

# I. State Information

## State Information

### Plan Year

Federal Fiscal Year 2016

### State Identification Numbers

DUNS Number 802743534

EIN/TIN 45-0309764

### I. State Agency to be the Grantee for the PATH Grant

Agency Name North Dakota Department of Human Services

Organizational Unit Behavioral Health Division

Mailing Address 1237 West Divide Avenue Suite 1C

City Bismarck

Zip Code 58501

### II. Authorized Representative for the PATH Grant

First Name James

Last Name Jacobson

Agency Name North Dakota Department of Human Services - Behavioral Health Division

Mailing Address 1237 West Divide Avenue Suite 1C

City Bismarck

Zip Code 58501

Telephone 701-328-8952

Fax 701-328-8969

Email Address jamjacobson@nd.gov

### III. State Expenditure Period

From 7/1/2016

To 6/30/2017

### IV. Date Submitted

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

Submission Date

Revision Date

### V. Contact Person Responsible for Application Submission

Title State PATH Contact

Organizational Unit Name North Dakota Department of Human Services - Behavioral Health Division

First Name James

Last Name Jacobson

Telephone 701-328-8952

Fax 701-328-8969

Email Address jamjacobson@nd.gov

Footnotes:



— State of —  
**North Dakota**  
*Office of the Governor*  
**Jack Dalrymple**  
*Governor*

July 1, 2013

Ms. Virginia Simmons  
Supervisory Grants Management Specialist  
Office of Financial Resources, Division of Grants Management  
Substance Abuse and Mental Health Services Administration  
1 Choke Cherry Road, Room 7-1109  
Rockville, MD 20850

Dear Ms. Simmons:

As Governor of North Dakota, I hereby designate Maggie D. Anderson, Executive Director of the North Dakota Department of Human Services, to make any and all assurances required by the Public Health Services Act for the Community Mental Health Services Block Grant, the Substance Abuse Prevention and Treatment Block Grant, and the Projects for Assistance in Transition from Homelessness Grant. This designation shall remain in effect as long as I am Governor of North Dakota and Ms. Anderson is the Executive Director of the North Dakota Department of Human Services.

All correspondence regarding the above-mentioned grants should continue to be sent to the Director of the department's Division of Mental Health and Substance Abuse Services, 1237 West Divide Avenue, Suite 1C, Bismarck, ND 58501-1208.

Sincerely,

  
Jack Dalrymple  
Governor

37:63:71

# I. State Information

## Assurances - Non-Construction Programs

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Public reporting burden for this collection of information is estimated to average 15 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0040), Washington, DC 20503.

PLEASE DO NOT RETURN YOUR COMPLETED FORM TO THE OFFICE OF MANAGEMENT AND BUDGET. SEND IT TO THE ADDRESS PROVIDED BY THE SPONSORING AGENCY.

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Note: Certain of these assurances may not be applicable to your project or program. If you have questions, please contact the awarding agency. Further, certain Federal awarding agencies may require applicants to certify to additional assurances. If such is the case, you will be notified.

As the duly authorized representative of the applicant I certify that the applicant:

1. Has the legal authority to apply for Federal assistance, and the institutional, managerial and financial capability (including funds sufficient to pay the non-Federal share of project costs) to ensure proper planning, management and completion of the project described in this application.
2. Will give the awarding agency, the Comptroller General of the United States, and if appropriate, the State, through any authorized representative, access to and the right to examine all records, books, papers, or documents related to the award; and will establish a proper accounting system in accordance with generally accepted accounting standard or agency directives.
3. Will establish safeguards to prohibit employees from using their positions for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain.
4. Will initiate and complete the work within the applicable time frame after receipt of approval of the awarding agency.
5. Will comply with the Intergovernmental Personnel Act of 1970 (42 U.S.C. §§4728-4763) relating to prescribed standards for merit systems for programs funded under one of the nineteen statutes or regulations specified in Appendix A of OPM's Standard for a Merit System of Personnel Administration (5 C.F.R. 900, Subpart F).
6. Will comply with all Federal statutes relating to nondiscrimination. These include but are not limited to: (a) Title VI of the Civil Rights Act of 1964 (P.L. 88-352) which prohibits discrimination on the basis of race, color or national origin; (b) Title IX of the Education Amendments of 1972, as amended (20 U.S.C. §§1681-1683, and 1685-1686), which prohibits discrimination on the basis of sex; (c) Section 504 of the Rehabilitation Act of 1973, as amended (29 U.S.C. §§794), which prohibits discrimination on the basis of handicaps; (d) the Age Discrimination Act of 1975, as amended (42 U.S.C. §§6101-6107), which prohibits discrimination on the basis of age; (e) the Drug Abuse Office and Treatment Act of 1972 (P.L. 92-255), as amended, relating to nondiscrimination on the basis of drug abuse; (f) the Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation Act of 1970 (P.L. 91-616), as amended, relating to nondiscrimination on the basis of alcohol abuse or alcoholism; (g) §§523 and 527 of the Public Health Service Act of 1912 (42 U.S.C. §§290 dd-3 and 290 ee-3), as amended, relating to confidentiality of alcohol and drug abuse patient records; (h) Title VIII of the Civil Rights Act of 1968 (42 U.S.C. §§3601 et seq.), as amended, relating to non-discrimination in the sale, rental or financing of housing; (i) any other nondiscrimination provisions in the specific statute(s) under which application for Federal assistance is being made; and (j) the requirements of any other nondiscrimination statute(s) which may apply to the application.
7. Will comply, or has already complied, with the requirements of Title II and III of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 (P.L. 91-646) which provide for fair and equitable treatment of persons displaced or whose property is acquired as a result of Federal or federally assisted programs. These requirements apply to all interests in real property acquired for project purposes regardless of Federal participation in purchases.
8. Will comply with the provisions of the Hatch Act (5 U.S.C. §§1501-1508 and 7324-7328) which limit the political activities of employees whose principal employment activities are funded in whole or in part with Federal funds.
9. Will comply, as applicable, with the provisions of the Davis-Bacon Act (40 U.S.C. §§276a to 276a-7), the Copeland Act (40 U.S.C. §276c and 18 U.S.C. §874), and the Contract Work Hours and Safety Standards Act (40 U.S.C. §§327-333), regarding labor standards for federally assisted construction subagreements.
10. Will comply, if applicable, with flood insurance purchase requirements of Section 102(a) of the Flood Disaster Protection Act of 1973 (P.L. 93-234) which requires recipients in a special flood hazard area to participate in the program and to purchase flood insurance if the total cost of insurable construction and acquisition is \$10,000 or more.
11. Will comply with environmental standards which may be prescribed pursuant to the following: (a) institution of environmental quality control measures under the National Environmental Policy Act of 1969 (P.L. 91-190) and Executive Order (EO) 11514; (b) notification of violating facilities pursuant to EO 11738; (c) protection of wetland pursuant to EO 11990; (d) evaluation of flood hazards in floodplains in accordance with EO 11988; (e) assurance of project consistency with the approved State management program developed under the Coastal Zone Management Act of 1972 (16 U.S.C. §§1451 et seq.); (f) conformity of Federal actions to State (Clear Air) Implementation Plans under Section 176(c) of the Clear Air Act of 1955, as amended (42 U.S.C. §§7401 et seq.); (g) protection of underground sources of drinking water under the Safe Drinking Water Act of 1974, as amended, (P.L. 93-523); and (h) protection of endangered species under the Endangered Species Act of 1973, as amended, (P.L. 93-205).
12. Will comply with the Wild and Scenic Rivers Act of 1968 (16 U.S.C. §§1271 et seq.) related to protecting components or potential components of the national wild and scenic rivers system.
13. Will assist the awarding agency in assuring compliance with Section 106 of the National Historic Preservation Act of 1966, as amended (16 U.S.C. §470), EO 11593 (identification and protection of historic properties), and the Archaeological and Historic Preservation Act of 1974 (16 U.S.C. §§469a-1 et seq.).

14. Will comply with P.L. 93-348 regarding the protection of human subjects involved in research, development, and related activities supported by this award of assistance.
15. Will comply with the Laboratory Animal Welfare Act of 1966 (P.L. 89-544, as amended, 7 U.S.C. §§2131 et seq.) pertaining to the care, handling, and treatment of warm blooded animals held for research, teaching, or other activities supported by this award of assistance.
16. Will comply with the Lead-Based Paint Poisoning Prevention Act (42 U.S.C. §§4801 et seq.) which prohibits the use of lead based paint in construction or rehabilitation of residence structures.
17. Will cause to be performed the required financial and compliance audits in accordance with the Single Audit Act of 1984.
18. Will comply with all applicable requirements of all other Federal laws, executive orders, regulations and policies governing this program.

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Name	<input type="text" value="Maggie D. Anderson"/>
Title	<input type="text" value="Executive Director"/>
Organization	<input type="text" value="North Dakota Department of Human Services"/>

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

Footnotes:

# I. State Information

## Assurances - Non-Construction Programs

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**Note:** Certain of these assurances may not be applicable to your project or program. If you have questions, please contact the awarding agency. Further, certain Federal awarding agencies may require applicants to certify to additional assurances. If such is the case, you will be notified.

As the duly authorized representative of the applicant I certify that the applicant:

1. Has the legal authority to apply for Federal assistance, and the institutional, managerial and financial capability (including funds sufficient to pay the non-Federal share of project costs) to ensure proper planning, management and completion of the project described in this application.
2. Will give the awarding agency, the Comptroller General of the United States, and if appropriate, the State, through any authorized representative, access to and the right to examine all records, books, papers, or documents related to the award; and will establish a proper accounting system in accordance with generally accepted accounting standard or agency directives.
3. Will establish safeguards to prohibit employees from using their positions for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain.
4. Will initiate and complete the work within the applicable time frame after receipt of approval of the awarding agency.
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17. Will cause to be performed the required financial and compliance audits in accordance with the Single Audit Act of 1984.
18. Will comply with all applicable requirements of all other Federal laws, executive orders, regulations and policies governing this program.

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Name	Maggie D. Anderson
Title	Executive Director
Organization	North Dakota Department of Human Services

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Signature: Maggie D. Anderson Date: 5/18/2016

**Footnotes:**

# I. State Information

## Certifications

### 1. Certification Regarding Debarment and Suspension

The undersigned (authorized official signing for the applicant organization) certifies to the best of his or her knowledge and belief, that the applicant, defined as the primary participant in accordance with 45 CFR Part 76, and its principals:

- a. are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions by any Federal Department or agency;
- b. have not within a 3-year period preceding this proposal been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State, or local) transaction or contract under a public transaction; violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;
- c. are not presently indicted or otherwise criminally or civilly charged by a governmental entity (Federal, State, or local) with commission of any of the offenses enumerated in paragraph (b) of this certification; and
- d. have not within a 3-year period preceding this application/proposal had one or more public transactions (Federal, State, or local) terminated for cause or default.

Should the applicant not be able to provide this certification, an explanation as to why should be placed after the assurances page in the application package.

The applicant agrees by submitting this proposal that it will include, without modification, the clause titled "Certification Regarding Debarment, Suspension, Ineligibility, and Voluntary Exclusion--Lower Tier Covered Transactions" in all lower tier covered transactions (i.e., transactions with subgrantees and/or contractors) and in all solicitations for lower tier covered transactions in accordance with 45 CFR Part 76.

### 2. Certification Regarding Drug-Free Workplace Requirements

The undersigned (authorized official signing for the applicant organization) certifies that the applicant will, or will continue to, provide a drug-free work-place in accordance with 45 CFR Part 76 by:

- a. Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession or use of a controlled substance is prohibited in the grantee's work-place and specifying the actions that will be taken against employees for violation of such prohibition;
- b. Establishing an ongoing drug-free awareness program to inform employees about--
  1. The dangers of drug abuse in the workplace;
  2. The grantee's policy of maintaining a drug-free workplace;
  3. Any available drug counseling, rehabilitation, and employee assistance programs; and
  4. The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace;
- c. Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph (a) above;
- d. Notifying the employee in the statement required by paragraph (a), above, that, as a condition of employment under the grant, the employee will--
  1. Abide by the terms of the statement; and
  2. Notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction;
- e. Notifying the agency in writing within ten calendar days after receiving notice under paragraph (d)(2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to every grant officer or other designee on whose grant activity the convicted employee was working, unless the Federal agency has designated a central point for the receipt of such notices. Notice shall include the identification number(s) of each affected grant;
- f. Taking one of the following actions, within 30 calendar days of receiving notice under paragraph (d) (2), with respect to any employee who is so convicted?
  1. Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or
  2. Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency;
- g. Making a good faith effort to continue to maintain a drug-free workplace through implementation of paragraphs (a), (b), (c), (d), (e), and (f).

For purposes of paragraph, regarding agency notification of criminal drug convictions, the DHHS has designated the following central point for receipt of such notices:

Office of Grants and Acquisition Management  
Office of Grants Management

### 3. Certifications Regarding Lobbying

Title 31, United States Code, Section 1352, entitled "Limitation on use of appropriated funds to influence certain Federal contracting and financial transactions," generally prohibits recipients of Federal grants and cooperative agreements from using Federal (appropriated) funds for lobbying the Executive or Legislative Branches of the Federal Government in connection with a SPECIFIC grant or cooperative agreement. Section 1352 also requires that each person who requests or receives a Federal grant or cooperative agreement must disclose lobbying undertaken with non-Federal (non- appropriated) funds. These requirements apply to grants and cooperative agreements EXCEEDING \$100,000 in total costs (45 CFR Part 93).

The undersigned (authorized official signing for the applicant organization) certifies, to the best of his or her knowledge and belief, that:

1. No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.
2. If any funds other than Federally appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure of Lobbying Activities," in accordance with its instructions. (If needed, Standard Form-LLL, "Disclosure of Lobbying Activities," its instructions, and continuation sheet are included at the end of this application form.)
3. The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by Section 1352, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

### 4. Certification Regarding Program Fraud Civil Remedies Act (PFCRA)

The undersigned (authorized official signing for the applicant organization) certifies that the statements herein are true, complete, and accurate to the best of his or her knowledge, and that he or she is aware that any false, fictitious, or fraudulent statements or claims may subject him or her to criminal, civil, or administrative penalties. The undersigned agrees that the applicant organization will comply with the Public Health Service terms and conditions of award if a grant is awarded as a result of this application.

### 5. Certification Regarding Environmental Tobacco Smoke

Public Law 103-227, also known as the Pro-Children Act of 1994 (Act), requires that smoking not be permitted in any portion of any indoor facility owned or leased or contracted for by an entity and used routinely or regularly for the provision of health, daycare, early childhood development services, education or library services to children under the age of 18, if the services are funded by Federal programs either directly or through State or local governments, by Federal grant, contract, loan, or loan guarantee. The law also applies to children's services that are provided in indoor facilities that are constructed, operated, or maintained with such Federal funds. The law does not apply to children's services provided in private residence, portions of facilities used for inpatient drug or alcohol treatment, service providers whose sole source of applicable Federal funds is Medicare or Medicaid, or facilities where WIC coupons are redeemed.

Failure to comply with the provisions of the law may result in the imposition of a civil monetary penalty of up to \$1,000 for each violation and/or the imposition of an administrative compliance order on the responsible entity.

By signing the certification, the undersigned certifies that the applicant organization will comply with the requirements of the Act and will not allow smoking within any portion of any indoor facility used for the provision of services for children as defined by the Act.

The applicant organization agrees that it will require that the language of this certification be included in any subawards which contain provisions for children's services and that all subrecipients shall certify accordingly.

The Public Health Services strongly encourages all grant recipients to provide a smoke-free workplace and promote the non-use of tobacco products. This is consistent with the PHS mission to protect and advance the physical and mental health of the American people.

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Name	<input type="text" value="Maggie D. Anderson"/>
Title	<input type="text" value="Executive Director"/>
Organization	<input type="text" value="North Dakota Department of Human Services"/>

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

Footnotes:



# I. State Information

## Certifications

### 1. Certification Regarding Debarment and Suspension

The undersigned (authorized official signing for the applicant organization) certifies to the best of his or her knowledge and belief, that the applicant, defined as the primary participant in accordance with 45 CFR Part 76, and its principals:

- a. are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions by any Federal Department or agency;
- b. have not within a 3-year period preceding this proposal been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State, or local) transaction or contract under a public transaction; violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;
- c. are not presently indicted or otherwise criminally or civilly charged by a governmental entity (Federal, State, or local) with commission of any of the offenses enumerated in paragraph (b) of this certification; and
- d. have not within a 3-year period preceding this application/proposal had one or more public transactions (Federal, State, or local) terminated for cause or default.

Should the applicant not be able to provide this certification, an explanation as to why should be placed after the assurances page in the application package.

The applicant agrees by submitting this proposal that it will include, without modification, the clause titled "Certification Regarding Debarment, Suspension, Ineligibility, and Voluntary Exclusion--Lower Tier Covered Transactions" in all lower tier covered transactions (i.e., transactions with subgrantees and/or contractors) and in all solicitations for lower tier covered transactions in accordance with 45 CFR Part 76.

### 2. Certification Regarding Drug-Free Workplace Requirements

The undersigned (authorized official signing for the applicant organization) certifies that the applicant will, or will continue to, provide a drug-free workplace in accordance with 45 CFR Part 76 by:

- a. Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession or use of a controlled substance is prohibited in the grantee's work-place and specifying the actions that will be taken against employees for violation of such prohibition;
- b. Establishing an ongoing drug-free awareness program to inform employees about--
  1. The dangers of drug abuse in the workplace;
  2. The grantee's policy of maintaining a drug-free workplace;
  3. Any available drug counseling, rehabilitation, and employee assistance programs; and
  4. The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace;
- c. Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph (a) above;
- d. Notifying the employee in the statement required by paragraph (a), above, that, as a condition of employment under the grant, the employee will--
  1. Abide by the terms of the statement; and
  2. Notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction;
- e. Notifying the agency in writing within ten calendar days after receiving notice under paragraph (d)(2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to every grant officer or other designee on whose grant activity the convicted employee was working, unless the Federal agency has designated a central point for the receipt of such notices. Notice shall include the identification number(s) of each affected grant;
- f. Taking one of the following actions, within 30 calendar days of receiving notice under paragraph (d) (2), with respect to any employee who is so convicted?
  1. Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or
  2. Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency;
- g. Making a good faith effort to continue to maintain a drug-free workplace through implementation of paragraphs (a), (b), (c), (d), (e), and (f).

For purposes of paragraph, regarding agency notification of criminal drug convictions, the DHHS has designated the following central point for receipt of such notices:

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Office of Grants Management

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The undersigned (authorized official signing for the applicant organization) certifies, to the best of his or her knowledge and belief, that:

1. No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.
2. If any funds other than Federally appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure of Lobbying Activities," in accordance with its instructions. (If needed, Standard Form-LLL, "Disclosure of Lobbying Activities," its instructions, and continuation sheet are included at the end of this application form.)
3. The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by Section 1352, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

### 4. Certification Regarding Program Fraud Civil Remedies Act (PFCRA)

The undersigned (authorized official signing for the applicant organization) certifies that the statements herein are true, complete, and accurate to the best of his or her knowledge, and that he or she is aware that any false, fictitious, or fraudulent statements or claims may subject him or her to criminal, civil, or administrative penalties. The undersigned agrees that the applicant organization will comply with the Public Health Service terms and conditions of award if a grant is awarded as a result of this application.

### 5. Certification Regarding Environmental Tobacco Smoke

Public Law 103-227, also known as the Pro-Children Act of 1994 (Act), requires that smoking not be permitted in any portion of any indoor facility owned or leased or contracted for by an entity and used routinely or regularly for the provision of health, daycare, early childhood development services, education or library services to children under the age of 18, if the services are funded by Federal programs either directly or through State or local governments, by Federal grant, contract, loan, or loan guarantee. The law also applies to children's services that are provided in indoor facilities that are constructed, operated, or maintained with such Federal funds. The law does not apply to children's services provided in private residence, portions of facilities used for inpatient drug or alcohol treatment, service providers whose sole source of applicable Federal funds is Medicare or Medicaid, or facilities where WIC coupons are redeemed.

Failure to comply with the provisions of the law may result in the imposition of a civil monetary penalty of up to \$1,000 for each violation and/or the imposition of an administrative compliance order on the responsible entity.

By signing the certification, the undersigned certifies that the applicant organization will comply with the requirements of the Act and will not allow smoking within any portion of any indoor facility used for the provision of services for children as defined by the Act.

The applicant organization agrees that it will require that the language of this certification be included in any subawards which contain provisions for children's services and that all subrecipients shall certify accordingly.

The Public Health Services strongly encourages all grant recipients to provide a smoke-free workplace and promote the non-use of tobacco products. This is consistent with the PHS mission to protect and advance the physical and mental health of the American people.

Name	Maggie D. Anderson
Title	Executive Director
Organization	North Dakota Department of Human Services

Signature: Maggie D. Anderson Date: 5/18/2016

#### Footnotes:



# I. State Information

## Funding Agreement

FISCAL YEAR 2016

PROJECTS FOR ASSISTANCE IN TRANSITION FROM HOMELESSNESS (PATH) AGREEMENT

I hereby certify that the State of North Dakota agrees to the following:

### Section 522(a)

Amounts received under the PATH Formula Grant Program will be expended solely for making grants to political subdivisions of the State, and to nonprofit private entities for the purpose of providing the services specified in Section 522(b) to individuals who:

- Are suffering from serious mental illness;
- Are suffering from serious mental illness and have a substance use disorder; and
- Are homeless or at imminent risk of becoming homeless.

### Section 522(b)

Entities receiving grants under the PATH Formula Grant Program will expend funds for the following services:

- Outreach;
- Screening and diagnostic treatment;
- Habilitation and rehabilitation;
- Community mental health;
- Alcohol or drug treatment;
- Staff training, including the training of individuals who work in shelters, mental health clinics, substance abuse programs, and other sites where homeless individuals require services;
- Case management services, including:
  - Preparing a plan for the provision of community mental health services to the eligible homeless individual involved, and reviewing such plan not less than once every 3 months;
  - Providing assistance in obtaining and coordinating social and maintenance services for eligible homeless individuals, including services relating to daily living activities, personal financial planning, transportation services, habilitation and rehabilitation services, prevocational and vocational services, and housing;
  - Providing assistance to eligible homeless individuals in obtaining income support services, including housing assistance, food stamps, and supplemental security income benefits;
  - Referring eligible homeless individuals for such other services as may be appropriate; and
  - Providing representative payee services in accordance with Section 1631(a)(2) of the Social Security Act if the eligible homeless individual is receiving aid under Title XVI of such act and if the applicant is designated by the Secretary to provide such services.
- Supportive and supervisory services in residential settings;
- Referrals for primary health services, job training, education services and relevant housing services;
- Housing services [subject to Section 522(h)(1)] including:
  - Minor renovation, expansion, and repair of housing;
  - Planning of housing;
  - Technical assistance in applying for housing assistance;
  - Improving the coordination of housing services;
  - Security deposits;
  - The costs associated with matching eligible homeless individuals with appropriate housing situations;
  - One-time rental payments to prevent eviction; and
  - Other appropriate services, as determined by the Secretary.

### Section 522(c)

The State will make grants pursuant to Section 522(a) only to entities that have the capacity to provide, directly through arrangements, the services specified in Section 522(b), including coordinating the provision of services in order to meet the needs of eligible homeless individuals who are both mentally ill and suffering from a substance abuse disorder.

### Section 522(d)

In making grants to entities pursuant to Section 522(a), the State will give special consideration to entities with a demonstrated effectiveness in serving homeless veterans.

### Section 522(e)

The state agrees that grants pursuant to Section 522(a) will not be made to any entity that:

- Has a policy of excluding individuals from mental health services due to the existence or suspicion of a substance abuse disorder; or
- Has a policy of excluding individuals from substance abuse services due to the existence or suspicion of mental illness.

#### Section 522(f)

Not more than 4 percent of the payments received under the PATH Formula Grant Program will be expended for administrative expenses regarding the payments.

#### Section 522(g)

The State will maintain State expenditures for services specified in Section 522(b) at a level that is not less than the average level of such expenditures maintained by the State for the 2-year period preceding the fiscal year for which the State is applying to receive such payments.

#### Section 522(h)

The State agrees that:

- Not more than 20 percent of the payments will be expended for housing services under section 522(b)(10); and
- The payments will not be expended:
  - To support emergency shelters or construction of housing facilities;
  - For inpatient psychiatric treatment costs or inpatient substance abuse treatment costs; or
  - To make cash payments to intended recipients of mental health or substance abuse services.

#### Section 523(a)

The State will make available, directly or through donations from public or private entities, non-Federal contributions toward such costs in an amount that is not less than \$1 for each \$3 of funds provided in such payments. The amount of non-Federal contributions shall be determined in accordance with Section 523(b).

#### Section 523(c)

The State will not require the entities to which grants are provided pursuant to Section 522(a) to provide non-Federal contributions in excess of the non-Federal contributions described in Section 523(a).

#### Section 526

The State has attached hereto a Statement

- Identifying existing programs providing services and housing to eligible homeless individuals and gaps in the delivery systems of such programs;
- Containing a plan for providing services and housing to eligible homeless individuals, which:
  - Describes the coordinated and comprehensive means of providing services and housing to homeless individuals; and
  - Includes documentation that suitable housing for eligible homeless individuals will accompany the provision of services to such individuals;
- Describing the source of the non-Federal contributions described in Section 523;
- Containing assurances that the non-Federal contributions described in Section 523 will be available at the beginning of the grant period;
- Describing any voucher system that may be used to carry out this part; and
- Containing such other information or assurances as the Secretary may reasonably require.

#### Section 527(a)(1), (2), and (3)

The State has attached hereto a description of the intended use of PATH Formula grant amounts for which the State is applying. This description:

- Identifies the geographic areas within the State in which the greatest numbers of homeless individuals with a need for mental health, substance abuse, and housing services are located; and
- Provides information relating to the program and activities to be supported and services to be provided, including information relating to coordinating such programs and activities with any similar programs and activities of public and private entities.

#### Section 527(a)(4)

The description of intended use for the fiscal year of the amounts for which the State is applying will be revised throughout the year as may be necessary to reflect substantial changes in the programs and activities assisted by the State pursuant to the PATH Formula Grant Program.

#### Section 527(b)

In developing and carrying out the description required in Section 527(a), the State will provide public notice with respect to the description (including any revisions) and such opportunities as may be necessary to provide interested clients, such as family members, consumers and mental health, substance abuse, and housing agencies, an opportunity to present comments and recommendations with respect to the description.

#### Section 527(c)(1)(2)

The services to be provided pursuant to the description of the intended use required in Section 527(a), have been considered in the preparation of, have been included in, and are consistent with the State Plan for Comprehensive Community Mental Health Services under P.L. 102-321.

#### Section 528(a)

The State will, by January 31, 2017, prepare and submit a report providing such information as is necessary for:

- Securing a record and description of the purposes for which amounts received under the PATH Formula Grant Program were expended during fiscal year 2016 and of the recipients of such amounts; and
- Determining whether such amounts were expended in accordance with the provisions of Part C- PATH.

#### Section 528(b)

The State further agrees that it will make copies of the reports described in Section 528(a) available for public inspection.

Section 529

Payments may not be made unless the State agreements are made through certification from the chief executive officer of the State.

Charitable Choice Provisions:

The State will comply, as applicable, with the Substance Abuse and Mental Health Services Administration's (SAMHSA) Charitable Choice statutes codified at sections 581-584 and 1955 of the Public Health Service Act (42 U.S.C §§290kk, et seq., and 300x-65) and their governing regulations at 42 C.F.R part 54 and 54a respectively.

---

Name	<input type="text" value="Maggie D. Anderson"/>
Title	<input type="text" value="Executive Director"/>
Organization	<input type="text" value="North Dakota Department of Human Services"/>

---

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

Footnotes:

# I. State Information

## Funding Agreement

### FISCAL YEAR 2016

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---

Name	Maggie D. Anderson
Title	Executive Director
Organization	North Dakota Department of Human Services

---

Signature: Maggie D Anderson Date: 5/18/2016

**Footnotes:**

# I. State Information

## Disclosure of Lobbying Activities

Are there lobbying activities pursuant to 31 U.S.C. 1352 to be disclosed?

Yes

No

To print a Standard Form - LLL if required for submission, click the link below.

[Standard Form LLL \(click here\)](#)

---

Name	<input type="text" value="Maggie D. Anderson"/>
Title	<input type="text" value="Executive Director"/>
Organization	<input type="text" value="North Dakota Department of Human Services"/>

---

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

Footnotes:

## I. State Information

### Disclosure of Lobbying Activities

Are there lobbying activities pursuant to 31 U.S.C. 1352 to be disclosed?

Yes

No

To print a Standard Form - LLL if required for submission, click the link below.

[Standard Form LLL \(click here\)](#)

Name	Maggie Anderson
Title	Executive Director
Organization	North Dakota Department of Human Services

Signature: Maggie D. Anderson Date: 4/21/2015

Footnotes:

# I. State Information

## State PATH Regions

Name	Description	Actions
Region I: Northwest Human Service Center	Region I is served by Northwest Human Service Center, which is located in Williston. The region consists of a three county area (Divide, Williams, McKenzie), including the Trenton Indian Service area. The population of the region is 37,638 (U.S. Census Bureau, 2010-2014 American Community Survey 5 Year Estimates). The decline in oil prices has resulted in significant change in the oil industry in the last six months but the impact on housing and homelessness is not evident.	
Region II: North Central Human Service Center	Region II is served by North Central Human Services Center, which is located in Minot. The region consists of a seven county area (Burke, Renville, Bottineau, Montrail, Ward, McHenry, Pierce), including the Fort Berthold Indian Reservation. The population of the region is 95,980 (U.S. Census Bureau, 2010-2014 American Community Survey 5 Year Estimates). The Minot Air Force Base is located in the region.	
Region III: Lake Region Human Service Center	Region III is served by Lake Region Human Service Center, which is located in Devils Lake. The region consists of a six county area (Rolette, Towner, Cavalier, Ramsey, Benson, Eddy), including the Spirit Lake Indian Reservation and the Turtle Mountain Indian Reservation. The population of the region is 41,220 (U.S. Census Bureau, 2010-2014 American Community Survey 5 Year Estimates).	
Region IV: Northeast Human Service Center	Region IV is served by Northeast Human Service Center, which is located in Grand Forks. The regions consist of a four county area (Pembina, Walsh, Nelson, Grand Forks). The Grand Forks Air Force Base is located in the region. The population of the region is 89,540 (U.S. Census Bureau, 2010-2014 American Community Survey 5 Year Estimates).	
Region V: Southeast Human Service Center	Region V is served by Southeast Human Service Center, which is located in Fargo. The region consists of a six county area (Steele, Traill, Cass, Ransom, Sargent, Richland). The population of the region is 193,751 (U.S. Census Bureau, 2010-2014 American Community Survey 5 Year Estimates).	
Region VI: South Central Human Service Center	Region VI is served by South Central Human Service Center, which is located in Jamestown. The region consist of a nine county area (Wells, Foster, Griggs, Stutsman, Barnes, Logan, LaMoure, McIntosh, Dickey). The region is home to the North Dakota State Hospital. The population of the region is 56,178 (U.S. Census Bureau, 2010-2014 American Community Survey 5 Year Estimates).	
Region VII: West Central Human Service Center	Region VII is served by West Central Human Service Center, which is located in Bismarck. The region consists of a ten county area (McLean, Mercer, Sheridan, Oliver, Burleigh, Kidder, Morton, Grant, Sioux, Emmons), including the Standing Rock Indian Reservation. The population of the region is 148,127 (U.S. Census Bureau, 2010-2014 American Community Survey 5 Year Estimates).	
Region VIII: Badlands Human Service Center	Region VIII is served by Badlands Human Service Center, which is located in Dickinson. The region consists of an eight county area (Dunn, Billings, Golden Valley, Stark, Slope, Hettinger, Bowman, Adams). The population of the region is 42,491 (U.S. Census Bureau, 2010-2014 American Community Survey 5 Year Estimates).	

Add Region

Footnotes:

## II. Executive Summary

### 1. State Summary Narrative

Narrative Question:

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Provide an overview of the state's PATH program with key points that are expanded upon in the State Level Sections of WebBGAS.

Footnotes:

## 1. State Summary Narrative

The PATH Program in North Dakota is a service provided by the North Dakota Department of Human Services through the eight regional human service centers. By locating the PATH Coordinator positions in the regional human service centers, the PATH Coordinator is working within the primary community mental health center for each designated region. The sole position for PATH activities in each region is the PATH Coordinator (Southeast Human Service Center in Fargo does employ a case manager aide, as well as a PATH Coordinator). PATH activities include outreach, case management, screening and diagnostic treatment services, rehabilitation services, community mental health services, mental health medical services, alcohol and drug treatment services, supportive and supervisory services in a residential setting and one-time rental assistance. Services are person-centered and recovery-focused. Federal funding is used to fund the PATH Coordinator, who provides these services to the target population throughout the region. PATH Coordinators carry a caseload of between 5 and 35 PATH-eligible consumers.

Even with some decrease in the oil industry activity, (active oil wells have decreased from the high of 218 in 2012 to 28 in 2016), there continues to be a shortage of affordable housing in North Dakota. According to North Dakota's Housing Finance Agency executive director this is a statewide issue. Homelessness is often a result. According to Reuters (2015), though the fall in oil prices has led to a decline in housing demand and rental costs, the demand for housing still outpaces the supply in western North Dakota. There are no homeless shelters in the two major Western North Dakota communities and the slowdown in the oil industry has led to an increase in unemployment.

The most recent Point-In-Time (PIT) Survey for which data is available - conducted in January 2015- found 1,305 people were experiencing homelessness on that night in North Dakota. According to this same survey 486 people, or 37% of the total homeless population, are unsheltered on any given night. Of those counted in the 2015 PIT survey, 102 people, or 8%, were reported as having chronic substance abuse and 79 people, or 6%, were reported as having severe mental illness. There were 137 veterans included in this count and 47 of those veterans were unsheltered.

Coordination of homeless services continues to be a critical service in North Dakota. The PATH Coordinator is the primary source of homeless case management in four of the most rural regions of North Dakota. All PATH Coordinators are members of the ND Coalition for Homeless People and actively take part in the Continuum of Care Process. Each of the eight regions has a regional homeless coalition and the PATH Coordinator is an active member in each of those regional coalitions. Through the regional homeless coalitions the PATH Coordinator develops effective professional relationships with other individuals and organizations that provide the array of essential services and supports to address the extensive needs of the homeless population. Even though resources are extremely limited, this close working relationship with other service providers throughout their regions helps to ensure that homeless individuals receive needed services in a timely manner. All PATH Coordinators work with Veterans Administration personnel, as needed, to coordinate services for homeless veterans, as well. The PATH Program is working towards implementing the Homeless Management Information System (HMIS),

which will allow for enhanced service coordination. Due to the demands of the array of providers in the continuum of care in North Dakota the PATH program has had to move the target date for implementation of the HMIS system to June 30, 2016.

References:

Reuters (2015). "Reality hits North Dakota's pricey apartment market; rents drop." Accessed at <http://www.reuters.com/article/2015/03/02/us-north-dakota-apartments-idUSKBN0LY0TR20150302>.

"ND Housing Finance Agency Holds Housing Conference in Bismarck." (February 16, 2016) Accessed at: <http://www.kxnet.com/story/31237281/nd-housing-finance-agency-holds-housing-conference-in-bismarck>

II. Executive Summary

2. State Budget

Planning Period From 7/1/2016 to 6/30/2017

\* Indicates a required field

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

a. Personnel	\$ 0	\$ 4,269	\$ 4,269	
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Position *	Annual Salary *	PATH-Funded FTE *	PATH-Funded Salary	Matched Dollars *	Total Dollars	Comments
PATH Administrator	\$ 0	0.05	\$ 0	\$ 4,269	\$ 4,269	

Category	Percentage	Federal Dollars *	Matched Dollars *	Total Dollars	Comments
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b. Fringe Benefits	0.00 %	\$ 0	\$ 0	\$ 0	
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Category	Federal Dollars	Matched Dollars	Total Dollars	Comments
----------	-----------------	-----------------	---------------	----------

c. Travel	\$ 0	\$ 0	\$ 0	
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Line Item Detail *	Federal Dollars *	Matched Dollars *	Total Dollars	Comments
Other (Describe in Comments)	\$ 0	\$ 0	\$ 0	Travel costs for PATH Coordinator in the region and for required training and meetings

d. Equipment	\$ 0	\$ 0	\$ 0	
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No Data Available				
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e. Supplies	\$ 0	\$ 0	\$ 0	
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Line Item Detail *	Federal Dollars *	Matched Dollars *	Total Dollars	Comments
Office: Supplies	\$ 0	\$ 0	\$ 0	

f1. Contractual (IUPs)	\$ 295,000	\$ 381,493	\$ 676,493	
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f2. Contractual (State)	\$ 0	\$ 0	\$ 0	
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No Data Available				
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g. Construction (non-allowable)				
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h. Other	\$ 0	\$ 0	\$ 0	
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No Data Available				
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i. Total Direct Charges (Sum of a-h)	\$ 295,000	\$ 385,762	\$ 680,762	
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Category	Federal Dollars *	Matched Dollars *	Total Dollars	Comments
----------	-------------------	-------------------	---------------	----------

j. Indirect Costs (Administrative Costs)	\$ 0	\$ 0	\$ 0	
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k. Grand Total (Sum of i and j)	\$ 295,000	\$ 385,762	\$ 680,762	
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Allocation of Federal PATH Funds	\$ 300,000	\$ 100,000	\$ 400,000	
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Source(s) of Match Dollars for State Funds:  
 ND State General Fund

Footnotes:

## II. Executive Summary

### 3. Intended Use Plans (IUPs)

Expenditure Period Start Date: **07/01/2016**

Expenditure Period End Date: **06/30/2017**

Primary IUP Provider	Provider Type	Geographic Service Area	Allocations	Matching Funds	Estimated # to Contact	Estimated # to Enroll	# Trained in SOAR	# Assisted through SOAR
Badlands Human Service Center	Community mental health center	Region VIII: Badlands Human Service Center	\$36,875	\$41,969	300	20	0	0
Lake Region Human Service Center	Community mental health center	Region III: Lake Region Human Service Center	\$36,875	\$44,563	100	15	1	2
North Central Human Service Center	Community mental health center	Region II: North Central Human Service Center	\$36,875	\$42,286	150	25	0	0
Northeast Human Service Center	Community mental health center	Region IV: Northeast Human Service Center	\$36,875	\$43,961	125	100	0	0
Northwest Human Service Center	Community mental health center	Region I: Northwest Human Service Center	\$18,437	\$22,614	56	6	0	0
South Central Human Service Center	Community mental health center	Region VI: South Central Human Service Center	\$36,875	\$43,103	121	19	0	0
Southeast Human Service Center	Community mental health center	Region V: Southeast Human Service Center	\$55,313	\$99,255	250	112	0	0
West Central Human Service Center	Community mental health center	Region VII: West Central Human Service Center	\$36,875	\$43,742	203	61	0	0
Grand Total			\$295,000	\$381,493	1,305	358	1	2

**Footnotes:**

**1. Badlands Human Service Center**  
 300 13th Avenue W., Suite 1  
 Dickinson, ND 58601  
**Contact:** Tana Johnson, PATH Coordinator  
**Contact Phone #:** 701-227-7534

**Has Sub-IUPs:** No  
**Provider Type:** Community mental health center  
**PDX ID:** ND-001  
**State Provider ID:**

**Geographical Area Served:** Region VIII: Badlands Human Service Center

Planning Period From 7/1/2016 to 6/30/2017

\* Indicates a required field

Category	Federal Dollars	Matched Dollars	Total Dollars	Comments
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**a. Personnel** \$ 21,102 \$ 0 \$ 21,102

Position *	Annual Salary *	PATH-Funded FTE *	PATH-Funded Salary	Matched Dollars *	Total Dollars	Comments
Case Manager	\$ 21,102	1.00	\$ 21,102	\$ 0	\$ 21,102	

Category	Percentage	Federal Dollars *	Matched Dollars *	Total Dollars	Comments
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**b. Fringe Benefits** 48.02 % \$ 10,134 \$ 0 \$ 10,134

Category	Federal Dollars	Matched Dollars	Total Dollars	Comments
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**c. Travel** \$ 1,639 \$ 0 \$ 1,639

Line Item Detail *	Federal Dollars *	Matched Dollars *	Total Dollars	Comments
Other (Describe in Comments)	\$ 1,639	\$ 0	\$ 1,639	Budget for in region travel for PATH Coordinator and travel to required training and meetings.

**d. Equipment** \$ 0 \$ 0 \$ 0

No Data Available

**e. Supplies** \$ 0 \$ 26 \$ 26

Line Item Detail *	Federal Dollars *	Matched Dollars *	Total Dollars	Comments
Office: Supplies	\$ 0	\$ 26	\$ 26	

**f. Contractual** \$ 0 \$ 0 \$ 0

No Data Available

**g. Construction (non-allowable)**

**h. Other** \$ 4,000 \$ 41,943 \$ 45,943

Line Item Detail *	Federal Dollars *	Matched Dollars *	Total Dollars	Comments
Client: Other (Describe in Comments)	\$ 4,000	\$ 0	\$ 4,000	Budget for one time financial assistance for the following: rental payment, security deposit, representative payee services.
Office: Rent Expenses	\$ 0	\$ 2,929	\$ 2,929	
Office: Utilities/Telephone/Internet	\$ 0	\$ 544	\$ 544	
Office: Other (Describe in Comments)	\$ 0	\$ 38,470	\$ 38,470	ND State General Fund Contribution for the PATH Program.

**i. Total Direct Charges (Sum of a-h)** \$ 36,875 \$ 41,969 \$ 78,844

Category	Federal Dollars *	Matched Dollars *	Total Dollars	Comments
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**j. Indirect Costs (Administrative Costs)** \$ 0 \$ 0 \$ 0

**k. Grand Total (Sum of i and j)** \$ 36,875 \$ 41,969 \$ 78,844

Source(s) of Match Dollars for State Funds:

Estimated Number of Persons to be Contacted: 300 Estimated Number of Persons to be Enrolled: 20  
 Estimated Number of Persons to be Contacted who are Literally Homeless: 60  
 Number Staff trained in SOAR in Grant year ended in 2014: 0 Number of PATH-funded consumers assisted through SOAR: 0

## **2016 PATH Intended Use Plan Region VIII**

**Local Provider Description** - Region VIII is served by Badlands Human Service Center, which is located in Dickinson. The region consists of an eight county area (Dunn, Billings, Golden Valley, Stark, Slope, Hettinger, Bowman, Adams). The population of the region is 42,491 (U.S. Census Bureau, 2010-2014 American Community Survey 5 Year Estimates).

### **1. Collaboration with HUD Continuum of Care Program - Describe the organization's participation in the HUD Continuum of Care program and any other local planning, coordinating or assessment activities.**

Region VIII PATH Coordinator continues to be involved through participation in the North Dakota Coalition for Homeless People (NDCHP) with the HUD Continuum of Care program. Region VII's Path Coordinator receives information through e-mails, power points, as well as attending the North Dakota Homeless Coalition meetings that occur on a quarterly basis. The North Dakota Homeless Coalition is the lead agency for the Continuum of Care. The Region VIII PATH Coordinator has received new user training for the HMIS system. The ND PATH program is not currently using the system but the deadline for the PATH program is June 30, 2016. Having the HMIS system will help by tracking homeless individuals and their families and guide them to the appropriate resources. The Region VIII PATH Coordinator is also a member of the Southwest Homeless Coalition, which is the regional homeless coalition. The PATH Coordinator is involved on a frequent basis with other agencies in the community. The PATH Coordinator also assists with the Point in Time survey, conducted twice a year on a statewide basis. The results are then sent in to the ND Homeless Coalition.

### **2. Collaboration with Local Community Organizations- Provide a brief description of partnerships with local community organizations that provide key services (i.e., primary health, mental health, substance abuse, housing, employment, etc.) to PATH eligible clients and describe coordination of activities and policies with those organizations.**

**The PATH Coordinator collaborates** with many different agencies in Region VIII to help ensure service coordination and resources to PATH eligible clients. The PATH Coordinator attends the monthly Southwest Homeless Coalition meetings, which is a great opportunity to network with other agencies. The PATH Coordinator serves on the House of Manna board (a Christian, non-denominational, non-profit, charitable organization located in the heart of Southwest North Dakota, Dickinson, where individuals can go to get needed items at no cost). The PATH Coordinator attends monthly Salvation Army meetings, and is involved with the Red Kettle Campaign, as well as Coats for Kids. The PATH Coordinator was able to attend the Salvation Army National Conference in Phoenix, AZ in April 2016, which provided great information and networking!

**Badlands Human Service Center (BLHSC)** is able to provide service for PATH eligible clients, as well as non-PATH clients. Other areas/units of BLHSC can refer clients to the PATH program. The PATH Coordinator has received a number of phone calls and emails over the past year from co-workers, inquiring about the PATH Program. Badlands has just restarted their Addiction Day Treatment and the IDDT (Integrated Dual Diagnosis Treatment) is being implemented. BLHSC has a psychiatrist on staff for clients' needs, as well as to prescribe medications if necessary. Nursing staff is available for medication set-up. A 24 hour crisis line is available through BLHSC.

**Dickinson Churches United for the Homeless (DCUH).** This is an organization that helps ensure that safe housing options exist for our community. It is for men only, and currently can house up to 15 men a night. Several local churches have joined together to provide temporary shelter during the winter months. There are numerous volunteers and donations that help make this service possible. Sheltering is provided from approximately November 1<sup>st</sup> to March 31<sup>st</sup>. They have just finished their 4<sup>th</sup> year; however, they are unsure of how they will operate next year. This past year, it was run very differently. If there were homeless individuals needing shelter during the winter, they rented a hotel, from anywhere from 3-7 nights. The number of men was significantly down, and this response helped to eliminate some volunteer burn-out concerns. The PATH Coordinator has conducted outreach visits to the motel to help with any resources that may be needed.

**Community Action** in Dickinson is a great asset for PATH clients. Community Action is able to help with rent deposits once a place of residence has been established and an inspection has been completed. They also offer Self Reliance Case Management, which consists of a variety of services all designed to improve the standard of living and help promote the self-sufficiency of low-income individuals. These services include: Money Management; Budget Planning; Community Resource Information; Furthering Education; Goal Planning; Career Exploration; Resume Writing; Training and Practice for Job Interviews, and Support and Encouragement. Other services through Community Action are: Individual Development Accounts; Payee Case Management; Homebuyers Education; Homebuyers Education; Income Tax Assistance; Housing Counseling; Medication Access Program; Emergency Services; Rental Assistance; Rental Security Deposit; Energy Share (Utilities); Budget Counseling; Food Pantry Referrals, and the Supplemental Commodity Program. Community Action also has a Weatherization Program, which provides energy conservation services to low-income homeowners and renters. Weatherproofing repairs such as insulation, caulking, and weather-stripping are provided to income eligible households.

**Salvation Army**...The Salvation Army is able to provide some vouchers for transportation in Dickinson. They can also help with vouchers for short stays at a local hotel, as well as provide funds for necessary medication, clothing for work related employment and other miscellaneous items/services. There is a representative at Community Action and another one at Stark County Social Services.

**The Welcome Table**...The Welcome Table is a soup kitchen that is provided once a week (Thursday's) in Garvin Hall. This free meal is provided year round, and is well organized with different organizations taking part with the meal preparation and serving on a weekly basis.

**House of Manna**...The House of Manna is a Christian, non-denominational, non-profit, charitable organization located in the heart of Southwest North Dakota, Dickinson. The first act of kindness that grew into House of Manna occurred in November of 1989. Individuals can access needed household items and clothing on a weekly basis.

**Amen Food Pantry**...The Amen Food Pantry can be accessed by referring an individual/family. They are able to access the Pantry once a month for needed food and non-food items. Some of the non-food items could include: toothpaste, toothbrushes, laundry soap, deodorant, toilet paper, paper towels, cleaning products, etc. I have access to the food vouchers and am able to provide an individual/family with them.

**Dorcas Society**...The Dorcas Society in Dickinson has been a philanthropic society since 1909. They are a non-profit organization which accepts donations and has fund-raising events.

They help families in need, such as clothes, hygiene supplies, holiday food baskets, gifts for children for holidays, such as Christmas and Easter.

**South West Homeless Coalition**...Currently, the coalition is meeting once a month, and has a 501-3c status. The goal is to raise or receive enough donations to purchase a transitional shelter in Dickinson. This has been the main focus of the meetings.

**Job Service of North Dakota as well as Vocational Rehabilitation**....these agencies are great assets to help PATH eligible clients with job searching and training, as well as resume building. Vocational Rehabilitation is primarily focuses on individuals who have disabilities.

**Experience Works**.....is a non-profit organization that helps to assist individuals 55 years and older to gain employment.

**Stark County Social Services**...Stark County is a resource that clients can access to get help with Medicaid, Medicaid Expansion Program, SNAP (food stamps), as well as daycare assistance.

**Dickinson Police Department**....the Dickinson Police Department is also able to give a grocery gift card for emergency use if Stark County Social Services is closed.

**Military Services**....PATH eligible individuals are referred to the Salvation Army for their Supportive Services for Veteran's Families Program. This program can help assist Veterans and their families who are homeless or a risk of becoming homeless.

**Money follows the Person**...this is a program that can be a great benefit to individuals, especially those that have been hospitalized at the State Hospital in Jamestown for mental health reasons. It helps the individual with providing them with \$2,500.00 to help get their needs met when they return back to their community.

**Domestic Violence Shelter**....helps provide a safe shelter for women and children that have been in a domestic violence situation. They have many resources to help women and families. If they are not full, which most of the time they are, they can house homeless women with or without children.

**Residential Care Center (RCC)**....this facility consists of 1 crisis bed for up to 72 hours, 4 RIS beds (drug/alcohol treatment), as well as 12 Transitional Living (TL) beds. Both the Crisis and TL beds are for SMI eligible individuals.

**Medical Clinics and Hospital**.....there are three clinics in Dickinson; Sanford Health, Great Plains Clinic, and CHI St. Alexius Clinic. The main hospital is CHI's St. Alexius, which use to be St. Joseph's Hospital.

**Southwest Multi-County Correctional Center**....within the last few months, the PATH Coordinator has started going to the jail to meet with inmates in the phone booth to discuss needs/resources that were identified by an employee at the jail who conducts a basic needs assessment. The early phase of this program is going extremely well. It started as a collaborative activity between Community Action, the PATH Coordinator and the Correctional Center. The goal is to try and get information/resources to inmates while they are still incarcerated, so that when they leave they have some "tools" in their pocket. The PATH Coordinator has met with approximately 24 individuals thus far and given out a lot of information. Through this effort and in collaboration with Community Action using some of their emergency funds to help with the cost, several ND Birth Certificates have been accessed for

inmates. This is useful because a lot of individuals do not have an ID, Social Security Card; Driver's License.....either it has been misplaced, left somewhere or lost. The PATH Coordinator has also been able to get clothing for a few men, so they have clothes when they leave the facility. Also...if the person is forthcoming with a mental health diagnosis and homeless, the possibility of being PATH qualified and how having a case manager could benefit them is processed with the individual. The PATH Coordinator will be able to report more extensively on this project next year.

**3. Service Provision - Describe the organization's plan to provide coordinated and comprehensive services to eligible PATH clients, including:**

- a. **Describe how the services to be provided using PATH funds will align with PATH goals to target street outreach and case management as priority services and maximize serving the most vulnerable adults who are literally and chronically homeless.**

**Outreach** is such an important aspect of being a homeless case manager. It allows that connections with people who are homeless or at risk of being homeless to see what types of resources they most need. Most of the time, PATH eligible individuals are not able to afford rental expenses, such as deposits, and monthly rent. Region VIII has seen a fluctuation with rental costs and availability. Within the last year, with oil companies leaving the area, people have moved, and thus opening apartments up. This has also been influential in bringing the cost of rentals down. Lately, job hunting has been a challenge, with a significant decrease in hiring and numerous layoffs. However, with summer approaching, hopefully there will be an increase with job demand. Stark County Housing Authority's waiting list for HUD Vouchers is quite lengthy for Region VIII. Currently the waiting list is approximately 110 people or families. PATH funds can assist with their deposit, first month's rent, or with a payee.

- b. **Describe any gaps that exist in the current service systems.**

There are many gaps that exist in the current service system. The biggest gap is the lack of a permanent shelter, or a transitional living environment. Once the South West Homeless Coalition gets enough donations to start the process of building or buying an existing building for a homeless/transitional shelter, shelter availability will likely be one to two years out. Accessing the Dickinson Churches United for the homeless is difficult at times due to burn out and a lot of the same people volunteering. The fact that the shelter only provides the service to men is also a concern. There continues to be a significant gap regarding shelter for single women, women with children, or families.

Due to the Oil Boom in the past, prices on everything from fuel, groceries and housing skyrocketed, making it difficult for people to afford to live here. Now that the boom has slowed significantly rent is reduced but still not affordable. Other essentials such as groceries are still expensive. Trying to get into an apartment usually requires a credit score of at least 600. This can be very difficult to achieve, especially for a person who has been homeless.

Transportation in the Dickinson community is very expensive. It is approximately an \$8.00 minimum fare for any single destination ride.

**c. Provide a brief description of the current services available to clients who have both a serious mental illness and a substance use disorder.**

PATH activities include outreach, case management, screening and diagnostic treatment services, rehabilitation services, community mental health services, mental health medical services, alcohol and drug treatment services, supportive and supervisory services in a residential setting and one-time rent assistance, one-time security deposits, or one-time representative payee services to maintain persons who are homeless and mentally ill in the community. BLHSC now has their addiction program fully operational. In addition, they also have IDDT (Integrated Dual Diagnosis Treatment).

**d. Describe how the local provider agency pays for providers or otherwise supports evidence-based practices, trainings for local PATH-funded staff, and trainings and activities to support collection of PATH data in HMIS.**

Currently, the North Dakota PATH program is not using the HMIS system, however, the PATH coordinator has received training and implementation is on the horizon. BLHSC provides Motivational Interviewing training on a weekly basis, which the PATH Coordinator attends and participates in.

**4. SSI/SSDI Outreach, Access, Recovery (SOAR) - Describe the provider's plan to train PATH staff on SOAR. Indicate the number of PATH staff trained in SOAR during the grant year ended in 2015 (2015-2016), the number of PATH funded consumers assisted through SOAR, and the approximate number of staff to be trained in SOAR for grant year 2016 (2015-2016).**

This PATH Coordinator has not had any training in SOAR. The PATH Coordinator's understanding of SOAR is that it provides PATH Case Managers the tools necessary to expedite access to Social Security disability benefits that result in improved housing and treatment outcomes. It is the goal of the ND PATH program to have all PATH Coordinators complete the SOAR on line training during the coming grant year. The PATH Coordinator is not aware of any individual who gained benefits through the SOAR program.

**5. Access to Housing - Indicate what strategies are used for making suitable housing available for PATH clients (i.e., indicate the type of housing provided and the name of the agency).**

Currently in Dickinson as well as Region 8, there is not a permanent homeless shelter. The local homeless coalition is in the process of asking for donations to be able to build or buy and existing building for a permanent homeless shelter, and or a transitional living center. For the past two winters, Dickinson Churches United has provided shelter on a nightly basis from 9:00 PM to 6:00 AM. Last year, the shelter ended on March 15<sup>th</sup>, 2015. This year, it ended earlier. The PATH Coordinator has met with the Stark County Housing Authority to get more information on housing vouchers and low-income housing opportunities. The drawback, especially for homeless individuals is that there is a waiting list. The Region VIII PATH Coordinator also has been in contact with local renters in the area, and keeps up to date via the internet on available housing. The RCC, through BLHSC is also a resource that can be utilized.

**6. Staff Information - Describe the demographics of staff serving the clients; how staff providing services to the population of focus will be sensitive to age, gender, disability, lesbian, gay, bisexual and transgender, racial/ethnic, and differences of clients; and the extent to which staff receive periodic training in cultural competence and health disparities. A strategy for addressing health disparities is use of the recently revised national Culturally and Linguistically Appropriate Services (CLAS) standards: (<http://www.ThinkCulturalHealth.hhs.gov>).**

This PATH Coordinator has been a Registered Nurse since 1997. The Region VIII PATH Coordinator received a BS in Nursing and Social Behavioral Sciences, with minors in psychology, sociology and addiction counseling. The Region VIII PATH Coordinator's specialty as an RN is Mental Health, having worked many years at a Psychiatric Hospital, Mental Health Units, Women's Prison, as well as other adult and Juvenile corrections settings. The PATH Coordinator has encountered a vast array of diversity over the years working with this population. It is the policy of the North Dakota Department of Human Services to not discriminate or deny services due to age, gender, racial/ethnic differences. It is the policy to not refuse services to anyone if they qualify. In-services are held at BLHSC to address or review a variety of topics regarding types of mental illness, cultural differences, specific gender issues, treatment approaches, and services provided.

**7. Client Information- Describe the demographics of the client population, the projected number of adult clients to be contacted, enrolled, and the percentage of adult clients served using PATH funds to be literally homeless**

Region 8 is a very large region to cover. Due to the everyday increasing/decreasing population of North Dakota, especially in the Region VIII area, it is difficult to project the number of homeless people that will be in the area, especially in current oil circumstances.

What the majority of people/families do not realize until they get to this region, is the cost of housing, as well as the housing shortage. Even though there has been an amazing amount of apartment buildings being built, this has not impacted the cost of older apartment buildings. Some of the rental properties have come down in price, but housing is still not "affordable" by the standards established for housing vouchers. It is estimated that the Region VIII PATH Coordinator will have around 300 contacts this year, and will enroll at least 15-20 PATH eligible clients. It is estimated that approximately 60 of the 300 contacted will be literally homeless.

**8. Consumer Involvement- Describe how individuals who are homeless and have serious mental illnesses, and family members will be involved at the organizational level in the planning, implementation, and evaluation of PATH funded services. For example, indicate whether individuals who are PATH eligible are employed as staff or volunteers or serve on governing or formal advisory boards.**

When the opportunity arises to have family involved with the PATH eligible individual, it is encouraged. However, many homeless individuals are estranged from most if not all of their family, and it is friends that they have as support. PATH eligible individuals assist in the evaluation, planning and implementation of programs and services. Individuals who were homeless as well as those currently homeless are invited to and actively participate in the local and state homeless coalitions.



2. Lake Region Human Service Center

200 Highway 2 South West

Devils Lake, ND 58301

Contact: Joyce Halone, PATH Coordinator

Contact Phone #: 701-665-2216

Has Sub-IUPs: No

Provider Type: Community mental health center

PDX ID: ND-002

State Provider ID:

Geographical Area Served: Region III: Lake Region Human Service Center

Planning Period From 7/1/2016 to 6/30/2017

\* Indicates a required field

Category	Federal Dollars	Matched Dollars	Total Dollars	Comments
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<b>a. Personnel</b>	\$ 21,102	\$ 0	\$ 21,102	
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Position *	Annual Salary *	PATH-Funded FTE *	PATH-Funded Salary	Matched Dollars *	Total Dollars	Comments
Case Manager	\$ 21,102	1.00	\$ 21,102	\$ 0	\$ 21,102	

Category	Percentage	Federal Dollars *	Matched Dollars *	Total Dollars	Comments
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<b>b. Fringe Benefits</b>	48.02 %	\$ 10,134	\$ 0	\$ 10,134	
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Category	Federal Dollars	Matched Dollars	Total Dollars	Comments
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<b>c. Travel</b>	\$ 1,639	\$ 0	\$ 1,639	
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Line Item Detail *	Federal Dollars *	Matched Dollars *	Total Dollars	Comments
Other (Describe in Comments)	\$ 1,639	\$ 0	\$ 1,639	Travel costs for PATH Coordinator within region and for required training and meetings

<b>d. Equipment</b>	\$ 0	\$ 0	\$ 0	
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No Data Available

<b>e. Supplies</b>	\$ 0	\$ 26	\$ 26	
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Line Item Detail *	Federal Dollars *	Matched Dollars *	Total Dollars	Comments
Office: Supplies	\$ 0	\$ 26	\$ 26	

<b>f. Contractual</b>	\$ 0	\$ 0	\$ 0	
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No Data Available

**g. Construction (non-allowable)**

<b>h. Other</b>	\$ 4,000	\$ 44,537	\$ 48,537	
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Line Item Detail *	Federal Dollars *	Matched Dollars *	Total Dollars	Comments
Client: Other (Describe in Comments)	\$ 4,000	\$ 0	\$ 4,000	Budget to cover one time financial assistance for the following: renta paymentsl, security deposit, representative payee services
Office: Rent Expenses	\$ 0	\$ 2,929	\$ 2,929	
Office: Utilities/Telephone/Internet	\$ 0	\$ 544	\$ 544	
Office: Other (Describe in Comments)	\$ 0	\$ 41,064	\$ 41,064	ND State General Fund contribution to the PATH Program

<b>i. Total Direct Charges (Sum of a-h)</b>	\$ 36,875	\$ 44,563	\$ 81,438	
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Category	Federal Dollars *	Matched Dollars *	Total Dollars	Comments
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<b>j. Indirect Costs (Administrative Costs)</b>	\$ 0	\$ 0	\$ 0	
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<b>k. Grand Total (Sum of i and j)</b>	\$ 36,875	\$ 44,563	\$ 81,438	
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Source(s) of Match Dollars for State Funds:

ND State General Funds

Estimated Number of Persons to be Contacted:	100	Estimated Number of Persons to be Enrolled:	15
Estimated Number of Persons to be Contacted who are Literally Homeless:	5		
Number Staff trained in SOAR in Grant year ended in 2014:	1	Number of PATH-funded consumers assisted through SOAR:	2

## **2016 PATH Intended Use Plan Region III**

**Local Provider Description** – Lake Region Human Center (LRHSC), Devils Lake. Region III region serves 6 counties (Ramsey, Towner, Benson, Rolette, Eddy and Cavalier) in addition to serving two reservations (Spirit Lake Nation and Turtle Mountain Band of Chippewa). Region III has an outreach center in Rolette County (Rolla). Each center provides psychiatry/medical, acute counseling, alcohol and drug services, Extended Care case management, Aging/Adult Protective, and Vocational Rehabilitation Services.

### **1. Collaboration with HUD Continuum of Care (CoC) Program - Describe the organization's participation in the HUD Continuum of Care program and any other local planning, coordinating or assessment activities.**

PATH Coordinators continue to participate in the North Dakota Coalition for Homeless People, to include the HUD Continuum of Care Programs, with local housing initiatives, and coordinate with individual providers. Collaborations have evolved and continue with: local emergency services providers, Money Follows the Person (MFP) - Ramsey County Housing Authority committee, and the VA Homeless Services Officer. The .5 FTE PATH Rolla Coordinator is working closely with Turtle Mountain Housing Authority to provide tenant education programs to prevent homelessness. Coordinators participate in various committee work efforts, attend meetings and discuss areas of need and possible options to meet the unmet needs in the area. One of the PATH coordinators is the Committee Chair for the Needs Assessment Committee and she is also on the Public Awareness Committee. The other coordinator has been networking with the Veteran's Administration program for homeless individuals; as well as the MFP - Ramsey Co. Housing Authority and emergency providers in Region III.

### **2. Collaboration with Local Community Organizations – Provide a brief description of partnerships with local community organizations that provide key services (i.e., primary health, mental health, substance abuse, housing, employment, etc.) to PATH eligible clients and describe coordination of activities and policies with those organizations.**

Collaboration with local community services and resources is critical to providing effective services in the PATH program. In Region III the following agencies and organizations are an integral part of supporting people who are homeless. **Dakota Prairie Community Action Agency (DPCAA)** provides assistance with limited emergency shelter (one night during the week or possibly a weekend), deposit assistance, utility deposit assistance, monthly food commodities, and emergency clothing. They also provide fuel assistance (10 gallons) and one-time assistance with medications if the person cannot afford them. DPCAA partners with other emergency service providers in the area to insure the needs of the homeless are met.

**Hope Center** (Devils Lake) assists with food baskets and other care items (hygiene items, diapers, etc.). It is a church affiliated and supported organization.

**Lake Region Community Shelter:** A church affiliated 10 - 12 bed emergency shelter will operate by volunteers from 7 PM – 7 AM daily. The first day of operation will take place on Friday, May 6, 2016.

**Father Gerald Crisis Fund**, through St Joseph's Catholic Church in Devils Lake, may provide assistance for partial payments or deposits for rent or utility bills. They may also provide occasional assistance with medications. (This vendor is considered a last resort by the provider, given they only have parishioner support/donations).

**The Salvation Army** provides assistance (up to \$200/person) with rental deposits, one-time payments to avoid evictions, medications, and transportation. The Salvation Army also has a program to assist homeless vets. This program can assist with security deposits, rent, and locating apartments. They also work with Supportive Services for vets and their families.

**The Freedom Center**, a Psychosocial Rehabilitation Center/Recovery Center, provides leisure and recreation opportunities as well as a noon meal seven days a week for members who are seriously mentally ill. A new Recovery Coordinator has been hired who assists the consumers with activities and recovery focused meetings.

**County and Tribal Social Services** provide entitlement benefits including: Medical Assistance, SNAP benefits, heating assistance, general assistance, etc. For very brief periods of time Turtle Mountain Tribe will place homeless individuals in a motel under emergency situations.

PATH Coordinators work with the local **County Housing Authorities, Tribal Housing Authorities,** and landlords in Region III to assist people in securing affordable housing.

Mental Health and Substance Abuse treatments are available at the LRHSC for people who have either or both problems. State-wide initiatives are being developed and implemented, such as IDDT, to assist with the seriously mentally ill individuals who have substance dependency issues. Trauma informed care remains centered in the work provided by LRHSC. There are several private providers within Region III. The North Dakota State Hospital (Jamestown) is available to provide both mental health and substance abuse treatment, as necessary and appropriate, when community based services are not adequate to meet the need of the consumer. LRHSC consumers have the option to utilize private providers such as Altru Health System, Trinity, and Stadter Center as indicated for in-patient services. 5th Generation in Belcourt provides residential addiction services (Rolette County).

**Indian Health Service (IHS) and IHS mental health agencies** on both reservations assist with health and mental health needs of enrolled members, including the IHS hospital in Belcourt, with staffing that includes psychologists, MSWs, and a psychiatrist and psychiatric nurse specialist. IHS in Fort Totten also staffs two MSWs and IHS is contracting for psychiatric services via telemed program (Arizona). Beginning June 1, 2016 the Spirit Lake Tribe will oversee the operations/budget for the IHS Clinic and IHS Mental Health at Fort Totten.

**Prairie Heights, a HUD-COC** based project and owned by the International Order of Odd Fellows, is a supportive housing complex with 22 apartments (17 SMI/Homeless, 4 Low income/Homeless, and 1 staff apartment), that provides safe, affordable housing to qualifying individuals.

Currently for Emergency Shelter, after hours, the **Lake Region Law Enforcement** will authorize one night in a hotel after screening the individual and/or family (for those individuals in lower Region III). The law enforcement center fields the calls for Dakota Prairie Community Action during the weekend and evening hours. During the daytime hours consumers are referred directly to Dakota Prairie Community Action for assistance. Dakota Prairie Community Action in Rolla may also provide very brief emergency shelter at a motel for individuals. For domestic violence situations, there are two local agencies, Safe Alternatives for Abused Families in the community of Devils Lake and Hearts of Hope in the community of Belcourt. These programs offer shelter access to families affected by violence. DPCAA has one transition house which can house one family for a limited amount of time in Devils Lake.

In the Belcourt and Dunseith areas the **Turtle Mt. Housing Authority** has established two "Homeless Homes" (one in each community) which can house four families in each unit for up to 30 days.

The **Society of St. Vincent De Paul** is a world organization (serving 132 countries) which is working to fill in the service gaps for homeless individuals. Services are provided on Mondays, Tuesdays, Thursdays, and Fridays. This church based organization is staffed by volunteers. The society partners with other emergency service providers to assist the homeless with food, shelter, clothing, household furnishings, rental/security deposits, utility assistance and transportation.

One of the most important “local organizations” would be the landlords in the area. Extensive work has been done to solidify and nourish these working relationships so individuals are more likely to be given a chance to obtain and maintain housing in the area of their choice. MFP - Ramsey Co. Housing Authority has provided land lord education for local property owners/managers in a day-long seminar this past year.

Path Coordinators support individuals to eliminate homelessness by assisting individuals to contact any of the above organizations, assisting with any paperwork for these supports, and coordinating care plans with these organizations (as allowed by individuals).

### **3. Service Provision – Describe the organization’s plan to provide coordinated and comprehensive services to eligible PATH clients, including:**

- a. **Describe how the services to be provided using PATH funds will align with PATH goals to target street outreach and case management as priority services and maximize serving the most vulnerable adults who are literally and chronically homeless.**

A continuation of concerted efforts in this year will focus on the work with the Housing Authorities to not only intervene with individuals who are literally and chronically homeless, but to support formerly precariously housed individuals (those who have been chronically homeless and have just obtained housing). In addition, PATH coordinators will make every effort to make periodic canvass of local areas homeless individuals gather as well as provide education to community stakeholders regarding options when they encounter a homeless individual (where to call and who to ask for).

- It is important for the reader to note that in both the rural areas of Region III and the tribal reservations it is not unusual for an individual who is homeless to have a brief respite at a relative’s home or in a friend’s home. Due to the severity of weather and the cultural nuances it is not typical for an individual to be left in the sub-zero weather for any length of time. Although these individuals may be temporally housed indoors they are still homeless. That is not to say there are not individuals in our region who are literally homeless, as there are reports of ex-military individuals living in the subterranean.
- PATH Coordinators will continued briefings and trainings with collaborative agencies, police departments, social service agencies, and churches.
- PATH Coordinators will assure response time is within 48 hrs. for first contact and assessment. Continue to collaborate closely the medical providers who often make referrals.
- PATH Coordinators will continue to their collaboration with the North Dakota State Hospital (NDSH), Indian Health Services, etc. to assure seamless transitions and referrals with high risk individuals.
- PATH Coordinators will participate in the Point in Time Surveys which allows even more opportunity to find persons for services.
- PATH Coordinators will maintain their close collaboration with the LRHSC Intake Coordinator and the IDDT team members.

- The two PATH Coordinators meet monthly with Extended Care Supervisor to collaborate on needs, services, contacts, and discuss outreach opportunities.

**b. Describe any gaps that exist in the current service systems.**

The identified gaps in services in Region III are: lack of transportation; lack of affordable transportation; limited hours of public transportation; high rates of unemployment with increasing numbers of unemployed persons; currently, historically no formal shelter available (tentative open date 5/6/16); and there is a definite limit in available housing for persons with any kind of criminal history as well as housing being a continued challenge for the Spirit Lake and Turtle Mountain Band of Chippewa reservations.

In regard to construction impact, it has lessened in the lower Region III. However, in upper Region III the wind farms and the oil field impact are being seen as housing is becoming much more limited. For example, a one bedroom apartment in Rolla is \$690 per month. The deposits are also becoming increasing unaffordable to consumers. In the recent four years private landlords and property managers have reduced or limited the availability of the low income apartments. One of the local trailer parks in Rolla has sold to an out of state entity and residents had their lot rent raised from \$100 to \$160 per month. The response from the out of state management company was “that is not our problem” when informed of the stress this puts on individuals with little finances.

Guardianships, when necessary, can be an expensive undertaking for the family/client, although the state does provide for assistance in many cases. There is also a substantive need for people who are willing to become guardians for individuals. To the extent it would be beneficial for tribes to have an identified agency or “public administrator” who would be willing to be guardian for individuals. In addition, there should be bonded Representative Payees available for individuals who live on reservations, but this is currently not addressed by the tribes. This has been suggested, but buy-in is not evident.

Medical detox options in Region III are non-existent and a possible “wet house” for individuals could be of benefit. As it is now if someone needs medical detox the NDSH, Altru (Grand Forks) or Trinity (Minot) are the options.

There is also a gap in Social Services on reservations when General Assistance funding is depleted. A most serious gap is the lack of employment opportunities on reservations for individuals who would like to remain close to home either for family reasons or due to transportation difficulties. Also, it would be very beneficial in supporting employment if there were more Tribal Transportation options to bring and return individuals to home after working.

**c. Provide a brief description of the current services available to clients who have both a serious mental illness and a substance use disorder.**

PATH activities include outreach, case management, screening and diagnostic treatment services, rehabilitation services, community mental health services, mental health medical services, alcohol and drug treatment services, supportive and supervisory services in a residential setting and one-time rent assistance, or one-time security deposits. PATH coordinators also work closely with the IDDT program to coordinate services. As noted above individuals served via PATH program are free to access local private, tribal or state funded services/programs. They are assisted with the referral process and accessing the services.

**d. Describe how the local provider agency pays for providers or otherwise supports evidence-based practices, trainings for local PATH-funded staff, and trainings and activities to support collection of PATH data in HMIS.**

Both PATH funded staff (one FTE position shared between two individuals) are provided training on evidence based programs and initiatives. They are often at the yearly state-wide trainings and various other in-services and trainings (Dialectical Behavior Therapy, Motivational Interviewing, and Integrated Dual Disorder Treatment). Both are included on the invites for all in-house trainings and staffing. They are also supported in attending the ND Homeless Coalition meetings. Staff is able to attend the Behavioral Health Conference typically in the fall or spring of each year.

LRHSC staff is not currently using the HMIS system and would support efforts for further training of PATH staff for the HMIS portion of the program as indicated by Administration and in accordance with the PATH plan. We would also support further efforts for training on the Coordinated Care Assessment.

The ND Department of Human Services (Region III) staff are not currently collecting data under HMIS. Staff will require training to utilize HMIS as well as any other curriculum for assessments that are incorporated with HMIS for service delivery.

**4. SSI/SSDI Outreach, Access, Recovery (SOAR) - Describe the provider's plan to train PATH staff on SOAR. Indicate the number of PATH staff trained in SOAR during the grant year ended in 2015 (2015-2016), the number of PATH funded consumers assisted through SOAR, and the approximate number of staff to be trained in SOAR for grant year 2016 (2015-2016).**

Two staff (previous PATH coordinator and one of the current two PATH Coordinators) were trained in SOAR and several consumers have been assisted through SOAR since that training. However, the general knowledge gained from SOAR was passed on to other case managers to support the use of this process in assisting assist consumers. Since there has been PATH facilitator change over since that initially training the new PATH Coordinator for the Devils Lake office will participate in and complete the on-line SOAR training. Currently, to assure timely completion of applications and referrals, PATH staff meet periodically with supervisor and other staff to triage cases, problem solve needs, and generally provide peer mentorship to each other.

**5. Access to Housing - Indicate what strategies are used for making suitable housing available for PATH clients (i.e., indicate the type of housing provided and the name of the agency).**

PATH Coordinators are currently involved in on-going interaction with:

County Housing Authorities to access Section 8 vouchers for housing. These vouchers are able to be used with any landlord to provide affordable housing to the individual. The individual is required to pay 30% of the monthly income and the Housing Authority pays the remaining rent to the landlord.

Lake Rentals, in Devils Lake, works with the North Dakota Housing Finance Agency to provide zero to low income housing to individuals in the Region. Again the individual is responsible for 30% of the income towards the rent for the apartment. The NDHFA pays the remaining rent to Lake Rentals. If a person has no income, they are required to pay as low as \$10 a month for rent. Once a person obtains employment, they are required to report their income and their rent is adjusted, accordingly.

Metro Plains Management also offers low income apartments to individuals that qualify. The individual is required to pay 30% of their income and, through rural development grants; the remaining amount of rent is paid to Metro Plains Management.

Dakota Prairie Community Action Agency (DPCAA) to access emergency shelter during the day time with a referral call or if a consumer presents at their office. Otherwise, evening and weekend coverage and access is through the Lake Region Law Enforcement Agency. This funding is provided by DPCAA for this activity.

Domestic violence services when these situations result in homelessness or eminent homeless situations: Consumers are referred to the SAAF house in Devils Lake or Hearts of Hope in Belcourt, ND. Funding for this activity is provided through the Safe Alternatives for Abused Families. At times, we have accessed YWCA in Fargo and Minot also for situations.

Transition House, this can house one family for a limited time and is funded through DPCAA.

Permanent Supportive Housing which is available through Prairie Heights in Devils Lake. This is a HUD-COC project and is owned by the International Order of Odd Fellows.

The Odd Fellows Village which provides low-income housing for individuals over the age of 55 and/or individuals with disabilities. These apartments are provided through separate HUD section 8 vouchers. The individual is required to pay rent equal to 30% of the income with HUD providing the remaining rental amount.

PATH coordinators are also community partners in another strategy that is being utilized which is the re-organization of the Regional Homeless Coalition. PATH Coordinators have been working with local providers to strengthen this coalition and to bring awareness of homeless issues to the public in Region III.

Turtle Mountain Housing has built apartment complexes in the Rolla/Belcourt area. One focused on supporting individuals with substance use disorders, a second which focuses on singles and families, and a third focuses on families. There is early stage planning for a fourth being developed. The housing authority directors from the three tribes in North Dakota have joined forces with the Housing Authority Directors from the reservations in South Dakota to address the housing shortage and homeless tribal member's needs.

- Spirit Lake Nation has built an apartment building for the elderly and disabled in the recent years. Focus is on low income and there is an extensive Wait List for eligible tenants.
- As of May 6, 2016- Devils Lake will have a short term homeless shelter will be up and running from 7 p.m.- 7 a.m. each night.
- Lake Cottage Transitional Living facility- opened in February of 2016. Those consumers who can be rolled from PATH case management to traditional Extended Care Case Management can be screened for possible entry to this program. This program is designed to be skills based training facility with expectation of transition to individual apartments in 9-18 months.

**6. Staff Information - Describe the demographics of staff serving the clients; how staff providing services to the population of focus will be sensitive to age, gender, disability, lesbian, gay, bisexual and transgender, racial/ethnic, and differences of clients; and the extent to which staff receive periodic training in cultural competence and health disparities. A strategy for addressing health disparities is use of the recently revised national Culturally and**

**Linguistically Appropriate Services (CLAS) standards:**  
**(<http://www.ThinkCulturalHealth.hhs.gov>).**

PATH Coordinators are classified as Extended Care Case Manager II's. The Rolla Coordinator has a Master's degree in Counseling and a Master's degree in Educational Administration. She is a Licensed Professional Counselor and Licensed Professional Certified Counselor. She has a background in working with persons with special needs in both a school setting and hospital setting. The Devils Lake Coordinator has a Master's degree in Vocational Rehabilitation and Mental Health Counseling and experience in law enforcement and corrections. She has worked with consumers for a number of years. Her experience with employment is highly beneficial to the consumers she encounters.

The LRHSC makes available all service and assistance without regard to race, color, religion, national origin, age, gender, disability, or status with respect to marriage or public assistance. Staff are encouraged to participate in training devoted to cultural awareness. There are trainings offered each year through the Tribal College or through Tribal Programs which PATH workers are able to attend.

With regard to sensitivity to age, general and racial/ethnic differences and training; PATH staff are provided periodic training on staff diversity and cultural competence. Workshops on tribal traditions and cultural differences are periodically offered to staff. For example, the Red Road Approach to Healing & Wellness is being presented annually and PATH Coordinators attend.

LRHSC has a number of Native American staff and they are accessed for their insight and knowledge base often. In fact, one of the two PATH coordinators is Native American herself. We make every attempt to provide culturally sensitive services to our consumers.

**7. Client Information- Describe the demographics of the client population, the projected number of adult clients to be contacted, enrolled, and the percentage of adult clients served using PATH funds to be literally homeless**

Region III encompasses six counties (Eddy, Benson, Ramsey, Towner, Cavalier, and Rolette) as well as two Native American Reservations (Spirit Lake Nation, near Devils Lake, and the Turtle Mountain Band of Chippewa, near Rolla, ND). Region III has 45% of all Native American people in the state of North Dakota and 1/3 of the residents in the Lake Region's catchment area are Native American. In excess of 40% of all clients served by LRHSC are Native American.

The PATH Coordinator at LRHSC anticipates contacting 75 - 100 clients with PATH funded services during FY 2016.

The PATH Coordinator at LRHSC anticipates enrolling 15 adult clients in PATH funded services during FY 2015.

The PATH Coordinator at LRHSC anticipates that out of the 15 adult clients that will be served with PATH funds, 95% of these individuals will be classified as "literally homeless". The last reporting period 96% of the people outreached were literally homeless.

**8.Consumer Involvement- Describe how individuals who are homeless and have serious mental illnesses, and family members will be involved at the organizational level in the planning, implementation, and evaluation of PATH funded services. For example, indicate whether individuals who are PATH eligible are employed as staff or volunteers or serve on governing or formal advisory boards.**

Consumers are encouraged to complete consumer surveys that are administered by the N.D. Department of Human Services on a regular basis, and consumers are interviewed as a component of Human Service Center licensing which occurs every other year. When held in the region the Stakeholder meetings are also an opportunity for consumers and families to provide feedback. Consumers are encouraged to participate in the monthly meetings held at the Freedom Center to help plan the activities for the month. In addition, some individuals who began as PATH consumers and have subsequently transitioned to traditional SMI case management services have become involved in the LRHSC's Volunteer Program and Recovery programming (formerly Peer Support). The Volunteer program is facilitated by Mental Health Technicians and the focus is assisting consumers to improve self-esteem, explore options for potential work readiness, and increase the number of positive contacts they have with the community and facilitate the community having positive interactions with consumers. The LRHSC Advisory Council also has a consumer/family member as part of the council.

3. North Central Human Service Center

1015 South Broadway, Suite 18

Minot, ND 58701

Contact: Shari Pister, PATH Coordinator

Contact Phone #: 701-857-8544

Has Sub-IUPs: No

Provider Type: Community mental health center

PDX ID: ND-003

State Provider ID:

Geographical Area Served: Region II: North Central Human Service Center

Planning Period From 7/1/2016 to 6/30/2017

\* Indicates a required field

Category	Federal Dollars	Matched Dollars	Total Dollars	Comments
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a. Personnel \$ 21,102 \$ 0 \$ 21,102

Position *	Annual Salary *	PATH-Funded FTE *	PATH-Funded Salary	Matched Dollars *	Total Dollars	Comments
Case Manager	\$ 21,102	1.00	\$ 21,102	\$ 0	\$ 21,102	

Category	Percentage	Federal Dollars *	Matched Dollars *	Total Dollars	Comments
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b. Fringe Benefits 48.02 % \$ 10,134 \$ 0 \$ 10,134

Category	Federal Dollars	Matched Dollars	Total Dollars	Comments
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c. Travel \$ 1,639 \$ 0 \$ 1,639

Line Item Detail *	Federal Dollars *	Matched Dollars *	Total Dollars	Comments
Other (Describe in Comments)	\$ 1,639	\$ 0	\$ 1,639	Travel for PATH Coordinator within region and for required training and meetings

d. Equipment \$ 0 \$ 0 \$ 0

No Data Available

e. Supplies \$ 0 \$ 26 \$ 26

Line Item Detail *	Federal Dollars *	Matched Dollars *	Total Dollars	Comments
Office: Supplies	\$ 0	\$ 26	\$ 26	

f. Contractual \$ 0 \$ 0 \$ 0

No Data Available

g. Construction (non-allowable)

h. Other \$ 4,000 \$ 42,260 \$ 46,260

Line Item Detail *	Federal Dollars *	Matched Dollars *	Total Dollars	Comments
Client: Other (Describe in Comments)	\$ 4,000	\$ 0	\$ 4,000	Budget for one time financial assistance for the following: rental payments, security deposits, and representative payee services
Office: Rent Expenses	\$ 0	\$ 2,929	\$ 2,929	
Office: Utilities/Telephone/Internet	\$ 0	\$ 544	\$ 544	
Office: Other (Describe in Comments)	\$ 0	\$ 38,787	\$ 38,787	ND State General Funds contributed to the PATH Program

i. Total Direct Charges (Sum of a-h) \$ 36,875 \$ 42,286 \$ 79,161

Category	Federal Dollars *	Matched Dollars *	Total Dollars	Comments
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j. Indirect Costs (Administrative Costs) \$ 0 \$ 0 \$ 0

k. Grand Total (Sum of i and j) \$ 36,875 \$ 42,286 \$ 79,161

Source(s) of Match Dollars for State Funds:

ND State General Funds

Estimated Number of Persons to be Contacted: 150 Estimated Number of Persons to be Enrolled: 25  
 Estimated Number of Persons to be Contacted who are Literally Homeless: 50  
 Number Staff trained in SOAR in Grant year ended in 2014: 0 Number of PATH-funded consumers assisted through SOAR: 0

## **2016 PATH Intended Use Plan Region II**

**Local Provider Description** - North Central Human Service Center (NEHSC), Minot. Region II is one of eight regional human service centers in North Dakota. The center is located in Minot and provides counseling and mental health services, substance abuse treatment, disability services, and other human services to a seven county area (Burke, Renville, Bottineau, Montrail, Ward, McHenry, Pierce), including the Fort Berthold Indian Reservation. The population of the region is 95,980 (U.S. Census Bureau, 2010-2014 American Community Survey 5 Year Estimates). The Minot Air Force Base is located in the region.

### **1. Collaboration with HUD Continuum of Care Program - Describe the organization's participation in the HUD Continuum of Care program and any other local planning, coordinating or assessment activities.**

North Central Human Service Center (NCHSC) in Minot is one of eight regional mental health centers within the state of North Dakota. NCHSC provides services to a defined geographical area which includes Bottineau, Burke, McHenry, Mountrail, Pierce, Renville, and Ward counties. Outreach services are provided to outlying areas by satellite facilities located in Rugby, Bottineau, New Town, and Stanley. Services provided by the center include Child, Adult, and Family Services; Mental Retardation/Developmental disabilities Case Management; Vocational rehabilitation; Chemical Abuse Program; Aging Services; and Extended Care Unit for those with serious and persistent mental illness. We are a member of the North Dakota Coalition for Homeless People which coordinates and supports efforts to provide basic human needs and housing. In addition, we are working together in our community and are part of the local homeless coalition.

### **2. Collaboration with Local Community Organizations- Provide a brief description of partnerships with local community organizations that provide key services (i.e., primary health, mental health, substance abuse, housing, employment, etc.) to PATH eligible clients and describe coordination of activities and policies with those organizations.**

Region II's PATH Coordinator specializes in dealing with the homeless population. The PATH Coordinator is an employee of the Human Service Center (NCHSC) and provides case management as well as referrals to community agencies and services. NCHSC provides psychiatric assessment, treatment, and medication monitoring on an as needed basis. Many of the participants have a mental illness or are dually diagnosed and need to access this service on a regular basis. Region 2 has a twenty-four hour crisis help line that provides information, referrals, and support and is available to anyone in need.

The PATH Coordinator maintains on-going contact with **local soup kitchens, food pantries, and clothing pantries** that provide services to the low-income and homeless population in Region 2. The food pantries are in three locations in Minot. A clothing pantry is located in one area church. This provides easy access for the consumers. The soup kitchens serve hot meals seven days a week plus one evening meal on Wednesdays. In addition, a separate church provides an evening meal once a month to the Native American community. Area churches are another means of contact with homeless individuals. Coordination of services has resulted in a seamless process of integrating individuals to a one stop processing for services.

The PATH Coordinator collaborates with and supports client access to the **city and county health clinic**. This clinic serves the low income individuals and families in Region 2 that have limited or no health insurance coverage. They provide screenings and other needed medical health services. This service is crucial to the participants who have not yet accessed Medicaid or other health care alternatives. Participants have a much higher success rate in achieving self-sufficiency when health issues have been addressed as part of the process of independence.

The PATH Coordinator works with the **Community Action Opportunities Agency**. This is a non-profit organization originally established under the Economic Opportunity Act of 1964 to fight America's war on poverty. The Minot office was established in 1975. Community Action Opportunities, Inc. offers a number of programs to assist low-income individuals in becoming economically and socially self-sufficient. They also offer programs in housing, emergency services, energy conservation and youth programs. Their participation in the program is important as the participant moves toward permanent housing. They have funding available to assist with down payments, energy costs and home ownership. The PATH Coordinator works with the **Department of Veterans Affairs, Health Care for Homeless Veterans Outreach Case Manager**. The PATH Coordinator conducts outreach in the Health Care for Homeless Veterans (HCHV) Program to Homeless Chronically Mentally Ill (HCMI) veterans, through regularly scheduled visits to homeless shelters, food banks, jails, religious organizations and other formal and informal sites frequented by the homeless.

The PATH Coordinator works with the local **independent living center Independence Inc.** Independence Inc. has been a part of the community since 1996. They work with homeless individuals to help promote independent living skills. They help assist individuals in applying for Social Security Disability benefits and help with organizational skills. They assist in employment opportunities. They will provide additional job training skills and skills in daily living for people with disabilities.

The PATH Coordinator works with **Job Services of North Dakota**. This service is available to individuals seeking employment. They can register on their own at the local library or in the PATH coordinator's office to establish an appointment for an assessment to see what job would suit their skills. They Job Services of North Dakota is an integrated part of the community. Job Services and RSI frequently work together to train and find suitable job placements for people who are disabled and/or homeless.

The PATH Coordinator is an active member of the **Minot Area Homeless Coalition (MAHC)**. MAHC has been an integrated part of the community since 1989 with an initial group of individuals coming together with a common concern of homeless within our region. The coalition serves as the central advocate for the issues pertaining to homeless. Membership reflects individuals from service agencies, church leaders, business leaders and former homeless individuals united together in a common cause. MAHC serves as the final prevention to homeless when all other agencies can't meet the needs. It can be temporary stays at a local motel with food vouchers or financial assistance to keep a family in their home. A great deal of effort is expended to collaborate between supporting agencies rather than one agency draining their financial resources. The PATH coordinator is the central point of contact for all mental health referrals to North Central Human Service Center from the MAHC.

The PATH Coordinator coordinates and supports referrals to the **Minot Housing Authority**. MHA has been a part of the community for 38 years. The mission of MHA is to provide quality, affordable housing opportunities and promote maximum independence for the communities lower income families, elderly and persons with disabilities. MHA provides assistance to low income individuals and families in the community. MHA owns 259 units of public housing and authorizes over 750 Section 8 Housing Choice Vouchers. On an ongoing basis, MHA remodels their public housing units to ensure they maintain the highest standards in their units. MHA also manages an 81 unit high rise building for people who are elderly and/or disabled.

An important relationship for the PATH coordinator is maintained with the **Minot Police Department**. The police department is often the first contact for people who are homeless. They have been a part of the Homeless Coalition since its inception.

The PATH Coordinator maintains on-going collaboration with the **Minot Public Schools Adult Learning Center (ALC)**. The ALC's homeless children and youth program began in 1990. The program serves from Head-Start age to graduation. The Adult Learning Center has a program that serves educational and employability services from the age of 16+. Homeless families that have not sought help are sometimes identified through the Homeless Services Coordinator of the ALC, through their contact with the children in school. The ALC also provides GED training for adults. In addition, ALC provides education to inmates at the city jail and in some of the treatment facilities throughout the community. This service puts the Coordinator in contact with individual who may have nowhere to go on discharge and have no resources to find accommodation.

Other critical agencies that the PATH Coordinator works in collaboration with are:

- **NORTH DAKOTA ASSOCIATION OF THE DISABLED**: Provides services and support to persons with disabilities in Region II. Services include medication monitoring, independent living counselors (case aides), cost of medication, and handicap accessibility items as well as general support, advocacy, information and referrals;
- **REHAB SERVICES, INC. (RSI)**: The mission of Rehab Services, Inc. is "to provide consumer-driven holistic programming for persons with unique needs- addressing employment, independent living, housing and community support services". RSI currently has 40 employees. Its supported employment programming has consistently been at a 100% placement rate for the past ten years and RSI has experience in the management of 24-hour residential programming for individuals receiving addiction treatment services. RSI also works closely with Vocational Rehabilitation, North Central Human Service Center, Social Security and Social Services to provide services for the individuals it serves. In addition, Rehab Services is the federal grantee providing Benefits Planning, Assistance & Outreach services to the individual involved in the program that are receiving SSI and SSDI;
- **SALVATION ARMY**: Has been in the Minot area since 1980. They work with homeless people by providing vouchers for motels, meals, food, and clothing. They provide transportation assistance to the people who request it. The Salvation Army also has a program to help prevent homelessness by paying rent and utilities;
- **WARD COUNTY SOCIAL SERVICES**: Provides needed services such as food stamps, Medicaid, transportation and general assistance. County assistance is often the only source of income for people who are homeless and it will continue to be a significant resource for the participants in the project. This assistance will provide

- much needed funding to be used for health care, transportation and food until the participant can become self-sufficient; and

  - FLORENCE ANDERSON CENTER OF HOPE (YWCA):** Established in September of 2007 to accommodate Women and Children needing shelter within the Region II area. Their primary mission is dedicated to the elimination of racism and empowerment of women through a common vision of peace, justice, freedom, and dignity for all people. The Florence Anderson Center of Hope has 13 rooms available. They also provide educational opportunities and service options to the women and children they serve. This allows for and encourages a successful reintegration into the community.

**3. Service Provision - Describe the organization's plan to provide coordinated and comprehensive services to eligible PATH clients, including:**

- a. Describe how the services to be provided using PATH funds will align with PATH goals to target street outreach and case management as priority services and maximize serving the most vulnerable adults who are literally and chronically homeless.**

The PATH Coordinator in conjunction with a representative from the Minot Area Homeless Coalition searches the streets of Minot daily seeking homeless individuals who desire assistance. Basic needs of food, shelter, and a shower are provided first. Then they are afforded the opportunity to enter into a comprehensive program established at NCHSC to provide services through our Chemical Abuse Program, Extended Care Unit and Regional Intervention Services. Chemical Abuse provides evaluations, intervention, primary treatment, aftercare, residential programs, consultation and referral and education to address the problems of alcoholism and drug abuse. Residential treatment is provided along problems of alcoholism and drug abuse. Residential treatment is provided along with day treatment for adults and a specialized residential program for addicted women with children. The Extended Care Unit provides services to individuals with serious and persistent mental illness to prevent hospitalizations and promote community living.

Some specific programs that promote psychosocial skills and community living include: Harmony Center, Peer Support Program, and transitional Living/Supportive Living Programs. Regional Intervention Services provides emergency screening, evaluation and consolation services for adults who present themselves in an emotional or addictive crisis state and may be at risk for hospitalization at the State Hospital.

- b. Describe any gaps that exist in the current service systems.**

Permanent immediate homeless shelter for men or low income housing is non-existent in the local area. There is an inability to obtain public housing in a timely manner. There is a current waiting list up to 12 months to obtain public housing or a Section 8 voucher to offset expenses. In August 2007, a men's transition shelter was closed as a result of a lack of financial support. There is a temporary center open from 8pm to 8am and closed down in March 31<sup>st</sup>, 2016. They are working on being able to remain open 24/7 in the future, and eventually open year round.

- c. Provide a brief description of the current services available to clients who have both a serious mental illness and a substance use disorder.**

PATH activities include outreach, case management, screening and diagnostic treatment services, rehabilitation services, community mental health services, mental health medical services, alcohol and drug treatment services, supportive and supervisory services in a residential setting and one-time rent assistance, one-time security deposits, or one-time representative payee services to maintain persons who are homeless and mentally ill in the community.

**d. Describe how the local provider agency pays for providers or otherwise supports evidence-based practices, trainings for local PATH-funded staff, and trainings and activities to support collection of PATH data in HMIS.**

The PATH Coordinator is part of the ND Statewide CoC Process as well as a member in the regional process. The Region II PATH Coordinator is also involved in numerous subcommittees on the local and statewide level. The Minot Area Homeless Coalition serves as the focal point in the community for guidance and direction pertaining to homeless issues. Members from the Coalition serve as public speakers in the region to promote educational awareness and advocacy on homeless issues. HMIS is an ongoing process being monitored for implementation by the North Dakota Coalition for Homeless People. The ND PATH Program has not yet been entered into the HMIS system and the State PATH Contact has maintained ongoing communication with the State HMIS Administrator to ensure that occurs as soon as possible.

**4. SSI/SSDI Outreach, Access, Recovery (SOAR) - Describe the provider's plan to train PATH staff on SOAR. Indicate the number of PATH staff trained in SOAR during the grant year ended in 2015 (2015-2016), the number of PATH funded consumers assisted through SOAR, and the approximate number of staff to be trained in SOAR for grant year 2016 (2015-2016).**

The ND plan will be to have all State PATH Coordinators complete the SOAR on-line training during the 2016 reporting year. Staff turnover and the change from the provision of training sessions to on-line training has delayed the process.

**5. Access to Housing - Indicate what strategies are used for making suitable housing available for PATH clients (i.e., indicate the type of housing provided and the name of the agency).**

The Minot Housing Authority is serving as the lead agency with assistance from the City of Minot to develop and implement an Affordable Housing strategy. The strategy has moved to action where several affordable housing units have been built and recently opened to the public. Several more scattered site units are scheduled to be completed in the future. Clients apply as soon as possible for consideration of housing options.

**6. Staff Information - Describe the demographics of staff serving the clients; how staff providing services to the population of focus will be sensitive to age, gender, disability, lesbian, gay, bisexual and transgender, racial/ethnic, and differences of clients; and the extent to which staff receive periodic training in cultural competence and health disparities. A strategy for addressing health disparities is use of the recently revised national Culturally and Linguistically Appropriate Services (CLAS) standards: (<http://www.ThinkCulturalHealth.hhs.gov>).**

All efforts are made to ensure that no PATH client is made to feel comfortable based on gender, race/ethnicity, sexual orientation, religion, disability or other personal characteristics. Each client is treated as a human being and accordingly each person is different. The PATH Coordinator has participated in a statewide planning group to develop a comprehensive prevention plan targeting North Dakota's high-risk populations. In addition, annual three-day Clinical Forum Conference are conducted to support and encourage a statewide system of quality mental health services. The Forum seeks to educate professionals from multiple disciplines in evidence-based practices and cultural differences within our society.

As an employee of the human service center, the PATH Coordinator has access to training on evidence based practices including but not limited to; Motivational Interviewing, Integrated Dual Diagnosis Treatment, and Trauma Informed Cognitive Behavioral Therapy. The Region II PATH Coordinator is trained as a mental health case manager.

**7. Client Information- Describe the demographics of the client population, the projected number of adult clients to be contacted, enrolled, and the percentage of adult clients served using PATH funds to be literally homeless**

We project our enrolled clients who will receive PATH-funded services will reach between 125-150 individuals, of which at least 50 individuals will literally be homeless. It has been noted that there has been a reduction of individuals with serious mental illness; however, addiction issues have increased.

**8.Consumer Involvement- Describe how individuals who are homeless and have serious mental illnesses, and family members will be involved at the organizational level in the planning, implementation, and evaluation of PATH funded services. For example, indicate whether individuals who are PATH eligible are employed as staff or volunteers or serve on governing or formal advisory boards.**

Within Region II, we have made every effort to include homeless individuals which have serious mental illnesses to be included into the Minot Area Homeless Coalition and the Welcome table. They serve as members of the organizations as well as members of the Board of Directors. Each organization is dedicated to meeting the un-met needs of the homeless population.

4. Northeast Human Service Center

151 South 4th Street, Suite 401

Grand Forks, ND 58201

Contact: Gerri Anderson, PATH Coordinator

Contact Phone #: 701-795-3059

Has Sub-IUPs: No

Provider Type: Community mental health center

PDX ID: ND-004

State Provider ID:

Geographical Area Served: Region IV: Northeast Human Service Center

Planning Period From 7/1/2016 to 6/30/2017

\* Indicates a required field

Category	Federal Dollars	Matched Dollars	Total Dollars	Comments
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<b>a. Personnel</b>	\$ 21,102	\$ 0	\$ 21,102	
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Position *	Annual Salary *	PATH-Funded FTE *	PATH-Funded Salary	Matched Dollars *	Total Dollars	Comments
Case Manager	\$ 21,102	1.00	\$ 21,102	\$ 0	\$ 21,102	

Category	Percentage	Federal Dollars *	Matched Dollars *	Total Dollars	Comments
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<b>b. Fringe Benefits</b>	48.02 %	\$ 10,134	\$ 0	\$ 10,134	
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Category	Federal Dollars	Matched Dollars	Total Dollars	Comments
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<b>c. Travel</b>	\$ 1,639	\$ 0	\$ 1,639	
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Line Item Detail *	Federal Dollars *	Matched Dollars *	Total Dollars	Comments
Other (Describe in Comments)	\$ 1,639	\$ 0	\$ 1,639	Budget for PATH coordinator in region travel and travel to required training and meetings.

<b>d. Equipment</b>	\$ 0	\$ 0	\$ 0	
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No Data Available

<b>e. Supplies</b>	\$ 0	\$ 26	\$ 26	
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Line Item Detail *	Federal Dollars *	Matched Dollars *	Total Dollars	Comments
Office: Supplies	\$ 0	\$ 26	\$ 26	

<b>f. Contractual</b>	\$ 0	\$ 0	\$ 0	
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No Data Available

**g. Construction (non-allowable)**

<b>h. Other</b>	\$ 4,000	\$ 43,935	\$ 47,935	
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Line Item Detail *	Federal Dollars *	Matched Dollars *	Total Dollars	Comments
Client: Other (Describe in Comments)	\$ 4,000	\$ 0	\$ 4,000	Budget to cover on time financial assistance for the following: rental payments, security deposits and representative payee services
Office: Rent Expenses	\$ 0	\$ 2,929	\$ 2,929	
Office: Utilities/Telephone/Internet	\$ 0	\$ 544	\$ 544	
Office: Other (Describe in Comments)	\$ 0	\$ 40,462	\$ 40,462	ND State General Fund contribution to the PATH Program

<b>i. Total Direct Charges (Sum of a-h)</b>	\$ 36,875	\$ 43,961	\$ 80,836	
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Category	Federal Dollars *	Matched Dollars *	Total Dollars	Comments
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<b>j. Indirect Costs (Administrative Costs)</b>	\$ 0	\$ 0	\$ 0	
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<b>k. Grand Total (Sum of i and j)</b>	\$ 36,875	\$ 43,961	\$ 80,836	
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Source(s) of Match Dollars for State Funds:

Estimated Number of Persons to be Contacted: 125 Estimated Number of Persons to be Enrolled: 100

Estimated Number of Persons to be Contacted who are Literally Homeless: 60

Number Staff trained in SOAR in Grant year ended in 2014: 0 Number of PATH-funded consumers assisted through SOAR: 0

## **2016 PATH Intended Use Plan Region IV**

**Local Provider description:** Region IV is served by Northeast Human Service Center, which is located in Grand Forks. The regions consist of a four county area (Pembina, Walsh, Nelson, Grand Forks). The Grand Forks Air Force Base is located in the region. The population of the region is 89,540 (U.S. Census Bureau, 2010-2014 American Community Survey 5 Year Estimates).

### **1. Collaboration with HUD Continuum of Care Program - Describe the organization's participation in the HUD Continuum of Care program and any other local planning, coordinating or assessment activities.**

Currently the Region IV PATH Coordinator participates in the ND Continuum of Care Development Committee. (NDCOCD). She attends quarterly meetings for the group and works on the discharge and membership committees of the ND Coalition for the Homeless which serves as the lead agency for the NDCOC. She attends monthly meetings on a local basis to discuss COC and homeless issues, emergency assistance expenditures and to network with various service providers in the community. The PATH worker assists with the Point In Time Survey of people who are homeless which is conducted one to two times yearly on a statewide basis by the ND Coalition for Homeless Persons/ND COC.

The PATH Coordinator has also participated in a multi-agency meeting to identify gaps in services and to discuss the housing and supportive services needs of various special needs populations within the service area. The PATH worker also participates in the local Services Connect event. The local housing authority and other entities do not utilize the coordinated entry or other coordinated assessment activities at this time. Local agencies working together to support people who are homeless are considering using the CARES process for the proposed housing first model that is under development.

### **2. Collaboration with Local Community Organizations- Provide a brief description of partnerships with local community organizations that provide key services (i.e., primary health, mental health, substance abuse, housing, employment, etc.) to PATH eligible clients and describe coordination of activities and policies with those organizations.**

The PATH worker is housed and is an employee of the primary community mental health provider in the region. This agency provides mental health services and substance use disorder treatment, and is also the regional Vocational Rehabilitation provider. Public health services are located in the same building. The PATH eligible clients access other health and housing services in the same manner as regular citizens. The PATH worker collaborates with the ND State Hospital staff in regard to follow up services for persons with SMI and/or SMI/SUD issues discharging back to the community. The PATH worker currently provides outreach to a local federally qualified healthcare center four hours per week to meet with PATH eligible persons for resource linkage and referral to other needed services in the community. The community does

not currently have other “outreach teams”; however the PATH worker does have contact with outreach workers for the HUD VASH and SSVF program on an as needed basis.

**3. Service Provision - Describe the organization’s plan to provide coordinated and comprehensive services to eligible PATH clients, including:**

- a. **Describe how the services to be provided using PATH funds will align with PATH goals to target street outreach and case management as priority services and maximize serving the most vulnerable adults who are literally and chronically homeless.**

At present, the PATH case manager is able to manage the majority of the PATH contacts regardless of whether they are chronically homeless and/or literally homeless. Those living outdoors are already prioritized based on their precarious living arrangements and the need to access shelter and services quickly. Midwest winters limit the amount of actual street outreach needed in this area during the winter months. The PATH worker has been working with city officials to identify those persons residing outside along the Greenway/river and/or camping in areas around town. This PATH Coordinator would estimate that less than 20 persons are living outside in the community at any one time. Some choose to reside outside as they prefer that setting to the local shelter where they need to maintain sobriety, follow rules, etc. All PATH clients are offered case management services. To date, agencies in the Region IV service area do not utilize the VI-SPDAT or participate in CARES. There are some communities in ND that are starting pilot projects using these tools.

- b. **Describe any gaps that exist in the current service systems.**

Region IV continues experience a bottle neck in finding housing and supportive services for persons with mental illness. Most of the facilities are at capacity and there is waiting list for Section 8 housing of 8-12 months. There are limited services available for supportive services for a person who wants to live in their own apartment but require additional support. There is a continued to need for more supported residential settings for persons with mental illness. There is difficulty in finding housing for those who have poor credit or landlord history, those with large families, and those who owe former landlords or housing assistance programs money. Affordable housing is also an issue for those who do not qualify for housing assistance and may also not have a diagnosis, such as severe mental illness or intellectual disability, that would qualify them for a facility or housing option based on that disability. It also remains difficult to find permanent housing for persons with felony convictions or those who are registered sex offenders.

There is currently a need for more availability for half-way houses or transitional housing for men and women in recovery from addictions and for men and women who are in recovery and have children. There is also a need for long term residential options for those who are starting their recovery from addiction to pain medications. This service

would require some kind of medical component to address the legitimate chronic pain issues of the clients as well as provide the needed on-going support services.

Another barrier is that rental agencies charge a \$20-\$30 fee to apply for an apartment. Most persons who are homeless do not have the resources to pay the fees. Vacancy (currently 4% in Grand Forks) in apartments in this city and across North Dakota are very low at this time, therefore landlords are more selective in choosing tenants. The selection of apartments that meet the payment standard for fair market rent is extremely limited.

Region IV continues to be in need of social detox; however plans for this are progressing with a tentative start date within the next few months. Other agencies report a need for emergency/transitional or supportive housing for homeless families where the head of household is a male who is raising their children. There is also a need for affordable housing that is accessible for persons with physical disabilities. Transitional housing for persons leaving domestic violence is at maximum capacity for the majority of time and slots are limited. The availability of Shelter Plus Care in the area is non-existent. A housing first model is currently under development in the area. A needs assessment was conducted by the group and is available from the Grand Forks Housing Authority.

c. **Provide a brief description of the current services available to clients who have both a serious mental illness and a substance use disorder:**

PATH activities include outreach, case management, screening and diagnostic treatment services, rehabilitation services, community mental health services, mental health medical services, alcohol and drug treatment services, supportive and supervisory services in a residential setting and one-time rent assistance, one-time security deposits, or one-time representative payee services to maintain persons who are homeless and mentally ill in the community.

The PATH Coordinator is an employee of and housed at **Northeast Human Service (NEHSC)**. NEHSC is a community based behavioral health center that provides mental health and substance use disorder treatment services to the PATH eligible persons. NEHSC currently has a CD-SMI group that is held weekly people with dual diagnosis; however this group is currently on hold due to staffing issues. NEHSC has an IDDT team that works with this population as well but they will soon be at capacity. NEHSC has a walk in clinic for addiction evaluations one time per week to provide access to evaluations in a timely manner.

There are other providers of mental health and substance related services in the community, however individuals must have financial resources. ie Drake Counseling, Douglas Place, Agassiz Associates.

**d. Describe how the local provider agency pays for providers or otherwise supports evidence-based practices, trainings for local PATH-funded staff, and trainings and activities to support collection of PATH data in HMIS.**

The current PATH coordinator has received training in Motivational Interviewing, IDDT and Dialectical Behavioral Therapy (DBT). PATH clients have access to other Evidenced Based Practices that are provided by the therapy and chemical dependency treatment units at the agency. The PATH worker has participated in training for HMIS on more than one occasion; however HMIS has not been fully implemented at this time due to confidentiality concerns. The PATH workers work for the state Department of Human Services and therefore safeguard information more closely. Training regarding mental health and other relevant topics is held regularly by the agency where the PATH worker is located.

The current plan is for the PATH program to implement HMIS by June 30, 2016. The state PATH program is waiting for the final determination by the state HMIS Administrator.

**4. SSI/SSDO Outreach, Access, Recovery (SOAR): Describe the provider's plan to train PATH staff on SOAR. Indicate the number of PATH staff trained in SOAR during the grant year ended in 2014, and the number of PATH funded consumers assisted through SOAR.**

Currently the PATH worker has not been trained on the SOAR program but is knowledgeable regarding some of the elements. The ND Coalition for the Homeless is the lead agency in training persons for SOAR statewide. Although the SOAR program is excellent, the PATH worker has been highly successful in getting favorable decisions on SSI/SSDI applications for persons without undergoing the extensive time consuming process that SOAR involves. We do have the ability to make referrals to a SOAR trained person if need be.

The ND plan will be to have all State PATH Coordinators complete the SOAR on-line training during the 2016 reporting year.

**5. Access to Housing: Indicate what strategies will be used for making suitable housing available for PATH clients (i.e., indicate the type of housing provided and the name of the agency).**

Region IV has an array of suitable housing and support services available to PATH eligible clients, however as previously mentioned, services are maxed out. There are three emergency shelters that serve men, women, and women and children. There is an array of treatment settings such as **Centre Inc.**, a crisis residential setting for persons with substance use disorder and/or mental illness and **Duane R. Dornheim**, a transitional living center for persons with SMI. Centre also has beds for those who are exiting the Department of Corrections. There are two lodges operated by **Prairie**

**Harvest Mental Health** for persons with SMI. They also operate a 12 plex supported residential setting (Harvest Homes) for persons with SMI. Stern Place, operated by **Prairie Harvest Mental Health**, is a 9 plex of supported residential living for people with serious mental illness. Prairie Harvest also has an additional 8 bed supportive housing project which is called Siewert Plains. There is private and public housing assistance within the community. Housing assistance based on income is available from two agencies. (**Grand Forks Housing Authority, Metro Plains**) There is one sober house for persons in recovery from substance use disorders. **St Joseph's Social Cares** operates 2 units of transitional living facility for families. **St Joseph's** also operates 3 permanent supportive housing projects. The **Community Violence Intervention Center** operates an emergency shelter and a transitional living program for women and children who are experiencing domestic violence. **Red River Valley Community Action** received COC funding to build 3 units of permanent supportive housing for homeless families. There are also Shelter + Care slots in Grand Forks; however there are no slots at present. There are basic care and nursing home services available within the catchment area for those requiring that type of service. The PATH worker continues to work with individuals to determine their desires in terms of housing, to assess the person's ability to reside in a particular setting and to locate those places.

**6. Staff Information: Describe the demographics of staff serving the clients; how staff providing services to the population of focus will be sensitive to age, gender, disability, lesbian, gay, bisexual and transgender, racial/ethnic, and differences of clients; and the extent to which staff receive periodic training in cultural competence and health disparities. A strategy for addressing health disparities is use of the recently revised national Culturally and Linguistically Appropriate Services (CLAS) standards: (<http://ThinkCulturalHealth.hhs.gov>).**

Currently, the PATH Coordinator in Region IV is a Licensed Social Worker who received training on cultural issues during her formal university training. She has attended numerous workshops regarding cultural, gender related, racial issues, trauma informed care, ethics, etc. Ongoing training regarding mental health/illness/psychiatric medications is provided on routinely by the employing agency. The current PATH worker has over 26 years of experience in adult mental health services.

**7. Client Information: Describe the demographics of the client population, the projected number of adult clients to be contacted, enrolled, and the percentage of adult clients served using PATH funds to be literally homeless.**

According to the PATH report for fiscal year 2015, of the 148 enrolled, there were 90 men, 57 women and one transgendered individual. They are predominately white (104). The majority were non-Veterans (132). Forty seven out of the 148 had a co-occurring substance use disorder with 91 having no co-occurring disorder and the status of 10

persons was unknown. The majority were staying with family or friends. The PATH Coordinator writer estimates meeting with a minimum of 125 persons with at least 50% of those contacted in the next year being literally homeless.

**8. Consumer Involvement: Describe how individuals who experience homelessness and have serious mental illnesses, and family members will be involved at the organizational level in the planning, implementation, and evaluation of PATH-funded services. For example, indicate whether individuals who are PATH-eligible are employed as staff or volunteers or serve on governing or formal advisory boards.**

Homeless consumers, their family members, and other community members are given an opportunity to respond to the PATH grant application through notice in the local newspaper. Homeless consumers are involved on an on-going basis regarding the PATH services and are surveyed by the host agency regarding their satisfaction with the services offered. The majority of the clients seen by the PATH worker do not have involved family members and often times decline to allow contact with their families. Currently, the provider agency does not employ PATH eligible person. There is only one full time equivalent (FTE) for the PATH position and it is filled by a mental health case manager with over 20 years of supporting people who are homeless in Region IV. Because of the states limited allocation, the entire state has only 8 PATH providers, all who are trained professionals. There are PATH eligible persons serving on the governing or formal advisory board at this time in Region IV.

5. Northwest Human Service Center

316 2nd Avenue West

Williston, ND 58802

Contact: Michaela Wilkie, PATH Coordinator

Contact Phone #: 701-774-4658

Has Sub-IUPs: No

Provider Type: Community mental health center

PDX ID: ND-005

State Provider ID:

Geographical Area Served: Region I: Northwest Human Service Center

Planning Period From 7/1/2016 to 6/30/2017

\* Indicates a required field

Category	Federal Dollars	Matched Dollars	Total Dollars	Comments
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<b>a. Personnel</b>	\$ 10,551	\$ 0	\$ 10,551	
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Position *	Annual Salary *	PATH-Funded FTE *	PATH-Funded Salary	Matched Dollars *	Total Dollars	Comments
Case Manager	\$ 21,102	0.50	\$ 10,551	\$ 0	\$ 10,551	

Category	Percentage	Federal Dollars *	Matched Dollars *	Total Dollars	Comments
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<b>b. Fringe Benefits</b>	48.02 %	\$ 5,067	\$ 0	\$ 5,067	
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Category	Federal Dollars	Matched Dollars	Total Dollars	Comments
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<b>c. Travel</b>	\$ 819	\$ 0	\$ 819	
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Line Item Detail *	Federal Dollars *	Matched Dollars *	Total Dollars	Comments
Other (Describe in Comments)	\$ 819	\$ 0	\$ 819	Budget for travel for PATH Coordinator in region and to attend required training and meetings.

<b>d. Equipment</b>	\$ 0	\$ 0	\$ 0	
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No Data Available

<b>e. Supplies</b>	\$ 0	\$ 26	\$ 26	
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Line Item Detail *	Federal Dollars *	Matched Dollars *	Total Dollars	Comments
Office: Supplies	\$ 0	\$ 26	\$ 26	

<b>f. Contractual</b>	\$ 0	\$ 0	\$ 0	
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No Data Available

**g. Construction (non-allowable)**

<b>h. Other</b>	\$ 2,000	\$ 22,588	\$ 24,588	
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Line Item Detail *	Federal Dollars *	Matched Dollars *	Total Dollars	Comments
Client: Other (Describe in Comments)	\$ 2,000	\$ 0	\$ 2,000	Budget for one time financial assistance for the following: rental payments, security deposits, representative payee services.
Office: Rent Expenses	\$ 0	\$ 2,929	\$ 2,929	
Office: Utilities/Telephone/Internet	\$ 0	\$ 544	\$ 544	
Office: Other (Describe in Comments)	\$ 0	\$ 19,115	\$ 19,115	ND State General Fund Contribution to the PATH Program

<b>i. Total Direct Charges (Sum of a-h)</b>	\$ 18,437	\$ 22,614	\$ 41,051	
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Category	Federal Dollars *	Matched Dollars *	Total Dollars	Comments
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<b>j. Indirect Costs (Administrative Costs)</b>	\$ 0	\$ 0	\$ 0	
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<b>k. Grand Total (Sum of i and j)</b>	\$ 18,437	\$ 22,614	\$ 41,051	
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Source(s) of Match Dollars for State Funds:

Estimated Number of Persons to be Contacted: 56 Estimated Number of Persons to be Enrolled: 6

Estimated Number of Persons to be Contacted who are Literally Homeless: 32

Number Staff trained in SOAR in Grant year ended in 2014: 0 Number of PATH-funded consumers assisted through SOAR: 0

## **2016 PATH Intended Use Plan Region I**

**Local Provider Description** - Region I is served by Northwest Human Service Center, which is located in Williston. The region consists of a three county area (Divide, Williams, McKenzie), including the Trenton Indian Service area. The population of the region is 37,638 (U.S. Census Bureau, 2010-2014 American Community Survey 5 Year Estimates). The decline in oil prices has resulted in significant change in the oil industry in the last six months but there is no corresponding change noted relative to the incidence of homelessness or need for services.

### **1. Collaboration with HUD Continuum of Care Program - Describe the organization's participation in the HUD Continuum of Care program and any other local planning, coordinating or assessment activities.**

The PATH Coordinator attends quarterly Continuum of Care Development Committee and North Dakota Coalition of Homeless Persons meetings and serves on necessary committees as needed. The coordinator has been involved in the Williston Basin Resource Coalition (WBRC), as this group addresses the needs of the low income and homeless residents within Region I. The WBRC actively meets monthly and continues to grow with more agencies involvement.

### **2. Collaboration with Local Community Organizations- Provide a brief description of partnerships with local community organizations that provide key services (i.e., primary health, mental health, substance abuse, housing, employment, etc.) to PATH eligible clients and describe coordination of activities and policies with those organizations.**

The PATH Coordinator works closely with local service providers to ensure service coordination and availability for PATH eligible clients.

**Housing**-Community Action Partnership, Williston Housing Authority, NDAD, Family Crisis Shelter, Lutheran Social Services, Salvation Army

**Primary Health**-Williams County Social Services, Good Samaritan Center, Bethel Lutheran Home, Craven-Hagen Clinic, Trinity Western Dakota Clinic, Tioga Medical Center, Crosby Clinic, Upper Missouri District Health Unit, Trenton Clinic, VA Clinic, Mercy Mental Health Clinic, and Fairlight Walk-In Clinic

**Mental Health**-Northwest Human Service Center, 24-hour Crisis Line, Native American Resource Center, Williston Recovery Center

**Employment**-Job Service, Vocational Rehabilitation, Bakken Staffing

**Food**-Salvation Army, various churches, Community Action Partnership

**Transportation**-Northwest Dakota Pubic Transit Bus

**3. Service Provision - Describe the organization's plan to provide coordinated and comprehensive services to eligible PATH clients, including:**

- a. **Describe how the services to be provided using PATH funds will align with PATH goals to target street outreach and case management as priority services and maximize serving the most vulnerable adults who are literally and chronically homeless.**

The opportunity to provide services to the most vulnerable adults, who are literally and chronically homeless, is very limited due to the quickly growing oilfield population and the lack of affordable housing. Funds are available to provide supportive residential services, emergency medical services, therapy, skill building, rental assistance, independent living services, and funding for moving individuals out of town due to a continued level of high rental prices and decrease in company work staff.

- b. **Describe any gaps that exist in the current service systems.**

Affordable housing continues as the largest need in the community. All of the low income units are full and the waitlist continue to be long. New apartments are being built, but most are not affordable for low income individuals or families. All other housing remains expensive. Although the number of people arriving daily has dropped, people do continue to arrive to find work and many are not prepared for the high cost of living.

A fully staffed homeless shelter would be beneficial to the community. The Salvation Army is currently assisting in a 10 bed shelter through one of the local man camps.

Emergency and transitional housing for families is non-existent.

The cost of living continues to remain high, through dropping slowly, and programs like SNAP and Social Security are not adjusting benefits to cover increases in cost of living.

- c. **Provide a brief description of the current services available to clients who have both a serious mental illness and a substance use disorder.**

PATH activities include outreach, case management, screening and diagnostic treatment services, rehabilitation services, community mental health services, mental health medical services, alcohol and drug treatment services, supportive and supervisory services in a residential setting and one-time rent assistance, one-time security deposits, or one-time representative payee services to maintain persons who are homeless and mentally ill in the community.

- d. **Describe how the local provider agency pays for providers or otherwise supports evidence-based practices, trainings for local PATH-funded staff, and trainings and activities to support collection of PATH data in HMIS.**

The provider agency is using Motivational Interviewing and IDDT (both have had fidelity components). The local provider agency pays for training for local PATH staff. The PATH coordinator attends state and web-based training on the migration process of PATH data to HMIS.

**4. SSI/SSDI Outreach, Access, Recovery (SOAR) - Describe the provider's plan to train PATH staff on SOAR. Indicate the number of PATH staff trained in SOAR during the grant year ended in 2015 (2015-2016), the number of PATH funded consumers assisted through SOAR, and the approximate number of staff to be trained in SOAR for grant year 2016 (2015-2016).**

The ND plan is that all State PATH Coordinators complete the SOAR on-line training during the 2016 reporting year. At this time, there is one part-time PATH staff for Region I.

**5. Access to Housing - Indicate what strategies are used for making suitable housing available for PATH clients (i.e., indicate the type of housing provided and the name of the agency).**

There are 2 low-income housing options and 6 tax credit properties in Region I.

- Williston Housing Authority
- West View Apartments (managed by Region I Community Action)
- Water's Edge Apartments (Tax Credit)
- Nakota Ridge Apartments (Tax Credit)
- Williston Senior Apartment Homes (Tax Credit)
- Nordic Hills in Tioga (Tax Credit)-Through Lutheran Social Services
- Tax credit property in Watford City and Williston through Lutheran Social Services
- NDAD Permanent Supportive Housing
- NDAD Transitional Residential Housing

The waiting lists for a majority of housing options are a year-long due to the continued influx of people looking for work. At this time NDAD Permanent Supportive Housing has one opening and NDAD Transitional Residential Housing has two openings, however, the criteria for these options are quite specific.

**6. Staff Information - Describe the demographics of staff serving the clients; how staff providing services to the population of focus will be sensitive to age, gender, disability, lesbian, gay, bisexual and transgender, racial/ethnic, and differences of clients; and the extent to which staff receive periodic training in cultural competence and health disparities. A strategy for addressing health**

**disparities is use of the recently revised national Culturally and Linguistically Appropriate Services (CLAS) standards: (<http://www.ThinkCulturalHealth.hhs.gov>).**

All efforts are made to ensure that PATH clients are made to feel comfortable regardless of gender, race/ethnicity, sexual orientation, religion, disability or other personal characteristics. NWHSC currently has 1 PATH part-time case manager for Region I.

**7. Client Information- Describe the demographics of the client population, the projected number of adult clients to be contacted, enrolled, and the percentage of adult clients served using PATH funds to be literally homeless**

2015-2016 Figures

**Age:** 17 & under (0), 18-23 (7), 24-30 (7), 31-50 (15), 51-61 (9), and 62 and older (6), Unknown (12)

**Gender:** Male (25), Female (31)

**Race:** American Indian or Alaskan Native (5), Asian (0), Black or African American (1), Native Hawaiian or other Pacific Islander (0), White (25), Two or more races (1), Unknown (5)

**Ethnicity:** Hispanic or Latino (4), Non-Hispanic or Latino (27), Unknown (24)

**Co-Occurring Substance abuse:** Co-occurring (14), No Co-occurring (13), Unknown (29)

**Veteran:** Veteran (5), Non-Veteran (31), Unknown (20)

**Housing Status:** Jail, prison or juvenile detention facility (2), Place not meant for habitation (23), Own or someone else's apartment/home (19), Motel/Hotel (5), Other (7)

In 2014-2015, 56 individuals were contacted and 6 clients were enrolled in PATH services. It is projected that the number of clients served in the coming year will meet this number. In 2014-2015 57% of the individuals contacted were literally homeless.

**8.Consumer Involvement- Describe how individuals who are homeless and have serious mental illnesses, and family members will be involved at the organizational level in the planning, implementation, and evaluation of PATH funded services. For example, indicate whether individuals who are PATH eligible are employed as staff or volunteers or serve on governing or formal advisory boards.**

Individuals served have the option of completing a Consumer Satisfaction survey and the responses are used to plan and implement service.



6. South Central Human Service Center

520 3rd Street, NW

Jamestown, ND 58401

Contact: Vanessa Caine, PATH Coordinator

Contact Phone #: 701-253-6315

Has Sub-IUPs: No

Provider Type: Community mental health center

PDX ID: ND-006

State Provider ID:

Geographical Area Served: Region VI: South Central Human Service Center

Planning Period From 7/1/2016 to 6/30/2017

\* Indicates a required field

Category	Federal Dollars	Matched Dollars	Total Dollars	Comments
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<b>a. Personnel</b>	\$ 21,102	\$ 0	\$ 21,102	
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Position *	Annual Salary *	PATH-Funded FTE *	PATH-Funded Salary	Matched Dollars *	Total Dollars	Comments
Case Manager	\$ 21,102	1.00	\$ 21,102	\$ 0	\$ 21,102	

Category	Percentage	Federal Dollars *	Matched Dollars *	Total Dollars	Comments
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<b>b. Fringe Benefits</b>	48.02 %	\$ 10,134	\$ 0	\$ 10,134	
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Category	Federal Dollars	Matched Dollars	Total Dollars	Comments
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<b>c. Travel</b>	\$ 1,639	\$ 0	\$ 1,639	
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Line Item Detail *	Federal Dollars *	Matched Dollars *	Total Dollars	Comments
Other (Describe in Comments)	\$ 1,639	\$ 0	\$ 1,639	Budget for in-region travel for PATH Coordinator and travel to required training and meetings

<b>d. Equipment</b>	\$ 0	\$ 0	\$ 0	
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No Data Available

<b>e. Supplies</b>	\$ 0	\$ 26	\$ 26	
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Line Item Detail *	Federal Dollars *	Matched Dollars *	Total Dollars	Comments
Office: Supplies	\$ 0	\$ 26	\$ 26	

<b>f. Contractual</b>	\$ 0	\$ 0	\$ 0	
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No Data Available

**g. Construction (non-allowable)**

<b>h. Other</b>	\$ 4,000	\$ 43,077	\$ 47,077	
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Line Item Detail *	Federal Dollars *	Matched Dollars *	Total Dollars	Comments
Client: Other (Describe in Comments)	\$ 4,000	\$ 0	\$ 4,000	Budget for one time financial assistance for the following: rental payment, security deposit, representative payee services.
Office: Rent Expenses	\$ 0	\$ 2,929	\$ 2,929	
Office: Utilities/Telephone/Internet	\$ 0	\$ 544	\$ 544	
Office: Other (Describe in Comments)	\$ 0	\$ 39,604	\$ 39,604	ND State General Fund contribution to the PATH Program

<b>i. Total Direct Charges (Sum of a-h)</b>	\$ 36,875	\$ 43,103	\$ 79,978	
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Category	Federal Dollars *	Matched Dollars *	Total Dollars	Comments
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<b>j. Indirect Costs (Administrative Costs)</b>	\$ 0	\$ 0	\$ 0	
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<b>k. Grand Total (Sum of i and j)</b>	\$ 36,875	\$ 43,103	\$ 79,978	
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Source(s) of Match Dollars for State Funds:

Estimated Number of Persons to be Contacted: 121 Estimated Number of Persons to be Enrolled: 19

Estimated Number of Persons to be Contacted who are Literally Homeless: 69

Number Staff trained in SOAR in Grant year ended in 2014: 0 Number of PATH-funded consumers assisted through SOAR: 0

## **2016 PATH Intended Use Plan Region VI**

**Local Provider Description:** South Central Human Service Center is one of eight regional human service centers in North Dakota. The center is located in Jamestown and provides counseling and mental health services, substance abuse treatment, disability services, and other human services to a nine county area (Wells, Foster, Griggs, Stutsman, Barnes, Logan, LaMoure, McIntosh, Dickey). The region is home to the North Dakota State Hospital. The population of the region is 56,178 (U.S. Census Bureau, 2010 - 2014 American Community Survey Population Estimates).

### **1. Collaboration with HUD Continuum of Care Program - Describe the organization's participation in the HUD Continuum of Care program and any other local planning, coordinating or assessment activities.**

The PATH Coordinator is an active member of the North Dakota Coalition for the Homeless which is the lead agency in North Dakota that assists the homeless population. The PATH Coordinator is also an active member in the local South Central Homeless Coalition based out of Jamestown which currently has approximately 80 members from across the region. The coalition has updated the 10-year plan to end homelessness and facilitated a regional survey to identify needs of individuals who are homeless. The Salvation Army is currently the main clearing house for the homeless or those at risk of homelessness. The local Salvation Army has rental assistance grants that are available to assist individuals. These funds have assisted individuals in maintaining their current residences by reducing evictions and other problems that occur with evictions as well as securing permanent residences through payment of first month's rent. The local Salvation Army has also provided funding to assist individuals in paying past due utility bills to avoid eviction. The local county housing agency has provided funds to pay security deposits and/or utility deposits to obtain safe and affordable housing. The local social service office also provides assistance with heating costs in the winter months with fuel assistance program as well as partnering with Community Action for air conditioners in the summer months.

### **2. Collaboration with Local Community Organizations- Provide a brief description of partnerships with local community organizations that provide key services (i.e., primary health, mental health, substance abuse, housing, employment, etc.) to PATH eligible clients and describe coordination of activities and policies with those organizations.**

The PATH Coordinator provides case management services to assist individuals in accessing services and locating resources. Services for outreach case management is provided to Region VI, which consists of nine counties. The PATH Coordinator maintains contact with the social service agencies across the region, local housing agencies, Salvation Army representatives throughout the region and faith-based organizations. The PATH Coordinator also provides emergency services, including crisis screenings.

The PATH Coordinator assists consumers in accessing food programs such as the local food pantries through Community Action, Salvation Army and local faith based organizations that provide an evening meal. The PATH Coordinator coordinates referrals to the local Social Services programs such as SNAP, TANF and fuel assistance programs as well as meal and monetary assistance programs through local faith based organizations. The PATH Coordinator

coordinates transportation to the bus depot with local and area transit and transportation providers.

A significant role of the PATH Coordinator is to provide assistance to address consumer's specific housing needs such as applications to Stutsman County Housing Authority, HUD and Rural Development. The PATH Coordinator assists consumers in accessing medical health services through the local public health agency which includes programs such as Medicaid, Medicaid Expansion and Medicare, community health organizations such as addiction and mental health services, educational services and employment services through the local job service office. The PATH Coordinator maintains and updates a list of available housing in the nine county regions and assists PATH-eligible consumers with housing applications and meeting with potential landlords.

The PATH Coordinator completes an initial mental health assessment or an in-depth psychological/psychiatric evaluation may be completed by a mental health professional through South Central Human Service Center to evaluate mental illness and development of a treatment plan.

Job training or employment services are coordinated between PATH Coordinator and South Central Human Service Center Vocational Rehabilitation Staff, Job Service staff, Freedom Resources, or a contracted agency to provide habilitation and rehabilitation. Case Management and/or therapy services are provided by PATH Coordinator and the PATH Coordinator provides referrals and support for clients to access other clinical community based services that are provided by South Central Human Service Center Staff; i.e. day treatment, medication monitoring and medication management. Outpatient programs are provided by staff at South Central Human Service Center or contracted with outside providers while inpatient services are provided via North Dakota State Hospital. Any specialized services for individuals who are seriously mentally ill combined with a substance use disorder are available from trained clinical staff through South Central Human Service Center.

The PATH Coordinator conducts in-services and/or education programs to inform and educate professionals or community members on homeless issues and concerns as well as local members of the South Central Homeless Coalition. Case management services are provided in the consumer's home to promote therapy, skill building, supportive services, daily living skills/supervision and other skills to maintain the highest level of independent living as possible. PATH consumers often volunteer at Progress Recovery Center. Referrals from the PATH Coordinator are made to Social Security, public health, medical clinics, social service agencies, housing agencies, educational services, job employment/training services when appropriate to assist the consumer.

### **3. Service Provision - Describe the organization's plan to provide coordinated and comprehensive services to eligible PATH clients, including:**

- a. **Describe how the services to be provided using PATH funds will align with PATH goals to target street outreach and case management as priority services and maximize serving the most vulnerable adults who are literally and chronically homeless.**

Outreach is a primary component of the services provided by the PATH Coordinator. The PATH Coordinator regularly travels to where individuals who are homeless are known to

congregate to offer and coordinate services. The PATH Coordinator also provides case management services to PATH-eligible individuals to help connect them with necessary housing and financial resources. Individuals are maintained on the PATH Coordinator's case load until such time the consumer is willing and able to transition to mainstream services.

b. **Describe any gaps that exist in the current service systems.**

Safe and Affordable Housing: The access to housing programs is limited and can take several months before services are received. Currently the housing program through the county is able to assist individuals with rental assistance. The waitlist is around six months. Region VI has been seeing more individuals and families looking for housing options. Housing for individuals with significant criminal backgrounds has presented as a challenge in Region VI, as well. Landlords are becoming more stringent with their criteria and evictions are becoming more prevalent due to an individual's inability to pay in a timely manner or even at all. The Salvation Army is utilized to assist with temporary housing in hotels/motels

Shelters: There is no access to transitional or long-term shelters. Fargo and Bismarck shelters are consistently at maximum capacity and often times unable to assist individuals coming from the Jamestown area.

c. **Provide a brief description of the current services available to clients who have both a serious mental illness and a substance use disorder:**

Integrated services are available for individuals with a serious mental illness and substance use disorder. Referrals are made to South Central Human Service Center, when appropriate, for assessment and services. The North Dakota State Hospital provides the region with inpatient services for individuals with a serious mental illness and substance use disorder when deemed appropriate for inpatient hospitalization. Case management and addiction services are provided at South Central Human Service Center. Region VI provides individual services at the Crisis Residential Unit when appropriate for treatment or engagement in addiction services. An individual can be placed into three levels of care: Low Intensity Treatment, Intensive Outpatient Treatment, and Day Treatment Programming and Residential Services that are provided at South Central Human Service Center. If intensive residential treatment or medical detoxification is needed, the North Dakota State Hospital is available through the screening process. Group therapy, individual therapy and case management services are available through South Central Human Service Center. Referrals are made to private treatment facilities, as deemed necessary. Jefferson Bus Line is able to transport individuals that are diagnosed with a serious mental illness and/or a substance use disorder to Bismarck and Fargo when necessary and vouchers can be attained at the Salvation Army.

d. **Describe how the local provider agency pays for providers or otherwise supports evidenced-based practices, trainings for local PATH-funded staff, and trainings and activities to support migration of PATH data into HMIS.**

The PATH Program in Region VI is not using HMIS. Plans are to implement HMIS during the upcoming biennium. South Central Human Service Center provides training on evidence-based practices to its staff, including the PATH Program. South Central Human Service Center supports the use of evidence-based practices including Motivational Interviewing and Integrated

Dual Disorder Treatment. South Central Human Service Center also has staff trained to provide trauma focused cognitive behavioral therapy.

**4. SSI/SSDI Outreach, Access, Recovery (SOAR) - Describe the provider's plan to train PATH staff on SOAR. Indicate the number of PATH staff trained in SOAR during the grant year ended in 2015 (2015-2016), the number of PATH funded consumers assisted through SOAR, and the approximate number of staff to be trained in SOAR for grant year 2016 (2015-2016).**

The PATH Coordinator has received introductory SOAR training and will complete full training during the upcoming year. It is the State PATH program plan that all PATH Coordinators complete the SOAR on-line training by the end of the 2016 plan period.

**5. Access to Housing - Indicate what strategies are used for making suitable housing available for PATH clients (i.e., indicate the type of housing provided and the name of the agency).**

The PATH Coordinator works diligently with local and county housing agencies as well as with the North Dakota Housing Agency and HUD. Regular contact is made with local rental agencies, landlords and housing managers to locate and secure affordable housing to PATH eligible individuals. The PATH Coordinator maintains an updated list of any available housing options for the region. A working relationship with community stakeholders is useful when securing housing for PATH eligible individuals due to the shortage of housing in the area.

**6. Staff Information - Describe the demographics of staff serving the clients; how staff providing services to the population of focus will be sensitive to age, gender, disability, lesbian, gay, bisexual and transgender, racial/ethnic, and differences of clients; and the extent to which staff receive periodic training in cultural competence and health disparities. A strategy for addressing health disparities is use of the recently revised national Culturally and Linguistically Appropriate Services (CLAS) standards: (<http://www.ThinkCulturalHealth.hhs.gov>).**

The PATH Coordinator has worked for the North Dakota Department of Human Services for the past 10 years within the mental health field. The PATH Coordinator worked with individuals experiencing addiction and serious mental illness. The PATH Coordinator has worked with a wide variety of individuals from different ethnic and cultural backgrounds. The PATH Coordinator has worked with individuals who are elderly and individuals who are disabled. The PATH Coordinator has experience working various benefits programs including; food stamps, Medicaid, Medicaid Expansion, Social Security and Social Security Disability benefits.

**7. Client Information- Describe the demographics of the client population, the projected number of adult clients to be contacted, enrolled, and the percentage of adult clients served using PATH funds to be literally homeless**

**Client Information:**

- Male 53
- Female 68

- Under Age 18                    4
- Age 18+                         117
- Co-Occurring                    71
- Total Contacted                 121
- Total Enrolled                 19
- Literally Homeless             57%

The Region VI PATH Coordinator projects, at a minimum, the same number of contacts in the next reporting year.

**8.Consumer Involvement- Describe how individuals who are homeless and have serious mental illnesses, and family members will be involved at the organizational level in the planning, implementation, and evaluation of PATH funded services. For example, indicate whether individuals who are PATH eligible are employed as staff or volunteers or serve on governing or formal advisory boards.**

The Advisory Council for the South Central Human Service Center consists of consumers, private citizens, community leaders/stakeholders and mental health service providers. The council oversees the planning, implementation and evaluation of the Human Service Center's programs and services, including the services of the PATH Coordinator to the individuals and families who are homeless or at risk of becoming homeless within this region. The Point-in-Time survey is administered by the Continuum of Care Coordinator in Jamestown on a yearly basis to determine the scope and types of needed services the PATH Coordinator delivers to those individuals. Individuals who are currently homeless or have previously experienced homelessness are invited to be members of the North Dakota Coalition for the Homeless with their membership fee waived. Client and individuals have been invited to join the local coalition .

South Central Human Service Center works closely with Progress Enterprises, Inc./Progress Recovery Center which provides consumer facilitated services related to Peer Support Programs. Progress Enterprises also operates the Thrift Store which is a source of assistance for PATH eligible individuals to furnish their apartment. The store has clothing, household supplies, toiletries and other basic necessities providing assistance to individuals and families in need that have a serious mental illness and/or substance use disorder. This program is important in defraying the costs of furnishing apartments/homes for these individuals and their families.

7. Southeast Human Service Center

2624 9th Avenue SW

Fargo, ND 58103

Contact: Sara Wiederholt, PATH Coordinator

Contact Phone #: 701-298-4543

Has Sub-IUPs: No

Provider Type: Community mental health center

PDX ID: ND-007

State Provider ID:

Geographical Area Served: Region V: Southeast Human Service Center

Planning Period From 7/1/2016 to 6/30/2017

\* Indicates a required field

Category	Federal Dollars	Matched Dollars	Total Dollars	Comments
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<b>a. Personnel</b>	\$ 31,653	\$ 0	\$ 31,653	
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Position *	Annual Salary *	PATH-Funded FTE *	PATH-Funded Salary	Matched Dollars *	Total Dollars	Comments
Case Manager	\$ 21,102	1.50	\$ 31,653	\$ 0	\$ 31,653	

Category	Percentage	Federal Dollars *	Matched Dollars *	Total Dollars	Comments
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<b>b. Fringe Benefits</b>	48.02 %	\$ 15,201	\$ 0	\$ 15,201	
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Category	Federal Dollars	Matched Dollars	Total Dollars	Comments
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<b>c. Travel</b>	\$ 2,459	\$ 0	\$ 2,459	
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Line Item Detail *	Federal Dollars *	Matched Dollars *	Total Dollars	Comments
Other (Describe in Comments)	\$ 2,459	\$ 0	\$ 2,459	Budget for in region travel for PATH Coordinator and travel to required training and meetings.

<b>d. Equipment</b>	\$ 0	\$ 0	\$ 0	
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No Data Available

<b>e. Supplies</b>	\$ 0	\$ 26	\$ 26	
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Line Item Detail *	Federal Dollars *	Matched Dollars *	Total Dollars	Comments
Office: Supplies	\$ 0	\$ 26	\$ 26	

<b>f. Contractual</b>	\$ 0	\$ 0	\$ 0	
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No Data Available

**g. Construction (non-allowable)**

<b>h. Other</b>	\$ 6,000	\$ 99,229	\$ 105,229	
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Line Item Detail *	Federal Dollars *	Matched Dollars *	Total Dollars	Comments
Client: Other (Describe in Comments)	\$ 6,000	\$ 0	\$ 6,000	Budget for one time financial assistance for the following: rental payment, security deposit, representative payee services.
Office: Rent Expenses	\$ 0	\$ 2,929	\$ 2,929	
Office: Utilities/Telephone/Internet	\$ 0	\$ 544	\$ 544	
Office: Other (Describe in Comments)	\$ 0	\$ 95,756	\$ 95,756	ND General Fund Contribution to the PATH Program

<b>i. Total Direct Charges (Sum of a-h)</b>	\$ 55,313	\$ 99,255	\$ 154,568	
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Category	Federal Dollars *	Matched Dollars *	Total Dollars	Comments
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<b>j. Indirect Costs (Administrative Costs)</b>	\$ 0	\$ 0	\$ 0	
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<b>k. Grand Total (Sum of i and j)</b>	\$ 55,313	\$ 99,255	\$ 154,568	
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Source(s) of Match Dollars for State Funds:

Estimated Number of Persons to be Contacted: 250 Estimated Number of Persons to be Enrolled: 112

Estimated Number of Persons to be Contacted who are Literally Homeless: 200

Number Staff trained in SOAR in Grant year ended in 2014: 0 Number of PATH-funded consumers assisted through SOAR: 0

## **2016 PATH Intended Use Plan Region V**

**Local Provider Description** - Southeast Human Service Center (SEHSC), Fargo. Region V serves a six county area (Steele, Traill, Cass, Ransom, Sargent, Richland). The population of the region is 193, 751 (U.S. Census Bureau, 2010-2014 American Community Survey 5 Year Estimates). Fargo is the largest and most urban community in North Dakota and has a significant population of New Americans.

### **1. Collaboration with HUD Continuum of Care Program - Describe the organization's participation in the HUD Continuum of Care program and any other local planning, coordinating or assessment activities.**

The full time PATH Coordinator at Southeast Human Service Center is a member of both the Continuum of Care and North Dakota Coalition for Homeless Persons (NDCHP) as well as the Fargo/Moorhead Coalition for Homeless Persons (FMCHP).

SEHSC PATH Coordinator participates in HUD Continuum of Care in several local ways. The PATH Coordinator served as a member of the Implementation committee in Fargo/Moorhead to plan and implement Coordinated Assessment. This committee aims to assess the current "doors" that individuals and families have to access in order to enter the Coordinated Assessment system. The full time PATH Coordinator also attends the community VI-SPDAT/ Coordinated Assessment meetings in order to streamline the housing process for those consumers who qualify for supportive housing services. The PATH Coordinator collaborates with Continuum by participating in the screening committee for Cooper House; which is a Permanent Supportive Housing option for those who have experienced chronic homelessness in the Fargo area.

The PATH Coordinators collaborate with the local housing providers on a daily basis; whether it is checking in on an individual's application status or advocating for a consumer that may have been denied housing due to legal or past housing issues.

### **2. Collaboration with Local Community Organizations- Provide a brief description of partnerships with local community organizations that provide key services (i.e., primary health, mental health, substance abuse, housing, employment, etc.) to PATH eligible clients and describe coordination of activities and policies with those organizations.**

Collaboration with local community organizations is an essential part of the PATH program in order to ensure effective and efficient services to the homeless population. Agencies that collaboration occurs with include:

Centre Inc., Southeast Community Action Agency, Fargo Housing Authority, Cass County Housing Authority, Moorhead Housing Authority, Clay County Housing Authority, VA Medical Center, Cass County Social Services, Regional Social Services, Job Service ND, Community Options, Share House, Robinson recovery Center, Sanford Hospital, Essentia Hospital, Prairie at St. John's, Rape and Abuse Crisis Center,

Youthworks, Stepping Stones Resource Center, Fargo Public Schools, Presentation Sisters, local churches, St, Vincent De Paul, Freedom Resource Center, Catholic Family Services, Lutheran Social Services, Fargo/Cass Public Health, North Dakota Housing and Finance, Salvation Army, MET Incorporated, FM Coalition for the Homeless, FM Emergency Food Pantry, Myrt Armstrong Social Club, Social Connexions (Moorhead).

The PATH coordinator remains in close contact with each of these facilities. Releases of Information are obtained when a client applies for services in order to have open communication and ensure appropriate levels of care when necessary and maximize the benefits to the clients.

The PATH program collaborates with the local shelters by conducting routine outreach at each of the shelters in Fargo. Outreach is conducted in the evening at the emergency shelter in town to ensure that individuals experiencing homelessness as well as a serious mental illness and substance use disorder diagnosis are able to receive engagement services. Outreach is coordinated either by weekly visits set up ahead of time (such as Mondays nights at 6p-8p outreach is provided to the Gladys Ray shelter) or through collaboration when a community provider contacts the PATH coordinator to set up an initial meeting or conduct emergency assessment services as needed.

The shelters that outreach services are provided to include: YWCA Cass Clay Emergency Shelter, New Life Center, as well as the Gladys Ray Shelter. Outreach is provided as needed to individuals who want to remain ND residents but have to access Churches United Shelter and Dorothy Day Shelter in Moorhead, MN. Outreach is also conducted at Homeless Health Services on a routine basis; consisting of one morning per week.

The PATH program collaborates with the local housing authority after they have identified individuals who are not connected with services but may benefit from mental health or dual diagnosis services that are tied to their housing. Contact information of the PATH program is given to individuals seeking such services.

PATH also collaborates with Vocational Rehabilitation as well Community Options. Community Options is a supported employment service provider which operates on the same stage-based treatment modality as the PATH program. A Community Options staff person has been identified to work with those who are eligible for the services (must be SMI or Dual diagnosis) and attends team meetings on a weekly basis to coordinate services for those who are interested in and motivated to work.

The PATH Coordinator collaborates with the FM Coalition and subsequent working committee; to develop the Coordinated Assessment Process for the Fargo Community. This committee is also working on the development of protocols that ensure confidentiality and HIPAA rights are protected while facilitating access the Coordinated Assessment system.

**3. Service Provision - Describe the organization's plan to provide coordinated and comprehensive services to eligible PATH clients, including:**

- a. **Describe how the services to be provided using PATH funds will align with PATH goals to target street outreach and case management as priority services and maximize serving the most vulnerable adults who are literally and chronically homeless.**

Activities to maximize the use of PATH funds to serve adults who are literally homeless as a priority population include: Street outreach in downtown Fargo such as the Salvation Army during the breakfast and lunch time, contact with individuals camping outside or seen with camping equipment (referrals given at this point for engagement purposes). Outreach is provided at each shelter in Fargo and as needed in Moorhead, MN. Outreach is conducted after hours one night a week at the Emergency shelter in Fargo to engage the most chronic population. Collaboration occurs with downtown police, community psychiatric services, community medical services, corrections settings, as well as housing agencies when a referral is given. PATH case management does outreach with Homeless Health services on a weekly basis. PATH case management will meet with individuals in any "safe" situation. PATH case management also provides short term case management to individuals they have been working with prior to client's getting into the Cooper House (Permanent Supportive Housing for chronically homeless) to ensure consistency and engage in services once they are in housing. This is done to have supports in place for those who may have never had the opportunity to be housed and are not comfortable with new providers at first move-in. PATH case management participates in Project Connect; a community event where individuals can be connected with supportive housing and other services in one location. In addition, PATH case management participates in the Point-In-Time surveys and other attempts to get a count of individuals experiencing homelessness. Outreach is conducted at various locations on the date of the survey.

Strategies defining how the PATH funds will be targeted for street outreach and case management as priority are identified above: On going contact and communication with law enforcement, after hours contact at the emergency shelter, community medical and mental health centers are examples.

- b. **Describe any gaps that exist in the current service systems.**

There are gaps in the current service system that serves the homeless population. The waiting time for housing programs and housing vouchers continues to be problematic. Shelter Plus Care vouchers or Section 8 vouchers for individuals with a recent criminal background or inconsistent housing history are currently on hold as there are no funds remaining. Gaps can also be found while assessing the waiting time for other services such as County benefits including food stamps and medical assistance. Often the clients will not have adequate identification (birth certificates, etc.) and will have to wait to access those services until the identification is obtained. Not only is an individual not eligible to apply for housing assistance without identification; once they are able to apply waiting lists are often long and some are currently closed to new applications.

A gap is found in connecting the homeless population with mental health services in an efficient manner. Often individuals do not meet the “crisis criteria” to meet with a psychiatrist at the regional human service center and will be placed on a waitlist as well as referred to their primary care provider. During this wait time they have to continue to endure personal and community stressors and often end up accessing emergency mental health services in the community.

Transportation is also an issue in the FM area. Often the cost of a ride exceeds what an individual is able to afford and bus routes are not always accessible or timely. Local agencies or organizations are often not able to provide clients with bus tokens due to rising out-of-pocket expenses.

Another gap is affordable housing options for those that do not qualify for housing due to criminal background (sex-offenders, some felonies, etc.) It is also difficult to find housing for persons with poor credit or poor landlord histories. The Gladys Ray Shelter opened in 2008 and serves as an emergency shelter to those individuals who are unable to access other shelter options. The Cooper House began operating May 10, 2010 in Fargo. Cooper House offers permanent supportive housing to those who may be considered “chronically homeless.” The Cooper House has helped to fill the gap to serve this population. However there remains a gap in serving those who are considered “chronically homeless” as the facility houses 43 individuals at one time.

The community currently lacks a true “Housing First” Model which creates a gap in keeping those individuals who may be hardest to house in their homes.

There also continues to be gaps between service providers across the country who may choose to use “Greyhound therapy” without contacting mental health professionals in this area prior to sending their clients. The client therefore does not have a contact person to get in touch with once they arrive in the Fargo area and may end up hospitalized or in other institutions.

c. **Provide a brief description of the current services available to clients who have both a serious mental illness and a substance use disorder:**

PATH activities include outreach, case management, screening and diagnostic treatment services, rehabilitation services, community mental health services, mental health medical services, alcohol and drug treatment services, supportive and supervisory services in a residential setting and one-time rent assistance, one-time security deposits, or one-time representative payee services to maintain persons who are homeless and mentally ill in the community.

The PATH Coordinator is an employee of and housed at **Southeast Human Service Center (SEHSC)**. SEHSC is a community based behavioral health center that provides mental health and substance use disorder treatment services to PATH eligible people.

- d. **Describe how the local provider agency pays for providers or otherwise supports evidenced-based practices, trainings for local PATH-funded staff, and trainings and activities to support migration of PATH data into HMIS.**

The PATH Program office is located in the Off Main office which also houses the Individual Dual Diagnosis Treatment (IDDT) teams of the regional human service center, SEHSC. These teams provide evidence based practice within the Fargo community to individuals who meet criteria for this service. The individuals eligible for the PATH program will typically access higher levels of care without the evidence based team support and are often unable to maintain in the community. The purpose of the IDDT is to provide support to remedy this type of situation. The PATH Coordinator works closely with the teams and if an individual needs more of a team support in order to be able to maintain in the community a referral will often be made to one of the IDDT teams.

The PATH Coordinators are able to access monthly Motivational Interviewing training groups that are conducted at the office location.

PATH case managers collaborate with employment specialists from Community Options to refer individuals to the Evidence Based Practice of Supported Employment.

PATH providers attempt to utilize the Trauma Informed Care approach in an effort to address the consequences of trauma in the individual and to facilitate healing.

Activities that will be implemented to facilitate migration of PATH data into HMIS: The PATH Coordinator at SEHSC currently participates in an online training community by attending the monthly webinars concerning the PATH migration to HMIS. The current PATH coordinator is familiar with the HMIS system and has used in the past.

The PATH Coordinator is also participating in the community's Coordinated Assessment process in which HMIS will be a necessary component for individuals experiencing homelessness to be connected to appropriate housing and other supportive services. PATH is currently completing the new monthly reporting requirements. The FT PATH provider has been trained to use the VI-SPDAT tool in order to help those in need access housing.

**4. SSI/SSDI Outreach, Access, Recovery (SOAR) - Describe the provider's plan to train PATH staff on SOAR. Indicate the number of PATH staff trained in SOAR during the grant year ended in 2015 (2015-2016), the number of PATH funded consumers assisted through SOAR, and the approximate number of staff to be trained in SOAR for grant year 2016 (2015-2016).**

PATH staff will be trained in SOAR for the grant year 2016 through the on-line SOAR training or at the next local SOAR training.

**5. Access to Housing - Indicate what strategies are used for making suitable housing available for PATH clients (i.e., indicate the type of housing provided and the name of the agency).**

Housing options that are utilized for PATH eligible clients vary because of individual need. There are five emergency shelters in the Fargo Moorhead area that serve women, children, and/or men for those individuals who are in need of emergency shelter services.

Housing Authorities that provide Section 8 vouchers and/or scattered site buildings are offered by Fargo Housing Authority, Cass County Housing, Clay County Housing (Minnesota), Moorhead Public Housing (Moorhead MN), and North Dakota Housing and Finance. Fargo Housing Authority receives Continuum of Care (COC) money for a Shelter Plus Care program. Cooper House is also available at this time for those experiencing chronic homelessness. YWCA also receives CoC for both transitional and a permanent supportive housing programs. The Fargo community has implemented the Coordinated Assessment process so individuals are now screened using the VI-SPDAT tool. Once their score on this tool has been determined as well as releases of information completed; their case is able to be staffed and appropriate level of housing support is determined. Current openings in those housing options are determined and the consumer is able to either access that option or be placed on the waitlist. The PATH Coordinator also takes part in the screening committee for Cooper House. Individuals are screened based on their experience of homelessness and a determination that Cooper House is the appropriate level of care.

Southeast Community Action Agency received federal grant monies to provide funding for deposit, first month rent, start up employment costs, and maintenance rental assistance. These monies are currently limited. For those people with income or those that would not qualify for subsidized housing due to criminal background, there are landlords that do not complete background checks and also provide affordable housing. PATH case managers collaborate with these landlords on a consistent basis and remain in close contact once individuals have moved in as there can be difficulties for these individuals in maintaining their housing. There are also programs for deposit and first month's rent assistance through agencies such as Salvation Army, St. Francis, and also Presentation Partners in housing. PATH can also assist with one time deposit as well as emergency one time rent payment to avoid eviction.

**6. Staff Information - Describe the demographics of staff serving the clients; how staff providing services to the population of focus will be sensitive to age, gender, disability, lesbian, gay, bisexual and transgender, racial/ethnic, and differences of clients; and the extent to which staff receive periodic training in cultural competence and health disparities. A strategy for addressing health disparities is use of the recently revised national Culturally and Linguistically Appropriate Services (CLAS) standards: (<http://www.ThinkCulturalHealth.hhs.gov>).**

- The PATH Coordinator and case manager aide are located in Fargo, the largest city in the region and state. The Coordinator is a 36 year old white female and the PATH Case Manager is a 48 year old Asian male.
- The PATH program provides services to individuals regardless of their age, gender, disability, racial or ethnic identity, as well as sexual orientation. Care is taken to ensure that their individual values are honored and individual needs addressed while incorporating their values and beliefs into their treatment plan.
- The PATH program is aware of and respectful of the diverse needs of consumers. Care is taken to address concerns while at the same time being cognizant of cultural beliefs and practices. PATH Case managers collaborate with culturally specific services if they exist in the community. Examples include Lutheran Social Services as well as local identified leaders in the consumer's cultural community. Language interpreters are also utilized if needed.
- The PATH workers also work with the current housing providers, whether shelter or actual housing, to ensure that individuals needs are addressed based on their identity and that their rights are not violated. Advocacy services are provided if needed.
- The PATH Coordinator in Region V is a Licensed Certified Social Worker who has received training through numerous workshops regarding cultural, gender related, and racial issues. The Case Manager is aid able to access these workshops.

**7. Client Information- Describe the demographics of the client population, the projected number of adult clients to be contacted, enrolled, and the percentage of adult clients served using PATH funds to be literally homeless**

According to the 2016 Point in Time Survey performed by a collaboration of service providers in the ND metro area there were 923 persons who were homeless on the night of January 28, 2016 in ND. The population served by SEHSC PATH services is approximately 45% female and 55% male. 73% of the populations served were Caucasian. The next highest category served was Black or African American with 15%. 100% of the clients are between the ages of 18 and 64. 87% of these clients also carry a co-occurring substance use disorder.

The projected number of homeless people that the PATH position will serve in FY 2016 is 250. It is expected that 45%of individuals who are eligible will become enrolled in services. Last year the projected number was 310, but the true number served was 209. The PATH program has identified individuals are presenting with more complicated and complex issues which results in the need for longer term case management. The percentage of this number that will meet the HUD definition of homeless (staying in a shelter or on the streets, etc.) is anticipated to be approximately 81%.

**8.Consumer Involvement- Describe how individuals who are homeless and have serious mental illnesses, and family members will be involved at the organizational level in the planning, implementation, and evaluation of PATH funded services. For example, indicate whether individuals who are PATH eligible**

**are employed as staff or volunteers or serve on governing or formal advisory boards.**

Individuals working with the PATH Coordinator are involved in creating their treatment plan for Southeast Human Service Center whenever possible. Individuals and families are offered opportunities to voice their concerns and ideas at different listening circles held throughout the community and are invited to attend the FM Coalition meetings. The plan is to continue to involve individuals who are or were previously homeless in the planning and advancement of homeless issues.

8. West Central Human Service Center

1237 West Divide Avenue, Suite 5

Bismarck, ND 58501

Contact: Melissa Mitzel, PATH Coordinator

Contact Phone #: 701-328-8870

Has Sub-IUPs: No

Provider Type: Community mental health center

PDX ID: ND-008

State Provider ID:

Geographical Area Served: Region VII: West Central Human Service Center

Planning Period From 7/1/2016 to 6/30/2017

\* Indicates a required field

Category	Federal Dollars	Matched Dollars	Total Dollars	Comments
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a. Personnel \$ 21,102 \$ 0 \$ 21,102

Position *	Annual Salary *	PATH-Funded FTE *	PATH-Funded Salary	Matched Dollars *	Total Dollars	Comments
Case Manager	\$ 21,102	1.00	\$ 21,102	\$ 0	\$ 21,102	

Category	Percentage	Federal Dollars *	Matched Dollars *	Total Dollars	Comments
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b. Fringe Benefits 48.02 % \$ 10,134 \$ 0 \$ 10,134

Category	Federal Dollars	Matched Dollars	Total Dollars	Comments
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c. Travel \$ 1,639 \$ 0 \$ 1,639

Line Item Detail *	Federal Dollars *	Matched Dollars *	Total Dollars	Comments
Other (Describe in Comments)	\$ 1,639	\$ 0	\$ 1,639	Budget for in region travel for the PATH Coordinator and required training and meetings

d. Equipment \$ 0 \$ 0 \$ 0

No Data Available

e. Supplies \$ 0 \$ 26 \$ 26

Line Item Detail *	Federal Dollars *	Matched Dollars *	Total Dollars	Comments
Office: Supplies	\$ 0	\$ 26	\$ 26	

f. Contractual \$ 0 \$ 0 \$ 0

No Data Available

g. Construction (non-allowable)

h. Other \$ 4,000 \$ 43,716 \$ 47,716

Line Item Detail *	Federal Dollars *	Matched Dollars *	Total Dollars	Comments
Client: Other (Describe in Comments)	\$ 4,000	\$ 0	\$ 4,000	One time financial assistance for the following: rental payments, security deposits, representative payee services
Office: Rent Expenses	\$ 0	\$ 2,929	\$ 2,929	
Office: Utilities/Telephone/Internet	\$ 0	\$ 544	\$ 544	
Office: Other (Describe in Comments)	\$ 0	\$ 40,243	\$ 40,243	State General Fund contribution to PATH Program

i. Total Direct Charges (Sum of a-h) \$ 36,875 \$ 43,742 \$ 80,617

Category	Federal Dollars *	Matched Dollars *	Total Dollars	Comments
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j. Indirect Costs (Administrative Costs) \$ 0 \$ 0 \$ 0

k. Grand Total (Sum of i and j) \$ 36,875 \$ 43,742 \$ 80,617

Source(s) of Match Dollars for State Funds:

Estimated Number of Persons to be Contacted:	203	Estimated Number of Persons to be Enrolled:	61
Estimated Number of Persons to be Contacted who are Literally Homeless:	154		
Number Staff trained in SOAR in Grant year ended in 2014:	0	Number of PATH-funded consumers assisted through SOAR:	0

## **2016 PATH Intended Use Plan Region VII**

**Local Provider Description** - Region VII is served by West Central Human Service Center, which is located in Bismarck. The region consists of a ten county area (McLean, Mercer, Sheridan, Oliver, Burleigh, Kidder, Morton, Grant, Sioux, Emmons), including the Standing Rock Indian Reservation. The population of the region is 148,127 (U.S. Census Bureau, 2010-2014 American Community Survey 5 Year Estimates).

### **1. Collaboration with HUD Continuum of Care Program - Describe the organization's participation in the HUD Continuum of Care program and any other local planning, coordinating or assessment activities.**

The Region VII PATH Coordinator is involved with the Continuum of Care program, attends all coalition meetings and serves on various mainstream resource committees. The North Dakota Coalition for Homeless People, Inc. is the lead agency for the Continuum of Care (COC) and the Region VII PATH Coordinator is a member of this Coalition. The PATH Coordinator is also involved with the Missouri Valley Coalition for Homeless People Inc., which is the local homeless coalition. The PATH Coordinator is involved on a daily basis with agencies in the community, which are members of the Continuum of Care. The PATH Coordinator assists with the Point-In-Time Survey of homeless persons, which is conducted one time a year on a statewide basis by the ND Coalition for Homeless Persons/ND COC.

### **2. Collaboration with Local Community Organizations- Provide a brief description of partnerships with local community organizations that provide key services (i.e., primary health, mental health, substance abuse, housing, employment, etc.) to PATH eligible clients and describe coordination of activities and policies with those organizations.**

The PATH Coordinator works closely with the following service providers to ensure service coordination and availability for PATH-eligible consumers:

**The Abused Adult Resource Center (AARC):** Provides assistance to victims of domestic violence. AARC provides 24-hour crisis intervention, children's programs (counseling, support and education), Family Safety Center (safe, neutral place where parents can visit children in foster care because of abuse and neglect), Pam's House (shelter for women and children affected by domestic violence), Hope House (transitional housing for women and children affected by domestic violence) and the Criminal Justice Program (assist victims through the legal process). Seeds of Hope is a retail second hand store that offers clothing and household items. The store also serves as employment and job training for victims of domestic violence. AARC is one of the area's points of entry to homeless services.

**AID Inc. and Brighten's Thrift Store:** Provides emergency services for rental assistance, utility assistance, gas vouchers, temporary emergency shelter, bus tickets, and vouchers for clothing and household items. AID Inc. also has a food pantry. The

Family and Friends program provides funding for after school and summer programs for children from families who cannot afford the fees. AID Inc. is one of the area's points of entry to homeless services.

**Community Action Program Region VII Inc. (CAP7):** Provides emergency assistance with first month's rent, security deposits, past due rent, utility deposits, and utility disconnect notices. Their Self Reliance Program assists individuals and families to become economically self-sufficient. The Energy Share Program helps eligible households to prevent electrical shutoffs. The Tri-State Help provides rental assistance and related supportive services to low-income persons living with HIV/AIDS. The Shelter Plus Care program provides rental assistance in connection with supportive services to homeless persons with disabilities. CAP7 has a clothing closet which offers clothing, household items, and furniture. They also offer a food pantry and their Senior Commodities Program provides food and household items to participants 60 years or older. CAP7 also has the Supportive Services for Veteran's Families. This program can provide Veterans who are homeless or at risk of homelessness with different types of assistance.

**Ruth Meier's Hospitality House:** Provides a variety of homeless shelter programs. The Women's shelter, which assists single women, women with children, single fathers and families, has 40 beds. New Beginnings is a seven-unit transitional housing program that allows residents a two-year stay. Horizons provide permanent housing to 25 men and women in a single room occupancy apartment complex. Ruth Meier's also has a Drop-In Center which has 98 beds at this time and provides a way to get off the street at night for people who do not want to or are unable to be sheltered. They also receive donated bread daily from local supermarkets and Sam's Club, which people in the community may help themselves to. Ruth Meier's' food pantry distributes food to individuals and families in the community who are in need. Ruth Meier's serves as one of the area's points of entry to homeless services. The Point of Entry Coordinator assists the clients with receiving services in the area without having the client make numerous phone calls or travel to all the different agencies. The PATH Coordinator attends bi-weekly case management meetings at Ruth Meier's and works closely with Ruth Meier's' staff, and the residents that reside in the men's and women's shelters.

**The Salvation Army:** Provides assistance for emergency lodging, utilities, and rent. They also have a food pantry. The Salvation Army also has a Community Center Program for children in 3rd through 8th grades. It provides a secure place for kids to play and study after school.

**Welcome House, Inc.:** Serves chronic and long-term homeless families with children by placing them in local hotels or in their 10-bed shelter. They provide case management and assist with finding permanent housing. Welcome House is able to provide food baskets, furniture, utility assistance, rental assistance, children's programming assistance (provides funding for school programs, after school, and summer programs for children from families who cannot afford the fees), medication assistance, gas vouchers and transportation assistance to individuals and families in need. Welcome House also serves as one of the area's points of entry to homeless

services. The PATH Coordinator works closely with Welcome House's clients in assisting them with applying for housing and receiving services at West Central Human Service Center.

**Youthworks:** Provides services for teens, parents, and young adults under the age of 22. Youthworks has programs for runaway, homeless, and street youth. They also work with young parents and young pregnant mothers. Youthworks has programs for youth failing, being suspended or expelled from school. They have shelter and can provide emergency care. Youthworks also has transitional living apartments. Youthworks serves as one of the area's points of entry to homeless services.

**Burleigh County Housing:** Has six programs that PATH-eligible clients may apply for. These include the Shelter Plus Care Program, Crescent Manor (for clients over the age of 55 years), Washington Court, Housing Choice Voucher Program (HAP assistance), and Public Housing.

**Morton County Housing Authority:** Provides housing vouchers for low-income individuals and families. Liberty Heights is for clients over the age of 55 years. PATH clients are referred to Morton County Housing if they are interested in living in Mandan.

**North Dakota Housing Finance Agency:** This agency has a two programs that PATH-eligible clients may apply for. The Moderate Rehabilitation Program provides rental assistance to people who agree to live in a specified housing unit. Units are available across the state but PATH clients usually choose to stay in the Bismarck/Mandan Area. They also provide housing at Horizons, which is permanent housing for 25 men and women in a single room occupancy apartment complex. Ruth Meier's Hospitality House is the landlord of this building. Horizons is an income-based property.

**Community Action's Shelter Plus Care Program:** Individuals that are homeless, disabled, and working with an agency are able to qualify for this program. A client of Shelter Care Plus is required to see a counselor for services in order to stay qualified for the program.

**Healthcare:** PATH-eligible clients are referred to the **University of North Dakota's Center for Family Medicine** or the two local hospitals: **Sanford Health and CHI - St. Alexius**. Bismarck Burleigh Public Health also offers numerous services for consumers. Veterans are referred to the above agencies as well as the Veteran's Administration Clinic located in Bismarck.

**Employment:** PATH-eligible clients are referred to **Job Service of North Dakota, Vocational Rehabilitation, or Experience Works**. Vocational Rehabilitation provides an array of employment/education services to those who have disabilities.

**Veterans:** PATH eligible veterans are referred to the **CAP7 for their Supportive Services for Veteran's Families** program. The **Military Outreach Center** provides outreach to all veterans, service members and families statewide to ensure they are

aware of and receive benefits, resources and services available to them. Trained professionals are located throughout North Dakota to meet with veterans as needed. The program works with all services, eras and conflicts. Also Bismarck has a local Community Based Outreach Clinic (CBOC) where veterans receive medical services.

**Burleigh County Social Services and Morton County Social Services:** Provide entitlement services such as food stamps, fuel assistance, medical assistance, etc.

**West Central Human Service Center:** Provides mental health and addiction services to PATH eligible clients. There is a 24-hour crisis line that clients can utilize. WCHSC also provides medications and mediation management/support to people who are homeless.

**3. Service Provision - Describe the organization's plan to provide coordinated and comprehensive services to eligible PATH clients, including:**

- a. **Describe how the services to be provided using PATH funds will align with PATH goals to target street outreach and case management as priority services and maximize serving the most vulnerable adults who are literally and chronically homeless.**

Outreach is a primary component of the services provided by the PATH Coordinator. The PATH Coordinator regularly travels to where homeless individuals are known to congregate to offer and coordinate services. The PATH Coordinator provides case management services to PATH-eligible individuals to help connect them with necessary housing and financial resources.

- b. **Describe any gaps that exist in the current service systems.**

Affordable Housing: Housing is always a need in the area. Landlords have raised their rents above the fair market value, making it difficult for clients who have housing assistance to find housing. It is difficult to find housing for families that need three or more rooms. There are housing agencies that offer assistance to individuals/families; however, the wait time to receive a voucher can range from three months to two years. Rent prices have increased over the year, making it difficult for people to find housing within their income needs and/or within the voucher amount. People are not finding housing and losing their housing vouchers. They then have to reapply and wait until their name reaches the top of the waitlist again. It is also difficult to find housing for persons with a criminal history, poor credit, or poor landlord histories. Depending on the charge, people with a criminal record may not qualify for housing assistance.

Shelters: There is a need for a shelter for families with children. The shelter needs would include single women or single men with children and couples with children. Ruth Meier's Women's shelter and the Abused Adult Resource Center's shelters are always full. These two shelters are only for women and children. Welcome House can provide hotel stays for families with children but only for a limited time.

Permanent Supportive Housing for homeless individuals with mental illness and/substance use is also limited

Medication assistance for individuals who do not qualify or who are not covered by insurance is needed. Due to lack of funding many individuals go without medications. Hospitals discharging clients to the homeless shelter with no discharge plan or follow-up is another issue in this region.

Transportation is a need in the area. Bismarck Transit (door to door service) and CAT system (buses) have limited hours. Many people who have employment often don't work the 9 to 5 hours. For an individual to qualify for Transit they must have a disability. You cannot qualify for transit if you are "just" homeless. The fare to ride the bus is also difficult for individuals to pay if they have no income.

Day Programming: There is a need for a day program where individuals and families can go for a one-stop shop for extensive case management services and other needs (support groups, daycare, job skills, meals, lockers and showers). Transportation is an issue regarding services and supports in this region as agencies are so far spread out. Often times individuals and families hangout at the public library, mall or public parks throughout the day. Local business often times ask them to leave unless they are purchasing.

**c. Provide a brief description of the current services available to clients who have both a serious mental illness and a substance use disorder.**

PATH activities include outreach, case management, rehabilitation services, community mental health services, mental health medical services, alcohol and drug treatment services, one-time rent assistance, one-time security deposits, or one-time representative payee services to maintain persons who are homeless and mentally ill in the community. This includes assistance with finding housing, employment, and other services. West Central started the IDDT Program in January 2013 for people who have mental illness as well as substance use disorder.

**d. Describe how the local provider agency pays for providers or otherwise supports evidence-based practices, trainings for local PATH-funded staff, and trainings and activities to support collection of PATH data in HMIS.**

The PATH Program in Region VII is not using HMIS. Plans are to implement HMIS during the upcoming biennium. West Central Human Service Center provides training on evidence-based practices to its staff, including the PATH Program. Motivational Interviewing is discussed frequently in unit meetings. West Central encourages Evidence Based Practices and has implemented co-occurring disorders group, a peer support specialist and group, life skills case management, and trauma focused cognitive behavioral therapy (TF-CBT).

**4. SSI/SSDI Outreach, Access, Recovery (SOAR) - Describe the provider's plan to train PATH staff on SOAR. Indicate the number of PATH staff trained in SOAR during the grant year ended in 2015 (2015-2016), the number of PATH funded consumers assisted through SOAR, and the approximate number of staff to be trained in SOAR for grant year 2016 (2015-2016).**

The PATH Coordinator received SOAR training. Less than ten consumers were assisted through SOAR activities.

**5. Access to Housing - Indicate what strategies are used for making suitable housing available for PATH clients (i.e., indicate the type of housing provided and the name of the agency).**

The following are the shelters in the community that are utilized:

- Ruth Meier's Hospitality House is an emergency shelter that can accommodate up to 98 men. Ruth Meier's Women's Shelter has 78 beds which assist single women, single fathers, and women with children and families.
- Abused Adult Resource Center also has a shelter for families and individuals who are fleeing domestic violence and sexual assault.
- Welcome House, Inc. serves chronic and long-term homeless families with children by placing them in local hotels or in their shelter.
- There are four housing agencies that provide housing assistance: Burleigh County Housing, Morton County Housing, North Dakota Housing and Finance Agency, and Community Action. AID Inc., Salvation Army, Welcome House, and Community Action can assist with security deposits or rental assistance when funding is available.
- At this time, it can take three months to 2 years to receive housing assistance on any of these programs. The main concern is finding affordable housing. Landlords have raised their rents above the voucher amount. Landlords are also becoming stricter on who they let into their apartments.

**6. Staff Information - Describe the demographics of staff serving the clients; how staff providing services to the population of focus will be sensitive to age, gender, disability, lesbian, gay, bisexual and transgender, racial/ethnic, and differences of clients; and the extent to which staff receive periodic training in cultural competence and health disparities. A strategy for addressing health disparities is use of the recently revised national Culturally and Linguistically Appropriate Services (CLAS) standards: (<http://www.ThinkCulturalHealth.hhs.gov>).**

The Current PATH Coordinator has a Master's in Business Administration. Region VII encompasses the major cities of Bismarck and Mandan and a ten county area including the Standing Rock Indian Reservation. It is the policy of the North Dakota Department of Human Services to not discriminate or deny services to due to age, gender, racial/ethnic differences. It is the policy to not turn away services to anyone if they qualify. In-

service trainings for staff, including the PATH coordinator, are held at WCHSC at least quarterly, and the topics of the in-services vary on all populations of individuals served ranging from types of mental illness, different cultures, specific gender issues, treatment approaches, services provided, cultural issues, etc.

**7. Client Information- Describe the demographics of the client population, the projected number of adult clients to be contacted, enrolled, and the percentage of adult clients served using PATH funds to be literally homeless**

Projected contacts for the next reporting year:

- Male 74
- Female 70
- Under Age 18 0
- Age 18+ 144
- Co-Occurring 655
- Total Contacted 203
- Total Enrolled 61
- Literally Homeless 76%

**8.Consumer Involvement- Describe how individuals who are homeless and have serious mental illnesses, and family members will be involved at the organizational level in the planning, implementation, and evaluation of PATH funded services. For example, indicate whether individuals who are PATH eligible are employed as staff or volunteers or serve on governing or formal advisory boards.**

When the opportunity arises to have family involvement in the process of working with individuals who are homeless and are diagnosed with a serious mental illness it is encouraged. Homeless consumers are involved in an on-going basis regarding the PATH services and are surveyed by the host agency regarding their satisfaction with the services offered. The majority of the clients seen by the PATH Coordinator do not have involved family members and often times decline to contact their families. Former PATH eligible individuals assist in the evaluation, planning, and implementation of programs and services. Individuals who were homeless and those currently homeless are invited to participate on local and state coalitions.

The Advisory Council for the West Central Human Service Center consists of consumers, private citizens, community leaders/stakeholders and mental health service providers. The council oversees the planning, implementation and evaluation of the Human Service Center's programs and services which includes the services of the PATH Coordinator to the individuals and families who are homeless or at risk of becoming homeless within this region.



### III. State Level Information

#### A. Operational Definitions

Term	Definition
Homeless Individual:	<p>(I) An individual or family that lacks a fixed, regular, and adequate nighttime residence; or</p> <p>(II) An individual or family that has a primary nighttime residence that is:</p> <ul style="list-style-type: none"> <li>• a supervised publicly or privately operated shelter designed to provide temporary living accommodations (including welfare hotels, congregate shelters, and transitional housing for the mentally ill);</li> <li>• an institution that provides a temporary residence for individuals intended to be institutionalized; or</li> <li>• a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings. The term does not include any individual imprisoned or otherwise detained under Act of the Congress or a state law.</li> </ul>
Imminent Risk of Becoming Homeless:	<p>Individuals who are at imminent risk of becoming homeless meet one or more of the following criteria:</p> <ul style="list-style-type: none"> <li>• Are in a doubled-up living arrangement where the individual's name is not on the lease.</li> <li>• Live in a condemned building without a place to move.</li> <li>• Are in arrears in rent/utility payments.</li> <li>• Have received an eviction notice without a place to move.</li> <li>• Are living in temporary or transitional housing that carries time limits.</li> <li>• Are being discharged from a health care or criminal justice institution without a place to live.</li> </ul>
Serious Mental Illness:	<p>North Dakota's definition – as noted in North Dakota Century Code 57-38-01 – refers to a person “who, as a result of a mental disorder, exhibits emotional or behavioral functioning which is so impaired as to interfere substantially with the person's capacity to remain in the community without verified supportive treatment or services of a long-term or indefinite duration. This mental disability must be severe and persistent, resulting in a long-term limitation of the person's functional capacities for primary activities of daily living such as interpersonal relationships, homemaking, self-care, employment, and recreation.”</p>
Co-occurring Serious Mental Illness and Substance Abuse Disorders:	<p>An individual with a major mental illness, as defined above, and who meets criteria from the latest edition of the Diagnostic and Statistical Manual for alcoholism, drug addiction, or substance abuse is considered dual diagnosed (MI/SA).</p>
Footnotes:	

### III. State Level Information

#### B. Veterans

Narrative Question:

Describe how the state gives consideration in awarding PATH funds to entities with demonstrated effectiveness in serving veterans experiencing homelessness.

Footnotes:

## B. Veterans

All regional human service centers receive PATH funds. This allows consumers in every region to access PATH services, if needed. The 2015 Point in Time (PIT) count identified 137 homeless veterans or 10.5% of the PIT homeless population. No preference is given in the awarding of PATH funds to entities with a demonstrated effectiveness in service to homeless veterans but all PATH Coordinators are members of the North Dakota Coalition for Homeless People (NDCHP) and NDCHP was awarded the Supportive Services for Veteran Families (SSVF) program grant by the United States Department of Veterans Affairs (VA). The grant provides supportive services to low-income veteran families living in or transitioning to permanent housing. All PATH Coordinators work with Veterans Administration personnel, as needed, to coordinate services for homeless veterans.

Increased demand for mental health and substance use disorder services available in the public system emerge as military personnel and their families feel more comfortable to seek services and/or exhaust services offered by the Veterans Administration or other support systems. The North Dakota Department of Human Services is a member of North Dakota Cares (ND Cares) Coalition. The Coalition includes a broad spectrum of more than 40 service providers and partners whose work touches the lives of Service Members, Veterans, Families, and Survivors. Members share a common interest in strengthening an accessible network of support across the state, even though each entity retains authority over its own programs and services. The purpose of the ND Cares coalition is to resolve barriers or gaps in services to ensure those who have served, their families and survivors receive the behavior health care and assistance they need.

The North Dakota Department of Human Services continues to serve on the Inter-Service Family Assistance Committee (ISFAC) for the past six years. ISFAC is a multi-agency committee dedicated to collaboration around the needs of military servicemen and women and their families. There are 85 member agencies in this group.

The PATH Coordinators work closely with and make referrals to the SSVF (Supportive Services for Veterans Families) workers around the state. They also make referrals to the HUD VASH workers in their regions.

The North Dakota National Guard, Office of Veterans Affairs and the Veterans Administration are active participants on the Brain Injury (BI) Advisory Committee and TBI Systems Workgroup. This collaboration provides the opportunity to stay abreast of all the efforts across the state and to share information about agency resources and services available to individuals that have a brain injury. In past years, a number of training opportunities have been provided to staff on military related issues such as military culture and reintegration.

### III. State Level Information

#### C. Recovery Support

Narrative Question:

Describe how the services to be provided using PATH funds will reduce barriers to accessing effective services that sustain recovery for individuals with mental and substance use disorders who experience homelessness.

Footnotes:

## **C. RECOVERY SUPPORT**

The PATH Program and the rest of the components of the public community-based behavioral health system in North Dakota are recovery focused. Helping individuals overcome or manage their illness, have a stable and safe place to live, have meaningful daily activities, and have relationship and social networks that provide support, friendship, love, and hope is central to the work of PATH in North Dakota.

The PATH Program addresses the needs of people over time and across different levels of disability. Recovery principles are applied to the full range of engagement, intervention, treatment, rehabilitative and supportive services that a person may need.

Services within the program identify and build upon each recovering individual's strengths and areas of health in addressing needs. The PATH Coordinators are committed to developing relationships through their outreach efforts that encourage hope and emphasize individual dignity and respect.

A number of recovery support programs have been initiated by the Department of Human Services. The PATH Program, being a part of the Department, is able to access these recovery support programs for PATH eligible individuals.

The Behavioral Health Division developed a Recovery Month Event Toolkit. The purpose of the Toolkit is to assist communities with planning and funding Recovery Events held throughout the state. The Division offers stipends to eligible applicants to assist with funding these events.

The Behavioral Health Division contracts for Recovery Talk which is a telephone recovery support service. Referrals for this service are usually made by treatment providers following an interest and agreement with the individual in treatment. Beginning October 1<sup>st</sup>, 2015 the service became a 24 hour, 7 day a week service. This change has allowed for the continued service of scheduled calls with individuals and creates the opportunity for individuals in recovery or seeking support for recovery to reach out during times when they need the support. The service is not a crisis line but the 24 hour a day 7 day a week schedule will allow for increased availability of support for recovery. This service is also accessible from any location in the state so it helps address the needs inherent to providing services in a rural frontier state. Volunteers provide a "check-in" with the person in the early stages of recovery and help the individual to access community supports that further support the person's recovery in the community.

There is a mental health recovery center located in each of the eight regions of North Dakota. Each regional human service center contracts with a private entity to administer the centers. The purpose of the recovery centers is to offer an environment of learning that promotes wellness and personal growth designed to empower individuals in recovery to live more meaningful lives in the community. Recovery centers are member-operated and promote recovery through peer support, socialization, education, and training.

The North Dakota Consumer Family Network (CFN) is a collaborative consisting of individuals, family members, and advocacy organizations dedicated to education, support, advocacy, and

empowerment in the interest of promoting mental health. Goals of the CFN include consumers being well-informed of their choices and possibilities beyond those presently available and for mental health care to be consumer and family driven. The CFN Council is comprised of consumers, family members and advocacy agency representatives from each of the human service center regions. The CFN Council meets monthly and serves an advisory function for the overall CFN.

### III. State Level Information

#### D. Alignment with PATH Goals

Narrative Question:

Describe how the services to be provided using PATH funds will target street outreach and case management as priority services and maximize serving the most vulnerable adults who are literally and chronically homeless.

Footnotes:

#### D. Alignment with PATH Goals

Keeping in line with the PATH goals, the PATH Program in North Dakota provides street outreach and case management as priority services. In the most recent PATH reporting period PATH Coordinators documented outreach to 988 individuals. Of the 988 people that PATH outreached, 421 became enrolled in PATH services. Each PATH Coordinator also carries a caseload of persons who are homeless and have a mental illness and provides them with intensive case management services. PATH Coordinators are also responsible for serving other homeless persons within their regional service area through outreach services. Through the involvement with the regional homeless coalitions PATH Coordinators are able to connect homeless people who do not meet PATH eligibility criteria with other services.

The participation in the regional homeless coalitions allows the PATH Coordinators to have established effective referral sources that complement their street outreach efforts. PATH outreach efforts involve routine visits to locations in the communities they serve where people who are homeless are to offer and provide PATH services.

Street outreach and case management will remain priorities for the PATH Program in North Dakota.

### III. State Level Information

#### E. Alignment with State Comprehensive MH Services Plan

Narrative Question:

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

Footnotes:

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

The planning for activities of the PATH Formula Grant Program and those of the State Plan for Comprehensive Community Mental Health Services is coordinated at the Department of Human Services Central Office. The staff members, being aware of the requirements of both programs, assure that PATH activities complement those that are designed to provide outreach and services for homeless, seriously mentally ill individuals as outlined in the State Plan.

The delivery of PATH services and the implementation of activities to enhance State Plan requirements occur at the regional human service centers. It is the mission of the Department of Human Services to provide quality, efficient and effective human services, which improve the lives of people. The Department of Human Services behavioral health system values are; person centered, trauma informed, recovery oriented, integrated, data driven, best practices, transparency, and accountability. These are all values that are consistent with the services to be provided through the PATH program. Each human services center is the primary regional provider of human services and they deliver a variety of behavioral health services including mental health counseling, case management, substance use disorder treatment, and vocational rehabilitation. The regional human service centers also provide services for special populations such as the developmentally disabled and the aged. In North Dakota, the regional human service centers provide the most effective base for the provision of the PATH program services.

### III. State Level Information

#### F. Alignment with State Plan to End Homelessness

Narrative Question:

Describe how the services to be provided using PATH funds are consistent with the State Plan to End Homelessness. Describe how the PATH program supports the efforts to reduce/eliminate chronic homelessness in the state. Describe how the PATH program integrates disaster preparedness and emergency planning into their continuity of care planning and the process of updating and testing their emergency response plans.

Footnotes:

## F. Alignment with State Plan to End Homelessness 2016

The services provided through North Dakota's PATH program are consistent with the State Plan to End Homelessness. For instance, one goal of the State Plan is to improve access to mainstream supports including accessing appropriate entitlement or benefit programs. PATH Coordinators are supervised by the regional director of community-based services for persons with mental illness. Primary responsibilities for each PATH Coordinator is to provide the case management service focused on assisting and facilitating long-term homeless people with gaining and maintaining eligibility for mainstream supports such as; Supplemental Security Income (SSI), Social Security Disability Insurance (SSDI), Supplemental Nutritional Assistance Program (SNAP), Temporary Assistance for Needy Families Program (TANF) Medicaid, and Medicare. PATH Coordinators will also assist their clients to access other supportive services such as representative payees or guardians when this level of support is appropriate. These efforts are all consistent with both the goal to "Access Mainstream Supports" and the strategy to "Improve the Ability to Pay Rent." Because case management is a primary function of the PATH Coordinator and each PATH Coordinator is a member of regional homeless coalitions the PATH program is in perfect alignment with the goal that people who are homeless are also connected to supportive services. Through their involvement with regional homeless coalitions, the PATH Coordinator is able to effectively network, stay updated on any service and support options that are available, and connect their clients to those services.

The PATH Coordinator's location within the regional human service center is also ideal for ensuring that the PATH program is aligned with the State Plan goal of "eliminating barriers to employment for people experiencing long term homelessness." One of the evidence based practices that is available to people experiencing homelessness and implemented by the Department of Human Services in each human service center is Integrated Dual Disorder Treatment. This program, along with the location of Vocational Rehabilitation in each of the human service center regions, supports the efforts of the PATH Coordinator in eliminating barriers to employment. The Department of Human Services also supports the evidence-based practices of Motivational Interviewing, implementation of recovery services through contracts with private providers to operate recovery centers in each region, and the provision of case aide services for people with serious mental illness. These services are in alignment with the long term goal to emphasize prevention and outreach protocols to close the front door to homelessness by helping to sustain tenancy once housing is accessed.

The State Plan is a primary guiding document for the North Dakota Coalition for Homeless People, of which the PATH Coordinators are actively involved in. The PATH program in North Dakota is and will remain focused on the goal of ending chronic homelessness.

The State PATH Contact is collocated with the State Crisis Counseling Coordinator. In concert with the Department of Human Services disaster preparedness administrator, the State PATH Contact works with regional human service center staff – including the PATH Coordinators – to ensure that consumers (including homeless individuals) are safe in the event of a disaster and that needed services can be accessed. The State PATH Contact will continue the collaborative relationship with the State Crisis Counseling Coordinator to ensure the inclusion of the needs of people who are homeless in disaster preparedness planning.

### III. State Level Information

#### G. Process for Providing Public Notice

Narrative Question:

Describe the process for providing public notice to allow interested parties, such as family members; individuals who are PATH-eligible; mental health, substance abuse, and housing agencies; and the general public, to review the proposed use of PATH funds (including any subsequent revisions to the application). Describe opportunities for these parties to present comments and recommendations prior to submission of the State PATH application to SAMHSA.

Footnotes:

## G. Process for Providing Public Notice

The Behavioral Health Division accepts public comments on the proposed activities described in the PATH Formula Grant Application through the following initiatives:

- Copies of the application are made available to members of the North Dakota Coalition for Homeless People for their review and comments. The Coalition consists of a wide cadre of providers involved with services to homeless individuals including the regional human service centers, local housing agencies, homeless shelters, and various state agencies.
- Copies of the application are made available regionally through the eight human service centers for review and comments from the public.
- Copies of the application are made available to the North Dakota Mental Health and Substance Abuse Planning Council, a 30-member Governor-appointed board consisting of key state agencies, advocacy groups, family members of adults diagnosed with a serious mental illness, parents of children diagnosed with a serious emotional disturbance, and adult mental health consumers. Throughout the year, the Council is updated by Division staff members about PATH and other homeless activities. Because the Council oversees the allocation and adequacy of the community-based public mental health system in North Dakota, they are involved in the overall planning process for the PATH program.
- The draft application is placed on the Department's website. The website can be accessed at <http://www.nd.gov/humanservices/>. A press release is issued to notify the public of the application's availability for review. Written comments are accepted throughout the year.

In addition to these activities, the regional human service centers include consumers in all aspects of their service system planning. Consumers are represented on the Human Service Center Advisory Groups and are invited to attend regional planning meetings. Recognizing that at times it is difficult to obtain consumer involvement, the Department of Human Services is continually reworking activities to ensure consumer participation in planning and implementing the system of care.

### III. State Level Information

#### H. Programmatic and Financial Oversight

Narrative Question:

Describe how the state will provide necessary programmatic and financial oversight of PATH-supported providers, such as site visits, evaluation of performance goals, audits, etc. In cases where the state provides funds through intermediary organizations (i.e., County agencies or regional behavioral health authorities), describe how these organizations monitor the use of PATH funds.

Footnotes:

## H. Programmatic and Financial Oversight 2016

The PATH program oversight consists of two components: financial and programmatic. The Department of Human Services' Division of Fiscal Administration and Behavioral Health Division jointly monitor the financial component. They are responsible to ensure that funds are distributed to the human service centers and that those funds are expended in the manner described in the grant application. State audits are conducted annually on Federal grant funds.

The State PATH Contact assumes primary responsibility for the general oversight of a PATH program's activities. This position will provide oversight of the PATH program and its activities by:

- Facilitate quarterly meetings with the PATH Coordinators and the Extended Care Directors, as the regional supervisors of the PATH Coordinators, to share information and to:
  1. Provide assistance as needed and requested;
  2. Review the status of each component of the Implementation Plan; and
  3. Review the data collected in each quarter.
- Conduct annual and as needed on-site visits to observe PATH program activities in the regions.
- Encourage Coordinators' involvement in regional and state coalitions for homeless people.
- Identify training opportunities and facilitate the participation of PATH Coordinators, in cooperation with regional supervisors and human services center directors, in those training opportunities.
- Perform biennial human service center licensure visits to review all clinical programs including the PATH program.

### Implementation Plan – July 1, 2016 to June 30, 2017

Task	Barriers to Implementation	Strategies to Overcome Barriers	Time Frames	Responsible Party
1) Designate & divide PATH funding to each HSC	1) None	1) None	1) 7/1/16 to 6/30/17	1) a. DHS liaison accountant b. PATH State Contact
2) Retain PATH Coordinators in all 8 regional HSCs	2) Turnover rates	2) ID reasons for turnover, work with administration to establish plan to retain staff.	2) 7/1/16 to 6/30/17	2) Extended care directors in regional HSCs
3) Provide training to PATH Coordinators & other staff who work with this population	3) None  4) Requires administrative approval  5) Availability of the HMIS Administrator to initiate the HMIS system for PATH Coordinators	3) None	3) At quarterly meetings of the ND Coalition for Homeless People 4) Support the attendance of PATH Coordinator to the SOAR leadership training 8/30/16 – 9/1/16 5) Provide on-going training and support for the implementation of HMIS for PATH Coordinators 7/1/16 to 6/30/17	3) PATH State Contact with assistance from expert consultants 4) PATH State Contact and Regional Supervisor and Regional Human Service Center Director  5) State PATH Contact and State HMIS Administrator
4) Provide targeted case management services to	6) Getting homeless persons interested in	6) Meet basic needs of the homeless; e.g., food,	6) Ongoing	6) PATH Coordinators

homeless population	MH/SA programs/ treatments 7) Lack of funding options for some levels of SUD treatment	housing, etc. 7) Implementation of a Voucher program to provide SUD treatment	7) Initiate funding option on 7/1/16	7) PATH Coordinators Regional Human Service Centers and participating licensed private SUD providers
5) Provide needed services available at regional HSCs, county social service board, Job Service of ND, addiction services, etc.	8) Coordinating efforts	8) Utilizing the ND & regional coalitions for the homeless	8) Ongoing	8) PATH Coordinators, regional HSC staff, and staff of other agencies that work with the homeless
6) Evaluate success of meeting the needs of the homeless (Reports & on- site visits)	9) None	9) None	9) Ongoing	9) PATH Coordinators, Extended Care Directors, & PATH State Contact

### III. State Level Information

#### I. Selection of PATH Local-Area Providers

Narrative Question:

Describe the method(s) used to allocate PATH funds to areas and providers with the greatest number of individuals who experience homelessness with serious mental illnesses or co-occurring substance use disorders (i.e., through annual competitions, distribution by formula, data driven or other means).

Footnotes:

## I. Selection of Path Local-Area Providers

PATH Formula Grant funds are divided between the eight regional human service centers. Northwest Human Service Center in Williston will employ a half-time PATH Coordinator and will receive \$18,437 in Federal PATH funds. Southeast Human Service Center in Fargo will employ one FTE PATH Coordinator and one FTE PATH Case Aide and will receive \$55,313. The remaining six human service centers will employ one FTE PATH Coordinator and will each receive \$36,875.

The 2015 reports identified that in North Dakota's four most rural regions there were significant outreach contacts and those PATH coordinators enrolled from 6 to 19 individuals. What is an important component of continued funding for those PATH Coordinators is the fact that they are the only source of targeted case management for the homeless population. Each of those PATH Coordinators has enrolled 100% of the individuals outreached that are eligible for the PATH program. Since there is a very limited number of related services in those regions the role of the PATH Coordinator is even more vital in effectively addressing the needs of the homeless population. The other four regions identified average enrollment of 67 people in PATH services. Although there is a much more robust continuum of care in the two most heavily populated regions, Region V and Region VII there is still a significant need for targeting case management.

Another reason for providing PATH funding and services statewide is to enhance the coordination of services to the target population located in the more remote rural areas of each region. The four Native American reservations in the State create an additional need for PATH Coordinators in all regions. Region III has provided a .5 FTE PATH Coordinator that primarily serves the most populated reservation in the North Dakota.

### III. State Level Information

#### J. Location of Individuals with Serious Mental Illnesses who are Experiencing Homelessness

Narrative Question:

Indicate the number of individuals with serious mental illnesses experiencing homelessness by each region or geographic area of the entire state. Indicate how the numbers were derived and where the selected providers are located on a map.

Footnotes:

**J. Location of Individuals with Serious Mental Illnesses who are Experiencing Homelessness**

Homelessness continues to be an issue in North Dakota. The state lacks sufficient affordable housing, especially for low and extremely low-income brackets. There is a severe shortage of homeless shelter options available in at least five of North Dakota’s six regions. The availability of housing options that serve people with differing levels of need is also very limited – transitional units, low demand housing, and supported permanent housing are in very short supply. Housing subsidy funds are limited and waiting periods of 6 months to more than 1 year are common. Some zoning laws in the state contain provisions that make it difficult to construct group living facilities, which is the category most permanent supportive housing projects fall into. The specific regulatory language often involves definition of “non-household” living, rules regarding number of unrelated individuals per unit, and the requirement for public hearings associated with conditional use permits process. Rental and credit history requirements create significant barriers for people to transition out of homelessness. Regions report that minimum credit scores of 600 are common for people to access housing. There continues to be barriers, particularly with HUD subsidized housing, for people with criminal histories and finding housing for individuals with a history of sexual offenses is particularly problematic. In addition, the employment opportunities are decreasing in the areas of the state impacted by the oil industry, due to the decline in activity, but the housing costs have not shown a similar decline. This has resulted in less potential for people who are homeless to enter the job market while the lack of affordable housing has maintained. The ND Housing Finance Administration Director reports there is a continued shortage of affordable housing.

**Homelessness in North Dakota by Region (January 2015 PIT)**

	Adults	Children	Veterans	Chronically Homeless	Long-Term Homeless	Severely Mentally Ill	Chronic Substance Abuse
<b>Region I</b>	313	4	10	0	0	0	0
<b>Region II</b>	65	18	1	0	0	2	2
<b>Region III</b>	6	7	0	0	0	0	0
<b>Region IV</b>	180	66	23	11	0	9	13
<b>Region V</b>	266	67	77	32	0	50	69
<b>Region VI</b>	1	1	0	0	0	0	0
<b>Region VII</b>	200	88	26	26	0	18	15
<b>Region VIII</b>	10	13	1	1	0	0	1
<b>Total - ND</b>	1040	265	137	70	0	79	102

### **Severe mental illness**

An analysis of the North Dakota Point-in-Time Survey for the years 2006 to 2014 showed a decreasing trend to in the number of people who were homeless reporting that they had a severe mental illness. The 2015 Point-in-Time Survey showed the percentage of people who were homeless and reporting a severe mental illness at just over 6%.

### **Chronic substance abuse**

This same analysis showed a decreasing trend for the percentage of individuals who were identified as having a history of chronic substance abuse through 2014. The 2015 Point-in-Time data identified an increase in the percentage of people who were homeless and reporting “chronic substance abuse” from 5% in 2014 to 8% in 2015.

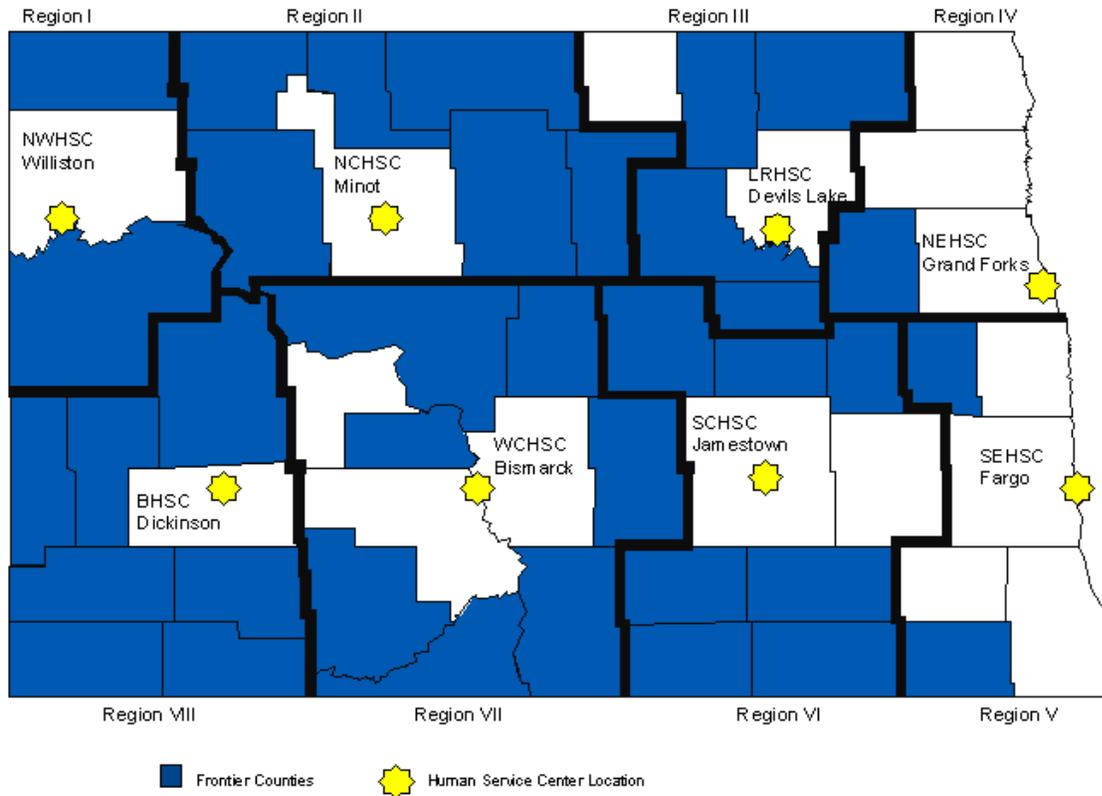
### **Chronically homeless**

Analysis showed a change in the leveling trend in the percentage of people reporting that they were chronically homeless, between 8% and 4% from 2007 to 2013, to 12% in 2014. In 2015 there was a decrease to just over 5% of the adults who were homeless reporting that they were chronically homeless. This is lower than the national average of 15.8% of the people who are homeless reporting that they are chronically homeless.

### **Veterans**

Finally, the analysis of the point in time data demonstrated a significant decrease in the number of people who were homeless that were veterans between 2013 and 2014, dropping from 19% in 2013 to 5% in 2014. There were 137 people who were homeless reporting that they were veterans in the 2015 point in time data. This data indicates an increase from the 2014 data to 10.5 percent of the people who were homeless in 2015 reporting that they were veterans.

## Map of North Dakota with Human Service Center Locations



References:

### III. State Level Information

#### K. Matching Funds

Narrative Question:

Describe the sources of the required PATH match contributions and provide assurances that these contributions will be available at the beginning of the grant period.

Footnotes:

## K. Matching Funds

The sources of the in-kind, non-Federal contributions will include the PATH Coordinators office space, telephone services, and office supplies (see Table 1).

The Department of Human Services central office staff of the Behavioral Health Division will provide administrative and supportive services to the PATH Project without compensation from PATH funds (see Table 2). All salaries and other in-kind contributions are funded by North Dakota General Funds.

In addition to the above-mentioned in-kind contributions, the State of North Dakota provides direct cash payments to the PATH program using General Fund dollars (see Table 3). These dollars are used to augment the services of the PATH Coordinators, as they are employees of the State of North Dakota. Please refer to Table 4 for the total in-kind contributions provided by North Dakota to the PATH program.

Because the in-kind contributions are included in the Department of Human Services' biennial budget, state match is available at the beginning of each PATH grant period.

**Table 1. In-kind Contributions Provided by the Eight Regional Human Service Centers**

CONTRIBUTION	COST	FACTOR	TOTAL CONTRIBUTION
Rent	\$2,929/year	X8	\$23,432
Telephone Services	\$544/year	X8	\$4,352
Office Supplies	\$26/year	X8	\$208
<b>TOTAL</b>			<b>\$27,992</b>

\* Includes the eight regional human service centers' contribution

**Table 2. In-kind Contributions Provided by the Central Office**

POSITION	SALARY & BENEFITS	% OF TIME DEVOTED TO PATH PROJECT	TOTAL CONTRIBUTION
State PATH Contact and Grant Writer	\$85,370	5%	\$4,269
<b>TOTAL</b>			<b>\$4,269</b>

**Table 3. General Fund Contributions Provided to the PATH Program**

<b>HUMAN SERVICE CENTER</b>	<b>TOTAL GENERAL FUNDS</b>
Northwest Human Service Center	\$19,115
North Central Human Service Center	\$38,787
Lake Region Human Service Center	\$41,064
Northeast Human Service Center	\$40,462
Southeast Human Service Center	\$95,756
South Central Human Service Center	\$39,604
West Central Human Service Center	\$40,243
Badlands Human Service Center	\$38,470
<b>TOTAL GENERAL FUNDS</b>	<b>\$353,501</b>

**Table 4. Total In-kind Contribution of Non-Federal Funds**

<b>CONTRIBUTION</b>	<b>AMOUNT</b>
Human Service Center	\$27,992
Central Office	\$4,269
General Fund	\$353,501
<b>TOTAL</b>	<b>\$385,762</b>

### III. State Level Information

#### L. Other Designated Funding

Narrative Question:

Indicate whether the mental health block grant, substance abuse block grant, or general revenue funds are designated specifically for serving people who experience homelessness and have serious mental illnesses.

Footnotes:

## L. Other Designated Funding

Currently, neither mental health block grant nor substance abuse block grant funding is specifically earmarked for the PATH population. State General Funds are used to provide services to the PATH population. The following general fund contributions are provided to the PATH program:

<b>HUMAN SERVICE CENTER</b>	<b>TOTAL GENERAL FUNDS</b>
Northwest Human Service Center	\$19,115
North Central Human Service Center	\$38,787
Lake Region Human Service Center	\$41,064
Northeast Human Service Center	\$40,462
Southeast Human Service Center	\$95,756
South Central Human Service Center	\$39,604
West Central Human Service Center	\$40,243
Badlands Human Service Center	\$38,470
<b>TOTAL GENERAL FUNDS</b>	<b>\$353,501</b>

### III. State Level Information

#### M. Data

Narrative Question:

Describe the state's and providers' status on the HMIS transition plan, with an accompanying timeline for collecting all PATH data in HMIS by FY 2017. If the state is fully utilizing HMIS for PATH services, please describe plans for continued training and how the state will support new local-area providers.

Footnotes:

## M. Data

The PATH Program in North Dakota has not yet begun data collection through the Homeless Management Information System. The State PATH Contact has on-going contact with the state HMIS System Administrator. An initial date of March 30, 2016 was set for training of PATH coordinators and initiation of the HMIS data collection by the PATH program. Due to conflicting demands from the overall continuum of care network that training had to be postponed. The current deadline is June 30, 2016.

### III. State Level Information

#### N. Training

Narrative Question:

Indicate how the state provides, pays for, or otherwise supports evidenced-based practices, peer support certification, and other trainings for local PATH-funded staff.

Footnotes:

## N. Training

State general funds, PATH grant funds and technical assistance grant funds are used to provide training to the PATH Coordinators. PATH Coordinators are regular Department of Human Services' employees and, as such, participate in the in-service training sessions that are held in each human service center. PATH Coordinators are encouraged to attend the semi-annual Behavioral Health Conference and training stipends are offered to support human service center staff's attendance. This multi-day conference focuses on evidence-based practices, recovery supports, trauma informed care and other behavioral health topics. All PATH Coordinators are encouraged to attend annual cultural competency training through their agencies or to seek out training from other sources.

On September 24, 2015 all PATH coordinators received training on "Maximizing the Benefits of PATH Program Participation in HMIS." This training provided information on the PATH data collection workflow, understanding the 2014 HMIS data standards, data elements and data element definitions. This training was funded by a technical assistance grant from SAMHSA's Homeless and Housing Resource Network. This was an on-site training provided by Collin J. Whelley, an analyst at the Center for Social Innovation with 9 years of experience working with homelessness and poverty.

The State PATH Contact participated in a 2 day technical assistance and H2 Initiative Action Planning session on March 8<sup>th</sup> and 9<sup>th</sup>, 2016. This session involved multiple stakeholders in system of addressing homelessness in the North Dakota and the technical assistance was provided by funding through a collaboration of HUD's office of Special Needs Assistance Programs, the Office of HIV/AIDS Housing, the US Interagency Council on Homelessness and the US Department of Health and Human Services. The State PATH Contact and all PATH Coordinators reviewed, region by region, the scope of services provided by PATH and by other agencies in the region to address tenancy and pre-tenancy concerns. This activity is part of a coordinated effort by State stakeholders, specifically the Department of Human Services Behavioral Health Division and the Medical Services Division with the guidance of the Medicaid Innovation Accelerator Program. The goal of this activity is to identify current resources that support accessing and maintaining housing and determining the current needs.

### III. State Level Information

#### O. SSI/SSDI Outreach, Access and Recovery (SOAR)

Narrative Question:

Describe how the state encourages provider staff to be trained in SOAR. Indicate the number of PATH providers who have at least one trained SOAR staff. If the state does not use SOAR, describe state efforts to ensure client applications for mainstream benefits are completed, reviewed, and a determination made in a timely manner.

Footnotes:

#### O. SSI/SSDI Outreach, Access and Recovery (SOAR)

The State PATH Contact is supporting the access to SOAR training for all PATH Coordinators. The State PATH Contact is working with the SOAR Technical Assistance Center to facilitate the participation of one of the State PATH Coordinators in the SOAR Leadership Academy. To date, two programs have received training in SOAR. At this time, participation in SOAR is optional. Some PATH Coordinators have extensive experience with the SSI/SSDI application process and have an excellent rate of application acceptance. The State PATH Contact has conducted individual interviews with each of the PATH Coordinators and their direct supervisors to assess the current relationship with the State Social Security Administration and the State Disability Determination Services program. Based on this information a plan will be developed to take advantage of the availability of SOAR on-line training and access additional technical assistance.

### III. State Level Information

#### P. Coordinated Entry

Narrative Question:

Describe the state's coordinated entry program and role of key partners.

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Footnotes:

## P. Coordinated Entry

North Dakota's Continuum of Care program has implemented a CAREs process. At this time it is only implemented in one region. Fargo's regional homeless coalition, the Fargo/Moorhead Coalition for Homeless Persons (FMCHP) is utilizing the CARE's system. CAREs and the HMIS system have not been fully operationalized across the state. Each of the regional homeless coalitions work together to ensure the best fit between individual and support or service is identified for each person. This process is working well due to the fact that there is not an extremely high number of people who are homeless and there is a relatively small system of services.

### III. State Level Information

#### Q. Justice Involved

Narrative Question:

Describe state efforts to minimize the challenges and foster support for PATH clients with a criminal history such as jail diversion and other state programs, policies and laws. Indicate the percent of PATH clients with a criminal history.

Footnotes:

## Q. Justice Involved

Describe state efforts to minimize the challenges and foster support for PATH clients with a criminal history such as jail diversion and other state programs, policies and laws. Indicate the percent of PATH clients with a criminal history.

During the previous grant year the PATH Coordinators conducted outreach to 21 individuals in correctional settings in the 8 regions of the state. Although there is no specific prison diversion plan there are several regional activities that are helping to ensure that appropriate transitional support is available to people leaving corrections settings.

In several of the regions the PATH Coordinator maintains ongoing contact with local law enforcement to ensure that referrals are made when there is a planned release that could result in homelessness. PATH Coordinators recognize that local police departments are often the first contact for individuals who are homeless. In the Region II the municipal police department has been a member of the regional coalition since the coalition was formed.

In Region III the homeless coalition has worked in partnership with the local law enforcement agency. The Lake Region Law Enforcement agency will authorize one night in a motel after screening an individual or family. The law enforcement center will also take after hours calls for one of the primary homeless service providers in the region, the local community action agency.

In Region V, which has the largest community in the state, Fargo, the PATH Coordinator has ongoing contact with the downtown police. The law enforcement personnel that cover the downtown area are able to make referrals to either the PATH Coordinator or other homeless outreach and support providers. This relationship results in people often being referred for services, including mental health support and helps avoid unnecessary incarceration.

At the end of the last reporting period the PATH Coordinator and the regional Community Action Agency in Region VIII has developed a partnership with local law enforcement. The PATH Coordinator and staff from the Community Action Agency work closely with the corrections facility staff. The corrections facility staff will conduct a basic needs assessment. Based on information from the needs assessment, a referral is made to the PATH Coordinator and the Community Action Agency staff and they begin meetings with the individual who is incarcerated. Through this process the person who is incarcerated is provided information, options of support and services upon release are discussed and effective planning for accessing housing and services can begin very early in a person's sentence.

The focus is to assist the inmate in accessing needed items such as identification card, social security cards. The PATH Coordinator has been able to assist inmates in accessing clothing for release and begin planning for housing searches and job searches. Since this program began the PATH Coordinator and the Community Action Agency staff have met with 24 inmates during their incarceration.

The ND PATH program has not implemented the HMIS and does not have specific data on clients with a criminal history. One of the barriers that PATH Coordinators having need to address is the fact that clients have a criminal history with limits access to housing and housing resources.