



**RICK SCOTT**  
GOVERNOR

June 28, 2017

Ms. Virginia Simmons  
Office of Financial Resources, Division of Grants Management  
Substance Abuse and Mental Health Services Administration  
1 Choke Cherry Road, Room 7-1091  
Rockville, Maryland 20857

Dear Ms. Simmons:

In accordance with instructions from the Center for Mental Health Services, Florida's application for the federal year 2017-2018 PATH Grant is enclosed.

The PATH grant funds will be used to continue Florida's efforts to offer community-based behavioral health and housing services to adults with serious mental illnesses and co-occurring disorders who are homeless or at risk of becoming homeless.

If you have any questions or concerns regarding the contents of this application, please contact Ms. Ute Gazioch, Director, Office of Substance Abuse and Mental Health, Department of Children and Families, at (850) 717-4322.

Sincerely,

A handwritten signature in blue ink, appearing to read "Rick Scott".

Rick Scott  
Governor

Enclosure

# I. State Information

## Funding Agreement

### FISCAL YEAR 2017

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

I hereby certify that the State of Florida agrees to the following:

##### Section 522(a)

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

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

##### Section 522(b)

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

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

##### Section 522(c)

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

##### Section 522(d)

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

##### Section 522(e)

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

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

**Section 522(f)**

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

**Section 522(g)**

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

**Section 522(h)**

The State agrees that:

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

**Section 523(a)**

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

**Section 523(c)**

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

**Section 526**

The State has attached hereto a Statement

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

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

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

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

**Section 527(a)(4)**

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

**Section 527(b)**

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

**Section 527(c)(1)(2)**

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

**Section 528(a)**

The State will, by January 31, 2018, prepare and submit a report providing such information as is necessary for:

- Securing a record and description of the purposes for which amounts received under the PATH Formula Grant Program were expended during

fiscal year 2017 and of the recipients of such amounts; and

- Determining whether such amounts were expended in accordance with the provisions of Part C- PATH.

**Section 528(b)**

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

**Section 529**

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

**Charitable Choice Provisions:**

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

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Name

Rick Scott

Title

Governor

Organization

State of Florida

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Signature:



Date: 6/28/2017

**Footnotes:**

## PROJECT NARRATIVE

### SECTION A: EXECUTIVE SUMMARY

Florida will use its Federal Grant Year 2017-2018 Projects for Assistance in Transition from Homelessness (PATH) allocation of \$4,332,860 to fund twenty-four PATH providers throughout the state. The grant is managed by the Florida Department of Children and Families (Department), Office of Substance Abuse and Mental Health (SAMH). The Department contracts with private, not-for-profit intermediaries called Managing Entities (MEs) to manage substance abuse and mental health resources including block grants, other federal grants, and state general revenue funding. In partnership with regional Department SAMH offices and through specific contract language, the MEs ensure PATH funds are utilized as required by the grant and s. 521 et seq. of the Public Health Service Act, as amended. Each of the Department's six operational regions has at least two (2) PATH programs.

PATH providers actively outreach to individuals who are homeless, screen for PATH eligibility, including mental illnesses or co-occurring mental illness and substance use disorders, and engage them over time to build trust. Once engaged, these individuals may access a variety of support services to assist them in their recovery and end their homelessness. In the aggregate, current providers offer all the PATH-eligible activities during the course of the grant period. However, not every PATH provider delivers the full array of services. Each provider completes an annual Local Intended Use Plan (LIUP) that specifies the eligible services it offers. Many Florida PATH providers integrate the PATH program into their existing service array for this target population, and all work closely with the regional homeless Continuums of Care (CoC) for coordination and planning purposes. Florida PATH programs place emphasis on street outreach and case management activities to engage individuals who are literally homeless and are not already connected with mainstream services. The ultimate goal is for participants to attain permanent housing, with a choice of mental health and substance abuse services and supports as an integral step in recovery from mental illnesses and substance use disorders.

The Office of SAMH houses the State PATH Contact (SPC) responsible for grant management and the provision of technical assistance to the MEs, regional SAMH staff, and PATH providers. The SPC facilitates SOAR training and communicates other relevant training opportunities including Motivational Interviewing, Housing First, and Permanent Supportive Housing offered through Florida Supportive Housing Coalition, Florida Housing Coalition, and others.

The table below gives an overview of providers receiving PATH funds in Federal Grant Year 2017-2018. The numbers of individuals to be contacted, enrolled, and literally homeless are projected. The LIUPs contain more detail regarding each provider.

Table 1: Florida PATH Providers

PATH Funds	Match/ Source	Service Area	# of Contacts*	# Enrolled*	% Literally Homeless*
<b>Apalachee Center – Community Mental Health Center</b>					
\$157,500	\$52,500/ investment income and center profit	Leon County	850	250	100%
<b>Aspire Health Partners – Community Mental Health Center</b>					
\$237,110	\$79,037/ county funds and private donations	Orange County	1500	800	40%
<b>BayCare Behavioral Health – Community Mental Health Center</b>					
\$198,164	\$66,055/ volunteer hours, private fundraising, and state general revenue	Pasco County	500	65	25%
<b>Chautauqua Healthcare Services–Not-for-profit Mental Health Organization</b>					
\$127,500	\$56,401	Okaloosa and Walton Counties	480	145	100%
<b>Circles of Care – Community Mental Health Center</b>					
\$81,592	\$27,197/ state general revenue	Brevard County	150	140	60%
<b>David Lawrence Center – Community Mental Health Center</b>					
\$107,599	\$35,866/ county funds	Collier County	185	72	60%
<b>Directions for Living –Behavioral Health and Child Welfare Agency</b>					
\$355,655	\$118,552/ local government, and private donations	Pinellas County	200	150	75%
<b>First Step of Sarasota –Not-for-profit Human Service Organization</b>					
\$85,788	\$28,596/ state and county funds, in-kind and private fees	Sarasota County	200	120	80%
<b>Gracepoint – Community Mental Health Center</b>					
\$240,470	\$80,157/ state general revenue	Hillsborough County	500	200	85%
<b>Guidance Care Center – Community Mental Health Center</b>					
\$90,000	\$30,000/ county funds	Monroe County	200	312	40%

<b>Henderson Behavioral Health –Behavioral Health Care Organization</b>					
\$248,110	\$83,113/ interest on investments	Broward County	0	135	100%
<b>Jerome Golden Center – Community Mental Health Center</b>					
\$180,000	\$60,000/ county grants	Palm Beach County	500	250	80%
<b>Mental Health Resource Center – Community Mental Health Center</b>					
\$243,091	\$218,772/ City of Jacksonville	Duval County	400	150	75%
<b>Meridian Behavioral Healthcare – Community Behavioral Health Center</b>					
\$116,972	\$38,993/ county funds and private donations	Alachua County	850	200	80%
<b>Mid Florida Homeless Coalition, Inc. Not-for-Profit</b>					
\$113,475	\$37,825	Citrus County	180	110	97%
<b>New Horizons Community Mental Health Center – Community Mental Health Center</b>					
\$465,000	\$155,000/ private donations and investment income	Miami-Dade County	600	400	80%
<b>New Horizons of the Treasure Coast – Community Mental Health Center</b>					
\$300,000	\$100,000/ county funds	St. Lucie County	250	156	58%
<b>Park Place – Community Mental Health Center</b>					
\$71,157	\$27,483/ county funds	Osceola County	90	80	75%
<b>SalusCare – Community Mental/Substance Abuse Health Center</b>					
\$108,740	\$36,247/ county and private pay funds	Lee County	200	150	50%
<b>Stuart Marchman Act Behavioral Health Services, Inc.</b>					
\$228,907	\$76,302/ private fundraising	Volusia County	250	80	95%

TaskForce Fore Ending Homelessness –Not-for-profit Homeless Outreach Agency					
\$72,934	\$24,311/ county funds, United Way, and private donations	Broward County	4,600	325	100%
The Centers – Community Mental Health and Substance Abuse Agency					
\$89,794	\$29,931/ state general revenue and fees	Citrus County	317	83	38%
Tri County Human Services, Inc. - Community Substance Abuse, Mental Health Organization					
\$188,584	\$62,861/ county funds and retained earnings	Polk County	220	125	65%
United Way of Suwannee Valley, Inc. - Not-for-Profit					
\$127,761	\$42,587/United Way	Columbia	120	84	98%
State Totals					
\$4,236,044	\$1,566,275		13,342	4,582	Average % literally homeless – 73%

\* Estimates

#### Florida PATH Budget Summary for Federal Grant Year 2017-2018

Direct Services/Contractual (total for all local PATH Programs):	\$4,235,903
Administrative Cost (total for Department):	\$ 96,957
Total Federal Allocation:	\$4,332,860
Provider Match:	\$1,567,786

Total Florida PATH Program: \$5,900,646\*

\*Please note that some PATH providers voluntarily contribute more than the minimum amount of match required. Therefore, the total amount of the PATH allocation is larger than the federal allocation requirement.

Florida will use \$4,235,903 to fund community providers to deliver direct assistance to individuals with serious mental illnesses and co-occurring disorders who are homeless or at imminent risk of homelessness. The LIUPs provide individual provider budget details. Federal PATH funds in the amount of \$96,957 will be retained at the Department’s headquarters office for operational functions including travel, training, technical assistance, and development of a housing locator. Through a partnership with the Florida Housing Finance Corporation, the Office of SAMH plans to design and implement a web-based application that assists PATH providers locate safe and affordable housing units. The Pre-Screening, Assessment, Intake, and Referral

(PAIR) data system is a waitlist management system, which includes Section 811 housing units. PAIR allows for the pre-screening of potentially qualified individuals through an initial questionnaire. Individuals who are preliminarily eligible undergo continued assessment to collect more details for the matching process. The provider agencies with access to PAIR will facilitate the matching and referral of qualified applicants to appropriate housing. The system will further support ongoing communication between the property's landlord and the PATH provider.

## SECTION B: STATE-LEVEL INFORMATION

Florida's Council on Homelessness (Council) 2016 Annual Report<sup>1</sup> details data regarding the state's homeless population. The report is based on information provided by the local homeless coalitions in Florida utilizing Point-In-Time count data. In 2016, these coalitions reported that approximately 33,502 individuals were living in shelters or on the street, a decrease from 35,965 in 2016. The following were the primary conditions reported:

Physical disabilities (26%);  
Substance abuse (33.2%);  
Mental illness (34.2%);  
HIV/AIDS (3.2%); and  
Developmental disabilities (3.4%).

Most significantly for PATH programs, the percentage of persons who are homeless and reporting serious mental illnesses decreased by 2,463 from 2015 to 2016. This is the target population, including those with co-occurring substance use disorders, served by Florida's PATH programs.

### **Florida's Operational Definitions for PATH Programs**

1. *Individual Experiencing Homelessness* – The state PATH-related operational definition for an individual experiencing homelessness must be as least restrictive as defined by the Public Health Service (PHS) Act: “an individual who lacks housing (without regard to whether the individual is a member of a family), including an individual whose primary residence during the night is a supervised public or private facility that provides temporary living accommodations, and an individual who is a resident in transitional housing.
2. *Imminent Risk of Becoming Homeless* – The definition of imminent risk of homelessness commonly includes one or more of the following criteria: doubled-up living arrangements where the individual's name is not on a lease, living in a condemned building without a place to move, having arrears in rent/utility payments, receiving an eviction notice without a place to move, living in temporary or transitional housing that carries time limits, and/or being discharged from a health care or criminal justice institution without a place to live.
3. *Serious Mental Illness* – The definition of adults with serious mental illness generally refers to individuals 18 years of age or older with a diagnosable mental health disorder of

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<sup>1</sup>See, <http://www.dcf.state.fl.us/programs/homelessness/docs/2016AnnualReport.pdf>, retrieved April 12, 2017

such severity and duration as to result in functional impairment that substantially interferes with or limits major life activities.

4. *Co-occurring Serious Mental Illness and Substance Use Disorders* - The definition for co-occurring serious mental illness and substance use disorders generally refers to individuals who have at least one serious mental health disorder and a substance use disorder, where the mental health disorder and substance use disorder can be diagnosed independently of each other.

### **Veterans**

According to data sources, Florida experienced a significant decrease in veteran homelessness in the past year, with a reduction of more than 26 percent. Florida has a veteran population of 1,558,000,<sup>2</sup> of which 2,900 of those veterans are experiencing homelessness. One Florida CoC, Volusia-Flagler, has been officially certified by the federal government as having effectively ended veteran homelessness by reaching “functional zero.” A significant cause for Florida’s substantial decrease in the rate of homelessness among veterans are local and national initiatives to end veteran homelessness<sup>3</sup>. Many PATH providers offer details regarding the provision of housing and behavioral health services to veterans in their LIUPs.

### **Recovery Support**

PATH services and supports are person-driven, community-based, and results-oriented. PATH-funded programs prioritize outreach to increase access to services for individuals who are homeless and have mental illnesses, and who lack the resources to access these supports on their own. PATH-funded staff provide street outreach at locations known to be frequented by individuals who are homeless to engage them into care. Many of the Florida PATH programs hire peer specialists who have lived experience with homelessness. Once engaged, PATH-funded individuals have access to an array of services and supports that can assist in recovery, with a focus on health, home, purpose, and community. Services are responsive to the enrollee’s needs and choices. Participation is not contingent on factors such as sobriety or acceptance of medication. Services and supports are designed to help PATH participants identify and achieve their own recovery goals and promote self-efficacy.

### **Alignment with PATH Goals**

Florida’s PATH programs place great emphasis on street outreach and case management activities to engage individuals experiencing chronic homelessness who are not already connected with mainstream services. When the street outreach is not provided directly by PATH-funded staff, the programs partner with existing outreach teams in the community. The ultimate goal is to attain permanent housing with needed behavioral health supports (if desired by the PATH participant) as an integral step in the individual’s recovery. Each provider details strategies to accomplish this in the LIUP.

### **Alignment with the State Comprehensive Mental Health Services Plan**

Florida’s 2017 – 2019 SAMH Plan incorporates several priorities that align with the services provided through PATH, such as, enhancing the community-based service array to shift from an

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<sup>2</sup> See, [https://www.va.gov/vetdata/docs/SpecialReports/State\\_Summaries\\_Florida.pdf](https://www.va.gov/vetdata/docs/SpecialReports/State_Summaries_Florida.pdf), retrieved April 12, 2017

<sup>3</sup> See, <http://www.dcf.state.fl.us/programs/homelessness/docs/2016AnnualReport.pdf>, retrieved April 12, 2017

acute care model to a recovery based model and improving access to services in both rural and urban areas.

The following SAMH initiatives aim to meet these priorities over the next five years:

1. Implement care coordination practices for high risk/high utilizer populations and persons at risk of entering and being discharged from state treatment facilities;
2. Promote peer support services; and
3. Increase opportunities for individuals to reside in permanent supportive housing.

The plan also addresses the Department's approach to linking individuals who are homeless to services through the PATH Program. The LIUPs represent each providers' approach to delivering services that are consistent with the plan. PATH programs link participants to non-Department-funded supports to ensure a successful transition from homelessness to self-efficacy.

### **Alignment with the State Plan to End Homelessness**

The primary objective of Florida's PATH-funded programs is to move people toward permanent housing. The goal is to actively engage individuals who meet the criteria, end their homelessness, and engage them in services and supports that will help them in their continued recovery. Florida's State Plan, includes the following<sup>4</sup>:

1. Increase opportunities for individuals to reside in permanent supportive housing;
2. Develop targeted outreach and engagement strategies;
3. Enhance data collection systems; and
4. Implement care coordination practices for high risk/high utilizer populations

The Department will continue to support activities that promote housing and employment within a recovery framework through the following activities during the coming year:

1. Technical assistance to local PATH programs and Department staff to ensure compliance with PATH requirements and best practices, including street outreach, engagement, trauma-informed care, and recovery orientation;
2. Expansion of the Housing Initiative by MEs.
3. Focusing on how to expand employment initiatives throughout the State.

Florida's headquarter and regional SAMH offices are working with the MEs to ensure that the PATH providers integrate disaster preparedness and emergency planning into their continuity of care plans, and that they update and test their emergency response plans. This is being accomplished by ensuring that all PATH provider's plans use the following framework:

- Each person's response to a disaster is unique, based on individual factors, such as his/her trauma history, health status, culture, beliefs, social support systems, and personal resiliency. Reactions to the event can be cognitive, emotional, physical, behavioral, social, (check throughout) and spiritual, and may not manifest for several weeks, months, and even years following the incident.
- Disaster preparedness and response must be coordinated at all levels, including local, state, and federal, to mitigate the short and long-term disaster-related distress, prevent stress related morbidity, and implement a coordinated, sustained recovery operation.
- Respond to the immediate impact of a disaster event.

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<sup>4</sup> See, <http://www.dcf.state.fl.us/programs/samh/publications/FL-SAMH-PlanFY17-19.pdf>, retrieved April 12, 2017

- Assist Florida’s residents and visitors to recover from the impact of a disaster over the long term.
- Establish a behavioral health component in the County Emergency Management Plan (CEMP).
- Establish stress management procedures for first responders and caregivers.

### **Process for Providing Public Notice**

Section 394.75, F.S., requires the Department to develop plans for public input at the state and local levels. The Department must ensure that public input and comment are solicited and factored into the development of those plans. Additionally, s. 394.75, F.S., requires the plan to address the development of independent housing units, the development of supported employment services, and the provision of treatment services for persons with co-occurring mental illnesses and substance use disorders.

The Department’s integrated planning approach ensures that the needs of Floridians who are homeless are included when developing region-specific strategic plans. Local providers and consumers collaborate when making decisions and changing policies, as outlined in the LIUPs.

### **Programmatic and Financial Oversight**

SAMH regional offices assign contract managers who are responsible for the management and oversight of Managing Entity contracts. Monitoring activities involve review of programmatic components and financial considerations. In addition to regional contract management, the SPC provides technical assistance to local PATH programs. The SPC is available to conduct site visits with the MEs, using the SPC handbook and provide technical assistance when issues require immediate attention.

### **Selection of PATH Local-Area Providers**

PATH funds are allocated to the MEs via contract; the MEs then subcontract directly with PATH providers. Allocations are based on each area’s percentage of Florida’s homeless population as determined by the annual CoC Point-In-Time Counts. The regional SAMH Program Director, MEs, and SPC collaborate to select local service providers based on their experience with the target population, veterans, and their ability to provide the array of PATH services.

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

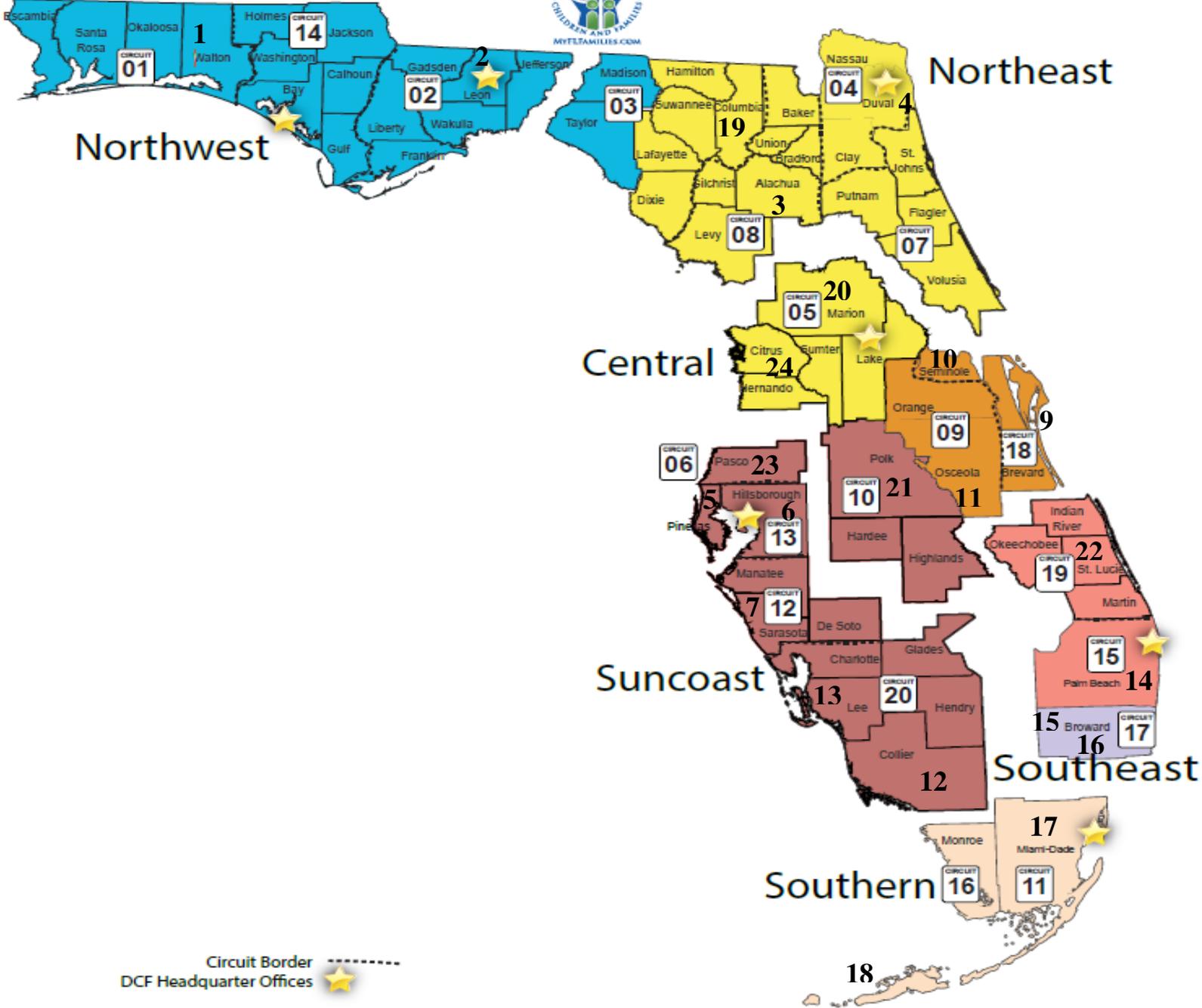
The directory and corresponding map below indicate the location of all PATH-funded providers. The number of individuals who are literally homeless with serious mental illnesses (LHISMI) in the areas is based on information obtained from Florida's 2016 CoC Homeless Populations and Subpopulations data report.<sup>5</sup>

Table 2: Location of PATH Providers in Relation to Individuals with Serious Mental Illnesses who are Experiencing Homelessness

Provider	City, County	# LHISMI
1. Chautauqua Healthcare Services	Defuniak Springs, Walton County	145
2. Apalachee Center	Tallahassee, Leon County	166
3. Meridian Behavioral Healthcare	Gainesville, Alachua County	384
4. Mental Health Resource Center	Jacksonville, Duval County	513
5. Directions for Living	Clearwater, Pinellas County	583
6. Gracepoint	Tampa, Hillsborough County	280
7. First Step of Sarasota	Sarasota, Sarasota County	168
8. Circles of Care	Melbourne, Brevard County	114
9. Aspire Health Partners	Orlando, Orange County	201*
10. Park Place Behavioral Healthcare Health Services	Kissimmee, Osceola County	
11. Stuart Marchman Act Behavioral	Daytona Beach, Volusia County	200
12. David Lawrence Center	Naples, Collier County	6
13. SalusCare	Fort Myers, Lee County	91
14. Jerome Golden Center	West Palm Beach, Palm Beach County	533
15. Henderson Behavioral Health	Ft. Lauderdale, Broward County	525*
16. Taskforce Fore Ending Homelessness	Ft. Lauderdale, Broward County	
17. New Horizons CMHC	Miami, Dade County	953
18. Guidance / Care Center	Key West, Monroe County	64
19. United Way of Suwannee Valley, Inc.	Lake City, Columbia County	22
20. The Centers	Ocala, Marion County	5
21. Tri-County Human Services	Lakeland, Polk County	78
22. New Horizons of the Treasure Coast	Ft. Pierce, St. Lucie County	131
23. BayCare Behavioral Health	New Port Richey, Pasco County	144
24. Mid Florida Homeless Coalition, Inc.	Iverness, Citrus County	51

\*These providers are located within the same CoC; the number reflects the combined total of LHISMI in the area.

<sup>5</sup> See, [https://www.hudexchange.info/programs/coc/coc-homeless-populations-and-subpopulations-reports/?filter\\_Year=2016&filter\\_Scope=Coc&filter\\_State=FL&filter\\_CoC=&program=Coc&group=PopSub](https://www.hudexchange.info/programs/coc/coc-homeless-populations-and-subpopulations-reports/?filter_Year=2016&filter_Scope=Coc&filter_State=FL&filter_CoC=&program=Coc&group=PopSub), retrieved March 27, 2017.



### **Matching Funds**

SAMHSA requires that all participating PATH providers generate a non-federal contribution of not less than \$1 for each \$3 of federal PATH funds received. These funds must be available throughout the life of the grant period. Matching in-kind funds may be used only to support PATH-eligible services. This match requirement is embedded in the providers' contract documents and verified through financial monitoring of PATH providers by the MEs. PATH providers utilize a variety of match sources including state general revenue, private donations, county funding, non-federal grants, city funding, and fees to meet the match requirement. Each provider's source of match are specified in the LIUPs, alongside a detailed description of how matching funds will be used.

### **Other Designated Funding**

Budget support for Florida's publicly-funded community mental health system comes from three sources: (a) state general revenue, (b) federal mental health block grant, and (c) federal grants trust fund. The Department uses these funds to contract with MEs for a broad array of integrated services and supports. These blended funds are made available to MEs to purchase services during the fiscal year to fill unmet needs in their specific regions. PATH funding falls within the federal grants trust fund category. All funds appropriated serve people with serious mental illnesses or co-occurring disorders, and as such, individuals who are homeless or at imminent risk of homelessness with serious mental illnesses or co-occurring disorders fall into the State's eligibility category. There is no other funding set-aside designated specifically for people who are homeless, aside from PATH funds. The Department's Office on Homelessness is operated administratively within the Office of SAMH. This assists Florida with effectively serving individuals who are experiencing homelessness and have mental illnesses and substance use disorders.

### **Data**

Presently, all of Florida's twenty-four PATH-funded providers are fully entering data for PATH-enrolled individuals into HMIS. The State hosts several different vendors and systems with varying capabilities, and some providers continue to track data in a secondary system because they are not yet able to extract all required data fields for PATH annual reports from the HMIS system. The providers are informed that PATH funds may be utilized in their individual budgets for HMIS data migration purposes. The CoCs provide on-going training and technical assistance for HMIS users in their respective areas. If needed, the various software providers of HMIS also provide technical assistance. HUD also provides training annually on updates to requirements for the software to capture data elements as needed. The Department does not provide HMIS training because there are multiple providers using different platforms for the software. There will be a HMIS track at this year's Supportive Housing Conference to assist the CoCs and PATH providers with the use of HMIS.

### **Training**

The Department provides free trainings to PATH and other SAMH providers throughout the state on topics such as Motivational Interviewing, Trauma-Informed Care, Cultural and Linguistic Competence, Veteran's Issues, and many others. Through contract, the Department

provides scholarships for certification-related fees for persons seeking initial certification, reinstatement, or renewal as a Certified Recovery Peer Specialist.

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

The SPC connects PATH providers to SOAR online training to assist staff in completing effective SSI/SSDI applications for benefit acquisition. The SPC also provides technical assistance to SOAR-trained PATH provider staff and schedules quarterly training and TA webinars via Policy Research Associates, the federally-contracted SOAR technical assistance provider. Additionally, all PATH providers have at least one trained SOAR staff member.

Later this year Florida will hold its second annual SOAR Across Florida Meeting. The conference will be held at the SunCoast regional office in Tampa, Florida, and will be hosted by the Department. The SAMSHA SOAR Technical Assistance Center liaison to the state, Dazara Ware, will facilitate the general sessions. Attendees will include ME staff, PATH provider staff, CoC staff, representatives from the Department of Corrections, the Division of Vocational Rehabilitation, the Social Security Administration, and other stakeholders. The focus of this year's meeting is benefits, housing, and employment, with an emphasis in Care Coordination.

All MEs are contractually required to ensure that providers implement the SOAR process within the contractually defined geographic areas. Providers must have case managers trained in and using the SOAR model. The ME must identify a local planning team and develop an action plan for the expansion of SOAR practices, ongoing funding, and sustainability.

### **Coordinated Entry**

The state of Florida has 27 CoCs who have individual coordinated entry programs. These programs are implemented throughout the state and assist Florida with prioritizing assistance based on vulnerability and severity of service needs to ensure that people who need assistance the most can receive it in a timely manner<sup>6</sup>. Coordinated entry processes also provide information about service needs and gaps to help communities plan their targets and identify needed resources.

PATH providers engage with the CoC to support the coordinated entry in the catchment areas where persons experiencing homelessness accessing system-wide benefits are entered through coordinated entry for assessments, eligibility and tracking purposes. Providers engage in monthly meetings to be aware of changes in the system or other issues with entry (i.e., if the system is experiencing a backlog or placement issues, etc.). In some areas, coordinated entry has been in place for a longer period than in other areas.

The Department's Office on Homelessness monitors the local CoC's ability to coordinate and plan within their respective areas, their ability to connect people with mainstream benefits and resources, and the effectiveness of programs to end homelessness. Since the implementation of the housing coordinators; CoC, housing coordinator, and PATH providers work together through coordinated entry referrals to assess services and mainstream benefits for individuals in need.

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<sup>6</sup>See, <https://www.hudexchange.info/resources/documents/Coordinated-Entry-Policy-Brief.pdf>; retrieved March 27, 2017.

## **Justice Involved**

PATH program participants have access to services and supports that are part of the behavioral health system of care regardless of involvement in the criminal justice system. Behavioral health services and supports include the SOAR model, which can be funded by PATH funds at the discretion of the provider. SOAR is used to assist individuals with a history of criminal justice involvement to obtain benefits to increase access to health care. Some providers use the SOAR process to in-reach to individuals in jails. PATH funds are also used for outreach to individuals who are homeless, which includes those with a history of criminal justice involvement.

The Department is planning to utilize part of the State PATH administrative funds to purchase access to the PAIR system. The PAIR application allows case managers to filter by many criteria, including criminal justice involvement. This will streamline the application process, making referrals to housing resources more efficient and getting individuals into housing more quickly.

Florida has taken many steps to increase its support for people with a history of involvement in the criminal justice system. The Criminal Justice, Mental Health, and Substance Abuse (CJMHS) Reinvestment Grant Program (Program) is administered by the Office of SAMH. The purpose of CJMHS Program is to plan, implement, or expand initiatives that increase public safety, avert increased spending on criminal and juvenile justice systems, and improve the accessibility and effectiveness of treatment services for adults and juveniles who have mental illnesses, substance use disorders, or co-occurring disorders, who are in, or at risk of entering, the criminal or juvenile justice systems. Any improvements to the system of care as a result of the CJMHS Program are available to PATH program participants. This initiative expands the resources of the state's community mental health providers to serve individuals experiencing criminal justice involvement. These resources include services such as transitional housing, diversion programs, and mental health courts. Each PATH provider is part of a community mental health agency and can leverage programs available through its agency for PATH participants.

There are many communities in Florida that utilize evidence-based programs and service models intended to minimize challenges and foster support for PATH participants with criminal justice involvement. These programs and models are further described in detail in each provider's LIUP.

## FLORIDA BUDGET NARRATIVE

### CONTRACTUAL

#### Federal Request & Non-Federal Match

Provider Name	Federal Cost	Non-Federal Match
Apalachee Center	\$157,500	\$52,500
Aspire	\$237,110	\$79,037
BayCare Behavioral Health	\$198,164	\$66,055
Chautauqua Healthcare Services	\$127,500	\$56,401
Circles of Care	\$81,592	\$27,197
David Lawrence Center	\$107,599	\$35,866
Directions for Living	\$355,655	\$118,552
First Step of Sarasota	\$85,788	\$28,596
Gracepoint	\$240,470	\$80,157
Guidance Care-Center	\$90,000	\$30,000
Henderson Behavioral Health	\$248,110	\$83,113
Jerome Golden Center for Behavioral Health	\$180,000	\$60,000
Mental Health Resource Center	\$243,091	\$218,772
Meridian Behavioral Healthcare	\$116,972	\$38,993
Mid Florida Homeless Coalition, Inc.	\$113,475	\$37,825
New Horizons CMHC	\$465,000	\$155,000
New Horizons of the Treasure Coast	\$300,000	\$100,000
Park Place Behavioral Healthcare	\$71,157	\$27,483
SalusCare	\$108,740	\$36,247
Stuart Marchman Act	\$228,907	\$76,302
Taskforce Fore Ending Homelessness	\$72,934	\$24,311
The Centers	\$89,794	\$29,931
Tri-County Human Services	\$188,584	\$62,861
United Way of Suwannee Valley	\$127,761	\$42,587
<b>TOTAL</b>	<b>\$4,235,903</b>	<b>\$1,567,786</b>

#### **JUSTIFICATION:**

**PATH Services Provision:** Florida's PATH Program supports twenty-four local PATH projects throughout the state. These projects outreach to individuals with mental illnesses or mental illness and co-occurring substance use disorders who are homeless or at imminent risk of homelessness. Once enrolled, persons served have access to a variety of PATH-funded support services to assist them in their recovery and end their homelessness. SAMHSA requires that all participating PATH providers generate a non-federal contribution of not less than \$1 for each \$3 of federal PATH funds received. These funds must be available throughout the life of the grant period. PATH providers utilize a variety of funding sources including state general revenue, private donations, county funding, non-federal grants, city funding, and fees to meet the match requirement. Detailed budgets for each PATH provider are included in the Local Intended Use Plans.

**I. DIRECT CHARGES**

**Federal Request**

<b>Travel</b>				
<b>Purpose</b>	<b>Location</b>	<b>Item</b>	<b>Rate</b>	<b>Cost</b>
SPC travel to National Homeless grantee conference		Flight	\$600	\$600
		Rental car	\$30/day rental x 4 days	\$120
		Hotel	\$150/night x 1 person x 4 nights	\$600
		Meal & Per Diem	4 days x 1 person (\$36 /day; Last day = \$80.00)	\$224
		Travel Incidentals (Gas, tolls, parking)		\$648
SPC travel to SOAR statewide meeting (co-facilitated by federal TA rep from PRA)	Tampa, Florida	Rental car	\$30/day rental x 4 days	\$120
		Hotel	\$150/night x 1 person x 4 nights	\$600
		Meal & Per Diem	4 days x 1 person (\$36 /day; Last day = \$80.00)	\$224
		Travel Incidentals (Gas, tolls, parking)		\$648
Local site visits to monitor program compliance and provide technical assistance	Statewide	Flight	\$600	\$600
		Hotel	\$150/night x 1 person x 30 nights	\$4500
		Car Rental	\$30/day x 30 days	\$900
		Meals	\$36/day x 30 days	\$1080
		Per Diem	\$80/day x 30 days	\$2400
		Travel Incidentals (Gas, tolls, parking)		\$1693
			<b>Subtotal</b>	<b>\$14,957</b>
<b>PAIR</b>				
	Statewide	Housing Database. To ensure suitable housing is available to the population PATH grant serves.		\$82,000
<b>TOTAL</b>				<b>\$96,957</b>

**JUSTIFICATION:**

Technical Assistance Training: The State PATH Contact will attend a statewide technical assistance training during this grant period. Cost is based on the average cost from Tallahassee to Orlando, FL, estimated cost of hotel and incidentals, and state rate for meals/per diem.

Local Site Monitoring Visits and SOAR Training: The State PATH Contact will travel to the regions to assess adherence to the PATH grant, progress toward meeting outcome measures, and provide technical assistance. In addition, the State PATH Contact will assist in implementing SOAR initiatives. Cost is based on average cost of car rentals, estimated cost of hotel and incidentals, and state rate for meals/per diem.

Prescreening, Assessment, Intake, & Referral (PAIR) System: PAIR is a housing locator system to assist providers in finding safe and affordable housing for PATH program participants.

**BUDGET SUMMARY:**

Category	Federal Request	Non-Federal Match	Total
A. Personnel			
B. Fringe			
C. Travel	\$14,957	\$0	\$14,957
D. Equipment			
E. Supplies			
F. Contractual	\$4,317,903	\$1,567,786	\$5,885,689
H. Other	\$0	\$0	\$0
Total Direct Costs	\$4,332,860	\$1,567,786	\$5,900,646
I. Indirect Costs	\$0	\$0	\$0
Total Project Costs	\$4,332,860	\$1,567,786	\$5,900,646

Florida will use \$4,235,903 to fund community providers to deliver direct assistance to individuals with serious mental illness and co-occurring disorders who are homeless or at imminent risk of homelessness. The LIUPs provide individual provider budget details. \$96,957 of federal PATH funds are retained at the Department’s headquarters for administrative functions including travel, training, and implementation of a Prescreening, Assessment, Intake, & Referral (PAIR) data system.