

**DRAFT FY 2011 PROJECTS FOR ASSISTANCE IN
TRANSITION FROM HOMELESSNESS (PATH)
GRANT APPLICATION**



Written comments will be accepted until 5:00 p.m. on May 25, 2011. Send comments to:

(Mr.) LAUREN J. SAUER, MPA, M.Ed.
Program Administrator
North Dakota Department of Human Services
Division of Mental Health and Substance Abuse Services
1237 W. Divide Avenue, Suite 1C
Bismarck, ND 58501
Fax: 701-328-8969
Email: lsauer@nd.gov

May 20, 2011

Barbara Orlando, MS
Grants Management Officer
Division of Grants Management
Substance Abuse and Mental Health Services Administration
One Choke Cherry Road, Room 7-1091
Rockville, Maryland 20850

ATTN: PATH Formula Grant (SM 11-F2)

Enclosed please find the original and two copies of North Dakota's PATH Grant Application for Fiscal Year 2010.

If you should have any questions, please do not hesitate to call me at 701-328-8924. I await your review of the application and the arrival of the Notice of Approval.

Sincerely,

JoAnne Hoesel, Director

Enclosures



— State of —
North Dakota

Office of the Governor

Jack Dalrymple
Governor

December 29, 2010

Ms. Barbara Orlando
Grants Management Officer
Office of Program Services
Division of Grants Management
Substance Abuse and Mental Health Services Administration
1 Choke Cherry Road, Rm 7-1091
Rockville, Maryland 20857

Dear Ms. Orlando:

As Governor of North Dakota, I hereby designate Carol K. Olson, 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. Olson 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
Jack Dalrymple
Governor

37:70

Application for Federal Assistance SF-424

*1. Type of Submission: <input type="checkbox"/> Preapplication <input checked="" type="checkbox"/> Application <input type="checkbox"/> Changed/Corrected Application	*2. Type of Application: <input checked="" type="checkbox"/> New <input type="checkbox"/> Continuation <input type="checkbox"/> Revision	*If Revision, select appropriate letter(s): <input type="text"/> *Other (Specify) <input type="text"/>
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*3. Date Received: <input type="text"/>	4. Applicant Identifier: <input type="text"/>
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5a. Federal Entity Identifier <input type="text"/>	*5b. Federal Award Identifier: <input type="text"/>
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State Use Only:

6. Date Received by State: <input type="text"/>	7. State Application Identifier: <input type="text"/>
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8. APPLICANT INFORMATION

***a. Legal Name:**

*b. Employer/Taxpayer Identification Number (EIN/TIN): <input type="text" value="45-0309764"/>	*c. Organization DUNS: <input type="text" value="802743534"/>
--	---

d. Address

*Street1:	<input type="text" value="1237 W. Divide Avenue"/>
Street2:	<input type="text" value="Suite 1C"/>
*City:	<input type="text" value="Bismarck"/>
County/Parish:	<input type="text" value="Burleigh"/>
*State:	<input type="text" value="North Dakota"/>
Province:	<input type="text"/>
*Country:	<input type="text" value="USA"/>
*Zip/Postal Code:	<input type="text" value="58501"/>

e. Organizational Unit

Department Name: <input type="text" value="North Dakota Department of Human Services"/>	Division Name: <input type="text" value="Mental Health & Substance Abuse Services"/>
---	--

f. Name and contact information of person to be contacted on matters involving this application:

Prefix: <input type="text" value="Ms."/>	*First Name: <input type="text" value="JoAnne"/>
Middle Name: <input type="text"/>	
*Last Name: <input type="text" value="Hoesel"/>	
Suffix: <input type="text"/>	

Title:

Organizational Affiliation:

*Telephone Number: <input type="text" value="701-328-8924"/>	Fax Number: <input type="text" value="701-328-8969"/>
---	--

***Email:**

Application for Federal Assistance SF-424

9. Type of Applicant 1: Select Applicant Type:

State Government

Type of Applicant 2: Select Applicant Type:

Type of Applicant 3: Select Applicant Type:

* Other (specify)

10. Name of Federal Agency:

Substance Abuse and Mental Health Services Administration

11. Catalog of Federal Domestic Assistance Number

93.150

CFDA Title:

FY2011 PATH Application

*12. Funding Opportunity Number:

RFA No. SM-11-F2

*Title:

FY 2011 PATH Application

13. Competition Identification Number:

Title:

14. Areas Affected by Project (Cities, Counties, States, etc.):

Statewide

15. Descriptive Title of Applicant's Project:

FY 2011 PATH Application

Attach supporting documents as specified in agency instructions.

Application for Federal Assistance SF-424	
16. Congressional Districts Of:	
*a. Applicant: <input type="text" value="ND-One"/>	b. Program/Project: <input type="text" value="ND-One"/>
Attach an additional list of Program/Project Congressional Districts if needed: <input type="text"/>	
17. Proposed Project:	
*a. Start Date: <input type="text" value="08/01/2011"/>	b. End Date: <input type="text" value="07/31/2012"/>
18. Estimated Funding(\$):	
*a. Federal	<input type="text" value="300,000"/>
*b. Applicant	<input type="text"/>
*c. State	<input type="text" value="435,452"/>
*d. Local	<input type="text"/>
*e. Other	<input type="text"/>
*f. Program Income	<input type="text"/>
*g. TOTAL	<input type="text" value="735,452"/>
* 19. Is Application Subject to Review By State Under Executive Order 12372 Process?	
<input type="checkbox"/> a. This application was made available to the State under the Executive Order 12372 Process for review on <input type="text"/>	
<input type="checkbox"/> b. Program is subject to E.O. 12372 but has not been selected by the State for review.	
<input checked="" type="checkbox"/> c. Program is not covered by E.O. 12372.	
*20. Is the Applicant Delinquent on Any Federal Debt? (If "Yes", provide explanation in attachment.)	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
If "Yes", provide explanation and attach.	
21. *By signing this application, I certify (1) to the statements contained in the list of certifications** and (2) that the statements herein are true, complete and accurate to the best of my knowledge. I also provide the required assurances** and agree to comply with any resulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties (U.S. Code, Title 218, Section 1001)	
<input checked="" type="checkbox"/> ** I AGREE	
** The list of certifications and assurances, or an internet site where you may obtain this list, is contained in the announcement or agency specific instructions.	
a. Authorized Representative	
Prefix: <input type="text" value="Ms."/>	*First Name: <input type="text" value="Carol"/>
Middle Name: <input type="text" value="K."/>	
Last Name: <input type="text" value="Olson"/>	
Suffix: <input type="text"/>	
*Title: <input type="text" value="Executive Director"/>	
*Telephone Number: <input type="text" value="701-328-2538"/>	Fax Number: <input type="text" value="701-328-2359"/>
*Email: <input type="text" value="colson@nd.gov"/>	
*Signature of Authorized Representative: <input type="text" value="Carol K. Olson"/>	Date Signed: <input type="text" value="5/13/11"/>

TABLE OF CONTENTS

	<u>PAGE</u>
Letter of Transmittal.....	1
Letter of Designation.....	2
Face Page.....	3
Table of Contents.....	6
Budget Information - SF424A.....	7
Budget Narrative.....	8
A. EXECUTIVE SUMMARY.....	11
B. STATE-LEVEL INFORMATION.....	12
C. LOCAL PROVIDER INFO.....	19
1. Northwest Human Service Center.....	21
2. North Central Human Service Center.....	29
3. Lake Region Human Service Center.....	38
4. Northeast Human Service Center.....	48
5. Southeast Human Service Center.....	57
6. South Central Human Service Center.....	64
7. West Central Human Service Center.....	71
8. Badlands Human Service Center.....	81
Agreements.....	88
Disclosure of Lobbying Activities.....	93
Checklist.....	95

BUDGET INFORMATION - Non-Construction Programs

SECTION A - BUDGET SUMMARY

Grant Program Function or Activity (a)	Catalog of Federal Domestic Assistance Number (b)	Estimated Unobligated Funds		New or Revised Budget		Total (g)
		Federal (c)	Non-Federal (d)	Federal (e)	Non-Federal (f)	
1.		\$	\$	\$	\$	\$ 0.00
2.		\$	\$	\$	\$	\$ 0.00
3.		\$	\$	\$	\$	\$ 0.00
4.		\$	\$	\$	\$	\$ 0.00
5. TOTALS		\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00

SECTION B - BUDGET CATEGORIES

Object Class Categories	GRANT PROGRAM, FUNCTION OR ACTIVITY				Total (5)
	(1)	(2)	(3)	(4)	
a. Personnel	\$ 180,000	\$ 249,075	\$	\$	\$ 0.00
b. Fringe Benefits	\$ 63,000	\$	\$	\$	\$ 0.00
c. Travel	\$ 20,000	\$	\$	\$	\$ 0.00
d. Equipment	\$	\$	\$	\$	\$ 0.00
e. Supplies	\$	\$	\$	\$	\$ 0.00
f. Contractual	\$	\$	\$	\$	\$ 0.00
g. Construction	\$	\$	\$	\$	\$ 0.00
h. Other	\$ 32,000	\$ 186,377	\$	\$	\$ 0.00
i. Total Direct Charges (sum of 6a -6h)	\$ 295,000	\$ 435,452	\$ 0.00	\$ 0.00	\$ 0.00
j. Indirect Charges	\$ 5,000	\$	\$	\$	\$ 0.00
k. TOTALS (sum of 6i and 6j)	\$ 300,000	\$ 435,452	\$ 0.00	\$ 0.00	\$ 0.00
7. Program Income	\$	\$	\$	\$	\$ 0.00

BUDGET NARRATIVE
FEDERAL FUND EXPENDITURES

A. Personnel

Fund seven-and-one-half (7.5) FTE PATH Coordinator positions and one (1) FTE PATH Case Manager Aide position who will work in the regional human service centers. The Federal portion of the salary for each FTE Coordinator position is \$22,500 per year.

B. Fringe Benefits

Computed at 35 percent of the salary, fringe benefits include the cost of health insurance, worker's compensation, Social Security/Medicare, retirement, and unemployment insurance. The Federal portion of the benefits for each FTE Coordinator position is \$7,875 per year. As the PATH Coordinators are employees of the North Dakota Department of Human Services, the 35 percent fringe benefit costs are the same as other employees of the Department.

C. Travel

Travel costs will include the expenses for the PATH Coordinator to attend quarterly meetings scheduled for all Coordinators and to attend meetings of the North Dakota Coalition for Homeless People. Costs include travel at \$0.27 per mile, per diem of \$25 per day, and lodging at \$69 per day plus tax. This category will also cover the travel costs associated with providing services to homeless persons within the region. The estimated travel costs for each FTE Coordinator position is \$2,500 for the year. At this time, the \$2,500 travel allowance is sufficient to cover costs associated with outreach travel by the PATH Coordinators. If the PATH Coordinators need additional funding for travel, North Dakota will provide General Fund dollars to cover these costs.

H. Other

Each FTE PATH Coordinator will have access to \$4,000 to cover the costs associated with providing 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.

SOURCES OF NON-FEDERAL CONTRIBUTIONS

The sources of the in-kind, non-Federal contributions will include the salaries and benefits of staff of the eight regional human service centers who will provide mental health and substance abuse treatment services to the target population and other center staff who will provide administrative support services to the eight PATH Coordinators housed in the centers (see Table 1, next page). The eight regional human service centers will also provide the PATH Coordinators with office space, telephone services, and office equipment as an in-kind contribution (see Table 2, next page).

Central office staff of the Division of Mental Health and Substance Abuse Services will provide administrative and supportive services to the PATH Project without compensation from PATH

funds (see Table 3, Page 10). 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 4, Page 10). 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 5 (Page 10) 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. Staff In-kind Contributions: Human Service Centers (HSC) Staff

POSITION TITLE	SALARY & BENEFITS	X8*	% OF TIME DEVOTED TO PATH PROJECT	TOTAL CONTRIBUTION
Regional HSC Director	\$ 58,404	\$467,232	1%	\$ 4,672
HSC Business Manager	43,188	345,504	3%	10,365
Psychiatrist	130,000	1,040,000	3%	31,200
Clinical Psychologist	58,404	467,232	5%	23,361
Extended Care Administrator	43,188	345,504	15%	51,826
Vocational Rehab Counselor	35,244	281,952	5%	14,098
Addiction Counselor	39,024	312,192	15%	46,828
Secretary	22,176	177,408	25%	44,352
TOTAL				\$226,702

* Eight human service centers are involved in the PATH Project

Table 2. Other In-kind Contributions Provided by the Eight Regional Human Service Centers

CONTRIBUTION	COST	FACTOR	TOTAL CONTRIBUTION
Rent	\$2,823/year	X8	\$22,584
Telephone Services	700/year	X8	5,600
Data Processing	200/year	X8	1,600
Office Supplies	150/year	X8	1,200
TOTAL			\$30,984

* Includes the eight regional human service centers' contribution

Table 3. 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	51,685	30%	15,506
Alternate State PATH Contact & Director, Division of Mental Health and Substance Abuse Services	78,603	3%	2,358
Mental Health Researcher	53,746	5%	2,687
Secretary	18,217	10%	1,822
TOTAL			\$22,373

Table 4. General Fund Contributions Provided to the PATH Program

HUMAN SERVICE CENTER	TOTAL GENERAL FUNDS
Northwest Human Service Center	\$22,916
North Central Human Service Center	5,448
Lake Region Human Service Center	5,565
Northeast Human Service Center	25,509
Southeast Human Service Center	24,396
South Central Human Service Center	17,564
West Central Human Service Center	22,938
Badlands Human Service Center	23,036
Central Office	8,021
TOTAL GENERAL FUNDS	\$155,393

Table 5. Total In-kind Contribution of Non-Federal Funds

CONTRIBUTION	AMOUNT
Human Service Center	\$226,702
Other HSC In-Kind	30,984
Central Office	22,373
General Fund	155,393
TOTAL	\$435,452

Section A: Executive Summary

REGION I	<p>Organization to Receive Funds: Northwest Human Service Center - Williston Type: Regional Human Service Center</p> <p>Service Area: The Counties of: Divide, McKenzie, Williams</p>	<p>Service Supported by PATH Funds: Outreach, Screening/Diagnostic Treatment, Habilitation/Rehabilitation, Community Mental Health Services, Alcohol and Drug Treatment, Staff Training, Case Management, Supportive and Supervisory Service in Residential Settings, Referrals for Primary Health Services, Job Training, Educational Services, and Housing Services</p> <p>Ages: 18+ Status: Literally & At-Risk Major Activities: Outreach & Case Management HMIS: Regional & Web TA Participation</p> <p>Clients Contacted: 54 Enrolled: Major Strategies: Fund Case Managers Funding to be Received: \$18,438</p>
REGION II	<p>Organization to Receive Funds: North Central Human Service Center - Minot Type: Regional Human Service Center</p> <p>Service Area: The Counties of: Burke, Mountrail, Ward, Renville, Bottineau, McHenry, Pierce</p>	<p>Service Supported by PATH Funds: Outreach, Screening/Diagnostic Treatment, Habilitation/Rehabilitation, Community Mental Health Services, Alcohol and Drug Treatment, Staff Training, Case Management, Supportive and Supervisory Service in Residential Settings, Referrals for Primary Health Services, Job Training, Educational Services, and Housing Services</p> <p>Ages: 18+ Status: Literally & At-Risk Major Activities: Outreach & Case Management HMIS: Regional & Web TA Participation</p> <p>Client Contacted: 150 Enrolled: Major Strategies: Fund Case Managers Funding to be Received: \$36,875</p>
REGION III	<p>Organization to Receive Funds: Lake Region Human Service Center - Devils Lake Type: Regional Human Service Center</p> <p>Service Area: The Counties of: Rolette, Towner, Cavalier, Ramsey, Benson, Eddy</p>	<p>Service Supported by PATH Funds: Outreach, Screening/Diagnostic Treatment, Habilitation/Rehabilitation, Community Mental Health Services, Alcohol and Drug Treatment, Staff Training, Case Management, Supportive and Supervisory Service in Residential Settings, Referrals for Primary Health Services, Job Training, Educational Services, and Housing Services</p> <p>Ages: 18+ Status: Literally & At-Risk Major Activities: Outreach & Case Management HMIS: Regional & Web TA Participation</p> <p>Client Contacted: 120 Enrolled: Major Strategies: Fund Case Managers Funding to be Received: \$36,875</p>
REGION IV	<p>Organization to Receive Funds: Northeast Human Service Center - Grand Forks Type: Regional Human Service Center</p> <p>Service Area: The Counties of: Pembina, Walsh, Nelson, Grand Forks</p>	<p>Service Supported by PATH Funds: Outreach, Screening/Diagnostic Treatment, Habilitation/Rehabilitation, Community Mental Health Services, Alcohol and Drug Treatment, Staff Training, Case Management, Supportive and Supervisory Service in Residential Settings, Referrals for Primary Health Services, Job Training, Educational Services, and Housing Services</p> <p>Ages: 18+ Status: Literally & At-Risk Major Activities: Outreach & Case Management HMIS: Regional & Web TA Participation</p> <p>Client Contacted: 100 Enrolled: Major Strategies: Fund Case Managers Funding to be Received: \$36,875</p>
REGION V	<p>Organization to Receive Funds: Southeast Human Service Center - Fargo Type: Regional Human Service Center</p> <p>Service Area: The Counties of: Steele, Traill, Cass, Ransom, Richland</p>	<p>Service Supported by PATH Funds: Outreach, Screening/Diagnostic Treatment, Habilitation/Rehabilitation, Community Mental Health Services, Alcohol and Drug Treatment, Staff Training, Case Management, Supportive and Supervisory Service in Residential Settings, Referrals for Primary Health Services, Job Training, Educational Services, and Housing Services</p> <p>Ages: 18+ Status: Literally & At-Risk Major Activities: Outreach & Case Management HMIS: Regional & Web TA Participation</p> <p>Client Contacted: 200 Enrolled: Major Strategies: Fund Case Managers Funding to be Received: \$55,312</p>
REGION VI	<p>Organization to Receive Funds: South Central Human Service Center - Jamestown Type: Regional Human Service Center</p> <p>Service Area: The Counties of: Wells, Foster, Griggs, Stutsman, Dickey, Logan, LaMoure, McIntosh, Barnes</p>	<p>Service Supported by PATH Funds: Outreach, Screening/Diagnostic Treatment, Habilitation/Rehabilitation, Community Mental Health Services, Alcohol and Drug Treatment, Staff Training, Case Management, Supportive and Supervisory Service in Residential Settings, Referrals for Primary Health Services, Job Training, Educational Services, and Housing Services</p> <p>Ages: 18+ Status: Literally & At-Risk Major Activities: Outreach & Case Management HMIS: Regional & Web TA Participation</p> <p>Client Contacted: 100 Enrolled: Major Strategies: Fund Case Managers Funding to be Received: \$36,875</p>
REGION VII	<p>Organization to Receive Funds: West Central Human Service Center - Bismarck Type: Regional Human Service Center</p> <p>Service Area: The Counties of: Mercer, McLean, Sheridan, Oliver, Burleigh, Kidder, Morton, Grant, Sioux, Emmons</p>	<p>Service Supported by PATH Funds: Outreach, Screening/Diagnostic Treatment, Habilitation/Rehabilitation, Community Mental Health Services, Alcohol and Drug Treatment, Staff Training, Case Management, Supportive and Supervisory Service in Residential Settings, Referrals for Primary Health Services, Job Training, Educational Services, and Housing Services</p> <p>Ages: 18+ Status: Literally & At-Risk Major Activities: Outreach & Case Management HMIS: Regional & Web TA Participation</p> <p>Client Contacted: 225 Enrolled: Major Strategies: Fund Case Managers Funding to be Received: \$36,875</p>
REGION VIII	<p>Organization to Receive Funds: Badlands Human Service Center - Dickinson Type: Regional Human Service Center</p> <p>Service Area: The Counties of: Dumm, Billings, Golden Valley, Hettinger, Slope, Stark, Bowman, Adams</p>	<p>Service Supported by PATH Funds: Outreach, Screening/Diagnostic Treatment, Habilitation/Rehabilitation, Community Mental Health Services, Alcohol and Drug Treatment, Staff Training, Case Management, Supportive and Supervisory Service in Residential Settings, Referrals for Primary Health Services, Job Training, Educational Services, and Housing Services</p> <p>Ages: 18+ Status: Literally & At-Risk Major Activities: Outreach & Case Management HMIS: Regional & Web TA Participation</p> <p>Client Contacted: 55 Enrolled: Major Strategies: Fund Case Managers Funding to be Received: \$36,875</p>
SMHA	<p>Organization to Receive Funds: Division of Mental Health & Substance Abuse Services Type: State Mental Health Authority Service Area: Statewide</p>	<p>Service Supported by PATH Funds: Administrative Costs for Oversight of the Statewide PATH Program</p> <p>Funding to be Received: \$5,000</p>

B. STATE-LEVEL INFORMATION

1. OPERATIONAL DEFINITIONS

The target population to be served with PATH funds in North Dakota encompasses individuals who are homeless or at risk of becoming homeless and also are diagnosed with a serious mental illness or have a co-occurring mental illness and substance abuse disorder. Individuals who are only homeless will not be excluded from receiving services from PATH staff.

a. Homelessness

(I) An individual or family that lacks a fixed, regular, and adequate nighttime residence; or

(II) An individual or family that has a primary nighttime residence that is:

- 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);
- an institution that provides a temporary residence for individuals intended to be institutionalized; or
- 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.

b. Imminent risk of becoming homeless

Individuals who are at imminent risk of becoming homeless meet one or more of the following criteria:

- Are in a doubled-up living arrangement where the individual's name is not on the lease
- Live in a condemned building without a place to move
- Are in arrears in rent/utility payments
- Have received an eviction notice without a place to move
- Are living in temporary or transitional housing that carries time limits
- Are being discharged from a health care or criminal justice institution without a place to live

c. Serious mental illness

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.”

d. Co-occurrence of serious mental illness/substance abuse disorders

An individual with a major mental illness, as defined earlier, and who meets DSM-IV-TR criteria for alcoholism, drug addiction, or substance abuse is considered dual diagnosed (MI/SA). It is acknowledged that an individual with primary diagnosis of either a mental illness or a substance abuse problem requires specific treatment for each.

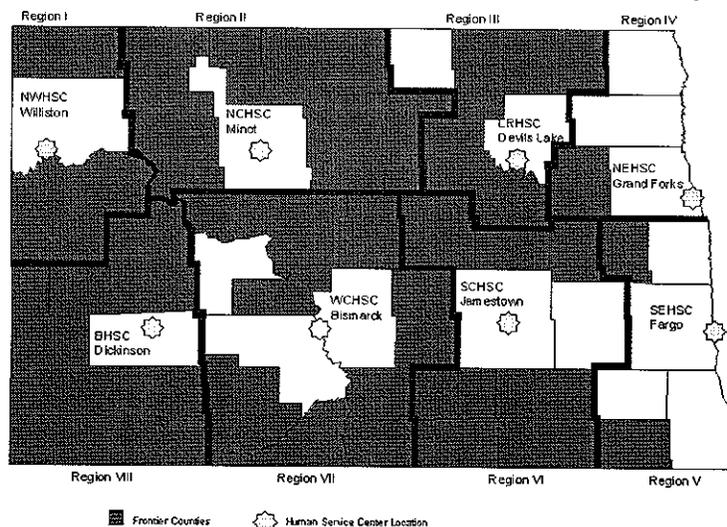
2. NUMBER OF HOMELESS INDIVIDUALS

The most recent formal needs assessment identified a total of 4,389 homeless adults statewide. This is about 1% of the state's overall adult population. The most recent Point-In-Time Survey found 1,126 homeless persons in North Dakota including 787 adults, 300 children and 39 persons for whom age was unknown. Of these, 277 people or 24% were long-term homeless. Forty-five percent of individuals noted a history of substance abuse while 35% indicated mental health issues. The following chart provides a regional breakdown of Point-In-Time Survey results.

Table 6. Homelessness in North Dakota by Region (January 27, 2010)

	Adults	Children	Age Missing	Total Individuals	Chronically Homeless	Long-Term Homeless	Mental Illness	Substance Abuse
Region I	6	5	8	19	0	3	9	11
Region II	35	22	2	59	0	6	24	11
Region III	101	33	4	138	0	16	19	44
Region IV	73	34	4	111	6	18	40	37
Region V	280	60	7	347	49	111	66	167
Region VI	39	1	7	47	0	18	41	22
Region VII	230	142	6	378	8	100	121	208
Region VIII	23	3	1	27	1	5	9	12
Total - ND	787	300	39	1126	64	277	329	512

Figure 1. Map of North Dakota with Human Service Center Locations



3. PATH FUND ALLOCATIONS

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 \$18,438 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.

- a. The needs assessment and Point-In-Time information indicates an adequate number of homeless persons residing in each region that could benefit by targeted case management services as provided under this grant. Although Region V (Fargo) and Region VII (Bismarck) have the largest concentration of the targeted population residing within their borders, these regions have more services available for this population and more organizations/agencies available to deliver needed services. In contrast, Region VIII (Dickinson) is one of the more sparsely populated regions. The PATH Coordinator is the primary provider of services to those who are homeless in the region. By providing funding only to the urban areas, vital programming would be eliminated to the rural areas that also have a dire need for services.

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. For these reasons, at least a half-time Coordinator, funded with PATH dollars, will be assigned to each of the eight regions.

- b. As mentioned before, all regions receive PATH funds. This allows consumers in every region to access PATH services if needed. No preference is given in the awarding of PATH funds to entities with a demonstrated effectiveness in service to homeless veterans. All PATH Coordinators work with Veterans Administration personnel, as needed, to coordinate services for homeless veterans.

4. COORDINATION WITH STATE PLANS

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 Central Office. The staff members, being aware of the requirements of both programs, assure that PATH activities compliment those that are designed to provide outreach and services for homeless, seriously mentally ill individuals as outlined in the State Plan.

The delivery of services for PATH activities and the implementation of activities to enhance State Plan requirements occur at the regional human service centers. The human service centers are umbrella agencies delivering a wide variety of services; i.e., mental health and addiction services, vocational rehabilitation, and services for special populations such as the developmentally disabled and the aged. In North Dakota, the regional human service centers are the logical place for the delivery of programs/services to assist the target population.

5. CONSISTENCY WITH STATE PLAN TO END HOMELESSNESS

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 (entitlement programs). As the PATH Coordinators are mental illness case managers, one of their primary duties is to assist long-term homeless people to gain and maintain eligibility for mainstream supports (e.g. SSI, SSDI, TANF, SNAP, Medicaid, Medicare, Rep. payee, etc.). Another goal of the State Plan is, when a long term homeless individual accesses housing, to ensure that they are also connected to supportive services. This is accomplished by the dissemination of successful evidence-based practices throughout NDDHS system ex. IDDT, case aids, community supports), by leveraging case management resources from various agencies and organizations, and by implementing case management and other service practices appropriate to region and population based on best or emerging practices. The North Dakota Department of Human Services and the PATH Coordinators are highly involved in these activities. 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 focused on the goal of ending chronic homelessness.

6. BLOCK GRANT FUND DESIGNATION

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.

7. STATE PROGRAMMATIC AND FINANCIAL OVERSIGHT

The PATH program oversight consists of two components: financial and programmatic. The Department of Human Services' Division of Fiscal Administration supervises the financial component. It is that entity's responsibility 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 supervision and oversight of the PATH program and its activities by:

- Meet with the PATH Coordinators and the Extended Care Directors to share information and to provide assistance as needed and requested. The Extended Care Directors are the direct supervisors of the PATH Coordinators.
- Conducting biennial and as needed on-site visits to observe PATH program activities in the regions. This will include Coordinator shadowing, chart review, and staff interviews.
- Encouraging Coordinators' involvement in regional and state coalitions for homeless people.
- Perform biennial human service center licensure visits to review all clinical programs including the PATH program.

Table 7. Implementation Plan - August 1, 2011 to July 31, 2012

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) 8/1/11 to 7/31/12	1) a.DHS Chief Fiscal Officer b. PATH State Contact
2) Retain PATH Coordinators in all 8 regional HSCs	2) None	2) None	2) 8/1/11 to 7/31/12	2) Extended care coordinators in regional HSCs
3) Provide training to PATH Coordinators & other staff who work with this population	3) None	3) None	3) At quarterly meetings of the ND Coalition for Homeless People	3) PATH State Contact with assistance from expert consultants
4) Provide targeted case management services to homeless population	4) Getting homeless persons interested in MH/SA programs/ treatments	4) Meet basic needs of the homeless; e.g., food, housing, etc.	4) Ongoing	4) PATH Coordinators
5) Provide needed services available at regional HSCs, county social service board, Job Service of ND, addiction services, etc.	5) Coordinating efforts	5) Utilizing the ND & regional coalitions for the homeless	5) Ongoing	5) PATH Coordinators, regional HSC staff, and staff of other agencies that work with the homeless
6) Complete an evaluation of success of meeting the needs of the homeless (Reports & on-site visits)	6) None	6) None	6) Quarterly & annually	6) PATH Coordinators & PATH State Contact

8. TRAINING OF PATH PROVIDERS

State General Funds are used to provide training to the PATH Coordinators. Because the PATH Coordinators are regular Department of Human Services' employees, they have the same opportunity as other human service center employees to participate in inservice training, workshops, and other conferences. PATH Coordinators are encouraged to attend the annual Clinical Forum on Mental Health Conference. This multi-day conference focuses on evidence-based practice and mental health recovery. Registration and lodging stipends are provided to the regional human service centers to encourage attendance by their clinicians, including the PATH Coordinators. All PATH Coordinators will be required to attend annual cultural competency training.

9. HMIS TRAINING ACTIVITIES AND SUPPORT

The PATH Coordinators will participate in the regional and web-based training on HMIS that CMHS and their technical assistance partners will be hosting. Following this training, all PATH Coordinators will enter information into HMIS as required by the PATH Program.

10. SOURCES OF MATCHING NON-FEDERAL CONTRIBUTIONS

The sources of the in-kind, non-Federal contributions will include the salaries and benefits of staff of the eight regional human service centers who will provide mental health and substance abuse treatment services to the target population and other center staff who will provide administrative support services to the eight PATH Coordinators housed in the centers (see Table 1, Page 10). The eight regional human service centers will also provide the PATH Coordinators with office space, telephone services, and office equipment as an in-kind contribution (see Table 2, Page 10).

Central Office staff of the Division of Mental Health and Substance Abuse Services will provide administrative and supportive services to the PATH Project without compensation from PATH funds (see Table 3, Page 11). 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. 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 5 (Page 11) 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.

11. OPPORTUNITIES FOR PUBLIC COMMENT

The Division of Mental Health & Substance Abuse Services 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 Planning Council, a 27-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 public notice is submitted to the major newspapers in North Dakota announcing the availability of the draft PATH application for review and comment.

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 Councils 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.

C. LOCAL PROVIDER INFORMATION

Local providers for PATH supported activities are the eight regional human service centers, which provide supervision and administrative action for the PATH Coordinators. The services offered by each PATH Coordinator are the same. The overall program was designed so similar services are offered throughout the state, ensuring that consumers had access similar to PATH services regardless of which region they resided in.

Some areas in North Dakota lack private providers that can provide PATH services. Placing the PATH program within the regional human service centers has been the only viable alternative. The regional human service centers are major umbrella agencies providing an array of human services including community-based services for persons with serious mental illnesses, alcohol and drug programs, vocational rehabilitation services, specialized services to children, families, and the elderly as well as to persons with developmental disabilities. The centers could be described as "one stop shopping," offering a variety of human services.

Each PATH Coordinator carries a caseload of between 5 and 35 persons who are homeless and have a mental illness and provides them with intensive and aggressive case management services. PATH Coordinators are also responsible for serving other homeless persons within their regional service area with outreach services. These additional individuals may require only limited services as they are referred to other agencies.

Individuals with mental illness are referred to staff of the human service center for treatment and training based on their individual needs.

Regional human service center staff have compiled and updated lists of affordable housing available in their region. The lists contain the names of regional landlords who are willing to rent to individuals with serious mental illnesses. These landlords have been provided education/awareness on various mental illnesses and have been assured that mental health professionals will be available to work with their tenants who have a serious mental illness. The housing lists also contain information regarding available housing coordinated through county housing authorities. PATH Coordinators provide supportive services to persons who are homeless in the consumer's place of residence.

Resources and programs available to PATH eligible clients and not funded by PATH monies include mental health services that are available at the eight regional human service centers. The mental health services consist of psychological evaluations and assessments; individual or group therapy; crisis intervention; daily living skills training delivered where the client resides; vocational counseling or work skills development; and medication monitoring. Community residential services are also provided through the human service centers and include crisis residential housing, transitional housing, or supported apartment living. Social and recreational skills development is provided through the human service center funded psychological rehabilitation centers. Psychiatric hospitalization is provided in psychiatric units of regional hospitals. Long-term psychiatric hospitalization and treatment as well as inpatient treatment for chemical dependency is provided at the North Dakota State Hospital. Outpatient substance abuse treatment services are available at the regional human service centers.

Member organizations of the regional and state coalitions for homeless persons provide a

variety of supportive services for the homeless. Emergency shelters and accompanying services are operated by church affiliated non-profit groups or other charitable organizations. Currently there are over 500 transitional and emergency beds available statewide. Each region has locally sponsored food banks, thrift shops, and emergency fund services that can be accessed to meet immediate needs for shelter, food, clothing, or money.

County social service boards provide access to services related to economic assistance, medical assistance, and other entitlements; i.e., food stamps, fuel assistance, general welfare, etc. Public health units are accessed to provide health assessments and referrals to private clinics. The public health units provide services pro bono.

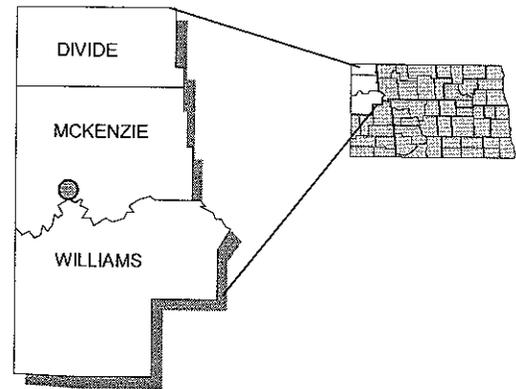
The regional coalitions for homeless persons have expedited the coordination of services between agencies and improved services for individuals who are homeless. The major gap that exists among local agencies is financial in nature. The limited fiscal resources available to accommodate the requests for transportation or travel costs for transient families and adults continue to be an issue. In the past, gaps in services that have been identified included: case management, referral for treatment, transportation, and interagency coordination.

In order to address the gaps such as transportation in North Dakota, PATH Coordinators have devised various means of accommodating individuals who are homeless. For instance, PATH Coordinators themselves have provided transportation when there has been no other source. The use of the Community Supportive Care Program is used when available. Transportation, as well as the other gaps mentioned above, continues to be a major problem and, at times, a barrier to delivery of services. Transportation is one of the major goals of the ongoing Continuum of Care planning process.

LOCAL PROVIDER INFORMATION

REGION I

- 1. PATH PROVIDER:** Northwest Human Service Center (NWHSC) – Williston: NWHSC is a regional human service center and a part of the North Dakota Department of Human Services: a governmental agency. NWHSC serves the major city, Williston, and a three-county area including the Trenton Indian Service Area and residents of northeast Montana. The population base is approximately 30,829 persons, which does not include northeast Montana.



Consumers are served in the community through a linked spectrum of rehabilitation services. These include: Crisis stabilization and resolution, case management, psychiatric/medical management including medication management and other health services, social services, residential services and supports, vocational and educational services and supported employment, social and leisure activities, counseling, psychological services, and addiction treatment. The PATH program will provide services to individuals aged 18+ who are literally homeless or at risk of homelessness.

- 2. BUDGET:**

The Region I PATH Program will receive \$18,438 in Federal PATH funds.

- 3. DESCRIBE THE ORGANIZATION'S PLAN TO PROVIDE COORDINATED AND COMPREHENSIVE SERVICES TO ELIGIBLE PATH CLIENTS**

- a. Projected number of adult clients to be contacted using PATH funds:**

In 2010, 36 adult clients were served and it is projected that the number of clients served in 2011 will meet or exceed this number.

- b. Projected number of adult clients to be enrolled using PATH funds:**

- c. Percentage of adult clients served with PATH funds projected to be "literally" homeless:**

In 2010, 18% of PATH clients served were literally homeless and it is estimated that this proportion will hold steady in 2011.

- d. Activities to maximize the use of PATH funds to serve adults who are literally homeless as a priority population.**

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. Funding provided is used to fund the sole PATH Coordinator, who provides these services to the target population.

- e. Strategies that will be used to target PATH funds for street outreach and case management as priority services:**

In an effort to use PATH funds for outreach and case management, information about PATH services will be placed in strategic locations around Williston including the Raymond Recreation Center, the train depot, airport, St. Joseph's Catholic Church, the Salvation Army, Community Action, and local laundromats.

- f. Activities that will be implemented to facilitate migration of PATH data into HMIS within 3-5 years:**

The Region I PATH coordinator will attend regional and web trainings regarding the transition of PATH data into HMIS and will work with the State PATH Contact to ensure that all PATH data is transitioned into the HMIS system.

- g. Indicate whether the provider provides, pays for, or otherwise supports evidence-based practices and other training for local PATH-funded staff:**

Northwest Human Service Center places a strong emphasis on using person centered treatment planning, which is evidence based and PATH staff are trained in this practice.

- h. Indicate whether the provider provides, pays for, or otherwise supports HMIS training and activities to migrate PATH data into HMIS:**

The provider supports the use of HMIS and will attend any trainings necessary to develop the capacity to use HMIS for Region I PATH data.

- i. Community organizations that provide key services to PATH eligible clients and describe coordination activities and policies with those organizations:**

The PATH Case Manager works closely with local service providers to ensure service coordination and availability for PATH eligible clients. Networking and service coordination also takes place at the monthly local coalition meetings.

The Region I Community Action Agency (CAA) plays a crucial role in preventing homelessness by providing emergency financial assistance. Prevention services offered by CAA Region I are as follows:

- Energy Share of North Dakota is a cooperative effort of North Dakota CAAS, utility companies, and private donors to assist eligible households with preventing electrical shutoffs. Assistance is provided in Emergency situations when all other resources have been exhausted.
- Emergency Services consist of funds provided to income eligible individuals and families needing assistance with utilities and security deposits.
- CAA provides low-income housing to individuals and families and is involved in various community housing project developments.
- Region I Community Action Agencies provide program and services that empower individuals and families to become self-sufficient. The Self-Reliance Program, a comprehensive one-on-one mentorship program aimed at assisting persons who are homeless with the transition to permanent employment and living arrangements. Clients and Certified Family Development Specialists collaborate to:
 - Identify and overcome barriers
 - Meet basic needs
 - Improve decision-making
 - Identify skills and values
 - Explore career choices
 - Gain employment seeking skills
 - Establish short and long-term goals
 - Budgeting analysis and assistance
- CAA Region I also offers payee services to handle finances of participating recipients of Social Security and Supplemental Security Income. Clients are assisted in making intelligent spending choices on limited incomes.
- The CAA also administers the Shelter Plus Care program, which provides vouchers to pay for permanent housing for people who are homeless, disabled, and have supportive services in place.

Other agencies that provide emergency and other important service are as follows:

- Tri State HELP HOPWA program also offers short-term rent, mortgage, and utility payments to people living with HIV/AIDS to prevent homelessness among this population throughout the state.
- Williams County Social Services provide prevention services such as emergency financial assistance, counseling, information and referral. Williams County Office of Social Services also administers many programs that help eligible people with healthcare costs. They can provide cash supplements for basic healthcare to income

eligible seniors and disabled adults. They can also help the elderly and disabled pay for in-home services so they can continue to live independently in the community.

- The Salvation Army meets needs on an emergency basis. They provide a range of prevention services to people who are homeless or at risk of becoming homeless. Services include rent assistance, food pantries, furniture and clothing referrals, overnight stays, first time rents and deposits, assistance with medications, and transportation. These services alleviate a number of possible evictions, allowing people who are at-risk of homelessness to stay in their homes.
- The Northwest Human Service Center provides case management to help people who are seriously mentally ill and/or chemically dependent to live in their own apartments. The PATH Coordinator is part of the Extend Care Team, which provides these services in Region 1. Supportive living services are also provided.
- The Rent Hotline is a statewide informational service for tenants or landlords in need of information on their rights and responsibilities as tenants or landlords. Basic questions on landlord and tenant rights are answered through the telephone hotline. Callers are recommended to contact an attorney if issues would require legal action.
- Region I has a twenty-four hour Crisis Help Line that provides information, referrals, and support and is available to anyone in need.
- The Native American Resource Center provides counseling and referrals to Native American people living in the Trenton Indian Service Area.
- North Dakota Association of the Disabled provides services and support to persons with Disabilities in Region I. Services include medication monitoring, independent living counselors, cost of medication and handicap accessibility items, as well as general support, advocacy, information, referrals. NDAD also provides three units of permanent supportive housing for people who are homeless with chronic substance abuse disorders.
- The Region I PATH Coordinator, the Human Service Center, and the Region I Community Action Agency provide case management services. Every person identified by the service delivery system as homeless is assigned a case manager. Every shelter, transitional housing, and permanent supportive housing program provides case management services either on-site or through a partnership with another local service provider.
- The North Dakota Mental Health Association provides a statewide support system for the mentally ill homeless. It provides a toll-free HELP LINE, as well as educational programs and advocacy. Tri-County mental Health Association is active in the above services in Region I.
- Job Service in Williston has a one stop center. The programs administered include Employment Service, Job Insurance, Welfare-to-Work, veteran's services, Senior Community Services Employment Program (SCSEP), and Workforce Investment Act Title I. Services offered in each region include basic skills, remedial education, job search self help, job interviewing, job seeker workshops, job keeping skills, vocational training, testing, job placement, filing for unemployment insurance benefits and

referrals to community resources. Job Service also assists with vehicle repairs so people can get to work and continue paying their bills.

- Western Sunrise Inc., a consumer run non-profit agency has transitional employment, recreational, and peer support program for persons with serious mental illness.
- The Mercy Rider Program provides cab tickets for homeless and low-income individuals.
- The Northwest Dakota Public Transit bus provides transportation from 7am to 6pm.
- Several agencies in Region I provide healthcare services to people in need. The Good Samaritan Center in Crosby, the Good Shepherd Home in Watford City, and Bethel Lutheran Home in Williston are twenty-four nursing facilities that provide skilled nursing care, activities, and transportation for anyone in need. Medcenter One operates McKenzie County Clinic for residents of Williams and McKenzie counties. Tioga Medical Center Clinic serves Williams and Burke Counties with satellite clinics in Ray, Powers Lake, and Wildrose. The Crosby clinic serves Divide and Burke Counties with satellite offices in Columbus, Lignite, and Bowbells. Craven-Hagen Clinic and Trinity Western Dakota Clinic are located in Williston and serve individuals from Williams, McKenzie and Divide County. Trenton Community Clinic works to meet the needs of Native American people living in the Trenton Indian Service Area. Upper Missouri District Health Unit serves Williams, McKenzie, Mountrail and Divide Counties.
- The Northwest Human Service Center provides meal coupons to people who are in the shelter or who are chronically homeless. These coupons entitle them to a meal at a local restaurant.
- The family Crisis Shelter provides emergency shelter and supportive services to victims of domestic violence. The Crisis Shelter also has a 24-hour hotline to assist victims of Domestic Violence with locating needed services.
- St. Joseph's Church has a food pantry and also provides money for deposits, rent, and transportation.

j. Gaps in current service systems:

- Healthcare for homeless individuals and medication for those in need.
- Emergency and Transitional Housing for Families.
- Severe lack of affordable housing. The abundance of work has led to an influx of people into the Williston area and because many of these people cannot find permanent housing, they are living in vehicles, campers or tents. Most apartment complexes have waiting lists of over 200 people or have stopped accepting applications all together.

k. Services available for clients who have both a serious mental illness and substance use disorder:

There are various services available for clients with a serious mental illness and substance abuse disorder including the Hearth House, run by the Northwest Human Service Center, out-patient services at the Mercy mental health Clinic, Adapt Inc., and Basin Alcohol and Drug Service.

l. Strategies for making suitable housing available to PATH clients:

While there is low income housing provided in Williston, all of the units are occupied and will be for an undetermined lengthy period of time. The PATH case manager can currently offer clients assistance by helping them in finding suitable housing in neighboring cities.

4. DESCRIBE THE PARTICIPATION OF PATH LOCAL PROVIDERS IN THE HUD CONTINUUM OF CARE PROGRAM AND ANY OTHER LOCAL PLANNING, COORDINATING OR ASSESSMENT ACTIVITIES

The PATH Coordinator is a part of the North Dakota statewide Continuum of Care (CoC) Process as well as the leader in the regional process. The PATH Coordinator is the regional contact for all information needed for the statewide CoC plan. Involved in following CoC subcommittees; Gaps and Needs Analysis, Funding and Project Prioritization. The PATH Case Manager is also a member of the Williston Basin Resource Coalition (WBRC), a group who addresses the needs of low income and homeless residents. The homeless coalition (WBRC) does meet monthly. Providers give updates on services and assist in developing and expanding the CoC process, action plan and vision. Involvement in the CoC process has brought much needed housing and support services to Region I. The coordination has also assisted us in educating the public regarding homeless issues. There is a high level of coordination needed to have a successful continuum in our communities; this takes a great deal of time and organization by all parties involved.

5. DESCRIBE:

(A) THE DEMOGRAPHICS OF THE CLIENT POPULATION;

Age: 18-34 (16), 35-49 (14), 50-64 (3), 65-74 (1), unknown (1)

Gender: male (19), female (12)

Race: Hispanic or Latino (1), African American (1), American Indian or Alaska Native (3), White (26)

Mental Illness: Affective Disorders (19), Personality Disorder (2), other serious mental illness (1), unknown or undiagnosed mental illness (9)

Co-occurring substance use: Co-occurring (6), non-co-occurring (5)

Veteran Status: Veteran (4), Non-veteran (25), Unknown (1)

(B) THE DEMOGRAPHICS OF THE STAFF SERVING THE CLIENTS;

The sole PATH Coordinator for Region I is female and Caucasian.

(C) HOW STAFF PROVIDING SERVICES TO THE TARGET POPULATION WILL BE SENSITIVE TO AGE; GENDER; AND RACIAL/ETHNIC DIFFERENCES OF CLIENTS;

All efforts are made to ensure that no PATH client is made to feel uncomfortable based on gender, race/ethnicity, sexual orientation, religion, disability or other personal characteristics.

(D) THE EXTENT TO WHICH STAFF RECEIVE PERIODIC TRAINING IN CULTURAL COMPETENCE.

Because the PATH Coordinators are regular Department of Human Services' employees, they have the same opportunity as other human service center employees to participate in inservice training, workshops, and other conferences. PATH Coordinators are encouraged to attend the annual Clinical Forum on Mental Health Conference. This multi-day conference focuses on evidence-based practice and mental health recovery. Cultural competency training is scheduled for this year's event. The Department is implementing a cultural competency training program. All PATH Coordinators will be required to attend annual cultural competency training.

6. DESCRIBE HOW PERSONS WHO ARE HOMELESS AND HAVE SERIOUS MENTAL ILLNESSES AND ANY FAMILY MEMBERS WILL BE INVOLVED AT THE ORGANIZATIONAL LEVEL IN THE PLANNING, IMPLEMENTATION, AND EVALUATION OF PATH-FUNDED SERVICES.

Consumers attend the annual stakeholders meeting that is held at the Northwest Human Service Center in conjunction with the Department of Human Services and hold board member positions on the consumer-run, non-profit organization, Western Sunrise Inc.

7. PROVIDE A BUDGET NARRATIVE THAT PROVIDES DETAILS REGARDING PATH FUNDS.

Personnel: PATH funds are used for salary for one half-time PATH Coordinator. This position, a mental illness case manager, provides PATH services throughout Region I. The Federal portion of the salary for the Coordinator is \$11,250 per year.

Fringe Benefits: Computed at 35 percent of the salary, fringe benefits include the cost of health insurance, worker's compensation, Social Security/Medicare, retirement, and unemployment insurance. The Federal portion of the benefits for the Coordinator is \$3,938 per year. As the PATH Coordinator is an employee of the North Dakota Department of Human Services, the 35 percent fringe benefit costs are the same as other employees of the Department.

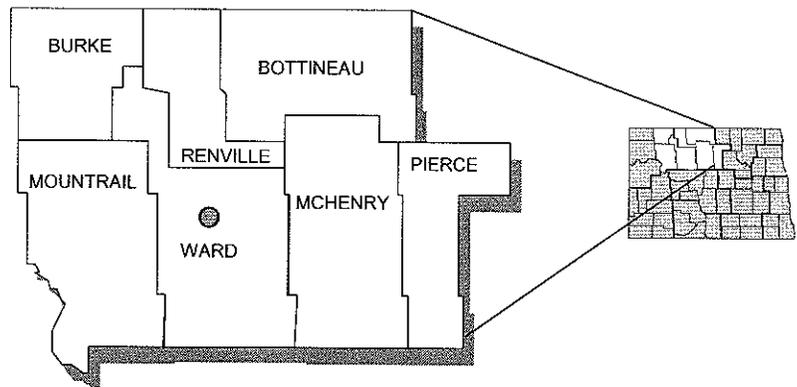
Travel: Travel costs will include the expenses for the PATH Coordinator to attend quarterly meetings scheduled for all Coordinators and to attend meetings of the North Dakota Coalition for Homeless People. Costs include travel at \$0.27 per mile, per diem of \$25 per day, and lodging at \$55 per day plus tax. This category will also cover the travel costs associated with providing services to homeless persons within the region. The estimated travel costs for each FTE Coordinator position is \$2,500 for the year. At this time, the \$2,500 travel allowance is sufficient to cover costs associated with outreach travel by the PATH Coordinators. If the PATH Coordinators need additional funding for travel, North Dakota will provide General Fund dollars to cover these costs.

Other: The PATH Coordinator has access to \$2,000 to cover the costs associated with providing one-time rent assistance, one-time security deposits, or representative payee services to maintain persons who are homeless and mentally ill in the community.

PERSONNEL	NUMBER OF FTES	PATH-FUNDED	SUBTOTAL	TOTAL
PATH Coordinator Salary	0.5	\$11,250	\$11,250	
Fringe Benefits @ 35%		\$3,938	\$3,938	
Total Personnel				\$15,188
TRAVEL				
Travel for PATH Coordinator within the region including expenses to attend any required meetings and training sessions		\$1,250	\$1,250	
Total Travel				\$1,250
OTHER				
One-time financial assistance for the following: rental payments, security deposits, representative payee services, or medications		\$2,000	\$2,000	
Total Other				\$2,000
TOTAL FEDERAL				\$18,438

REGION II

1. North Central Human Service Center (NCHSC) – Minot: NCHSC is a regional human service center and a part of the North Dakota Department of Human Services: a governmental agency. NCHSC serves the major city of Minot, the Minot Air Force Base, and the seven county area including the Fort Berthold Reservation. It has a population base of approximately 89,967



persons. Consumers are served in the community through a linked spectrum of rehabilitation services. These include: Crisis stabilization and resolution, case management, psychiatric/medical management including medication management and other health services, social services, residential services and supports, vocational and educational services and supported employment, social and leisure activities, counseling, psychological services, and addiction treatment. The PATH program will provide services to individuals aged 18+ who are literally homeless or at risk of homelessness.

2. BUDGET:

The Region II PATH Program will receive \$36,875 in Federal PATH funds.

3. DESCRIBE THE ORGANIZATION'S PLAN TO PROVIDE COORDINATED AND COMPREHENSIVE SERVICES TO ELIGIBLE PATH CLIENTS

a. Projected number of adult clients to be contacted using PATH funds:

We project our adult clients who will receive PATH-funded services will reach between 125-150 individuals. The Minot Area Homeless Coalition has become the focal point in the region and accordingly receives the bulk of referrals. Individuals with mental health or addiction issues are referred to this Center.

b. Projected number of adult clients to be enrolled using PATH funds:

We project that 15 to 25 individuals will be enrolled for services utilizing PATH funds.

c. Percentage of adult clients served with PATH funds projected to be "literally" homeless:

Approximately 15% of adult clients served by PATH funds will be "literally homeless in the coming year. Migration of individuals from other states increase during the warm weather as they are seeking employment but fail to plan for housing options.

d. Activities to maximize the use of PATH funds to serve adults who are literally homeless as a priority population.

Extensive coordination is utilized throughout community and with the Minot Area Homeless Coalition, Community Actions, Salvation Army, and the YWCA to meet the needs of adults who are literally homeless. Upon initial contact with an individual, an assessment is made to basic needs of the individual, i.e.: food, shelter, hygiene, and medical. Transportation is provided to seek required services. If necessary, bus or train tickets are provided by community organizations to relocate individuals to adequate shelters within the state.

e. Strategies that will be used to target PATH funds for street outreach and case management as priority services:

We collaborate with the Minot Area Homeless Coalition who conducts an outreach sweep three times a week to insure homeless needs are met. This effort results in providing shelter, food, clothing, and any other basic needs which are required. Dignity and respect is afforded to each individual served.

f. Activities that will be implemented to facilitate migration of PATH data into HMIS within 3-5 years:

We are in an ongoing dialog with the ND Coalition for Homeless People (NDCHP) who is serving as a lead organization to implement HMIS within the next three to five years. Updates are reviewed quarterly at the NDCHP meetings and action is taken to enhance HMIS where necessary. Training is being received periodically online through CMHS.

g. Indicate whether the provider provides, pays for, or otherwise supports evidence-based practices and other training for local PATH-funded staff:

We are able to attend ongoing training throughout the year utilizing quarterly meetings at the ND Coalition of Homeless People. This action represents a cross section of individuals and agencies which have similar missions to reduce or eliminate homeless throughout the state. In addition, an annual three day Clinical Forum Conference is conducted to support and encourage a statewide system of quality mental health services. This Forum seeks to educate professionals from multiple disciplines in evidence-based practices that promote the well-being of children, adults and the elderly.

h. Indicate whether the provider provides, pays for, or otherwise supports HMIS training and activities to migrate PATH data into HMIS:

ND PATH Program is proactive in monitoring PATH coordinators to receive online training from CMHS and works toward a seamless transition for implementation of

HMIS throughout the state. Several elements within the state have implemented HMIS so far without any major problems.

i. **Community organizations that provide key services to PATH eligible clients and describe coordination activities and policies with those organizations:**

NORTH CENTRAL HUMAN SERVICE CENTER: Has a regional PATH Coordinator who specializes in dealing with the homeless population. The Service Center 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 are mentally ill or 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.

SOUP KITCHENS, FOOD AND CLOTHING PANTRIES: Serves 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 in integrating individuals to a one stop processing for services.

CITY AND COUNTY HEALTH 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.

COMMUNITY ACTION OPPORTUNITIES: 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.

DEPARTMENT OF VETERANS AFFAIRS, HEALTH CARE FOR HOMELESS VETERANS OUTREACH CASE MANAGER: 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.

INDEPENDENCE, INC.: Has been a part of the community since 1996. They have been active members of the Minot Area Homeless Coalition for the past six years. 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.

JOB SERVICES OF NORTH DAKOTA: 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. The 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.

MINOT AREA HOMELESS COALITION (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 the 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.

MINOT HOUSING AUTHORITY (MHA): Has been a part of the community for 36 years. The mission of MHA is to provide quality, affordable housing opportunities and promote maximum independence in the community's 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.

MINOT POLICE DEPARTMENT: Is often the first contact for people who are homeless. They have been a part of the Homeless Coalition since its inception.

MINOT PUBLIC SCHOOLS, ADULT LEARNING CENTER (ALC): 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+. ALC has been a member of the Minot Area Homeless Coalition since 1989. Homeless families that have not sought help are sometimes identified through the Homeless Services Coordinator of the ALC, through her 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.

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 nine 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 Ward County 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. Ward County staff has been members of the Minot Homeless Coalition since 1989. 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.

FLORENCE ANDERSON CENTER OF HOPE (YWCA) was established in September 2007 to accommodate Women and Children needing shelter within the Region 2 area. Their primary mission is dedicated to the elimination of racism and empowerment of women thru 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.

j. Gaps in current service systems:

In August 2007 a men's transitional center closed due to lack of funding and there are no immediate plans to reopen a facility. Housing is critical due to an expansion of oil exploration and employment opportunities in western North Dakota. Several apartment

complexes are in the early stage of development but for the near future it will only make a small mark on the situation. Men are placed in a motel for one or two days when they are available. Otherwise, transportation is provided to shelters in Bismarck, Fargo, or Grand Forks.

k. Services available for clients who have both a serious mental illness and substance use disorder”

A comprehensive program is established at North Central Human Service Center 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 with day treatment for adults and a specialized residential program for addicted women with children. The Extended Care Unit provides services to individual 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, Transitional Living/Supportive Living Program. Regional Intervention Services provides emergency screening, evaluation and consultation services for adults who present themselves in an emotional or addictive crisis state and may be at risk for hospitalization at the State Hospital.

l. Strategies for making suitable housing available to PATH clients:

In order to be effective in the community it is imperative that the PATH coordinator remains closely connected to the Minot Area Homeless Coalition in his daily routine. Successful engagement is the key in finding appropriate housing options for PATH clients. Although successful, engagement takes time and sometimes we need to move quickly to a different housing arrangement. Building positive relationships with local landlords and low-income property managers play a very important role in this process. We educate the client on what kind of housing is available to them and they educate us to what they perceive their needs to be. If the lines of communication are not always on target it is difficult to meet a client's housing needs.

4. DESCRIBE THE PARTICIPATION OF PATH LOCAL PROVIDERS IN THE HUD CONTINUUM OF CARE PROGRAM AND ANY OTHER LOCAL PLANNING, COORDINATING OR ASSESSMENT ACTIVITIES

The PATH Coordinator is a part of the ND Statewide CoC Process as well as a member in the regional process. I am 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.

5. DESCRIBE:

(A) THE DEMOGRAPHICS OF THE CLIENT POPULATION;

Age: 18-34 (30), 35-49 (18), 50-64 (3), 65-74 (7), unknown (1)

Gender: male (19), female (37)

Race: Hispanic or Latino (1), African American (2), American Indian or Alaska Native (18), White (35)

Mental Illness: Schizophrenia and Related Disorders (9), Other Psychotic Disorders (6), Affective Disorders (32), Personality Disorder (3), other serious mental illness (6), unknown or undiagnosed mental illness (0)

Co-occurring substance use: Co-occurring (35), non-co-occurring (31)

Veteran Status: Veteran (7), Non-veteran (49), Unknown (1)

(B) THE DEMOGRAPHICS OF THE STAFF SERVING THE CLIENTS;

The sole PATH Coordinator is a Caucasian male.

(C) HOW STAFF PROVIDING SERVICES TO THE TARGET POPULATION WILL BE SENSITIVE TO AGE; GENDER; AND RACIAL/ETHNIC DIFFERENCES OF CLIENTS;

All efforts are made to ensure that no PATH client is made to feel uncomfortable 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.

(D) THE EXTENT TO WHICH STAFF RECEIVE PERIODIC TRAINING IN CULTURAL COMPETENCE.

Because the PATH Coordinators are regular Department of Human Services' employees, they have the same opportunity as other human service center employees to participate in inservice training, workshops, and other conferences. PATH Coordinators are encouraged to attend the annual Clinical Forum on Mental Health Conference. This multi-day conference focuses on evidence-based practice and mental health recovery. Cultural competency training is scheduled for this year's event. The Department is implementing a cultural competency training program. All PATH Coordinators will be required to attend annual cultural competency training.

6. DESCRIBE HOW PERSONS WHO ARE HOMELESS AND HAVE SERIOUS MENTAL ILLNESSES AND ANY FAMILY MEMBERS WILL BE INVOLVED AT THE ORGANIZATIONAL LEVEL IN THE PLANNING, IMPLEMENTATION, AND EVALUATION OF PATH-FUNDED SERVICES.

Homeless consumers and their families are encouraged to become involved in the Minot Area Homeless Coalition and the CoC process. Several consumers have become members and periodically participate in coalition and political meetings. PATH services are evaluated by using a consumer satisfaction survey through the statewide MHSIP program. The PATH grant is distributed to homeless providers for display. Agencies are encouraged to discuss and display the grant with their consumers and board of directors.

7. PROVIDE A BUDGET NARRATIVE THAT PROVIDES DETAILS REGARDING PATH FUNDS.

Personnel: PATH funds are used for salary for the PATH Coordinator. This position, a mental illness case manager, provides PATH services throughout Region II. The Federal portion of the salary for the Coordinator is \$22,500 per year.

Fringe Benefits: Computed at 35 percent of the salary, fringe benefits include the cost of health insurance, worker's compensation, Social Security/Medicare, retirement, and unemployment insurance. The Federal portion of the benefits for the Coordinator is \$7,875 per year. As the PATH Coordinator is an employee of the North Dakota Department of Human Services, the 35 percent fringe benefit costs are the same as other employees of the Department.

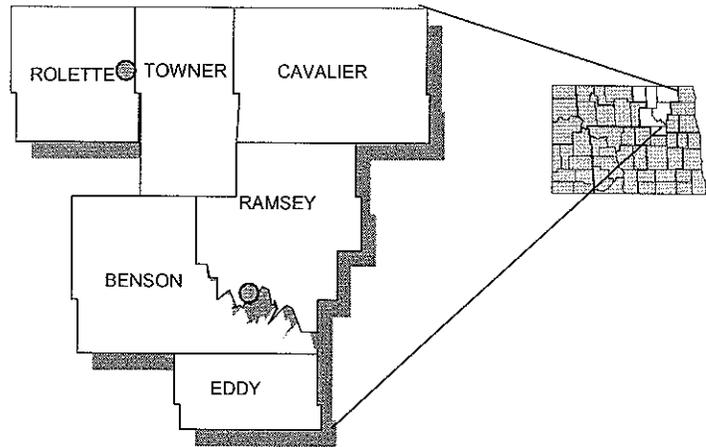
Travel: Travel costs will include the expenses for the PATH Coordinator to attend quarterly meetings scheduled for all Coordinators and to attend meetings of the North Dakota Coalition for Homeless People. Costs include travel at \$0.27 per mile, per diem of \$25 per day, and lodging at \$55 per day plus tax. This category will also cover the travel costs associated with providing services to homeless persons within the region. The estimated travel costs for each FTE Coordinator position is \$2,500 for the year. At this time, the \$2,500 travel allowance is sufficient to cover costs associated with outreach travel by the PATH Coordinators. If the PATH Coordinators need additional funding for travel, North Dakota will provide General Fund dollars to cover these costs.

Other: The PATH Coordinator has access to \$4,000 to cover the costs associated with providing one-time rent assistance, one-time security deposits, or representative payee services to maintain persons who are homeless and mentally ill in the community.

PERSONNEL	NUMBER OF FTES	PATH-FUNDED	SUBTOTAL	TOTAL
PATH Coordinator	1.0	\$22,500	\$22,500	
Fringe Benefits @ 35%		\$7,875	\$7,875	
Total Personnel				\$30,375
TRAVEL				
Travel for PATH Coordinator within the region including expenses to attend any required meetings and training sessions		\$2,500	\$2,500	
Total Travel				\$2,500
OTHER				
One-time financial assistance for the following: rental payments, security deposits, representative payee services, or medications		\$4,000	\$4,000	
Total Other				\$4,000
TOTAL				\$36,875

REGION III

1. Lake Region Human Service Center (LRHSC) – Devils Lake: LRHSC is a regional human service center and a part of the North Dakota Department of Human Services: a governmental agency. LRHSC serves the major city of Devils Lake and a six-county area including the Spirit Lake and Turtle Mountain Indian Reservations. The area has a population base of approximately 40,672 persons. Consumers are served in the community through a linked spectrum of rehabilitation services. These include: Crisis stabilization and resolution, case management, psychiatric/medical management including medication management and other health services, social services, residential services and supports, vocational and educational services and supported employment, social and leisure activities, counseling, psychological services, and addiction treatment. The PATH program will provide services to individuals aged 18+ who are literally homeless or at risk of homelessness.



2. BUDGET:

The Region III PATH Program will receive \$36,875 in Federal PATH funds.

3. DESCRIBE THE ORGANIZATION'S PLAN TO PROVIDE COORDINATED AND COMPREHENSIVE SERVICES TO ELIGIBLE PATH CLIENTS

a. Projected number of adult clients to be contacted using PATH funds:

LRHSC anticipates contacting 115-120 clients with PATH funded services during FY 2011.

b. Projected number of adult clients to be enrolled using PATH funds:

LRHSC anticipates enrolling 25 adult clients in PATH funded services during FY 2011.

c. Percentage of adult clients served with PATH funds projected to be "literally" homeless:

LRHSC anticipates that out of the 25 adult clients that will be served with PATH funds, 5% of these individuals will be classified as "literally homeless".

d. Activities to maximize the use of PATH funds to serve adults who are literally homeless as a priority population.

Outreach Services: Identifying and meeting the immediate needs of homeless individuals and provide assistance with referrals for food, clothing, shelter, transportation, financial assistance, and/or assisting individuals to obtain benefits and/or entitlements. Referrals for those services are included in outreach services. The PATH Coordinator usually provides these services.

Screening/Diagnostic Treatment Services: Both the PATH Coordinators from LRHSC are also Extended Care Case Managers and they have the ability to do initial screenings and make appropriate referrals or obtain needed diagnostic information to assure PATH recipients meet the criteria and to assure appropriate referrals.

Habilitation/Rehabilitation Services: Services directed toward assisting individuals in obtaining meaningful work. Service can be provided by PATH Coordinator or through referral to Vocational Rehabilitation program at the LRHSC or through the Tribal VR Offices, Job Service of North Dakota, and through agencies that provide job training with extended services.

Community Mental Health Service: Therapy and case management are provided by PATH Coordinators and other community-based services are provided by LRHSC (such as more intensive therapy, psychiatric evaluation and medication monitoring, substance abuse services) or through referrals to other local agencies. LRHSC will continue to work as the "finders and feeders" of individuals who are homeless into agencies that can assist them to gain emotional and physical stability and promote general recovery. The LRHSC also works closely with IHS Mental Health on both the Spirit Lake and Turtle Mountain Band of Chippewa Reservations.

Alcohol and Drug Treatment Service: Several treatment programs are available in Region III, including: Fifth Generation in Belcourt; Spirit Lake Nation Recovery and Wellness; and the LRHSC. Referrals for evaluations and/or treatment will be considered for individuals who appear to be struggling with substance abuse issues. Lake Region Human Service Center provides gatekeeper responsibility to accessing inpatient services at the North Dakota State Hospital. Substance abuse treatment, at the LRHSC, has a component of dual diagnosis treatment and varied professionals provide adjunct mental health services to individuals in the program.

Staff Training: PATH Coordinators will be involved in either in-services or educational programs that focus on education for the community or professionals on the homeless program or issues related to individuals who are homeless.

Case Management Services: Services provided by case managers to include therapy, skills building training, supportive services in residential settings and with instrumental daily living skills. Case managers also direct mental health technicians in service provision where appropriate- if the consumer becomes an Extended Care consumer.

Supportive and Supervisory Service in Residential Settings: Services provided to client to assist them to maintain the most independent living arrangements possible for that specific client. Services can include supervision and support for client to complete instrumental daily living skills. Services are to be provided, when possible, in client's home and in their community.

Referrals for Primary Health Services, Job Training, Educational Services and Housing Services: PATH Coordinators and others working with the homeless are aware of referral sources in the community. Referrals are made to public health units, medical clinics, and to social service agencies for financial assistance.

Housing Services: PATH Coordinators assist the homeless in applying for housing in the area the individual chooses to reside. Region III does not have an emergency shelter which makes Dakota Prairie Community Action Agency an important resource, as they can provide brief but limited assistance (one night stay at a hotel, fuel vouchers) to individuals. The PATH Coordinators have access to designated PATH funds to provide: one-time rental payments or security deposits to assist people who are homeless in obtaining housing. The PATH Coordinators and other Homeless Coalition members assist in obtaining donated household items and furniture to furnish their apartments and homes.

e. Strategies that will be used to target PATH funds for street outreach and case management as priority services.

Continued briefings and trainings with collaborative agencies, police departments, social service agencies, and churches.

Assure response time is within 48 hrs for first contact and assessment.

Active collaboration with NDSH, Indian Health Services, etc. to assure seamless transitions and referrals with these high risk individuals.

f. Activities that will be implemented to facilitate migration of PATH data into HMIS within 3-5 years:

Revisit training for staff on the HMIS to assure accurate data collection and reporting

Assure the HMIS is part of the "intake" process for the individual and a ROI is signed and filed

Attended and collaborate at the State wide collation meetings on the issue and problem solve as necessary.

g. Indicate whether the provider provides, pays for, or otherwise supports evidence-based practices and other training for local PATH-funded staff:

Both PATH funded staff (one position shared between two individuals) are provided training on evidence based programs and initiatives. They are often at the Clinical

Forum training and various other in-services and trainings (Dialectical Behavior Therapy). Both are included on the invites for all in-house trainings and staffing.

h. Indicate whether the provider provides, pays for, or otherwise supports HMIS training and activities to migrate PATH data into HMIS:

LRHSC 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.

i. Community organizations that provide key services to PATH eligible clients and describe coordination activities and policies with those organizations:

Dakota Prairie Community Action Agency provides assistance with limited emergency shelter (one night during the week or possibly a weekend), deposit assistance, utility deposit assistance, food baskets, monthly food commodities, food and clothing pantry, bedding and cooking supplies (when available). They also provide fuel assistance (10 gallons) and one-time assistance with medications if the person cannot afford them.

Father Gerald Crisis Fund, through the 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.

The Salvation Army provides assistance (up to \$125/person) with rental deposits, one-time payments to avoid evictions, security deposits, medications, and transportation.

The Freedom Center, a Psychosocial Rehabilitation Center, provides leisure and recreation opportunities and hot meals seven days a week for members who are seriously mentally ill.

County and Tribal Social Services provide entitlement benefits including: Medical Assistance, food stamps, heating assistance, general assistance, etc.

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

The PATH Coordinators also work with the North Dakota Housing Finance Agency to provide affordable housing to individuals. This is a zero to low income program that works with selected landlords to provide affordable housing.

Mental Health and Substance Abuse treatments are available at the LRHSC for people who have either or both problems. There are also several private providers within the Region. The North Dakota State Hospital is also available to provide both mental health and substance abuse treatment, as necessary and appropriate when community services are not adequate for the need of the consumer.

Indian Health Service 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 two psychologists (but are currently without a psychiatrist). IHS in Fort Totten also staffs a psychologist and a mental health counselor.

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.

For Emergency Shelter, after hours, the Lake Region Law Enforcement will authorize one night in a hotel after screening the individual and/or family. 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. For domestic violence situations, we have a local agency, Safe Alternatives for Abused Families in both Devils Lake and Rolla, ND. These programs do offer shelter access to families affected by violence. DPCAA has one transition facility which can house on family for a limited amount of time.

The Society of St. Vincent De Paul is a recent addition to the community organizations in the Devils Lake area. They intend to fill in the service gaps for homeless individuals in the area but are in the infancy stage in terms of their organization.

The North Central Planning Council works with the PATH Coordinators to provide transportation. Within this agreement, the NCP will provide the first transportation ticket (20 rides) for homeless individuals for free, the second for half the cost and the third at full price. The individual may use these tickets while attend employment interviews and searching for housing.

j. Gaps in 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; no formal shelters available; and there is a definite limit in available housing for persons with any kind of criminal history and housing is a continued challenge for the Spirit Lake and Turtle Mountain Band of Chippewa reservations. In general with our increase in road construction last year and anticipated double the amount of construction workers this year, the housing concern is beyond any previous year's concern. Last year there were frankly no housing options for some individuals. There is a need for more representative payee services for clients. Guardianship, when necessary, is an expensive undertaking for the family/client. There is also a substantive need for individuals willing to become guardians for clients. Another area of service need centers on individuals who are transitioning out of foster care and need additional assistance and support. However, with the Transition to Independence Program this may be less of an issue than in previous years.

k. Services available for clients who have both a serious mental illness and substance use disorder”

Referrals to the PATH Coordinators come through the Lake Region Human Service Center and other organizations in Region III as well as from collateral sources. The PATH Coordinators complete an intake, make a determination of needed services and refers the client to the appropriate sources. These services, such as: psychiatric, psychiatric nursing, psychological and counseling are provided through the Lake Region Human Service Center, the North Dakota State Hospital or other available community resources. Psychiatric and psychological services are also provided through the IHS hospital in Belcourt. The Lake Region Human Service Center has Licensed Addiction Counselors available to help diagnose and determine the appropriate level of treatment needed for the client. LRHSC has a Crisis Residential Unit, which is contracted through Progress Enterprises, Inc. If the client is in need of Medical Detoxification, the State Hospital is available. Once the client is stabilized, primary substance abuse treatment and aftercare services can be provided locally for clients. PATH Coordinators are available to assist with technical assistance in applying for housing, referrals to Vocational Rehabilitation services, assistance in applying for Social Security and Social Services. PATH Coordinators are available to the client to assist with transition back to their homes and assisting with referrals for follow up services, as needed.

l. Strategies for making suitable housing available to PATH clients:

Working 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.

Emergency Shelter, is accessed through DPCAA 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 situations: the client is referred to the SAAF house in Devils Lake or Rolla, ND. Funding for this activity is provided through the Safe Alternatives for Abused Families.

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

Permanent Supportive Housing 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 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.

Another strategy that is being utilized 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.

4. DESCRIBE THE PARTICIPATION OF PATH LOCAL PROVIDERS IN THE HUD CONTINUUM OF CARE PROGRAM AND ANY OTHER LOCAL PLANNING, COORDINATING OR ASSESSMENT ACTIVITIES

PATH Coordinators are active in the North Dakota Coalition for Homeless People, the HUD Continuum of Care Programs, and local homeless coalitions. Coordinators participate in committee work, attend meetings and discuss areas of need and possible options to meet the unmet needs in the area.

5. DESCRIBE:

(A) THE DEMOGRAPHICS OF THE CLIENT POPULATION;

Age: 18-34 (13), 35-49 (16), 50-64 (3), 65-74 (7), unknown (0)

Gender: male (11), female (25)

Race: Hispanic or Latino (0), African American (0), American Indian or Alaska Native (18), White (18)

Mental Illness: Schizophrenia and Related Disorders (6), Other Psychotic Disorders (2), Affective Disorders (24), Personality Disorder (0), other serious mental illness (4), unknown or undiagnosed mental illness (0)

Co-occurring substance use: Co-occurring (7), non-co-occurring (21)

Veteran Status: Veteran (0), Non-veteran (36), Unknown (0)

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.

(B) THE DEMOGRAPHICS OF THE STAFF SERVING THE CLIENTS;

PATH Coordinators are classified as Extended Care Case Manager II's. Our Devils Lake PATH/SMI CM has a Bachelors Degree in Leisure and Recreation with an emphasis in Therapeutic Recreation, has six years of experience as the director of the region's psychosocial center, and is currently pursuing a Masters Degree in Social Work. Our Rolla PATH/SMI CM has a Master's degree in Counseling and a Master's degree in Educational Administration. She has a background in working with persons with special needs in both a school setting and hospital setting.

LRHSC has a number of staff who are Native American 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.

(C) HOW STAFF PROVIDING SERVICES TO THE TARGET POPULATION WILL BE SENSITIVE TO AGE; GENDER; AND RACIAL/ETHNIC DIFFERENCES OF CLIENTS;

With regard to sensitivity to age, general and racial/ethnic differences and training; our staff is provided periodic trainings on staff diversity and cultural competence. Workshops on tribal traditions and cultural differences are periodically offered to staff.

(D) THE EXTENT TO WHICH STAFF RECEIVE PERIODIC TRAINING IN CULTURAL COMPETENCE.

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 is 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 works are able to attend.

Because the PATH Coordinators are regular Department of Human Services' employees, they have the same opportunity as other human service center employees to participate in inservice training, workshops, and other conferences. PATH Coordinators are encouraged to attend the annual Clinical Forum on Mental Health Conference. This multi-day conference focuses on evidence-based practice and mental health recovery. Cultural competency training is scheduled for this year's event. The Department is implementing a cultural competency training program. All PATH Coordinators will be required to attend annual cultural competency training.

6. DESCRIBE HOW PERSONS WHO ARE HOMELESS AND HAVE SERIOUS MENTAL ILLNESSES AND ANY FAMILY MEMBERS WILL BE INVOLVED AT THE ORGANIZATIONAL LEVEL IN THE PLANNING, IMPLEMENTATION, AND EVALUATION OF PATH-FUNDED SERVICES.

Consumers, as well as their families/guardians, are highly encouraged to participate in the regional stakeholder meetings on a regular basis to provide input into how the services are, or should be, delivered as well as service gaps. Stakeholder meetings are held in

both the Rolla area and Devils Lake area. Consumers are also encouraged to complete consumer surveys that are administered by the N.D. Department of Human Services on an annual basis, and consumers are interviewed as a component of Human Service Center Licensing that occurs every other year. Consumers are also 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 Peer Support programming. This program is facilitated by our Mental Health Technicians with the focus being to assist 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 our consumer.

7. PROVIDE A BUDGET NARRATIVE THAT PROVIDES DETAILS REGARDING PATH FUNDS.

Personnel: PATH funds are used for salary for two half-time PATH Coordinators. These positions, mental illness case managers, provide PATH services throughout Region II. The Federal portion of the salary for the Coordinators is \$22,500 per year.

Fringe Benefits: Computed at 35 percent of the salary, fringe benefits include the cost of health insurance, worker's compensation, Social Security/Medicare, retirement, and unemployment insurance. The Federal portion of the benefits for the Coordinator is \$7,875 per year. As the PATH Coordinators are employees of the North Dakota Department of Human Services, the 35 percent fringe benefit costs are the same as other employees of the Department.

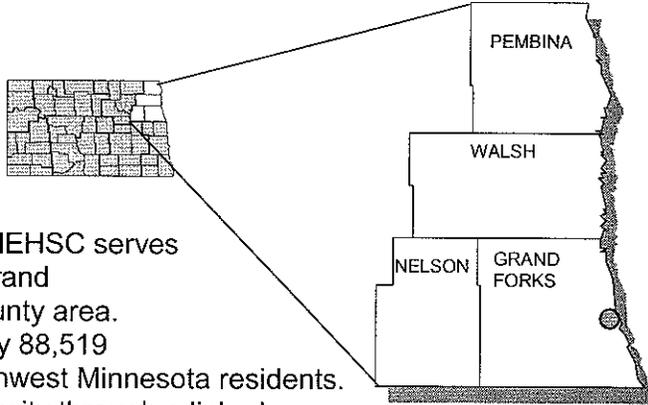
Travel: Travel costs will include the expenses for the PATH Coordinators to attend quarterly meetings scheduled for all Coordinators and to attend meetings of the North Dakota Coalition for Homeless People. Costs include travel at \$0.27 per mile, per diem of \$25 per day, and lodging at \$55 per day plus tax. This category will also cover the travel costs associated with providing services to homeless persons within the region. The estimated travel costs for each FTE Coordinator position is \$2,500 for the year. At this time, the \$2,500 travel allowance is sufficient to cover costs associated with outreach travel by the PATH Coordinators. If the PATH Coordinators need additional funding for travel, North Dakota will provide General Fund dollars to cover these costs.

Other: The PATH Coordinator has access to \$4,000 to cover the costs associated with providing one-time rent assistance, one-time security deposits, or representative payee services to maintain persons who are homeless and mentally ill in the community.

PERSONNEL	NUMBER OF FTES	PATH-FUNDED	SUBTOTAL	TOTAL
PATH Coordinator	1.0	\$22,500	\$22,500	
Fringe Benefits @ 35%		\$7,875	\$7,875	
Total Personnel				\$30,375
TRAVEL				
Travel for PATH Coordinator within the region including expenses to attend any required meetings and training sessions		\$2,500	\$2,500	
Total Travel				\$2,500
OTHER				
One-time financial assistance for the following: rental payments, security deposits, representative payee services, or medications		\$4,000	\$4,000	
Total Other				\$4,000
TOTAL				\$36,875

REGION IV

1. **Northeast Human Service Center (NEHSC)– Grand Forks:** NEHSC is a regional human service center and a part of the North Dakota Department of Human Services: a governmental agency. NEHSC serves the major city of Grand Forks, the Grand Forks Air Force Base, and a four-county area. The population base is approximately 88,519 persons which does not include northwest Minnesota residents. Consumers are served in the community through a linked spectrum of rehabilitation services. These include: Crisis stabilization and resolution, case management, psychiatric/medical management including medication management and other health services, social services, residential services and supports, vocational and educational services and supported employment, social and leisure activities, counseling, psychological services, and addiction treatment. The PATH program will provide services to individuals aged 18+ who are literally homeless or at risk of homelessness.



2. BUDGET:

The Region IV PATH Program will receive \$36,875 in Federal PATH funds.

3. DESCRIBE THE ORGANIZATION'S PLAN TO PROVIDE COORDINATED AND COMPREHENSIVE SERVICES TO ELIGIBLE PATH CLIENTS

a. Projected number of adult clients to be contacted using PATH funds:

In 2010 the PATH coordinator provided outreach and assessment for 115 individuals. We expect to have similar numbers in 2011.

b. Projected number of adult clients to be enrolled using PATH funds:

In 2010, 78 persons were enrolled. Again, we expect to have a similar number in 2011.

c. Percentage of adult clients served with PATH funds projected to be "literally" homeless:

In 2010, approximately one third of the contacts were living in emergency or long term shelter at the time of first contact. The winter weather of the Midwest limits the number of persons who are contacted who are actually able to live outdoors. The majority of the other contacts were living in hotels/motels or doubled up with friends or family. This worker would project 30-50% of the clients served in 2011/2012 will be literally homeless or residing in emergency shelter.

d. Activities to maximize the use of PATH funds to serve adults who are literally

homeless as a priority population.

At present, the PATH case manager is able to manage the majority of the PATH contacts regardless of whether or not they are literally homeless. Those living outdoors are already prioritized based on their precarious living arrangements and the need to access shelter and services quickly.

e. Activities that will be implemented to facilitate migration of PATH data into HMIS within 3-5 years:

The Region IV PATH coordinator will attend regional and web trainings regarding the transition of PATH data into HMIS and will work with the State PATH Contact to ensure that all PATH data is transitioned into the HMIS system.

f. Strategies that will be used to target PATH funds for street outreach and case management as priority services.

Again, the Midwest winters limit the amount of street outreach needed. The PATH worker will attempt to make contact with local hotels/motels that are providing shelter for persons that may be PATH eligible. Efforts will be made to inform hotel managers of services available to those in need. This writer does check with various agencies to check if they are aware of person's living outside so that potential contact can be made. Case management is a service that is provided with every enrolled PATH consumer.

g. Indicate whether the provider provides, pays for, or otherwise supports evidence-based practices and other training for local PATH-funded staff:

The current PATH coordinator has received training in Motivational Interviewing. We will also be attending IDDT training in May 2011.

h. Indicate whether the provider provides, pays for, or otherwise supports HMIS training and activities to migrate PATH data into HMIS:

The provider supports the use of HMIS and will attend any trainings necessary to develop the capacity to use HMIS for Region IV PATH data.

i. Community organizations that provide key services to PATH eligible clients and describe coordination activities and policies with those organizations:

Grand Forks Public Health serves as a key health agency responsible for health promotion and disease prevention services for the City and County of Grand Forks, North Dakota. The Department has four divisions: Administrative, Environmental Health, Nursing, and Nutrition. The Programs and Services include community needs assessment, health policy development, health protection, and health promotion.

These services are provided free, on a donation basis, or at minimal cost depending on the service desired.

Altru Health System provides hospital and clinic services to citizens of the surrounding area. They do have a psychiatry department that provides both inpatient and outpatient mental health services.

Third Street Clinic is a non-profit organization that provides healthcare for persons who cannot access treatment through other agencies and do not have the resources to purchase their own medical care.

Valley Community Health Centers offers discounts for health services for income eligible people. Clinics are located in Northwood and Larimore, ND. They also have a dental clinic in Grand Forks.

Valley Health and WIC provides health related services on a sliding fee basis.

The **Veteran's Administration** also has a local Community Based Outreach Clinic (CBOC) where veterans receive medical services. There is also a local contact for the **HUD-VASH** program which provides housing vouchers and supportive case management for veteran's who are homeless.

There are a number of private healthcare providers in the community as well. (Aurora, Center For Psychiatric Care, Stadter Center)

The **Grand Forks Housing Authority** offers housing assistance to eligible individuals. **Metro Plains** offers housing assistance for persons who are low income and disabled in their residences at The Current, Ryan House, Alcott Manor and Riverside Manor. Rent is based on 30% of a person's income.

Grand Forks also has some slots for **Mod Rehab** and the **Shelter Plus Care Program**. The **Northland's Rescue Mission** provides emergency shelter for homeless men and women; 18 years of age and older.

Prairie Harvest Mental Health offers supportive residential services, representative payee services, employment programs, a support group and several other supportive programs for persons with serious mental illness. They also have a supervised living facility (Harvest Homes) and now operate two lodges for individuals with SMI. The lodge residents live and work together in the community. Siewert Plains is 24 hour residential care for persons with serious mental illness. Prairie Harvest will be constructing a 9 unit supported residential unit for person's with serious mental illness. They also have one home in the community where an individual with SMI can reside. The person currently in this unit is a former PATH client.

Community Violence Intervention Center may provide housing and domestic violence related services to persons who are experiencing domestic violence. They also offer shelter and transitional living services.

Red River Valley Community Action provides various services including security deposits for individuals who are homeless. They operate a shelter for homeless women and children. They also have a 3 unit permanent supportive housing project for families that was funded by North Dakota Continuum of Care.

St Vincent of Grand Forks may provide rental assistance for those behind on rent, food baskets and other emergency assistance. They also have 3 transitional living units for families and one unit of permanent supportive housing for persons who are homeless at the time of entry.

The Salvation Army provides rental and security monies and operates a food cupboard.

Mountainbrooke Recovery Center is a psychosocial recovery center for persons with SMI. The statewide Peer Support Program is housed at the Recovery Center.

The local **Job Service** provides an array of employment related services. They also have a Job Corp contact.

Vocational Rehabilitation and Consulting also provides an array of employment/education services to those who have disabilities. The community also has employment programs for Native Americans, Veterans, and Migrant Workers. There are also private businesses that provide job coaching services for persons with disabilities. Grand Forks also has an Experience Works Program for those over 55 years of age.

Northeast Human Service is the facility that provides mental health and substance abuse services to the PATH eligible persons. There are other providers of mental health and substance related services in the community, however persons must have financial resources. ie Drake Counseling, Douglas Place.

j. Gaps in current service systems:

In Region 4 there continues to be a bottle neck in finding housing and supportive services for persons with mental illnesses. Most of the facilities are at capacity and there is a long waiting list for Section 8 housing. This has grown to an approximate wait time of 1-2 years. There is limited funding available to contract for supportive services for a person who wants to live in their own apartment but requires additional support. We continue to need more supported residential settings for persons with mental illness. There continues to be difficulty in finding housing for those who have poor credit or landlord history and evictions on their rental record. It can also be difficult to find housing for those with large families or for 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 that would qualify them for a facility or housing option specified for a certain population. It also remains difficult to find permanent housing for persons with felony convictions or those who are registered sex offenders. Plans are underway for a social detox in the community therefore that will fill an identified need. Currently, there is a collaborative

effort between NE Human Service Center, the GF Housing Authority and Prairie Harvest Mental Health regarding building a supportive residential development that would house 9 individuals with mental health issues. This will address some of the current gaps in the system. There is currently a need for more availability for ½ way houses for people in recovery from addictions. There is also a need for long term residential options for those who are starting their recovery from addiction to pain medications. This would need to have 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.

k. Services available for clients who have both a serious mental illness and substance use disorder”

Centre Inc provides residential services to persons who have SMI and chemically dependency issues while they are undergoing treatment. Some of these people may be homeless. In conjunction with the local human service center, they also operate an adolescent residential program for youth who are chemically dependent (**CATS**). The **STEP** program currently offers residential services for women who are chemically dependent and their children. Treatment services are provided by the local human service center. The Regional Human Service Center does offer addiction treatment services to persons who are homeless. These services include: evaluations, primary day treatment, evening programming, aftercare groups, relapse group for chronic substance abusers, residential treatment and a residential treatment facility for youth with chemical addictions (**CATS**). The Center also operates a halfway house for persons in recovery. The chemical dependency unit also has two case managers available to work with persons with dual diagnosis. There is also a weekly group for persons who are dually diagnosed with mental health and substance abuse issues. The Human Service Center also contracts with an area provider for detox. Payment is covered by the Center, providing the client is willing to follow through with treatment recommendations. Plans are being made for social detox services.

i. Strategies for making suitable housing available to PATH clients:

Region 4 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 chemical dependency and/or mental illness and **Duane R. Dornheim**, a transitional living center for persons with SMI. There are two lodges operated by **Prairie Harvest** for persons with SMI. They also operate a 12 plex supported residential setting for persons with SMI. They will be breaking ground this spring for another 9 plex of supported residential living for person’s 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 approximately three agencies. (**Grand Forks Housing Authority, Metro Plains, Insignia Management**) There is one halfway house for persons in recovery from chemical dependency. **St Vincent of Grand Forks** operates three units of transitional living facility for families. **SVDP** also

operates a one unit permanent supportive housing project. The **Community Violence Intervention Center** operates 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. 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. Please see above for information regarding housing options.

4. DESCRIBE THE PARTICIPATION OF PATH LOCAL PROVIDERS IN THE HUD CONTINUUM OF CARE PROGRAM AND ANY OTHER LOCAL PLANNING, COORDINATING OR ASSESSMENT ACTIVITIES

Currently the Region 4 PATH Coordinator is an active part of the North Dakota Continuum of Care Development Committee. (NDCOCCDC). She attends quarterly meetings for the group and works on the discharge committee and the membership committee of the ND Coalition for the Homeless. 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. She also participates in the annual point-in-time survey of homeless persons conducted by the ND Coalition for Homeless Persons. The PATH worker also works with local law enforcement regarding persons who are homeless and causing disturbances in the community. The PATH worker has also been working with local representatives from various agencies who have written the 10 year plan to end chronic homelessness in our city. The PATH worker also assists with a Project Homeless Connect on a yearly basis. She is also involved in an inmate re-entry program for persons exiting the ND Department of Corrections. She also serves a liaison for a Release and Integration program which is designed specifically for persons with SMI and/or chemical dependency who are exiting the ND Department of Corrections. This program coordinates mental health and chemical dependency services for those identified so that there is a seamless transition of needed services.

5. DESCRIBE:

(A) THE DEMOGRAPHICS OF THE CLIENT POPULATION;

Age: 18-34 (29), 35-49 (26), 50-64 (21), 65-74 (2), unknown (0)

Gender: male (41), female (37)

Race: Hispanic or Latino (3), African American (1), American Indian or Alaska Native (13), White (55)

Mental Illness: Schizophrenia and Related Disorders (27), Other Psychotic Disorders (5), Affective Disorders (39), Personality Disorder (2), other serious mental illness (3), unknown or undiagnosed mental illness (2)

Co-occurring substance use: Co-occurring (31), non-co-occurring (43)

Veteran Status: Veteran (9), Non-veteran (67), Unknown (2)

(B) THE DEMOGRAPHICS OF THE STAFF SERVING THE CLIENTS;

The PATH worker is located in the City of Grand Forks, the largest city in the four county region included under this PATH location program.

Currently, the PATH Coordinator in Region 4 is a Licensed Social Worker who received training regarding cultural issues during her formal university training. She has also attended numerous workshops throughout the state regarding cultural, gender related and racial issues. Ongoing training regarding mental health/illness/medications is provided on an on-going basis by the employing agency. The current PATH worker has over 20 years of experience in Adult Mental Health Services.

(C) HOW STAFF PROVIDING SERVICES TO THE TARGET POPULATION WILL BE SENSITIVE TO AGE; GENDER; AND RACIAL/ETHNIC DIFFERENCES OF CLIENTS;

NEHSC 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 is encouraged to participate in training devoted to cultural awareness.

(D) THE EXTENT TO WHICH STAFF RECEIVE PERIODIC TRAINING IN CULTURAL COMPETENCE.

Because the PATH Coordinators are regular Department of Human Services' employees, they have the same opportunity as other human service center employees to participate in inservice training, workshops, and other conferences. PATH Coordinators are encouraged to attend the annual Clinical Forum on Mental Health Conference. This multi-day conference focuses on evidence-based practice and mental health recovery. Cultural competency training is scheduled for this year's event. The Department is implementing a cultural competency training program. All PATH Coordinators will be required to attend annual cultural competency training.

6. DESCRIBE HOW PERSONS WHO ARE HOMELESS AND HAVE SERIOUS MENTAL ILLNESSES AND ANY FAMILY MEMBERS WILL BE INVOLVED AT THE ORGANIZATIONAL LEVEL IN THE PLANNING, IMPLEMENTATION, AND EVALUATION OF PATH-FUNDED SERVICES.

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 contact their families. Currently, the provider agency does not employ PATH eligible persons. Because of the states limited allocation, the entire state has only 8 PATH providers, all who are trained professionals. No PATH eligible persons serve on the governing or formal advisory board at this time in Region IV.

7. PROVIDE A BUDGET NARRATIVE THAT PROVIDES DETAILS REGARDING PATH FUNDS.

Personnel: PATH funds are used for salary for the PATH Coordinator. This position, a mental illness case manager, provides PATH services throughout Region IV. The Federal portion of the salary for the Coordinator is \$22,500 per year.

Fringe Benefits: Computed at 35 percent of the salary, fringe benefits include the cost of health insurance, worker's compensation, Social Security/Medicare, retirement, and unemployment insurance. The Federal portion of the benefits for each Coordinator is \$7,875 per year. As the PATH Coordinator is an employee of the North Dakota Department of Human Services, the 35 percent fringe benefit costs are the same as other employees of the Department.

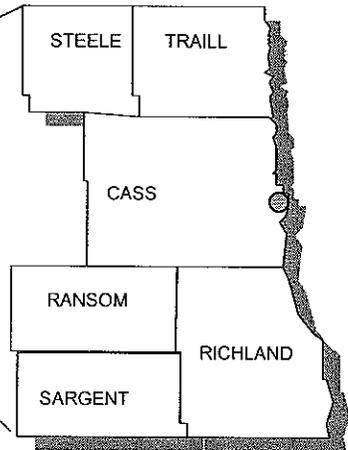
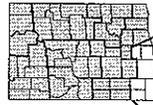
Travel: Travel costs will include the expenses for the PATH Coordinator to attend quarterly meetings scheduled for all Coordinators and to attend meetings of the North Dakota Coalition for Homeless People. Costs include travel at \$0.27 per mile, per diem of \$25 per day, and lodging at \$55 per day plus tax. This category will also cover the travel costs associated with providing services to homeless persons within the region. The estimated travel costs for each FTE Coordinator position is \$2,500 for the year. At this time, the \$2,500 travel allowance is sufficient to cover costs associated with outreach travel by the PATH Coordinators. If the PATH Coordinators need additional funding for travel, North Dakota will provide General Fund dollars to cover these costs.

Other: The PATH Coordinator has access to \$4,000 to cover the costs associated with providing one-time rent assistance, one-time security deposits, or representative payee services to maintain persons who are homeless and mentally ill in the community.

PERSONNEL	NUMBER OF FTES	PATH-FUNDED	SUBTOTAL	TOTAL
PATH Coordinator	1.0	\$22,500	\$22,500	
Fringe Benefits @ 35%		\$7,875	\$7,875	
Total Personnel				\$30,375
TRAVEL				
Travel for PATH Coordinator within the region including expenses to attend any required meetings and training sessions		\$2,500	\$2,500	
Total Travel				\$2,500
OTHER				
One-time financial assistance for the following: rental payments, security deposits, representative payee services, or medications		\$4,000	\$4,000	
Total Other				\$4,000
TOTAL				\$36,875

REGION V

1. Southeast Human Service Center (SEHSC) – Fargo: SEHSC is a regional human service center and a part of the North Dakota Department of Human Services: a governmental agency. Serves the major city of Fargo, a six-county area, and residents of nearby Minnesota counties. It has a population base of approximately 185,481 persons which does not include Minnesota residents. Consumers are served in the community through a linked spectrum of rehabilitation services. These include: Crisis stabilization and resolution, case management, psychiatric/medical management including medication management and other health services, social services, residential services and supports, vocational and educational services and supported employment, social and leisure activities, counseling, psychological services, and addiction treatment. The PATH program will provide services to individuals aged 18+ who are literally homeless or at risk of homelessness.



2. BUDGET:

The Region V PATH Program will receive \$55,938 in Federal PATH funds.

3. DESCRIBE THE ORGANIZATION'S PLAN TO PROVIDE COORDINATED AND COMPREHENSIVE SERVICES TO ELIGIBLE PATH CLIENTS

a. Projected number of adult clients to be contacted using PATH funds:

The projected number of homeless people that the PATH position will serve in FY 2011 is 200.

b. Projected number of adult clients to be enrolled using PATH funds:

It is expected that 65% will become enrolled in services.

c. Percentage of adult clients served with PATH funds projected to be “literally” homeless:

The percentage that will meet the definition of literally homeless is figured to be approximately 83%.

d. Activities to maximize the use of PATH funds to serve adults who are literally homeless as a priority population.

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 in 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 population. Collaboration with downtown police, community psychiatric, community medical, legal or jail, as well as housing agencies when a referral is given. PATH case management also does outreach with Homeless Health services one day a week. PATH case management was conducting outreach at the Wesley Center until they recently closed. PATH case management will basically 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 (Housing First model) 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 the opportunity to be housed and are not comfortable with new providers at first move-in.

e. Strategies that will be used to target PATH funds for street outreach and case management as priority:

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 in 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 population. Collaboration with downtown police, community psychiatric, community medical, legal or jail, as well as housing agencies when a referral is given. PATH case management also does outreach with Homeless Health services one day a week. PATH case management was conducting outreach at the Wesley Center until they recently closed. PATH case management will basically 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 (Housing First model) 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 the opportunity to be housed and are not comfortable with new providers at first move-in.

f. Activities that will be implemented to facilitate migration of PATH data into HMIS within 3-5 years:

The PATH Coordinator will participate in the regional/online trainings concerning the PATH migration to HMIS. The current PATH coordinator is familiar with the HMIS system and has used in the past.

g. Indicate whether the provider provides, pays for, or otherwise supports evidence-based practices and other training for local PATH-funded staff:

The PATH Coordinator's office is located in the Off Main office which also houses the IDDT teams of SEHSC. These teams provide evidence based practice within the Fargo community to individuals who meet criteria for this service. These individuals 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.

h. Indicate whether the provider provides, pays for, or otherwise supports HMIS training and activities to migrate PATH data into HMIS:

The provider supports the use of HMIS and will attend any training necessary to develop the capacity to use HMIS for Region V PATH data.

i. Community organizations that provide key services to PATH eligible clients and describe coordination activities and policies with those organizations:

There are many organizations in the Fargo/Moorhead area that provide services to the homeless of this region. Family Health Care, Homeless Health Care, YWCA Cass Clay, Churches United for the Homeless (Moorhead), Sister's Path, New Life Center (Fargo), Gladys Ray Shelter (Fargo), Dorothy Day House (Moorhead), 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), Wesley Center, and Native American Outreach Center.

The PATH coordinator remains in close contact with each of these facilities. Releases of Information are obtained when a client applies for the services in order to have open collaboration and ensure appropriate levels of care when necessary as well as maximizing the benefits to the clients. Outreach is coordinated either by weekly visits that are 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 contact PATH coordinator to set up an initial meeting or conduct emergency services as needed.

j. Gaps in current service systems:

There are gaps in the current service system that serves the homeless population. The waiting time for housing programs and vouchers continues to be problematic. Gaps can also be found while assessing the waiting time for other services such as County benefits such as food stamps and medical assistance. Often the clients will not have adequate identification (such as birth certificates) and will therefore have to wait for 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.

Transportation is also an issue in the FM area. Often the cost of a ride exceeds what an individual is able to afford as well as the bus routes not always being accessible or timely. Local agencies or organizations are not 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 operates under a "Housing First" model and 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.

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.

k. Services available for clients who have both a serious mental illness and substance use disorder"

Services available for individuals with a chemical dependency diagnosis and also a mental illness (dual diagnosis) are provided by Southeast Human Service Center. Psychiatry, case management, and also chemical addiction treatment are all available. Off Main, a satellite of Southeast Human Service Center is specialized in treatment of dual diagnosed individuals. At Off Main an Integrated Dual Disorders Treatment (IDDT) for the quadrant 4 population was started in 2006. The PATH coordinator will also collaborate with area inpatient treatment providers on an as needed basis depending on the client' needs and /or goals. For instance, the PATH Coordinator will make referrals to culturally based inpatient treatment providers in the region if this is the client's goal.

I. Strategies for making suitable housing available to PATH clients:

Housing options that are utilized for PATH eligible clients to house the homeless vary because of individual need. There are five emergency shelters that serve women, children, and/or men. 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 appropriate to the "Housing First" model. YWCA also receives CoC for both transitional and a permanent supportive housing programs. Southeast Community Action Agency, Gladys Ray Shelter, and the YWCA also received federal grant monies to provide funding for deposit, first month rent, start up employment costs, and maintenance rental assistance. 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. There are also programs for deposit and first month's rent assistance through agencies such as Salvation Army and St. Vincent de Paul. PATH can also assist with one time deposit.

4. DESCRIBE THE PARTICIPATION OF PATH LOCAL PROVIDERS 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 actively involved in the Continuum of Care and North Dakota Coalition for Homeless Persons (NDCHP) as well as the Fargo/Moorhead Coalition for Homeless Persons (FMCHP). In 2010-2011 the full time PATH Coordinator served as a member of the following subcommittees for the NDCHP and CoC: Public Awareness Committee and Mainstream Resources Committee. The PATH Coordinator is also a member of the Selection Committee for Cooper House in Fargo as most of the population housed there has met with or worked with the Coordinator.

5. DESCRIBE:

(A) THE DEMOGRAPHICS OF THE CLIENT POPULATION;

Age: 18-34 (34), 35-49 (57), 50-64 (19), 65-74 (2), unknown (0)

Gender: male (70), female (50)

Race: Hispanic or Latino (3), African American (14), American Indian or Alaska Native (29), White (72)

Mental Illness: Schizophrenia and Related Disorders (25), Other Psychotic Disorders (8), Affective Disorders (48), Personality Disorder (4), other serious mental illness (13), unknown or undiagnosed mental illness (22)

Co-occurring substance use: Co-occurring (89), non-co-occurring (28)

Veteran Status: Veteran (4), Non-veteran (110), Unknown (6)

According to the 2010 Point in Time Survey Wilder Survey performed by a collaboration of service providers in the ND metro area there were 1126 persons who were homeless on the night of January 27, 2010 in ND. 347 were located in Fargo ND.

(B) THE DEMOGRAPHICS OF THE STAFF SERVING THE CLIENTS;

The PATH Coordinator and case manager aide are located in Fargo, the largest city in the region and state. The Coordinator is a 31 year old white female and the case aide is a 43 year old Asian male. The staff make concentrated efforts to conduct outreach in order to

connect with minority populations.

(C) HOW STAFF PROVIDING SERVICES TO THE TARGET POPULATION WILL BE SENSITIVE TO AGE; GENDER; AND RACIAL/ETHNIC DIFFERENCES OF CLIENTS;

The PATH Coordinator in Region V is a Licensed Social Worker who has received training regarding cultural issues by attending numerous workshops regarding cultural, gender related, and racial issues. The Case Manager Aide is also able to access these workshops.

(D) THE EXTENT TO WHICH STAFF RECEIVE PERIODIC TRAINING IN CULTURAL COMPETENCE.

Because the PATH Coordinators are regular Department of Human Services' employees, they have the same opportunity as other human service center employees to participate in inservice training, workshops, and other conferences. PATH Coordinators are encouraged to attend the annual Clinical Forum on Mental Health Conference. This multi-day conference focuses on evidence-based practice and mental health recovery. Cultural competency training is scheduled for this year's event. The Department is implementing a cultural competency training program. All PATH Coordinators will be required to attend annual cultural competency training.

6. DESCRIBE HOW PERSONS WHO ARE HOMELESS AND HAVE SERIOUS MENTAL ILLNESSES AND ANY FAMILY MEMBERS WILL BE INVOLVED AT THE ORGANIZATIONAL LEVEL IN THE PLANNING, IMPLEMENTATION, AND EVALUATION OF PATH-FUNDED SERVICES.

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 as well as are invited to attend the FM Coalition meetings. The plan is to continue to try to involve individuals both who are or were previously homeless in the planning and advancement of homeless issues.

7. PROVIDE A BUDGET NARRATIVE THAT PROVIDES DETAILS REGARDING PATH FUNDS.

Personnel: PATH funds are used for salary for the PATH Coordinator and the PATH Case Manager Aide. These positions provide PATH services throughout Region V. The Federal portion of the salary for 2 FTEs is \$33,750 per year.

Fringe Benefits: Computed at 35 percent of the salary, fringe benefits include the cost of health insurance, worker's compensation, Social Security/Medicare, retirement, and unemployment insurance. The Federal portion of the benefits for the Coordinators is \$11,813 per year. As the PATH Coordinators are employees of the North Dakota Department of Human Services, the 35 percent fringe benefit costs are the same as other employees of the Department.

Travel: Travel costs will include the expenses for the PATH Coordinator to attend quarterly meetings scheduled for all Coordinators and to attend meetings of the North Dakota Coalition for Homeless People. Costs include travel at \$0.27 per mile, per diem of \$25 per day, and lodging at \$55 per day plus tax. This category will also cover the travel costs associated with providing services to homeless persons within the region. The estimated travel costs for each FTE Coordinator position is \$2,500 for the year. At this time, the \$2,500 travel allowance is sufficient to cover costs associated with outreach travel by the PATH Coordinators. If the PATH Coordinators need additional funding for travel, North Dakota will provide General Fund dollars to cover these costs.

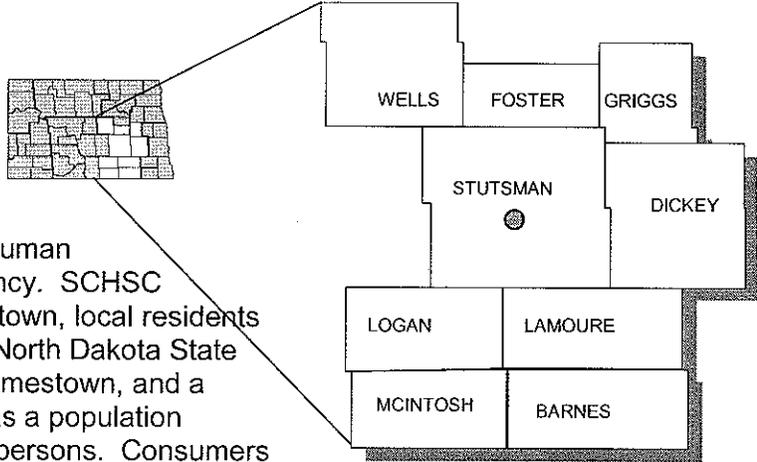
Other: The PATH Coordinators have access to \$6,000 to cover the costs associated with providing one-time rent assistance, one-time security deposits, or representative payee services to maintain persons who are homeless and mentally ill in the community.

PERSONNEL	NUMBER OF FTES	PATH-FUNDED	SUBTOTAL	TOTAL
PATH Coordinator and Case Manager Aide	2	\$33,750	\$33,750	
Fringe Benefits @ 35%		\$11,813	\$11,813	
Total Personnel				\$45,563
TRAVEL				
Travel for PATH Coordinator and PATH Case Manager Aide within the region including expenses to attend any required meetings and training sessions		\$3,750	\$3,750	
Total Travel				\$3,750
OTHER				
One-time financial assistance for the following: rental payments, security deposits, representative payee services, or medications		\$6,000	\$6,000	
Total Other				\$6,000
TOTAL				\$55,938

REGION VI

1. South Central Human Service Center (SCHSC)– Jamestown:

SCHSC is a regional human service center and a part of the North Dakota Department of Human Services: a governmental agency. SCHSC serves the major city of Jamestown, local residents who are former patients of the North Dakota State Hospital, which is located in Jamestown, and a nine-county area. The area has a population base of approximately 56,363 persons. Consumers are served in the community through a linked spectrum of rehabilitation services. These include: Crisis stabilization and resolution, case management, psychiatric/medical management including medication management and other health services, social services, residential services and supports, vocational and educational services and supported employment, social and leisure activities, counseling, psychological services, and addiction treatment. The PATH program will provide services to individuals aged 18+ who are literally homeless or at risk of homelessness.



2. BUDGET:

The Region VI PATH Program will receive \$36,875 in Federal PATH funds.

3. DESCRIBE THE ORGANIZATION'S PLAN TO PROVIDE COORDINATED AND COMPREHENSIVE SERVICES TO ELIGIBLE PATH CLIENTS

a. Projected number of adult clients to be contacted using PATH funds:

The projected number of adult consumers who will receive PATH-funded services in FY 2011 will be approximately 110-120.

b. Projected number of adult clients to be enrolled using PATH funds:

The projected number of consumers who will be enrolled using PATH funds will be approximately 85%.

c. Percentage of adult clients served with PATH funds projected to be “literally” homeless:

The percentage of consumers served that will be literally homeless as a priority population will be approximately 15%.

d. Activities to maximize the use of PATH funds to serve adults who are literally homeless as a priority population.

The PATH coordinator assists individuals who are homeless or at risk of being homeless in applying for or maintaining safe, affordable housing. Emergency shelters are available in most regions of the state assuring homeless persons temporary housing until more permanent arrangements are available. However, our region does not have a homeless shelter to assist individuals. Referrals through the PATH program have been made to these shelters. The PATH coordinator has access to designated PATH funds to provide for one-time rental payment and/or security deposit to assist a homeless person in obtaining housing. The PATH coordinator and other community agencies assist homeless people in obtaining donated household items and furniture to furnish their apartment/home.

e. Strategies that will be used to target PATH funds for street outreach and case management as priority:

Outreach services are provided to help meet the needs of people who are homeless by providing food, shelter, clothing, transportation, financial assistance or assisting homeless individuals in obtaining benefits and entitlements. Information and referral for services are included in outreach services. The PATH coordinator provides these services.

f. Activities that will be implemented to facilitate migration of PATH data into HMIS within 3-5 years:

Training that will be offered to learn how to enter data into HMIS within the next 3 to 5 years will be accessed so I can learn the HMIS program and improve my job skills.

g. Indicate whether the provider provides, pays for, or otherwise supports evidence-based practices and other training for local PATH-funded staff:

I have attended Motivational Interviewing training and will be trained in Motivational Interviewing II in June 2011. Through this training I am learning to ask more open ended questions to find out what the consumer wants for himself/herself vs. what I as a case manager believe is "best for them". Through the questions asked, I am able to better assess what the consumer believes they want/need and am able to make better decisions in how to guide them/assist them in getting where they want to live. I also attend the North Dakota State Coalition meetings held in Bismarck.

h. Indicate whether the provider provides, pays for, or otherwise supports HMIS training and activities to migrate PATH data into HMIS:

I will participate in the regional training that will be offered so I learn how to correctly input the data concerning PATH into the HMIS system. Any online training that is offered will also be utilized to assist me in learning how to use the HMIS system.

i. Community organizations that provide key services to PATH eligible clients and

describe coordination activities and policies with those organizations:

The PATH coordinator provides case management services to assist in accessing services for individuals. Outreach services are provided to the nine county region through case management. I have made and maintained contact with the Social Service and Housing agencies through all of Region VI. I follow up with these agencies as referrals are made to me regarding a consumer in their area. The PATH coordinator also provides emergency services which includes crisis screenings. As a PATH coordinator I assist individuals in accessing services such as housing; providing services including accessing specific housing programs such as Stutsman County Housing Authority, HUD, and Rural Development. I assist consumers in accessing food programs such as food pantries through places such as Community Action Program and Salvation Army. I help them access Social Service programs such as the 'SNAP' or food stamp program through Stutsman County Social Services, as well as community meal programs through local churches and the local Senior Citizen Center. As the PATH coordinator, I aid consumers in accessing medical health services through public health agencies throughout the nine county area which includes programs such as Medicaid and Medicare, community health organizations such as mental health and addiction services, employment and/or educational services. As a PATH coordinator, I maintain an updated list of available housing in the area and help PATH eligible consumers in meeting with potential landlords/managers of available housing. An initial mental health assessment is completed by the PATH coordinator or an in- depth psychological/psychiatric evaluation to diagnose a mental illness and to develop a treatment plan is done by a mental health professional through the South Central Human Service Center staff. Habilitation and rehabilitation services are often synchronized by the PATH coordinator and provided by the Vocational Rehabilitation staff at South Central Human Service Center; Job Service-North Dakota staff; or a contracted agency that will provide job training and support/extended employment services. Therapy and case management services are provided by the PATH coordinator while other community-based services are provided by South Central Human Service Center staff- i.e. partial care/day treatment, medication monitoring and medication management. Outpatient programs are provided by staff at the South Central Human Service Center or via contract with outside providers while inpatient treatment is provided at the North Dakota State Hospital. Specialized services for consumers who are seriously and persistently mentally ill combined with a substance abuse disorder are available with trained staff. In-services or educational programs that are conducted to inform and educate professionals on homeless issues and concerns are provided by the PATH coordinator as well as members of the local Community Coalition. Therapy, skill building training, supportive services in residential settings, daily living skills training/supervision and other services provided to consumers to assist them in maintaining the highest level of independent living arrangements possible are offered through case management services in the consumer's residence. PATH eligible consumers can and do volunteer at Progress Recovery Center. The PATH coordinator as well as other professionals working with a consumer who is homeless provides referral services for primary health care, job training, educational services, and housing services. Referrals for health care are normally coordinated through public health units, medical clinics providing services pro bono or social

service agencies responsible for financing health care. Referrals are also made to Social Security when it is appropriate in order to assist a consumer.

j. Gaps in current service systems:

The gaps in service systems that currently exist are in obtaining safe, affordable housing and the ability to access housing programs due to the lengthy waiting lists on these programs. Jamestown and the surrounding area does not offer transitional and long-term shelters. Housing for individuals with significant criminal backgrounds is an even greater challenge in the Jamestown and surrounding areas. We have utilized the Salvation Army to house individuals for brief periods of time in local hotels/motels.

k. Services available for clients who have both a serious mental illness and substance use disorder”

Integrated services are available for consumers who have a serious mental illness and substance abuse disorder. Referrals are made to South Central Human Service Center for assessment and referral for services. The North Dakota State Hospital is also located in Region VI and provides inpatient services for individuals with a serious mental illness and substance abuse disorder when needed. South Central Human Service Center also provides addiction counseling and case management services for individuals. The Human Service Center also has a Crisis Residential Unit what provides social detoxification when necessary and medical detoxification is provided inpatient. Following detoxification, there are a number of treatment options to the consumer. A consumer may be placed in one of three levels of care as determined by the American Society of Addiction Medicine criteria. These levels include low intensity treatment, intensive outpatient treatment, Day Treatment programming services and residential services. There are provided at South Central Human Service Center. If it is determined that the consumer is in need of intensive inpatient treatment, the North Dakota State Hospital is available through the screening process. Case management services, individual and group therapy are also available at South Central Human Service Center. Referrals are also made to private treatment facilities.

l. Strategies for making suitable housing available to PATH clients:

The PATH coordinator works closely with the housing agencies such as local and county housing authorities and the North Dakota Housing Agency. The coordinator maintains regular contact with the local rental agencies, landlords and housing managers to help locate safe, affordable housing for PATH-eligible clients. The statewide Shelter Plus Care program has also been utilized and is available for clients. The PATH coordinator maintains an updated list of available housing options. The working relationship with community stakeholders is very helpful when securing housing for PATH-eligible consumers due to the current housing shortage in the area. The PATH coordinator has made and maintains contact with other agencies throughout Region VI.

4. DESCRIBE THE PARTICIPATION OF PATH LOCAL PROVIDERS 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 the state. The PATH coordinator is an active member of the Community Coalition located in Jamestown which has approximately 30 members from the area. The Salvation Army operates as the area clearinghouse for most referrals that are homeless or at risk of being homeless. The local Salvation Army has rental assistance grants that presently have been depleted due to rising needs in the area. These funds have assisted individuals in securing permanent residence through payment of deposits and/or the first month rent, and maintaining current residences by assisting in reducing evictions and other subsequent problems that occur with evictions. Local county housing agencies have also assisted in paying deposits to help individuals to obtain safe, affordable housing.

5. DESCRIBE:

(A) THE DEMOGRAPHICS OF THE CLIENT POPULATION;

Age: 18-34 (10), 35-49 (4), 50-64 (11), 65-74 (0), unknown (46)

Gender: male (19), female (6)

Race: Hispanic or Latino (3), African American (1), American Indian or Alaska Native (2), White (22)

Mental Illness: Schizophrenia and Related Disorders (12), Other Psychotic Disorders (6), Affective Disorders (2), Personality Disorder (5), other serious mental illness (0), unknown or undiagnosed mental illness (46)

Co-occurring substance use: Co-occurring (39), non-co-occurring (32)

Veteran Status: Veteran (1), Non-veteran (22), Unknown (48)

(B) THE DEMOGRAPHICS OF THE STAFF SERVING THE CLIENTS;

The PATH Coordinator has worked for the past year within the mental health field. Prior to this, she worked with individuals with developmental disabilities. She also worked with juvenile services in a correctional based facility.

(C) HOW STAFF PROVIDING SERVICES TO THE TARGET POPULATION WILL BE SENSITIVE TO AGE; GENDER; AND RACIAL/ETHNIC DIFFERENCES OF CLIENTS;

The PATH Coordinator worked with a variety of consumers from different ethnic and racial backgrounds. She worked with consumers from 3 years old through the senior citizen population. She worked with Native Americans from several different reservations throughout my career as well as working in the southwest with different ethnicities and many different religions. In addition, she worked with food stamps and Medicaid as well as abused women and children.

(D) THE EXTENT TO WHICH STAFF RECEIVE PERIODIC TRAINING IN CULTURAL COMPETENCE.

At this time, the PATH Coordinator has not been able to enroll in the cultural competency training conducted by the Native American Training Institute. She will enroll and attend as soon as it is offered.

Because the PATH Coordinators are regular Department of Human Services' employees, they have the same opportunity as other human service center employees to participate in inservice training, workshops, and other conferences. PATH Coordinators are encouraged to attend the annual Clinical Forum on Mental Health Conference. This multi-day conference focuses on evidence-based practice and mental health recovery. Cultural competency training is scheduled for this year's event. The Department is implementing a cultural competency training program. All PATH Coordinators will be required to attend annual cultural competency training.

6. DESCRIBE HOW PERSONS WHO ARE HOMELESS AND HAVE SERIOUS MENTAL ILLNESSES AND ANY FAMILY MEMBERS WILL BE INVOLVED AT THE ORGANIZATIONAL LEVEL IN THE PLANNING, IMPLEMENTATION, AND EVALUATION OF PATH-FUNDED SERVICES.

The Advisory Council for the South Central Human Service Center is comprised of consumers, private citizens, community leaders/stakeholders and mental health service providers. This advisory council helps oversee the planning, implementation, and evaluation of the Human Service Center's programs and services which also include the direct services of the PATH coordinator to the individuals and families who are homeless or at risk of being homeless within this region. The Point in Time Survey which is administered on a yearly basis by the Continuum of Care Coordinator in Bismarck is used to help determine the scope and types of services the PATH coordinator delivers to the individuals who are homeless or at risk of becoming homeless within this region. Individuals who are homeless or formerly homeless are invited to join the North Dakota Coalition for the Homeless with their membership dues being waived if they decide to join the Coalition. Clients have been invited to join our local Community Coalition here in Jamestown and have joined. South Central Human Service Center continues to work closely with Progress Enterprises, Inc. which has consumer run services related to Peer Support programs and who also run a Thrift Store which is a resource for apartment/home supplies and furnishings for individuals who are PATH eligible. The store has available supplies of clothing, household supplies, toiletries, and other basic necessities to help provide for the needs of individuals and families with a serious and persistent mental illness as well as individuals who are dual diagnosed with a serious and persistent mental illness and substance abuse disorder. This program is tantamount in defraying the costs of furnishing apartments/homes for these individuals and their families.

7. PROVIDE A BUDGET NARRATIVE THAT PROVIDES DETAILS REGARDING PATH FUNDS.

Personnel: PATH funds are used for salary for the PATH Coordinator. This position, a mental illness case manager, provides PATH services throughout Region VI. The Federal

portion of the salary for the Coordinator is \$22,500 per year.

Fringe Benefits: Computed at 35 percent of the salary, fringe benefits include the cost of health insurance, worker's compensation, Social Security/Medicare, retirement, and unemployment insurance. The Federal portion of the benefits for each Coordinator is \$7,875 per year. As the PATH Coordinator is an employee of the North Dakota Department of Human Services, the 35 percent fringe benefit costs are the same as other employees of the Department.

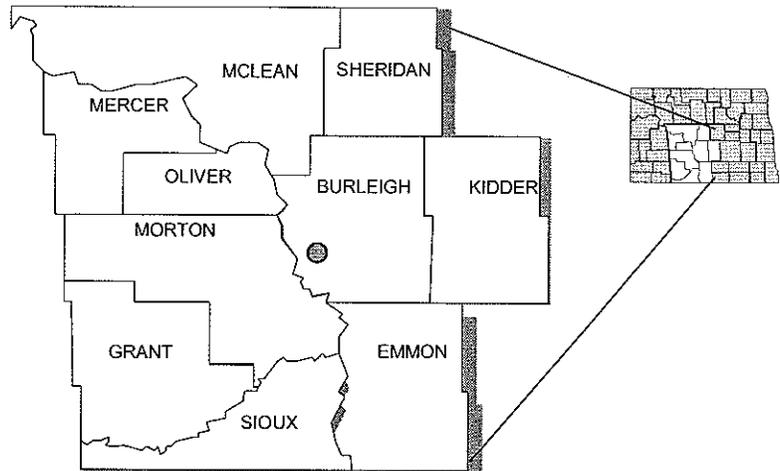
Travel: Travel costs will include the expenses for the PATH Coordinator to attend quarterly meetings scheduled for all Coordinators and to attend meetings of the North Dakota Coalition for Homeless People. Costs include travel at \$0.27 per mile, per diem of \$25 per day, and lodging at \$55 per day plus tax. This category will also cover the travel costs associated with providing services to homeless persons within the region. The estimated travel costs for each FTE Coordinator position is \$2,500 for the year. At this time, the \$2,500 travel allowance is sufficient to cover costs associated with outreach travel by the PATH Coordinators. If the PATH Coordinators need additional funding for travel, North Dakota will provide General Fund dollars to cover these costs.

Other: The PATH Coordinator has access to \$4,000 to cover the costs associated with providing one-time rent assistance, one-time security deposits, or representative payee services to maintain persons who are homeless and mentally ill in the community.

PERSONNEL	NUMBER OF FTES	PATH-FUNDED	SUBTOTAL	TOTAL
PATH Coordinator	1.0	\$22,500	\$22,500	
Fringe Benefits @ 35%		\$7,875	\$7,875	
Total Personnel				\$30,375
TRAVEL				
Travel for PATH Coordinator within the region including expenses to attend any required meetings and training sessions		\$2,500	\$2,500	
Total Travel				\$2,500
OTHER				
One-time financial assistance for the following: rental payments, security deposits, representative payee services, or medications		\$4,000	\$4,000	
Total Other				\$4,000
TOTAL				\$36,875

REGION VII

1. West Central Human Service Center (WCHSC)– Bismarck: WCHSC is a regional human service center and a part of the North Dakota Department of Human Services: a governmental agency. WCHSC serves the major cities of Bismarck and Mandan and a ten county area including the Standing Rock Indian Reservation. It has a population base of approximately 141,864.



Consumers are served in the through a linked spectrum of rehab services. These include: Crisis stabilization and resolution, case management, psychiatric/medical management including medication management and other health services, social services, residential services and supports, vocational and educational services and supported employment, social and leisure activities, counseling, psychological services, and addiction treatment. The PATH program will provide services to individuals aged 18+ who are literally homeless or at risk of homelessness.

2. BUDGET:

The Region VII PATH Program will receive \$36,875 in Federal PATH funds.

3. DESCRIBE THE ORGANIZATION'S PLAN TO PROVIDE COORDINATED AND COMPREHENSIVE SERVICES TO ELIGIBLE PATH CLIENTS

a. Projected number of adult clients to be contacted using PATH funds:

It is projected that 240 adult clients will be contacted using PATH funds in the year 2011.

b. Projected number of adult clients to be enrolled using PATH funds:

The PATH Coordinator will serve approximately 225 individuals in the year of 2011.

c. Percentage of adult clients served with PATH funds projected to be "literally" homeless:

This will include approximately 50% of which will be literally homeless, living in a shelter or on the street.

d. Activities to maximize the use of PATH funds to serve adults who are literally homeless as a priority population.

Region VII's PATH Coordinator will continue to visit the area's local homeless shelters as well as receive referrals from community agencies and internally through West Central Human Services to assist the clients that are homeless. The PATH Coordinator provides assessments when meeting with clients to assess the needs of the client. If the client is eligible for case management services, an intake is scheduled at West Central Human Service Center. After the intake is completed, the client is assigned a Case Manager. The PATH Coordinator and the assigned Case Manager work together to meet the needs of the client. This region does not have a high population of homeless who are living on the street. The PATH Coordinator has received calls from concerned citizens and community agencies who are aware of homeless sleeping in their cars, parks, streets, and campgrounds. The PATH Coordinator will try to find the individuals that are being referred and assess them for services and assist the client in finding shelter.

e. Strategies that will be used to target PATH funds for street outreach and case management as priority:

Region VII's PATH Coordinator will continue to visit the area's local homeless shelters as well as receive referrals from community agencies and internally through West Central Human Services to assist the clients that are homeless.

f. Activities that will be implemented to facilitate migration of PATH data into HMIS within 3-5 years:

Region VII's PATH Coordinator plans to receive HMIS trainings through a series of online trainings, live webcasts, instructor led trainings, and self-paced courses. The PATH Coordinator has received announcements of trainings via email from the PATH website. The PATH Coordinator also reviews the PATH website for any new updates regarding HMIS, Motivational Interviewing, and Evidenced Based Practices as it pertains to the PATH program.

g. Indicate whether the provider provides, pays for, or otherwise supports evidence-based practices and other training for local PATH-funded staff:

West Central Human Service Center has provided and continues to provide trainings in regards to evidence-based practices. Motivational Interviewing is discussed monthly in unit meetings. West Central encourages the Recovery based model and has implemented a co-occurring disorders group, a peer support specialist and group, and supportive employment program.

h. Indicate whether the provider provides, pays for, or otherwise supports HMIS training and activities to migrate PATH data into HMIS:

Region VII's PATH Coordinator plans to receive HMIS trainings through a series of online trainings, live webcasts, instructor led trainings, and self-paced courses. The

PATH Coordinator has received announcements of trainings via email from the PATH website. The PATH Coordinator also reviews the PATH website for any new updates regarding HMIS, Motivational Interviewing, and Evidenced Based Practices as it pertains to the PATH program.

i. Community organizations that provide key services to PATH eligible clients and describe coordination activities and policies with those organizations:

This PATH Coordinator works closely with the following service providers to ensure service coordination and availability for PATH eligible clients. The PATH Coordinator also networks at monthly local coalition meetings.

- Ruth Meiers Hospitality House is the local homeless shelter. The Men's Shelter contains 21 beds. The Women's and Children's shelter which assists single women and women with children has 23 beds. New Beginnings is a seven-unit transitional housing program that allows residents a two year stay. Horizons provides permanent housing to 25 men and women in a single room occupancy apartment complex. Ruth Meiers also has a Drop-In Center which provides a way to get off the street at night for people who do not want to or are unable to be sheltered. Ruth Meiers has a lunch soup kitchen provided four days a week. They also receive donated bread daily from local supermarkets and Sam's Club, which people in the community may help themselves to. Ruth Meiers' food pantry distributes food to individuals and families in the community who are in need. Ruth Meiers also houses the area's Single Point of Entry. The Single Point of Entry is a "one stop shop" for homeless and low income individuals and families in the community. The Single 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. Ruth Meiers has a Supportive Housing Program for chronically homeless individuals. This program can assist and support up to 10 individuals in their own apartment. Ruth Meiers offers prescription assistance and contract with a local pharmacy to help people fill their prescriptions. The PATH Coordinator attends weekly case management meetings at Ruth Meiers and works closely with the Single Point of Entry Coordinator, Ruth Meiers' staff, and the residents that reside in the Men's and Women's Shelters.
- Welcome House, Inc. serves chronic and long-term homeless families with children by placing them in local hotels and in their shelter. There are 17 beds in the shelter and they can provide 4 beds through a hotel. They provide case management and assist with finding permanent housing. Welcome House provides case management for up to three years for those clients needing this service. Welcome House is able to provide food baskets to individuals and families in need of food. Welcome House also provides furniture and other household items to their clients when they obtain permanent housing. 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.

- 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. Their Family and Friends program provides funding for after school and summer programs for children from families who cannot afford the fees.
- The Salvation Army provides assistance for emergency lodging, utilities, rent, and deposit. They also have a food pantry and serve a once weekly soup kitchen. 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. Salvation Army also offers an all day summer camp for the youth.
- The Abused Adult Resource Center (AARC) helps 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 a Criminal Justice Program (assist victims through the legal process). Seeds of Hope is a retail gift store that offers clothing and household items. The store also serves as employment and job training for victims of domestic violence.
- Youthworks provides services for teens, parents, and young adults under the age of 22. Youthworks has programs for runaway, homeless and street youth. They work with young parents and pregnant moms. Youthworks has programs for youth failing, being suspended or expelled from school. They do have shelter, can provide emergency care, and have transitional living apartments.
- Community Action Program Region VII, Inc (CAP7) provides emergency assistance for 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.
- This PATH Coordinator works with the following housing agencies: Burleigh County Housing Authority, Morton County Housing Authority, North Dakota Housing Finance Agency, and Community Action Shelter Plus Care.
 - Burleigh County Housing Authority has six programs PATH eligible clients may apply for. Currently this coordinator is having clients apply to two or three of the programs. The Shelter Plus Care Program (clients

must be homeless, disabled, and working with an agency) has about a 3 month wait to receive a voucher. Crescent Manor (for clients over the age of 55 years) has a 2-5 month wait. The Housing Choice Voucher program (HAP assistance) has about a 1-2 month wait to receive a voucher. Due to lack of funding, last summer, Burleigh County Housing Authority had to close the Housing Choice Voucher Program. They were able to open the program back up in May. At this time, these programs have the least amount of wait time to receive a voucher. The other housing options for Washington Court and Public Housing are closed unless the client is eligible for a three or four bedroom apartment and the wait for these apartments is 2 months – 2 years.

- Morton County Housing Authority provides housing vouchers for low-income individuals and families. PATH clients are referred to Morton County Housing if they are interested in living in Mandan. The current waitlist to receive a Morton County housing voucher is about 8 months. Morton County Housing also lost funding this past summer, making the waitlist much longer. A few years ago, you were able to get a voucher in 3 months.
 - North Dakota Housing Finance 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 Meiers Hospitality House is the landlord of this building. Horizons is an income based property. Apartments in these programs become available when occupants move out, so the wait for these programs varies.
 - Community Action's Shelter Plus Care Program provides vouchers to clients who are homeless, disabled, and working with an agency. At this time, this program is closed. Community Action hopes to have some more funding for the program in the near future.
- For Healthcare Services, PATH eligible clients are referred to the University of North Dakota's Center for Family Medicine, along with the two local hospitals, MedCenter One and St. Alexius. Bismarck Burleigh Public Health also offers numerous services for our clients. Custer Health is located in Mandan and also offers numerous healthcare services. Veteran's are referred to the above agencies as well as the Veteran's Administration Clinic located in Bismarck.
 - For employment, PATH eligible clients are referred to Job Service of North Dakota and Rehabilitation Consulting and Services (Vocation Rehabilitation). Both of these programs provide numerous services and assistance in helping clients find employment.
 - Burleigh County 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 also a 24-hour crisis line that clients can utilize.

j. Gaps in current service systems:

There is a need for a shelter for families with children. This 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. When homeless families need shelter, the family has to be separated. The man will have to stay at Ruth Meiers Men's Shelter and the woman and children will have to go to the Women's and Children's shelter. Welcome House can provide hotel stays for families with children but only for a limited time and only a certain number of families can be helped at a time. Welcome House is in the process of opening a shelter which will have 17 beds.

Transitional and/or Permanent Supportive Housing for homeless individuals with mental illness and/ substance abuse is also limited. Ruth Meier's Hospitality House has a permanent supportive housing program that can support ten individuals. This PATH Coordinator is seeing a large amount of clients becoming homeless again due to the lack of continued support.

Medication assistance for individuals who do not qualify or who are not covered by insurance is needed. Ruth Meiers has a prescription assistance program where they are able to assist in paying for prescriptions depending on the costs of the prescriptions. Bismarck Burleigh Public Health can also assist in paying for medications on an emergency basis. Due to lack of funding many individuals go without medications.

Transportation is also a need in the area. Bismarck Transit (door to door service) and CAT system (buses) have limited hours, and don't run on Sundays and certain holidays. 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 can not 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.

Housing is always a need in the area. 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. 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. There is a huge need for housing for sex offenders. At this time this PATH coordinator only knows of a couple of landlords who will rent to sex offenders and their apartments are usually full.

k. Services available for clients who have both a serious mental illness and substance use disorder”

West Central Human Service Center provides services to those who are dually diagnosed. The addiction unit offers a day treatment program, alcohol/drug evaluations, aftercare groups, relapse prevention program, and individual therapy. West Central also has a group for persons with co-existing (MI/CD) issues. This PATH Coordinator works with the Addiction Unit at West Central regarding individuals dually diagnosed. This includes assistance with finding housing, employment, and other services. They receive the same services as any other PATH eligible client would receive.

l. Strategies for making suitable housing available to PATH clients:

Ruth Meiers Hospitality House is an emergency shelter that can accommodate up to 21 men. Ruth Meiers Women and Children Shelter have 23 beds which assists single women and women with children. Abused Adult Resource Center has a shelter for families and individuals who are fleeing domestic violence and sexual assault. AARC also has transitional housing for women and children transitioning out of their shelter. Welcome House, Inc. serves chronic and long-term homeless families with children by placing them in local hotels and they are in the process of opening a shelter with 17 beds. There are four housing agencies that provide housing assistance: Burleigh County Housing, Morton County Housing, North Dakota Housing Finance Agency, and Community Action, Inc. AID, Inc, Salvation Army, Welcome House, and Community Action can assist with security deposits or rental assistance when funding is available.

At this time, the Shelter Plus Care Program through Burleigh County Housing is one of the quickest way for PATH eligible clients to receive a housing voucher. The wait time for this program is about three months. This is the first choice in housing due to the fact a care plan is required. This ensures the client will be following a care plan and working towards independent living. The Housing Choice Voucher Program (HAP assistance) through Burleigh County Housing has a wait of about 1-2 months. The other programs through Burleigh County Housing have a wait time of six months to two years. Morton County Housing has a wait time of at least eight months. North Dakota Housing Finance Agency has a wait time of about two to three months. Community Action's Shelter Plus Care Program is closed at this time and is not accepting applications. When this program opens, the wait for a voucher is about 1 month.

4. DESCRIBE THE PARTICIPATION OF PATH LOCAL PROVIDERS IN THE HUD CONTINUUM OF CARE PROGRAM AND ANY OTHER LOCAL PLANNING, COORDINATING OR ASSESSMENT ACTIVITIES

Region VII is very involved with the Continuum of Care program. This PATH Coordinator attends all continuum of care meetings and serves on the Mainstream Resource Committee of the continuum of care. The North Dakota Coalition for Homeless People, Inc. is the lead agency for the continuum of care and the Region VII PATH Coordinator is a member of this Coalition. The PATH Coordinator is also very 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.

5. DESCRIBE:

(A) THE DEMOGRAPHICS OF THE CLIENT POPULATION;

Age: 18-34 (77), 35-49 (88), 50-64 (40), 65-74 (1), unknown (0)

Gender: male (108), female (98)

Race: Hispanic or Latino (3), African American (6), American Indian or Alaska Native (77), White (119)

Mental Illness: Schizophrenia and Related Disorders (43), Other Psychotic Disorders (4), Affective Disorders (122), Personality Disorder (28), other serious mental illness (3), unknown or undiagnosed mental illness (6)

Co-occurring substance use: Co-occurring (94), non-co-occurring (110)

Veteran Status: Veteran (19), Non-veteran (176), Unknown (11)

(B) THE DEMOGRAPHICS OF THE STAFF SERVING THE CLIENTS;

Region VII's PATH Coordinator has a Masters Degree in Psychology and has about 9 years experience working with persons with mental illness. 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.

(C) HOW STAFF PROVIDING SERVICES TO THE TARGET POPULATION WILL BE SENSITIVE TO AGE; GENDER; AND RACIAL/ETHNIC DIFFERENCES OF CLIENTS;

There are no age barriers in any of the programs, with which the PATH Program is involved. It is the policy to not turn away services to anyone if they qualify.

(D) THE EXTENT TO WHICH STAFF RECEIVE PERIODIC TRAINING IN CULTURAL COMPETENCE.

In-services are held at WCHSC throughout the year, 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. This PATH Coordinator attends the Clinical Forum on Mental Health yearly which is sponsored by the North Dakota Department of Human Services.

Because the PATH Coordinators are regular Department of Human Services' employees, they have the same opportunity as other human service center employees to participate in inservice training, workshops, and other conferences. PATH Coordinators are encouraged to attend the annual Clinical Forum on Mental Health Conference. This multi-day conference focuses on evidence-based practice and mental health recovery. Cultural competency training is scheduled for this year's event. The Department is implementing a

cultural competency training program. All PATH Coordinators will be required to attend annual cultural competency training.

6. DESCRIBE HOW PERSONS WHO ARE HOMELESS AND HAVE SERIOUS MENTAL ILLNESSES AND ANY FAMILY MEMBERS WILL BE INVOLVED AT THE ORGANIZATIONAL LEVEL IN THE PLANNING, IMPLEMENTATION, AND EVALUATION OF PATH-FUNDED SERVICES.

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. 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.

7. PROVIDE A BUDGET NARRATIVE THAT PROVIDES DETAILS REGARDING PATH FUNDS.

Personnel: PATH funds are used for salary for the PATH Coordinator. This position, a mental illness case manager, provides PATH services throughout Region VII. The Federal portion of the salary for the Coordinator is \$22,500 per year.

Fringe Benefits: Computed at 35 percent of the salary, fringe benefits include the cost of health insurance, worker's compensation, Social Security/Medicare, retirement, and unemployment insurance. The Federal portion of the benefits for each Coordinator is \$7,875 per year. As the PATH Coordinator is an employee of the North Dakota Department of Human Services, the 35 percent fringe benefit costs are the same as other employees of the Department.

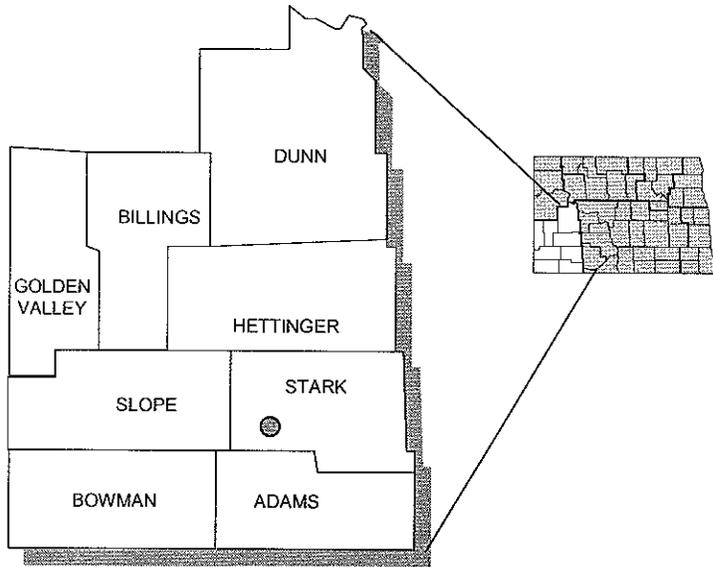
Travel: Travel costs will include the expenses for the PATH Coordinator to attend quarterly meetings scheduled for all Coordinators and to attend meetings of the North Dakota Coalition for Homeless People. Costs include travel at \$0.27 per mile, per diem of \$25 per day, and lodging at \$55 per day plus tax. This category will also cover the travel costs associated with providing services to homeless persons within the region. The estimated travel costs for each FTE Coordinator position is \$2,500 for the year. At this time, the \$2,500 travel allowance is sufficient to cover costs associated with outreach travel by the PATH Coordinators. If the PATH Coordinators need additional funding for travel, North Dakota will provide General Fund dollars to cover these costs.

Other: The PATH Coordinator has access to \$4,000 to cover the costs associated with providing one-time rent assistance, one-time security deposits, or representative payee services to maintain persons who are homeless and mentally ill in the community.

PERSONNEL	NUMBER OF FTES	PATH-FUNDED	SUBTOTAL	TOTAL
PATH Coordinator	1.0	\$22,500	\$22,500	
Fringe Benefits @ 35%		\$7,875	\$7,875	
Total Personnel				\$30,375
TRAVEL				
Travel for PATH Coordinator within the region including expenses to attend any required meetings and training sessions		\$2,500	\$2,500	
Total Travel				\$2,500
OTHER				
One-time financial assistance for the following: rental payments, security deposits, representative payee services, or medications		\$4,000	\$4,000	
Total Other				\$4,000
TOTAL				\$36,875

REGION VIII

1. **Badlands Human Service Center (BHSC) – Dickinson:** BHSC is a regional human service center and a part of the North Dakota Department of Human Services: a governmental agency. BHSC serves the major city of Dickinson and an eight county area. It has a population base of approximately 38,896. Consumers are served through a linked spectrum of rehab services. These include: Crisis stabilization and resolution, case management, psychiatric/medical management including medication



management and other health services, social services, residential services and supports, vocational and educational services and supported employment, social and leisure activities, counseling, psychological services, and addiction treatment. The PATH program will provide services to individuals aged 18+ who are literally homeless or at risk of homelessness.

2. **BUDGET:**

The Region VIII PATH Program will receive \$36,875 in Federal PATH funds.

3. **DESCRIBE THE ORGANIZATION'S PLAN TO PROVIDE COORDINATED AND COMPREHENSIVE SERVICES TO ELIGIBLE PATH CLIENTS**

- a. **Projected number of adult clients to be contacted using PATH funds:**

The projected number of adults who will be contacted using PATH funds is 65.

- b. **Projected number of adult clients to be enrolled using PATH funds:**

The projected number of adult clients to be enrolled using path funds is 30.

- c. **Percentage of adult clients served with PATH funds projected to be "literally" homeless:**

The projected percentage worked with that is "literally" homeless would be 35%.

- d. **Activities to maximize the use of PATH funds to serve adults who are literally homeless as a priority population.**

Services to be provided using PATH funds will be to find appropriate affordable housing, to assist with transportation, assist to apply for SSDI/SSI, to find supplies for establishing an apartment, to help access all services needed to live independently in

the community (i.e. food stamps, deposits for apartment, medical assistance, fuel assistance, etc.), to help access the food pantry and soup kitchen, to help access medical facilities, addiction services and/or counseling.

e. Strategies that will be used to target PATH funds for street outreach and case management as priority:

The PATH Coordinator will visit and/or make contacts with the eight counties in our region. Case management will be provided, to anyone asking for services from Badlands Human Service Center.

f. Activities that will be implemented to facilitate migration of PATH data into HMIS within 3-5 years:

PATH Coordinator's will be going through training to enable us to utilize the HMIS system and we will be set up as "user's" to allow us to input data into the HMIS system. The training will be provided and paid for by the PATH Coordinator's employer. The provider also supports evidenced-based practices and other training for local PATH-funded staff on an ongoing basis.

g. Indicate whether the provider provides, pays for, or otherwise supports evidence-based practices and other training for local PATH-funded staff:

Badlands Human Service Center has provided and continues to provide trainings in regards to evidence-based practices. Motivational Interviewing is discussed monthly in unit meetings. Badlands encourages the Recovery based model, peer support, and person-centered treatment planning.

h. Indicate whether the provider provides, pays for, or otherwise supports HMIS training and activities to migrate PATH data into HMIS:

PATH Coordinator's will be going through training to enable us to utilize the HMIS system and we will be set up as "user's" to allow us to input data into the HMIS system. The training will be provided and paid for by the PATH Coordinator's employer. The provider also supports evidenced-based practices and other training for local PATH-funded staff on an ongoing basis.

i. Community organizations that provide key services to PATH eligible clients and describe coordination activities and policies with those organizations:

Great Plains Clinic, Dickinson Clinic, and St. Joseph's Hospital provide medical care in Dickinson. There are medical services in Richardton, Mott, Hettinger, Bowman, Killdeer and Beach. Dickinson and Hettinger have the most complete services. Badlands Human Service Center has outreach in Bowman and Beach. St. Joseph's Hospital provides most of the care for homeless people especially for the people that are not eligible for medical assistance. Staff from St. Joseph's Hospital makes referrals to the PATH coordinator. Mental health services are provided by Badlands Human Service Center. Badlands Human Service Center provides addiction treatment

for the Region. Hettinger has a hospital and clinic. Richardton has a clinic, small hospital and a swing bed. Killdeer and Beach have clinics. Bowman has a small hospital and clinic services. Stark County Housing Authority has housing vouchers for all the counties in the Region and some income-based housing in the rural areas. Each of the eight counties in the region has income-based housing. Metro Plains Management manages the majority of the income-based units in Dickinson. Rehabilitation Consulting and Services helps people train and find jobs. A supported employment program is also a part of the services offered. Job Service North Dakota can also assist people with employment. Social opportunities and Peer Support Groups are available from the Prairie Rose Activity Center. One meal a day is served at the Prairie Rose Activity Center. The churches in the area offer religious and social opportunities. The Welcome Wagon Soup Kitchen is open on Thursday evenings. This is a place to get a meal and a place to socialize. Community Action Partnership has funding available to assist individuals and families that are at risk of homelessness or experiencing homelessness. Some medical services, payee services, deposit assistance, energy share assistance and budget training can be accessed through Community Action Partnership. The county social service agencies offer help such as food stamps, medical assistance, etc. The Salvation Army fills in with assistance when no other funds are available. This help can be for medication, transportation, utility bills and special situations that come up. Domestic Violence and Rape Crisis Center has shelter for families and women in transition. PATH-eligible clients can enter the continuum of care at any agency in this region. If the first contact person isn't the PATH Coordinator, they help the client contact the PATH staff. The PATH staff will help the individual sort out the services they will need to live in the community. The PATH staff then helps the client make contact with appropriate agencies. The amount of help given a client depends on need. Some individuals will need to be assisted to contact all agencies, while others may only need addresses and the name of a contact person. By working together, the agencies can stretch limited dollars farther.

j. Gaps in current service systems:

Gaps in the service system include medication assistance when the person is not eligible for Medicaid, Medicare, or medications not covered by patient assistance programs. Permanent supportive housing is limited and there is a waiting list for the service now. St. Joseph's Hospital no longer has a mental health unit and individuals that require in-patient mental health services, must go to Bismarck. Affordable transportation for people who live in rural areas to access services in service centers is limited. It is very difficult for individuals with felony records, bad credit histories, or past evictions to find housing in the community. There is a housing need for alcoholics who are actively drinking. At this time, Dickinson does not have a homeless shelter. Affordable housing is extremely difficult to impossible to find in our region at this time, due to increased oil field activity. People, who don't meet service categories but need services to live in the community, are another gap in the service system.

k. Services available for clients who have both a serious mental illness and substance use disorder"

Out-patient care is provided by Badlands Human Service Center through group

therapy, individual therapy and the RIS Program (Regional Intervention Services). Individuals can stay at the Residential Care Center (RCC) and attend day programming for addiction at Badlands Human Service Center. Psychiatric services are available through Badlands Human Service Center and the RCC has a Crisis Bed that is accessed, when needed. Sometimes out-of-region services are accessed. People in the prison systems have services available to them either in-house or through local service agencies.

I. Strategies for making suitable housing available to PATH clients:

Housing for PATH clients can be accessed in the Dickinson Community by working with Metro Plains Management or California Management Company. Local realtors and small property owners in the community maybe contacted, but affordable rentals are extremely difficult, if not impossible to find; due to increased oil activity in the area and a large influx of people. Stark County Housing Authority manages properties in the rural areas as well as Dickinson. Housing can be accessed in some of the more rural areas but transportation becomes an issue if the client is not MA eligible and has no money. Most housing is single-family units with one bedroom.

4. DESCRIBE THE PARTICIPATION OF PATH LOCAL PROVIDERS IN THE HUD CONTINUUM OF CARE PROGRAM AND ANY OTHER LOCAL PLANNING, COORDINATING OR ASSESSMENT ACTIVITIES

The PATH Coordinator is a member of the North Dakota Coalition for Homeless People. The North Dakota Coalition for Homeless People is the lead agency that writes the Continuum of Care. She serves on the Membership Committee of the Coalition. She is a member of the CoC Development Committee and serves on the Monitoring and Evaluation Sub-committee. She also participates in other sub-committees when the regional representative cannot participate in the meetings. She participates in local organizations and groups that deal with issues related to homelessness. She is an active member of The Southwest Homeless Coalition. Locally, members of the Southwest Homeless Coalition give presentations to schools, churches and organizations about homelessness in the area. Coalition members also consult with various agencies for the activities held that relate to homelessness. The PATH coordinator was part of an interagency group that developed a tenant education program for the region. The Southwest Homeless Coalition supports agencies that complete the point-in-time surveys in Region 8. A sub-committee of the Southwest Homeless Coalition designed a discharge checklist for staff and prisoners to use for discharge planning of prisoners at the Dakota Women's Correctional Rehabilitation Center. The PATH Coordinator was an active participant in the regional group that developed Southwest North Dakota's Ten-Year Plan to End Homelessness. The Southwest Homeless Coalition is the lead agency for the implementation of our region's 10 Year Plan to End Homelessness and is currently working on a Project Connect/Veteran's Stand Down that is scheduled for August 2011. The Southwest Homeless Coalition is also researching possibilities for a homeless shelter in our area.

5. DESCRIBE:

(A) THE DEMOGRAPHICS OF THE CLIENT POPULATION;

Age: 18-34 (7), 35-49 (12), 50-64 (9), 65-74 (2), unknown (0)

Gender: male (18), female (12)

Race: Hispanic or Latino (0), African American (0), American Indian or Alaska Native (2), White (28)

Mental Illness: Schizophrenia and Related Disorders (15), Other Psychotic Disorders (1), Affective Disorders (12), Personality Disorder (0), other serious mental illness (2), unknown or undiagnosed mental illness (0)

Co-occurring substance use: Co-occurring (10), non-co-occurring (20)

Veteran Status: Veteran (3), Non-veteran (27), Unknown (0)

(B) THE DEMOGRAPHICS OF THE STAFF SERVING THE CLIENTS;

The PATH coordinator spent six months in Fort Yates, ND, as a VISTA volunteer, taught in a resource room in New Town, ND, and worked as a tutor with adolescents on the Mental Health and Chemical Dependency Units at St. Joseph's Hospital, Minot, ND. She has taught special education, worked as a case manager for individuals with developmental disabilities, and worked in the Supported Employment Program with people with developmental disabilities, severe mental illness, traumatic brain injuries, and other disabilities. Her experiences have made her sensitive to the differences of clients and to the differences in cultural backgrounds.

(C) HOW STAFF PROVIDING SERVICES TO THE TARGET POPULATION WILL BE SENSITIVE TO AGE; GENDER; AND RACIAL/ETHNIC DIFFERENCES OF CLIENTS;

All populations are offered the same services regardless of any differences that may occur.

(D) THE EXTENT TO WHICH STAFF RECEIVE PERIODIC TRAINING IN CULTURAL COMPETENCE.

The staff person took course work in cultural issues in college and also completed the Cultural Competency Training Class conducted by the Native American Training Institute. The staff person attends in-service training available at the center and in the community. Staff completed Facilitating Consumer Recovery Through Best Practices Training. Staff attended the 2010 Clinical Forum on Mental Health and the 2010 West River Conference on Social Welfare, both of which had sessions on various topics that are very useful when working with homeless individuals. Staff completed training in Person Centered Treatment Planning, which focuses on the individual and incorporates cultural preferences in treatment planning. Staff completed training in Motivational Interviewing, which is a wonderful communication tool to assist a consumer in exploring what changes they may want to make in their lives in a culturally sensitive manner. Staff has also attended training for an assessment tool to screen new clients for TBI, Supportive Housing Academy

training, Peer Support training, P & A training on the Protection and Advocacy for Beneficiaries of Social Security Program (PABSS), and various Webinars on topics that impact individuals that are homeless.

Because the PATH Coordinators are regular Department of Human Services' employees, they have the same opportunity as other human service center employees to participate in inservice training, workshops, and other conferences. PATH Coordinators are encouraged to attend the annual Clinical Forum on Mental Health Conference. This multi-day conference focuses on evidence-based practice and mental health recovery. Cultural competency training is scheduled for this year's event. The Department is implementing a cultural competency training program. All PATH Coordinators will be required to attend annual cultural competency training.

6. DESCRIBE HOW PERSONS WHO ARE HOMELESS AND HAVE SERIOUS MENTAL ILLNESSES AND ANY FAMILY MEMBERS WILL BE INVOLVED AT THE ORGANIZATIONAL LEVEL IN THE PLANNING, IMPLEMENTATION, AND EVALUATION OF PATH-FUNDED SERVICES.

PATH-eligible individuals are involved with their treatment planning and goal setting right away, through their PCTP. Family members are involved whenever the situation warrants it and as often as possible, if the individual wants their participation. The center also conducts yearly surveys to enable clients to voice their feelings about the services they receive and any suggestions for improvements. Once individuals basic needs have been addressed and they are able to focus on other issues, they are encouraged to participate in organizations that deal with homeless issues. The Prairie Rose Activity Center is a client driven service and is utilized by PATH eligible clients. Some people who were PATH eligible now volunteer at the Center. Former homeless people have been members of the Southwest Homeless Coalition and the Salvation Army Unit. Family members of people who are PATH eligible are encouraged to become involved with the various agencies that deal with homelessness.

7. PROVIDE A BUDGET NARRATIVE THAT PROVIDES DETAILS REGARDING PATH FUNDS.

Personnel: PATH funds are used for salary for the PATH Coordinator. This position, a mental illness case manager, provides PATH services throughout Region VIII. The Federal portion of the salary for the Coordinator is \$22,500 per year.

Fringe Benefits: Computed at 35 percent of the salary, fringe benefits include the cost of health insurance, worker's compensation, Social Security/Medicare, retirement, and unemployment insurance. The Federal portion of the benefits for each Coordinator is \$7,875 per year. As the PATH Coordinator is an employee of the North Dakota Department of Human Services, the 35 percent fringe benefit costs are the same as other employees of the Department.

Travel: Travel costs will include the expenses for the PATH Coordinator to attend quarterly meetings scheduled for all Coordinators and to attend meetings of the North Dakota

Coalition for Homeless People. Costs include travel at \$0.27 per mile, per diem of \$25 per day, and lodging at \$55 per day plus tax. This category will also cover the travel costs associated with providing services to homeless persons within the region. The estimated travel costs for each FTE Coordinator position is \$2,500 for the year. At this time, the \$2,500 travel allowance is sufficient to cover costs associated with outreach travel by the PATH Coordinators. If the PATH Coordinators need additional funding for travel, North Dakota will provide General Fund dollars to cover these costs.

Other: The PATH Coordinator has access to \$4,000 to cover the costs associated with providing one-time rent assistance, one-time security deposits, or representative payee services to maintain persons who are homeless and mentally ill in the community.

PERSONNEL	NUMBER OF FTES	PATH-FUNDED	SUBTOTAL	TOTAL
PATH Coordinator	1.0	\$22,500	\$22,500	
Fringe Benefits @ 35%		\$7,875	\$7,875	
Total Personnel				\$30,375
TRAVEL				
Travel for PATH Coordinator within the region including expenses to attend any required meetings and training sessions		\$2,500	\$2,500	
Total Travel				\$2,500
OTHER				
One-time financial assistance for the following: rental payments, security deposits, representative payee services, or medications		\$4,000	\$4,000	
Total Other				\$4,000
TOTAL				\$36,875

APPENDIX E: AGREEMENTS

FISCAL YEAR 2011

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

- a) are suffering from serious mental illness; or (b) are suffering from serious mental illness and have a substance use disorder; and
- b) 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:

1. outreach;
2. screening and diagnostic treatment;
3. habilitation and rehabilitation;
4. community mental health;
5. alcohol or drug treatment;
6. 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;
7. case management services, including
 - a) 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.
 - b) providing assistance in obtaining and coordinating social and maintenance services for the eligible homeless individuals, including services relating to daily living activities, personal financial planning, transportation services, and habilitation and rehabilitation services, prevocational and vocational services, and housing

- c) providing assistance to the eligible homeless individual in obtaining income support services, including housing assistance, food stamps, and supplemental security income benefits;
 - d) referring the eligible homeless individual for such other services as may be appropriate; and
 - e) 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.
8. supportive and supervisory services in residential settings;
 9. referrals for primary health services, job training, education services and relevant housing services;
 10. housing services [subject to Section 522(h) (1)] including
 - a) minor renovation, expansion, and repair of housing;
 - b) planning of housing;
 - c) technical assistance in applying for housing assistance;
 - d) improving the coordination of housing services;
 - e) security deposits;
 - f) the costs associated with matching eligible homeless individuals with appropriate housing situations; and
 - g) one-time rental payments to prevent eviction.
 - h) 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 or 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

5. has a policy of excluding individuals from mental health services due to the existence or suspicion of a substance abuse disorder; or
6. 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

1. not more than 20 percent of the payments will be expended for housing services under Section 522(b)(10); and
2. the payments will not be expended
 - a) to support emergency shelters or construction of housing facilities;
 - b) for inpatient psychiatric treatment costs or inpatient substance abuse treatment costs; or
 - c) 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;
 - d) describes the coordinated and comprehensive means of providing services and housing to homeless individuals; and
 - e) 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 programs 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, 2012, prepare and submit a report providing such information as is necessary for

1. securing a record and a description of the purposes for which amounts received under the PATH Formula Grant Program were expended during fiscal year 2011 and of the recipients of such amounts; and
2. 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.

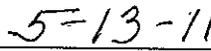
Section 529. Payments may not be made unless the State agreements are made through certification from the chief executive officer of the State.

State agrees to send a representative to any annual or biennial meetings of State PATH Contacts.

Charitable Choice Provisions:

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


Governor


Date

DISCLOSURE OF LOBBYING ACTIVITIES

Approved by OMB
0348-0046

Complete this form to disclose lobbying activities pursuant to 31 U.S.C. 1352
(See reverse for public burden disclosure.)

1. Type of Federal Action: <input type="checkbox"/> a. contract <input type="checkbox"/> b. grant <input type="checkbox"/> c. cooperative agreement <input type="checkbox"/> d. loan <input type="checkbox"/> e. loan guarantee <input type="checkbox"/> f. loan insurance	2. Status of Federal Action <input type="checkbox"/> a. bid/offer/application <input type="checkbox"/> b. initial award <input type="checkbox"/> c. post-award	3. Report Type: <input type="checkbox"/> a. initial filing <input type="checkbox"/> b. material change For Material Change Only: Year _____ Quarter _____ date of last report _____
4. Name and Address of Reporting Entity: <input type="checkbox"/> Prime <input type="checkbox"/> Subawardee Tier _____, if known: _____ <p style="text-align: center; font-weight: bold;">NOT APPLICABLE</p> Congressional District, if known: _____	5. If Reporting Entity in No. 4 is Subawardee, Enter Name and Address of Prime: Congressional District, if known: _____	
6. Federal Department/Agency:	7. Federal Program Name/Description: CFDA Number, if applicable: _____	
8. Federal Action Number, if known:	9. Award Amount, if known: \$ _____	
10. a. Name and Address of Lobbying Entity <i>(if individual, last name, first name, MI):</i>	b. Individuals Performing Services <i>(including address if different from No. 10a.) (last name, first name, MI):</i>	
11. Information requested through this form is authorized by title 31 U.S.C. section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when this transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be reported to the Congress semi-annually and will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.	Signature: <u>Carol K. Olson</u> Print Name: <u>Carol K. Olson</u> Title: <u>Executive Director</u> Telephone No.: <u>701-328-2538</u> Date: <u>5/13/11</u>	
Federal Use Only:		Authorized for Local Reproduction Standard Form - LLL (Rev. 7-97)

**DISCLOSURE OF LOBBYING ACTIVITIES
CONTINUATION SHEET**

Approved by OMB
0348-0046

Reporting Entity: _____ Page _____ of _____

NOT APPLICABLE

CHECKLIST

OMB Approval No. 0990-0317
Expiration Date: 08/31/2010

Public Burden Statement: Public reporting burden of this collection of information is estimated to average 4 - 50 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for

reducing this burden to HHS Reports Clearance Officer, 200 Independence Ave., SW, Humphrey Bldg., Room 531H, Washington, DC, 20201, ATTN: PRA (0990-0317). Do not send the completed form to this address.

NOTE TO APPLICANT: This form must be completed and submitted with the original of your application. Be sure to complete each page of this form. Check the appropriate boxes and provide the information requested. This form should be attached as the last pages of the signed original of the application.

Type of Application: New Noncompeting Continuation Competing Continuation Supplemental

PART A: The following checklist is provided to assure that proper signatures, assurances, and certifications have been submitted.

- 1. Proper Signature and Date on the SF 424 (FACE PAGE) Included NOT Applicable
- 2. If your organization currently has on file with HHS the following assurances, please identify which have been filed by indicating the date of such filing on the line provided. (All four have been consolidated into a single form, HHS 690)
 - Civil Rights Assurance (45 CFR 80) 8/22/1984
 - Assurance Concerning the Handicapped (45 CFR 84) 8/22/1984
 - Assurance Concerning Sex Discrimination (45 CFR 86) 8/22/1984
 - Assurance Concerning Age Discrimination (45 CFR 90 and 45 CFR 91) 6/16/1992
- 3. Human Subjects Certification, when applicable (45 CFR 46)

PART B: This part is provided to assure that pertinent information has been addressed and included in the application.

- 1. Has a Public Health System Impact Statement for the proposed program/project been completed and distributed as required? YES NOT Applicable
- 2. Has the appropriate box been checked on the SF-424 (FACE PAGE) regarding intergovernmental review under E.O. 12372 ? (45 CFR Part 100).....
- 3. Has the entire proposed project period been identified on the SF-424 (FACE PAGE)?.....
- 4. Have biographical sketch(es) with job description(s) been provided, when required?.....
- 5. Has the "Budget Information" page, SF-424A (Non-Construction Programs) or SF-424C (Construction Programs), been completed and included?
- 6. Has the 12 month narrative budget justification been provided?
- 7. Has the budget for the entire proposed project period with sufficient detail been provided?
- 8. For a Supplemental application, does the narrative budget justification address only the additional funds requested?
- 9. For Competing Continuation and Supplemental applications, has a progress report been included?

PART C: In the spaces provided below, please provide the requested information.

Business Official to be notified if an award is to be made.

Prefix: Ms. First Name: Brenda Middle Name: _____
 Last Name: Weisz Suffix: _____
 Title: Chief Fiscal Officer
 Organization: ND Dept. of Human Services
 Street1: 600 E. Boulevard Ave.
 Street2: _____
 City: Bismarck
 State: ND ZIP/Postal Code: 58505 ZIP/Postal Code4: _____
 Email Address: bweisz@nd.gov
 Telephone Number: 701-328-2397 Fax Number: 701-328-1545

Program Director/Project Director/Principal Investigator designated to direct the proposed project or program.

Prefix: Ms. First Name: JoAnne Middle Name: _____
 Last Name: Hoesel Suffix: _____
 Title: Director, Div. of MH & Sub. Abuse Svcs
 Organization: ND Dept. of Human Services
 Street1: 1237 W. Divide Ave.
 Street2: Suite 1C
 City: Bismarck
 State: ND ZIP/Postal Code: _____ ZIP/Postal Code4: _____
 Email Address: jhoesel@nd.gov
 Telephone Number: 701-328-8924 Fax Number: 701-328-8969

PART D: A private, nonprofit organization must include evidence of its nonprofit status with the application. Any of the following is acceptable evidence. Check the appropriate box or complete the "Previously Filed" section, whichever is applicable.

- (a) A reference to the organization's listing in the Internal Revenue Service's (IRS) most recent list of tax-exempt organizations described in section 501(c)(3) of the IRS Code.
- (b) A copy of a currently valid Internal Revenue Service Tax exemption certificate.
- (c) A statement from a State taxing body, State Attorney General, or other appropriate State official certifying that the applicant organization has a nonprofit status and that none of the net earnings accrue to any private shareholders or individuals.
- (d) A certified copy of the organization's certificate of incorporation or similar document if it clearly establishes the nonprofit status of the organization.
- (e) Any of the above proof for a State or national parent organization, and a statement signed by the parent organization that the applicant organization is a local nonprofit affiliate.

If an applicant has evidence of current nonprofit status on file with an agency of HHS, it will not be necessary to file similar papers again, but the place and date of filing must be indicated.

Previously Filed with: (Agency)

on (Date)

INVENTIONS

If this is an application for continued support, include: (1) the report of inventions conceived or reduced to practice required by the terms and conditions of the grant; or (2) a list of inventions already reported, or (3) a negative certification.

EXECUTIVE ORDER 12372

Effective September 30, 1983, Executive Order 12372 (Intergovernmental Review of Federal Programs) directed OMB to abolish OMB Circular A-95 and establish a new process for consulting with State and local elected officials on proposed Federal financial assistance. The Department of Health and Human Services implemented the Executive Order through regulations at 45 CFR Part 100 (Inter-governmental Review of Department of Health and Human Services Programs and Activities). The objectives of the Executive Order are to (1) increase State flexibility to design a consultation process and select the programs it wishes to review, (2) increase the ability of State and local elected officials to influence Federal decisions and (3) compel Federal officials to be responsive to State concerns, or explain the reasons.

Department's programs that are subject to the provisions of Executive Order 12372. Information regarding HHS programs subject to Executive Order 12372 is also available from the appropriate awarding office.

States participating in this program establish State Single Points of Contact (SPOCs) to coordinate and manage the review and comment on proposed Federal financial assistance. Applicants should contact the Governor's office for information regarding the SPOC, programs selected for review, and the consultation (review) process designed by their State.

Applicants are to certify on the face page of the SF-424 (attached) whether the request is for a program covered under Executive Order 12372 and, where appropriate, whether the State has been given an opportunity to comment.

The regulations at 45 CFR Part 100 were published in the *Federal Register* on June 24, 1983, along with a notice identifying the

BY SIGNING THE FACE PAGE OF THIS APPLICATION, THE APPLICANT ORGANIZATION CERTIFIES THAT THE STATEMENTS IN THIS APPLICATION ARE TRUE, COMPLETE, AND ACCURATE TO THE BEST OF THE SIGNER'S KNOWLEDGE, AND THE ORGANIZATION ACCEPTS THE OBLIGATION TO COMPLY WITH U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES' TERMS AND CONDITIONS IF AN AWARD IS MADE AS A RESULT OF THE APPLICATION. THE SIGNER IS ALSO AWARE THAT ANY FALSE, FICTITIOUS, OR FRAUDULENT STATEMENTS OR CLAIMS MAY SUBJECT THE SIGNER TO CRIMINAL, CIVIL, OR ADMINISTRATIVE PENALTIES.

THE FOLLOWING ASSURANCES/CERTIFICATIONS ARE MADE AND VERIFIED BY THE SIGNATURE OF THE OFFICIAL SIGNING FOR THE APPLICANT ORGANIZATION ON THE FACE PAGE OF THE APPLICATION:

Civil Rights – Title VI of the Civil Rights Act of 1964 (P.L. 88-352), as amended, and all the requirements imposed by or pursuant to the HHS regulation (45 CFR part 80).

Handicapped Individuals – Section 504 of the Rehabilitation Act of 1973 (P.L. 93-112), as amended, and all requirements imposed by or pursuant to the HHS regulation (45 CFR part 84).

Sex Discrimination – Title IX of the Educational Amendments of 1972 (P.L. 92-318), as amended, and all requirements imposed by or pursuant to the HHS regulation (45 CFR part 86).

Age Discrimination – The Age Discrimination Act of 1975 (P.L. 94-135), as amended, and all requirements imposed by or pursuant to the HHS regulation (45 CFR part 91).

Debarment and Suspension – Title 2 CFR part 376.

Certification Regarding Drug-Free Workplace Requirements – Title 45 CFR part 82.

Certification Regarding Lobbying – Title 32, United States Code, Section 1352 and all requirements imposed by or pursuant to the HHS regulation (45 CFR part 93).

Environmental Tobacco Smoke – Public Law 103-227.

Program Fraud Civil Remedies Act (PFCRA)