**Attachment A**

**State PATH Contact Interview Guide**

Name of Organization:

Name of Interviewee:

Name of Interviewer(s):

Date:

**Introduction**

Hi, my name is [name]. I’m with MANILA Consulting, and we are under contract with the Substance Abuse and Mental Health Services Administration (or SAMHSA) to conduct the regularly scheduled evaluation of the Projects for Assistance in Transition from Homelessness formula grant program. You know it better as PATH. Thank you for taking the time to speak with me today.

The PATH formula grant program is administered by SAMHSA. Every 3 years, SAMHSA is required to conduct an evaluation of the PATH grant program and present those findings to Congress. MANILA is responsible for conducting the current evaluation of PATH. As part of our evaluation, we are speaking with selected State PATH contacts such as you to enrich our understanding of how States administer the PATH formula grant.

My questions to you today will give us a better understanding of how PATH works in your State, different approaches States use, the challenges they face and how they have tried to meet those challenges, additional needs that may affect PATH implementation, and perceived progress in serving clients. Your responses may help SAMHSA improve how PATH operates.

The information you provide is exclusively for MANILA’s use. We will not identify either you or your State in our report. Nothing you say during this interview will be disclosed in a manner such that you can be identified. Please read the consent form carefully, sign and return one copy to me, and keep the second copy for your records.

This interview should take about 65 minutes. Do you have any questions before we begin?

Public Burden Statement: An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.  The OMB control number for this project is 0930-xxxx.  Public reporting burden for this collection of information is estimated to average 65 minutes per respondent, per year, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.  Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to SAMHSA Reports Clearance Officer, 1 Choke Cherry Road, Room 8-1099, Rockville, Maryland, 20857.

**Questions for State PATH Contact**

***Background on Respondent and Agency***

First, I’d like to get some background on you and the agency where you are employed.

1. How long have you been employed as the State PATH contact?

a. What did you do previously?

2. In addition to PATH, what are your other job responsibilities?

3. What percentage of your time is dedicated to PATH activities?

4. How do you see services for people who are homeless fitting within the mission of your agency?

5. What is your role in your State’s participation in the PATH formula grant program?

a. If not mentioned, probe:

* Grant request formulation?
* Setting policy for solicitation/review of provider applications?
* Allocating funds?
* Developing/prescribing training?
* Monitoring performance (outcomes and expenditures)?
* Providing feedback to local providers?
* Reviewing reports?
* Other?

6. Please describe any State policies that substantially influence how the PATH formula award is administered in the State.

*[If respondent asks for interpretation: For example, are there policies that restrict or direct how your agency uses PATH funds, such as a requirement for competitive award of funds, legislative approvals, or restrictions on eligible providers?]*

***Understanding of PATH and Federal Expectations***

In this next set of questions, I’d like to explore your perceptions of PATH.

7. How do you determine the PATH program elements (e.g., allocation method, data collection methods, definitions, service packages)?

8. How do you determine which of the PATH roster of services will be provided within the State?

 a. Probe: as to whether local PATH providers in the State provide the same PATH-supported services

 b. Probe: to get detailed understanding of the planning process.

 c. Probe: as to whether consumers are involved in the planning process.

9. Which features of the PATH formula grant (e.g., emphasis on outreach services, assistance with obtaining housing) do you consider to be most important and why?

10. Please describe factors you consider when you distribute PATH funds to providers in your State (e.g., prevalence of homelessness in a particular area, past provider performance).

11. How often are you in contact with the local PATH providers in your State?

 What, generally, is the purpose of this contact?

12. How often do you conduct site visits to the local PATH providers?

a. Probe: purpose of these visits

b. Probe: who goes on the visits?

c. Probe: preparation for site visits

d. Probe: what is done on these visits?

e. Probe: how long they are on site

f. Probe: whether a formal debriefing is conducted, either on site and/or through a written report

13. What are the mechanisms that you use for monitoring provider performance? How is inadequate performance (e.g., not meeting contract obligations with the State, not being in compliance with PATH requirements/statutes) on the part of a local PATH provider agency corrected?

***PATH and Other Homelessness Activities***

14. Please describe training that you regularly provide to the local PATH providers.

15. For which practices has the State set an expectation that “best” or “evidence-based” practices will be adopted by local PATH providers?

16. Has the State adopted the use of the U.S. Department of Housing and Urban Development (HUD) Homeless Management Information System?

 *[If yes]* What information from the system has the State found most useful?

 *[If yes]* What problems have been identified in implementation of the system?

17. What subpopulations of homeless have been designated as high priority within the State?

*In this next set of questions, we are going to explore how your State is responding to homelessness. We will try particularly to get your understanding of how PATH fits into a broader context of responses to homelessness.*

18. What are your greatest challenges in providing services to the homeless in your State?

 If not mentioned, probe:

* Resources
* Service access and availability
* Staffing
* Population characteristics and distribution
* Organizational/structural
* Other? *[Specify]*

19. How has the availability of affordable housing had an influence on homelessness in the State?

20. How has the availability of behavioral health services (mental health and substance abuse services) influenced homelessness in the State?

21. Does your State have an interagency council on homelessness or other body that focuses on coordination of multiple programs and homelessness?

 *[If yes]* Please describe the council on homelessness (e.g., representation from your agency, which other agencies have representation, importance of PATH funds in the deliberations of this body).

22. Does your State have a 10-year or other plan focused on addressing homelessness?

*[If yes]* Please describe how the plan addresses homeless people with serious mental illness.

*[If yes]* Please describe how PATH resources and other resources are included in the plan, and how resources are coordinated among agencies.

23. Ifthere is any coordination at the State level with veterans services, how is this accomplished?

24. Is there a balance of State Continuum of Care in the community that receives HUD funding for homelessness projects?

Yes/No/Don’t know

a. *[If no]* Probe: as to whether representation has ever been considered or attempted.

b. *[If yes]* Probe: as to whether the agency has formal representation on the Continuum of Care.

c. Probe: who is the representative to the Continuum?

d. Probe: the nature of their participation on the Continuum. *[For example, provision of the matching resources that are documented in the application to HUD, provision of specific services offered within the continuum, or the operation of one of the projects funded in the continuum].*

***Coordination and Collaboration***

Continuing with just a few more questions about coordination across many agencies…

25. Which State agencies does your agency collaborate with regarding housing or services to individuals who are homeless?

26. To whatextent has State agency collaboration influenced homelessness?

a. Probe: as to how well State agencies work together on homeless issues.

b. Probe: as to whether there are shortcomings in collaborations for homelessness efforts at the State level.

c. Probe: as to whether State agencies also cooperate by joint funding of efforts to prevent or remediate homelessness.

d. Probe: as to whether the State or your agency places any restrictions on the distribution or use of PATH funds that make it difficult to coordinate with other funding sources or agencies.

27. In what ways do Federal administrators of PATH allow you sufficient flexibility to coordinate PATH funding with other funding streams or agencies?

a. Probe: as to what the Federal administrators of PATH could do that would improve their ability to coordinate PATH funding with other funding streams or agencies.

***Housing Issues***

In the next few questions, I’d like to explore your perceptions about the transition of clients from homelessness to housing.

28. What success do you feel the PATH providers are having in placing clients in housing (permanent/transitional/group homes)?

29. What are the most common barriers providers are experiencing in placing clients in permanent housing?

If not mentioned, probe for:

* Availability of affordable housing
* Client readiness for community life
* Willingness of housing providers to work with the population
* Other?

30. What could your agency do to improve access to mainstream services and housing for homeless people?

31. What could SAMHSA do, in its administration of PATH, that would improve access to mainstream services and housing for homeless people?

32. As clients transition out of PATH-funded or homeless-specific services, how are the services your agency funds helping to give clients more control over their lives?

***Wrap-Up and Closing***

33. What do you consider to be the strongest features of the PATH program?

34. What do you consider to be the weakest features of the PATH program?

35. What changes would you like to see to the PATH program?

36. Those are all the questions I have. Do you have any questions that you’d like to ask us about this session, or about what we’ve been talking about?

If I have followup questions related to any of your responses or need clarification, may I contact you?

**Consent Form**

**State PATH Contact Interview**

You are being asked to take part in an evaluation of the Projects for Assistance in Transition from Homelessness (PATH) program. We are asking you to participate because we are interested in learning about your experience with and perspectives about the program. Please read this form carefully, and ask any questions you may have before agreeing to participate in this interview as part of the evaluation.

Every 3 years, the Substance Abuse and Mental Health Services Administration (SAMHSA) is required to conduct an evaluation of the PATH formula grant program and present those findings to Congress. SAMHSA has again contracted with MANILA Consulting Group (MANILA) to conduct the fourth formal evaluation of PATH, which begins this year. The purpose of this evaluation is to gather information that will help SAMHSA and the Center for Mental Health Services understand the extent to which the PATH program is implemented as intended. This information can be used to assist in program planning and improved service provision.

As part of the evaluation, MANILA is conducting interviews with the State PATH Contacts from a random selection of 10 States currently receiving PATH funding. During the interview, you will be asked questions related to your understanding of the PATH program and Federal expectations, PATH and other homelessness activities, coordination of services across agencies, and the transition of clients from homelessness to housing. The interview will take approximately 65 minutes. With your permission, we will record the interview.

**There are no** risks to your participating in this study other than those encountered in day-to-day life. There are no benefits to you specifically, and you will not be compensated for participation in this evaluation.

**Your answers will be confidential, and t**he records of this study will be kept private. In any sort of report we make public, we will not include any information that will make it possible to identify you. The data reported will be aggregated, so the responses will not be identifiable by individual or organization. Research records will be kept in a locked file; only the researchers will have access to the records. If we record the interview, we will destroy the recording after it has been transcribed, which we anticipate will be within 2 months of the taping.

Participation in this research study is voluntary. You may choose not to participate or to skip questions you do not want to answer, without any consequence to you or your agency. If you decide to participate, you are free to withdraw at any time.

The researcher overseeing this evaluation is Lisa Kleppel. Please ask any questions you have now. If you have questions later, she can be contacted at lkleppel@manilaconsulting.net or 571-633-9797, extension 209. If you have any questions or concerns regarding your rights as a subject in this study, you may contact Lisa Lunghofer, chairperson, MANILA Institutional Review Board, at llunghofer@manilaconsulting.net or 240-271-4941.

You will be given a copy of this form to keep for your records.

**Statement of Consent:** I have read the above information and have received answers to all questions I asked. I consent to take part in the study.

Your signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Your name (printed) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

In addition to agreeing to participate, I also consent to having the interview recorded.

Your signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of person obtaining consent \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_

Printed name of person obtaining consent \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date \_\_\_\_\_\_\_\_\_\_\_\_

This consent form will be kept by the researcher for at least 3 years beyond the end of the study. The form was approved by the Institutional Review Board on August 5, 2011.