

## **Board of Directors**

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## **For the sake of what?**

*Does this move us in the  
direction of our mission?*

*Is this the best use of  
resources?*

*Is this the direction  
we said we want to go?*

## **Our Mission:**

Pathway Homes  
embodies the spirit  
of recovery: embracing an  
attitude of hope,  
self-determination  
and partnering with each  
individual on their  
personal journey toward  
achieving self-fulfillment  
and realizing their dreams.

We fulfill our mission by  
making available to  
individuals with mental  
illness and co-occurring  
disabilities a variety of  
non-time-limited housing and  
services to enable them to realize  
their individual potential.

## **PATHWAY HOMES, INC.**

### **Board of Directors**

Monday, January 14, 2019  
7:00 P.M.  
10201 Fairfax Blvd., Ste. 200  
Fairfax, VA 22030-2209



- 6:30 Social Half-hour
- 7:00 Call to Order
- 7:05 Presentation – SPARC: Donna Goldbranson, Exec. Director
- 7:30 Approval of Minutes of Meeting October 1, 2018\*  
Approval of Minutes of Meeting December 3, 2018\*
- 7:35 CEO's Report – Dr. Sylisa Lambert-Woodard
- 8:00 Treasurer's Report - Brenda Brennan
- 8:05 Chairperson's Report and Comments
- 8:15 Committee Reports
  - 1. Philanthropy Committee—Jennifer Judelsohn
  - 2. Board Development—Patrick Chaing
  - 3. Audit Committee—Jon-Michael Rosch
- 8:40 Old Business
- 8:45 New Business
  - 1. Eviction Policy: Personnel Practices Committee—Dan
  - 2. Tuition Reimbursement Drawing
- 8:50 Announcements.
- 8:55 Adjournment

*Closed Session*

\* Materials Enclosed in Packet

## ADDENDUM TO BOARD AGENDA

January 14, 2019

Pathway Homes successfully completed its 5<sup>th</sup> Commission on Accreditation of Rehabilitation Facilities (CARF) Accreditation! We have successfully been notified of over \$1.3 million in acquisition funding within the last quarter and published our annual stakeholders report highlighting our significant achievements. A year certainly makes a difference, as we remain strategically focused and engaged in new opportunities for growth and scalability through new partnerships with other non-profits. Our agency has undergone numerous audits, inspections and evaluations with all favorable outcomes to date. Pathways remains on course with our strategic plan. Our operational approach includes continuous quality review, risk assessment and strategic diversification. I look forward to seeing you and answering any questions at our upcoming meeting!

### **Board Matters:**

- The Philanthropy Committee Report- Jennifer Judelsohn, Treasurer's Report- Brenda Brennan, and Board Development report- Patrick Chaing have been provided for your review. Please review these reports before the meeting; any questions or clarifications will be addressed during the meeting.
- Pathway Homes continues in its first operational grant year in Loudoun County for Mental Health Skill Building Services (MHSS). Pathways is currently providing services to 18 individuals. It is expected that we will serve approximately 30-70 within the next year.
- Pathway Homes has launched its Northern Virginia Health Foundation (NVHF) project awarded for \$25,000 for the development of a pilot supportive services package/waiver. Pathways is working with a private consultant, Managed Care Organizations (MCOs), Housing Authorities, and Community Services Boards (CSBs) in the development of this design. The product is expected to be ready by 12/18. Final report is due 2/8/19.
- Pathway Homes was recently awarded an additional \$48,000 to continue developing our pilot supportive services package/waiver. This project will be launched within the 2019 calendar year.
- Pathways met with Fairfax County to finalize their committed to continue its support in FY19 in the amount of **\$267,169** for administrative costs related our HUD Continuum of Care (CoC) projects. The MOA has been negotiated and awaiting signature.

- **Renewal**- Pathway Homes is awaiting the HUD announcement of twelve (12) HUD Homeless Assistance renewal grant awards totaling **\$5,521,495**. These grants fund our Supportive Housing Program and Shelter Plus Care (now called Leasing and Rental Assistance) projects serving 306 individuals. The total amount of HUD assistance that the Fairfax-Falls Church CoC receives is \$8,291,071. Due to the federal government shut down, announcement has been delayed until future notice. Management of the agency during this shut down is responded to in our finance report.
- Pathway Homes submitted 5 submissions for the Community Consolidated Funding Pool (CCFP) and received one award totaling \$450,000 for the acquisition of a new 4-bedroom home in Fairfax County. It is anticipated that this property be purchased in first quarter of calendar year 2019.
- **NEW Proposal Revised**- Pathway Homes submitted an RFP to the Richmond Behavioral Health Authority (RBHA) Region 4- Greater Richmond for the operation of a new 8-bed Assisted Living Facility. Pathways was notified in 12/18 that the RBHA lost designated funding and requested that we rewrite our proposal for a group home that would be contingent upon state funding. This proposal was submitted in the amount of \$515,180 to operate this program. We anticipate notification of a decision in the first quarter of calendar year 2019.
- Christian Relief Services (CRS) made a strategic decision to forgo further sponsorship of the 1991, 1994 and 1995 grants serving 50 individuals in the amount of \$703,690. This decision was made due to internal changes as well as the increased responsibilities associated with being a HUD COC program sponsor. CRS supported Pathway Homes in assuming sponsorship of these programs, and the COC Board met on 6/14/18 and unanimously chose Pathway Homes, Inc. as the new sponsor! Transition of sponsorship was supported at the local level and authorized by HUD. *Continued funding of this project is contingent upon federal government approval.*
- Pathway Homes has had unoccupied space since our reduction in staff beginning FY18. We needed to occupy a portion of this space for storage of files and supplies making it undesirable in the competitive commercial sublease environment. Specially Adapted Resource Clubs (SPARC) was operating out of donated County office space that was no longer available due to the repurposing of the site. SPARC and Pathway Homes have identified potential interest in pursuing a merger or absorption of services. Therefore, Pathway Homes has extended its office space to this local non-profit that runs day programming for the Developmental Disability (DD) community. These services are consistent with advancing our mission. Pathway Homes looks forward to learning more about how SPARC can support those we serve.
- Donna Goldbranson, Pres/CEO of SPARC will be presenting their model to our board during our board meeting. I have included an overview of their model and FAQ's for your review.

- **NEW AWARD-** The Prince William Office of Housing and Community Development (OHCD) has notified Pathway Homes of pending Community Development Block Grant (CDBG) funds on 12/10/18. One of the FY20 Subrecipient Agreements for two new projects **“Pathways to Prince William Recovery” was funded, while “Pathway Homes Serving Prince William”** was not. We are fortunate, however that the full requested about of \$225,000 has been designated for this new project to acquire a 2-bedroom condo.
- **NEW AWARD-** Pathway Homes submitted a RFP through Fairfax County Department of Housing and Community Development (DHCD) for 10 new scattered sites 1-bedroom condos in the amount of \$1,686,000. Pathways was informed on 12/12/18 an award of \$1,042,082 for six (6) 1-bedroom condos for individuals precariously housed with incomes at or below 30% income. This project is to be completed with full occupancy by 6/30/19.
- Pathway Homes successfully completed our 5<sup>th</sup>, three-year CARF accreditation on **10/29 through Tuesday 10/30** to review administrative areas (business functions) and services (service delivery). We will continue to be surveyed under the Supported Living and Community Housing standards (CARF report attached). Patrick Chaing was interviewed in his new capacity as board chair. Pathways received a full 3 -year accreditation, the highest level awarded!
- The Virginia Department of Behavioral Health and Developmental Services (DBHDS) notified the Prince William County Community Services that \$2.4 million was available for the creation of rental housing units for individuals with intellectual disorders and developmental disabilities covered under the Commonwealth Settlement Agreement. DBHDS has also created a State Rental Assistance program (SRAP) with a Project-Based Rental Assistance (PBRA) component to serve individuals with developmental disabilities in the Settlement Agreement population who want to live in their own housing. Pathways has submitted a request for \$2.4 for 14 1-bedroom units in acquisition and matching PBRA vouchers. Awards are pending first quarter 2019.
- The Center for Non-Profit Advancement identifies, monitors, and shares new and shifting trends within the nonprofit sector. The Center works collaboratively with local experts to develop custom programs and solutions. Through their training, resources and relationships with the corporate, philanthropic and government community, they help member nonprofits **save more ... do more ... and succeed more**—ultimately achieving excellence. The Center recently approved Dr. Sylisa Lambert-Woodard as their newest board member. This appointment representing Pathway Homes will provide access to best practice opportunities for our agencies continued success. As you may recall, Pathways’ Board was recognized as 1<sup>st</sup> runner

up for their Board Leadership Award, and Sylisa was selected as their 2014 EXCEL regional CEO winner.

- Pathway Homes hosted its annual holiday celebration for the resident holiday party on 12/13/18 at the at the Church of the Good Shepherd located at 9350 Braddock Rd., Burke VA. As customary, we also hosted our staff holiday party on 12/7/18 at Brion's Grill. Staff, residents, and board members were in attendance for these traditional celebrations and had a wonderful time. Happy New Year to all!



## Our Mission

To provide dynamic, enduring learning opportunities for adults with life-long disabilities in a natural community setting.

## Our Vision

To create a culture that values and utilizes all our diverse abilities, provides equitable opportunities for continued learning *and develops the full potential of each club member.*

## Our Goals

- To meet the needs of club members as they pursue continued learning interests in a community-based setting.
- To foster daily opportunities for self-advocacy.
- To enable club members to contribute to their community.

## Club Locations:

Reston Clubhouse and SPARC Headquarters  
1820 Michael Faraday Dr. , Reston, VA 22191

Old Firehouse Teen Center  
1440 Chain Bridge Road, McLean, VA 22101

Providence Community Center  
3001 Vaden Drive, Fairfax, VA 22031

Langston-Brown Community Center  
2121 N. Culpeper St.  
Arlington, VA 22207

## Contact us if:

- You know a young adult who would like to explore club membership...
- You would like to be a volunteer...
- You would like to make a donation....
- You would like to request a presentation...
- You would like to visit....
- You would like more information...

SPARC  
PO Box 10797  
Burke, VA 22009

Donna Goldbranson,  
Executive Director  
[donna@sparcsolutions.org](mailto:donna@sparcsolutions.org)  
703-338-6185 TTY 711

Visit us on the web:  
[www.sparcsolutions.org](http://www.sparcsolutions.org)

CFC #46189 : EIN: 20-5513060



**sparc**   
specially adapted resource clubs



***"Circuit Train  
Your Brain"***



## About Us



is a clubhouse model day program that has been supporting adults with life-long disabilities in a community-based setting since 2006. The clubs operate three days per week from 10 am until 2 pm. in Fairfax at the Providence Community Center, in Reston at SPARC Headquarters, in McLean at The Old Firehouse Teen Center and at Langston-Brown Community Center in Arlington.

Adults with life-long disabilities who have graduated from high school are eligible to participate. There is a monthly fee for participation; scholarships are available. **SPARC** is not a Medicaid provider. We rely on partnerships with local county government, faith-based organizations, foundation and private grants, public contributions, and fundraising events for financial sustainability. We continue to operate with a waiting list and need donor support to expand services.



## A Day at SPARC

It's *YOUR* club! Members at **SPARC** choose from a menu of adapted activities in the community centers, perform daily jobs in the club, and participate in daily guided group activities. Each **SPARC** day supports club member's individual goals of communication, literacy, life skills development, sensory integration, vocational skills development and active-learning leisure interests.



Participants can choose from club activities which reflect their personal interests. Therapeutically based activities support active leisure learning in three areas: life-skill development, community service, and entrepreneurship. All activities are facilitated by staff and volunteers and, when applicable, the participant's Personal Support Assistant (PSA).

Visit us and discover what a difference **SPARC** can make in your life! To arrange a visit, contact:

Jodie Wyckoff, LCSW, Director of Community Services  
[jodie@sparc-solutions.org](mailto:jodie@sparc-solutions.org) 703-967-5997

## One Community

**SPARC** answers the question "Now that I'm out of high school, what will I do?" We're a club successfully demonstrating a different solution for customized long term care. We provide a wide array of adapted and inclusive daytime activities across the spectrum of disability groups with our unique "Circuit Train Your Brain" program. We offer adults with disabilities continued personal growth, lasting friendships and community connectivity.

Because **SPARC** operates in community centers, members pursue their individual interests in a natural learning environment. Our club members also discuss ways we can contribute to our local community and make a difference in improving accessibility for all citizens.



Our staff and volunteers provide the support needed to make all activities in the club accessible and inclusive. Come visit a **SPARC** club. The members are engaged, empowered, and **THRIVING!**

*"SPARC is a club rooted in goals of self-direction for young adults."*





GLAD YOU ASKED...

FAQ's

**SPARC**

P. O. Box 10797  
Burke, VA 22009

[www.sparcsolutions.org](http://www.sparcsolutions.org)

703-338-6085

TTY 711

CFC #46189



## FAQ's — Frequently Asked Questions

### What is SPARC?

SPARC is a club providing day time support in a different way for adults with developmental disabilities. We believe two things:

- 1) With the Right Support You Can Achieve Your Goals, and...
- 2) By braiding services and community resources you can build the meaningful life that you determine.

### What services do you provide?

SPARC provides three unique services:

**SPARC Clubhouses.** Friends who come to SPARC are club members. We provide day support that takes place in the community with your personal support attendant (PSA's). We utilize community centers all over Northern Virginia to operate our one-of-a-kind clubhouse model.

**SPARC Works.** Friends who wish to explore, prepare, and be successful at work, attend our vocational training program. Our social workers and employments specialists are experts who teach you the skills necessary to be employable in a job YOU desire.

**SPARC Connects.** Friends and families who need help discovering and CONNECTING to resources in the community utilize this service. **PSA Match** is an example of one of our exclusive services. This is a coaching service for friends who wish to learn how to find, interview, and hire their own personal support attendant (PSA's). Building strong teams of young adults and their PSA's in the community is your key to success.

### What does PSA mean?

A Personal Support Attendant. The person who YOU hire to support you, not only at SPARC, but everywhere. That could mean work, social events, college, and in your home. PSA's do so much more than help with our physical needs. They help us get the most out of any activity we engage in at SPARC and in the community.

### What do you mean by braiding services?

Our SPARC Connects staff will discuss and help you discover how to use multiple sources of funding to reach your goals.

### What makes SPARC a different choice for day support?

Everything! No ratios of staff to clients, you bring your support with you. We're out front in the community doing all the things adults like to do. You make choices about your schedule, and your participation. This model is customized because it's built around your interests and strengths. Think of it ... you're the driver of the SPARC engine. It's your club.

### Are you a Medicaid provider?

No. We have monthly dues. Think of it like a sports club membership.

**Do I have to sign a contract?**

No. We ask for 30 days notice and monthly fees are not pro-rated.

**Where are you located?**

SPARC has four Clubhouses located in:

- Reston: SPARC Headquarters and Clubhouse, 1820 Michael Faraday, Dr., Reston VA 22191
- Fairfax: Providence Community Center, 3001 Vaden Dr., Fairfax, VA 22031
- McLean: Old Firehouse Teen Center, 1440 Chain Bridge Rd., McLean, VA 22101
- Arlington: Langston-Brown Community Center, 2121 N. Culpeper St., Arlington, VA 22207

**What times do you operate?**

Monday through Friday, 10 am—2 pm

**Who comes to SPARC?**

Adults who have graduated from high school and have a developmental disability.

**Do I have to go five days a week?**

No. Our club members decide their schedules and come to the club when it works best for them.

**How much does it cost?**

Members pay a monthly fee. Membership costs are based on how many days a week you'd like to join us. As of August 2017, costs are under \$500 per month.

**Do you provide transportation?**

No. Club members have several choices. Some use their own private vehicles and accessible vans to come to club, others use Metro bus or rail, and many travel in their PSA's car. Another option is to use alternate public transportation, like MetroAccess, or Star. Travel training resources are available to everyone.

**What does a typical day look like?**

Arriving at the club in one of our community center locations, you'll be met by staff and volunteers who will have "warm up" activities to kick off the day. When you and your friends are ready we begin guided leisure learning lessons facilitated by staff with PSA's helping you participate. Some example of activities are science experiments, cooking, sports, computer lab activities, themed activities, party planning, art, music, photography, and sensory exploration. All activities are modified and adapted so everyone can participate. We enjoy an extremely social lunchtime break in the clubhouses. Bring your own lunch or head out in the community to buy lunch. Whatever you decide, you have friends all around to join you. The afternoon block is typically a team building activity or game facilitated by staff. All activities focus on targeted functional areas of learning so you keep building skills in a fun way.

**What is the process to get into SPARC?**

Call, arrange a tour and visit! We love potential club members to come spend time getting to know us. If, after a visit, you'd like to schedule an assessment we'll work with you to begin where and when you decide.



**Do you have a waiting list?**

Some clubs locations have a waiting list due to their size. But, we are accepting club members immediately. Club members utilize all locations.

**What is SPARC Works?**

This is a customized employment training model. The program is three days a week from 10 am — 1 pm. We modify and adapt all our lessons to teach you the way you learn best. Our program has two important parts.

The first part is what we call a “soft skills” curriculum for employment. That means learning how to interact appropriately on a job. Examples would be: how to handle conflict, how to communicate effectively, how to ask for help, how to build appropriate professional friendships.

After you finish your work in “soft skills” you graduate with your class to the “hard skills” curriculum. Here you learn and practice specific job duties in a business. Examples are: office skills, marketing, production, inventory, order fulfillment and travel training.

**How much does Works cost?**

\$500 per month.

**What makes the Works model different from other vocational programs?**

Like SPARC Clubs, you bring your PSA with you, learning side-by-side so employers can feel confident that you have the skills and support to be a good employee.

**Who is the vocational program appropriate for?**

Anyone with a developmental disability who wishes to work can be assessed. Our assessment process helps us work together to see if you are ready to begin the vocational program.

**Can I go to Works and Club?**

Yes.

**Does one fee cover both?**

Yes.

**Do I have to be a club member to attend Works?**

No.

**How can I find out more information and arrange a visit?**

Call 703-338-6185 or email [info@sparcsolutions.org](mailto:info@sparcsolutions.org)

**CARF Accreditation Report  
for  
Pathway Homes, Inc.  
Three-Year Accreditation**





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## About CARF

CARF is an independent, nonprofit accreditor of health and human services, enhancing the lives of persons served worldwide.

The accreditation process applies CARF's internationally recognized standards during an on-site survey conducted by peer surveyors. Accreditation, however, is an ongoing process that distinguishes a provider's service delivery and signals to the public that the provider is committed to continuous performance improvement, responsive to feedback, and accountable to the community and its other stakeholders.

CARF accreditation promotes providers' demonstration of value and Quality Across the Lifespan® of millions of persons served through application of rigorous organizational and program standards organized around the ASPIRE to Excellence® continuous quality improvement framework. CARF accreditation has been the recognized benchmark of quality health and human services for more than 50 years.

For more information or to contact CARF, please visit [www.carf.org/contact-us](http://www.carf.org/contact-us).

**Organization**

Pathway Homes, Inc.  
10201 Fairfax Boulevard, Suite 200  
Fairfax, VA 22031

**Organizational Leadership**

Eleanor M. Vincent, Ed.D., CSAC, Chief Operating Officer

**Survey Date(s)**

October 29, 2018–October 30, 2018

**Surveyor(s)**

Diane Roseberry, M.O.L., CPRP, Administrative  
Heloise Ferguson, M.S.W., M.P.H., Program

**Program(s)/Service(s) Surveyed**

Community Housing: Mental Health (Adults)  
Supported Living: Mental Health (Adults)

**Previous Survey**

Three-Year Accreditation  
September 16, 2015–September 18, 2015

**Accreditation Decision**

Three-Year Accreditation  
Expiration: October 31, 2021

# Executive Summary

This report contains the findings of CARF's on-site survey of Pathway Homes, Inc. conducted October 29, 2018–October 30, 2018. This report includes the following information:

- Documentation of the accreditation decision and the basis for the decision as determined by CARF's consideration of the survey findings.
- Identification of the specific program(s)/service(s) and location(s) to which this accreditation decision applies.
- Identification of the CARF surveyor(s) who conducted the survey and an overview of the CARF survey process and how conformance to the standards was determined.
- Feedback on the organization's strengths and recognition of any areas where the organization demonstrated exemplary conformance to the standards.
- Documentation of the specific sections of the CARF standards that were applied on the survey.
- Recommendations for improvement in any areas where the organization did not meet the minimum requirements to demonstrate full conformance to the standards.
- Any consultative suggestions documented by the surveyor(s) to help the organization improve its program(s)/service(s) and business operations.

## Accreditation Decision

On balance, Pathway Homes, Inc. demonstrated substantial conformance to the standards. Pathway Homes, Inc. (PHI) displays a strong commitment to meeting these standards and has made them an integral part of daily operations. The organization is highly valued by the residents and community stakeholders. It continues to seek ways to increase service and to increase housing for the vulnerable people in the community. Funding sources describe PHI as thorough, open, transparent, and highly organized. Areas for improvement noted in the recommendations in this report are limited in scope and include adding modalities used to the service plan and timeliness in the reviews of the service plan. The organization is committed to making the improvements.

Pathway Homes, Inc. appears likely to maintain and/or improve its current method of operation and demonstrates a commitment to ongoing quality improvement. Pathway Homes, Inc. is required to submit a post-survey Quality Improvement Plan (QIP) to CARF that addresses all recommendations identified in this report.

**Pathway Homes, Inc. has earned a Three-Year Accreditation.** The leadership team and staff are complimented and congratulated for this achievement. In order to maintain this accreditation, throughout the term of accreditation, the organization is required to:

- Submit annual reporting documents and other required information to CARF, as detailed in the Accreditation Policies and Procedures section in the standards manual.
- Maintain ongoing conformance to CARF's standards, satisfy all accreditation conditions, and comply with all accreditation policies and procedures, as they are published and made effective by CARF.

# Survey Details

## Survey Participants

The survey of Pathway Homes, Inc. was conducted by the following CARF surveyor(s):

- Diane Roseberry, M.O.L., CPRP, Administrative
- Heloise Ferguson, M.S.W., M.P.H., Program

CARF considers the involvement of persons served to be vital to the survey process. As part of the accreditation survey for all organizations, CARF surveyors interact with and conduct direct, confidential interviews with consenting current and former persons served in the program(s)/service(s) for which the organization is seeking accreditation. In addition, as applicable and available, interviews may be conducted with family members and/or representatives of the persons served such as guardians, advocates, or members of their support system.

Interviews are also conducted with individuals associated with the organization, as applicable, which may include:

- The organization's leadership, such as board members, executives, owners, and managers.
- Business unit resources, such as finance and human resources.
- Personnel who serve and directly interact with persons served in the program(s)/service(s) for which the organization is seeking accreditation.
- Other stakeholders, such as referral sources, payers, insurers, and fiscal intermediaries.
- Community constituents and governmental representatives.

## Survey Activities

Achieving CARF accreditation involves demonstrating conformance to the applicable CARF standards, evidenced through observable practices, verifiable results over time, and comprehensive supporting documentation. The survey of Pathway Homes, Inc. and its program(s)/service(s) consisted of the following activities:

- Confidential interviews and direct interactions, as outlined in the previous section.
- Direct observation of the organization's operations and service delivery practices.
- Observation of the organization's location(s) where services are delivered.
- Review of organizational documents, which may include policies; plans; written procedures; promotional materials; governing documents, such as articles of incorporation and bylaws; financial statements; and other documents necessary to determine conformance to standards.
- Review of documents related to program/service design, delivery, outcomes, and improvement, such as program descriptions, records of services provided, documentation of reviews of program resources and services conducted, and program evaluations.
- Review of records of current and former persons served.



## Program(s)/Service(s) Surveyed

The survey addressed by this report is specific to the following program(s)/service(s):

- Community Housing: Mental Health (Adults)
- Supported Living: Mental Health (Adults)

A list of the organization's accredited program(s)/service(s) by location is included at the end of this report.

## Representations and Constraints

The accreditation decision and survey findings contained in this report are based on an on-balance consideration of the information obtained by the surveyor(s) during the on-site survey. Any information that was unavailable, not presented, or outside the scope of the survey was not considered and, had it been considered, may have affected the contents of this report. If at any time CARF subsequently learns or has reason to believe that the organization did not participate in the accreditation process in good faith or that any information presented was not accurate, truthful, or complete, CARF may modify the accreditation decision, up to and including revocation of accreditation.

## Survey Findings

This report provides a summary of the organization's strengths and identifies the sections of the CARF standards that were applied on the survey and the findings in each area. In conjunction with its evaluation of conformance to the specific program/service standards, CARF assessed conformance to its business practice standards, referred to as Section 1. ASPIRE to Excellence, which are designed to support the delivery of the program(s)/service(s) within a sound business operating framework to promote long-term success.

The specific standards applied from each section vary based on a variety of factors, including, but not limited to, the scope(s) of the program(s)/service(s), population(s) served, location(s), methods of service delivery, and survey type. Information about the specific standards applied on each survey is included in the standards manual and other instructions that may be provided by CARF.

## Areas of Strength

CARF found that Pathway Homes, Inc. demonstrated the following strengths:

- PHI staff members are highly competent and enthusiastic about their organization and the residents served. Many members of the leadership have a long history with the organization. The organization displays a commitment to providing excellent services and to meeting the CARF standards and regulatory standards.
- The organization is supportive of its employees. There are many programs in place to honor the staff members, including a KUDOS program (where staff members can provide positive feedback to each other) and a quarterly and annual public recognition of staff achievements. Additionally, personnel development is encouraged through funds for training and a tuition "lottery" that provides monies toward tuition expenses.
- Staff members interviewed expressed that they feel valued by the administration of PHI. The organization listens and responds to the needs of its staff through the offering of training and education opportunities to providing them with tools that assist them in doing their job efficiently and effectively.



- Staff members at PHI have a diversity of expertise and experience and are dedicated to the enhancement of the quality of life of the residents. The staff members are recognized for being caring, compassionate, dedicated, and knowledgeable. The commitment, compassion, and enthusiasm of the staff members are acknowledged by the residents.
- A stakeholder in the community referred to PHI as its "top performer" due to the responsiveness of the organization and its high-quality services. The stakeholder stated that the staff at PHI is organized, thorough, open, and transparent.
- Residents interviewed spoke enthusiastically about their experiences with staff members, stating that they are always treated with respect and reporting that their lives have been significantly and positively impacted.
- Residents interviewed expressed that the organization's staff members do not judge them and encourage and empower them as they move forward with their goals.
- One of the unique aspects of PHI is its non-time-limited services, allowing residents to remain in their homes for as long as they choose to do so. This has been a stabilizing force in the lives of the residents.
- The organization has a robust performance measurement and management system. It is comprehensive in its approach and includes feedback from staff members and other stakeholders, including family members, board members, and residents.

## Opportunities for Quality Improvement

The CARF survey process identifies opportunities for continuous improvement, a core concept of "aspiring to excellence." This section of the report lists the sections of the CARF standards that were applied on the survey, including a description of the business practice area and/or the specific program(s)/service(s) surveyed and a summary of the key areas addressed in that section of the standards.

In this section of the report, a recommendation identifies any standard for which CARF determined that the organization did not meet the minimum requirements to demonstrate full conformance. All recommendations must be addressed in a QIP submitted to CARF.

In addition, consultation may be provided for areas of or specific standards where the surveyor(s) documented suggestions that the organization may consider to improve its business or service delivery practices. Note that consultation may be offered for areas of specific standards that do not have any recommendations. Such consultation does not indicate nonconformance to the standards; it is intended to offer ideas that the organization might find helpful in its ongoing quality improvement efforts. The organization is not required to address consultation.

When CARF surveyors visit an organization, their role is that of independent peer reviewers, and their goal is not only to gather an assess information to determine conformance to the standards, but also to engage in relevant and meaningful consultative dialogue. Not all consultation or suggestions discussed during the survey are noted in this report. The organization is encouraged to review any notes made during the survey and consider the consultation or suggestions that were discussed.

During the process of preparing for a CARF accreditation survey, an organization may conduct a detailed self-assessment and engage in deliberations and discussions within the organization as well as with external stakeholders as it considers ways to implement and use the standards to guide its quality improvement efforts. The organization is encouraged to review these discussions and deliberations as it considers ways to implement innovative changes and further advance its business and service delivery practices.

# Section 1. ASPIRE to Excellence®

## 1.A. Leadership

### Description

CARF-accredited organizations identify leadership that embraces the values of accountability and responsibility to the individual organization's stated mission. The leadership demonstrates corporate social responsibility.

### Key Areas Addressed

- Leadership structure and responsibilities
- Person-centered philosophy
- Organizational guidance
- Leadership accessibility
- Cultural competency and diversity
- Corporate responsibility
- Organizational fundraising, if applicable

### Recommendations

There are no recommendations in this area.

## 1.C. Strategic Planning

### Description

CARF-accredited organizations establish a foundation for success through strategic planning focused on taking advantage of strengths and opportunities and addressing weaknesses and threats.

### Key Areas Addressed

- Environmental considerations
- Strategic plan development, implementation, and periodic review

### Recommendations

There are no recommendations in this area.

### Consultation

- The organization's strategic plan was developed in January of 2017 and is reviewed regularly by the leadership team. It is a fluid document with three goals and many objectives. These have all been given timelines that are not actual dates, but are labeled as *ongoing*, *near term*, *short term*, *intermediate term*, and *long term*. It is suggested that either a formal timeline be associated with each of these descriptions and attached to the plan or that actual dates be applied that can then be revised as reviews are conducted.

## 1.D. Input from Persons Served and Other Stakeholders

### Description

CARF-accredited organizations continually focus on the expectations of the persons served and other stakeholders. The standards in this subsection direct the organization's focus to soliciting, collecting, analyzing, and using input from all stakeholders to create services that meet or exceed the expectations of the persons served, the community, and other stakeholders.



### **Key Areas Addressed**

- Collection of input
- Integration of input into business practices and planning

### **Recommendations**

There are no recommendations in this area.

## **1.E. Legal Requirements**

### **Description**

CARF-accredited organizations comply with all legal and regulatory requirements.

### **Key Areas Addressed**

- Compliance with obligations
- Response to legal action
- Confidentiality and security of records

### **Recommendations**

There are no recommendations in this area.

## **1.F. Financial Planning and Management**

### **Description**

CARF-accredited organizations strive to be financially responsible and solvent, conducting fiscal management in a manner that supports their mission, values, and performance objectives. Fiscal practices adhere to established accounting principles and business practices. Fiscal management covers daily operational cost management and incorporates plans for long-term solvency.

### **Key Areas Addressed**

- Budgets
- Review of financial results and relevant factors
- Fiscal policies and procedures
- Reviews of bills for services and fee structures, if applicable
- Safeguarding funds of persons served, if applicable
- Review/audit of financial statements

### **Recommendations**

There are no recommendations in this area.

## **1.G. Risk Management**

### **Description**

CARF-accredited organizations engage in a coordinated set of activities designed to control threats to their people, property, income, goodwill, and ability to accomplish goals.



### **Key Areas Addressed**

- Risk management plan implementation and periodic review
- Adequate insurance coverage
- Media relations and social media procedures
- Reviews of contract services

### **Recommendations**

There are no recommendations in this area.

## **1.H. Health and Safety**

### **Description**

CARF-accredited organizations maintain healthy, safe, and clean environments that support quality services and minimize risk of harm to persons served, personnel, and other stakeholders.

### **Key Areas Addressed**

- Competency-based training on safety procedures and practices
- Emergency procedures
- Access to first aid and emergency information
- Critical incidents
- Infection control
- Health and safety inspections

### **Recommendations**

**1.H.15.a.**

**1.H.15.b.**

**1.H.15.c.**

PHI has safety sheets on site in one location, but not in both. It is recommended that each site have written procedures for the safe handling, storage, and disposal of hazardous materials.

### **Consultation**

- It is suggested that the organization enlarge the font on the evacuation maps in the homes and on the calendar of activities as the population in the homes is aging and might find the current maps/calendars difficult to read.

## **1.I. Workforce Development and Management**

### **Description**

CARF-accredited organizations demonstrate that they value their human resources and focus on aligning and linking human resources processes, procedures, and initiatives with the strategic objectives of the organization. Organizational effectiveness depends on the organization's ability to develop and manage the knowledge, skills, abilities, and behavioral expectations of its workforce. The organization describes its workforce, which is often composed of a diverse blend of human resources. Effective workforce development and management promote engagement and organizational sustainability and foster an environment that promotes the provision of services that center on enhancing the lives of persons served.

**Key Areas Addressed**

- Composition of workforce
- Ongoing workforce planning
- Verification of background/credentials/fitness for duty
- Workforce engagement and development
- Performance appraisals
- Succession planning

**Recommendations**

There are no recommendations in this area.

**1.J. Technology****Description**

CARF-accredited organizations plan for the use of technology to support and advance effective and efficient service and business practices.

**Key Areas Addressed**

- Technology and system plan implementation and periodic review
- Written procedures for the use of information and communication technologies (ICT) in service delivery, if applicable
- ICT instruction and training, if applicable
- Access to ICT information and assistance, if applicable
- Maintenance of ICT equipment, if applicable
- Emergency procedures that address unique aspects of service delivery via ICT, if applicable

**Recommendations**

There are no recommendations in this area.

**1.K. Rights of Persons Served****Description**

CARF-accredited organizations protect and promote the rights of all persons served. This commitment guides the delivery of services and ongoing interactions with the persons served.

**Key Areas Addressed**

- Policies that promote rights of persons served
- Communication of rights to persons served
- Formal complaints by persons served

**Recommendations**

There are no recommendations in this area.

## **1.L. Accessibility**

### **Description**

CARF-accredited organizations promote accessibility and the removal of barriers for the persons served and other stakeholders.

### **Key Areas Addressed**

- Assessment of accessibility needs and identification of barriers
- Accessibility plan implementation and periodic review
- Requests for reasonable accommodations

### **Recommendations**

There are no recommendations in this area.

## **1.M. Performance Measurement and Management**

### **Description**

CARF-accredited organizations are committed to continually improving their organizations and service delivery to the persons served. Data are collected and analyzed, and information is used to manage and improve service delivery.

### **Key Areas Addressed**

- Data collection
- Establishment and measurement of performance indicators

### **Recommendations**

There are no recommendations in this area.

## **1.N. Performance Improvement**

### **Description**

The dynamic nature of continuous improvement in a CARF-accredited organization sets it apart from other organizations providing similar services. CARF-accredited organizations share and provide the persons served and other interested stakeholders with ongoing information about their actual performance as a business entity and their ability to achieve optimal outcomes for the persons served through their programs and services.

### **Key Areas Addressed**

- Analysis of performance indicators in relation to performance targets
- Use of performance analysis for quality improvement and organizational decision making
- Communication of performance information

### **Recommendations**

There are no recommendations in this area.



## Section 2. General Program Standards

### Description

For an organization to achieve quality services, the persons served are active participants in the planning, prioritization, implementation, and ongoing evaluation of the services offered. A commitment to quality and the involvement of the persons served span the entire time that the persons served are involved with the organization. The service planning process is individualized, establishing goals and objectives that incorporate the unique strengths, needs, abilities, and preferences of the persons served. The persons served have the opportunity to transition easily through a system of care.

### 2.A. Program/Service Structure

#### Description

A fundamental responsibility of the organization is to provide a comprehensive program structure. The staffing is designed to maximize opportunities for the persons served to obtain and participate in the services provided.

#### Key Areas Addressed

- Written program plan
- Team composition/duties
- Crisis intervention provided
- Relevant education
- Medical consultation
- Clinical supervision
- Services relevant to diversity
- Family participation encouraged
- Assistance with advocacy and support groups

#### Recommendations

##### 2.A.10.d.(1)

It is recommended that the program description for each core program for which the organization is seeking accreditation also include a description of the service/treatment modalities to be provided to achieve the program objectives.

### 2.B. Screening and Access to Services

#### Description

The process of screening and assessment is designed to determine a person's eligibility for services and the organization's ability to provide those services. A person-centered assessment process helps to maximize opportunities for the persons served to gain access to the organization's programs and services. Each person served is actively involved in, and has a significant role in, the assessment process. Assessments are conducted in a manner that identifies the historical and current information of the person served as well as his or her strengths, needs, abilities, and preferences. Assessment data may be gathered through various means including face-to-face contact, telehealth, or written material; and from various sources including the person served, his or her family or significant others, or from external resources.



### **Key Areas Addressed**

- Screening process described in policies and procedures
- Waiting list
- Ineligibility for services
- Primary and ongoing assessments
- Admission criteria
- Reassessments
- Orientation information provided regarding rights, grievances, services, fees, etc.

### **Recommendations**

2.B.13.n.(1)(a)

2.B.13.n.(1)(b)

2.B.13.n.(2)(a)

2.B.13.n.(2)(b)

2.B.13.n.(2)(c)

2.B.13.n.(2)(d)

The assessment process should also gather and record information about the resident's history of trauma that is experienced and/or witnessed, including abuse, neglect, violence, and sexual assault.

## **2.C. Person-Centered Plan**

### **Description**

Each person served is actively involved in and has a significant role in the person-centered planning process and determining the direction of his or her plan. The person-centered plan contains goals and objectives that incorporate the unique strengths, needs, abilities, and preferences of the person served, as well as identified challenges and potential solutions. The planning process is person-directed and person-centered. The person-centered plan may also be referred to as an individual service plan, treatment plan, or plan of care. In a family-centered program, the plan may be for the family and identified as a family-centered plan.

### **Key Areas Addressed**

- Development of person-centered plan
- Co-occurring disabilities/disorders
- Person-centered plan goals and objectives
- Designated person coordinates services

### **Recommendations**

2.C.2.c.

2.C.2.d.

It is recommended that the person-centered plan consistently include the identification of specific interventions, modalities, and/or services to be used and their frequency.

## **2.D. Transition/Discharge**

### **Description**

Transition, continuing care, or discharge planning assists the persons served to move from one level of care to another within the organization or to obtain services that are needed but are not available within the organization. The transition process is planned with the active participation of each person served. Transition may include planned discharge, placement on inactive status, movement to a different level of service or intensity of contact, or a re-entry program in a criminal justice system.

The transition plan is a document developed with and for the person served and other interested participants to guide the person served in activities following transition/discharge to support the gains made during program participation. It is prepared with the active participation of person served when he or she moves to another level of care, after-care program, or community-based services. The transition plan is meant to be a plan that the person served uses to identify the support that is needed to prevent a recurrence of symptoms or reduction in functioning. It is expected that the person served receives a copy of the transition plan.

A discharge summary is a clinical document written by the program personnel who are involved in the services provided to the person served and is completed when the person leaves the organization (planned or unplanned). It is a document that is intended for the record of the person served and released, with appropriate authorization, to describe the course of services that the organization provided and the response by the person served.

Just as the assessment is critical to the success of treatment, the transition services are critical for the support of the individual's ongoing recovery or well-being. The organization proactively attempts to connect the persons served with the receiving service provider and contact the persons served after formal transition or discharge to gather needed information related to their post-discharge status. Discharge information is reviewed to determine the effectiveness of its services and whether additional services were needed.

Transition planning may be included as part of the person-centered plan. The transition plan and/or discharge summary may be a combined document or part of the plan for the person served as long as it is clear whether the information relates to transition or pre-discharge planning or identifies the person's discharge or departure from the program.

### **Key Areas Addressed**

- Referral or transition to other services
- Unplanned discharge referrals
- Active participation of persons served
- Plan addresses strengths, needs, abilities, preferences
- Transition planning at earliest point
- Follow up for persons discharged for aggressiveness

### **Recommendations**

There are no recommendations in this area.



## **2.E. Medication Use**

### **Description**

Medication use is the practice of controlling, administering, and/or prescribing medications to persons served in response to specific symptoms, behaviors, or conditions for which the use of medications is indicated and deemed efficacious. The use of medication is one component of treatment directed toward maximizing the functioning of the persons served while reducing their specific symptoms. Prior to the use of medications other therapeutic interventions should be considered, except in circumstances that call for a more urgent intervention.

Medication use includes all prescribed medications, whether or not the program is involved in prescribing, and may include over-the-counter or alternative medications. Alternative medications can include herbal or mineral supplements, vitamins, homeopathic remedies, hormone therapy, or culturally specific treatments.

Medication control is identified as the process of physically controlling, storing, transporting, and disposing of medications, including those self-administered by the person served.

Medication administration is the preparing and giving of prescription and nonprescription medications by authorized and trained personnel to the person served. Self-administration is the application of a medication (whether by oral ingestion, injection, inhalation, or other means) by the person served to his/her own body. This may include the program storing the medication for the person served, personnel handing the bottle or prepackaged medication dose to the person served, instructing or verbally prompting the person served to take the medication, coaching the person served through the steps to ensure proper adherence, and/or closely observing the person served self-administering the medication.

Prescribing is the result of an evaluation that determines if there is a need for medication and what medication is to be used in the treatment of the person served. Prior to providing a prescription for medication, the prescriber obtains the informed consent of the individual authorized to consent to treatment and, if applicable, the assent of the person served. Prescription orders may be verbal or written and detail what medication should be given to whom, in what formulation and dose, by what route, when, how frequently, and for what length of time.

### **Key Areas Addressed**

- Scope of medication services provided by the program(s) seeking accreditation
- Education and training provided to direct service personnel at orientation and at least annually
- Education and training provided to persons served, family members, and others identified by the persons served, in accordance with identified needs
- Written procedures that address medication control, administration, and/or prescribing, as applicable to the program
- Use of treatment guidelines and protocols to promote prescribing consistent with standards of care, if applicable to the program
- Peer review of prescribing practices, if applicable to the program

### **Recommendations**

There are no recommendations in this area.

## 2.F. Promoting Nonviolent Practices

### Description

CARF-accredited programs strive to create learning environments for the persons served and to support the development of skills that build and strengthen resiliency and well-being. The establishment of quality relationships between personnel and the persons served provides the foundation for a safe and nurturing environment. Providers are mindful of creating an environment that cultivates:

- Engagement.
- Partnership.
- Holistic approaches.
- Nurturance.
- Respect.
- Hope.
- Self direction.

It is recognized that persons served may require support to fully benefit from their services. This may include, but is not limited to, praise and encouragement, verbal prompts, written expectations, clarity of rules and expectations, or environmental supports.

Even with support there are times when persons served may demonstrate signs of fear, anger, or pain that could lead to unsafe behaviors. Personnel are trained to recognize and respond to these behaviors through various interventions, such as changes to the physical environment, sensory-based calming strategies, engagement in meaningful activities, redirection, active listening, approaches that have been effective for the individual in the past, etc. When these interventions are not effective in de-escalating a situation and there is imminent risk to the person served or others, seclusion or restraint may be used to ensure safety. Seclusion and restraint are never considered treatment interventions; they are always considered actions of last resort.

As the use of seclusion or restraint creates potential physical and psychological risks to the persons subject to the interventions, to the personnel who administer them, and to those who witness the practice, an organization that utilizes seclusion or restraint should have the elimination thereof as its goal.

Seclusion refers to restriction of the person served to a segregated room or space with the person's freedom to leave physically restricted. Voluntary time out is not considered seclusion, even though the voluntary time out may occur in response to verbal direction; the person served is considered in seclusion only if freedom to leave the segregated room or space is denied.

Restraint is the use of physical force or mechanical means to temporarily limit a person's freedom of movement; chemical restraint is the involuntary emergency administration of medication as an immediate response to a dangerous behavior. The following are not considered restraints for the purposes of this section of standards:

- Assistive devices used for persons with physical or medical needs.
  - Briefly holding a person served, without undue force, for the purpose of comforting him or her or to prevent self-injurious behavior or injury to others.
  - Holding a person's hand or arm to safely guide him or her from one area to another or away from another person.
  - Security doors designed to prevent elopement or wandering.
  - Security measures for forensic purposes, such as the use of handcuffs instituted by law enforcement personnel.
- When permissible, consideration is given to removal of physical restraints while the person is receiving services in the behavioral healthcare setting.
- In a correctional setting, the use of seclusion or restraint for purposes of security.



Seclusion or restraint by trained and competent personnel is used only when other, less restrictive measures have been ineffective to protect the person served or others from unsafe behavior. Peer restraint is not an acceptable alternative to restraint by personnel. Seclusion or restraint is not used as a means of coercion, discipline, convenience, or retaliation or in lieu of adequate programming or staffing.

#### **Key Areas Addressed**

- Policy addressing how the program will respond to unsafe behaviors of persons served
- Competency-based training for direct service personnel on the prevention of unsafe behaviors
- Policies on the program's use of seclusion and restraint, if applicable
- Competency-based training for personnel involved in the direct administration of seclusion and restraint, if applicable
- Plan for elimination of the use of seclusion and restraint, if applicable
- Written procedures regarding orders for and the use of seclusion and restraint, if applicable
- Review and analysis of the use of seclusion and restraint, if applicable

#### **Recommendations**

There are no recommendations in this area.

## **2.G. Records of the Persons Served**

#### **Description**

A complete and accurate record is developed to ensure that all appropriate individuals have access to relevant clinical and other information regarding each person served.

#### **Key Areas Addressed**

- Confidentiality
- Timeframes for entries to records
- Individual record requirements
- Duplicate records

#### **Recommendations**

There are no recommendations in this area.

## **2.H. Quality Records Management**

#### **Description**

The organization implements systems and procedures that provide for the ongoing monitoring of the quality, appropriateness, and utilization of the services provided. This is largely accomplished through a systematic review of the records of the persons served. The review assists the organization in improving the quality of services provided to each person served.

#### **Key Areas Addressed**

- Quarterly professional review
- Review current and closed records
- Items addressed in quarterly review
- Use of information to improve quality of services

## **Recommendations**

### **2.H.4.c.**

Although the records review process addresses whether the assessments of the residents were thorough and complete, it is recommended that the review also include timeliness of the assessments.

## **Section 4. Core Support Program Standards**

### **Description**

The standards in this section address the unique characteristics of each type of core program area. Behavioral health programs are organized and designed to provide services for persons who have or who are at risk of having psychiatric disorders, harmful involvement with alcohol or other drugs, or other addictions or who have other behavioral health needs. Through a team approach, and with the active and ongoing participation of the persons served, the overall goal of each program is to improve the quality of life and the functional abilities of the persons served. Each program selected for accreditation demonstrates cultural competency and relevance. Family members and significant others are involved in the programs of the persons served as appropriate and to the extent possible.

### **4.B. Community Housing (CH)**

#### **Description**

Community housing addresses the desires, goals, strengths, abilities, needs, health, safety, and life span issues of the persons served, regardless of the home in which they live and/or the scope, duration, and intensity of the services they receive. The residences in which services are provided may be owned, rented, leased or operated directly by the organization, or a third party, such as a governmental entity. Providers exercise control over these sites.

Community housing is provided in partnership with individuals. These services are designed to assist the persons served to achieve success in and satisfaction with community living. They may be temporary or long term in nature. The services are focused on home and community integration and engagement in productive activities. Community housing enhances the independence, dignity, personal choice, and privacy of the persons served. For persons in alcohol and other drug programs, these services are focused on providing sober living environments to increase the likelihood of sobriety and abstinence and to decrease the potential for relapse.

Community housing programs may be referred to as recovery homes, transitional housing, sober housing, domestic violence or homeless shelters, safe houses, group homes, or supervised independent living. These programs may be located in rural or urban settings and in houses, apartments, townhouses, or other residential settings owned, rented, leased, or operated by the organization. They may include congregate living facilities and clustered homes/apartments in multiple-unit settings. These residences are often physically integrated into the community, and every effort is made to ensure that they approximate other homes in their neighborhoods in terms of size and number of residents.

Community housing may include either or both of the following:

- Transitional living that provides interim supports and services for persons who are at risk of institutional placement, persons transitioning from institutional settings, or persons who are homeless. Transitional living can be offered in apartments or homes, or in congregate settings that may be larger than residences typically found in the community.
- Long-term housing that provides stable, supported community living or assists the persons served to obtain and maintain safe, affordable, accessible, and stable housing.



The residences at which community housing services are provided must be identified in the survey application. These sites will be visited during the survey process and identified in the survey report and accreditation outcome as a site at which the organization provides a community housing program.

#### **Key Areas Addressed**

- Safe, secure, private location
- Support to persons as they explore alternatives
- In-home safety needs
- Access as desired to community activities
- Options to make changes in living arrangements
- System for on-call availability of personnel

#### **Recommendations**

There are no recommendations in this area.

#### **Consultation**

- It is suggested that the eight-bed assisted living facility consider either increasing the intervals for carpet cleaning or look into replacing the carpet with either tile or wood floors to minimize the trapping of odors, such as urine, which could permeate the home.

## **4.H. Supported Living (SL)**

#### **Description**

Supported living addresses the desires, goals, strengths, abilities, needs, health, safety, and life span issues of persons living in their own homes (apartments, townhouses, or other residential settings). Supported living services are generally long term in nature, but may change in scope, duration, intensity, or location as the needs and preferences of individuals change over time.

Supported living refers to the support services provided to the person served, not the residence in which these services are provided. A sample of these sites will be visited as part of the interview process of the person served. Although the residence will generally be owned, rented, or leased by the person who lives there, the organization may occasionally rent or lease an apartment when the person served is unable to do so. Typically, in this situation the organization would co-sign or in other ways guarantee the lease or rental agreement; however, the person served would be identified as the tenant. The home or individual apartment of the person served, even when the organization holds the lease or rental agreement on behalf of the person served, is not included in the survey application or identified as a site on the accreditation outcome.

#### **Key Areas Addressed**

- Person-centered
- Education and wellness, recovery, and resiliency
- Independence and self-determination
- Education on health and safety

#### **Recommendations**

There are no recommendations in this area.



## **Program(s)/Service(s) by Location**

### **Pathway Homes, Inc.**

10201 Fairfax Boulevard, Suite 200  
Fairfax, VA 22031

Supported Living: Mental Health (Adults)

### **Russell Road Assisted Living Facility**

3802 Russell Road  
Woodbridge, VA 22192

Community Housing: Mental Health (Adults)

### **Stevenson Place Assisted Living Facility**

4113 Stevenson Place  
Fairfax, VA 22030

Community Housing: Mental Health (Adults)

**PATHWAY HOMES, INC.**  
Minutes of the Annual Meeting of the  
Board of Directors  
October 1, 2018

The annual meeting of the Board of Directors was held on October 1, 2018. A *quorum* being present, the meeting was called to order at 7:03pm by Chairman, Dan Gray. The following individuals were present and participated throughout the meeting:

**MEMBERS**

Dan Gray, Chair  
Patrick Chaing, Vice-Chair (via phone)  
Jon-Michael Rosch, Secretary  
Dara L. Aldridge  
Emily Chiang  
James Ross  
Sue Zywokarte

**STAFF**

Sylisa Lambert-Woodard, President & CEO  
Brenda Brennan, CFO  
Anna Smith, Director of Development and  
Major Gifts  
Eleanor Vincent, COO  
Lauren Leventhal, Quality Assurance  
Manager

The following individuals notified the office or other Board Members that they would not be present for this meeting: Jennifer McGarey, Jennifer Judelsohn, and Angie Lathrop.

**PRESENTATION**

**State of the Agency**

Sylisa Lambert-Woodard, EdD, LCSW, LSATP, MAC

Sylisa provided an overview of the agency for fiscal year 2018 (PowerPoint presentation enclosed in the Board minutes book). The presentation included information on financial solvency of the agency, demographics for individuals served, as well as looking into the future for expanded opportunities for growth.

Patrick asked for clarification on changed in landlord relationships. Eleanor Vincent, who oversees property management, responded that Pathways is attempting to market itself and develop partnerships with complexes at the corporate level instead of just within the leasing office.

**MINUTES**

Dan Gray called for a motion to approve the minutes from July 9, 2018 as presented. Jim Ross made a motion to approve, which was seconded by Sue Zywokarte and approved unanimously.

**TREASURER'S REPORT** – Brenda Brennan

The Treasurer's Report and supporting documentation was distributed prior to the meeting (enclosed in the Board minutes book). Brenda will be contacting the audit committee to schedule a November meeting with the auditors.

### **CHAIRPERSON'S REPORT AND COMMENTS** – Dan Gray

Dan thanked the Board for allowing him to serve in the capacity that he has for the past several years. He noted it had been a pleasure to see new Board members through the on-boarding process, and he also appreciated the support of several Board members who were on the Board prior to his appointment. He noted the great opportunity to see the agency grow and tackle significant challenges consistent with the mission and vision of the agency.

### **PHILANTHROPY COMMITTEE REPORT** – Sue Zywokarte

In addition to the written Philanthropy Committee Report (enclosed in the Board minutes book), the committee noted the following:

- Based on funds from the first quarter of the year, the committee projects a \$60,000 shortfall. However, if all Board members fulfill their personal fundraising goals for the year, that could be reduced to \$31,000. Nine out of ten members remain to meet their goals for the year.
- The Help the Homeless Walk is a great way to 'get' some of that fundraising completed.

Patrick asked for clarification regarding consumer walker sponsorships that had been asked for previously. Anna responded that since the Walk is now a public event, we are not specifically targeting consumers to come out to walk. This is also complicated by transportation and staff overtime on a weekend. However, consumers are able to attend.

### **BOARD DEVELOPMENT** – Patrick Chaing

The Committee Report (enclosed in the Board minutes book) is comprehensive. Patrick thanked the Board for participating in the leadership nomination process; there were many nominations received. Patrick deferred the running of the election to Dan since he was physically present at the meeting.

Dan thanked the Board Development Committee for taking the election process seriously and helping to develop such a complete process. Dan explained the ballot process to the Board, and voting proceeded anonymously. Lauren Leventhal tallied the ballots; the officer slate as presented in the Committee report was accepted unanimously. The officer positions were elected as follows:

Patrick Chaing – Chair  
Jennifer Judelsohn – Vice-Chair  
Jon-Michael Rosch – Treasurer  
Sue Zywokarte – Secretary

Sylisa thanked Dan for his years of service as Board Chair.



Patrick requested that Dan continue to facilitate the meeting.

Dan called for a motion to renew the following members for 3-year terms expiring October 2021:

Patrick Chaing  
Dan Gray  
Jennifer McGarey  
James Ross  
Sue Zywokarte

Jim Ross made a motion, which was seconded by Jonny Rosch, and approved unanimously.

### **OLD BUSINESS** –

There was no old business.

### **NEW BUSINESS** –

**Tuition Reimbursement Lottery Drawing:** Dara Aldridge drew Rachel Lalley's name. Rachel works at the Russell Road ALF and is pursuing a nursing degree; she will receive the full \$1,300 reimbursement. Other individuals in the running were Christian Machado, David Leventhal, and Lauren Leventhal. The Board requested that all non-winners be notified that the Board is impressed with their efforts.

**Prince William County CDBG Resolution:** Pathway Homes Serving Prince William. Dan requested that the Board look at the resolution which was included in the Board packet for previous review. The resolution reads in full:

“NOW THEREFORE, BE IT RESOLVED that the Board of Directors of the Corporation deems it advisable and in the best interests of the Corporation to endorse the FY 2020 Community Development Block Grant (CDBG) application for Pathway Homes Serving Prince William in the amount of \$40,000.

FURTHER, that the Board of Directors of the Corporation authorizes the matching funds for this request in the amount of \$40,000.

FURTHER, it is understood that the dollar amount of assistance will be fully forgiven for public services activities if the project has completed its specified purpose.

FURTHER RESOLVED, that this resolution shall be filed in the Minute Book of the Corporation.”

Jim Ross asked for additional information about the request and the matching funding. Sylisa explained that the proposal receives the most points for dollar-to-dollar matches, and the match

funding would come from outside sources, such as the Potomac Health Foundation grant or other private funding sources which allow Pathways to use the funding for serving individuals with SMI in Prince William County. Dan added that the language is proscriptive from the proposal instructions.

Dan called for a motion to approve the resolution as presented. Sue Zywock moved; this was seconded by Patrick Chaing and approved unanimously with Jon-Michael Rosch and James Ross abstaining.

**Prince William County CDBG Resolution:** Pathways to Home Sweet Home. Dan requested that the Board look at the resolution which was included in the Board packet for previous review. The resolution reads in full:

“WHEREAS, the Board of Directors of the Corporation deems it advisable and in the best interests of the Corporation to endorse the FY 2020 Community Development Block Grant (CDBG) application for Pathways to Home Sweet Home in the amount of \$225,000.

NOW THEREFORE, BE IT RESOLVED that it is understood that the total amount of assistance provided, plus a share of the market appreciation of the Property, will be secured through a 30-Year Deed of Trust and Promissory Note on the property. The trust will become payable if the property ceases to be utilized for the intended purpose of purchase, or is sold, or the primary loan is refinanced for the purpose of removing equity from the property, or the borrower fails or neglects to pay the taxes, assessments, or premiums for hazard, flood (if required) or mortgage insurance, or terms of the deed of trust are violated whichever occurs first. After 30 years loan is forgiven and released from the land records.

FURTHER, the share of market appreciation is the amount of funds the borrower must pay the County, in addition to the principal balance of the Loan, due to increased market value of the property at the time of resale, or repayment of the Loan prior to the end of the affordability period. Market value will be the greater of the contract sales price, or the value as determined by a licensed appraiser at the expense of the borrower, which is acceptable to the County. The County’s share of the market appreciation of the property will be calculated prior to deductions for real estate fees/commissions, settlement fees, judgments, liens or considerations for home improvements made by the Borrower and will equal the product of the market value at the time of sale or refinance, minus the original total acquisition cost multiplied by a fraction, the numerator of which is the principal sum of the Loan and the denominator is the property’s original total acquisition cost.

Example:	Market Value at time of sale:	\$300,000
	Original Total Acquisition cost:	-\$200,000
	Amount of Market Appreciation	\$100,000
	Principal Sum of Loan	\$ 75,000
	Fraction:	$\$75,000/\$200,000 = .38$
	County Share of Market Appreciation:	$\$100,000 \times .38 = \$38,000$
	Borrower Share of Market Appreciation:	$\$100,000 \times .62 = \$62,000$

In the event of foreclosure by the First Lender, the County, at its sole discretion, may release the Borrower from their obligation to repay the entire principal and a share of the total market appreciation, or a portion thereof. These stipulations are set forth in the Deed of Trust, and Note.

The loan will not be subordinated at any time during the deferral or repayment period to a Home Equity Loan, reverse mortgage or any other form of refinance of the first trust that result in removal of equity from the property for any reason (i.e. cash, loan consolidation, debt repayment, home improvements, education expenses, etc.).

FURTHER RESOLVED, that this resolution shall be filed in the Minute Book of the Corporation.”

Dan called for a motion to approve the resolution as presented. Sue Zywokarte moved; this was seconded by Dan Gray and approved unanimously with Jon-Michael Rosch abstaining.

**Ad Hoc Committee Formation:** Mergers and Acquisitions. Dan asked for a motion to approve the formation of an ad hoc committee to explore and make recommendations about mergers and acquisitions. Jim Ross moved, and Jonny seconded; this was approved unanimously.

## **ANNOUNCEMENTS –**

Dara requested that the agenda sidebar be corrected for the Board minutes books since Emeritus members were still included on the letterhead.

## **ADJOURNMENT**

There being no further business, Jim Ros made a motion to adjourn the meeting. This was seconded by Sue Zywokarte and unanimously approved by the Board.

The meeting was adjourned at 8:39 p.m.

Respectfully submitted,



# **PATHWAY HOMES, INC.**

## **Minutes of the Special Meeting of the Board of Directors December 3, 2018**

A special meeting of the Board of Directors was held on Monday, December 3, 2018. Patrick Chaing called the meeting to order at 7:07 p.m. The following individuals were present and participated throughout the meeting:

### **MEMBERS**

Patrick Chaing, Chair  
Jennifer Judelsohn, Vice-Chair

### **STAFF**

Sylisa Lambert-Woodard, President & CEO  
Brenda F. Brennan, CFO  
Eleanor Vincent, COO  
Anna Smith, Director of Development  
Lauren P. Leventhal, QA Manager

In attendance via phone: Emily Chiang, Daniel Gray, Jennifer McGarey, Jon-Michael Rosch, and Susan Zywokarte; Angie Lathrop joined at 7:10pm, after the vote.

### **INTRODUCTION**

Patrick presented a synopsis of the goal of the meeting today. Board had been provided in advance the resolution required for submission of the Community Development Housing Initiatives (CHDI) proposal for Prince William County. Similar resolutions have been passed by the Board in the past.

Sylisa provided a more detailed explanation of the proposed project. Specifically, that Pathways proposes to purchase 14 one-bedroom condos in Prince William county, and the cities of Manassas and Manassas Park, with 2 meeting universal design standards. The total requested sum for the project is \$2.4M.

### **MOTION**

Patrick called for a motion to approve the following resolution: “WHEREAS, the Board of Directors of the Corporation deems it advisable and in the best interests of the Corporation to endorse the FY 2019 Community Housing Development Initiative Program (CHDI) application for Developing Pathways Community in the amount of \$2,400,000 along with \$40,000 as required contingency funds for implementation of the rehabilitation portion of the project.

NOW THEREFORE, BE IT RESOLVED that it is understood that the total amount of assistance provided, plus a share of the market appreciation of the Property, will be secured through a 30-Year Dead of Trust and Promissory Note on the property. The Trust will become payable if the property ceases to be utilized for the intended purpose of purchase, or is sold, or the primary loan is refinanced for the purpose of removing equity from the property, or the borrower fails or neglects to pay the taxes, assessments, or premiums for hazard, flood (if required) or mortgage

insurance, or terms of the deed of trust are violated whichever occurs first. After 30 years loan is forgiven and released from the land records.

FURTHER, in addition to the recorded Deed of Trust and Promissory Note, there will also be a recorded Deed of Easement and Declaration of Restrictive Covenants which will run with the property for an affordability period of thirty-years to ensure that occupancy and rental requirements are maintained and monitored during the required period of affordability. Even if property is sold and the funds are repaid to Prince William County the new owner must continue to operate the property as affordable rental housing for persons with developmental disabilities subject to the income and rent affordability limits.

The share of market appreciation is the amount of funds the borrower must pay the County, in addition to the principal balance of the Loan, due to increased market value of the property at the time of resale, or repayment of the Loan prior to the end of the affordability period. Market value will be the greater of the contract sales price, or the value as determined by a licensed appraiser at the expense of the borrower, which is acceptable to the County. The County's share of the market appreciation of the property will be calculated prior to deductions for home improvements made by the Borrower and will equal the product of the market value at the time of sale or refinance, minus the original total acquisition cost multiplied by a fraction, the numerator of which is the principal sum of the Loan and the denominator is the property's original total acquisition cost.

Example:	Market Value at time of sale:	\$1,000,000
	Original Total Acquisition cost:	-\$ 900,000
	Amount of Market Appreciation:	\$ 100,000
	Principal Sum of Loan:	\$ 450,000
	Fraction:	$\$900,000 / \$450,000 = 0.50$
	County Share of Market Appreciation:	$\$100,000 \times 0.50 = \$50,000$
	Borrower Share of Market Appreciation:	$\$100,000 \times 0.50 = \$50,000$

Repayment to County  $\$450,000 + \$50,000 = \$500,000$  (based on dollar for dollar match); no match provided all equity comes to OHCD

In the event of foreclosure by the First Lender, the County, at its sole discretion, may release the Borrower from their obligation to repay the entire principal or a portion thereof. These stipulations are set forth in the Deed of Trust, and Note.

Subordination of Loan – All Loans will not be subordinated at any time during the deferral of repayment period to a home equity loan, reverse mortgage or any other form of refinance of the First trust that result in removal of equity from the property for any reason (i.e., cash, loan consolidation, debt repayment, home improvements, education expenses, etc.).

FURTHER RESOLVED, that this Unanimous Consent shall be filed in the Minute Book of the Corporation."

Jennifer Judelsohn moved and Emily Chiang seconded the motion. The motion was passed unanimously with Jonny Rosch abstaining due to a conflict of interest related to owning property in Prince William County, VA.

### **ANNOUNCEMENT**

Staff Holiday party is 12/7/18 from 12-3p.m. at Brion's Grille. Resident Holiday party is 12/13/18 from 6-9p.m. at Church of the Good Shepherd in Burke, VA.

Angie Lathrop joined the conference call (7:10p.m.).

Patrick confirmed for the Board that he would send an email summary with party dates, times, and locations.

### **ADJOURNMENT**

There being no further business, Jennifer Judelsohn made a motion to adjourn the meeting. This was seconded by Sue Zywokarte and unanimously approved by the Board.

The meeting was adjourned at 7:14 p.m.

Respectfully submitted,



TREASURER'S REPORT-January 2019  
Brenda Brennan, Chief Financial Officer

The Fiscal Year 2018 Financial and Compliance audits have been completed. The financial statements for: Pathway Homes, Inc., Pathways Living, Inc., Pathway Options, Inc., Pathway Visions, Inc., Pathways of Florida, Inc., and Pathways Recovery, Inc., have all been received and filed with the Federal Audit Clearinghouse.

Pathway Homes, Inc., Pathway Options, Inc., and Pathway Visions, Inc., tax returns for Fiscal Year 2018 have been finalized. Pathways Living, Inc., and Pathway Homes of Florida, Inc., are in draft form and being reviewed. Final returns should be completed within the next week. Extensions were all filed with the Internal Revenue Service.

Staff members; Sylisa Lambert-Woodard, Kristina McCullough, Sakin Mire and Brenda Brennan and the Board of Director's audit committee; Patrick Chaing, Emily Chiang, and Johnny Rosch met with the audit team from CohnReznick on November 12, 2018 for the final audit presentation. Micki Lin, Christopher Griffin, Greg Rogers and Managing Partner, Winell Belfonte from CohnReznick, presented the scope and details of the Fiscal Year 2018 audits and results. Jonny Rosch will present the Audit Committee summary from this meeting during Committee reports.

The agency's health, with Kaiser Permanente, Met Life for dental insurance and Unum for life insurance policies were renewed effective January 1, 2019 with small premium increases, although none of the increases were passed onto staff. All staff payroll deductions for benefits will remain the same for 2019 as they were in 2018 and 2017.

The Federal Government shut down has had a minimal impact on the funding and cash flow position of Pathway Homes. We were able to complete some advance payment draws, within the HUD guidelines, for nine of our Supportive Housing Grants (SHP) to ensure sufficient funding through the first 75 days of the anticipated federal closing. However, since the shut down has occurred, we have been able to successfully continue drawing down needed funds for these nine grants, which will extend our available cash on hand beyond the first 75 days. We do not anticipate any delays in ongoing funding from our contracted state and local funders during the closing. In addition, we have a little over \$1.1M available cash on hand and a \$250K Line of Credit available with Capital One Bank.

**Pathway Homes  
Balance Sheet**

As of 11/30/2018

	Current Year
<b>Assets</b>	
Current Assets	
Cash - Operations	
Cash and Cash Equivalents	1,645,347.92
Investments	100,113.38
Total Cash - Operations	1,745,461.30
Accounts Receivable - HUD	
Accounts Receivable	33,050.52
Total Accounts Receivable - HUD	33,050.52
Prepaid Expenses	
Prepaid Expenses	98,701.25
Security Deposits	(7,318.19)
Total Prepaid Expenses	91,383.06
Accounts Receivable - Other	
Accounts Receivable	89,593.61
Program Fees Receivable	356,452.78
Security Deposits	31,885.00
Advances-Intercompany	55,681.31
Total Accounts Receivable - Other	533,612.70
Total Current Assets	2,403,507.58
Property and Equipment	
Fixed Assets	15,814,352.33
Accumulated Depreciation	(2,267,983.05)
Intangible assets-software	0.00
Total Property and Equipment	13,546,369.28
Due From Other Funds	
Advances-Intercompany	106,786.04
Total Due From Other Funds	106,786.04
Funded Reserve Accounts	
Reserve for Replacement	74,170.07
Total Funded Reserve Accounts	74,170.07
Total Assets	16,130,832.97
<b>Liability and Net Assets</b>	
Current Liabilities	
Accounts Payable - Operations	
Accounts Payable and Accrued Expenses	210,116.44
Deferred Revenue	698,553.77
Liability for Escrow Funds	106,971.44
Total Accounts Payable - Operations	1,015,641.65
Due To Other Funds	
Due To (From) other Funds	(77,760.47)
Total Due To Other Funds	(77,760.47)
Total Current Liabilities	937,881.18
Long Term Liabilities	
Mortgage Payable	
Deferred Revenue	12,889.20
Mortgage Payable	2,511,068.99
Lease Payable	7,502.00
Total Mortgage Payable	2,531,460.19
Total Long Term Liabilities	2,531,460.19
Net Assets	

**Pathway Homes  
Balance Sheet**

As of 11/30/2018

	Current Year
Beginning Net Assets	11,793,549.85
Change in Net Assets	867,941.75
Total Net Assets	12,661,491.60
Total Liability and Net Assets	16,130,832.97



**Pathway Homes**  
Statement of Functional Expenses  
Pathway Homes, Inc  
From 7/1/2018 Through 11/30/2018

		<u>Total Budget - Original</u>	<u>Current Year Actual</u>	<u>Prior Year Actual</u>	<u>Total Budget Variance - Original</u>
<b>Revenue</b>					
Grant Revenue					
Contract Funds	4100	2,162,005.48	1,148,585.08	1,592,711.56	(1,013,420.40)
Grant Revenue	4110	157,500.00	638,620.69	872,375.00	481,120.69
Grant Revenue - SPC	4115	1,777,210.00	742,628.00	698,755.00	(1,034,582.00)
Admin Fee	4120	0.00	127,254.52	101,211.82	127,254.52
HUD Housing Funds	4130	1,275,622.00	1,339,210.37	1,024,722.00	63,588.37
Auxiliary Grant Revenue	4141	313,552.00	112,235.50	91,484.67	(201,316.50)
Rental Income - HUD Supplement	5121	<u>0.00</u>	<u>118,750.00</u>	<u>91,034.00</u>	<u>118,750.00</u>
Total Grant Revenue		5,685,889.48	4,227,284.16	4,472,294.05	(1,458,605.32)
Contributions					
Donations-Unrestricted	4400	158,310.00	138,610.22	49,354.98	(19,699.78)
Donations-Restricted	4405	<u>0.00</u>	<u>8,968.00</u>	<u>100.00</u>	<u>8,968.00</u>
Total Contributions		158,310.00	147,578.22	49,454.98	(10,731.78)
Program Revenue					
Social Security Revenue	4140	320,000.00	182,158.00	171,456.25	(137,842.00)
Client Fees	4150	637,000.00	435,431.66	374,980.95	(201,568.34)
Rental Income	4160	227,184.00	74,659.85	94,659.85	(152,524.15)
Medicaid Fees	4162	191,100.00	20,111.70	82,901.00	(170,988.30)
Management Fee Income	4175	<u>120,570.00</u>	<u>13,000.00</u>	<u>19,500.00</u>	<u>(107,570.00)</u>
Total Program Revenue		1,495,854.00	725,361.21	743,498.05	(770,492.79)
Investment Income					
Interest Income	4210	<u>1,000.00</u>	<u>1.03</u>	<u>89.09</u>	<u>(998.97)</u>
Total Investment Income		1,000.00	1.03	89.09	(998.97)
Other Income					
Other Revenue	4200	0.00	23,048.61	34,063.95	23,048.61
Disposition Of Assets-Gain/Loss	4500	<u>0.00</u>	<u>338,342.63</u>	<u>(6,661.38)</u>	<u>338,342.63</u>
Total Other Income		<u>0.00</u>	<u>361,391.24</u>	<u>27,402.57</u>	<u>361,391.24</u>
Total Revenue		<u>7,341,053.48</u>	<u>5,461,615.86</u>	<u>5,292,738.74</u>	<u>(1,879,437.62)</u>
<b>Expenses</b>					
Salaries and related expenses					
Payroll	9000	2,710,698.43	1,409,779.53	1,370,483.41	1,300,918.90
Payroll Tax Expense	9200	203,356.71	101,950.01	99,686.20	101,406.70
Retirement Expense	9300	5,972.00	18,500.00	0.00	(12,528.00)
Health Insurance	9400	231,719.76	132,788.95	130,347.61	98,930.81
Life Insurance	9450	5,984.00	2,973.44	2,859.40	3,010.56
Dental Insurance	9470	18,679.00	12,633.63	10,765.47	6,045.37
VA Employment Tax	9500	12,339.00	191.89	270.45	12,147.11
Workmen's Compensation	9600	37,238.00	31,550.53	25,199.67	5,687.47
Accrued Compensated Leave	9800	0.00	(147,613.88)	(166,504.75)	147,613.88

**Pathway Homes**  
Statement of Functional Expenses  
Pathway Homes, Inc  
From 7/1/2018 Through 11/30/2018

		Total Budget - Original	Current Year Actual	Prior Year Actual	Total Budget Variance - Original
Total Salaries and related expenses		<u>3,225,986.90</u>	<u>1,562,754.10</u>	<u>1,473,107.46</u>	<u>1,663,232.80</u>
Professional Services					
Legal Expense	6340	3,800.00	4,820.00	3,051.00	(1,020.00)
Audit Expense	6350	62,000.00	66,275.00	59,575.00	(4,275.00)
PRS Support Services	7201	0.00	31,477.58	0.00	(31,477.58)
PRS Psychosocial Rehab	7202	0.00	25,453.80	0.00	(25,453.80)
PRS Employment Service	7203	0.00	744.14	0.00	(744.14)
Contract/Project Manager	9700	<u>150,000.00</u>	<u>32,855.23</u>	<u>56,756.26</u>	<u>117,144.77</u>
Total Professional Services		215,800.00	161,625.75	119,382.26	54,174.25
Office Expense					
Telephone & Cable Expense	6313	60,396.00	43,545.75	34,806.86	16,850.25
Postage & Shipping	6314	5,500.00	5,142.86	3,327.88	357.14
Books & Subscriptions	6316	2,000.00	595.89	588.00	1,404.11
Printing & Copying	6317	14,000.00	2,927.34	3,269.51	11,072.66
Office Supplies	6360	124,958.00	1,662.67	2,960.49	123,295.33
Office Rent	6456	<u>254,000.00</u>	<u>102,401.32</u>	<u>99,098.98</u>	<u>151,598.68</u>
Total Office Expense		460,854.00	156,275.83	144,051.72	304,578.17
Information & Technology					
Computer Supplies & Services	6352	5,792.00	17,281.64	29,238.88	(11,489.64)
Computer Consultant Services	6353	<u>165,955.00</u>	<u>65,871.51</u>	<u>65,505.66</u>	<u>100,083.49</u>
Total Information & Technology		171,747.00	83,153.15	94,744.54	88,593.85
Occupancy					
Electricity	6450	78,500.00	46,042.97	51,171.54	32,457.03
Water	6451	300.00	10,713.21	6,794.44	(10,413.21)
Gas	6452	1,000.00	2,301.80	2,073.83	(1,301.80)
Contract Expense-Other	6454	2,000.00	26,501.04	21,740.74	(24,501.04)
Leasing and Contract Expense	6457	1,989,723.60	1,801,923.31	1,723,070.20	187,800.29
Home Owners Association Fee	6460	75,250.00	88,981.20	58,812.35	(13,731.20)
Garbage & Trash Removal	6525	<u>4,000.00</u>	<u>1,637.96</u>	<u>999.52</u>	<u>2,362.04</u>
Total Occupancy		2,150,773.60	1,978,101.49	1,864,662.62	172,672.11
Conferences & Training					
Conferences	6417	2,000.00	5,833.03	2,097.58	(3,833.03)
Training Expenses	6418	<u>3,300.00</u>	<u>27,492.67</u>	<u>15,405.41</u>	<u>(24,192.67)</u>
Total Conferences & Training		5,300.00	33,325.70	17,502.99	(28,025.70)
Interest Expense					
Interest Expense	6820	<u>100,000.00</u>	<u>37,306.54</u>	<u>40,227.87</u>	<u>62,693.46</u>
Total Interest Expense		100,000.00	37,306.54	40,227.87	62,693.46
Depreciation & Amortization					
Depreciation Expenses	6600	<u>350,000.00</u>	<u>144,567.84</u>	<u>134,765.26</u>	<u>205,432.16</u>
Total Depreciation & Amortization		350,000.00	144,567.84	134,765.26	205,432.16
Professional Insurance					

**Pathway Homes**  
Statement of Functional Expenses  
Pathway Homes, Inc  
From 7/1/2018 Through 11/30/2018

		<u>Total Budget - Original</u>	<u>Current Year Actual</u>	<u>Prior Year Actual</u>	<u>Total Budget Variance - Original</u>
Professional Liability Insurance	6430	89,350.00	59,704.95	52,634.68	29,645.05
Crime Bond Insurance	6433	5,000.00	1,412.94	1,388.35	3,587.06
Directors & Officers Insurance	6435	9,800.00	3,937.94	3,937.94	5,862.06
Property Liability Insurance	6720	14,710.00	13,584.34	13,256.05	1,125.66
Total Professional Insurance		118,860.00	78,640.17	71,217.02	40,219.83
Repairs & Maintenance					
Repairs & Maintenance	6540	24,000.00	121,950.83	67,989.56	(97,950.83)
Grounds Maintenance	6541	10,000.00	6,197.26	7,449.00	3,802.74
Extermination	6542	12,000.00	11,103.66	8,366.24	896.34
Reserve for Replacements	6599	0.00	(5,500.00)	0.00	5,500.00
Total Repairs & Maintenance		46,000.00	133,751.75	83,804.80	(87,751.75)
Program/Contract Expenses					
Recreation Supplies	6421	0.00	18.99	0.00	(18.99)
Security Deposits	6465	0.00	4,138.00	3,084.70	(4,138.00)
Moving Fees	6466	0.00	3,632.05	5,227.42	(3,632.05)
Contracts - HUD Only	6520	0.00	308.16	0.00	(308.16)
Misc Operating Expenses	6590	5,000.00	2,615.29	2,379.54	2,384.71
Furnishings Not Capitalized	6595	4,500.00	11,120.22	35,215.75	(6,620.22)
Equipment Not Capitalized	6596	3,000.00	4,363.60	339.00	(1,363.60)
Renter's Insurance	6721	8,000.00	19,979.62	23,435.85	(11,979.62)
Food	6932	106,000.00	48,726.74	47,215.83	57,273.26
Small Ware/China Replacement	6933	600.00	0.00	0.00	600.00
Cleaning/Household Supplies	6951	24,000.00	7,945.27	7,458.50	16,054.73
Client emergency, supplies, transportation	6952	0.00	546.00	0.00	(546.00)
Medical Supplies - Rx	6960	4,500.00	6,212.50	8,271.93	(1,712.50)
Medical Supplies - Non Rx	6963	3,200.00	1,102.66	961.10	2,097.34
Cosmetic/Personal Items	6964	2,100.00	916.77	588.03	1,183.23
Laundry/Linens	6973	6,600.00	3,447.51	2,632.56	3,152.49
Total Program/Contract Expenses		167,500.00	115,073.38	136,810.21	52,426.62
Development Expenses					
Advertising & Marketing	6210	3,000.00	3,383.81	1,896.93	(383.81)
Purchases From Contributions	6391	25,000.00	7,915.08	30,110.90	17,084.92
Pass-Through Contributions	6392	0.00	0.99	0.00	(0.99)
Fundraising Expense	6394	20,000.00	22,971.99	20,552.09	(2,971.99)
Total Development Expenses		48,000.00	34,271.87	52,559.92	13,728.13
Administrative Expenses					
Membership Fees	6315	3,200.00	5,180.65	4,072.90	(1,980.65)
Bad Debts	6370	0.00	(260.00)	193.00	260.00
Administrative Expenses	6390	4,500.00	13,225.11	7,696.81	(8,725.11)
Special Events	6416	5,000.00	2,514.13	1,435.30	2,485.87
Counselor's Expenses	6420	0.00	119.50	0.00	(119.50)

**Pathway Homes**  
Statement of Functional Expenses  
Pathway Homes, Inc  
From 7/1/2018 Through 11/30/2018

		<u>Total Budget - Original</u>	<u>Current Year Actual</u>	<u>Prior Year Actual</u>	<u>Total Budget Variance - Original</u>
Storage Facility	6459	<u>24,520.00</u>	<u>6,330.00</u>	<u>8,690.00</u>	<u>18,190.00</u>
Total Administrative Expenses		<u>37,220.00</u>	<u>27,109.39</u>	<u>22,088.01</u>	<u>10,110.61</u>
Taxes, Licenses, & Permits					
Real Estate Taxes	6710	<u>11,000.00</u>	<u>8,418.90</u>	<u>4,652.19</u>	<u>2,581.10</u>
Fees, Licenses & Permits	6790	<u>2,700.00</u>	<u>8,590.08</u>	<u>1,123.15</u>	<u>(5,890.08)</u>
Total Taxes, Licenses, & Permits		<u>13,700.00</u>	<u>17,008.98</u>	<u>5,775.34</u>	<u>(3,308.98)</u>
Travel					
Vehicle Insurance	6431	<u>29,503.00</u>	<u>10,928.69</u>	<u>11,504.20</u>	<u>18,574.31</u>
Staff Mileage Expenses	6560	<u>54,543.00</u>	<u>13,265.49</u>	<u>16,251.69</u>	<u>41,277.51</u>
Vehicle Operating Cost	6570	<u>20,709.00</u>	<u>6,513.99</u>	<u>5,925.97</u>	<u>14,195.01</u>
Total Travel		<u>104,755.00</u>	<u>30,708.17</u>	<u>33,681.86</u>	<u>74,046.83</u>
Total Expenses		<u>7,216,496.50</u>	<u>4,593,674.11</u>	<u>4,294,381.88</u>	<u>2,622,822.39</u>
Change in Net Assets		<u>124,556.98</u>	<u>867,941.75</u>	<u>998,356.86</u>	<u>743,384.77</u>



January 4, 2019 - Philanthropic Report –2<sup>nd</sup> Quarter FY19

October 1, 2018 through December 31, 2018

Committee Members: Jennifer Judelsohn, Chair, Patrick Chaing, Emily Chiang and Sue Zywokarte  
Staff: Sylisa Lambert-Woodard, Anna Smith

➤ Financial Contribution Total Received YTD \$384,002– **FY19 - Goal \$796,000**

**Campaigns:**

- *Help the Homeless: FY19 YTD \$46,353\*– **FY19 Goal \$70,000***
  - \*Full campaign total - \$51,853 (\$6,000 in FY19 sponsorship received in FY18)
- *Holiday Wish List: FY19 YTD \$8,064 – **FY19 Goal \$30,000***
- *STP Breakfast: FY19 YTD \$28,682 – **FY19 Goal \$85,000***

**Grants:** FY19YTD Received \$277,096; Total Received/Awarded \$\$336,500 - **FY19 Goal \$500,000**

- Grants Pending: \$265,000

➤ Upcoming Events:

- Donor Recognition Luncheon, Wednesday, February 6<sup>th</sup>, noon to 2:00 p.m., Tower Club, 8000 Towers Crescent Dr., Suite 1700, Vienna, VA 22182
- Steps to Pathways Table Captain Meeting: Thursday, February 21<sup>st</sup> from 11:30 to 1:00 (Lunch provided) Immediately after February 21<sup>st</sup> 10-11 a.m. Steps Information Session
- Steps to Pathways Breakfast, TBD – Dates under consideration: May 15, May 16, May 22 or 23 – Searching for new venue.
- Help the Homeless Walk – Saturday, October 26<sup>th</sup> – Fairfax City Hall – 20<sup>th</sup> Anniversary Event

➤ Thank You:

- Thank you to Dara Aldridge for being the top Fundraising Team at the HTH Walk raising \$2,881.
- Thank you to Sue Zywokarte for being the largest number of HTH Walk team members.
- Thank you to Dan Gray for hosting the December Steps to Pathways Session.

➤ Action Steps:

- Think about who you want to invite to the Steps to Pathways Breakfast!!! **Goal 35 tables of 10 with 24 tables filled with Board contacts.**
  - Board filled 16 tables last year fully. Jennifer J.-8 tables; Sue-2 tables, Dara-2 tables; Emily–2 tables and the remaining board members filled 2 more tables with guests. Won't take much more effort to hit the 24.

## **January 4, 2019 – Board Development Report –2nd Quarter - FY2019**

*October 1, 2018 through December 31, 2018*

Committee Members: Patrick Chaing, Committee Chair, Dan Gray, Jim Ross

Staff: Sylisa Lambert-Woodard, Anna Smith

**Board Recruitment:** The Development Committee will continue to vet suitable candidates and would like to remind the Board to continue to provide recommendations on possible candidates for membership consistent with the necessary attributes in addition to their functional expertise set forth by the Board in January 2014:

- 1) Openness to making a financial contribution;
- 2) Ability to attend Board meetings, committee meetings, and special events; and
- 3) Being a good group decision maker.

If Board members have candidates that meet these criteria, please contact either President and CEO Dr. Sylisa Lambert-Woodard, Board Chair Daniel Gray, or Board Development Chair Patrick Chaing.

**Board Governance:** The board development committee discussed various forms of nonprofit board governance models. They will continue to discuss how various models blend with current and potential future board philosophies. As needed, the Committee will make recommendations to the full board for consideration.



**Policy:** Eviction  
**Section:** Administration  
**Policy Date:** 01/14/2019  
**Date(s) Revised:**  
**Number of Pages:** (3)

**Policy Number:** A-E1

**This Policy Applies to:**  
< The Agency

## **PURPOSE**

Pathway Homes is committed to providing a healthy and safe living environment to tenants and to ensuring consistent implementation of tenancy rights and responsibilities.

## **POLICY**

Pathway Homes, Inc. uses a Housing First approach wherein tenants are not required to utilize support services to enter or stay in housing. There are no limits on the length of tenancy if lease terms and conditions are met.

## **PROCEDURE**

Pathway Homes makes every effort to resolve housing issues so that tenants can maintain housing stability. However, the following are instances wherein Pathway Homes would begin eviction procedures:

1. Violation of lease including nonpayment of rent, property damage, failure to complete income certification, or sign a lease in the absence of extenuating circumstances.
2. Repeated violation of property complex rules and requirements resulting in disruption of other tenants' safe and peaceful enjoyment of the property.
3. Behaviors that threaten the general safety of property management staff, other tenants.

### **5-Day Pay or Quit Notice**

Should the tenant fall behind on rent payments, Pathway Homes may issue a 5-Day Pay or Quit Notice to provide the tenant the opportunity to pay the past due rent in full or establish a payment plan within 5 days of the notice. If the tenant fails to pay the unpaid rent balance or set up a payment plan or fails to follow the terms of the payment plan, Pathway Homes will initiate formal eviction proceedings.



### **21/30 Notice of Material Noncompliance with Lease**

Tenants are listed as “occupants” on leases where Pathway Homes is the leaseholder. If the tenant violates the lease, including failure to follow the property complex rules and requirements, a 21/30 Notice may be issued by the Property Complex Leasing Office and/or Pathway Homes. The 21/30 Notice provides the tenant 21 days to correct the violation or vacate the unit within 30 days. If the violation is not corrected within 21 days and the Leasing Office decides the tenant may no longer remain in the unit, Pathway Homes may choose to move the tenant to another Property Complex. If Pathway Homes is unable to locate another unit for the tenant or chooses to terminate the lease agreement with the tenant, Pathway Homes may retain the lease for that unit with the Property Complex.

### **30-Day Notice of Material Noncompliance and Termination of Lease**

Pathway Homes may issue a 30-Day Notice to Vacate if the tenant remedies the violation that resulted in a 21/30 Notice but committed a subsequent breach of like nature within twelve months of the 21/30 Notice. If the tenant fails to vacate the premises on or before the date specified in the 30-Day Notice Pathway Homes will initiate formal eviction proceedings.

### **Notice of Non-Remediable Material Noncompliance with Lease and 30-Day Notice of Termination of Lease**

Pathway Homes may issue a Notice of Non-Remediable Material Compliance if the violation is not remediable by repairs, payment of damages or other action. If the tenant fails to vacate the premises on or before the date specified in the Notice, Pathway Homes will initiate formal eviction proceedings.

### **Notice of Immediate Eviction**

Pathway Homes may issue a Notice of Immediate Eviction for non-remediable criminal or willful acts, which pose a threat to the health and/or safety of the community. If the tenant fails to vacate the premises, Pathway Homes will seek immediate possession of the premises in court and any payments made after the Notice is delivered will be accepted with complete reservation of all rights Pathway Homes has to recover possession of the premises.

### **Appeals**

Tenants have a right to appeal the termination of lease decision as follows:

1. Request a meeting with Pathway Homes within have ten (10) days to discuss the proposed termination of tenancy with Pathway Homes. The 10-day period will begin on the earlier of the date the notice is hand delivered to the unit, or the day after the date the notice is mailed.
2. Discuss, orally or in writing, with a person other than the person or subordinate of the person who made the termination decision.
3. Defend their actions in court.