



Edwin C. LeGrand III– Executive Director

**MDMH Projects for Assistance in Transition from
Homelessness (PATH) Grant**

Request for Proposal

For

FY 2012

Applications for PATH Homeless Services are now being
accepted by the:

MDMH Division of Housing and Community Living

Grant Period
April 1, 2012 - August 31, 2013

**Checklist for Completing the FY 2012
MDMH PATH Grant Request for Proposal**

Agency Name _____ Date _____

Fiscal Year _____

Staff Signature _____

You must include a copy of this checklist along with your application submission.
(Please insert this form on top of the application).

Your initial on the items below indicates that you understand and adhere to the specifications and requirements of MDMH PATH Grant Request for Proposal.

Guidance Document _____

I. Introduction _____

II. Project Specifications/Requirements: _____

 Project Abstract _____

 Assessment of Need _____

 Organizational/Management Background and Capacity _____

 PATH Service Plan and Implementation _____

 Evaluation and Data Collection _____

III. Budget Narrative _____

IV. Application Process _____

 Submission _____

 Format _____

 Non-Responsive Applicants _____

V. Proposed Budget Forms and Instructions _____

 DMH-100-1 Complete Budget) _____

 DMH-100-2 (Personnel Budget) _____

 DMH-100-3 (Travel, Contractual Services, etc.) _____

Mississippi Department of Mental Health,

Division of Housing and Community Living Guidance Document

Substance Abuse and Mental Health Services Administration (SAMHSA)

As authorized under Section 521 et seq. of the Public Health Service (PHS) Act, the Substance Abuse and Mental Health Services Administration (SAMHSA), Center for Mental Health Services (CMHS) the Projects for Assistance in Transition from Homelessness (PATH) program provides States and territories with funds for flexible community-based services for persons with serious mental illnesses and co-occurring substance use disorders who are homeless or at imminent risk of becoming homeless.

Over the past two decades, SAMHSA has provided strong support for housing activities through the PATH program, homeless discretionary grant programs, and technical assistance such as the Permanent Supportive Kit. Recent significant developments in Federal homeless, housing, and health care policy create the imperative for SAMHSA to assume a strong, collaborative leadership role on housing and recovery issues that affect people with mental and substance use disorders. This policy environment also provides the opportunity for SAMHSA to develop an actionable housing agenda that includes evidence-based Permanent Supportive Housing models that supports a Recovery (PSHR) approach. Permanent supportive housing models have proven to be effective. SAMHSA is encouraging states to develop a uniform PSHR policy framework, priority population targeting criteria, defined pathways for entry into housing, and a multi-year plan to expand the supply of PSHR and other subsidized and affordable housing resources. This approach coupled with street outreach and case management should result in strong linkages and referrals to permanent supportive housing for persons with serious mental illnesses and co-occurring substance use disorders who are homeless or at imminent risk of becoming homeless.

Mississippi Department of Mental Health, Division of Housing and Community Living

In order to understand the context in which we provide services to individuals in Mississippi with serious mental illnesses and co-occurring substance use disorders who are homeless or at imminent risk of becoming homeless, our Mississippi PATH program must understand and adopt the strategic initiatives put forth by SAMHSA as it impacts this targeted population and to present the philosophy of the MDMH Division of Housing and Community Living with regard to transitioning these individuals from homelessness.

SAMHSA's 8 Strategic Initiatives

SAMHSA's mission is to reduce the impact of substance abuse and mental illness on America's communities by improving the quality and availability of substance abuse prevention, alcohol and drug abuse treatment, and mental health services. In order to achieve this mission, SAMHSA has identified eight Strategic Initiatives to focus the Agency's work on improving lives and capitalizing on emerging opportunities. These initiatives will focus SAMHSA's efforts and maximize the impact of our resources on areas of urgency and opportunity. Housing and homelessness resides in SAMHSA's strategic initiative #4, Recovery Support. This initiative includes objectives designed to provide housing and reduce barriers to accessing effective services that sustain recovery for individuals with mental and substance use disorders who are homeless. Mississippi's PATH program must consider these Initiatives in addressing the needs of individuals in our state with serious mental illnesses who are homeless and also may have a

co-occurring substance use disorder.

Goals of the PATH Program in Mississippi

Mississippi's PATH program will support the delivery of eligible services to persons who are homeless and have serious mental illnesses and co-occurring substance use disorders, with a particular emphasis on (a) adults, (b) persons who are literally homeless, (c) street outreach (d) case management and (e) services which are not supported by mainstream mental health programs. In order to do this, we must strengthen and increase referrals and linkages to permanent housing that support recovery. The PATH Program will need to provide street outreach and case management activities to ensure that individuals who have a serious mental illness or co-occurring mental and substance use disorders are referred and linked to permanent housing opportunities.

SAMHSA and HUD have set a goal that within the next 3-5 years, all PATH programs will migrate PATH Data into the Homeless Management Information System (HMIS) which will facilitate reliable and consistent client-level and aggregate data on the performance of the PATH program. States will be supported in this effort by SAMHSA and HUD in order to meet this goal. This support will include such activities as intensive training and technical assistance. PATH providers will need to activate or reinforce partnerships with the existing HMIS systems in our state in order to help make this happen in Mississippi.

Expectations of the PATH Program in Mississippi

Service Delivery

PATH funds in Mississippi are distributed to as grants to local, public or non-profit organizations to provide a variety of services to individuals who (1) have serious mental illnesses and may also have co-occurring substance use disorders, and (2) are homeless or at imminent risk of becoming homeless. PATH-eligible services consist of the following:

- outreach services
- screening and diagnostic treatment services
- habilitation and rehabilitation services
- community mental health services
- alcohol or drug treatment services
- staff training, including the training of individuals who work in shelters, mental health clinics, substance abuse programs, and other sites where homeless individuals require services
- case management services
- supportive and supervisory services in residential settings
- referral for primary health services, job training, educational services

For the purposes of this application, case management services include:

- preparing a plan for the provision of community mental health services to the eligible homeless individual involved, and reviewing the plan at least every 3 months;
- providing assistance in obtaining and coordinating social and community living services for the eligible homeless individuals, including services related to daily living activities, personal financial planning, transportation services, and habilitation and rehabilitation services, prevocational and vocational services, and housing services;
- providing assistance to the eligible homeless individual in obtaining income support services, including housing assistance, food stamps, and supplemental security income

- referring the eligible homeless individual for such other services as may be appropriate.

Targeted Population and Services

PATH funds in Mississippi must be used to maximize supports and services to the most vulnerable individuals with serious mental illnesses and co-occurring substance use disorders who are homeless. PATH providers in Mississippi must primarily target adults who are literally homeless and must primarily provide street outreach, case management, and services which are not supported by mainstream mental health programs for either this population or in the geographic service area.

HMIS

PATH providers in Mississippi are expected to actively participate in the effort to migrate PATH data into HMIS within the next 3-5 years.

PATH providers in Mississippi are expected to participate in HMIS technical assistance and training activities to ensure that Mississippi meets the 3-5 year expectation to migrate PATH data into HMIS.

Funding mechanism and Eligible Applicants

Awards will be made as grants to political subdivisions of the State and to nonprofit private entities (including community-based veterans' organizations and other community organizations) for providing allowable PATH services as specified in this notice.

Match Requirement

Successful applicants must provide non-Federal contributions toward in an amount that is not less than \$1 for each \$3 of PATH funds received. Non-Federal contributions required may be in cash or in kind, fairly evaluated, including plant, equipment, or services.

Use of PATH Grant Funds

PATH grant funds must be used for purposes supported by the program.

Grant funds may not be expended:

- to support emergency shelters
- for inpatient psychiatric treatment
- for inpatient substance abuse treatment
- to make cash payments to intended recipients of mental health or substance abuse services

Any lease arrangements in association with the proposed project utilizing PATH funds may not be funded by PATH beyond the project period nor may the portion of the space leased with PATH funds be used for purposes not supported by the grant.

Grant funds may not be used to pay for the purchase or construction of any building or structure to house any part of the grant program.

Operational Definitions for PATH Services in Mississippi

- a) Homeless individual - an individual who lacks housing (without regard to whether the individual is a member of a family), including an individual whose primary residence during the night is a supervised public or private facility that provides temporary living accommodations.
- b) Imminent risk of becoming homeless – may include one or more of the following criteria: doubled-up living arrangement where the individual's name is not on the lease, living in a condemned building without a place to move, having received an eviction notice without a place to move, living in temporary or transitional housing that carries time limits, being discharged from a health care or criminal justice institution without a place to live.
- c) Serious mental illness - persons ages 18 or over with a diagnosable mental disorder of such severity and duration as to result in functional impairment that substantially interferes with or limits major life activities.
- d) Co-occurring serious mental illness and substance use disorders - individuals who have at least one serious mental disorder and a substance use disorder, where the mental disorder and substance use disorder can be diagnosed independently of each other.

Cultural Competence

Experience or track record of involvement with the target population - The applicant organization should have a documented history of positive programmatic involvement with the population/community to be served; e.g., a history of involvement with the target population or community.

Training and staffing - The staff of the organization should have training in gender/age/cultural competence. Attention should be placed on staffing the initiative with people who are familiar with, or who are themselves members of, the population/community.

Language - If an organization is providing services to a multi-linguistic population, there should be multi-linguistic resources, including use of skilled bilingual and bicultural individuals whenever a significant percentage of the target population/community is more comfortable with a language other than English.

Materials - It should be demonstrated that material and products such as audio-visual materials, PSAs, training guides and print materials to be used in the project are gender/age/culturally appropriate or will be made consistent with the population/community to be served.

Evaluation - Program evaluation methods and instrument(s) should be appropriate to the population/community being served. There should be rationale provided for the use of the evaluation instrument(s) that are chosen, and the rationale should include a discussion of the validity of the instrument(s) in terms of the gender/age/culture of the group(s) targeted. The evaluators should be sensitized to the culture and familiar with the gender/age/culture whenever possible and practical.

Community representation - The population/community targeted to receive services should be a planned participant in all phases of program design. There should be an established mechanism to provide members, reflective of the target group to be served, with opportunities to

influence and help shape the project's proposed activities and interventions. A community advisory council or board of directors of the organizations (with legitimate and working agreements) with decision-making authority should be established to affect the course and direction of the proposed project. Members of the targeted group should be represented on the council/board.

Implementation - There should be objective evidence/indicators in the application that the applicant organization understands the cultural aspects of the community that will contribute to the program's success and which will avoid pitfalls.

CONSUMER AND FAMILY PARTICIPATION

Applicants should have experience or track record of involving mental health consumers and their family members. The applicant organization should have a documented history of positive programmatic involvement of recipients of mental health services and their family members. This involvement should be meaningful and span all aspects of the organization's activities as described below:

Program Mission - An organization's mission should reflect the value of involving consumers and family members in order to improve outcomes.

Program Planning - Consumers and family members are involved in substantial numbers in the conceptualization of initiatives including identifying community needs, goals and objectives, and innovative approaches. This includes participation in grant application development including budget submissions. Approaches should also incorporate peer support methods.

Training and Staffing - The staff of the organization should have substantive training in and be familiar with consumer and family-related issues. Attention should be placed on staffing the initiative with people who are themselves consumers or family members. Such staff should be paid commensurate with their work and in parity with other staff.

Informed Consent - Recipients of project services should be fully informed about the benefits and risks of services and make a voluntary decision, without threats or coercion, to receive or reject services at any time.

Rights Protection - Consumers and family members must be fully informed of all of their rights including those designated by the President's Advisory Commission's Healthcare Consumer Bill of Rights and Responsibilities: information disclosure, choice of providers and plans, access to emergency services, participation in treatment decisions, respect and non-discrimination, confidentiality of healthcare information, complaints and appeals, and consumer responsibilities.

Program Administration, Governance, and Policy Determination - Consumers and family members should be hired in key management roles to provide project oversight and guidance. Consumers and family members should sit on all Boards of Directors, Steering Committees and Advisory bodies in meaningful numbers. Such members should be fully trained and compensated for their activities.

Program Evaluation - Consumers and family members should be integrally involved in designing and carrying out all research and program evaluation activities. This includes determining research questions, designing instruments, conducting surveys and other research methods, and analyzing data and determining conclusion. Consumers and family members should also be involved in all submission of journal articles. Evaluation and research should also include consumer satisfaction and dissatisfaction measures.

Mississippi Department of Mental Health Division of Housing and Community Living Request for Proposal

I. Introduction

The following are specific requirements to which all programs must adhere. Commitment to the following guidelines assure the Mississippi Department of Mental Health that the Service Provider agrees to abide by the following conditions for services made available with funds from the Mississippi Department of Mental Health

A. Authority

The Substance Abuse and Mental Health Services Administration (SAMHSA) is the Federal agency charged with improving the quality and availability of prevention, treatment, and rehabilitative services in order to reduce illness, death, disability, and costs to society resulting from substance abuse and mental illnesses. SAMHSA was established by Congress under Public Law 102-321 on October 1, 1992, to strengthen the nation's health care capacity to provide prevention, diagnosis, and treatment services for substance abuse and mental illnesses. SAMHSA works in partnership with states, communities, and private organizations to address the needs of people with substance abuse and mental illnesses as well as the community risk factors that contribute to these illnesses.

The Governor designated the Mississippi Department of Mental Health (DMH) as the Single State Agency for the administration of the Projects for Assistance in Transition from Homelessness (PATH) Formula Grant Program. The mission of the PATH program in Mississippi is to provide flexible community-based services for persons with serious mental illnesses and co-occurring substance use disorders who are homeless or at imminent risk of becoming homeless that result in strong linkages and referrals to permanent supportive housing.

B. Purpose

It is the goal of the PATH program in Mississippi to partner with people in recovery from mental and substance use disorders and who are homeless or at imminent risk of becoming homeless to identify and support approaches that foster health and resilience; increase permanent housing, employment, education, and other necessary supports; and reduce discriminatory barriers. The DMH PATH program will award and administer grants for the purpose of providing services designed to meet the needs of eligible homeless individuals and that help ensure that permanent housing and supportive services are available for individuals with or in recovery from mental and substance use disorders.

C. State Priority

In conjunction with both the DMH Strategic Plan and the Community Mental Health Services State Plan, the PATH program seeks to develop and maintain programs that support the provision of services that are targeted to homeless individuals with serious mental illness as well

as strengthen and expand services for individuals with co-occurring mental illness and substance abuse disorders.

II. Project Specifications and Requirements

Sections A-F are the Project Narrative of the application. In developing the Project Narrative section of your application, use the instruction and guidance provided which are specific to the PATH program. Your responses may be brief but must clearly convey the requested information. Some of the information may best be presented in table format.

To facilitate review of your application, number each page of the application.

Use headers for each subsection for identifying your response to each item. Incomplete applications or applications that are virtually identical to a previously submitted application from a prior year will be deemed Non-Responsive (see C. Non-Responsive Applications, p. 12).

A. Project Abstract (150 words or less)

Provide highlights and key points of the proposed program. It should be brief in presenting the goals of the program and how the applicant intends to accomplish them. This narrative should provide more general information about your proposed program and should not include specifics such as objectives and activities.

B. Assessment of Need

Document the prevalence of homelessness by PATH definition that applies to the geographic area and any targeted homeless population you propose to serve using current data. Documentation of need may come from local, state and national data (e.g. HUD homeless data for Mississippi, Continuum of Care data for Mississippi, etc.). For data sources that are not widely recognized, provide sufficient information on how the data was collected so reviewers can assess the reliability and validity of the data. Data must be related to the target population/s identified in goals and objectives.

C. Organizational/Management Background and Capacity

Provide a brief description of your organization including name, type of organization, age range of individuals served, length and type of experience serving individuals who are homeless, housing status of the individuals you propose to serve using PATH funds, nature and type of services provided by your organization, region/area served, overall agency capacity, nature and type of community resources available that can benefit the proposed program. Provide a description of the organizational structure, including management staff and other key personnel listed in the budget. Briefly describe the agency's ability to provide specific homeless services made possible by the agency's infrastructure and existing resources, including efforts to engage community stakeholders and leverage resources. Include a description of your capacity to implement culturally competent programs, practices, and policies.

D. PATH Service Plan and Implementation

1. Describe the organization's plan to provide coordinated and comprehensive services to individuals eligible by definition for PATH services, including:
 - the projected number of homeless adults to be contacted using PATH funds
 - projected number of homeless adults to be enrolled in services using PATH funds
 - percentage of homeless adults served with PATH funds who are projected to be literally homeless (i.e., living outdoors or in an emergency shelter) rather than those at imminent risk of homelessness
 - activities to be implemented that will maximize the use of PATH funds to serve adults who are literally homeless as a priority population
 - strategies that will be used to target PATH funds for street outreach and enrollment in case management as priority services
 - activities that will be implemented to support the migration of PATH data into HMIS within 3-5 years in Mississippi
2. Describe the organizations use of evidence-based practices, evidence-informed practices, or promising practices to service homeless individuals. Evidence-based practices are those that have been reviewed by the National Registry of Evidence-based Programs and Practices (NREPP) according to rigorous standards of research. Programs are considered evidence-based if they are listed on the National Registry of Effective Programs and Practices.
3. Describe your current awareness of and involvement with HUD's HMIS homeless data tracking system that is managed through the Continuum of Care (CoC) process in Mississippi in terms of training, support, use of HMIS that your organization participates in.
4. Describe your agency's involvement with other community organizations that provide key services (e.g., primary health, mental health, substance abuse, housing, employment) to PATH eligible individuals. Describe the coordination of activities and policies with those organizations.
5. Describe what you see as gaps in the current systems for homeless individuals in your area and in Mississippi.
6. Describe services that you provide or that you have access to for individuals who have both a serious mental illness and substance use disorder.
7. Describe strategies or resources that your organization provides or that are available for making suitable housing available to PATH eligible individuals (e.g., indicate the type of housing usually provided and the names of the agencies that provide the housing).
8. Continuum of Care - Describe your agency's participation in the HUD Continuum of Care for homeless individuals that is active in your area of the state. Describe any other local planning, coordinating or assessment activities that are relevant.
9. Describe (a) the demographics of the individuals you serve and plan to serve; (b) the demographics of the staff serving the individuals; (c) how staff providing services to the target population will be sensitive to age, gender and racial/ethnic differences of the individuals receiving services; and (d) the extent to which staff receive periodic training

10. Describe how persons who are homeless and have serious mental illness 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.

E. Evaluation and Data Collection

PATH grant recipients are required to collect and report data on the PATH services provided and the homeless individuals receiving services. Data collection tools will be used to track services which will be reported to the State PATH Contact each month and to SAMHSA annually. Describe your current ability to collect and report data in a consistent systematic manner.

PATH grant recipients are required to report on all homeless individuals served by the organization that receives PATH funds, not just persons served directly with PATH funds. PATH grant recipients will be expected to track and report, at a minimum, the following three voluntary outcome measures:

1. Increase number of persons referred to and attaining housing
2. Increase number of persons referred to and attaining mental health services
3. Increase number of persons referred to and attaining substance abuse services

Describe your plans and capacity to provide services that will achieve these outcomes. Describe additional PATH-specific outcome measures you expect to achieve and the services that will help achieve these additional outcomes.

III. BUDGET NARRATIVE

INSTRUCTIONS

A detailed **Budget Narrative** must be submitted with each **PATH Request for Proposal** Application.

1. The Budget Narrative must provide a comprehensive categorical justification of the proposed budget. Every line item in a category for which funds are requested must be thoroughly addressed.
2. Justification for funding of each category should include:
 - What type of items will be purchased in the category
 - The approximate cost of the items
 - How the items are necessary for the operation of the program
 - Who will provide contractual services such as medical services
 - Local funding applied to the cost of the item, if applicable.

IV. PATH APPLICATION PROCESS

A. Submission

Applications are due by 5:00 p.m., March 16, 2012.

All applications must be submitted to the attention of:

**Trisha Hinson
MS Department of Mental Health
Division of Housing and Community Living
239 N. Lamar Street
1101 Robert E. Lee Building
Jackson, MS 39201**

Mailed submission must be postmarked no later than March 16, 2011. Hand delivered applications must be delivered to Trisha Hinson at the address identified above no later than 5:00 p.m., March 18, 2011.

Faxed or emailed applications will not be accepted.

B. Format

- All pages must be numbered.
- Applicants must use section headings when addressing each application component.
- Applications must be bound using a binder clip. Do not staple or submit applications in three-ring binders.
- All attachments must be referenced and placed in the appendix.
- Applicants must submit one (1) signed original and two (2) additional copies of the application.

C. Non-responsive Applications

Applications submitted under this solicitation will be considered non-responsive if any of the following conditions exist:

1. Failure to comply with all required application components and instructions
2. Failure to meet deadlines
3. Incomplete submissions
4. Applications that are virtually identical to an application submitted in a prior year

V. Proposed Budget Forms and Instructions

**DEPARTMENT OF MENTAL HEALTH
PROPOSED BUDGET**

SERVICE PROVIDER NUMBER: _____

SERVICE PERIOD: _____

SERVICE PROVIDER NAME: _____

ADDRESS: _____

PROPOSED BUDGET FOR FISCAL YEAR BEGINNING _____ AND ENDING _____

| | | FUND SOURCE | | |
|---------------------------|-------|-------------|-------|-------|
| | | FEDERAL | STATE | LOCAL |
| CATEGORY OF EXPENSE | TOTAL | | | |
| I. PERSONNEL | | | | |
| II. TRAVEL | | | | |
| III. CONTRACTUAL SERVICES | | | | |
| IV. COMMODITIES | | | | |
| V. EQUIPMENT | | | | |
| SUBTOTAL I. - V. | | | | |
| VI. INDIRECT COST | | | | |
| TOTAL I. - VI. | | | | |

Submitted by: _____

Title: _____

Date: _____

Telephone: _____

A. PROPOSED BUDGET SUMMARY - Form DMH-100-1

SERVICE PROVIDER NUMBER: Completed by Department of Mental Health.

SERVICE PERIOD: Indicate the beginning and ending dates for the funds being requested.

SERVICE PROVIDER NAME: Indicate agency responsible for administration of program

ADDRESS: Indicate the address of the service provider

PROPOSED BUDGET FOR FISCAL YEAR: Indicate the beginning and ending dates of the fiscal year (state or federal) during which the program will be operated.

CATEGORY OF EXPENSES:

- SERVICE PERIOD NUMBER: This item will be completed by the Department of Mental Health
- SERVICE PERIOD: Indicate the beginning and ending dates for the funds being requested
- SERVICE PROVIDER NAME: Indicate the name of the agency that will have the responsibility for administering the program
- ADDRESS: Indicate the address of the service provider
- PROPOSED BUDGET FOR FISCAL YEAR: Indicate the beginning and ending dates of the fiscal year (state or federal) during which the program will be operated
- CATEGORY OF EXPENSES:
 - I. PERSONNEL: The total of this item must correspond with the total column (total year cost) of SECTION I – PERSONNEL (DMH 100-2), with corresponding totals per fund source.
 - II. TRAVEL: The total of this item must correspond with the total column, SECTION II – TRAVEL (DMH – 100-3), with corresponding totals per fund source.
 - III. CONTRACTUAL SERVICES: The total of this item must correspond with the total column, SECTION III – CONTRACTUAL SERVICES (DMH – 100-3), with corresponding totals per fund source.

IV. COMMODITIES: The total of this item must correspond with the total column of SECTION IV – COMMODITIES (DMH – 100-3), with corresponding totals per fund source.

V. EQUIPMENT: *This item does not apply. Equipment is not an allowable cost for the PATH grant.*

VI. INDIRECT COST: *This item does not apply. There is no amount approved by DMH for indirect cost.*

- Submitted by: Indicate the person responsible for the program
- Title: Enter the name of the grant program
- Date: Enter the date this form is submitted to DMH
- Telephone: Enter the telephone number of the person who completed the form.

DEPARTMENT OF MENTAL HEALTH - PROPOSED BUDGET

SERVICE PROVIDER # _____

SERVICE PROVIDER: _____

SECTION I - PERSONNEL

| POS # | POSITION | % OF TIME | MONTHLY SALARY | SOC. SEC. | RET. | LIFE INS. | HEALTH INS. | UNEMP. INS. | W/C | TOTAL | FUND SOURCE | | |
|-----------------------|----------|-----------|----------------|-----------|------|-----------|-------------|-------------|-----|-------|-------------|-------|-------|
| | | | | | | | | | | | FEDERAL | STATE | LOCAL |
| | | | | | | | | | | | | | |
| SUBTOTAL MONTHLY COST | | | | | | | | | | | | | |
| TOTAL YEAR COST | | | | | | | | | | | | | |

DMH-100-2

B. PROPOSED BUDGET PERSONNEL – Form DMH - 100-2

- SERVICE PROVIDER #: Completed by DMH.
- SERVICE PROVIDER: Indicate name of agency responsible for administration of program
- SECTION I. PERSONNEL:
 - POS #: Enter position identification number of employee assigned by service provider of each position
 - POSITION: Enter the position titles and the name of the individuals occupying each position in the program for which funds are being requested.
 - % OF TIME: Enter percentage of time that will be spent by each position on the program for which funds are being requested.
 - MONTHLY SALARY: Enter the **gross** salary amounts requested for each position
 - SOC. SEC, RET, LIFE INS, HEALTH INS, UNEMP INC, AND WC: Enter either:
 - The fringe benefit percentage calculated using the instructions included on pages 18-20 of the DMH Service Provider’s Manual, “DMH Fringe Benefits Calculation Information/Instructions Sheet.”
 - OR:**
 - Actual amounts of each fringe benefit that will be paid by the employer for each position not to exceed 28% of salaries requested as described on pages 18-30, “DMH Fringe Benefits Calculation Information Sheet.”
 - TOTAL: Indicate the total amount of reimbursement requested for each position, with corresponding totals for each fund source.
- SUBTOTAL MONTHLY COST: Indicate the total monthly cost of each column (if applicable).
- TOTAL YEARLY COST: Indicate the total annual cost (12 months) of each column (if applicable).

DEPARTMENT OF MENTAL HEALTH - PROPOSED BUDGET

SERVICE PROVIDER NO: _____ SERVICE PROVIDER: _____

| | | FUND SOURCE | | |
|--|-------|-------------|-------|-------|
| | | FEDERAL | STATE | LOCAL |
| | TOTAL | | | |
| SECTION II: TRAVEL | | | | |
| SECTION III: CONTRACTUAL SERVICES | | | | |
| Telephone | | | | |
| Utilities | | | | |
| Postage | | | | |
| Building Rent | | | | |
| Equipment Rent | | | | |
| Repair & Maintenance | | | | |
| Insurance | | | | |
| Dues & Subscriptions | | | | |
| Professional Fees | | | | |
| Professional Fees, Other | | | | |
| Medical Fees | | | | |
| TOTAL | | | | |
| SECTION IV: COMMODITIES | | | | |
| Food | | | | |
| Office Supplies | | | | |
| Program Supplies | | | | |
| Janitorial Supplies | | | | |
| Household Supplies | | | | |
| TOTAL | | | | |
| SECTION V: EQUIPMENT | | | | |
| Office Equipment | | | | |
| Program Equipment | | | | |
| Furniture | | | | |
| TOTAL | | | | |
| TOTAL: SECTIONS I THRU V | | | | |

C. Proposed Budget Line Item – Form DMH-100-3

- SERVICE PROVIDER #: This item will be completed by the Department of Mental Health
- SERVICE PROVIDER: Indicate the name of the agency responsible for the program.
- SECTION II – TRAVEL: Enter the total amount of funds requested for travel including in-state mileage, lodging, public carrier, meals, fees, etc.
- SECTION III – CONTRACTUAL SERVICES
 - Telephone: Enter proposed cost of telephone including service charges, long-distance, etc.
 - Utilities: Enter proposed cost of electricity, water, gas, sewage, as applicable
 - Postage: Enter proposed cost of postage, box rent, etc.
 - Building Rent: Enter actual amount of rent to be paid during service period.
 - Equipment Rent: Enter proposed amount to be expended including typewriter rentals, copy machine rentals, postage machine rentals, automobile rentals, etc.
 - Repair and Maintenance: Enter proposed amount for repair, maintenance or upkeep of property which neither adds to the permanent value of the property nor prolongs its intended life but keeps it in efficient operating condition. No renovation cost will be allowed.
 - Insurance: Enter the proposed amount to be expended for bonding insurance, insurance on buildings and contents, vehicles, etc.
 - Dues and Subscriptions: Enter the amount of funds to be expended for membership in professional organizations, publications, etc., necessary for the enhancement of the program.
 - Professional Fees: Enter the total amount of funds proposed to be expended for any program/person providing medical services such as medical evaluation, psychological testing, etc.

- Professional Fees Other: Enter the total amount of funds proposed to be expended for professional consultation, other than medical, such as contracts for food, pest control and transportation.
 - Medical Fees: Enter the proposed amount of funds to be expended for physical examinations, medical services, etc., both direct and consultative.
 - TOTAL: Enter total amount proposed to be expended for contractual services (Section III).
- SECTION IV – COMMODITIES:
 - Food: Enter proposed amount to be expended on food prepared for and consumed by clients.
 - Office Supplies: Enter the proposed amount to be expended for office supplies. Equipment is NOT to be included in this line item.
 - Program Supplies: Enter the proposed amount to be expended for materials to enhance client programs such as recreation, vehicle operating costs, etc.
 - Janitorial Supplies: Enter the proposed amount to be expended for janitorial supplies.
 - Household Supplies: Enter the proposed amount to be expended for household supplies.
 - TOTAL: Enter total amount proposed to be expended for commodities (Section IV).
 - SECTION V – EQUIPMENT:

Equipment is not an allowable cost for the PATH grant.

TOTAL SECTIONS I THROUGH V: Enter total of line items I – V.