PATH ALLOCATION WORKSHEET

STATE FISCAL YEAR: 2014/2015 FEDERAL CATALOG NO. 93.150

COUNTY: EL DORADO REVISION NO: 1

The State Department of Health Care Services (DHCS) provides the Federal Projects For Assistance in Transition From Homelessness (PATH) Formula Grant funds to counties for State Fiscal Year (SFY) 2014/2015. Your Allocation is identified below.

PATH Funding Base: \$35,072 Total PATH Expenditure: \$35,072

PURPOSE: INITIAL ALLOCATION DATE: October 17, 2014

I, the undersigned Director, have accepted the Federal PATH funds for the county under the specific conditions included in the certifications and assurances as part of the County Application Package (CAP), as well as those conditions established by other governing federal and state laws, policies, regulations, and guidelines.

The CAP, as approved by DHCS, will be followed in expending these funds.

County Mental Health Director Date

Printed Name

DHCS 1772P (04/13)

PATH FY 2014-15

COUNTY INTENDED USE PLAN										
County: El Dorado County Address: 768 Pleasant Valley Roa CA 95619	d, Suite 201	City, Zip Code: Diamond Springs,								
County Program Contact: Ren So Telephone: (530) 621-6340 Fax: (530) 663-8403 Email: ren.scammon@edcgov.us	cammon									
County Fiscal Contact: Michele M Telephone: (530) 642-6910 Fax: (530) 295-2580 Email: michele.mcafee@edcgov.us										
-	ssential services will	be provided by this provider with PATH funding:								
 ☑ Outreach ☑ Case Management ☑ Community Mental Health Service ☑ Habilitation & Rehabilitation Service ☐ functioning in the community) ☑ Staff Training ☑ Screening and Diagnostic Service 	vices (relating to trainin	g and education to improve the individual's								
☐ Alcohol or Drug Treatment☐ Supportive and Supervisory Ser☒ Referrals for Primary Health Ser										
Housing Services:	on, and Repair of Hous plying for Housing Serv of Housing Services ning Eligible Homeless	ing								
Indicate which budget categorie	s are funded with PA	ΓΗ funds: Click on Check Box:								
⊠Personnel	☐ Equipment	⊠Travel								
Consultants	Supplies	⊠Other								
Description of the flow of federa	I DATU fundo in Colif	ernie: DATH funding in Colifornia is allegated to the								

Description of the flow of federal PATH funds in California: PATH funding in California is allocated to the counties from the California State Department of Health Care Services. Each county has a Mental Health Program that provides services to the public in California; the PATH funds are distributed at the county level to either county or contracted providers.

Directions - County Intended Use Plan -

The County Intended Used Plan should provide a summary of information from providers, as well as County specific information, and should be answered at the county level.

Total Federal PATH Dollars Allocated from County:

\$35,072

2. Total Match Dollars in Budget:

\$11,691

3. Who Provides the Match?

El Dorado County and Provider

4. What funding source is used for Match?

El Dorado County: Mental Health Services Act

(MHSA) - 100% State; Proposition 63

Provider: Non-Federal In-Kind and/or Cash Match

5. Please provide the names of each organization you will contract with in FY 2014-15 to provide PATH eligible services in your county, and the amount of Federal PATH funds they will receive. Please also

include the county administration costs as a provider.

include the county	administration costs as a provider.								
Expected Contract Amount	Providers Name as Listed on the Provider Intended Use Plan								
35,072	PATH Funds:								
	Unknown at this time								
	(to be determined through a competitive procurement process)								
6,522	Required Match:								
	Unknown at this time								
	(to be determined through a competitive procurement process)								
5,169	Required Match:								
	El Dorado County Health and Human Services Agency								
46,763	Total								

6. The purpose of this section is to provide a description of your county plan to provide coordinated and comprehensive services to eligible PATH Clients. Please provide the following information as it relates to activities for FY 2014-15.

- a. The projected number of adult clients to be contacted county-wide using PATH 100 funds.
- The projected number of adult clients to be enrolled county-wide using PATH 50 funds.
- c. The projected percentage of adult clients county-wide served with PATH funds to be "literally" homeless (i.e., living outdoors or in an emergency shelter rather than at imminent risk of homelessness.)
- d. Identify activities that will occur in the county to maximize the use of PATH funds to serve adults who are literally homeless as a priority population.
 - El Dorado County intends to contract with a community provider (the "Provider") with current links to the homeless population. In selecting the Provider, special consideration will be given to entities with a demonstrated effectiveness in serving homeless veterans. This will increase the effectiveness of the program as the Provider will already have established knowledge of the homeless population, their usual locations throughout the County and their unique needs rather than having to gain this knowledge during a program ramp-up period. Additionally, rather than utilizing PATH funds for direct provision of mental health and/or substance use services, PATH funds to the Provider will focus on outreach, case management, obtaining benefits, linkage to necessary services and eligible housing services. This will maximize the PATH funding where a current gap in services exists. The County will provide some of the required match by providing a Mental Health Division staff member as the "homeless liaison" who will work directly with the Provider when an enrolled individual is in need of mental health screening and diagnostic services. Mental health and/or substance use services will be provided through other existing programs in the County.
- e. Identify strategies the county has planned to ensure PATH dollars are funding programs who provide the minimum services of street outreach and case management as priority services.
 - These requirements will be included in the contract between the County and the Provider. The Provider will be required to submit to the County monthly reports with their invoices indicating how and where street outreach services were provided and the number of individuals contacted and enrolled. Files will be audited periodically to verify compliance with the case management requirements of the grant.
- f. Please summarize a list of the evidenced-based practices currently used in the county for the target population.
 - The Mental Health Division regularly uses Dialectical Behavior Therapy (DBT) and Seeking Safety in the provision of its services. Moral Reconation Therapy (MRT) is utilized by our staff who work with those who may also have involvement in the justice system. The Mental Health Division has also purchased the Psychiatric Rehabilitation Process Model. Individual staff may be trained in other specific evidence-based practices. The Provider may also employ evidence-based practices in the delivery of services, and will specifically be required to implement Service Outreach and Recovery (SOAR).
- 7. Describe your organization's participation in the HUD Continuum of Care program and any other local planning, coordinating or assessment activities.
 - a. El Dorado County is actively involved in homeless issues in our community, and formerly served as the lead agency for the HUD Continuum of Care and the HMIS lead agency. El Dorado County Health and Human Services Agency has appointed a Program Manager II to serve as the community homeless liaison and the Agency recently participated in an "inreach" event for homeless individuals and families to engage them in necessary services, including mental health services. Additionally, the Agency works closely with other County departments

and community-based organizations regarding homeless issues, including participation in the local Homeless Theory of Change (TOC) Workgroup. It will be a requirement that the Provider work with the Continuum of Care and enter data into the Homeless Management Information System (HMIS) utilized by the Continuum of Care.

- 8. The purpose of this section is to provide a description of your county plan to ensure providers are able to fully implement HMIS in the next 1-2 years. This section should be written from the county perspective.
 - a. Describe your county's status on HMIS migration and a plan, with accompanying timeline, to migrate data in the next 1-2 years. If your county is fully utilizing HMIS for PATH services, please describe plans for continued training and how you will support new staff.

The local Continuum of Care implemented a HMIS system that is utilized by its member organizations. The Continuum of Care provides as-needed training to end users of the system. The Provider will be required to enter data into this HMIS system upon implementation of the PATH program. Training needs will be identified and training, if needed, will be requested from the Continuum of Care HMIS system administrator and/or trainer.

b. Identify any known technical assistance needs that have been identified to complete the HMIS migration.

None.

- c. Describe the connection with the Continuum of Care to facilitate data migration. There are no known data migration needs.
- d. Describe your county's plan to work with local HMIS administrators to incorporate PATH data fields into HMIS.
 - It is anticipated that the majority of data fields will already exist in the HMIS system. New fields may be established to identify the PATH program and a process is in place through the current HMIS system to identify and implement those changes within the system. A Continuum of Care worksheet exists for community-based organizations who work with homeless to identify their staff who will need access to HMIS, to identify the program providing the services, and the specific nature of the services provided. That information is entered into the HMIS system by the host organization (Bell Data) in preparation for the end user to enter client-specific data.
- Provide a detailed budget narrative that provides specifics and calculations used for PATH
 Administration funds. The narrative should describe the attached DHCS1779P Federal Grant Detailed
 Program Budget.
 - The specific staffing levels that the Provider will utilize is not yet known, but will be reported once the Provider is selected through a competitive procurement process. Provider staff and/or volunteers will perform the services identified on page 1 of this County Intended Use Plan, with the exception of the Screening and Diagnostic Services. Administrative funds will not exceed 10% of the total PATH funding, and will be utilized for activities such as report preparation and invoicing.

The numbers provided on Enclosures 7 and 8 for Provider services are estimated costs. The actual dollar values for Provider personnel, fringe benefits, travel and supplies are estimated based on anticipated expenditures. Final numbers will be reported to the State once a Provider is selected, but in no way will the expenditures exceed the maximum allowable (e.g., 10% for administrative, 20% for eligible housing services).

Provider personnel costs are estimated at \$20 per hour plus fringe benefits (estimated at approximately 30% of the salary costs). Through both PATH funding and required non-federal funds match, approximately 0.55 FTE will be available. Additional staffing levels may be provided through additional in-kind contributions from the Provider.

Screening and Diagnostic Services will be provided by the Health and Human Services agency through a Mental Health Worker, Clinician and/or Coordinator, equivalent to approximately 0.05 FTE, which will provide the remaining required match from State MHSA funding. Administrative staff will provide on-going program monitoring, technical assistance and fiscal support.

Other costs include approximately \$500 in supplies, including general office supplies and specific outreach materials. Travel costs would be for participation of Provider staff in SOAR training. In the event that the actual costs for the travel and supplies are not utilized in those categories, the Provider may shift those funds to Personnel costs to allow for increased FTE direct service hours.

Housing assistance of \$6,100 would be for allowable activities as specified in the grant application.

Program Name: PATH (Address: TBD City, Zip Code: TBD Service Area (City and 2 Greater Placerville and su areas of the west slope ca	s: TBD through a competitive procure Dutreach and Engagement	95619 but homeless residing in other
Provider Contact: TBD Telephone: TBD Fax: TBD Email: TBD		
funding: Outreach Case Management Community Mental Hell Habilitation & Rehabilit functioning in the come Staff Training Screening and Diagno Alcohol or Drug Treath Supportive and Superv Referrals for Primary H Housing Services: Minor Renovation Planning of Housi Technical Assistat Improving the Cod Security Deposits Cost Associated v Situations	alth Services tation Services (relating to training and munity) stic Services nent visory Services in Residential Settings Health Services, Job Training, Educati , Expansion, and Repair of Housing ng nce in Applying for Housing Services ordination of Housing Services	ion Services and Relevant
	•	under Cliek en Chael-Berr
	categories are funded with PATH fu	
⊠Personnel □Consultants	∐Equipment ⊠Supplies	⊠Travel ⊠Other
	€300ppoo	2000

Description of the flow of federal PATH funds in California: PATH funding in California is allocated to the counties from the California State Department of Health Care Services. Each county has a Mental Health Program that provides services to the public in California; the PATH funds are distributed at the county level to either county or contracted providers.

Directions - Provider Intended Use Plan -

The Provider Intended Use Plan will provide specific information on each organization and program funded with PATH Federal and Match funds, and should be answered at the provider's level.

- 1. Provider Name (if different from the Legal Name):TBD
- 2. Total Federal PATH Dollars Allocated from Counties: \$35,072
- 3. Total Match Dollars in Budget: \$6,522 (Provider's responsibility)
- 4. Who Provides the Match? Provider will meet \$6,522 of the required match and the County will meet the remainder of the required match of \$5,169 for the entire grant.
- 5. What funding source is used for Match? Provider TBD, but through non-federal funding
- 6. Please provide a brief overview of your organization's history, current existing programs, and services provided.

TBD based on the outcome of a competitive procurement process. The organization will be requested to have experience working with the homeless population within El Dorado County and special consideration will be given to entities with a demonstrated efectiveness in serving homeless veterans.

- 7. The purpose of this section is to provide a description of your organization's plan to provide coordinated and comprehensive services to eligible PATH Clients. Please provide the following information as it relates to activities for FY 2014-2015.
 - a. The projected number of adult clients to be contacted using PATH funds. 100
 - b. The projected number of adult clients to be enrolled using PATH funds. 50
 - The projected percentage of adult clients served with PATH funds to be "literally" 50% homeless (i.e., living outdoors or in an emergency shelter rather than at imminent risk of homelessness.)
 - d. Identify activities that your organization will perform to maximize the use of PATH funds to serve adults who are literally homeless as a priority population.
 - TBD Provider will work with populations who are literally homeless, such as individuals living in tents, parks, or other sites. Outreach will be provided to those who are literally homeless, as well as to those who may be soon to be homeless.
 - e. Identify your organizations' strategies in utilizing PATH funds to target street outreach and case management as priority services.
 - TBD Provider will go to locations where homeless individuals and families are known to congregate to perform outreach. Those who appear to qualify for the PATH program will be screened for eligibility and enrolled as appropriate. Ongoing case management

activities will be performed with the enrolled individuals/families, including meeting on a regular basis, assisting with benefit applications and following up to ensure linkage with services.

f. Identify how your organization will provide, pay for, or support evidenced-based practices and other training for local PATH-funded staff.

TBD - Provider will send up to two individuals to SOAR training, utilizing PATH funding for the costs of the training. To ensure that maximum funding goes to direct services, preference will be given to training provided in the northern California area when PATH funds are requested to pay for staff time and travel, even if it means waiting a couple extra months for the training.

Additionally, through other non-federal funding sources, the Provider will meet a portion of the required match (in-kind and/or cash). The specific source of the non-federal funds will depend upon the Provider selected.

- g. List the evidenced-based practices currently used.
 - TBD At a minimum, Provider will be required to have staff trained in or obtain training in SOAR for at least two staff members.
- h. Describe your organization's status on HMIS migration and a plan, with accompanying timeline, to migrate data in the next 1-2 years. If your organization is fully utilizing HMIS for PATH services, please describe plans for continued training and how you will support new staff.
 - TBD Provider will be required to enter data into the HMIS system utilized in El Dorado County.
- Describe how your organization will provide, pay for, or otherwise support HMIS training and activities to migrate PATH data into HMIS.
 - TBD Provider will seek training from the HMIS lead agency administrator/trainer.
- j. Identify community organizations that provide key services (e.g., primary health, mental health, substance abuse, housing, employment) to PATH eligible clients within your service area and describe coordination activities and policies with those organizations.
 - TBD Provider will be required to coordinate with other organizations who provide services for the homeless and mainstream services.
- k. Please explain the gaps in current service systems that pertain to your PATH client population.
 - Current primary gaps include the need for acquiring SSI/SSDI benefits and housing assistance. Linkage with a medical home, mental health services and substance use services for the homeless population is also a priority need.
- Please explain services you provide for clients who have both a serious mental illness and substance use disorder in your PATH client population.
 - TBD Provider will be required to provide linkage to these services.
- m. Describe your plan to train PATH staff on SSI/SSDI Outreach, Access, and Recovery (SOAR). Indicate the number of PATH staff trained in SOAR last fiscal year (2013-14), the number of PATH funded consumers assisted through SOAR, and the approximate number of staff to be trained in SOAR for the current grant year (2014-15).
 - TBD There were no staff trained in SOAR in FY 2013-14, and thus no consumers were assisted through an El Dorado County PATH grant in FY 2013-14. A minimum of two individuals will be required to attend SOAR training during the term of the PATH grant. After training is received, it is anticipated that ten individuals per trained staff will be assisted within a 12-month period.

- n. What are your organization's 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) in your client population.
 - TBD Provider will coordinate with all providers of housing in the County, including emergency housing, transitional housing, and permanent supportive housing.
- 8. Describe your organization's participation in the HUD Continuum of Care program and any other local planning, coordinating or assessment activities.
 - TBD The Provider will be required to participate in the Continuum of Care. Provider may also be active with other homeless initiatives in the County.
- 9. Please describe the following information for your specific client population: (a) the demographics of the client population; (b) the demographics of the staff serving the clients; (c) how staff providing services to the target population will be sensitive to age; gender and racial/ethnic differences of clients; and (d) the extent to which staff receive periodic training in cultural competence. (See Enclosure 15:"Guidelines for Accessing Cultural Competence".)
 - (a) Literally Homeless: According to the January 2013 Point-in-Time Homeless Count Report from the El Dorado County Continuum of Care, there were a total of 252 homeless people in El Dorado County. This number is made up of 213 adults and 39 children. Of the 252 homeless individuals counted, 51 were living outside in the elements and 201 were in some type of sheltered location. Among the adults were 132 males and 78 females. Two surveys were left unmarked. Four individuals were under 18, 31 individuals were age 18-24, 175 individuals were age 25 and above. Three individuals declined to state their age. There were 65 individuals counted on the day of the survey that fit the HUD definition of chronically homeless. Of the adults surveyed, 166 indicated having a local connection to El Dorado County. Adults counted in this section either became homeless while in El Dorado County and/or call El Dorado County their home. One hundred seventy-seven individuals identified their race as "white" and 36 identified their race as "other". The reasons for homelessness among adults surveyed were identified as unemployment (125), rent/mortgage (82), substance abuse (73) and mental/physical health issues (60) (individuals could identify more than one reason in their response). The respondents indicated the following disabilities: drug-related (72), alcohol related (68), mental health related (64) (individuals could list more than one disability in their response). Ninety-two individuals indicated that they had been victims of abuse in a relationship. Eleven individuals indicated that they had participated in military service. Responses indicated that overall amongst homeless individuals with children, there were 112 children under the age of 18; 39 of whom were under that individual's care at the time of the census. The assumption is that the remaining 74 children were either in foster care or with a family member. Of those adults surveyed, 98 individuals indicated having an income source from either work or benefits. Factors that individuals indicated could have prevented their homelessness were housing, employment and alcohol/drug counseling.

Soon to be Homeless: It would be anticipated that the demographics may be similar to those who are literally homeless, however there is the potential that more family units may be in need of assistance to keep from becoming homeless.

(b) TBD - Provider may engage staff or volunteers with lived experience. County staff performing activities to support this grant will vary in age, gender, race/ethnicity, etc. It is difficult to say exactly which staff will be assigned to perform these duties at the start of the grant period.

- (c) TBD Provider to provide services in a culturally competent manner. County staff attend regular cultural competency training meetings offered through the Mental Health Division. These training meetings help staff identify areas where a knowledge of an individuals age, gender, and/or race/ethnicity may need to be considered in the services provided and provides them with some methods of addressing those areas.
- (d) TBD for Provider. County staff attend monthly training meetings.
- 10. Describe how persons who are homeless and have serious mental illnesses and any family members will be involved at the organizational level in the planning, implementation, and evaluation of PATH-funded services. For example, indicate whether persons who are PATH-eligible are employed as staff or as volunteers or serve on governing or formal advisory boards. (See Enclosure 16 "Guideline for Consumer and Family Participation".)

TBD for Provider.

For the County, services will be provided through the County's Mental Health Services Act (MHSA) Plan "Outreach and Engagement" project. The MHSA Plan is developed annually based upon community input, including input from individuals who may be homeless or serve as homeless liaisons. Part of the MHSA Community Planning Process includes receiving input from the public, including those who may be homeless or homeless advocates, on how the programs have worked and what changes may be needed to the program. An additional project in the MHSA Plan is the Consumer Leadership Academy, which will provide training to consumers to assist in obtaining employment in the public mental health system. Individuals who are PATH-eligible may seek employment or volunteer positions with the County provided they meet the County's minimum qualifications for positions. They may also serve on governing or formal advisory boards provided they meet the required qualifications for those positions.

11. Describe Veteran specific services your organization will provide.

TBD - Provider. In selecting the Provider, special consideration will be given to entities with a demonstrated effectiveness in serving homeless veterans.

The Health and Human Services Agency provides services to Veterans and their families, through administration of the public assistance programs (e.g., Medi-Cal, CalFresh, CalWORKs) and the Workforce Investment Act (WIA). WIA is working directly with the El Dorado County Veteran Affairs, primarily on employment services, in the following ways: targeted referral services; on-site job search pilot program; referrals between our two organization; attending Veteran Commissions meeting; and working together on other Veteran-related issues. The Mental Health Division within Health and Human Services Agency provides specialty mental health services, primarily for those with Medi-Cal. Veterans generally seek services through the Veterans Administration, rather than the Mental Health Division, but the County's MHSA Plan identifies potential transportation assistance that may be available to assist Veterans is travelling to their mental health appointments and other related services.

12. Identify community organizations that provide key Veteran services (e.g., primary health, mental health, substance abuse, housing, employment) to PATH eligible veteran clients within your service area and describe coordination activities and policies with those organizations.

El Dorado County is a small, rural County. As such, most Veteran services are located in neighboring counties or states, such as in Sacramento County or in Reno, Nevada. However, there is a local Veteran Affairs Department in the County and a Veterans Commission. The Military Family Support Group of El Dorado County has regular meetings to support family members.

Veterans in El Dorado County are eligible for programs through national organizations, such as Volunteers of America. Services available to all residents of El Dorado County, such as the Connections-One Stop for employment services, are also available to Veterans and their families. The Provider will be required to work with these support organizations, as appropriate for the individual Veteran, when enrolling an eligible Veteran in the PATH program.

- 13. This section provides information on how technology is used to support collection of data.
 - a. Describe if and how technology (e.g. electronic health records [EHR], HMIS, etc.) will be used to facilitate case management or clinical care coordination across service sectors. If clinical services are provided, please describe the status of EHR adoption.
 - TBD Provider will be required to utilize HMIS at a minimum. El Dorado County Health and Human Services, Mental Health Division, uses an electronic health record to maintain client information and case management for its clients.
 - b. If you use an EHR, is it certified through the Office of the National Coordinator's EHR certification program? If not, do you plan to adopt or upgrade to a certified EHR?
 TBD for Provider.

The County's EHR system does not share information with other service providers in the County. However, according to the Office of the National Coordinator's website, portions of the County's selected EHR system may meet their certification criteria. The County does not intend to adopt or upgrade its EHR at this time.

- c. Do you use a separate HMIS system or is this HMIS data integrated into your EHR? Do you have plans to integrate HMIS with your EHR?
 - TBD For the County, HMIS is separate from the EHR.
- 14. Provide a detailed budget narrative that provides specifics and calculations used for PATH funds. The narrative should describe the attached DHCS1779P – Federal Grant Detailed Program Budget.

The specific staffing levels that the Provider will utilize is not yet known, but will be reported once the Provider is selected through a competitive procurement process. Provider staff and/or volunteers will perform the services identified on page 1 of this County Intended Use Plan, with the exception of the Screening and Diagnostic Services. Administrative funds will not exceed 10% of the total PATH funding, and will be utilized for activities such as report preparation and invoicing.

The numbers provided on Enclosures 7 and 8 for Provider services are estimated costs. The actual dollar values for Provider personnel, fringe benefits, travel and supplies are estimated based on anticipated expenditures. Final numbers will be reported to the State once a Provider is selected, but in no way will the expenditures exceed the maximum allowable (e.g., 10% for administrative, 20% for eligible housing services).

Provider personnel costs are estimated at \$20 per hour plus fringe benefits (estimated at approximately 30% of the salary costs). Through both PATH funding and required non-federal funds match, approximately 0.55 FTE will be available. Additional staffing levels may be provided through additional in-kind contributions from the Provider.

Screening and Diagnostic Services will be provided by the Health and Human Services agency through a Mental Health Worker, Clinician and/or Coordinator, equivalent to approximately 0.05 FTE, which will provide the remaining required match from State MHSA funding. Administrative staff will provide on-going program monitoring, technical assistance and fiscal support.

Other costs include approximately \$500 in supplies, including general office supplies and specific outreach materials. Travel costs would be for participation of Provider staff in SOAR training. In the event that the actual costs for the travel and supplies are not utilized in those categories, the Provider may shift those funds to Personnel costs to allow for increased FTE direct service hours.

Housing assistance of \$6,100 would be for allowable activities as specified in the grant application.

FEDERAL GRANT DETAILED PROGRAM BUDGET

STATE FISCAL YEAR:____ 2014-2015

TYPE OF GRANT:

PATH

COUNTY:

El Dorado County

SUBMISSION DATE:

05/16/2014

FISCAL CONTACT:

Michele McAfee

PROGRAM CONTACT: Ren Scammon

TELEPHONE NUMBER: (530) 295-6910

TELEPHONE NUMBER: (530) 621-6340

EMAIL ADDRESS:

michele.mcafee@edcgov.us

E-MAIL ADDRESS:

ren.scammon@edcgov.us

PROGRAM NAME:

PATH Outreach and Engagement

STAFFING				1		2		3
	ANNUAL	GRANT	F		NON	EDERAL MATCH		
TITLE OF POSITION	SALARY	FTE		AMOUNT		AMOUNT		TOTAL
1 Program Coordinator (Provider)	41600	0.55	_	18,068	\$	5,022	200	23,090.00
2 Fringe Benefits	12480		\$	5,397	\$	1,500	\$	6,897.00
3 Mental Health Clinician (County)	60000	0.05			\$	3,000	\$	3,000.00
4 Fringe Benefits	20000				\$	1,000	\$	1,000.00
5							\$	-
6			-				\$	- · · · · · · · · · · · · · · · · · · ·
8			-				\$	
9			\vdash			···	\$	
0			\vdash				\$	
1			-				\$	_
2 TOTAL STAFF EXPENSES (sum lines 1 thru 11)	\$ 134,080	0.60	\$	23,465	\$	10,522	\$	33,987
3 Consultant Costs (Itemize):					\$		\$	
4					•		\$	-
5						×	\$	
6							\$	_
7 Equipment (Where feasible lease or rent) (Itemize	·):				\$	-	\$	=
8							\$	-
9	·						\$	•
0							\$	-
1							\$	
2 Supplies (Itemize):		-					\$	-
General Office Supplies (Provider)			\$	150	\$		\$	150
4 Outreach Materials (Provider)			\$	350	\$	-	\$	350
5			├				\$	-
6			-				\$	-
8 Travel -Per diem, Mileage, & Vehicle Rental/Leas	e (Provider)		\$	1,500	\$		\$	1,500
9	c (i Tovider)		1	1,000	*		\$	1,000
Other Expenses (Itemize):							\$	
Housing Assistance (Provider)			\$	6,100	\$		\$	6,100
2				,			\$	•
3				- And and secretary			\$	-
4							\$	-
5							\$	-
6							\$	-
COUNTY ADMINISTRATIVE COSTS (10% PAT	\$	3,507	\$	1,169	\$	4,676		
NET PROGRAM EXPENSES (sum lines 12	\$	35,072	\$	11,691	\$	46,763		
OTHER FUNDING SOURCES: Federal Funds								
Non-Federal Funds	Ļ							
1 TOTAL OTHER FUNDING SOURCES (sum lines	39 & 40)		\$	-	\$	-	\$	-
GROSS COST OF PROGRAM (sum lines 38 an	\$	35,072	\$	11,691	\$	46,763		

DHCS APPROVAL BY: TELEPHONE: DATE:

Health Services Department, Mental Health Division FY 2014/2015 PATH Budget Summary New Grant Allocation Amount - Revision

	EDC Mental Health										
Revenue: PATH Allocation EDC HSD MHD's Match Total PATH Budget	\$ \$	35,072 11,691 46,763									
	F	PATH									
	All	ocation	ED	C Match							
Expenses:											
Salary PATH - MH Clinician 1A (Vacant - 5A)	\$	-	\$	3,000							
Total Salary	\$	-	\$	3,000							
Benefits PATH - MH Clinician 1A (Vacant - 5A)	\$	-	\$	1,000							
Total Benefits	\$	-	\$	1,000							
Total Salary & Benefits	\$	-	\$	4,000							
Other Expenses Administration	\$ \$	8,100 3,507	\$ \$	- 1,169							
Total Grant	\$	11,607	\$	5,169							

Note: This worksheet only reflect our County's portion of the Grant and match allocation.

							Р	ATH				
	PATH			TH Match	P	ATH	Ve	terans				
FY 2013/14 Submitted County Budget		75%		25%	Vete	rans 75%	Mat	ch 25%		Totals		
PATH - MH Clinician 1A (Vacant - 5A)	\$	-	\$	4,000	\$	-	\$	-	\$	4,000		
Contract Provider staff	\$	23,465	\$	6,522	\$	-	\$	_	\$	29,987		
Security Deposits, Rent, etc	\$	6,100	\$	~	\$	-	\$	-	\$	6,100		
Supplies	\$	500	\$	=	\$	-	\$	-	\$	500		
Travel & Training (SOARS)	\$	1,500	\$	-	\$	-	\$	-	\$	1,500		
Admin (10% of budget)	\$	3,507	\$	1,169	\$	-	\$	-	\$	4,676		
Totals	\$	35,072	\$	11,691	\$	-	\$	-	\$	46,763		

		Salary Benefits																	
Employee	3000 3020			3020		3022		3040		3041		3042	3046		3060		Benefits Total		Total
PATH - MH Clinician 1A (Vacant - 5A)	\$	60,000	\$	10,742	\$	895	\$	26,876	\$	-	\$	154	\$	880	\$	610	\$	20,000	\$ 80,000
Totals	\$	60,000	\$	10,742	\$	895	\$	26,876	\$	-	\$	154	\$	880	\$	610	\$	20,000	\$ 80,000
			FT	E PATH		PATH	PA	TH Match											
PATH Position	FI	E PATH	V	eterans	(Rounded)	(F	Rounded)											
PATH - MH Clinician 1A (Vacant - 5A) Salary		0.05		-	\$	-	\$	3,000											
PATH - MH Clinician 1A (Vacant - 5A) Benefits		0.05		-	\$		\$	1,000											
Total Salaries & Benefits					\$		\$	4,000											
Other Expenses*					\$	8,100	\$	_											
Admin					\$	3,507	\$	1,169											
Totals					\$	11,607	\$	5,169											

^{*} Security deposits, one time rent payments to prevent eviction and cost associated with matching eligible homless individuals with appropriate housing situations.