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| **Date** | **Correction/ Clarification/ Supplemental Information** |
| 9/16/15  | **Q.** Are the measures (in the budget and outcome forms, 1.1 – 1.8) fixed and required, or can the applicant alter a measure, add a measure, or subtract a measure from this list?  **A.** You are welcome to articulate additional metrics in your narratives; however, the metrics that will be measured by TCHC and TDHCA on a monthly basis are those that are pre-printed on the application. |
|  | **Q.** Ok, just to confirm my understanding, how does TDHCA and TCHC define case management as it relates to street outreach in this measure and what documentation would be required to demonstrate case management was performed?**A.** There is a very good resource posted near the bottom of the TDHCA webpage of ESG [Program Guidance](https://www.tdhca.state.tx.us/community-affairs/esgp/guidance-solutions.htm) called “[Guide on Eligible ESG Uses (PDF)](https://www.tdhca.state.tx.us/community-affairs/esgp/docs/ESG-EligibleUses.pdf) (01/16/13)”:<https://www.tdhca.state.tx.us/community-affairs/esgp/docs/ESG-EligibleUses.pdf>. Pages 3 – 4 include descriptions of eligible activities under case management.  |
|  | **Q.** I read "if the applicant plans to serve 300 clients, then there must be 300 separate case files.  If we planned to DOPS 120 individuals, would the HMIS digital record be sufficient as a "case file?"  The HMIS record would hold eligibility information and Assessments that would support outcomes as opposed to our current system of paper case files that have agency required documentation, etc.**A.** A *complete* HMIS file should be sufficient to document Street Outreach and Emergency Shelter activities.  Income eligibility, the fair market rent test, rent reasonable test, and habitability checks, etc., are needed in client files for homelessness prevention and rapid re-housing, however, and ETO is not currently programmed for these efforts.  Therefore, homelessness prevention and rapid re-housing activities would require an alternate means (most likely paper) of documentation.  |
|  | **Q.** What constitutes a complete HMIS record?**A.** A complete HMIS record would include the data required to establish a new record, HUD assessments and required data elements, and narrative case notes of sufficient detail that a third party reviewer could ascertain the services delivered and the outcomes achieved.  Additionally, data entry will need to be accurate, timely, and complete in accordance with your HMIS MOA. |
|  | **Q.** We are stumbling on the question in Narrative D:  Why do you believe the value of the services provided is appropriate? We don’t understand the question.  Are you asking why we think our services are a good fit for ESG?  **A.** It might be helpful to think in terms of economics:http://healthsciences.utah.edu/notes/images/ValueEquationGraphic.jpgWhy do the services you propose to deliver at the cost for which you propose to deliver them represent the best use of public funds? |
|  | **Clarification.** In our Labor Day update (document [ESG-15-007](http://www.ahomewithhope.org/wp-content/uploads/ESG-15-007-TxESG-Competition-Labor-Day-Update-from-TCHC.pdf) on the webpage) we included a list of documents and data that applicants might wish to gather in preparation for the posting of the RFP and Application. Fortunately, TCHC was able to trim out some of the questions from the State that in our estimation were not relevant to due diligence and compliance. The RFP and Application contain the exclusive requirements for your submission. There is not, for example, an expectation that you include a list of your five largest donors into your narrative responses. |

Reminder! The deadline for submitting questions—and the last point at which we would post any additional information to the website—is 9/17/2015 at 12:30:00 PM. Please address any questions on the application to tchc@ahomewithhope.org and reference “ESG-15” in the subject line.