Attachment A	A – Applicant I	nformation				
A. Applicant Agency						
Name:	Sedgwick County COMCARE					
Address:	271 W 3rd St. N					
City, ST Zip:	Wichita, KS 67202					
Telephone:	316-660-7600		Email: joan.tammany@sedgwick.gov			
B. Type of Agen	cy ⊠Public □Priva	ate Non-Profit □Pri	ivate Profit			
C. Official Author	orized to Sign Applic	ation				
Name:	David T. Dennis	acion				
Title:	Chairman					
Address:	525 N Main, # 320					
City, ST Zip:	Wichita, KS 67203					
Telephone:	316-660-9600		Email:			
_	010 000 000		Linat.			
Signature:						
D. Project Directo	or					
Name:	Jennifer Wilson, LM	SW				
Title:	Program Manager					
Address:	402 E 2nd St., suite	В				
City, ST Zip:	Wichita, KS 67202					
Telephone:	316-660-7816		Email: jennifer.wilson@sedgwick.gov			
			Sg			
E. Financial Offic						
Name:	Kathy Wegner					
Title:	Director of Operatio	ns				
Address:	271 W 3rd St. N					
City, ST Zip:	Wichita, KS 67202					
Telephone:	316-660-7510		Email: kathy,wegner@sedgwick.gov			
F. Type of Applica	ation □New □Rev	ision 🛮 Continuatio	on of Grant # 11-022			
G. Title of Project	: Project for Assistan	ce in Transition from	Homologopoo			
- Title of Froject	, · · · · j · · · · · · · · · · · · · ·	oo wi Transidori nom	Tiomelessiless			
H. Geographic Area:	ea to be Served and	arget Population				
Santa Nation	Sedgwick County, Kansas					
Population	Person with severe and persistent mental Illness who are homeless.					
I. Federal Identific	ation Number (FEIN): 48-6000798				
J. DUNS Number:	056577166		-			
	_					
K. Applicant's Fiscal Year: 08/01/2018 to 07/1/2019						
L. Project Costs						
Grant Funds Reque		\$118,429				
Local Funds/Cash N	Match	\$33,982				
In-Kind		\$0				
Total Cost		\$152,411				

Total Cost

APPROVED AS TO FORM:

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Statement of Problem

Identify and describe the challenges or needs the program will address in the geographic area to be served. Provide data to show the nature and scope of the need. Explain previous or current efforts to address the problem, including an analysis of the outcome of these efforts. Provide a clear and concise statement of the purpose or goal or the program and how it will address the needs identified. If you are a current or previous PATH grantee, provide three year trend data. Include existing gaps in the service system.

COMCARE of Sedgwick County has been providing homeless services under the PATH grant in order to meet community needs. The needs COMCARE's PATH program will address in Wichita/Sedgwick County will be to provide access to mental health and substance use treatment services for persons who are homeless so they can maintain stability and secure stable housing. The COMCARE PATH program will increase literally homeless (shelter, parks, under bridges, etc.) consumers' attainment of housing and access to mainstream resources. Outreach data consistently reflects complex barriers for literally homeless people, including chronic health conditions, multi-substance use, law enforcement contact/felony history, and elimination of food stamps (Supplemental Nutrition Assistance Program "SNAP") for homeless individuals not participating in addiction/vocational programs.

Attempts to move persons from shelter to housing reveal decent affordable housing remains out of reach for the lowest income renters because of a shortage of affordable housing, increasing rents, and poverty. There are great challenges for consumers living on SSI (Supplemental Security Income), who live on \$735/month, attempting to locate safe, affordable rental properties. Even seasoned staff, expert at finding landlords in the area who offer all-bills-paid units, struggle to assist consumers with rental subsidies to locate safe, affordable rental properties (e.g., Shelter Plus Care, TBRA, Housing First, Section 8). Additionally, many

landlords in Wichita have raised rents substantially due to increasing utility costs/rate hikes; this is particularly true for the all-bills-paid units, many of which became priced out of subsidy assisted housing.

PATH program staff outreach throughout the geographical coverage area of approximately 1,000 square miles with primary evidence of homelessness in downtown Wichita. According to the United States Census Bureau about 76,287 individuals or 14.9 % of 511,995 Sedgwick County residents live below the poverty level at risk of homelessness (2017).

The total number of homeless individuals during the 2016 HUD Point-In-Time (PIT) count slightly increased from 561 to 571 individuals counted 2015 to 2016. Data from the 2017 PIT count in Sedgwick County indicated there was a small increase from 2016: counting 575 persons experiencing literal homelessness, and 39 persons experiencing chronic homelessness. The term chronically homeless as defined by The U.S. Department of Housing and Urban Development (HUD), is an individual or head of household who is coming from a place not meant for human habitation, a safe haven, or an emergency shelter; has a disability; and has a length of time homeless that totals either 12 months of continuous homelessness or at least 4 occasions in the last 3 years where those occasions cumulatively total at least 12 months. The number of people who were in an unsheltered living situation increased from 2016 to 2017 (from 79 in 2016 to 111 in 2017). Out of the 575 people experiencing homelessness who reported they had a disabling condition, 196 people (34% of respondents) reported experiencing symptoms of mental illness (2017 PIT Count Summary Report, United Way of the Plains). The data collected from the PIT report indicates continued need for outreach efforts in order to engage individuals experiencing homelessness and connect them to services to ensure support with resolving barriers.

Previous and current efforts to address homelessness in Sedgwick County include active participation on the local HUD Continuum of Care (CoC), Mental Health Advisory Board, long-term strategic planning to end homelessness and input into the City of Wichita's Consolidated Plan. In 2017, Sedgwick County transferred two permanent housing programs to the Mental Health Association. This transfer allowed for these beds to remain in the community and allowed Sedgwick County's Homeless Program to focus on PATH Outreach efforts, increase access to SOAR, and focus on providing quality care to individuals referred for ongoing mental health supports and services. Sedgwick County continues to provide supportive services for Shelter Plus Care and Housing First, two Permanent Housing Programs in Sedgwick County.

The Wichita/Sedgwick County CoC utilizes The Vulnerability Index-Service Prioritization Decision Assistance Tool (VI-SPDAT) for all CoC funded programs in order to prioritize housing. The VI-SPDAT is a tool used to identify and prioritize people who are homeless and living on the streets for housing according to the fragility of their health. It identifies the most vulnerable individuals through a ranking system that takes into account mortality risk factors and the duration of homelessness. This ranking, along with a by-name registry of the community's unsheltered homeless population, allows communities to prioritize permanent supportive housing and other supports to those with the most severe health risks. It is an objective measure proven successful in other communities which will ease communication among providers when more than one person presents for housing.

While Wichita/Sedgwick County has made progress increasing permanent housing for low-income and disabled adults, the community continues to struggle with significant barriers to ending homelessness. For example, some consumers experience recidivism back into homelessness, and some disabled adults choose not to or are unable to use the SSI/SSDI

Outreach, Access, and Recovery Initiative (SOAR) process to obtain Supplemental Security Income (SSI)/ Supplemental Security Disability Income (SSDI).

COMCARE PATH program will serve literally homeless adults with serious mental illness (SMI) or severe and persistent mental illness (SPMI) who remain unconnected to mainstream services in Sedgwick County. The program's goal is to connect individuals to mainstream resources aimed at ending their homelessness and assisting in their recovery from mental illness and substance use disorders.

PATH	FY 2015	FY 2016	FY 2017
# of people outreached	284	318	319
# enrolled	214	228	276
# of carry over	177	258	88

The COMCARE Homeless Program's three year trend data demonstrates the effectiveness of a focus on engaging persons exhibiting mental health symptoms and enrolling them in mainstream mental health services. The total number of persons outreached increased from 2015 to 2016 and the number outreached held steady from 2016 to 2017. Outreach efforts have focused on identifying and outreaching those eligible for PATH as illustrated by 2017 data. Data indicates an increased rate of enrollment; in FY '17, 87% of those outreached were enrolled as compared to the 72% enrolled in FY '16.

A primary gap in homeless services is the availability of safe, affordable housing.

According to HUD's 2017 publication, the Fair Market rent for 'all-bills-paid' units are as follows: \$485 for a zero bedroom (studio), \$575 for a one-bedroom apartment and \$764 for a two-bedroom apartment (2017). (Retrieved from **HUDuser.gov.**) Persons receiving SSI of

\$735/month can afford to pay no more than \$220 monthly for rent and utilities. If a person were working full time at the Kansas minimum wage (\$7.25/hour), he or she could afford no more than \$377for rent and utilities. The National Low Income Housing Coalition (NLIHC) ranks Kansas as 37th in the nation for highest housing wage. The cost to rent a studio apartment plus utilities costs approximately \$10.37/hour (full time employment), renting a one-bedroom apartment and utilities exceeds \$12.15/hour, and renting a two-bedroom apartment costs \$15.59/hour. (Retrieved from nlihc.org) Many PATH eligible consumers have little or no income which makes finding suitable housing extremely challenging. "Each week, an individual living in Kansas would have to work about 67 hours at minimum wage in order to afford a one bed-room apartment." (Out of Reach, 2017). At these rates, without a subsidy, many PATH eligible consumers will likely have to double up, live in a shelter, or remain homeless on the streets.

While the Sedgwick County community has several rent subsidy housing programs for people with disabilities and/or low income renters, the need far exceeds the available rent subsidies. The Wichita Housing Authority absorbed Sedgwick County's Section 8 housing program, increasing housing vouchers to about 12,000 totaling about \$12 million. The programs offered by the Housing Authority often have a lengthy waitlist and do not accept individuals who have been convicted of a felony within the last five years. The COMCARE Homeless Program has the goal of assisting PATH participants with applying for programs offered by the Housing Authority, as well assisting with follow-up and address updates, to ensure participants do not miss communications regarding upcoming interviews and appointments.

Medicaid reimbursement for case management services is not available once consumers' symptoms stabilize. There are no funds or services in the community specifically designed to

target sustaining permanent housing stability. The COMCARE Homeless Program services are provided to help persons cope with symptoms of mental illness and to adjust to living in housing. Over time, previously homeless individuals may experience symptom stabilization requiring less support to live independently. The nature and course of mental illness and substance use disorders is often cyclical for some people. Psychotropic medications may require periodic adjustment as human physiology is not static. In other words, once a previously homeless person with mental illness and/or substance use demonstrates stability, supportive services end. If a person experiences relapse of either mental health symptoms, substance use, or both, a new homeless episode may occur. A strategy employed by the COMCARE Homeless Program to maintain communication with providers across programs to ensure that PATH Outreach staff become available to assist individuals with accessing rehabilitation services should their mental health symptoms increase and additional mental health support is needed in order for them to resolve homeless status and resume permanent housing. The challenge to help previously homeless persons to sustain their permanent housing (subsidized or unsubsidized) remains a crucial service system gap as there are many people struggling to sustain housing outside of Supportive Housing Programs. The COMCARE Homeless Program staff will continue to collaborate with the Sedgwick County Continuum of Care to reduce barriers and work toward resolving this gap.

Project Design

Describe the organization's plan to provide coordinated and comprehensive services to eligible PATH clients, including:

Within the COMCARE Homeless Program, the plan to provide coordinated and comprehensive PATH and community mental health services involves utilizing existing internal processes throughout the COMCARE system to ensure that people receive help no matter how they enter the system. The primary method of serving literally homeless adults with mental illness and/or substance use disorder is through PATH assertive outreach in shelters, on the streets, and in known homeless locations in Sedgwick County. A second method is entering and updating data on PATH eligible individuals and families in HMIS. This enhanced data collection/reporting method will improve access to housing, especially to HUD subsidized and supportive housing for PATH eligible individuals. Lastly, PATH staff are actively involved in the CoC's Coordinated Entry efforts and By-Name list meetings, which helps enhance outreach efforts and streamline housing referrals so shelter/housing can be accessed as quickly as possible.

PATH case managers not only connect people to immediate resources (i.e. shelter, food), they engage people and introduce them to the COMCARE Intake and Assessment Center for an intake to mental health services. 100% of the people contacted by PATH case managers who are literally homeless will receive outreach, engagement, and informal screening for PATH services. Intakes may also be completed by other parts of COMCARE (Sedgwick County Offender Assessment Program, Community Crisis Center) and then referred to the COMCARE Homeless Program. Outreach and in-house referrals are reviewed by a Qualified Mental Health Professional and the PATH Outreach team using target population criteria for both homelessness and severe and persistent mental illness (or a serious mental illness); the team then makes recommendations for intake or makes appropriate referrals to individual mental health services. The COMCARE Homeless Program directly connects eligible consumers to therapy, medication management and/or rehabilitation services within COMCARE Adult Rehabilitation and Outpatient Services Programs. Specific rehabilitation services include Case Management, Psychosocial Rehabilitation Individual and Group, Peer Support Individual and Group, Attendant

Care, and Supported Employment. The team works together with providing clients assistance with applying for benefits, including SSI or SSDI. If individuals have not begun working with other legal professionals within the community, providers help connect them to the identified Sedgwick County SOAR Case Manager. Those who are assessed to be ineligible (e.g., not literally homeless) but in need of substance use treatment or another community resource are assisted to make those connections by PATH case managers. Upon assessment and referral to case management at the COMCARE Homeless Program, consumers are also considered for their eligibility for different housing options and those referrals and assignments are begun.

COMCARE offers intensive case management to ensure persons successfully navigate internal or external systems and receive services. COMCARE Code of Conduct, which is reviewed by all COMCARE staff annually, reinforces the expectation that all services delivered should be guided by a current and individualized treatment plan updated no less than quarterly with the consumer.

- a. Indicate the projected number of adult clients to be contacted through outreach using PATH funds and geographic area to be served. 300
- b. Indicate the projected number of adult clients to be enrolled using PATH funds. $\underline{175}$
- c. Describe activities to maximize the use of PATH funds to serve adults who are literally homeless as a priority population.

The COMCARE Homeless Program is embedded within a licensed community mental health center with 50 years' experience providing a broad array of mental health services,

COMCARE's PATH funds will be utilized to fund the following positions: two 1.0 FTE

Outreach case managers and one .40 FTE office specialist. COMCARE's PATH case managers' primary responsibility will be street outreach to people experiencing literal homelessness, including regular visits to known homeless locations such as parks, bridges, and emergency shelters in Sedgwick County. One of the PATH Case Managers became SOAR certified and will

Additionally, should participants need further assistance, PATH Case Managers will provide brief case management services until the individual is able to engage in mainstream services (60-

continue to accept SOAR referrals for individuals experiencing literal homelessness.

90 days). Once the person is enrolled in community mental health services, the PATH enrolled consumer works with a variety of COMCARE providers (e.g., field case manager, therapist, and psychiatrist).

Using HMIS in PATH data collection will allow area HUD housing providers to assist PATH eligible consumers to attain housing. PATH data collection and reporting, including annual performance reports/quarterly reports, will be accomplished through HMIS/PDX by a partially PATH funded office specialist position. The information required by PATH in HMIS includes basic demographic information as well as tracking frequency of Outreach contacts and PATH Outcomes (assisted referral/attainment) on approximately 300-400 individuals. PATH funds awarded to COMCARE will focus specifically on the outreach and engagement of literally homeless persons into COMCARE services and mainstream services.

d.Describe strategies that will be used to target PATH funds for street outreach and case management as priority services.

Two full-time PATH case managers are employed within a separate and unique department within the COMCARE Homeless Program. They do not carry a caseload of consumers similar to other case managers at the COMCARE Homeless Program or Community Support Services (CSS), so will not be evaluated based upon standards used for other mental health staff members (e.g., productivity, treatment planning). PATH case managers' job descriptions and annual evaluations are solely based upon their ability to successfully outreach/engage persons experiencing literal homelessness, serious mental illness and/or substance use into mainstream

services. The team receives supervision, support and direction from a Qualified Mental Health Professional (QMHP) who also conducts intakes, and is directly involved in the provision of services upon PATH enrollment.

The COMCARE Homeless Program enjoys an excellent reputation as a longstanding partner in the Wichita community's homeless service provider network. The COMCARE Homeless Program has strong working relationships with stakeholders in the homeless service community including the HUD CoC, substance use treatment resources, faith-based agencies, and other homeless service providers. The COMCARE PATH program's expertise in providing street outreach and case management is evident in more than 20 years of PATH funding and positive outcomes for people experiencing literal homelessness.

In addition to the strategies discussed above, the COMCARE PATH program will place increased emphasis on locating and serving individuals experiencing serious mental illness and co-occurring substance use disorders. While PATH case managers will provide general information/referral to all homeless persons encountered, they will effectively target efforts to engage with individuals who have traditionally avoided services or who have been challenging to engage due to their experience of mental illness symptoms. Every effort will be made to engage reluctant and sometimes avoidant persons experiencing homelessness through culturally sensitive staff interventions and help obtaining mainstream resources.

e. Describe in table format:(a) the demographics of the population in the area you are proposing to serve; (b) the demographics of the individuals you are proposing to serve: (c) the demographics of the staff serving the individuals.

Demographics	Sedgwick County %	PATH Enrolled '17	Homeless Program %
White	81.0%	64%	72.7%
Black/African American	9.3%	32%	0%
American Indian & Alaskan Native	1.4%	6%	0%

Asian	4.5%	1%	9.1%
Hispanic/Latino	14.4%	9%	18.2%
Native Hawaiian or	.1%	<1%	0%
Pacific Islander		_	
Two or more races	3.7%	3.7%	0%

http://quickfacts.census.gov and PATH 2017 Data

f. Describe how staff providing services to the target population will be sensitive to age; gender and racial/ethnics differences of clients; and the extent to which staff receive periodic training in cultural competence.

The proposed project will address the issues of age, race, ethnicity, culture, language, disability, literacy, and gender in the target population through training, professional competencies, and personal experiences of direct service staff members. The COMCARE Homeless Program has 30 years of experience providing mental health and housing services to the PATH target population. The COMCARE Homeless Program staff participates in diversity training to ensure awareness and sensitivity to age, gender, and racial/ethnic differences in service provision and the workplace. One outreach staff has been with COMCARE for more than 20 years and is fluent in Spanish while another COMCARE Homeless Program staff speaks Mandarin Chinese. Additionally, the Homeless Program has access to a Community Support Services (CSS) staff member who is fluent in Vietnamese. Materials developed and distributed by COMCARE of Sedgwick County (i.e., service information and educational brochures) are made available in Spanish, as well as English, including an annually updated homeless resource brochure developed in cooperation with Wichita Police Department (WPD). All staff has access to in-person and telephone interpreter services available 24 hours a day/ 7 days per week.

New COMCARE direct service provider staff receives over 40 hours of internal training within the first six months of employment on a variety of topics related to understanding the target population of persons served. These training activities all staff the opportunity to interact

with consumers and family members, and ask questions. COMCARE has added Relias Learning to provide ongoing access for staff to earn continuing education credits (CEU's) online on over 400 topics related to mental health and substance use. Homeless Program staff members were introduced to the Adverse Childhood Experience (ACE; www.acestudy.org; Felitti, et al) study to learn how adult symptoms and behavior may be an expression of early trauma. Staff has access to a variety of cultural competence topics including training on Stages of Change, Motivational Interviewing, Integrated Dual Diagnosis Treatment (IDDT), Trauma Informed Care Crisis Intervention Training, Strength's Bases Case Management Training, and the use of person-first language. Another way the COMCARE Homeless Program addresses cultural competency is by using the principle of "meeting the consumer where they are," respect for diversity, and awareness of and understanding of cultural differences. This design encompasses recruiting staff from the minority group served and incorporates an element of COMCARE's values to be inclusive of racial, ethnic, cultural and minority groups. COMCARE promotes linguistic competence by hiring bi-lingual and bi-cultural employees. Staff have varied backgrounds and personal experiences, education levels, socio-economic status, race, religion/faith, and military history/veteran status.

COMCARE includes consumers and their families in planning services in a variety of ways including the Mental Health Advisory Board and co-location with People's Net, a grass roots consumer advocacy organization at United Methodist Open Door (UMOD) Homeless Resource Center. COMCARE is a demonstrated leader in developing culturally competent staff to increase positive outcomes for persons with literal homelessness, serious mental illness, and co-occurring substance use disorder.

g. Describe services available for PATH clients who have both a serious mental illness and

substance use disorder.

PATH funded services are provided within a comprehensive mental health program that includes psychiatric and therapy service providers who are trained and experienced in working with consumers who have co-occurring substance use disorders. Training is available regarding IDDT principles and Motivational Interviewing, which are both evidence-based practices for substance use disorders. Additionally, COMCARE staff members are able to utilize three paid days and \$200.00, annually, to engage in continuing education so to increase knowledge and skills to provide quality services to the individuals participating in the programs. COMCARE's CSS has implemented an Illness Management and Recover Evidenced Based Practice (EBP) team and two Strengths Based EBP Teams through KU School of Social Welfare. COMCARE's Center City has also implemented the Strength's EBP Team through KU and is the first homeless program in the state of Kansas to implement this model. The Strength's Plus EBP team has replaced the IDDT EBP team and successfully passed a fidelity review in 2016. COMCARE continues to stay informed on best practice approaches and is working to have all staff trained in Trauma Informed Care by the end of 2018.

PATH consumers who meet the HUD definition of chronic homelessness and are dually diagnosed (mental illness/substance use) may be referred to various HUD funding housing programs, which include: United Methodist Open Door's HUD Dual Diagnosis Permanent Supported Housing Program, Mental Health Association's Safety Net and Samaritan Housing Permanent Support Housing Programs, and Shelter Plus Care's Permanent Supportive Housing Program through Miracles Inc. These programs provide permanent supported housing units for chronically homeless individuals who have mental illness and a substance use disorder.

Residents can receive a variety of services, which include case management services, outpatient

mental health services, and/or individual or group addiction treatment services. Residents will be assisted to improve their income and self-sufficiency through employment and access to mainstream benefits, including SSI or SSDI. When there is a need for more specialized services for people with both a serious mental illness and a substance abuse disorder, connections are made for services through: COMCARE Community Support Services' psychosocial rehabilitation groups, COMCARE Addiction Treatment Services; or through the area addiction treatment providers, such as Miracles, Inc., Wichita Recovery Center, Preferred Family Health Care, Substance Abuse Center of Kansas, and Options. Together these service providers offer an array of services (including detoxification, outpatient services, and residential treatment) for individuals with a mental illness and co-occurring substance abuse disorder. COMCARE has recently partnered with the Substance Abuse Center of Kansas making additional sobering and detox services available to the Community Crisis Center so individuals in crisis who have substance abuse treatment needs have access to crisis services and remain in the least restrictive environment.

h. Describe strategies for making suitable housing available to PATH clients (e.g. indicate the type of housing usually provided and the name of the agency that provides such housing).

The COMCARE Homeless Program actively identifies and utilizes a variety of housing options available to PATH enrolled consumers. PATH staff members work collaboratively to place consumers in a variety of subsidized housing programs funded by HUD. The array of housing accessed includes area emergency shelters (typically funded by HUD Emergency Solutions Grants), transitional housing (TH) programs in which residents may remain up to 24 months, and permanent supportive housing (PSH) programs in which residents may remain as long as program criteria (e.g., income) is met. Suitable housing encompasses a range of options from

more short term choices such as emergency shelter and transitional housing to subsidized permanent housing and unsubsidized fair market rental units. Each PATH eligible consumer is assessed to determine individualized housing needs by a multidisciplinary team to match them to available, affordable housing options. PATH staff assist consumers to obtain KS ID's, birth certificates, Social Security cards, and also obtain written, third-party verification of episodes of homelessness. A Housing First approach is utilized to first place the individual into housing and then encourage consumers to access any necessary treatment services.

Supported Housing Funds (SHF) help homeless individuals attain permanent housing. The Kansas Department for Aging and Disability Services (KDADS) makes available SHF to support the target population, adults with severe and persistent mental illness, to prevent homelessness and to access housing. SHF are used to pay for application fees, housing security deposits, utilities in arrears, utility establishment, and rent in arrears. SHF are intended to support individuals who will be able to pay for their own housing needs and are designed for emergency or one-time use. Without SHF many adults in the target population would be unable to access permanent housing. The COMCARE Homeless Program staff is active in the local HUD CoC and has a long track record as a HUD grantee. The HUD CoC has worked to increase housing providers' utilization of HMIS to more rapidly house the most vulnerable homeless. The Wichita Children's Home and Veteran's Administration has begun utilizing HMIS, and it is the CoC's goal to make housing available in "real-time" as part of the coordinated entry project. This will help expedite housing referrals so individuals can rapidly obtain appropriate housing.

Type of Housing	Agency Providing
HUD PSH – Safety Net	Mental Health Association
HUD PSH – Samaritan	Mental Health Association

HUD PSH – Shelter Plus Care	Sedgwick County COMCARE
PH – Housing First	City of Wichita/Sedgwick County
HUD PH – Section 8 Housing Choice	City of Wichita/Sedgwick County
PH – Public Housing	City of Wichita
HUD PH - The Villas	InterFaith Ministries
VA Supportive Housing (VASH)	City of Wichita/ Robert J. Dole VA Medical Center
HUD Safe Haven	Inter-Faith Ministries
Dual Diagnosis Permanent Supportive	United Way/United Methodist Open Door
Housing	
Tenant Based Rental Assistance (TBRA)	Mental Health Association of South Central Kansas (MHA)
HUD Section 811	Mental Health Association of South Central Kansas (MHA)
Group Homes	Mental Health Association of South Central Kansas (MHA)
HUD Transitional Housing	Wichita Children's Home
Rapid Rehousing	City of Wichita ESG/Mental Health Association/Salvation
	Army
Low Income Housing	City of Wichita, other providers
Senior Housing	City of Wichita, (MHA), other providers

i. Describe outreach activities and community collaboration activities to increase PATH enrollment of homeless veterans.

The COMCARE PATH program staff have extensive knowledge of services available to veterans and possesses expertise in assisting veterans experiencing homelessness to connect to mainstream resources and navigate the complex Veterans Administration (VA) system. One PATH case manager was a Major in the 366th Mobile Public Affairs Detachment in the Army Reserves for over 20 years. Her experience has been invaluable to the COMCARE PATH program as she has long term knowledge of VA benefits and services. The COMCARE

Homeless Program staff regularly collaborates with staff at Robert J. Dole VA Medical Center at monthly HUD CoC meetings to coordinate planning and services for people experiencing homelessness. Sedgwick County participates in meetings facilitated by Veteran Providers' Coalition of Sedgwick County, and COMCARE has staff members take part in the Veterans' Behavioral Health Advocacy Council. These groups are comprised of county staff and other community organizations and meet to increase awareness of veterans' issues and to provide training opportunities.

PATH case managers refer homeless veterans to Veterans Affairs Supportive Housing (VASH) program, which provide permanent supportive housing for homeless veterans. More often, PATH case managers encounter homeless individuals who, although they may have had some military service experience at some point in their life, do not qualify for VA services and programs. These individuals may have been dishonorably discharged from military service, or may have served during a period considered ineligible according to VA regulations (short length of service in military and/or did not serve during war time). When this is the case, PATH case managers work on finding other community supports so they can resolve homelessness and gain access to services that would help improve their overall functioning.

j. Provide a detailed description of the research-based or best practice foundation of your proposed services, with references sited. Describe how the program design incorporates the referenced research or best practice foundation. Activities supporting fidelity to the model are described.

Through the COMCARE Homeless Program's extensive experience serving persons experiencing homelessness, staff have gained a strong understanding of homeless individuals' ambivalence around changing high risk behaviors. These high risk behaviors are compounded by the harsh realities of living on the streets and lack of access to mainstream resources which

support healthier choices. With this in mind, COMCARE recognizes the need to equip providers with tools that focus on exploring and resolving ambivalence and center on motivational processes within the individual that facilitate change, for example Motivational Interviewing (Miller & Rollnick) and KU's Strength's Plus Evidence-Based Practice. These approaches share a philosophy involving meeting people where they are and utilize techniques which are collaborative, person-centered, and strengths based. Additionally, COMCARE provides training to staff on a variety of complementary tools to assist consumers in their recovery, such as Wellness Recovery Action Plan (WRAP; Mary Ellen Copeland), Trauma Informed Care (Tonier Cain; National Center for Trauma Informed Care), Daily Living Activities Functional Assessment (Willa S. Presmanes, MTM Services & NCCBH), Trauma Informed Care: Implications for CPI's Crisis Development Model (Crisis Prevention Institute), and the Adverse Childhood Experience study (ACE; www.acestudy.org; Felitti, et al).

COMCARE of Sedgwick County has substantial experience utilizing EBPs to improve outcomes for adults with mental illness and co-occurring disorders. COMCARE recognizes the importance of using empirically proven techniques with adults with dual diagnosis and chronic health conditions to improve persons' experiencing homelessness access to permanent housing and mainstream resources. COMCARE is committed to maintaining fidelity within its existing EBP programs and envisions PATH funding as an opportunity to further enhance the community's capacity to end homelessness through effective, person-centered treatment. The Strength's Model adheres to the belief that people have goals, talents, and confidence, and environments contain resources, people, and opportunities (Goscha & Rapp, 2012). The fidelity requirements of the Strength's Model include the following: adequate caseload size, service provision takes place in the community, individual and group supervision, strength's assessment

planning and integration, hope inducing behavior, and connecting individuals to naturally occurring resources or supports. The homeless program was able to meet these fidelity requirements within one year of implementation of the model and continues to work toward maintaining fidelity. COMCARE's CSS program staff has implemented a Strength's Plus EBP team and a Strengths Based EBP Team, which have also been able to fulfill fidelity requirements. The EBP approach has practical implications for many mental health consumers who may struggle to maintain housing and natural supports due to the relapse of symptoms of their mental illness, addictions, or both.

COMCARE is aware that while traditional services serve many individuals well, they do not often seem effective in producing outcomes for homeless individuals. Supported Employment staff is encouraged to become an integral part of the client's treatment team at COMCARE CSS/Homeless Program, and attend meetings with those teams to better understand the consumers' goals. Treatment teams across COMCARE are encouraged to think about employment for consumers not yet referred for supported employment services, so that they may in turn speak with consumers experiencing homelessness about the benefits of employment and the supports available to obtain/maintain employment. COMCARE has a successful history operating EBP teams and utilizing best practices related to homeless services. In many instances, COMCARE has been the leader in the state of Kansas in implementing such programs. For example, the COMCARE Adult Rehabilitation program in one of two centers statewide to participate in KDADS's Enhancing Supported Employment Services in Kansas (ESEK). ESEK employs Supported Employment Specialists, Peer Support Specialists, and a Benefits Specialist. This program was able to successfully pass an initial fidelity review and continues to enhance the services provided under the agreement based on the results of the review. In addition to

employment services, COMCARE has enhanced SOAR services provided, increasing from one SOAR Certified staff to four SOAR certified staff. This allows COMCARE to identify and provide SOAR services to eligible participants so they can quickly gain access to SSI/SSDI and Medicaid benefits. At times, SOAR trained staff provide encouragement and work incentives planning to individuals to inform participants that they can often become employed without losing benefits, a fear that often prevents individuals from seeking employment.

Currently COMCARE consumers are referred to EBP services through members of their treatment team at CSS and the COMCARE Homeless Program. Although some COMCARE offices are physically separated to better serve unique community needs, such as homelessness, communication between various treatment team members at COMCARE is enhanced through documentation within an integrated, electronic medical record. Training for new case managers at COMCARE's CSS/Homeless Program includes information about EBP services available to consumers to increase the number of eligible agency clients who will benefit from these programs. COMCARE's philosophy and mission recognizes the importance of employment, housing, and community inclusion as treatment and strives to remain faithful to 'zero exclusion' criteria in referring clients to EBP programs.

Implementation Plan

a. Describe strategies your project will implement to assure that enrolled PATH clients will be assisted by a Kansas certified SOAR case manager to access federal disability benefits.

PATH case managers are a vital component in the SOAR process at the COMCARE Homeless Program as they typically are able to describe in striking detail both the circumstances (e.g., literal homelessness) and the substantial functional limitations evident when they first encounter a homeless person in need of services (e.g., off medications, not connected to mainstream

disability resources). COMCARE of Sedgwick County led Kansas' early efforts to implement SOAR. Although funding is provided through mainstream resources such as SSI, TANF, Medicaid, Food Stamps (SNAP) and Workforce Investment Act, the homeless population has a difficult time accessing resources. In 2010, Sedgwick County Division of Human Services added a Kansas certified SOAR case manager position. The individual selected previously served as an adult case manager at the COMCARE Homeless Program and brought extensive knowledge of homeless issues, resources, and community partnerships. The Kansas certified SOAR case manager remains co-located with the COMCARE Homeless Program to ensure PATH enrolled consumers will obtain this crucial resource. The Kansas certified SOAR case manager serves as a regional expert providing technical assistance to decrease application barriers for other programs. In 2017, one of PATH's Outreach Case Managers, an ESEK Benefits Specialist, and a Children's Transitional Age Specialist became SOAR Certified. The PATH Outreach Case Manager alone was able to complete eight SOAR applications and 18 Medicaid applications within six months of certification. Since enhancing the SOAR program at COMCARE, more people with disabilities have been approved for SSI/SSDI in less time.

b. Project the number of people your program will refer and the number of people who will attain these services and supports:

PATH OUTCOME	Assisted Referral	Attained
Housing (Transitional)	200	100
Income Benefits	100	50
Earned Income (Employment)	100	50
Medical Insurance Program	200	100
(Medicaid, Medicare, State/local		
plans)		
Primary Medical Care	200	100

c. Describe community outreach/education activities to ensure that the public is aware of and is able to access the program.

- The COMCARE Homeless Program shares information with emergency shelters about the COMCARE Homeless Program and referral process; eligibility criteria, assessing homelessness, types of homelessness, outreach questions and the population served.
- COMCARE PATH providers provide new COMCARE direct services staff, key
 stakeholders, community members, and students training opportunities to increase
 awareness of the PATH program, community resources/homeless services, and education
 on effective approaches for client engagement.
- Sedgwick County's website is updated regularly so people in the community have 24/7
 access to various programs and resources (www.sedgwickcounty.org/COMCARE). For
 example, Beating the Blues is a computerized Cognitive Behavioral Therapy program
 available, at no cost, to Sedgwick County residents who are impacted by depression and/or
 anxiety.
- The COMCARE Homeless Program staff participate in monthly HUD CoC meetings, including the Coordinated Assessment/Screening System (CASS) workgroup. This workgroup's goal is to create a communication system among homeless providers through HMIS to increase bed utilization. PATH data entered by the COMCARE Homeless Program is essential to improve planning for housing and homeless services. In the most recent HUD application, the CoC received increased funding for HMIS and coordinated entry, which PATH is a part of. Coordinated entry will help refer clients to the most appropriate program in order to reduce length of homelessness.
- During the winter months, PATH case managers outreach at the Winter Overflow shelter operated by Inter-Faith Ministries in order to gain access to clients that typically don't access shelters and/or have been hard to reach.

- The COMCARE Homeless Program plays an integral role in the HUD PIT Count annually including: PATH case managers and the Homeless Program service providers are involved in PIT planning, provide leadership, engage in street outreach and train community volunteers. The focus for the 2018 count was for outreach to locate individuals who don't access shelter or services at the homeless drop-in center.
- COMCARE staff participates in Homeless Advisory Committee meetings at United Methodist Open Door to get an understanding of community needs and to educate partners on PATH Outreach's role in the community.
- COMCARE Homeless Program leadership provided information regarding adult and homeless outreach services to all of COMCARE programs who are not familiar with PATH services, include COMCARE Crisis Services and Children's Services.
- d. Describe potential barriers to implementing the project and strategies to overcome them.

 Barriers to implementing the PATH project include the following:
- Lack of safe, affordable, accessible housing
- Kansas' decision to not expand Medicaid through the Affordable Care Act
- Funding for Community Mental Health Centers continue to receive cuts in Medicaid funding. State Grant funds were designed to allow CMHC's to serve Kansas residents without a payer source in order to fulfill the goal of mental health reform and deinstitutionalization; however, this has proven difficult due to lack of funding sources.
- PATH enrolled consumers who are already in the process of obtaining SSI/SSDI and have retained legal counsel are ineligible for SOAR participation

- Lack of available beds for persons in need of inpatient psychiatric treatment, detoxification services, and/or residential substance use treatment, especially for those without health insurance.
- Lack of public transportation options; city buses have high fares and limited hours for transportation during night, weekend, and holiday hours. Lack of affordable and sufficient public transportation negatively impacts employment.
- Multi-drug use that confounds treatment approaches decreasing housing access and stability
- Law enforcement contact and felony status among homeless mental health consumers
- Persons barred from receiving various community resources due to challenging behaviors
- Stigma related to symptomatology, poverty, and substance use in the target population
- Significant decrease in access to food stamps (SNAP) at the State and Federal level

Strategies to overcome barriers

COMCARE of Sedgwick County has a demonstrated track record of over 50 years serving the Sedgwick County community. COMCARE is committed to utilizing a variety of cutting edge strategies to ameliorate the significant environmental and cultural barriers that exist in providing services to people who are experiencing homelessness, poverty, substance use disorders, and severe mental illness. As a licensed community mental health center in Kansas, COMCARE is actively involved in advocacy for services for people with disabilities at the State and local level. COMCARE works to strengthen relationships by working in partnership with local and national consumer run and faith based organizations, such as The Salvation Army, UMOD, Miracles Inc., Project Independence, and the National Alliance on Mental Illness (NAMI). The Wichita Police Department (WPD) created the Homeless Outreach Team (HOT) in February 2013. PATH outreach staff and HOT Officers collaborate to expedite access to housing and mainstream

resources for homeless individuals and families. There are over 300 Crisis Intervention Trained (CIT) law enforcement officers in Sedgwick County. Strategies to increase the effectiveness of services provided include employing evidence based practices such as supported employment, strengths based case management, strengths plus case management, IDDT, CIP with advances Trauma Informed Care course, and Motivational Interviewing. All staff employed at COMCARE CSS and the COMCARE Homeless Program receive the latest information designed to increase their awareness, cultural competence, and adherence to the practice of theoretical models that have proven effective within this challenging service environment and to address the specific needs of the population. COMCARE has multiple programs in place to address complex substance abuse and/or legal concerns, which include Sedgwick County Offender Assessment Program, Mental health/drug court, and the Community Crisis Center which provides social detox services.

The Substance Abuse Center of KS (SACK) and COMCARE PATH staff connect people who have substance use disorders to access recovery services such as self-help groups, case management, peer mentoring, aftercare, and inpatient residential treatment. Staff is involved in the Intensive Case Management initiative through Heartland RADAC. Staff serves on the HUD CoC performance workgroups (CASS, HMIS Advisory Council) to improve outcomes across all programs for homeless individuals and families, and the CoC has included the need for affordable housing and transportation services in the CoC's strategic plan in order to resolve barriers in these areas. Staff participates on the Governor's Mental Health Subcommittee on Homelessness & Housing, KS Statewide Housing Specialist meetings, as well as the Summit on Homelessness & Housing to develop policy recommendations and to share best practices to effectively serve the PATH eligible homeless population.

e. Identify who will collect HMIS data, who will be responsible for performance measures, and how the information will be used to evaluate and guide the program.

An important strength the COMCARE Homeless Program brings to successful implementation of PATH services is the knowledge, experience, and capacity to effectively utilize the HUD HMIS. Since 2008, staff at the COMCARE Homeless Program are well acquainted with HMIS as a web-based application and have a strong working relationship as an End User with United Way of the Plains as the HMIS grantee. In addition to tracking PATH data in HMIS, the COMCARE Homeless Program enters HUD data for three HUD funded grants (Shelter Plus Care-Main, Bonus #1, Bonus #2). A COMCARE Homeless Program Office Specialist collects data from program staff, runs regular reports, and is the primary staff responsible for weekly data entry. The COMCARE Homeless Program, Program Manager, Office Specialist, and PATH Team Leader are responsible for reviewing and analyzing the PATH HMIS data throughout the year to contribute to the APR and provide feedback to PATH staff. The COMCARE Homeless Program management team and office specialist utilize HMIS data to contribute to the APR and application for funds. HMIS reports allow the Program Manager and program staff to better analyze how specific interventions impact outcomes, such as income attainment and access to mainstream resources. For example, PATH data was used to narrow PATH staff focus so that individuals exhibiting major mental health symptoms would be identified and enrolled. PATH data helps to describe changes in the local homeless population with more youth, women, and families being encountered by PATH staff. This trend data helps COMCARE leadership plan for future services and identify unmet staff training needs. The COMCARE Homeless Program

has a long history of effectively administering HUD and PATH programs demonstrating proficiency in shouldering the considerable data reporting burden, including the implementation of 2010 HUD Data and Technical Standards (DTS). As PATH providers with extensive HUD experience, COMCARE has successfully incorporated enhanced PATH data reporting in HMIS.

Management Structure

Describe the experience and capability of the applicant, staff, and contractors. Identify the agency that will serve as the grantee and fiscal agency responsible for the grant's administration. Identify the staff team supporting the project including the name, title and affiliation of each member. Provide documentation of any collaboration that has or is occurring on the initiative. Attach Position Descriptions, Organizational Description.

COMCARE of Sedgwick County is the applicant and fiscal agent responsible for PATH grant administration. The organizational chart is included in the attachment section. The proposed PATH program team includes the following positions:

Two 1.0 FTE PATH Case Managers

- Marisela Murdock; COMCARE PATH Case Manager
- Monica Cedeno; COMCARE PATH Case Manager

One .40 FTE PATH/HMIS Office Specialist

• Lisa Williams; COMCARE Office Specialist

Staff providing indirect support of PATH program:

- Jennifer Wilson, LMSW, COMCARE Homeless Program Manager
- Regina Hafner, LMSW, COMCARE Team Leader/QMHP

COMCARE of Sedgwick County's experience and capability include the following:

• The COMCARE Homeless Program staff are dedicated exclusively to serving the mental health needs of the homeless; co-located in downtown Wichita at the UMOD Homeless

Resource and Referral Center – a one stop shop with community providers, including health clinics, legal services, VA, and many other vital resources

- Decades of experience providing street outreach and mental health services to those who are homeless and have a serious or severe and persistent mental illness and/or substance use disorder
- Successful, ongoing collaboration with multiple agencies across various systems that play key roles in direct service delivery and coordination of homeless services, permanent supportive housing, transitional housing, and a variety of funding mechanisms
- Over ten years experience implementing the SOAR process at the COMCARE Homeless
 Program
- COMCARE's extensive experience providing permanent housing support from navigating application to sustaining permanent housing
- About ten years of experience effectively utilizing HUD's Homeless Management
 Information System
- Staff experience and demonstrated success at implementing EBP's as evidenced by positive fidelity ratings of teams at CSS and Center City; ESEK, Strengths Based, and Strengths Plus

Sustainability Plan

Applicants should describe how the long-term financial sustainability of the project will be funded in the future, including strategies to cultivate alternate funding and community collaboration. If the project will not continue after the grant, provide a clear explanation of why.

Without SAMHSA/KDADS' PATH funding, the COMCARE Homeless Program would continue to conduct limited outreach services to literally homeless persons experiencing symptoms of major mental illness to help ensure access to community mental health services for all Sedgwick County citizens; however, there would be less emphasis on outreach activity without a reliable funding source, and it would become necessary to require PATH case

managers to carry a regular caseload of SPMI adults (billing psychiatric rehabilitation services for consumers with Medicaid) in addition to outreach duties as Medicaid and Medicare would not reimburse COMCARE of Sedgwick County for conducting outreach activity.

Without SAMHSA/KDADS' PATH funding it is likely that other PATH-funded activity would cease. The COMCARE Homeless Program would likely be unable to continue providing literally homeless persons who live outdoors/unsheltered basic supplies (e.g., water, sunscreen, bug spray), currently utilized, as an attempt to develop rapport with hard to engage consumers. COMCARE's Homeless Program would be unable to purchase Kansas I.D. cards and birth certificates to help individuals/families access permanent housing and employment that are available in the community. Data on homeless persons who accessed HUD housing would be available; however, tracking data on persons experiencing homelessness would probably not occur, as use of HMIS would no longer be required. This lack of data on persons experiencing homelessness could negatively impact HUD funding in the Wichita/Sedgwick County area for addressing homelessness. COMCARE of Sedgwick County continues to explore funding opportunities in order to enhance PATH services and to make the PATH program more sustainable. COMCARE recently submitted interest in being considered for the application for the Treatment of Individuals with Serious Mental Illness, Serious Emotional Disturbance or Co-Occurring Disorders Experiencing Homelessness grant, fiscal year 2018. This opportunity would allow COMCARE to expand the PATH program while continuing to fulfill the requirements set by SAMHSA and KDADS. Through continued and/or expanded funding of the PATH grant, COMCARE could continue to carry forth its mission to help individuals with mental health and substance abuse needs improve the quality of their lives.

Budget Narrative

The Budget Narrative should thoroughly and clearly describe every category pf expense listed in the Budget Detail Worksheet. The narrative should be mathematically sound and correspond with the information and figures provided in Budget Detail Worksheet. The narrative should explain how all costs were estimated and calculated and how they are relevant to the completion of the proposed project. The narrative may include tables for clarification purposes but need not be in spreadsheet format. As with the Budget Detail Worksheet, the Budget Narrative should be broken down by year.

Personnel costs and Fringe Benefits that are funded by the PATH grant include two fulltime Outreach Case Managers and .4 of the salary of the PATH/HMIS Office Specialist. Indirect support of the PATH program included the Center City Program Manager, the Administrative Program Manager of Rehab Services, and the Sedgwick County Departments, and a portion of these salaries are used as Grantee Match. Outreach Supplies used by participants in PATH include hygiene supplies, food and beverages, clothing, back packs, and miscellaneous supplies (i.e. reading glasses, photo ID's, Birth Certificates, and Social Security Cards). These supplies assist the Outreach Team with building rapport and engaging individuals who have either been difficult to engage and/or require such supplies in order to resolve any barriers that impede their access to services that could help resolve homelessness. For example, supply funding can help individuals with obtaining required identification so they can pursue employment, apply for housing opportunities, or access local food pantries. Local Provider Match is calculated to exceed the required match of 25% of federal funds as all staff funded by the PATH project have incomes that exceed the projected award

Agency	Annual Salary amount	% of position paid for by federal funds	Federal amount	Local provider match	State match	Total
1. Personnel: (Case Manager)	45,411	100%	26,792	7,720	10,899	45,411
2. Personnel : (Case Manager)	33,182	100%	19,577	5,641	7,964	33,182
3. Personnel : (Office Specialist)	13,770	40%	8,124	2,341	3,305	13,770
4. FRINGE BENEFITS: (Case Manager)	45,411	100%	15,989	4,607	6,504	27,100
5. FRINGE BENEFITS: (Case Manager)	33,182	100%	7,530	2,170	3,063	12,763
6. FRINGE BENEFITS: (Office Specialist)	13,770	40%	4,607	1,328	1,874	7,809
7. TRAVEL:	0	0	0	2800	0	2800
8. EQUIPMENT: (specify)	0	0	0	100	0	200
9. SUPPLIES: (specify) (Please see list below for types of purchases that have been made in the past.)	N/A	N/A	1300	300	900	2500
10. CONTRACTUAL:	0	0	0	0	0	(
11. EDUCATIONAL AND TRAINING:	0	0	0	0	0	
12. OTHER: Flex Funds	0	0	0	100	0	
13. INDIRECT COSTS: Admin Charges	0	0	0	6,876	0	6,876
14. TOTAL OF 1-13	0	0	83,921	33,982	34,508	152,411

9.	Outreach Supplies	Bus Tokens
	Sleeping bags	First Aid Kits
	Rain ponchos	Reading Glasses
	Deodorant	Tents
	Toothpaste/toothpaste	Flashlights
	Bottled Water	Gatorade
	Breakfast bars	T-shirts
	Crackers	Watches
	Fruit cups	Socks
	Mess kits	KS ID/Drivers License
	Hand Sanitizer	Birth Certificate Replacements



WICHITA CITY COMMAND KOCH CENTER

350 N. Market St., Wichita, KS 67202 Telephone (316) 263-2769 - Fax (316) 263-6396 www.salvationarmy-wichita.org

ANDRE COX General

F. BRADFORD BAILEY Territorial Commander

MAJOR PHILIP MAXWELL,
Divisional Commander

MAJOR JOSEPH WHEELER City Commander

MAJOR LOIS WHEELER Command Officer for Program Development February 23, 2018

Misty Bosch-Hastings New England State Office Building 503 S. Kansas Avenue Topeka, KS 66603

Dear Ms. Bosch-Hastings:

I am writing to convey my full support of COMCARE of Sedgwick County's grant application for PATH funding to continue to provide outreach services. Without COMCARE's services, our ability to maintain individuals who have a severe and persistent mental illness in our homeless facility would be problematic to say the least. COMCARE's staff members are instrumental in referring individuals to our program for services, providing support to them while they are residing in our facility, and working with program staff to facilitate the resident's successful re-entry into the community.

COMCARE has a long history of providing quality mental health and substance abuse services to citizens in the Sedgwick County area. The largest of the twenty-seven Community Mental Health Centers in Kansas, the agency has demonstrated a commitment to assisting individuals in leading healthier and more productive lives. Their assertive outreach helps connect the most vulnerable clients to the services they need, in particular for those we serve who are experiencing homelessness.

The Salvation Army has worked with COMCARE's Center City program since its inception, and has always been impressed with the quality of services provided. We look forward to continuing to partner with COMCARE in the future and recognize that if these grant funds were not made available, it would greatly impact the consumers we serve.

Sincerely,

Lynn Tatlock, Director

Salvation Army Homeless Services







Episcopal Social Services

Venture House | Breakthrough Club

March 1, 2018

Ms. Misty Bosch-Hastings New England State Office Building 503 South Kansas Avenue Topeka, KS 66603

Re: Letter of Support for COMCARE's Projects for Assistance in Transition from Homelessness (PATH) Grant Application

Dear Ms. Bosch-Hastings,

Episcopal Social Services (ESS) is a broad-based 501(c)(3) social service agency (EIN 48-0947896) meeting the changing needs of the homeless, unemployed, under-employed, those suffering from mental illness, and at-risk youth in our community.

ESS is submitting a PATH request that compliments the efforts of COMCARE. We are able to offer support for homeless individuals identified by the COMCARE PATH team, by providing hot lunch available Monday through Friday and the Representative Payee Services, for those who qualify.

In 2017, ESS served (unch to the community, including 1,071 homeless individuals (36% of Wichita's homeless population), from 11 am to Noon, Monday through Friday. We will welcome those homeless Individuals identified by the COMCARE PATH team needing lunch to join us.

The Representative Payee Program provides financial management and support services to individuals with cognitive and behavioral disorders that include: mental illness, substance abuse, and developmental delays. Referrals are made by the Social Security Administration, Veterans Administration, and other agencies. The program is supported by 40 trained volunteers who manage each client's monthly disability income and work with clients to achieve the goals of maintaining housing, teaching budgeting, and ultimately preventing homelessness. We will expedite the application process for COMCARE PATH referrals.

We are looking forward to working with the PATH program in the future to assist homeless individuals with overcoming hunger and financial barriers.

Sincerely

Barbara Andres, Ph.D., LMSW

Executive Director

Mailing Address: P.O. Box 670 | Wichita, KS 67201 Street Address: 1010 N. Main | Wichita, KS 67203 Phone: 316.269.4160 Fax: 316.269.3550

www.esswichita.org





February 22, 2018

Ms. Misty Bosch - Hastings Kansas Department for Aging and Disability Services 503 South Kansas Avenue Topeka, Kansas 66603

Dear Ms. Bosch-Hastings,

COMCARE's Homeless program provides significant contributions to Wichita and Sedgwick County on behalf of the homeless population. United Methodist Open Door and COMCARE have a long-standing partnership. Open Door's day resource center for the homeless was created with funding out of the ACCESS Demonstration Grant that COMCARE was awarded in the 1990's. With the evolution of our collaboration and working partnership, Open Door and COMCARE have remained instrumental in the quality homeless service delivery to enhance opportunities for success for our clients. In 2012 the two agencies co-located, once again, in a comprehensive Resource and Referral Center, thereby further enhancing services to the homeless.

Each year, COMCARE's outreach team reaches out and links hundreds of homeless to community services. These case managers visit the resource center, canvas the streets, under bridges, at parks and other area homeless shelters to contact individuals about potential mental health services and community resources. The program has also expanded their reach by training one outreach worker in SOAR, which expedites connection to much needed Medicaid and SSI/SSDI benefits. We are impressed by the quality engagement techniques and best practices used by their assertive outreach.

COMCARE is also a member of the Sedgwick County Wichita Continuum of Care. The staff participates in our community's Coordinated Assessment Screening that connects homeless individuals more efficiently to services. COMCARE is a critical piece of that component in referrals and services

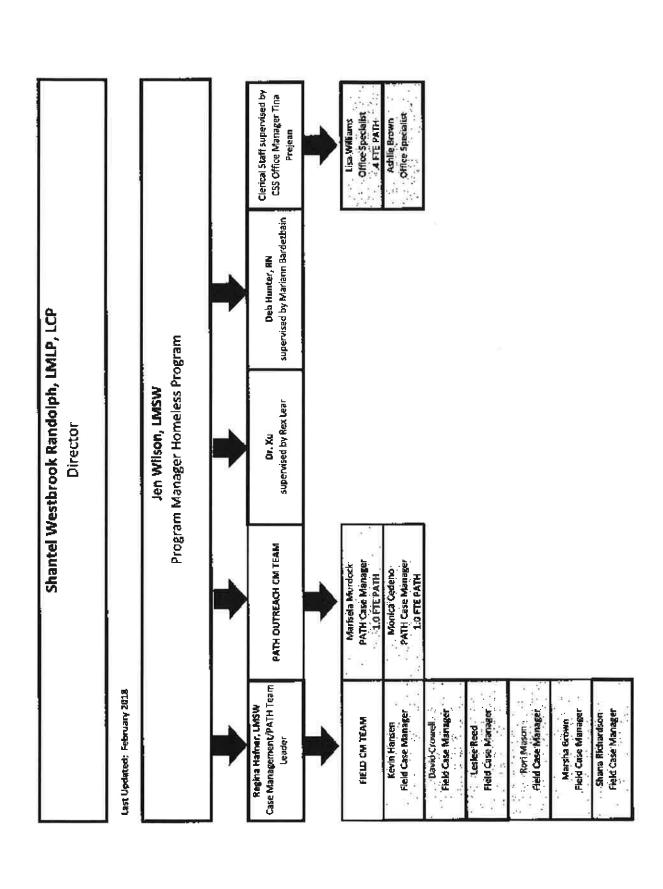
I have respect for the work COMCARE's Homeless Program does and I am pleased to, once again, support their application.

Sincerely, Deann Smith

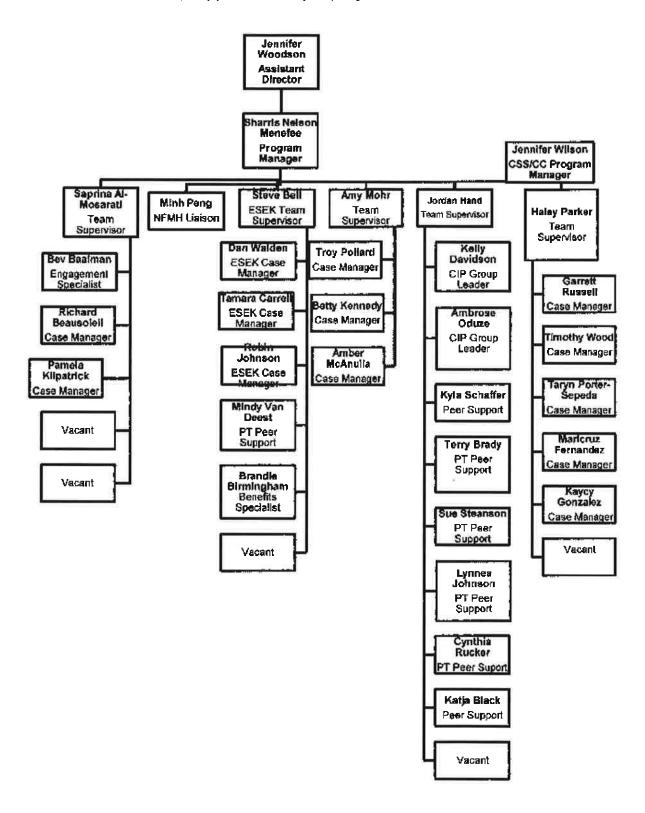
Deann Smith

Executive Director

Attachment C-Organizational Charts



Community Support Services (CSS) Organizational Chart



Attachment O-Job Descriptions for Outreach Case Managers and Office Specialist

Outreach Case Manager

Working Title:	Outreach Case Manager	Work Location:	402 E 2 nd Street
Position Number:	20002965, 20002972	Expected Hours of Work:	Varied schedule M-F between 7-6
Classification:	120	Supervisor: Yes / No	No
Reports to (position):	Program Manager	Number of staff supervised:	0
Date Revised	7/26/17	NOT SMEATHER WAS BALLED	

Job Summary (Major objectives of this position. Why does the Job exist?)

Locate, assess, identify and engage with people who are homeless and have a mental illness and/or cooccurring disorder with the goal of assisting them in accessing services related to mental health treatment, basic needs and housing resources in an effort increase permanent housing and supportive services for people with mental illness who've been chronically homeless.

Primary Job Functions (List three job categories with specific tasks listed)

Direct Outreach Activities

- Engage individuals living in homeless circumstances by canvassing at shelters, food programs, streets
 and places frequented by homeless (under bridges, parks, abandoned buildings, etc.) including after
 hours or early morning as scheduled to correspond with seasonal and individual needs.
- Using assertive outreach techniques, develop helping relationships with potential clients who are chronically homeless
- Assess potential COMCARE clients for homelessness and mental illness using established criteria.
- Provide assistance for potential Center City clients to get to initial appointments for intake, psychiatric
 and case management services via use of direct transportation, bus tokens, reminders and other
 methods.
- Maintain open communication with primary homeless service providers
- Screen calls and walk-ins related to Outreach via Center City reception
- Take the lead in Point in Time survey of counting homeless clients in Sedgwick county annually
- Provides transportation to support client attendance in medical appointments and other therapeutic goal related activities to include development of community resources, employment or education access, social or consumer-run activities and related supports

Referral and Linkage

- Refer individuals to appropriate homeless services and other community resources
- Complete internal COMCARE referral processes for adults with mental illness who are eligible for services
- Assist individuals without other supports to access community resources directly for the initial contact.
- Assist clients with mental illness or other disabilities obtain additional services such as initial steps to
 accessing COMCARE's children's program, CDDO, Independent Living Center and COMCARE affiliate
 agencies.
- Assist clients with substance abuse disorders access appropriate treatment providers
- Educate service providers and other agencies re appropriate referrals to COMCARE using Center City and PATH eligibility guidelines.
- Maintain communication and positive relationships with agencies involved in the referral and linkage process
- Conduct public education regarding homelessness, mental illness, and resources (formally and informally)

Outreach Case Manager

Documentation

- Complete first contact sheet per PATH requirements
- Enter repeat contacts in Call Center
- Document unusual circumstances or specific interventions and consumer-related decisions in Outreach
 Notes For Record
- Complete Notes for Record, Precautions statements and authorizations for release of records as required and/or recommended.
- Enters no show and cancellations for accuracy and completeness of medical record.
- Complete referral documents for COMCARE and external agencies or resources
- Request medical records from hospitals, clinics, jails, etc.

Secondary Job Functions (list no more than five)

 Identify and attend continuing education/training to enhance or expand practice and implement best practices related to the employee s area of practice within COMCARE.

Digitipation (Select five from Core Competency list and specify Behavioral Indicators specific to position)

Collaboration & ... Cooperation

Definition: Builds constructive working relationships with clients/consumers, other work units, community organizations and others to meet mutual goals and objectives. Behaves professionally and supportively when working with individuals from a variety of ethnic, social and educational backgrounds.

Behavioral Indicators:

- Shows an interest in what others have to say by acknowledging their perspectives and ideas and expresses gratitude and appreciation to those that have provided information, assistance or support
- Build relationships by listening, emphasizing with consumers and collaborating to find solutions
- Keeps people informed and up to date.

Communication

Definition: Clearly conveys and receives information and ideas through a variety of media to individuals or groups in a manner that engages the listener; helps them to understand and retain the message, and invites response and feedback. Keeps others informed as appropriate. Demonstrates good written; oral and listening skills.

Behavioral Indicators:

- Speaks and writes clearly and concisely
- Ability to gently hold firm to ensure compliance with policies and laws.
- Timely and current communication to consumers and treatment team members

Detail Oriented

Definition: Ensures information is complete and accurate; follows up with others to ensure that agreements and commitments have been fulfilled. Follows process steps as outlined in standard operating procedures. Reviews materials to ensure they are accurate, clear, and concise. Performs follow-up to ensure quality of work product and/or actions completed.

Behavioral Indicators:

- Excellent organizational skills
- Sets priorities by keeping track of upcoming and completed tasks.
- Produces accurate and complete work

Resilience & Adaptability

Definition: Adapts quickly to change and easily considers new approaches. Remains flexible and open to new ideas and encourages others to value change. Understands changes in work tasks, situations, and environment as well as the basis for change. Thinks and acts effectively under pressure. Persists towards solutions and goals in changing circumstances. Overcomes obstacles to achieve results.

Behavioral Indicators:

Outreach Case Manager

- Flexibility in changing strategies, goals, and priorities
- Demonstrates willingness to modify a strongly held position, by seeing the merits and perspectives of others
- Capacity to deal effectively with stressors, pressures, and challenges, and perform to the best of their ability irrespective of the circumstances.

Time Management

Definition: Shows ability to plan, schedule, direct work or self and others. Balances task requirements and individual abilities; organizes materials to accomplish tasks; sets high standards and well-defined, realistic goals for one's self. Displays a high level of effort and commitment towards completing assignments in a timely manner; works with minimal supervision and is motivated to achieve.

Behavioral Indicators:

- Ability to work at a higher level, be it quality or speed without having a significant impact on performance
- Works with minimal supervision and is motivated to achieve
- Amidst changing priorities and goals effectively assess workload and priorities to ensure tasks are completed on time

stipe visory (asponsibilities (Provide differon employee) managed and the number of embloyees

N/A

Minimi Gualifications as defined by classification

Educational Requirements: Bachelor's degree or be equivalently qualified by work experience or a combination of work experience in the human services field and education, with one year of experience substituting for one year of education.

Years of Experience: If no degree is present applicant may substitute each one year of experience for one year of education.

License, certifications, etc... Must have a valid Kansas Driver's license and current proof of automobile insurance.

extremed to unfill cation

Educational Requirements:

Years of Experience:

License, certifications, etc...

Physical Activity of position

 Talking. Expressing or exchanging ideas by means of spoken word. Those activities in which they must convey detailed or important spoken instructions to individuals accurately, loudly or quickly.

ประเทศ ของการเลือง 250 ซึ่งสุด 4 รถเป็นเปลี่ยนกระบังเป็นสิ้นใช้เสียเลี้ย์จะรายเกษียมในระบบเพ

- Hearing. Perceiving the nature of sounds at normal speaking levels with or without correction. Ability to receive detailed information through oral communication and to make the discriminations in sound.
- Repetitive motion. Substantial movements (motions) of the wrists, hands, and/or fingers. Picking, plnching, typing or otherwise working, primarily with fingers rather than with the whole hand as in handling.

Physical Regulrements of Position

 Exerting up to 10 pounds of force occasionally and/or negligible amount of force frequently or constantly to lift, carry, push, pull or otherwise move objects, including the human body.

Visual Acuity Requirements

The worker is required to have close visual acuity to perform an activity such as: preparing and analyzing
data and figures; viewing a computer terminal; extensive reading; and using measurement devices.

Outreach Case Manager

Work Environment /- Conditions Employee v	ill be subject to
	casionally work with combative emotional consumers. ontact, outdoor homeless outreach, outreach in sheiter settings).
	ed to cover or contain a comprehensive listing of activities, duties apployee for this job. Duties, responsibilities and activities may
7	
Supervisor:	Date:
Employee signature below constitutes emplo duties of the position.	yee's understanding of the requirements, primary functions and
Employee:	Date:

Center City Office Specialist

Working Title:	Center City Office Specialist	Work Location:	402 E 2 nd St
Position Number:	20002958	Expected Hours of Work:	M-F, 8a-5p
Classification:	Office Specialist	Supervisor: Yes / No	No
Reports to (position):	Administrative Specialist	Number of staff supervised:	0
Date Revised	11/01/17		

Job Summary (Major objectives of this position. Why does the Job exist?)

Greet public, provide customer service and general reception as well as provide office and administrative support required to ensure timely processing of program referrals, outcome reporting and program functioning at all levels of service

Primary Job Functions (List three job categories with specific tasks listed)

Reception

- Greet clients professionally and promptly
- Answer phones in a professional manner and route appropriately
- Verify demographic and insurance information and update in the Electronic Medical Record (EMR)
- Prepare excuse notes as requested
- Open and close the office as needed
- Maintain cleanliness/tidiness of lobby
- Use overhead or through-the-phone paging
- Check in clients and notify providers as appropriate
- Request interpreters
- Distribute medications/prescription slips as requested by medical staff
- Check and distribute faxes from the fax folders
- Distribute agency and med staff surveys
- Maintain copy machines and printers
- Maintain visitor's log, authorized visitor forms
- Distribute interoffice and postal mail, prepare for pick up
- Accurately schedule follow up appointments as requested by staff or clients using Just In Time (JIT) guidelines
- Provide client with appointment card or blue JIT reminder card
- Schedule interpreters for clients using MCO interpreter or contracted interpreters.
- Open clients and schedule appointments for other programs as requested
- Maintain cancellation list for medication appointments
- Cancel appointments if a provider is out of the office.
- Update medical staff calendars for days out of the office.
- Distribute client rights and responsibilities.

Financials/Intakes/Documentation

- Prepare financial updates for clients
- Complete releases of information as needed or requested
- Set up insurance coverage and fee matrix
- Verify insurance and income

Center City Office Specialist

- Monitor batch errors
- Problem solve billing issues at the program level
- Collect payments on accounts
- Receipt payments for client and note in EMR
- Enter note in EMR for clients who are not able to make payments.
- Prepare payments for deposit and complete reconciliation form

Data Entry

- Verify KMAP
- Enter authorizations-Vendor authorizations, or others as needed
- Prepare letters for closure, participation, missed appointments and outreach
- Enter screen and assessment transactions when appropriate
- Enter data in HMIS or other systems as required
- Maintain staff contact lists and emergency contact lists
- Gather and enter Metric Data for Strategy Team as assigned
- Track and trend bus pass usage for programs as requested.
- Send reminders to staff for clients who need to complete financials

Secondary Job Functions (list no more than five)

Special Projects

- Faxing letters, releases of information to external sources
- Supply orders/inventory
- Maintenance requests
- Monitor open assignments and send letters/close as appropriate
- Maintain vehicle check out and keys
- Process daily reports
- Maintain position manuals
- Cover other COMCARE locations as needed/requested.
- Cross-train with other staff to ensure coverage of duties
- Assist with completion of Patient Assistance Program or change of provider forms
- Be the go-to person for staff with questions in a specific area

Communication Clearly conveys and receives information and ideas through the appropriate methods and media for target audiences in a manner that engages the listener,

helps them understand and retain the message, and invites response and feedback. Ensures appropriate stakeholders are kept informed and that information shared is accurate and timely. Demonstrates good written, oral, and listening skills.

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Center City Office Specialist

Behavioral Indicators:

- Comprehends written and oral information and direction and takes appropriate action.
- Communicates intentions, ideas and feelings openly and directly.
- Listens attentively to the speaker and actively asks questions to confirm understanding and avoid miscommunications.
- Keeps relevant people accurately informed and up-to-date of both positive and potentially negative information.
- Listens attentively to the speaker and actively asks questions to confirm understanding and avoid miscommunications.

Dependability — Takes personal responsibility for the quality and timeliness of work, and achieves results with little oversight.

Behavioral Indicators:

- Shows up to work on time, and follows instructions, policies, and procedures. Meets
 productivity standards, deadlines, and work schedules.
- Stays focused on tasks in spite of distractions and interruptions.
- Does not make excuses for errors or problems; acknowledges and corrects mistakes.
- Actively demonstrates commitment by maintaining a consistent and predictable work schedule.
- Is relied upon by others as a source for valid information.

Adapts well to changes in assignments and priorities; adapts behavior or work methods in response to new information, changing conditions, or unexpected obstacles; approaches change positively and adjusts behaviors accordingly, focusing on being part of the solution.

Behavioral Indicators:

- Adapts to change quickly and easily.
- Makes suggestions for increasing the effectiveness of changes.
- Shows willingness to learn new methods, procedures, or techniques, resulting from departmental or organization-wide change.
- Demonstrates willingness and flexibility to work outside normal schedule, routines, and duties.
- Maintains flow of information to avoid stressful situations and ease transition to change.

Detail-Oriented Ensures information is complete and accurate; follows up with others to ensure that agreements and commitments have been fulfilled. Follows process steps as outlined in standard operating procedures. Reviews materials to ensure they are accurate; clear, and concise. Performs follow-up to ensure quality of work product and/or actions are completed.

Behavioral Indicators:

- Provides accurate, consistent numbers on all paperwork.
- Provides information on a timely basis and in a usable form to others who need to act on it.
- Maintains a checklist, schedule, calendar, etc., to ensure that small details are not overlooked.
- Follows policies, procedures, and safety and security measures in using various equipment.
- Completes all reports and documents according to procedures and standards.

Center City Office Specialist

Initiative	Takes action without being asked or required to. Achieves goals beyond job
	requirements. Identifies opportunities and issues, and proactively acts and
The state of the s	follows through on work activities to capitalize or resolve them. Actively seeks
	and identifies opportunities to contribute to and achieve goals. Maintains a
	sense of purpose, value, and ownership of their work. Seizes opportunities
	when they arise. Works independently with little direction.

Behavioral Indicators:

- Completes assignments without the need for prompting from his/her supervisor or others.
- Successfully completes most tasks independently but asks for additional support, as appropriate, when faced with unfamiliar tasks or situations.
- Recognizes and takes appropriate action to effectively address problems and opportunities.
- Goes beyond expectations in the assignment, task, or job description without being asked.
 - Demonstrates a sincere positive attitude towards getting things done.

Suparvisory Responsibilities (Provide title of employee managed and the number of employees)

N/A

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Educational Requirements: High School diploma or equivalent

Years of Experience: 2 years general office experience

License, certifications, etc... Must pass KBI, SRS child abuse check, adult abuse registry, and motor vehicle screens. Must complete orientations provided by Sedgwick County and COMCARE.

Risierred gualifications

Educational Requirements:

Years of Experience:

License, certifications, etc...

Physical Activity of position

Stooping. Bending body downward and forward by bending spine at the waist. This factor is important if it
occurs to a considerable degree and requires full motion of the lower extremities and back muscles.

- Reaching, Extending hand(s) and arm(s) in any direction.
- Walking. Moving about on foot to accomplish tasks, particularly for long distances or moving from one work site to another.
- Lifting. Raising objects from a lower to a higher position or moving objects horizontally from position-toposition. This factor is important if it occurs to a considerable degree and requires substantial use of upper
 extremities and back muscles.
- Fingering. Picking, pinching, typing or otherwise working, primarily with fingers rather than with the whole
 hand as in handling.
- Grasping. Applying pressure to an object with the fingers and palm.
- Talking. Expressing or exchanging ideas by means of the spoken word. Those activities in which they must convey detailed or important spoken instructions to other workers accurately, loudly, or quickly.

Center City Office Specialist

 Hearing. Perceiving the nature of sounds at normal speaking levels with or without correction. Ability to 					
	receive detailed information through oral communication, and to make the discriminations in sound.				
 Repetitive motion. Substantial movements (motions) of the wrists, hands, and/or fingers. 					
Physical Requirements of Position					
 Sedentary work. Exerting up to 10 pounds of force occasionally and/or negligible amount of force 					
frequently or constantly to lift, carry, push, pull or otherwise move o					
Sedentary work involves sitting most of the time. Jobs are sedentary	if walking and standing are required				
only occasionally and all other sedentary criteria are met.					
Visual Aculty Requirements					
 The worker is required to have close visual acuity to perform an active 	ity such as: preparing and analyzing				
data and figures; transcribing; viewing a computer terminal; extensiv	e reading; visual inspection involving				
small defects, small parts, and/or operation of machines (including in	rspection); using measurement				
devices; and/or assembly or fabrication parts at distances close to the eyes.					
Work Environment / Conditions Employee will be subject to					
 None. The employee is not substantially exposed to adverse environmental conditions (such as in typical 					
office or administrative work.}					
Please note this job description is not designed to cover or contain a comprehensive listing of activities, duties					
or responsibilities that are required of the employee for this job. Duties, responsibilities and activities may					
change at any time with or without notice.					
Signatures .					
Supervisor:	Date:				
Employee signature below constitutes employee's understanding of the requirements, primary functions and					
duties of the position.					
Employee:	Date:				