

Attachment A: Applicant Information**A. Applicant Agency**

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B. Type of Agency ☒ Public ☐ Private Non-Profit ☐ Private Profit

C. Official Authorized to Sign Application

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D. Project Director

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E. Financial Officer

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F. Type of Application ☐ New ☐ Revision ☒ Continuation of Grant # 11-022

G. Title of Project: Projects for Assistance in Transition from Homelessness

H. Geographic Area to be Served and Target Population

Area:	Sedgwick County, Kansas
Population	Person with Severe and Persistent Mental Illness who are homeless

I. Federal Identification Number (FEIN): 48-6000798

J. DUNS Number: 056577166

K. Applicant's Fiscal Year: 08/01/2016-07/31/2017

L. Project Costs

Grant Funds Requested:	\$ 115,249
Local Funds/Cash Match	\$ 23,485
In-Kind	\$0
Total Cost	\$ 138,734

Table of Contents

I.	Cover Page-Applicant Information	i.
II.	Table of Contents	ii.
III.	Program Abstract	iii
IV.	Project Narrative	1-30
	A. Statement of Problem and Need	1-7
	B. Project Design	7-21
	C. Implementation Plan	21-28
	D. Management Structure	28-30
	E. Sustainability Plan	30
V.	Budget Detail Worksheet and Budget Narrative	Budget 1-3
VI.	Attachments:	Attachment A-E
	A. Attachment A-Assurances	
	B. Attachment B-Letters of Support	
	C. Organizational Charts-COMCARE, Center City, CSS	
	D. Outreach Case Manager Job Description	
	E. Office Specialist Job Description	

Abstract

COMCARE of Sedgwick County is the Community Mental Health Center that serves Wichita and the surrounding cities within Sedgwick County. The FY 2017 PATH application allows continuation of the outreach efforts in the Sedgwick County, KS encompassing 1,000 square miles. Requested PATH funds will cover salaries and fringe benefits of two FTE Outreach Case Managers and one .4 FTE PATH Office Specialist. The Office Specialist position is important as the individual enters data collected by Outreach Case Managers into Homeless Management Information Systems (HMI). As required by KDADS, and reports are run in HMIS so quarterly and annual data can be organized into the PATH reports that are submitted as required. Matching funds will be applied to cover remaining expenses related to the salaries and fringe benefits for these positions. PATH Outreach Case Managers will focus outreach efforts of identify individuals with Serious and Persistent Mental Illness with possible co-occurring Substance Use Disorders and then connect them to mainstream mental health and substance abuse treatment services. COMCARE staff will complete an intake and assessment for individuals referred by PATH Outreach staff, and then individuals will be referred to appropriate services, which include: Medicating, Therapy, Addiction Treatment and Rehabilitation Services (Case Management, Peer Support, Psychosocial Rehabilitating, Supported Employment, and Attendant Care). Additionally, COMCARE providers will assist clients on accessing SSI/SSDI Outreach, Access and Recovery Initiative (SOAR) services and/or employment services so individuals can gain income and secure independent and stable housing in the Sedgwick County community.

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 of 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 for 19 years. The challenges and needs COMCARE 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. 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 \$733/month, attempting to locate safe, affordable rental properties. Even seasoned staff, expert at finding landlords in the area who offer all-bills-paid units, struggled 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 1000 square miles with primary evidence of homelessness in downtown Wichita. About 72,560 individuals or 15.3 % of 508,803 Sedgwick County residents live below the poverty level at risk of homelessness. <http://quickfacts.census.gov/qfd/states/20/20173.html>

The total number of homeless individuals during the 2015 HUD Point-In-Time (PIT) count reduced from the 631 individuals counted in 2014. Data from the 2015 PIT count in Sedgwick County indicated there were 561 persons experiencing literal homelessness, and 94 persons contacted were chronically homeless. The term chronically homeless as defined by The U.S. Department of Housing and Urban Development (HUD), as 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 2014 to 2015 (from 83 in 2014 to 99 in 2015 but remains lower than the 108 people in 2011). Of the 561 people experiencing homelessness who reported they had a disabling condition, 193 people (34%) of respondents reported experiencing symptoms of mental illness (2015 PIT Count Summary Report, United Way of the Plains).

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. To increase access to subsidized permanent housing for people with disabilities Sedgwick

County began administering two permanent supportive housing grants transferred by HUD grantees in 2014. Administering these grants provides the community 19 permanent supportive housing beds in Sedgwick County. Additionally, Sedgwick County provides supportive services to individuals utilizing Housing First and Shelter Plus Care vouchers so they can maintain permanent housing.

The Wichita/Sedgwick County CoC piloted The Vulnerability Index-Service Prioritization Decision Assistance Tool (VI-SPDAT) at the 2016 HUD PIT count and use of this tool will be operationalized in the Homeless Management Information System (HMIS). The VI-SPDAT is a tool for identifying and prioritizing 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.

PATH	FY 2013	FY 2014	FY 2015
# of people outreached	378	249	284
# enrolled	188	133	214
# of carry over	157	157	177

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. Although the total number of persons outreach decreased from 2013 to 2015, the percentage of individuals outreached and enrolled in PATH increased. Through technical assistance from the State PATH Contact in 2011, the COMCARE Homeless Program adapted outreach activity to increase enrollment of PATH eligible consumers. During the worst recession seen in many years it was difficult for PATH staff to ignore the multitude of people in poverty needing resources. Since 2011, PATH staff has effectively adapted their practice to focus on people with symptoms of major mental illness and co-occurring substance use disorder and have successfully increased PATH enrollment. PATH staff was successful in their outreach and enrollment as evidenced by an increased rate of enrollment; in FY '13, 50% of those outreached were enrolled; in FY '14, 53% of those outreached were enrolled; and in FY '15 75% of those outreached were enrolled. 2015 PIT data showed a decrease in the homeless population

in Wichita/Sedgwick County (PIT data shows a modest decrease in sheltered/unsheltered from 631 in '14 to 561 persons '15), which could be attributed to outreaches increased focus on enrolling individuals who have an identified mental illness and/or substance use disorder.

A primary gap in homeless services is the availability of safe, affordable housing. In Wichita in 2015, the Fair Market rent increased for 'all-bills-paid' units: \$484 for a zero bedroom (studio), \$587 for a one-bedroom apartment and \$756 for a two-bedroom apartment. Persons receiving SSI of \$733/month can afford to pay no more than \$146 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 \$377 for rent and utilities. To rent a studio apartment plus utilities costs approximately \$9.31/hour (full time employment); to rent a one-bedroom apartment and utilities exceeds \$11.29/hour. According to The National Low Income Housing Coalition it takes approximately \$14.54/hour for a family living in Wichita to rent a two-bedroom apartment. Many PATH eligible consumers have little or no income which makes finding suitable housing extremely challenging. "Finding a decent, affordable apartment is a challenge for all renters, but the poorest households are the most likely to be locked out of the market entirely. For every 100 extremely low income renter households, there are just 30 affordable and available units" (Out of Reach, 2013). 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 has 578 units of Public Housing with 1,200 persons on the waiting list for those units. The application process has been closed since May 29, 1998 except for individuals aged 50 and over, households with four or more family members, and

disabled head of households. The Wichita Housing Authority also operates the Section 8 Housing Choice program. Since 2010, the application process has only been open two times, once in 2014 and it was opened on February 22, 2016 for an unknown amount of time. The COMCARE Homeless Program has the goal of assisting 115 to apply before the application process is closes. 'Assisted referral' to City of Wichita Section 8 Housing Choice program was essential during both of these time frames as the application was only available electronically making the resource inaccessible for most PATH eligible consumers.

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 becomes 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

i. **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. The secondary 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.

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 the 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 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 or assignments are begun. COMCARE offers intensive case management to ensure persons successfully navigate internal or external systems and receive services. COMCARE's Code of Conduct document, 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.

- ii. **Indicate the projected number of adult clients to be contacted through outreach using PATH funds.** 300
 - a. **Indicate the projected number of adult clients to be enrolled using PATH funds.** 175

b. Indicate percentage of adult clients served with PATH funds projected to be literally homeless i.e., living outdoors or in an emergency shelter rather than at imminent risk of homelessness. 90%

c. Describe activities to maximize the use of PATH funds to serve adults who are literally homeless as a priority population.

Because 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. PATH case managers will not provide Medicaid reimbursable case management nor carry a caseload. 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 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 19 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 on engaging 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 '15	Homeless Program %
White	81.0%	63.1%	72.7%
Black/African American	9.5%	29.9%	0%
American Indian & Alaskan Native	1.4%	2.3%	0%
Asian	4.4%	0%	9.1%
Hispanic/Latino	13.9%	6.1%	18.2%
Native Hawaiian or Pacific Islander	.1%	<1%	0%
Two or more races	3.6%	3.7%	0%

<http://quickfacts.census.gov/qfd/states/20/20173.html> and PATH 2015 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. (See Appendix D: Guidelines for Accessing 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 28 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 member has been with COMCARE for more than 20 years and is fluent in Spanish. One of the COMCARE Homeless Program staff speaks Mandarin Chinese. The Homeless Program also has access to a 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 is given over 40 hours of internal training within the first six months of employment on a variety of topics related to understanding the persons served. They have the opportunity to interact with consumers and family members, and ask questions. COMCARE has added Relias Learning to provide staff ongoing access to earn 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 has 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.

iii. 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, and COMCARE's Community Support Services Program has developed an evidenced-base Strength's Plus Case Management Team, which specializes in treating individuals with co-occurring substance use disorders. This team works closely with the University of Kansas to ensure staff maintains fidelity to the model. COMCARE Homeless Program and Community Support Services staff members have three days and \$200.00 available for continuing education so they can increase knowledge and skills and 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 is in process of working to meet its initial fidelity.

COMCARE has added on-line Relias Learning to provide staff access to thousands of professional national and local training resources including videos, PowerPoint presentations, articles and quizzes on mental illness, substance abuse, and other relevant topics.

PATH consumers who meet the HUD definition of chronic homelessness and are dually diagnosed (mental illness/substance use) may be referred to COMCARE's HUD Dual Diagnosis Permanent Supported Housing Programs (PSH). PSH residents will be encouraged to access an array of COMCARE services, including medication management, individual therapy, group therapy, addiction treatment, case management, peer support, attendant care, and supported employment/ education. PSH residents will receive individualized assistance to access employment, meaningful community activities and resources, and mainstream benefits, including SSI/SSDI to increase income and gain self-sufficiency.

The COMCARE Homeless Program administers two HUD Permanent Supported Housing Programs, Safety Net and Samaritan Housing Initiative. These programs provide 19 permanent supported housing units for chronically homeless individuals who have mental illness and a substance use disorder. Residents will receive case management services and will be encouraged to access services to address mental health and substance use issues. Residents will be assisted to improve their income and self-sufficiency through employment and access to mainstream benefits, including SSI or SSDI. When even more specialized services are needed for people who have both a serious mental illness and a substance abuse disorder, connections are made for services through: COMCARE Community Support Service's 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, 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.

iv. 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 is 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. In 2014 the HUD CoC plans to increase housing providers' utilization of HMIS to more rapidly house the most vulnerable homeless. This effort prioritizes the identification and rapid housing of individuals who are most likely to die on the streets due to complex health conditions through use of the Vulnerability Index (Dr. Jim O'Connell; Center for Urban Community Services; Common Ground, 2007).

Type of Housing	Agency Providing
HUD PSH – Safety Net	COMCARE Homeless Program – Sedgwick County
HUD PSH – Samaritan	COMCARE Homeless Program – Sedgwick County
HUD PSH – Shelter Plus Care	Division of Health & Human Services – Sedgwick County
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
Intensive Supportive Housing	COMCARE of Sedgwick County; Mental Health Association of South Central Kansas (MHA)

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-Short & Long term	Mental Health Association of South Central Kansas (MHA)
HUD Transitional Housing	Wichita Children's Home; The Salvation Army
Rapid Rehousing	City of Wichita ESG
Low Income Housing	City of Wichita, other providers
Senior Housing	City of Wichita, (MHA), other providers

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

The COMCARE PATH program staff has 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 collaborate with staff at Robert J. Dole VA Medical Center at monthly HUD CoC meetings to coordinate planning and services for people experiencing homelessness. In recent years the COMCARE Homeless Program has participated in the VA Homeless Summit, an event designed to increase community awareness of homeless veteran issues, opportunities for partnership, and available resources. Sedgwick County continues to participate 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 meets to increase awareness of veterans' issues and to provide training opportunities.

PATH case managers refer homeless veterans to Veterans Affairs Supportive Housing (VASH) which provide permanent certificates for 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). PATH case managers will continue to seek out homeless veterans throughout the community to help them connect to mainstream resources.

vi. Describe how the program design incorporates evidenced-based practices, emerging best practices and/or promising practices. Describe any planned activities that will support fidelity to the model.

Through the COMCARE Homeless Program's extensive experience serving persons experiencing homelessness, staff has gained a strong understanding of homeless individuals' ambivalence around changing high risk behaviors such as substance use and unsafe sexual practices. 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. Therefore the agency recognized 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 strength's based. COMCARE also provides training for 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 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 Homeless Program was one of 18 communities nationwide to participate in SAMHSA's Access to Community Care and Effective Services and Supports (ACCESS) Research Demonstration Project. ACCESS was a five-year project to develop integrated systems of treatment and supportive services and housing for homeless persons with serious mental illnesses. The goal was to identify strategies for developing integrated service systems and to evaluate their effectiveness in providing services to homeless persons with serious mental illnesses. In Wichita/Sedgwick County, the ACCESS grant enhanced clinical service delivery for persons experiencing homelessness through application of an effective model for access and systems integration. Following the end of the ACCESS grant, COMCARE continued to maintain an integrated service system so program participants can receive mental health treatment and secure stable housing.

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. COMCARE's CSS program staff has implemented an Strength's Plus EBP team and two Strengths Based EBP Teams through KU School of Social Welfare. COMCARE CSS added a second Strengths EBP team that achieved fidelity in only six months, and has maintained this fidelity since its implementation. Additional, COMCARE Center City is the first homeless program in the state of Kansas to implement the Strength's Based EBP with SPMI/SMI adults who also experience homelessness. The CSS Strength's Plus EBP Team is working diligently with KU School of Social Welfare in its implementation so they can meet fidelity within a year of implementation. This 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. Lastly, CSS began implementation of another EBT overseen by KU school of Social Welfare, Illness Management and Recovery (IMR) and has begun using this model in Psychosocial Rehabilitation Groups. IMR is a program that gives individuals the information and skills that are required in order for them to meet their personal goals. Within one year of implementation of IMR, CSS was able to achieve fidelity and notice positive outcomes in some of the clients served, including a reduction in episodes of hospitalization. The various KU School of Social Welfare affiliated teams have successfully attained or are in process of attaining fidelity to the models and demonstrate positive outcomes for consumers.

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. This exploration around employment is critical for homeless individuals who may require more aggressive engagement and outreach efforts to risk seeking employment. Encouragement is important to engaging consumers into the SOAR process also, as many consumers are misinformed about the impact of work on obtaining/maintaining SSI/SSDI benefits. COMCARE staff routinely access the expertise of The Division of Health and Human Services SOAR Case Manager, as well as the local Department for Children and Families (DCF) Benefit Specialists to help consumers understand the relationship between work and entitlements.

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

- i. 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. Describe your plan to train your PATH staff in SOAR. Project the number of PATH enrolled clients served by your program that will be assisted using SOAR.**

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 in 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 2015, the SOAR program at COMCARE had an 88% approval rate. Of the 8 applications completed, 3 of the applicants were homeless and 4 were at risk of being homeless. The average length of time from application to approval was 169 days. Since the establishment of the SOAR program at COMCARE more people with disabilities have been approved for

SSI/SSDI in less time. COMCARE projects to increase referral rates to SOAR during FY '16 and project that at least 6 individuals apply and are approved for disability with the assistance of the SOAR Case Manager.

- i. **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
Community Mental Health Services	250	200
Substance Abuse Services	250	100
Primary Health Services	200	100
Job Training	100	75
Educational Services	50	25
Relevant Housing Services	300	100
Housing Placement Services	200	100
Income Assistance	250	100
Employment Assistance	100	50
Medical Assistance	200	100

- ii. **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.
- The COMCARE Homeless Program staff make the following community presentations about PATH and COMCARE services to students: a Preventive Strategies classes and Masters in Family Therapy students at Friends University.
- Sedgwick County's website is updated regularly so people in the community to 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 participates 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 winters of 2015 and 2016, PATH case managers outreached at the Winter Overflow shelter operated by Inter-Faith Ministries.
- The COMCARE Homeless Program plays an integral role in the HUD PIT Count annually including: Jan 29, 2015 and Jan 28, 2016. PATH case managers and other COMCARE staff were involved in PIT planning, provided leadership, street outreach and training.
- COMCARE staff participate 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.
- COMCARE Homeless Program staff participated in SAMHSA's Homeless and Housing Resource Network's Criminal Justice Sustainable Implementation Guide Expert Panel so a tool could be developed to train providers and law enforcement officers who work with the homeless population.

iii. **Describe potential barriers to implementing the project and strategies to overcome them.**

- Lack of safe, affordable, accessible housing

- Kansas' decision to not expand Medicaid through the Affordable Care Act
- 50% cuts in State Grant Funds to CMHCs (\$20 million) since 2008. 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 (KS Mental Health Coalition, 2011)
- PATH enrolled consumers who are already in the process of obtaining SSI/SSDI and have retained legal counsel so 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.
- High unemployment rates in Wichita, especially among minorities and persons without a high school diploma (7.5% unemployment, August 2013)
- 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, strength's 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.

The Substance Abuse Center of KS (SACK) and COMCARE PATH staff connects 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 HUD CoC performance workgroups (CASS, HMIS Advisory Council) to improve outcomes across all programs for homeless individuals and families. Staff participates on the Governor's Mental

Health Subcommittee on Homelessness & Housing and 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.

iv. Describe how persons with lived experience (homeless or previously homeless and having a severe mental illness) and family members will be involved at the organizational level in the planning, implementation and evaluation of PATH funded services.

COMCARE employs two full-time Peer Support Specialists and five part-time Peer Support Specialists who provide Peer Support services on an individual and group basis. Peer Support Specialists run the Living Room at the Community Support Services program,, which is a safe and therapeutic environment COMCARE clients can visit during business hours. COMCARE has a strong partnership with Project Independence, which is a Consumer Run Organization whose mission is “to promote civil rights for people with developmental disabilities through services which expand independence and choice.” Additionally, management at COMCARE Center City is involved in the Homeless Advisory Committee at United Methodist Open Door, which involves a representative from the homeless community, attends Continuum of Care events, and works to identify available avenues for clients to become involved in organizational planning. Lastly, COMCARE requests feedback from individuals served in the Permanent Supported Housing Programs during monthly meetings so the programs can be evaluated and changes can be made as needed. Recently, an individual who successfully completed his mental health and housing goals presented his experience to the Board of County Commissioners to help individuals at the community level understand the importance of PATH services in the community and how they can help individuals who experience homelessness and serious mental

illness. COMCARE will continue to look for opportunities to involve individuals with lived experience in organizational planning, implementation, and evaluation of PATH funded services.

V. 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 which 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 is 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 five HUD funded grants (Shelter Plus Care-Main, Bonus #1, Bonus #2, Safety Net, Samaritan). 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 helped 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
- Shanna Kating, 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
- 28 years 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
- Eight 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
- Eleven years' experience successfully administering COMCARE's HUD Dual Diagnosis Transitional Housing Program, which was transitioned to Permanent Supported Housing in 2014.
- Eight years' experience effectively utilizing HUD's Homeless Management Information System
- Staff experience and demonstrated success at implementing KU EBP's as evidenced by positive fidelity ratings of teams at CSS and Center City; 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 the SAMHSA/KDADS PATH funding, the COMCARE Homeless Program would likely 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. It is likely 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. 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 stop providing literally homeless persons who live outdoors/unsheltered basic supplies (e.g., water, sunscreen, bug spray). The COMCARE Homeless Program would be unable to purchase Kansas I.D. cards and birth certificates to help individuals/families access permanent housing and employment that is available in the community. Tracking data on persons experiencing homelessness would probably not occur, as use of HMIS would no longer be required. Only data on homeless persons who accessed HUD housing would be available. This lack of data on persons experiencing homelessness could negatively impact \$2,396,717 of HUD funding in the Wichita/Sedgwick County area for addressing homelessness.

Budget Narrative

Grantees should describe every category of expense listed in the Budget Detail (above)/ The narrative should be mathematically sound and correspond with the information and figures provided in the budget.

Personnel costs and Fringe Benefits that are funded by the PATH grant include two full-time 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 Center City Team Supervisor, 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 so they can be referred to various services that meet their needs. Supply funding also helps individuals with obtaining required identification so they can pursue employment or housing opportunities. Local Provider Match is calculated to exceed the required match of 25% of federal funds,

Agency	Annual Salary amount	% of position paid for by federal funds	Federal amount	Local provider match	State match	Total
1. Personnel : (Case Manager)	43,339	100%	25,685	7,368	10,286	43,339
2. Personnel : (Case Manager)	30,572	100%	18,037	5,197	7,337	30,572
3. Personnel : (Office Specialist)	13,300	40%	8,512	2,261	2,527	13,300
4. FRINGE BENEFITS: (Case Manager)	43,339	100%	14,642	4,208	5,904	24,754
5. FRINGE BENEFITS: (Case Manager)	30,572	100%	8,660	2,920	5,595	17,175
6. FRINGE BENEFITS: (Office Specialist)	13,300	40%	3,580	1,201	2,286	7,067
7. TRAVEL:	0	0	0	0	0	0
8. EQUIPMENT: (specify)	0	0	0	0	0	0
9. SUPPLIES: (specify) (Please see list below for types of purchases that have been made in the past.)	N/A	N/A	1320	330	878	2528
10. CONTRACTUAL:	0	0	0	0	0	0
11. EDUCATIONAL AND TRAINING:	0	0	0	0	0	0
12. OTHER: Flex Funds	0	0	0	0	0	0
13. INDIRECT COSTS:						
14. TOTAL OF 1-13	0	0	80,436	23,485	34,813	138,734

9.

<u>Outreach Supplies</u>	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

Attachment A-Assurances

Supplantation of Grant Funds

The grantee shall not replace or supplant funding of another existing program with funds provided for in this Grant. Funds awarded under this Agreement may not be used for any purpose other than the one defined in this document.

Debarment

As part of the Code of Federal Regulations (45 C.F.R. Part 76), all governmental entities receiving funding from the Federal Government must participate in a government wide system for non-procurement debarment and suspension. A person or entity that is debarred or suspended shall be excluded from Federal financial and non-financial assistance and benefits under Federal programs and activities. Debarment or suspension of a participant in a program by one agency shall have government wide effect. The Secretary of KDADS is authorized to impose debarment. Before any person or entity enters into an agreement, grant or contract with KDADS, the Excluded Parties Lists@ shall be researched for potential debarred persons or entities (located at <http://epls.arnet.gov>).

Compliance With Laws and Regulations

The Grantee agrees that it will comply with all federal, state, and local laws and regulations in effect at any time during the course of this Grant. The Grantee shall certify to KDADS that it will provide a drug-free workplace and as a condition of the Grant, the Grantee will not engage in the unlawful manufacture, distribution, dispensing, possession or use of a controlled substance in conducting any activity with the Grant.

Nondiscrimination and Workplace Safety

The grantee agrees to abide by all state, federal and local laws, rules and regulations prohibiting discrimination in employment and controlling workplace safety. Any violation of applicable laws, rules and regulations may result in termination of this Grant.

ADA Compliance

The contractor agrees: (a) to comply with the Kansas Act Against Discrimination (K.S.A. 44-1001 et. seq.) and the Kansas Age Discrimination in Employment Act (K.S.A. 44-111 et seq.) and the applicable provisions of the Americans with Disabilities Act (42 U.S.C. 12101 et. seq.) (ADA) and to not discriminate against any person because of race, religion, color, sex, disability, national origin or ancestry, or age in the admission or access to, or treatment or employment in, its programs or activities; (b) to include in all solicitations or advertisements for employees, the phrase "Equal Opportunity Employer@"; (c) to comply with the reporting requirements set out at K.S.A. 44-1031 and K.S.A. 44-1116; (d) to include those provisions in every subcontract or purchase order so that they are binding upon such subcontractor or vendor; (e) that a failure to comply with the reporting requirements of (c) above or if the contractor is found guilty of any violation of such acts by the Kansas Human Rights Commission, such violation shall constitute a breach of contract and the contract may be cancelled, terminated or suspended, in whole or in part, by the contracting state agency or the Kansas Department of Administration; (f) if it is determined that the contractor has violated applicable provisions of ADA, such violation shall constitute a breach of contract and the contract may be cancelled, terminated or suspended, in

whole or in part, by the contracting state agency or the Kansas Department of Administration.

Parties to this contract understand that the provisions of this paragraph Ae.@ (with the exception of those provisions relating to the ADA) are not applicable to a contractor who employs fewer than four employees during the term of such contract or whose contracts with the contracting state agency cumulatively total \$5,000 or less during the fiscal year of such agency.

Audit Requirements

Awards containing Federal funds are subject to the Audit Requirements listed in OMB Circular A-133. Organizations expending Federal award funds in excess of \$500,000 during their fiscal year must have an audit completed in accordance with this Circular. Organizations spending less than \$500,000 annually in Federal awards may be subject to other audit requirements which will be established at the time of the award.

Cost Principles

Funds awarded through this agreement are subject to the following requirements as established by the Office of Management and Budget:

OMB Circular A-102 – Grants and Cooperative Agreements with State and Local Governments

OMB Circular A-110 – Uniform Administrative Requirements for Grants and Other Agreements with Institutions of Higher Education and Other Non-Profit Organizations

OMB Circular A-21 – Cost Principles for Educational Institutions

OMB Circular A-87 – Cost Principles for State, Local and Indian Tribe Governments

OMB Circular A-122 – Cost Principles for Non-Profit Organizations

If selected as the sub-recipient of this award, I agree on behalf of COMCARE of Sedgwick County to abide by the assurances described in this document.

Officer's Name and Title

Date



*Sedgwick County...
working for you*

Division of Health and Human Services

934 N. Water, Wichita, KS 67203 - www.sedgwickcounty.org - TEL: 316-660-7674 - FAX: 316-660-7510

Timothy V. Kaufman
Director

Nicki Gilliland
Kansas Department for Aging and Disability Services
503 S. Topeka Avenue
Topeka, KS 66603-3404

Dear Ms. Gilliland:

The Division of Health and Human Services of Sedgwick County provides a variety of comprehensive services that assist County citizens in maintaining their health and well-being. The Division is pleased to offer its support of the PATH program.

The Division's SSI/SSDI Outreach, Access and Recovery (SOAR) program works closely with the COMCARE Homeless Program to promote the mission of PATH and to increase access to SSI/SSDI for people with disabilities. Our SOAR Case Manager, Tamara Hurley, is co-located with the COMCARE Homeless Program office and works in partnership with the COMCARE Homeless Program team to support the delivery of eligible services to persons who are homeless and have serious mental illness and may also have co-occurring substance use disorders.

As supervisor of SOAR staff, I value how staff works collaboratively with the COMCARE Homeless Program and the PATH program to support individuals in overcoming barriers to access long-term medical health care and disability benefits. The ability to acquire and to secure SSI/SSDI benefits changes lives and serves as a resource for the COMCARE Homeless Program to utilize in their dedication to the provision of services for individuals and families to improve their quality of life.

We look forward to working with the PATH program in the future to assist individuals with overcoming these barriers as well.

Please do not hesitate to contact me if you have any questions.

Sincerely,

A handwritten signature in black ink, appearing to read "Maggie Flanders".

Maggie Flanders
Homeless Plan Specialist
Sedgwick County Division of Health and Human Services



Stabilizing families in crisis. Strengthening families for life.

March 7, 2016

Substance Abuse and Mental Health Services
Administration (SAMHSA)
U.S. Department of Health & Human Services
Washington, DC

Re: Letter of Support for FY 2017 PATH funding – COMCARE of Sedgwick County

To Whom It May Concern:

Catholic Charities, Inc. – Diocese of Wichita is pleased to provide this letter of support of the application by COMCARE of Sedgwick County for Projects for Assistance in Transition from Homelessness (PATH) grant funding for FY 2017.

As a member of the Wichita-Sedgwick County network of emergency homeless shelter providers to individuals and families, Catholic Charities, Inc. utilizes COMCARE of Sedgwick County throughout the year as a valuable resource for our shelter residents in need of mental health services, rehabilitation services, case management and other supportive services. PATH funds enables those in our community with serious mental illness, and those with co-occurring substance use disorders, who are currently homeless or at imminent risk of homelessness to receive needed screening, & diagnostic treatment, rehabilitation services, and assistance with securing affordable, safe housing.

We urge your favorable consideration and approval of funding for FY 2017 for COMCARE of Sedgwick County.

Sincerely,

A handwritten signature in black ink that reads "Mike Burrus".

Mike Burrus
Executive Director

Addressing Hunger, Homelessness and Domestic Violence
Assisting Couples and Families
Adults with Disabilities and Seniors **Provided** with Meaningful Opportunities to Succeed



March 2nd, 2016

Jennifer Wilson, Program Manager; Community Support Services
Sedgwick County Comcare
402 E. 2nd
Wichita, Kansas 67202

Dear Jennifer,

I am writing you to express my support of the Projects for Assistance in Transition from Homelessness (PATH) Grant that you are applying for. As you know, the Wichita Police Department recently adopted a unit call the Homeless Outreach Team, or H.O.T. H.O.T has a primary goal that focuses on trying to keep homeless out of jail and if possible, divert them to services that help homeless out of homelessness. Since our inception in 2013, our H.O.T. unit has worked in partnership with Comcare to refer homeless to case management and have assisted over 400 homeless out of homelessness. We have found that the missing link in our community is that we have a Housing First model but we lack agencies willing to take individuals that have mental illness & substance abuse issues. We have worked with Comcare in the past and I am certain that if you were able to be awarded the PATH grant, we would be able to continue our partnership and direct homeless to Comcare for case management into not only Housing First but other transitional housing programs.

The success of our community relies upon forming partnerships within the community, especially through the homeless intervention process. By supporting each other and working towards the same goal, we as a Continuum of Care can help reduce the homeless population in our community as evident from our 11% decrease in homelessness from last year's homeless point in time count.

On behalf of the Wichita Police Department and the Homeless Outreach Team, I fully support your application for the Projects for Assistance in Transition from Homelessness (PATH) Grant.

Sincerely,

A handwritten signature in black ink, which appears to read 'Nate Schwiethale'. To the right of the signature is the handwritten number '#2047'.

Officer Nate Schwiethale #2047
Wichita Police Department
Homeless Outreach Team

March 2, 2016

Nicki Gilliland
Kansas Department for Aging and Disability Services
503 South Kansas Avenue
Topeka, Kansas 66603

Dear Ms. Gilliland,

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. 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 System 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 am pleased to, once again, support their application.

Sincerely,



Deann Smith
Executive Director



THE SALVATION ARMY

ANDRÉ COX
General

PAUL R. SEILER
Territorial Commander

MAJOR EVIE DIAZ
Divisional Commander

MAJOR JOSEPH WHEELER
City Commander

MAJOR LOIS WHEELER
Command Officer for
Program Development

March 1, 2016

Nicki Gilliland
KS Department for Aging and Disability Services
503 S. Kansas Avenue
Topeka, KS 66603- 3404

Dear Ms. Gilliland:

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

WICHITA CITY COMMAND
THE KOCH CENTER
350 N. Market St.
Wichita, KS 67201

p:316.263.2769

f: 316.263.6396

salvationarmy-wichita.org

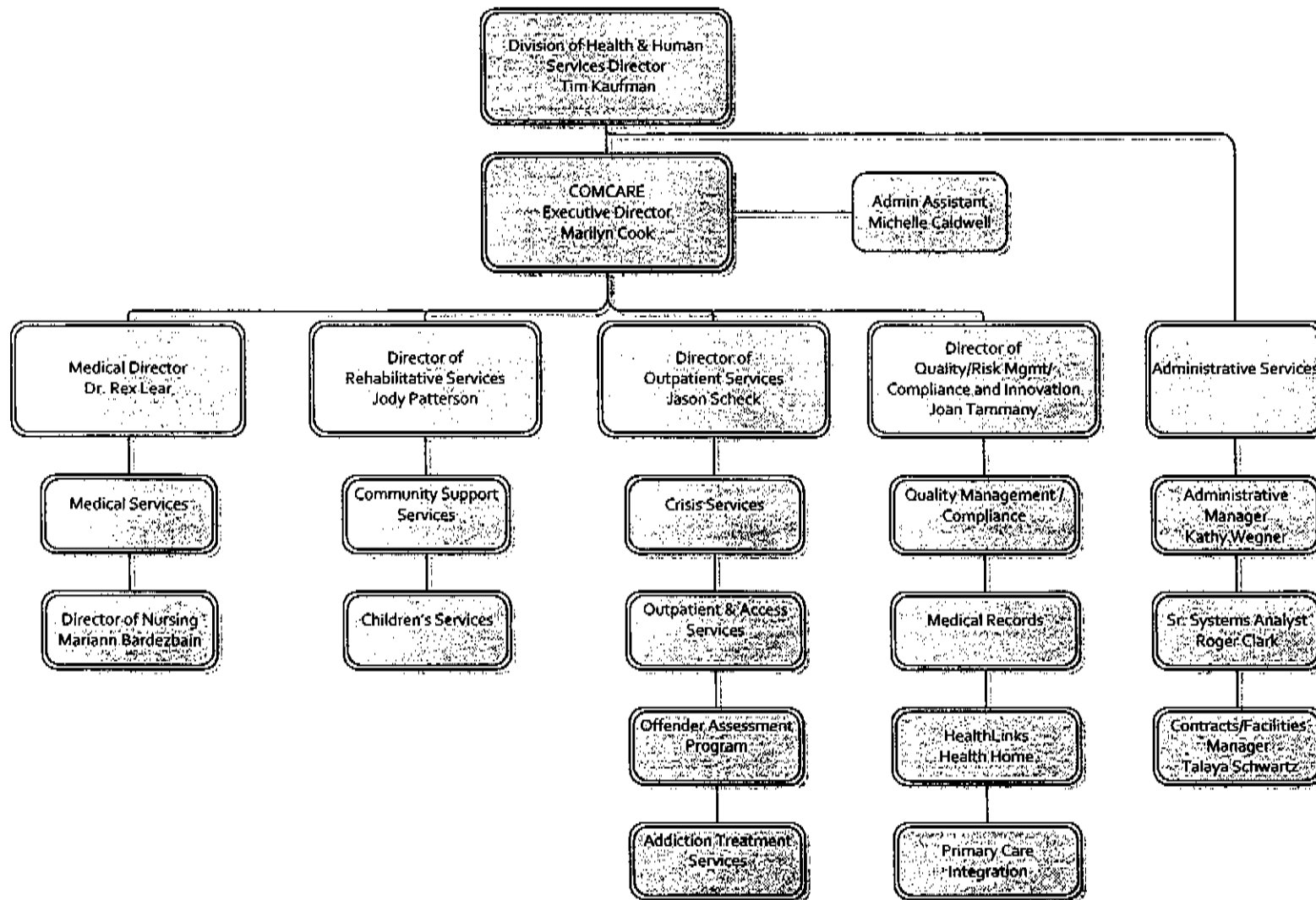


"THERE IS NO REWARD EQUAL TO THAT OF DOING THE MOST GOOD FOR THE MOST PEOPLE IN THE MOST NEED." - EVANGELINE BOOTH

DOING THE MOST GOODSM



COMCARE of Sedgwick County Organizational Chart



Shantel Westbrook Randolph, LMLP, LCP
Administrative Program Manager

Last Updated: March 2016

Jen Wilson, LMSW
Program Manager Homeless Program

Shanna Kating, LMSW
Case Management/PATH Team
Leader

Dr. Xu
supervised by Rex Lear

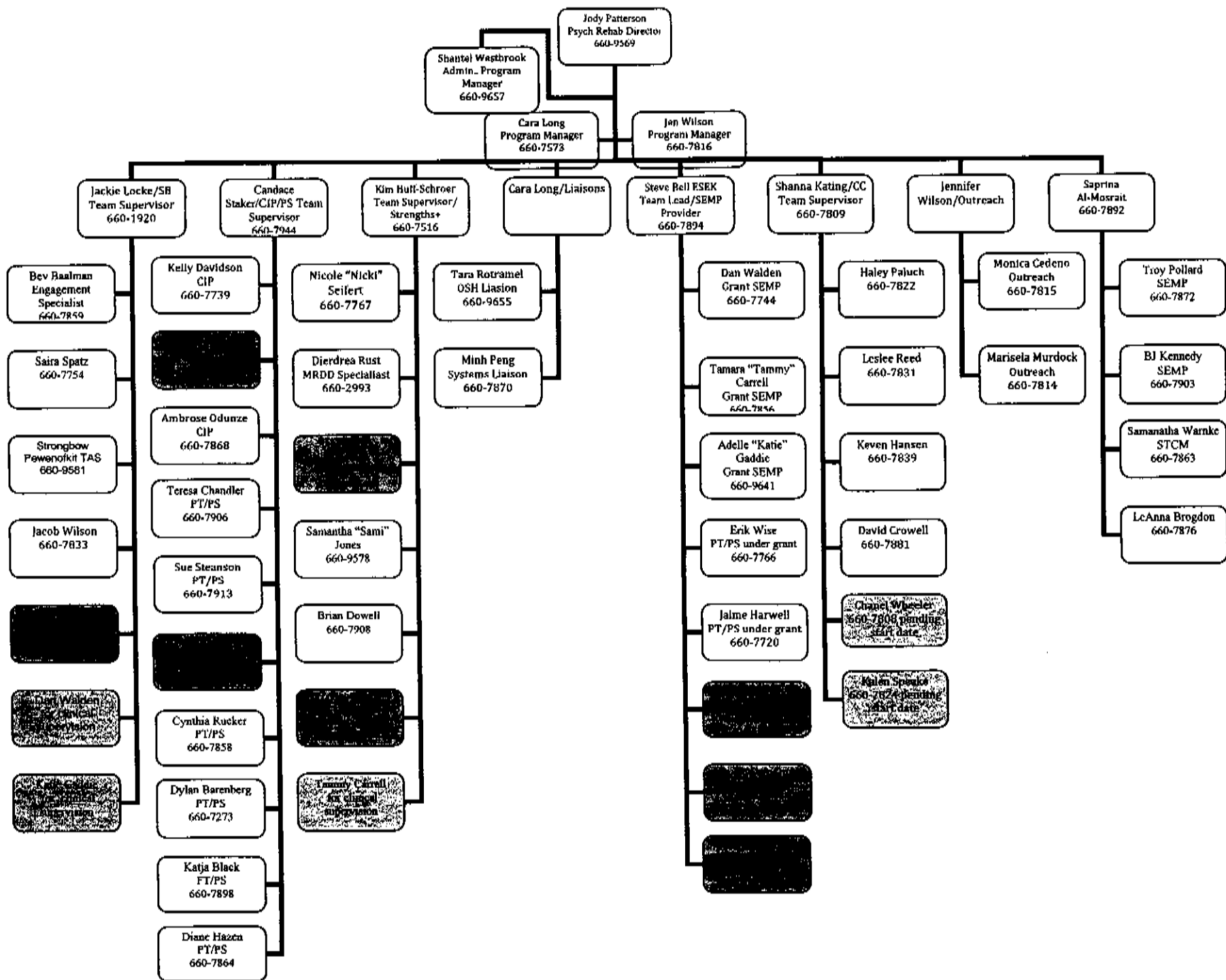
Deb Hunter, RN
supervised by Mariann Bardezbain

Clerical Staff supervised by
CSS Office Manager Tina
Prejean

PATH OUTREACH CM TEAM	FIELD CM TEAM
Marisela Murdock PATH Case Manager	Kevin Hansen Field Case Manager
Monica Cedeno PATH Case Manager	David Crowell Field Case Manager
	Leslee Reed Field Case Manager
	Haley Paluch Field Case Manager

Lisa Williams
Office Specialist

Kathryn Foster
Office Specialist



Job Description – COMCARE of Sedgwick County

Title: Case Manager

Working Title: Outreach Case Manager

Based at: Center City – Homeless Program
154 N. Topeka

Reports to: Director of Center City – Homeless Program

Job Purpose: Locate, assess, identify and engage with people who are homeless and have a mental illness and/or co-occurring 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.

Percent of Time	Tasks
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45%	Direct Outreach Activities
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- 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.
- Participate in regularly scheduled Outreach review with supervisor or designee for intake approval
- 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 "gap analysis" survey of counting homeless clients in Sedgwick county annually
- Assist the VA Stand down in providing services to the homeless and low-income (high risk of homelessness) obtain cold weather items 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

25%

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

15%

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

10%

General Administrative Duties

- Request medical records from hospitals, clinics, jails, etc.
- Complete referral documents for COMCARE and external agencies or resources
- Maintain intra-departmental communication using email and faxes
- Inform Center City staff of new resources, activities and events to benefit Center City clients
- Conduct public education regarding homelessness, mental illness and resources (formally and informally)
- Participate in staff meetings, group and individual supervision as scheduled
- Apply County, COMCARE and PATH policies and procedures
- Other duties as assigned

5%

Professional Development

- Attend all training required by DCF, PATH and COMCARE
- Attend training related to topics identified annually in conjunction with supervisor. (e.g. mental illness, substance use, homelessness, poverty, outreach, communication, conflict management, etc.)

Qualifications Include:

- Must have a BS/BA degree or four years of equivalent education and/or experience working in the human services field.

- Certification in the State of Kansas to provide the service, which includes criminal, abuse/neglect registry and professional background checks, and completion of a state approved standardized basic training program.
- possess the awareness and judgment to intervene appropriately when dealing with escalating emotional situations
- possess the ability to negotiate several flights of stairs at a time and move effectively in varied settings throughout the community
- possess the mobility and judgment to execute personal protective measures
- able to calmly and effectively deal with agitated individuals or high risk situations
- demonstrate autonomous critical thinking skills
- demonstrate good professional judgment and decision-making skills
- self-motivated
- able to work with minimal direct supervision and no supervisor on site at times
- demonstrate good time management and organizational skills in a fast-paced environment
- able to handle competing urgent priorities
- possess basic or intermediate computer skills: able to learn complex software related to an electronic medical record

Physical demands:

- Frequently sits at desk and operates computer.
- Occasional lifting of personal computer equipment, peripheral devices, and supplies up to 50 pounds.
- Valid Kansas Driver's License and proof of automobile insurance required. Must be able to safely operate a motor vehicle, and meet Driver Qualification standards as set forth in Sedgwick County's Fleet Vehicle Operation and Usage policy.

Working conditions:

- Majority of work will be performed indoors in an office setting.
- Fast-paced environment and may occasionally work with combative emotional consumers.

Job Description – COMCARE of Sedgwick County

Title: Office Specialist
Working Title: HUD Office Specialist
Reports to: Supervisor
Based at: COMCARE Homeless Program "Center City"

Job Purpose: Provide administrative support to Homeless Systems Integration Coordinator and Center City team to accomplish administrative and reporting requirements required by grant agreement with U.S. Department of Housing and Urban Development (HUD) and Projects for Assistance in Transition from Homelessness (PATH). As described in grant project designs, the position will support data collection and reporting for various grant-funded programs, as well as operations support of several permanent housing programs.

Major Functional Areas and Description of Duties:

Percent of Time	Tasks
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40%	Essential Function #1: HMIS
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- Enter data on literally homeless consumers into Homeless Management Information System (HMIS) to reflect pertinent data at client entry into program, at one year mark ('during program'), at client exit from program and as needed as outcomes are achieved (e.g., income amount, source, etc).
- Generate reports from HMIS for review by Systems Integration Coordinator to prepare for HUD/PATH Annual Performance Reports (APR), PATH quarterly reports, and for annual HUD NoFA application process; compare data with Psych Consult records, other program reports, and United Way of the Plains staff to ensure data quality.

25%	Essential Function #2: Housing Support/Orientation Duties
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- Gather documentation from service providers, Representative Payee (ESS), and to support occupancy agreement; liaison with landlord/maintenance staff; maintain HUD occupancy overview chart; track apartment vacancy and communicate to team in order to ensure effective bed utilization and safe operation of program.
- Review occupancy agreement with residents at entry and obtain signature; conduct walk through with resident at entry/exit; prepare releases of information for involved entities (e.g., ESS, landlord); review policies and information with residents; review ESS invoice for accuracy; issue/replace apartment keys.

- Coordinate monthly resident's meeting and monthly resident newsletter with information on energy savings, neighborhood activities, and calendar for resident's medical and therapy appointments.

15% Essential Function #3 Maintain required HUD/PATH documentation

- Maintain individual resident housing charts by grant and grant year to include all HUD required documentation using SHP Desk Guide & HUD regulations as reference.
- Obtain and maintain annual information from City of Wichita and other entities for HUD permanent housing to comply with HUD regulations.
- Conduct rent reasonableness comparison and document on HUD form annually. Maintain record of annual documentation available for inspection by HUD.
- Responsible for audit preparation for local CoC and regional HUD chart review.

10% Essential Function #4 Housing Quality Standards (HQS) Inspections

- Conduct Housing Quality Standards (HQS) inspection on each apartment prior to resident move in to ensure physical environment meets HUD regulatory standards.
- Maintain record of inspections for HUD monitoring visits in individual resident housing chart.
- Conduct apartment inspections as needed for cause (e.g., health/safety/eviction issues)
- Serve as back up for Division of Health and Human Services on Shelter Plus Care (SPC), HQS inspections.

10% Essential Function #5 Reception & clerical support

- Answer telephone promptly and professionally; respond to walk-in requests of CC consumers and PATH outreach clients.
- Schedule appointments in Psych Consult for CC providers.
- Support HUD residents through monitoring/distribution of bus tokens, use of laundry facilities, and communication of maintenance concerns, including pest control.
- Provide receptionist coverage at CC (e.g., lunch, leave time).

Positions Supervised: 0

Qualifications: Minimum 2 years in office base position. Must be able to work in a fast pace learning environment with good multi-tasking skills. Strong computer skills needed. Requires excellent attention to detail. Ability to work well with others; to maintain confidential information, and to follow complex oral and written instructions. HQS certification required.