specifically defined and clinically interpreted through reference to criteria contained in the Diagnostic and Statistical Manual of Mental Disorders (Fourth Edition) and any subsequent revision thereto, of the American Psychiatric Association. Chronic means that clinically significant symptoms of a mental illness have persisted in the individual for a continuous period of at least two years, or that the individual has been hospitalized for mental illness more than once in the last two years, and that the individual is presently significantly impaired in ability to function socially or occupationally, or both.

The operational definitions used in Kentucky that describe diagnosis, duration, and disability are listed below:

- (1) *Diagnosis (major mental disorders)*: Schizophrenia; major affective disorders; certain personality disorders; and other disorders where duration or disability criteria are met.
- (2) *Duration*: More than one psychiatric hospital admission in the past year; one hospitalization in the past year whose duration extended beyond thirteen (13) days; or three or more psychotic episodes within a year causing the person's community tenure to be seriously threatened; or the illness is expected to continue for two years.
- (3) *Disability*: Dysfunctional in at least two of the following areas: vocational; social relations; independent living; self-care; and use of community resources.

- **Co-occurring Serious Mental Illness & Substance Use Disorders**

A person is considered dually diagnosed with serious mental illness and substance use disorder if the person meets the definition of serious mental illness as defined by Kentucky statute and has substance use related problems which exacerbate the person's psychiatric symptomatology or seriously impair the person's ability to function in two of the following areas: vocational, residential, or activities of daily living.

No person may be excluded from the PATH Formula Grant program because they have a diagnosis of substance use disorder, if there is a concomitant mental illness diagnosis.

Collaboration

KDBHDID collaborates with New Beginnings Bluegrass (NBB), the State Housing Finance Agency, on many projects, including the Olmstead Housing Initiative, which provides rental and other housing assistance for persons with SMI and a history of institutionalization. It also assists person with SMI who are at risk of institutionalization, such as persons experiencing homelessness. The program provides not only rental assistance, but also deposits, moving expenses, and furniture.

Other collaborative projects have included the development of supportive housing units and set-aside units for special-needs populations, including the Olmstead and homeless populations. KHC is also the administrator for the Balance of State Continuum of Care (CoC), and the HMIS Administrator.

KDBHDID also collaborates with supportive housing providers for the SMI population in the Louisville and Lexington areas through contracting for services. These programs provide stability and permanent housing for the SMI population.

Veterans

Consideration for demonstrated effectiveness and agency wide initiatives in serving veterans have always been included in the review of PATH applications submitted by the CMHCs. KDBHDID has a Service Members, Veterans and their Families (SMVF) Coordinator who provides consultation on SMVF issues and assists the State PATH Contact in facilitating contact between the PATH Programs and SMVF services.

LifeSkills has developed strong partnerships with the Department of Veteran Affairs, Office of Veteran Employment Services, the local American Legion and Centerstone, a local provider of

programs and services to American service members, veterans and their families. LifeSkills refers all homeless veterans through the VETT voucher program to assist with housing needs.

Seven Counties' PATH staff work closely with the local Veterans Administration Healthcare for Homeless Veterans outreach team, and is also a partner in a community initiative called Veterans Community Alliance of Louisville (VCAL). This initiative includes the Kentucky Department of Veterans Affairs, Volunteers of America, and the Veterans Administration in an effort to better coordinate services for veterans.

In the New Vista region, the Hope Center's *Veteran Administration Grant Per Diem Program* works in coordination with the HOPE Center Mental Health Program to help male veterans experiencing homelessness achieve stabilization through behavioral health services provided either through the PATH funded program or through programs provided by the Veterans Administration for eligible veterans.

NorthKey Community Care collaborates with the Kentucky Office of the Cincinnati Veterans Administration Medical Center, Department of Psychiatry, and is committed to providing case management, therapy and psychiatric services to homeless veterans.

Kentucky River Community Care (KRCC) accommodates the special needs of homeless veterans through its collaboration with the Kentucky Department of Veterans Affairs, the Homeless Veterans Trust Fund and other veterans agencies in Kentucky. Homeless veterans with SMI receive priority consideration for PATH funded services, and receive case management and access to KRCC emergency apartments. KRCC maintains communications with the Veterans Services Center, in Hazard, to coordinate services, and accesses the East Kentucky Veterans Center in Hazard as a referral resource for long-term care for disabled veterans.

Cumberland River Behavioral Health works closely with the Veteran Administration office, in Corbin, to identify veterans who need assistance. Veterans identified by the VA staff as needing housing services are referred to Cumberland River and are given priority access to services.

Alignment with PATH goals

Kentucky's PATH Grant funding includes, as a criteria for funding, an emphasis on serving literally homeless persons and on providing outreach and case management services, as well as staff training. Most programs work with local homeless shelters either through a formal contract or through informal contacts; providing outreach through those programs or in-reach into the shelters. Although other PATH-eligible services are provided by some providers, the emphasis continues to be on outreach and case management and several programs focus on these areas.

LifeSkills, Inc. allocates PATH funds primarily in Warren County, where the majority of homeless/SMI individuals were identified, and collaborates with the Salvation Army, HOTEL Inc., the local Department for Community Based Services, and various other services agencies, to ensure those who are homeless and have SMI receive appropriate services, and that their overall basic needs are met. The PATH Case Manager also has been making new partnerships with other emergency shelters in order to receive referrals and provide outreach services. The PATH Case Manager and the Supported Housing Manager are trained in the Vulnerability Index- Service Prioritization Decision Assistance Prescreen tool (VI-SPDAT), and are working with the local Continuum of Care to implement Coordinated Entry. LifeSkills also attends CoC Priority meetings with other housing agencies to help identify and prioritize those who are most vulnerable. It is estimated that 40% will be literally homeless.

Seven Counties operates a Mobile Outreach Team that provides street outreach and in-reach to shelters and other sites where homeless individuals receive assistance. PATH funds are used to help fund a team of two outreach case managers, a peer support specialist and a project coordinator, to provide assistance in obtaining and coordinating social services, including services related to daily living activities, personal financial planning and transportation services; assistance in obtaining income support services, including housing assistance, food stamps and supplemental security income benefits; and link to other community resources such as primary health services, job training, education services, and housing. All individuals served in this program are literally homeless, and most are projected to be chronically homeless, as well.

In the New Vista Region, PATH funds are allocated to serve residents of the Hope Center, which operates a mobile outreach program. New Vista outreach staff are included in this program and they initiate contact with homeless individuals in the community, offer referrals to shelters, physical health providers and other essential services and assess the need for mental health services. This provides a contact point to some of those individuals who are not easily engaged in treatment through other methods and helps facilitate their transition into homeless services. New Vista has elected to locate a service site at the Hope Center to provide services to those individuals who have additional psychosocial barriers in accessing mental health services. Having this link to individuals at the Hope Center helps facilitate the process of ensuring that follow up services are in place through New Vista' outpatient services as individuals transition out of the Hope Center and into permanent housing. PATH funds are used to provide an Outreach employee on the HopeMobile or an Intake Coordinator at the shelter. Services include emergency shelter, clothing, food, acute psychiatric stabilization, benefits access, psychoeducation, and dual disorder treatment. Services are also coordinated with other agencies to provide for immediate needs, suicide prevention, payee services, referrals for vocational rehabilitation, and assistance with identifying permanent housing options. Most individuals served by this process (90%) are projected to be literally homeless, and most are chronically homeless, as well.

NorthKey provides outreach and collaboration with numerous other organizations to reach the greatest number of mentally ill homeless individuals in the eight county northern Kentucky service area. NorthKey uses outreach to shelters, soup kitchens, and other homeless services to offer mental health and housing services to homeless individuals. Outreach is also extended to the local domestic violence shelter, the medical clinic for the homeless, as well as regional substance use and mental health treatment centers. In addition, NorthKey has reached out to area police departments and libraries to increase awareness of homeless and crisis services and provides information about PATH services to peace officers as a part of the Crisis Intervention Team trainings. It is estimated that 20% will be literally homeless.

Kentucky River Community Care, Inc. (KRCC) has a network of Case Managers, Community Support Associates, Peer Support Specialists, Service Coordinators, Recovery Managers, Outreach Workers and Recovery Coaches who come into contact with persons who are homeless or at risk of becoming homeless; and refer to the Outreach Case Manager for homeless services. The KRCC Outreach Case Manager assists individuals with obtaining social security cards, birth certificates, driver's licenses and other identifying information needed to get housing; and also operates five emergency apartments for KRCC clients who are homeless and have a serious mental illness. The Outreach Worker makes regular contact with the program participants affording frequent support and assistance while seeking permanent housing, and assists in securing vouchers

or other housing subsidies. It is estimated that at least 57% will be literally and chronically homeless.

Cumberland River Behavioral Health provides outreach to homeless individuals with serious mental illness and/or co-occurring disorders in local hospitals, including psychiatric hospitals, and frequent contact is made with area homeless shelters. Individuals are then assessed for housing and the need for additional services such as supportive employment, community support services, peer support, case management and mental health/substance abuse treatment. PATH funds may be used for assistance with deposits and first month rent, etc. It is estimated that at 30% will be literally homeless.

Alignment with State Comprehensive Mental Health Services Plan

The use of PATH Formula Grant funds has served an integral role in the development of specialized services to persons with SMI who are homeless. By combining PATH and other McKinney funds with state and federal funds, KDBHDID and the CMHCs attempt to provide a statewide system of outreach, community support, and mental health services.

Most CMHCs offer individualized services designed to alleviate homelessness as well as to provide “mainstream” mental health treatment to persons who are homeless and have SMI. Of the fourteen CMHCs in Kentucky:

- All regions give a service priority to homeless individuals;
- All regions do consultation with local shelters;
- 12 participate in regional Continuum of Care meetings;
- 11 regions have staff dedicated to homeless individuals;
- 9 regions regularly visit local homeless shelters;
- 5 regions have a walk-in clinic; and
- 4 regions do street outreach.

All regions also receive referrals from the community and other agencies, and provide case management services. Additionally, KDBHDID initiated a Direct Intervention, Vital Early Response Treatment System (DIVERTS) program, which offers funding for each region for Assertive Community Treatment Teams, Supportive Housing services, Supported Employment services and Peer Support. These can provide the intensive services that PATH enrolled individuals may need once they transition to mainstream services.

KDBHDID also administers a Homeless Prevention Project, in collaboration with the Louisville Coalition for the Homeless, Seven County Services, The Adanta Group and the Kentucky Department of Corrections in both a rural and an urban area. This program assists persons being discharged from state facilities, such as prisons, state psychiatric hospitals and foster care, with accessing housing and mainstream services, in an effort to limit discharges to homeless shelters. This program is coordinated with the Seven Counties PATH Program in the urban area (Louisville), and has been expanded this year to include New Vista and Lifeskills.

Process for Providing Public Notice

The Kentucky State Behavioral Health Planning and Advisory Council, consisting of consumers, family members, providers, and other key stakeholders, meets quarterly to review the utilization of block grant funds, to assess the implementation of the state plan and to determine funding priorities. The award of PATH funds is included in this process. Specific goals and objectives for

services to homeless persons with serious mental illness have been reviewed and revised annually by the Planning Council for inclusion in the annual Block Grant application.

Kentucky's PATH application is posted on the KDBHDID web-site. Comments are solicited from consumer and family groups, homeless advocacy organizations, service providers, Kentucky Interagency Council on Homelessness members, and the general public; and directed to the state PATH Contact.

Programmatic and Financial Oversight

KDBHDID reviews provider records on a regular, on-going basis, based upon measureable service deliverables, to account for the use of funds and compliance with the terms and conditions of the contract. This monitoring, including CMHCs, their subcontractors and PATH programs, focuses on the measurement of fiscal and programmatic soundness, consistency with standards, effectiveness, and the impact of services on persons served. The strategies for administrative and program oversight include the following.

Internal Program & Financial Monitoring

An annual Plan and Budget must be developed by each of the CMHCs. Submissions must be within the guidelines provided by KDBHDID and are reviewed and approved based on the document's consistency with Departmental priorities, service definitions, and standards.

The CMHCs are required to submit quarterly financial statements, and monthly client and event data, which include the number of persons served and units of service. All of the available information is monitored for contract compliance and for progress toward meeting goals and objectives as outlined in the Plan & Budget submission.

The CMHCs are required to submit a detailed financial cost report, which includes the PATH award, within 60 days after the close of the fiscal year. The cost report is audited on-site by the Division of Audits and Investigations. The Boards are also required to have a financial audit conducted by an independent firm at the close of each fiscal year. The State Auditor of Public Accounts also conducts an annual audit of the Department and the CMHCs to assure compliance with federal block grant requirements. In addition, the Federal Office of Policy and Budget has the option of auditing KDBHDID and the CMHCs for compliance with federal regulations.

On-Site Program & Administrative Reviews

The Department includes a Division of Program Integrity responsible for monitoring all department contracts, including those with the CMHCs. This also includes the PATH Grant with specific grant requirements built into the monitoring tools utilized. The standards address services, programs and operations essential to good management; including administrative and fiscal controls, staff training/development and safety/emergency procedures; and incorporate measurable outcomes from established performance indicators. The CMHCs also monitor and conduct reviews of their subcontractors through data gathering and site visits, to assure they are meeting specific grant requirements.

Other Agency Review of CMHCs

The fourteen (14) CMHCs are monitored and evaluated by the Cabinet for Health and Family Services (CHFS) in a variety of ways. Within CHFS, the Department for Public Health, the Department for Medicaid Services, the Office of Inspector General, the Division of Healthcare, the Division of Audits and Investigations, and the Office of Administrative Services have varying roles in the monitoring and evaluation of these Centers. Many of the CMHCs are also involved in

the process of obtaining, and maintaining, accreditation through The Joint Commission or the Commission on Accreditation of Rehabilitation Facilities (CARF).

Direct Monitoring and Review of PATH Programs

The State PATH Contact also conducts periodic reviews of the Centers' PATH Programs, including subcontractors, which include interviews with staff and regional administrators, year-end data and trend analysis including cost per person served, performance comparisons with PATH programmatic goals, and on-site program reviews and observations. Evaluation of each programs' success in meeting performance goals drives funding allocations in years when there is not a full RFA process.

Selection of PATH Local-Area Providers

Kentucky is divided into fourteen geographic regions for the purposes of planning and providing publicly funded community mental health services. For each region, a CMHC has been established as the planning authority and service provider. The CMHCs are independent, non-profit organizations, overseen by a volunteer board of directors that broadly represents stakeholders, and are licensed by the Cabinet for Health and Family Services. CMHCs have collaborated with KDBHDID to expand the array of community mental health services to include community support services, such as targeted services to homeless and rural populations.

Kentucky allocated funds for many years to three urban and two rural regions; with the rural programs covering a larger geographical area, to serve a dispersed population. KDBHDID awarded funding based on a review of each Center's past performance and current proposals, how well they met PATH Program goals and requirements, on cost effectiveness, and targeting of services to the greatest number of persons who are homeless and have SMI.

In SFY 2012, KDBHDID offered a Request for Applications for PATH funding to all the CMHCs. Emphasis was placed on serving persons most in need of services (i.e., literally homeless), and providing services which are not supported by mainstream mental health programs. Extra points were given in the scoring to programs which evidenced consideration for veterans, collaboration with the HUD Continuum of Care and implementation of SOAR strategies. Eleven out of fourteen regions applied for funding, and seven were approved. KDBHDID awarded the PATH Formula Grant to projects in four of the regions previously funded and to three new regions. This covered most of the regions with the highest number of persons who are homeless and have a serious mental illness. Although there were some regions with a higher number of identified homeless persons than in regions awarded funding, those higher regions did not apply for funding.

In 2019 the Pathways region decided to discontinue their PATH Program, hence they are not included in this application. LifeSkills requested to expand their program and funding was reallocated there. This is expected to continue until such time as a new RFP process is offered.

The CMHCs are encouraged to collaborate with local shelters and homeless service providers, and some have informal relationships. As of now, only New Vista directly contracts with a local homeless provider (The HOPE Center), but efforts are ongoing to expand the reach of PATH services to additional areas.

Location of Individuals with Serious Mental Illnesses who are Experiencing Homelessness

The K-Count, Kentucky's Point-In-Time Count of the Homeless, is a combined effort of Kentucky Housing Corporation (KHC), the Kentucky Interagency Council on Homelessness (KICH), the

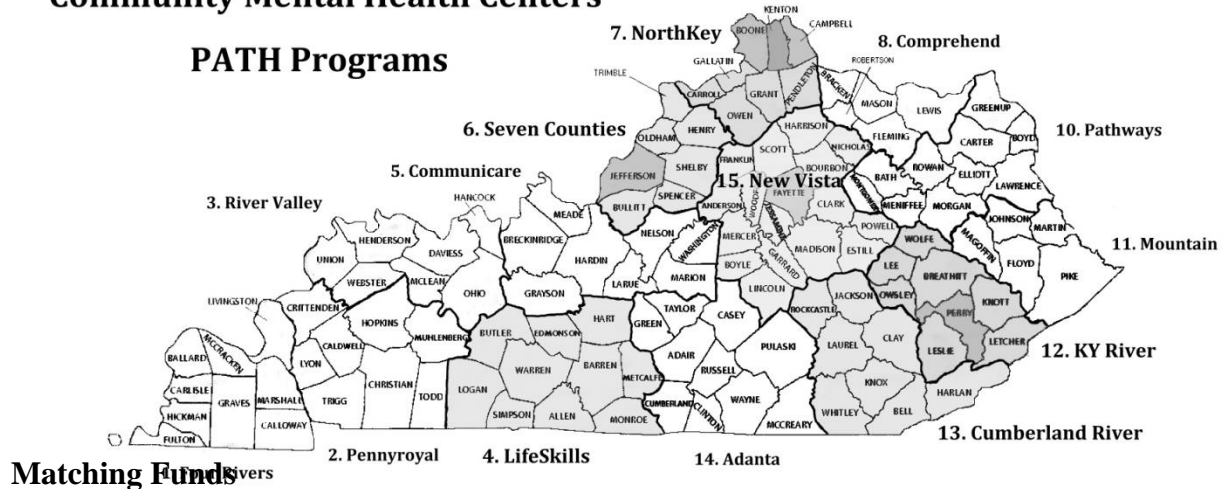
Coalition for the Homeless in Louisville, and the Central Kentucky Housing and Homeless Initiative in Lexington. These organizations coordinate with homeless service providers, volunteers, local and state officials, and government agencies across Kentucky to organize a statewide count of the homeless. The 2022 count is the latest count available and identified 3,984 sheltered and unsheltered individuals; including 2,410 in emergency shelters, 490 persons in transitional housing, 1084 unsheltered, 328 veterans and 50 veterans who were chronically homeless. This shows an overall decrease of 27 persons in the total number of identified homeless persons since 2021, but more people were unsheltered than in transitional housing and shelters from the previous count. There was a decrease in veteran homelessness.

A breakdown of the regions and the target populations is below.

CMHCs*	Total Homeless	Homeless SMI	Chronically Homeless	Homeless Veterans
1. Four Rivers	120	15	13	2
2. Pennyroyal	115	20	10	43
3. River Valley	217	37	41	13
4. LifeSkills	151	18	16	8
5. Communicare	165	11	11	6
6. Seven Counties	1187	259	319	155
7. NorthKey	315	69	43	16
8. Comprehend	43	1	2	0
9/10. Pathways	150	26	19	3
11. Mountain	163	15	25	7
12. Kentucky River	50	25	16	3
13. Cumberland River	231	15	14	3
14. Adanta	47	7	9	1
15. New Vista	1030	134	191	68

* Regions with PATH Programs are shaded in grey. Dark grey indicates a county specific program; medium grey indicates a region-wide or extended service area.

Community Mental Health Centers



The CMHCs that are awarded PATH Grant funding provide matching funds through the use of existing facilities, equipment, supplies and direct and region-wide administrative support, as well as matching funds for salary, benefits and travel. Matching funds are provided through state general funds, community resource funding and in-kind donations from various community partners/individuals. All funds are available at the beginning of the grant period.

All CMHCs are required under Kentucky statute to provide outpatient services, emergency services, partial hospitalization or psychosocial rehabilitation services, consultation and education services, and services to persons with developmental and intellectual disabilities. KDBHDID also provides state general funds to the CMHCs to provide evidenced-based practices such as Assertive Community Treatment, Supported Employment, Supportive Housing and Peer Support. All of these services, as appropriate, are available to persons who are homeless.

Other Designated Funding

Kentucky's Community Mental Health Services Performance Partnership Block Grant, developed pursuant to Public Law 99-660, includes a comprehensive and detailed plan to provide a system of outreach and specialized services to persons who are homeless and who have a serious mental illness and/or a substance use disorder. Services provided by the PATH Formula Grant and other McKinney monies are consistent with and instrumental to the development of a comprehensive array of services for this population. KDBHDID collaborates with the Specialized Housing Programs within the Kentucky Housing Corporation in the maintenance of local Continuum of Care Committees. CMHCs are encouraged to participate in this process for the benefit of individuals with SMI who may be or become homeless in their regions.

The CMHCs use a variety of strategies to develop housing options for individuals with serious mental illnesses, including those served in the PATH Program. Some CMHCs focus on actual housing development by employing regional housing developers; others focus on housing access by administering their own Section 8 set-aside programs or through collaborative arrangements with local public housing agencies. In the fourteen regions:

- There are currently 809 units in 68 projects operated by the CMHCs;
- All regions have a Housing Coordinator, and have developed a regional housing plan;
- All regions provide specialized housing training to agency staff;
- 12 regions have organized formal supported housing programs;
- 7 regions operate housing projects that provide residential support; and
- 5 regions are involved in housing development.

KDBHDID provides state funds to the St. Johns' Day Center in Louisville to employ an outreach worker. This staff person provides on-site assessment and links individuals with services at Seven Counties. During SFY 23, CMHS Block Grant funds will continue to support a Rural Homeless Outreach program in the Mountain CMHC area. The goals of this program will be the identification and linkage of individuals with serious mental illness who are homeless with mainstream mental health services and the provision of consultation and training to homeless service providers. The service providers will primarily be members of the region's Continuum of Care group charged with developing regional, collaborative strategies to serve the homeless.

Data

All Kentucky PATH Programs are reporting in HMIS, and have reported in HMIS for other grants for some time. Any costs relating to HMIS data reporting can be covered by the regions' administrative fees for the PATH Program. The State PATH Contact works closely with the state HMIS Administrator, the Kentucky Housing Corporation (KHC), and can arrange PATH-specific HMIS training as needed. Programs can also access regularly scheduled trainings on HMIS from the HMIS Administrator, and request assistance through the HMIS Help Desk, to answer any questions the providers may have. Documents on training, reports, agency forms, and general information are available on the KHC website.

SSI/SSDI Outreach, Access and Recovery (SOAR)

KDBHDID collaborates with Kentucky Housing Corporation (KHC) and the Kentucky Interagency Council on Homelessness on the SSI/SSDI Outreach, Access, and Recovery (SOAR) Technical Assistance Initiative. Staff from the Welcome House in Northern KY have been certified to provide this training, as well as staff from the Healthcare for the Homeless program in Louisville. These programs are available to PATH staff for consultation and assistance, and occasional SOAR Trainings. New PATH program staff are referred to the online SOAR training provided by Policy Research Associates (PRA).

Seven Counties maintains a close relationship with the Healthcare for the Homeless Program in Louisville. The Hope Center has one staff member and New Vista has two that have completed the SOAR training and work directly with persons enrolled in the PATH Program. The NorthKey PATH team maintains close contact with Welcome House's SOAR Benefits Outreach Program and visits Welcome House as needed to connect with homeless individuals involved in the SOAR process. In addition, NorthKey's PATH psychiatrist is available to assess PATH clients referred for the SOAR process. LifeSkills has a dedicated case manager for SOAR; Both Kentucky River PATH staff have been trained in SOAR. There are plans to train an additional 8 non-PATH staff this year. Cumberland River has one trained Case Manager, and is planning to have their PATH staff, case managers, and Community Support Associates trained in the coming year. Cumberland River's Case Managers currently assist individuals in accessing community resources, in applying for benefits, and in keeping appointments and completing needed paperwork. They also assist in getting needed information from primary physicians, therapists, psychiatrists and any other professionals that will help in determining eligibility for benefits, and assist persons in appointments with Social Security.

PATH Eligibility and Enrollment

An individual is determined to be eligible for PATH services if the individual has SMI and is homeless or at imminent risk of homelessness. The determination of SMI can be documentation in existing records with the CMHC or state psychiatric hospital, or through assessment by a Qualified Mental Health Professional (QMHP). Since all PATH providers are CMHCs (or subcontracted by CMHCs), QMHPs such as psychiatrists, psychologists, Licensed Clinical Social Workers, etc. are available either as direct PATH staff or through the larger organization. Determination of homelessness or imminent risk of homelessness can be through staff observation, client self-report, or existing HMIS record.

Once the PATH staff have established engagement with the individual, have determined eligibility, and the individual has agreed to work towards a goal with the PATH staff, the PATH staff will open an individual case record that contains demographic information, documentation of PATH eligibility, mutual agreement for the provision of services, and services to be provided. At this

point, the individual is enrolled in PATH services. Enrollment continues until goals are met, such as accessing housing and transitioning to mainstream services, or the individual discontinues participation.

III. Provider Intended Use Plans

LifeSkills, Inc.



Local Provider Description –

LifeSkills, Inc. is a private non-profit Community Mental Health Center, serving 10 counties in south central Kentucky, and is the primary provider of mental health, intellectual disability, and substance abuse services in the region. PATH services will be provided primarily in Warren County, the largest urban area in the region; but Allen, Barren, Butler, Edmonson, Hart, Logan, Metcalfe, Monroe, and Simpson Counties will also be served based on need.

PATH Funding - \$118,500.

Collaboration with HUD Continuum of Care Program –

LifeSkills Supportive Housing Manager and Case Managers are active members of the local Continuum of Care, participate in a regional coalition to address and end homelessness, attend regional Coordinated Entry Priority Meetings and have taken an active role during the annual Point-in-Time Count (the K-Count). LifeSkills Supportive Housing Program provides outreach to those at risk of and to those experiencing homelessness and coordinates efforts with other community partners in order to provide effective and thorough services.

Collaboration with Local Community Organizations –

Key organizations include but are not limited to: Community Action, Department of Community Based Services, Health Departments, Barren River Area Safe Space, Kentucky Housing Corporation, local Housing Authorities, Salvation Army, Jesus Community Center, HOTEL, Inc., Office of Vocational Rehabilitation, Kentucky Targeted Assessment Program, Department of Veteran Affairs and Social Security Administration. PATH clients also have access to LifeSkills Mental Health and LifeSkills Supported Employment. Key services are identified thru an individual assessment and coordination of services is conducted on an on-going basis. LifeSkills staff participates in weekly/monthly community meetings, community events and advisory councils. In addition staff communicates daily with community partners to ensure the needs of those we serve are met.

Service Provision –

- **Priority services / Priority populations**

The LifeSkills PATH program begins a comprehensive coordination with dozens of local and federal programs such as Salvation Army, Helping Others Through Extending Love In the Name of Christ (HOTEL Inc.), Community Based Services, Barren River Area Safe Space (domestic violence shelter), Community Education, and other community agencies providing services to the homeless population. The LifeSkills PATH program will also utilize the VI-SPDAT Assessment to assess clients' vulnerability, refer to Coordinated Entry/other housing service providers, and guide Case Management services. 50% are expected to be literally homeless, with the remainder at risk of homelessness.

- **Gaps in services**

Current gaps include transportation services, revenue producing Supported Employment options & the lack of plentiful psychiatric services. Another gap would be emergency housing & emergency housing for those with medical disabilities in particular. An additional gap is medical detox services.

- **Co-occurring Serious Mental Illness and Substance Use Disorders**

The LifeSkills' PATH program can coordinate referrals to many different services based on need. The services include assessments, individual and group counseling, case management, medication evaluation and management, intensive outpatient treatment, residential treatment, medical detoxification, and inpatient services. These referrals are made based on LOCUS level of care and/or ASAM placement criteria. LifeSkills is able to provide either integrated care or concurrent mental health and substance use disorder services.

- **Eligibility and Enrollment**

An individual is determined to be eligible for PATH services if the individual has serious mental illness and is homeless or at imminent risk of homelessness. The determination of serious mental illness can either be from existing records at LifeSkills or the local state psychiatric hospital, or through assessment by a Qualified Mental Health Professional (QMHP) at LifeSkills. Determination of homelessness or imminent risk of homelessness can be through staff observation, client self-report, or existing HMIS record.

Once the PATH staff have established engagement with the individual, determined eligibility, and the individual has agreed to work towards a goal, the PATH staff will open an individual case record that contains demographic information, documentation of PATH eligibility, mutual agreement for the provision of services, and services to be provided. At this point, the individual is enrolled in PATH services. Enrollment continues until goals are met, such as accessing housing and transitioning to mainstream services, or the individual discontinues participation. Eligibility is documented for PATH-enrolled clients in the individual client file, and in HMIS. Diagnoses information is also documented in the Electronic Health Record for LifeSkills clients.

Data -

LifeSkills currently utilizes HMIS to report data on other grants they receive. The Supported Housing Manager is trained in HMIS, and PATH HMIS, as well as the PATH Case Manager. The PATH Program is fully utilizing HMIS to collect data. LifeSkills can access the trainings provided by the State HMIS Administrator for new staff or continued training. Notices of these trainings are sent to the State PATH Contact and forwarded to the PATH providers.

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

The PATH Case Manager completed SOAR training in FY 2020. SOAR is incorporated into our services offered to PATH participants in need of disability income benefits. We are making strides in this area as our newly hired PATH Case Manager is SOAR trained. The case manager assisted 3 individuals with SOAR applications.

Housing –

LifeSkills' PATH Program partners with LifeSkills' Supportive Housing Programs (CoC Permanent Supportive Housing, Tenant Based Rental Assistance, HOME/Affordable Housing

Trust Fund low-income rental housing), Kentucky Housing Corporation Housing Programs (Samaritan, Safe Havens, Olmstead, Housing Choice Vouchers) as well as local subsidized units and Public Housing Authorities. LifeSkills has provided housing services to persons with serious mental illness for over twenty-three years, services to persons with a substance use disorder for over twenty-one years and has partnered with Kentucky Housing Corporation on various housing programs for over eighteen years. In addition, LifeSkills has partnered with local housing agencies for over 45 years to provide safe and affordable housing to persons with both serious mental illness and substance use disorders.

Staff Information –

The following demographics reflect the staff who are currently PATH funded or match funded:

- Caucasian 100%

Staff interact with clients as individuals, avoiding preconceived ideas or expectations about an individual based on age, gender, and racial/ethnic differences. Staff also receive on-going informal training on sensitivity in the workplace.

LifeSkills staff are required to complete cultural diversity training. This training gives employees foundational knowledge about cultural diversity and why this information is important for human services employees to promote behaviors that are culturally sensitive. In addition, the employees at LifeSkills have identified core values that guide company goals, training, and behavior. Of the five values, two are trust/respect and care/compassion. These encourage employees to value the persons with whom we work and to provide individualized care that is sensitive to the uniqueness and needs of each person. With this in mind, LifeSkills also provides educational material for staff as periodic reminders, such as honoring clients as individuals and acknowledging various life aspects such as culture and disability, while providing appropriate support to live a meaningful life.

Client Information –

The following demographics of PATH enrolled clients were reported in the most recent PATH annual report:

- Caucasian 82%
- African American 14%
- American Indian 3%
- Undeclared or Refused 1%

Outreach services through LifeSkills are expected to contact 150 persons, and it is expected that 86 people will be enrolled. 40% are expected to be literally homeless, with the remainder at risk of homelessness.

Consumer Involvement –

Persons who are homeless and have serious mental illnesses and family members are involved in the planning, implementation, and evaluation of the PATH-funded services, when deemed appropriate. Family members can be critical to the success of mental illness/substance abuse recovery and provide many of the support services needed to assist in the transition from

homelessness to stable housing. Persons receiving PATH-funded services also serve as volunteers at local events and participate on formal advisory boards as requested.

BUDGET

Position	Annualized Salary	PATH-funded FTE	PATH-funded Salary	Total
Supported Housing Manager	\$35,090	0.05	\$1,754	
Transitions Supported Housing Manager	\$41,995	0.05	\$2,100	
Case Manager	\$33,010	1.00	\$33,010	
Case Manager	\$33,010	1.00	\$33,010	
Subtotal				\$69,874
Fringe Benefits (35%)				\$24,456
Travel				\$1,200
Equipment				\$300
Supplies				\$200
Contractual				\$200
Housing				\$6,750
Other				\$6,600
Regional Administrative Support				\$8,920
Total				\$118,500



Seven Counties Services

Local Provider Description –

Seven Counties is a private, non-profit corporation that provides planning, prevention, treatment and support services in areas of mental health, alcohol and drug use and abuse, and developmental and intellectual disorders. It serves children of all ages, adults and older adults, most through community-based (outpatient) services. Seven Counties serves the state's largest urban area, Louisville/Jefferson County, and the surrounding six counties, Henry, Bullitt, Oldham, Shelby, Spencer and Trimble. The Mental Health Outreach Team (MHOT), which receives PATH funding, provides outreach, assessment crisis intervention, case management, peer support, referral and linkage to community resources, and supportive services to supplement and facilitate an individual's process towards self-sufficiency and permanent housing.

PATH serves individuals in the Louisville/Jefferson County area. Funding - \$100,000.

Collaboration with HUD Continuum of Care Program –

The Mental Health Outreach Team Supervisor/ Program Coordinator actively participates in the Continuum of Care and attends meetings monthly. The Mental Health Outreach Team has been closely coordinating services with the Single Point of Entry team that has been implemented in the community. The Program Coordinator has been on the steering committee of the Common Assessment and has been an active participant in the planning process. MHOT staff annually coordinate the Street Count in late January with the backing of the CoC.

Collaboration with Local Community Organizations –

The Mental Health Outreach Team links individuals with services including, but are not limited to, Family Health Centers, Social Security Administration, Adult Protective Services, Veterans Administration Assistance, Wellspring (supportive housing), Louisville Rescue Mission, St. John's Center (shelter), Salvation Army, Wayside Christian Mission, YMCA, The Louisville Urban League, Family and Children's Place, Section 8 subsidized housing, permanent supportive housing programs, Kentucky Housing Corporation, Bridgehaven (peer support), Shelter Plus Care, Emergency Psychiatry Services, Office of Vocational Rehabilitation, Jefferson Alcohol and Drug Abuse Center, and Department of Human Services. Medical services and medications are provided by Phoenix Health Center through the Health Care for the Homeless Grant.

The Mental Health Outreach Team is available on a daily basis to Emergency Psychiatry Service at University Hospital to provide homeless individuals with immediate linkage to a caseworker in the community. This is a service that is unique to the community and is not provided by any other agency. There is a liaison available for those individuals at Central State Hospital and Our Lady of Peace Hospital who are homeless.

Service Provision –

- **Priority services / Priority populations**

One of the main services of the Mental Health Outreach Team is street outreach, visiting shelters, encampments and other places where persons who are homeless can be found. They are then offered Case Management services, including the preparation of a plan for the provision of community health services and reviewing such plan no less than once every three months; providing assistance in obtaining and coordinating social services, including services

related to daily living activities, personal financial planning and transportation services; assistance in obtaining income support services, including housing assistance, food stamps and supplemental security income benefits; linkage to other community resources; referrals for primary health services, job training, education services, and relevant, housing services. All individuals served in this program are literally homeless.

- **Gaps in services**

The two main gaps occur between access to mental health treatment and subsequent overuse of hospital emergency departments; and access to social service appointments. To address the clients who frequent the local area hospital, Seven Counties has formed a relationship with the University of Louisville Hospital and actively seeks to engage those homeless clients who overuse the emergency medical system. The addition of Assertive Community Treatment teams in the Louisville Metro area has also been a tremendous help in closing these gaps. To address the issue of clients who miss appointments once they are set, the Mental Health Outreach Team locates clients the day before or the day of, to assist them with direction and in some cases providing transportation to appointments.

There also continues to be a need for permanent housing resources, particularly permanent supportive housing, but this gap has been reduced some through collaborative efforts with other programs.

- **Co-occurring Serious Mental Illness and Substance Use Disorders**

At the time of assessment, any individual evidencing substance abuse will be referred to Seven Counties' Addiction Recovery Center for further evaluation and treatment or Seven Counties' CenterOne dual diagnosis group program. Referrals are made to a women's integrated program through Wellspring and a men's integrated program through Volunteers of America. The Mental Health Outreach Team will assist individuals in accessing treatment, support and follow up, including additional referrals to other community substance abuse programs.

- **Eligibility and Enrollment**

An individual is determined to be eligible for PATH services if the individual has serious mental illness and is homeless or at imminent risk of homelessness. The determination of serious mental illness can either be from existing records at Seven Counties or the local state psychiatric hospital, or through assessment by a Qualified Mental Health Professional (QMHP) at Seven Counties. Determination of homelessness or imminent risk of homelessness can be through staff observation, client self-report, or existing HMIS record.

Once the Mental Health Outreach Team has established engagement with the individual, determined eligibility, and the individual has agreed to work towards a goal, the Mental Health Outreach Team will open an individual case record that contains demographic information, documentation of PATH eligibility, mutual agreement for the provision of services, and services to be provided. At this point, the individual is enrolled in PATH services. Enrollment continues until goals are met, such as accessing housing and transitioning to mainstream services, or the individual discontinues participation.

Data -

Seven Counties currently utilizes HMIS to report data for PATH and for other grants they receive, and the Mental Health Outreach Team has fully implemented the use of HMIS and uses HMIS as

its primary database. All new case managers receive training in HMIS, and will access ongoing training as available.

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

The Mental Health Outreach Team works with the local SOAR initiative at the Phoenix Health Center, which has assists people with obtaining disability benefits. Yearly SOAR trainings are offered by the Phoenix Health Center, as are monthly meetings of providers to address problems and issues with applications. Staff from the local offices of the Social Security Administration and the State Disability Determination Services attend these meetings.

Housing –

The Mental Health Outreach Team provides on-going supportive services to participants until they achieve stability and have attained six months of permanent housing. Regular home visits are provided, as well as phone contact to monitor stability and provide support. The Team advocates with landlords as needed and assists the participant in applying for available mainstream resources to support the participant’s stability and success in maintaining permanent housing. The Mental Health Outreach Team has been a vital part of Rx: Housing, the local chapter of the national 100K Homes campaign. The team members complete vulnerability assessments to assist in the referral process to permanent supportive housing programs in the Louisville community. These programs include Housing First programs through Family Health Center-Phoenix, Wellspring, St. Vincent dePaul and St. John's Day Center. Transitional housing will be accessed for a percentage of participants through Wellspring and St. Vincent dePaul. There are also connections with rapid re-housing programs through Louisville Metro Community Revitalization Services. For those individuals who do not need permanent supportive housing, transitional housing or rapid re-housing, assistance will be provided in connecting with permanent housing resources.

Staff Information –

The following demographics reflect the staff who are currently PATH funded or match funded:

- Caucasian 3
- African-American 1

All Seven Counties staff attend cultural diversity training and all clinical staff must meet the licensing and certification requirements to maintain their license to practice. Staff are required to follow individual development plans in addition to their annual performance appraisals, and participate in weekly group supervision where issues of cultural diversity are addressed. Seven Counties provides a community language bank that grants access to over seventy languages to address the needs of their clients.

Client Information –

The following demographics of PATH enrolled clients were reported in the most recent PATH annual report:

- Caucasian 58%
- African American 42%

It is anticipated that the Mental Health Outreach Team will provide engagement services to at least 400 individuals and enroll approximately 50. 100% will be literally homeless, and approximately 29% will be chronically homeless.

Consumer Involvement –

Program participants have access and input into services through individual contact with the Supervisor/ Project Coordinator, point-in-time surveys, client program evaluation surveys and post-program contacts. Strengths-based assessments are centered on goals set by the consumer. Participants also have advocacy through their referring agency. Family participation is encouraged but it is the right of the participant to decline family involvement. PATH participants have volunteered and assisted with the annual Point-In-Time street count. One of the Mental Health Outreach Team members is a peer support specialist who has experienced homelessness.

BUDGET

Position	Annualized Salary	PATH-funded FTE	PATH-funded Salary	Total
Case Manager	\$42,078	0.50	\$21,039	
Administrator	\$74,044	0.20	\$14,809	
Peer Support Specialist	\$34,507	0.50	\$17,253	
Subtotal				\$53,101
Fringe Benefits (25%)				\$13,276
Travel				\$1,000
Equipment				\$500
Supplies				\$20,000
Other				\$2,123
Regional Administrative Support				\$10,000
Total				\$100,000

New Vista and its subcontractor, the HOPE Center



Local Provider Description –

New Vista is a private non-profit Community Mental Health Center, serving seventeen counties in Central Kentucky that provides outpatient mental health, substance abuse, and intellectual and developmental disability services. New Vista has been providing services for over 40 years and is the safety net for low-income individuals in their region. The mission of New Vista is to assist individuals and families in the enhancement of their emotional, mental and physical well-being by providing mental health, intellectual/developmental disabilities and substance abuse services.

The Hope Center is an emergency homeless shelter for men, which provides life-sustaining and life-rebuilding services that are comprehensive and address the underlying causes of homelessness. Since the opening of the shelter, New Vista has been a collaborating partner with the Hope Center and provides psychiatric assessments and evaluations, medication assistance and monitoring, case management and housing support services.

PATH services are provided in Fayette County, Kentucky. PATH Funding - \$100,000.

Collaboration with HUD Continuum of Care Program –

New Vista and the Hope Center actively participate in the Continuum of Care process through the Office of Homelessness Prevention and Intervention, and are part of the coordinated entry process using the VI-SPDAT. There has been for many years a collaborative with the other member agencies such as New Beginnings of the Bluegrass, Canaan House, The Salvation Army, Catholic Action Center, Volunteers of America, Chrysalis House, and the Bluegrass Domestic Violence Program to address the needs of homeless individuals with serious mental illness. Current PATH funds are allocated to serve residents of the Hope Center. New Vista has elected to locate a service site at the Hope Center to provide services to those individuals who have additional psychosocial barriers in accessing mental health services. Having this link to individuals at the Hope Center helps facilitate the process of ensuring that follow up services are in place through New Vista's outpatient services as individuals transition out of the Hope Center and into permanent housing.

Collaboration with Local Community Organizations –

PATH funds allow staff to work with different organizations throughout the New Vista region. The main partnership is with The Hope Center which provides SUD treatment options, emergency shelter, mobile outreach and access to SOAR. New Vista and the Hope Center have long and established relationships with many service providers in the community, by both accepting and making referrals, and by providing treatment services where needed. These services cover such things as housing, medical care, prescription assistance, employment, general resources, and entitlements. The HOPE Center is involved in other intra-agency groups such as Lexcare, Housing Commission, and local social service ministries. New Vista staff are actively involved in collaborative inter-agency initiatives, including the local Continuum of Care effort, LEXLINC Providers' Cabinet, the Mayor's Commission on Housing and Support Services, and the Central Kentucky Housing and Homeless Initiative.

Once individuals have been successfully assisted with securing safe and affordable housing, linkage is made to other local agencies such as the Lexington Chapter of the National Alliance on

Mental Illness (NAMI), God's Pantry, Lexington Fair Housing Council, Community Action Council, Department of Vocational Rehabilitation, and Employment Solutions.

Service Provision –

- **Priority services / Priority populations**

The Hope Center operates a mobile outreach program (Hope Mobile) that operates out of a recreational vehicle at a different downtown area each weekday. The staff initiate contact with homeless individuals in the community who may not be engaged in other resources and offer referrals to shelters, medical services and provides a connection to other essential services such as suicide prevention, payee services, referrals for vocational rehabilitation, and assistance with identifying permanent housing options. HOPE Center services include emergency shelter, clothing, food, acute psychiatric stabilization, benefits access, psychoeducation, and dual disorder treatment. Persons identified as PATH-eligible are provided case management to assess needs, identify personal goals, and help obtain desired services, treatment, and support. Other services are available through the Hope Center and through New Vista, such as community mental health services, staff training, screening and diagnostic services, rehabilitation, and supportive and supervisory services in residential settings

The design of the program, from street outreach to shelter in-reach, assures that PATH funds are used to serve literally homeless individuals.

- **Gaps in services**

Affordable housing remains one of the largest service gaps. The demand for subsidized housing far outweighs the supply available, leaving households financially stretched, which often leads to homelessness. The availability of supportive services to homeless individuals is also insufficient to meet the need. Funding for programs that address these issues remain limited; however, this PATH program addresses both of these identified issues and helps narrow this critical gap.

- **Co-occurring Serious Mental Illness and Substance Use Disorders**

The Hope Center population includes a significant number of individuals with co-occurring mental illness and substance use disorders, and has operated a recovery program since 1996. Dedicated staff members, with help from New Vista, offer a diverse mix of rehabilitation services that provide each person with effective treatment options tailored to meet individual needs, including case management services, psychotropic medications, psychoeducation groups, and the Recovery Dynamics curriculum.

- **Eligibility and Enrollment**

An individual is determined to be eligible for PATH services if the individual has serious mental illness and is homeless or at imminent risk of homelessness. The determination of serious mental illness can either be from existing records with New Vista or the local state psychiatric hospital, or through assessment by a Qualified Mental Health Professional (QMHP) at New Vista. Determination of homelessness or imminent risk of homelessness can be through staff observation, client self-report, or existing HMIS record.

Once the PATH staff have established engagement with the individual, have determined eligibility, and the individual has agreed to work towards a goal with the PATH staff, the PATH

staff will open an individual case record that contains demographic information, documentation of PATH eligibility, mutual agreement for the provision of services, and services to be provided. At this point, the individual is enrolled in PATH services. Enrollment continues until goals are met, such as accessing housing and transitioning to mainstream services, or the individual discontinues participation.

Data -

Both New Vista and the Hope Center have HMIS trained staff. One Hope Center staff member is designated to PATH program. There are six total staff members at the Hope Center shelter and four total staff at New Vista who have HMIS licenses. Intake staff at the Hope Center enter all the initial HMIS information and the PATH designated staff member enters in all the service information. The Program Director runs all the reports for HMIS. Additional HMIS training for staff is based on new staff members coming into roles that include HMIS and the overall need for data entry. All HMIS training occurs through the Lexington Office of Homelessness Prevention and Intervention (OHPI).

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

There are currently two SOAR-trained staff in the PATH program and one other case manager at the Hope Center is SOAR certified. The plan is to always have at least two designated staff with SOAR certification dedicated to the PATH program. New staff will receive SOAR training upon joining the program.

Housing –

Staff working in the PATH program assist participants with accessing safe, affordable housing in the community by linking the individuals with various housing programs that have the needed and desired level of care and support attached. For participants that need a higher level of support, PATH staff help link the individuals to other housing programs in Lexington such as New Beginnings of the Bluegrass, Hope Center for Women, the Canaan House, and the Chrysalis House. Working with these community partners, there are options for homeless individuals such as Housing First, Rapid-Rehousing and Permanent Supportive Housing. New Vista also offers a continuum of housing services, from therapeutic residential programs to independent living programs with onsite supports like the New Vista Supportive Housing Program and Virginia Avenue Apartment Program. New Vista also administers a Tenant-Based Rental Assistance program for those who can live completely independently in the community. Eligible clients are also placed on the Lexington Coordinated Entry List and are eligible for permanent supportive housing through the CoC based on chronicity and vulnerability.

Staff Information –

The following demographics reflect the staff who are currently PATH funded or match funded:

- Caucasian 70%
- African American 20%
- Other 10%

Employees of the Hope Center and New Vista are committed to a non-discriminatory service delivery policy. All employees are expected to respect the diversity of the clients served and practice in a manner that respects these various differences. Spanish translation is readily available

at the HOPE Center and access to interpreters for any language is available through a contract held by New Vista. All professional staff are required to obtain continuing education in the area of cultural competency and sensitivity. Staff are also encouraged to discuss any concerns with cultural issues with their clinical or administrative supervisor.

Client Information –

The following demographics of PATH enrolled clients were reported in the most recent PATH annual report:

- Caucasian 72%
- African American 25%
- American Indian 3%

Outreach services through the Hope Center expect to contact 70 persons. Of those contacted, it is expected that 65 people will be enrolled. 90% will be literally homeless with the remainder at risk of homelessness.

Consumer Involvement –

At the Hope Center there are weekly community meetings where PATH-eligible clients are present and voice their opinions and concerns. Peer mentors at the Hope Center include PATH-eligible clients who assist other newer clients to work through the program while offering peer support. They receive a small stipend for their services. When appropriate and with client consent, PATH-eligible client families are involved in services. Approximately 80% of Hope Center staff have been through the program in some way (including PATH) and offer support and an expertise to services. Feedback from all Mental Health Program clients is encouraged and used to guide system improvements. Currently nine PATH-eligible persons are employed as staff, five are volunteers, and one serves on the board.

New Vista asks clients to participate in an annual satisfaction survey regarding the services they receive. The results of the survey have been instrumental in identifying client needs that are not currently being addressed and often result in new services and/or programs. In addition, anytime a person is not satisfied with the services they have received they are encouraged to submit a grievance to the Director of Performance Improvement. The New Vista Board of Directors are comprised of individuals from the communities and many who have family members that are diagnosed with mental illness, substance abuse, and intellectual and developmental disabilities.

BUDGET

Position	Annualized Salary	PATH-funded FTE	PATH-funded Salary	Total
Hope Center Payee	\$34,000	1.00	\$34,000	
Hope Center Outreach/Crisis	\$56,821	0.36	\$20,200	
NV Staff	\$66,000	0.23	\$15,485	
Subtotal				\$69,685
Fringe Benefits (29%)				\$20,315
Regional Administrative Support				\$10,000
Total				\$100,000



NorthKey Community Care

Local Provider Description –

NorthKey Community Care is a private non-profit Community Mental Health Center, serving eight counties in the northern Kentucky area. NorthKey is the primary provider of mental health, intellectual disability, and substance abuse services in the region. NorthKey serves Boone, Campbell, Carroll, Gallatin, Grant, Kenton, Owen and Pendleton Counties.

PATH funding may be used in any of the NorthKey counties; however, the bulk of PATH funding will be used to serve homeless individuals in the inner city areas of Covington and Newport, Kentucky. PATH Funding - \$73,000.

Collaboration with HUD Continuum of Care Program –

NorthKey's Housing Coordinator and staff participate in the regional Continuum of Care program and have since this has been a part of the HUD planning and funding process, and are actively involved in the gathering of information for the Point-In-Time homeless count as required for the HUD Continuum of Care process.

Collaboration with Local Community Organizations –

The NorthKey clinical team, including the PATH psychiatrist, work closely with the Pike Street Health Clinic (a subsidiary of HealthPoint, the local FQHC, that treats homeless individuals) in the health care of PATH clients. The PATH case manager frequently visits the Women's Crisis Center to educate domestic violence survivors and shelter staff about PATH services, provides outreach services to the Recovery Network, and educates their clients and staff about PATH services. NorthKey Community Care has an active working relationship with the Kentucky office of the Cincinnati VA Medical Center Department of Psychiatry, collaborating on services for homeless veterans. NorthKey offers outreach to local residential substance abuse treatment centers whose clients may become homeless upon completion of the program. NorthKey is also an active participant in the Continuum of Care's Strategic Planning Initiative to End Homelessness in Kentucky.

Service Provision –

- **Priority services / Priority populations**

The NorthKey PATH Program provides outreach to shelters, soup kitchens, and other homeless services to offer mental health and housing services to homeless individuals; rapid access to mental health assessment by a licensed clinician; a fast track to psychiatric consultation and medication services; clinical follow up of mental health care as a team; service coordination by a case manager; referrals to substance use treatment, supported employment and housing services; and linkage to external community resources, including primary health care, mental health advocacy, homeless shelters, domestic violence services, Legal Aid, the VA for homeless veterans, and education services.

It is expected that 20% of the individuals served will be literally homeless. The remainder will be persons at risk of homelessness or who have a history of cyclical homelessness.

- **Gaps in services**

NorthKey, Welcome House of Northern Kentucky and the local Veterans Administration office have identified gaps in services such as a lack of emergency shelter for men, especially those with mental illness and/or a substance abuse disorder; a shortage of psychiatric care (both public and private) in the community; an inadequate continuum of housing options, such as low-income, subsidized housing, and transitional housing; a lack of housing options for individuals who are sexual offenders, who have a history of certain felony offenses, or who have recent substance abuse-related legal charges; insufficient funding to provide payee services to all homeless individuals on the waiting list; insufficient funding to provide ongoing case management for individuals for whom Welcome House provides payeeship; limited funding to cover security deposits for clients who become eligible for housing; a lack of area-wide transportation services for job-seeking clients; and a lack of evening and weekend social activities.

- **Co-occurring Serious Mental Illness and Substance Use Disorders**

NorthKey has a long history of providing Integrated Treatment of Co-occurring Disorders for all clients who require it. Clients are also referred to community supports such as NA and AA, and to detoxification and residential treatment provided by Transitions, Inc. and the Brighton Center.

- **Eligibility and Enrollment**

An individual is determined to be eligible for PATH services if the individual has serious mental illness and is homeless or at imminent risk of homelessness. The determination of serious mental illness can either be from existing records at NorthKey or the local state psychiatric hospital, or through assessment by a Qualified Mental Health Professional (QMHP) at NorthKey. Determination of homelessness or imminent risk of homelessness can be through staff observation, client self-report, or existing HMIS record.

Once the PATH staff have established engagement with the individual, determined eligibility, and the individual has agreed to work towards a goal, the PATH staff will open an individual case record that contains demographic information, documentation of PATH eligibility, mutual agreement for the provision of services, and services to be provided. At this point, the individual is enrolled in PATH services. Enrollment continues until goals are met, such as accessing housing and transitioning to mainstream services, or the individual discontinues participation.

Data -

NorthKey's PATH case manager enters pertinent demographic and situational information into HMIS at intake and updates information throughout the course of treatment. NorthKey began utilizing electronic health records in February of 2013. Case management contacts are documented in NorthKey's EHR, facilitating communication/collaboration between NorthKey service providers. While HMIS is not integrated into NorthKey's electronic health record, planning and implementation will occur if indicated.

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

The Welcome House provides a SOAR Benefits Outreach Program, which assesses and files applications for homeless and low income individuals who may qualify for Social Security Benefits. Welcome House staff also provide SOAR Trainings and consultation. The PATH case

manager visits the Welcome House as needed to connect with homeless individuals involved in the SOAR process. NorthKey's psychiatrist is available to assess PATH clients referred to the SOAR program.

Housing –

The NorthKey PATH team utilizes the VI-SPDAT assessment to assist clients with accessing HUD-funded Continuum of Care housing provided through local agencies. The PATH team also assists clients with accessing and utilizing other HUD services and regularly researches the internet for potential housing resources. Additionally, the PATH team works closely with NorthKey's internal housing specialists and maintains a current resource list for subsidized housing for seniors and those with mental health disabilities.

Staff Information –

The following demographics reflect the staff who are currently PATH funded or match funded:

- Caucasian 100%

At orientation, new employees are screened with a pre-test for cultural sensitivity. Employees who require it, will receive additional education and supervision regarding cultural sensitivity. Response to education and training are strongly considered when staff are evaluated for regular employee status. All NorthKey staff are required to attend Trauma Informed Care training within their first year of employment. The PATH team staff are oriented to the specific needs and culture of the target population. NorthKey conducts training on cultural competence for all new employees, including a pre- and post-test, with follow-up training or supervision if necessary.

Client Information –

The following demographics of PATH enrolled clients were reported in the most recent PATH annual report:

- Caucasian 73%
- African American 24%
- American Indian 3%

Outreach services are expect to contact 150 persons and enroll 120 with 60% literally homeless. The remainder will be persons at risk of homelessness or who have a history of cyclical homelessness.

Consumer Involvement –

NorthKey recognizes and respects the basic human, constitutional, legal, and civil rights of its clients, including the right to individualized treatment in the least restrictive environment, respecting the individual's dignity and confidentiality, without regard to race, religion, sex, age, ethnic background, or handicap. Upon entry, every client is provided with a copy of NorthKey's "Client Rights and Responsibilities", which includes: "The opportunity to participate in the creation of your treatment plan and to have your family or significant other participate in your treatment, and to be involved in decisions about your care, treatment, or service." NorthKey endorses the rights of clients to have active involvement in planning their treatment, and in advocating for their needs. An individualized collaborative treatment planning process is utilized for this purpose.

BUDGET

Position	Annualized Salary	PATH-funded FTE	PATH-funded Salary	Total
3 Case Managers	\$119,574	0.19	\$22,740	
Supervisor	\$57,784	0.25	\$14,446	
Community Supports Worker	\$33,010	0.08	\$2,723	
Therapist	\$49,608	0.12	\$6,200	
Nurse	\$104,964	0.01	\$1,312	
Subtotal				\$47,421
Fringe Benefits (26%)				\$12,329
Travel				\$225
Supplies				\$2,275
Other				\$3,450
Regional Administrative Support				\$7,300
Total				\$73,000



Kentucky River Community Care, Inc.

Local Provider Description –

Kentucky River Community Care, Inc. (KRCC) is a private non-profit Community Mental Health Center, serving Breathitt, Knott, Lee, Leslie, Letcher, Owsley, Perry and Wolfe Counties in southeast Kentucky; and is the regional mental health, developmental disabilities and addiction treatment planning and service provider.

Funding - \$38,000.

Collaboration with HUD Continuum of Care Program –

KRCC staff serve on the State CoC Advisory Board, the State CoC Coordinated Entry Committee, participate in the Point of Time Count each year, and attend monthly meetings. KRCC manages seven CoC voucher programs in addition to Section 8, Emergency Solutions, and HOME TBRA. KRCC was named the Lead Agency for Coordinated Entry for a large part the COC Region 5 area. Presently, KRCC is leading weekly Local Prioritization Meetings in the Kentucky River, Cumberland Valley, and the Lake Cumberland Area Development Districts. As active participants in the CoC, KRCC's Supportive Housing Coordinator and the Outreach Case Manager coordinates and collaborates with the other CoC participants.

Collaboration with Local Community Organizations –

KRCC's PATH project is a partnership between area homeless services providers that include Hazard-Perry County Community Ministries, the LKLP Domestic Violence Shelter, Mountain Health Alliance, Project ADVANCE intensive outpatient program for women, and a variety of churches, social services agencies, law enforcement and others who refer homeless or near homeless persons with serious mental illness to KRCC for emergency housing and case management services.

Service Provision –

- **Priority services / Priority populations**

KRCC provides case management, outreach, staff training, and supportive housing through the PATH grant. The PATH funds directly support the salary of the Outreach Case Manager who operates the five emergency apartments for KRCC clients who are homeless and have a serious illness. Homeless persons needing an apartment during their treatment are provided one until the persons are stable enough and have the funds available to get permanent housing. The Outreach Case Manager completes an initial assessment which gathers demographic information about the client as well as living situation, length of homelessness, domestic violence, income, health insurance, disability and substance abuse. The assessment information is entered into the Homeless Management Information System in order that other housing service providers have access to clients' needs and resources being provided by KRCC. The Outreach Case Manager helps the person find, qualify and secure permanent housing and receive the vouchers or housing subsidy necessary for them to pay the rent on a regular basis and remain stably housed. It is expected that 57% of the individuals served will be literally homeless. The remainder will be persons at risk of homelessness or who have a history of cyclical homelessness.

- **Gaps in services**

The availability of places for persons with serious mental illness to go after psychiatric hospitalization or after being evicted from another housing provider is limited in Southeast Kentucky. KRCC's emergency apartments give persons a chance to get back on their feet until they have an income and another permanent place to live. The apartments are linked with the KRCC community mental health services so the client receives the types of services needed to support them while they develop supports to attain stable housing. Other gaps identified include a lack of adequate and affordable transportation resources, funding for supportive services, and adequate employment opportunities.

- **Co-occurring Serious Mental Illness and Substance Use Disorders**

KRCC has a full range of community mental health and substance abuse services including case management, community support services, peer support services, outpatient, intensive outpatient, psychiatric, primary health care, recovery centers, transitional recovery housing and programs, and other services such as crisis, trauma, and 24 hour crisis hot line. Referrals are made regularly for services. KRCC hosted an ASAM training in 2017 giving staff greater skills in working with clients with co-occurring disorders.

- **Eligibility and Enrollment**

The KRCC intake process for all clients is designed to identify disabilities and homelessness. Any client who is homeless is referred to Supportive Housing Services. An individual is determined to be eligible for PATH services if the individual has serious mental illness and is homeless or at imminent risk of homelessness. The determination of serious mental illness can either be from existing records at KRCC or the local state psychiatric hospital, or through assessment by a Qualified Mental Health Professional (QMHP) at KRCC. Determination of homelessness or imminent risk of homelessness can be through staff observation, client self-report, or existing HMIS record.

Once the PATH staff have established engagement with the individual, determined eligibility, and the individual has agreed to work towards a goal, the PATH staff will open an individual case record that contains demographic information, documentation of PATH eligibility, mutual agreement for the provision of services, and services to be provided. At this point, the individual is enrolled in PATH services. Enrollment continues until goals are met, such as accessing housing and transitioning to mainstream services, or the individual discontinues participation.

Data -

KRCC has two dedicated HMIS entry staff who have been trained on collecting PATH information in HMIS, as well as a supervisor who generates data quality reports and insures data quality. KRCC staff have attended PATH HMIS trainings, and KRCC continues to send staff to trainings that are specifically designed for PATH and more advanced usage of HMIS.

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

The KRCC currently has five staff persons trained in SOAR, and have assisted 17 individuals with disability applications last year. KRCC also plans to have 6 additional staff members complete SOAR training next year.

Housing –

PATH staff maintains lists of housing resources in the area and works closely with KRCC Case Managers/Outreach Care Managers to assist homeless persons with accessing KRCC programs such as emergency apartments, managed rental subsidy, Haven House Emergency Shelter, Transitional Recovery Housing, and also emergency shelter provided by HOPE House, and the KRCC and LKLP Domestic Violence Shelter. KRCC also has a permanent housing program with apartments in the counties of Perry, Knott, Wolfe, Owsley, Breathitt, Letcher and Lee. KRCC also works to improve housing resources through the Continuum of Care process. KRCC works with Public Housing Authorities and many private landlords to assist clients with securing permanent housing.

Staff Information –

The following demographics reflect the staff who are currently PATH funded or match funded:

- Caucasian 100%

In the Kentucky River Region most staff are indigenous to the region. This means they are, like their clients, Appalachian in origin. The staff person in this program is from the region and knows the culture, values and attitudes of people from the region. KRCC's staff receive cultural competency training upon employment and periodically thereafter.

KRCC staff are trained annually in cultural sensitivity and most are Appalachian Eastern Kentucky natives, as are the persons served by the programs. KRCC personnel policies reinforce the need for treating everyone with dignity and respect by requiring staff to use the online Essential Learning catalog. One of the requirements placed on all staff is training in cultural competence, cultural diversity and cultural sensitivity using the 850 courses available at this website including taking the test and tracking reports generated for personnel files. KRCC Housing Staff receive Fair Housing Training annually and share information with Landlords and other KRCC staff. KRCC has a Cultural Diversity Committee who oversees a Cultural Diversity Assessment of KRCC Programs and any needed changes to address any itemized weaknesses.

Client Information –

The following demographics of PATH enrolled clients were reported in the most recent PATH annual report:

- Caucasian 100%

Adults with serious mental illness who are homeless in the southeast Kentucky counties are the specific target population for this program. Homeless persons are often identified by KRCC staff including the case managers and social workers. Persons who have been in inpatient treatment in the ARH-Hazard Psychiatric Center and who are being discharged may be considered homeless if they have lost their place of residence due to the length of their hospitalization or their landlord does not wish them to return to their previous housing.

Through the Coordinated Entry process, KRCC is now also receiving many more referrals from other organizations as well. LKLP, Beattyville Housing Development, and KRCC all enter clients in to the same prioritization list and vouchers available in the region go to those in the most need regardless of their place of origination.

The LKLP Safehouse, along with church or privately run homeless shelters, and the KRCC operated Haven House, also provide emergency shelter and housing services and may refer persons of all ages, including homeless veterans with serious mental illness, homeless families with a severely emotionally disturbed child, adults in recovery from an addiction who also have mental illness, or homeless persons with co-occurring intellectual disabilities and serious mental illness.

75 clients are anticipated to be contacted, and 45 enrolled in the PATH program for this next fiscal year. 65% of those contacted are expected to be literally homeless, with the remainder at risk of homelessness.

Consumer Involvement –

Several KRCC staff have been formerly homeless, recovering from addiction, have mental illness, or have family struggling with these issues. Formerly homeless residents may apply for any agency staff positions that may become available and they may also volunteer within the agency.

BUDGET

Position	Annualized Salary	PATH-funded FTE	PATH-funded Salary	Total
Case Manager	\$35,360	0.68	\$23,881	
Subtotal				\$23,881
Fringe Benefits (30%)				\$7,164
Travel				\$1,000
Supplies				\$1,000
Other				\$1,500
Regional Administrative Support				\$3,455
Total				\$38,000

Cumberland River Behavioral Health



Local Provider Description –

Cumberland River Behavioral Health is a private non-profit Community Mental Health Center, serving Bell, Clay, Harlan, Jackson, Knox, Laurel, Rockcastle, and Whitley counties in Southeast Kentucky. Cumberland River is the primary provider of mental health, developmental and intellectual disabilities, and substance abuse services.

Laurel County is the primary area to be served but residents may be from any county in the region. Funding - \$38,000.

Collaboration with HUD Continuum of Care Program –

Cumberland River is a part of a 32-county Continuum of Care that includes Big Sandy, Cumberland Valley, Kentucky River and Lake Cumberland Area Development Districts. The CoC identified the most pressing factors contributing to homelessness as substance and alcohol abuse, mental health issues, domestic violence, and a lack of health care, resources, employment opportunities and minimal family support. Cumberland River has been instrumental in addressing the mental health and substance use treatment needs of the community and collaborated with the Continuum of Care in the development and operation of 15 apartment units for persons with serious mental illness, and a 100-bed private non-profit residential recovery program for females with substance use disorders.

Collaboration with Local Community Organizations –

This project is a partnership between Cumberland River Behavioral Health and the homeless shelters in the eight county area, along with the Appalachian Regional Hospitals in Hazard and Harlan and the Trillium Center (SUD Treatment) in Corbin. Additional partnerships include local ministerial associations, rural health initiatives in Jackson and Knox counties, social service agencies, law enforcement and others who refer individuals for emergency housing and case management services. Individuals who are homeless or at risk of homelessness are able to receive services from primary care physicians, local food pantries, Baptist Regional Medical Center, Christian Shelter for the Homeless in London, Cedaridge Ministries in Williamsburg, and the homeless shelters in Corbin, Pineville and Harlan.

Cumberland River also refers individuals to Crossroads, a 30 day substance abuse treatment program for males; Independence House, a substance abuse treatment program for females who are pregnant and abusing substances; the Department of Vocational Rehabilitation; Southeastern Kentucky Rehabilitation Industries, which provides supported employment for individuals with mental illness, substance abuse or developmental delays. Cumberland River also provides mental health and substance abuse services, including outpatient counseling, substance abuse services, case management, referrals to inpatient treatment, housing services, and day treatment programs for persons with mental illness and co-occurring disorders.

Service Provision –

- **Priority services / Priority populations**

The Cumberland River PATH case manager provides outreach and case management services to the homeless, refers individuals for both physical health needs and behavioral/substance

abuse needs to appropriate referral sources, assists with entitlement programs, and refers to suitable housing and vocational resources.

Persons with serious mental illness and a co-occurring disorder, who are hospitalized in a psychiatric unit, and who have unstable housing, are assessed for housing and the need for additional services through case management, peer support, community support, medication management and supported employment. Others who seek services from Cumberland River Behavioral Health are screened for housing needs upon entrance into services. 30% of persons enrolled are expected to be literally homeless.

- **Gaps in services**

The gaps identified through collaboration with the community include the lack of affordable permanent housing opportunities, structured collaboration between service providers, adequate and affordable transportation resources, supportive services, life-sustaining employment opportunities, adequate discharge planning system, and emergency shelters.

In addition, several of the homeless shelters only allow a person to reside in the shelter for one night which limits the agency's ability to connect them with necessary resources to access housing.

- **Co-occurring Serious Mental Illness and Substance Use Disorders**

A full array of services is offered by Cumberland River Behavioral Health, including mental health and substance abuse services (which also includes residential treatment), outpatient, intensive outpatient, psychiatric, primary health care, and case management. Specialized services are available for victims of sexual abuse, trauma and those requiring long term residential treatment. Cumberland River also refers individuals to substance use treatment programs such as the Trillium Center, Crossroads, and Independence House.

- **Eligibility and Enrollment**

An individual is determined to be eligible for PATH services if the individual has serious mental illness and is homeless or at imminent risk of homelessness. The determination of serious mental illness can either be from existing records with Cumberland River or the local state psychiatric hospital, or through assessment by a Qualified Mental Health Professional (QMHP) at Cumberland River. Determination of homelessness or imminent risk of homelessness can be through staff observation, client self-report, or existing HMIS record.

Once the PATH staff have established engagement with the individual, have determined eligibility, and the individual has agreed to work towards a goal with the PATH staff, the PATH staff will open an individual case record that contains demographic information, documentation of PATH eligibility, mutual agreement for the provision of services, and services to be provided. At this point, the individual is enrolled in PATH services. Enrollment continues until goals are met, such as accessing housing and transitioning to mainstream services, or the individual discontinues participation.

Data -

Cumberland River currently utilizes HMIS to report data for PATH and on other grants they receive. Staff have attended PATH-specific HMIS trainings, and can access the trainings provided by the State HMIS Administrator for new staff or continued training.

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

Cumberland River staff assist individuals by helping them access community resources for assistance in applying for benefits, assist consumer in making and keeping appointments with other providers and assisting them with completion and collection of any paperwork needed. Benefit assistance is also provided by local food stamp offices. There are currently no staff trained in SOAR.

Housing –

Cumberland River Case Managers and the Housing Coordinator maintain a list of housing resources in the area. Case Management services provide support so that individuals can remain in their homes. Cumberland River operates 15 apartments in Whitley and Harlan Counties, providing permanent housing for individuals with serious mental illness. Cumberland River also has residential housing for individuals with serious mental illness and co-occurring substance abuse who require supportive housing. The Housing Authorities in all counties are utilized for housing in addition to private owners of apartments and trailers.

Staff Information –

The following demographics reflect the staff who are currently PATH funded or match funded:

- Caucasian 100%

All staff providing services have received training in cultural diversity training as part of new staff orientation. CRBH promotes an environment of cultural sensitivity and one that is unbiased towards sexual orientation or gender.

Client Information –

The following demographics of PATH enrolled clients were reported in the most recent PATH annual report:

- Caucasian 100%

The Cumberland River area has shown a decrease in population since the last census, with an average of 31% of the population living at or below poverty level. Only 70% of the adult population possesses a high school diploma and only 11% have a bachelor’s degree or higher. These factors can often lead to homelessness. It is estimated that 125 individuals will be contacted and 25 served in the PATH Program, with 40% literally homeless.

Consumer Involvement –

Cumberland River has a long history of involving families and consumers in the treatment and planning process and involvement in Advisory and Governance Boards. Cumberland River has employed nine peer support specialists who are actively involved in the planning, implementation and evaluation of PATH -funded services.

BUDGET

Position	Annualized Salary	PATH-funded FTE	PATH-funded Salary	Total
Coordinator	\$37,479	0.19	\$7,308	
Case Manager	\$30,119	0.18	\$5,421	
Case Manager	\$29,933	0.18	\$5,388	
Subtotal				\$18,117
Fringe Benefits (70%)				\$12,655
Travel				\$0
Other				\$3,773
Regional Administrative Support				\$3,455
Total				\$38,000