

ESG-CV: Emergency Shelter

Metro Homeless Impact Division

ESG-CV funded project types

- Rapid Re-housing
 - Homelessness Prevention
 - Street Outreach
 - Emergency Shelter
-
- If your agency was funded for a specific project type, you will have EDA modes set up for each project type you received. Data entry must be completed according to the requirements HUD has laid out for that project type.
 - All project types should be set up and data collection is live!

What is Emergency Shelter?

- A project that offers temporary shelter (lodging) for the homeless in general or for specific populations of the homeless.

Individuals and Families defined as Homeless under the following categories are eligible for assistance in ES projects:

- Category 1 – Literally Homeless
- Category 2 – Imminent Risk of Homeless
- Category 3 – Homeless Under Other Federal Statutes
- Category 4 – Fleeing/Attempting to Flee DV

Types of shelters

- Entry/Exit shelters
 - Requires the client have a full record created for each project stay. All data required for the project at project entry and exit are recorded.
- “Night-by-Night” shelter.
 - For high volume shelter where a high percentage of clients served access services irregularly
- All shelter projects funded for ESG-CV are set up as Entry/Exit shelters

Bed and Unit Inventory

- Projects which provide lodging (Emergency Shelters, Transitional Housing, and Rapid Re-Housing) must complete the bed and unit inventory information on all residential projects funded through ESG. This information should match the information provided by the CoC for the HIC. The bed and unit information in HMIS is based on the number and type of beds in the entire project, which may be more beds/units than are funded under ESG.
- Rachel will follow up with an e-mail for you to fill in regarding how many beds are available in your project – as well as whether any of them are dedicated to chronic homelessness, veterans, or youth.

Project Start Date/ Updates

- The first night the client stayed in the shelter (or first night the project paid for shelter).
- Add interim updates to edit any information that has changed during the client's enrollment in you ES project.
- An annual assessment is required if the client is in the project for more than a year.
 - In HMIS: Interim “annual assessment”

Required data elements by project

Number	Element	ES entry/ exit	ES Night-by-night	Homelessness Prevention	RRH	Street Outreach
4.02	Income and Sources	x		x	x	x
4.03	Non-Cash Benefits	x		x	x	x
4.04	Health Insurance	x		x	x	x
4.05	Physical Disability	x	x	x	x	x
4.06	Developmental Disability	x	x	x	x	x
4.07	Chronic Health Condition	x	x	x	x	x
4.08	HIV/AIDS	x	x	x	x	x
4.09	Mental Health Problem	x	x	x	x	x
4.10	Substance Abuse	x	x	x	x	x
4.11	Domestic Violence	x	x	x	x	x
4.12	Current Living Situation		x			x
4.13	Date of Engagement		x			x
4.14	Bed Night		x			
4.19	Coordinated Entry Assessment	X*	X*	X*	X*	X*
4.20	Coordinated Entry Event	X*	X*	X*	X*	X*
W5	Housing Assessment at Exit			x		

Exits from the shelter project

- Each client entered into the project will need to have an exit date
- The exit date should reflect the last night the client stayed in the shelter
- Remember- enrollment in an emergency shelter project should not overlap with any night after a client has a housing move-in date listed in HMIS. This may require close communication with other participating agencies.
 - Back-date mode is your friend!

Destinations

- When a client is exited from the project, select the most accurate destination possible.
- Record where the client is expected to stay after they complete or stop participation in project activities.
- Select the Destination response category that most closely matches where the client will be staying after exiting the project.

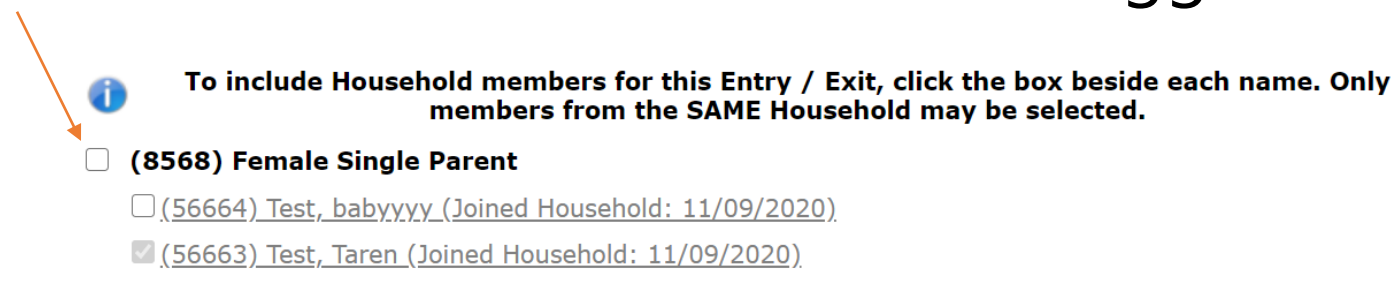
Common data quality errors

- Client Refused, Client didn't know, Null, Other, Data not Collected
- Back Date mode and EDA mode not set correctly
- Data quality questions left blank

Client Record			
Name	<input type="text" value="Bert"/>	<input type="text"/>	<input type="text" value="Test"/>
Name Data Quality	<input type="text" value="Full Name Reported"/>		←
Alias	<input type="text"/>		
Social Security	<input type="text" value="111"/>	- <input type="text" value="11"/>	- <input type="text" value="1111"/>
SSN Data Quality	<input type="text" value="Full SSN Reported (HUD)"/>		←

Common data quality errors

- Additional household members without completed client records
- Additional household members aren't tagged in data entry




- Relationship to Head of Household left blank
- Annual assessments not completed
- "Client Location" left blank

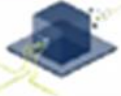
Data Quality/Reporting

- It will be critical that each agency has a plan in place for HMIS data entry, and monitoring data quality.
 - Run the CAPER regularly to review/ fix data quality errors
- Check out the reporting calendar
- Attend “HMIS Office Hours” if you have questions about your CAPERs

Reporting calendar



National
Human Services
Data Consortium



Streamlining Data to Inform
Decision Making and Break Down Barriers

2020 Fall Conference

October 2020

Reporting Periods

ESG-CV Report Submissions	Due Date
Initial -- Start to September 30, 2020	October 30, 2020
Q1 -- October 1, 2020 to December 31, 2020	January 30, 2021
Q2 -- January 1, 2021 to March 31, 2021	April 30, 2021
Q3 -- April 1, 2021 to June 30, 2021	July 30, 2021
Q4 -- July 1, 2021 to September 30, 2021	October 30, 2021
Q5 -- October 1, 2021 to December 31, 2021	January 30, 2022
Q6 -- January 1, 2022 to March 31, 2022	April 30, 2022
Q7 -- April 1, 2022 to June 30, 2022	July 30, 2022
Q8 -- July 1, 2022 to September 30, 2022	October 30, 2022

Additional submissions as needed until the grant is closed out.

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Sponsored by the National Human Services Data Consortium

This ESG-CV Quarterly Reporting Calendar provides a general outline of when each entity should generally be performing key reporting tasks—exact dates will be outlined in the Sage-generated email.

		1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31			
2020	S																																		
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Sequence of Events

- **Recipients:** Contact your HMIS Lead(s) to determine the contact person for each HMIS implementation in your geography. Contact any VSP(s) funded to ensure they can generate a report from their system. HMIS Leads and VSPs can test their reports at www.Sagehmis.info to ensure they can meet the CSV upload requirements. Determine your reporting start date and enter all projects into Sage and send the bundle emails to the HMIS Lead(s) and VSP(s) on or soon after the first day of the reporting period.
 Timing: Begin outreach one to two weeks before the reporting period begins and send bundles when the reporting period begins.
- **HMIS Leads/VSPs:** Review the projects within 24 hours. Make sure all projects funded with ESG-CV are there and they are set up with the correct project type in HMIS.
 Timing: Around the date the reporting period begins, depending on when the recipient sets up the bundles in Sage.
- **Subrecipients/Sub-subrecipients who are Direct Service Providers:** Review of data for completeness and data quality. No reporting to Sage required.
 Timing: Within the first week or two after the reporting period begins, as well as regularly reviewing data quality throughout the year.
- **HMIS Leads/VSPs:** About a week after the reporting period opens—when the organizations in the previous step have confirmed the data is accurate—upload required quarterly CSV bundles by deadline specified in Sage-generated emails. Generate the ESG Consolidated Annual Performance and Evaluation Report (CAPER) for each bundle (same component, same date range).
 Timing: About one or two weeks after the reporting period opens—when the organizations in the previous step have confirmed the data is accurate, but no later than the date requested by the recipient.
- **Recipients:** Review data as received from HMIS Lead(s) and VSP(s) and complete all required forms in Sage (financial information, activities, contact, etc.). Then submit to HUD.
 Timing: About two to three weeks (but no later than 30 days) after the reporting period begins.