Legal Services for Veterans: Quarterly Performance Report

How-To: Submit a Quarterly Report

LSV Provider Website

Step 1: Log into eGMS

Access eGMS: https://hmlsgrants-va.mod.udpaas.com/s_Login.jsp

- Your grantee's eGMS point of contact logs into the system
- Enter your email address and password and select the Log In button:

Login	Walcome to VHA Crant Brograme Portal
Login	Welcome to VHA Grant Flograms Fortai
	Welcome to the Department of Veterans Affairs grants management portal for
🖉 Email	VHA's Homeless and Office of Mental Health and Suicide Prevention Grant
	Programs. This portal supports a variety of grant functions associated with the
	Supportive Services for Veteran Families (SSVF), Grant and Per Diem (GPD),
Password	and SSG Fox Suicide Prevention Grant Programs (SSG Fox SPGP) Programs.
Log In 🧹	Note: After 5 unsuccessful log-in attempts you will be locked out of the system.
Forgot Password?	For technical questions or issues, please contact SSVF@va.gov,
Ĭ	GPDgrants@va.gov or VASSGFoxGrants@va.gov or LSVGrants@va.gov for
Learn more about our New to the System?	further assistance.
Privacy & Security policies Register	

Step 2: From the Main page, select the LSV Program shortcut



From the eGMS LSV Grants page look under My LSV Applications & Grants for the Grant ID for which you would like to submit a quarterly report.

	/ A	pplications & G	rants						+
DRAFT (0)	S	SUBMITTED (1)	APPROVED	(3) CLOSED (0))				
							×Q	1-3 of 3 <	>
	#	Program Name	¢	Grant ID	Organization Legal Name	Primary Contact	Status	Created Date	\$
Open	1	Legal Services fo	or Veterans	XX-LSV-9-22Test	Test VJP Organization	Test VJP Applicant 1	Approved	09/13/2022 13:1	17

Step 4: Navigate to Request Activity tab

When the grant record opens it defaults to the Overview tab. Navigate to the **<u>Request</u>** <u>**Activity**</u> tab on the far right and select this tab.

Application Type:	Legal Services for Veterans						
Organization Legal Name:	Test VJP Organization 🖸						
Primary Contact:	Test VJP Applicant 1 🙀 🖸						
	To update the Primary Contact of this application, click the binocular icon and select from the list of contacts from your Organization. If a contact is not in the list, click Grant Contacts tab below and invite an Organization contact. The contact should accept your invitation to be added in the system.						
Grant ID:	XX-LSV-9-22Test						
Program Name:	Legal Services for Veterans						
Application Summary:	Preview						
INSTRUCTIONS APPLIC	ATION GRANT CONTACTS EXTERNAL ATTACHMENTS REQUEST ACTIVITY						

Step 5: From the REQUEST ACTIVITY tab; select Create Quarterly Report

INSTRUCTIONS	APPLICATION	GRANT CONTACTS	EXTERNAL ATTACHMENTS	REQUEST ACTIVITY			
✓ Payment	Request						
Create Payment Request							
✓ Quarterly Report Request							
Create Quarterly	/ Report						

Step 6: Open Create Quarterly Report; complete form

Step 6a: Click Save Draft for the Quarterly Report table button to appear

✓ Legal Services	
* Quarterly Report Table: Click Save before editing	
Veterans Screened Elsewhere @xml.xmlQuarterlyReport.nodeQtrRptVeteransScreenedElsewhere.html@	
Unique Veterans Served @xml.xmlQuarterlyReport.nodeQtrRptUniqueVeteransServed.html@	
Veterans Age @xml.xmlQuarterlyReport.nodeQtrRptVeteransAge.html@	
Unique Veterans Race @xml.xmlQuarterlyReport.nodeQtrRptVeteransRace.html@	
Primary Residence is Rural Community @xml.xmlQuarterlyReport.nodeQtrRptResidenceRuralComm.html@	
Housing Status on Screening @xml.xmlQuarterlyReport.nodeQtrRptHousingStatusScreen.html@	
Presenting Legal Problem @xml.xmlQuarterlyReport.nodeQtrRptLegalProblem.html@	
Level of Legal Services @xml.xmlQuarterlyReport.nodeQtrRptLevelLegalSvc.html@	
Educational Legal Services @xml.xmlQuarterlyReport.nodeQtrRptEducLegalServices.html@	
	Save Draft Submit Request Deletion

Step 6b: Once you Save Draft; you will be able to enter your data into the Quarterly Report table



Please use the + symbol to add as many additional rows as needed under each category. **There are 13 sections in the table that will need reviewed in total**, below is the first section for reference.

This report should include **cumulative data beginning August 1st for each quarter** submitted.

• If you are submitting your Quarter 2 report, it should include *all* data submitted on your Quarter 1 and then updated to include Quarter 2.

Veterans Screened Referred Elsewhere								
Please select each reason that applies	Number of Veterans screened referred elsewhere	Comments/Explanation						
Legal needs outside scope of the grant 🗸	1	Provide brief explanation	×					
	1							
+			-					

Step 6c: Complete the rest of the form; instructions for each field must be followed exactly or the activity will be returned for corrections

- Quarter Select the appropriate quarter from the drop down
- Grant Performance Review Period Enter quarter you are submitting data for
- Final Rule Certify both statements
- Data Quality Certify all three statements
- Trainings & Webinars Certify both statements
- Budget Certify all five statements
- Upload your Quarterly Tracking Tool *<u>Do Not</u> include any PHI/PII
- Additional Feedback for LSV Program Office include any comments relevant to the quarterly report

Step 6d: Once certified, save draft, and select "Submit" - Your request will not come through to our office without this step*

 Authorized Submitti 	ng Official & Signature					
y submitting this report, I certify to the best of my knowledge and belief that the report is true, complete, and accurate, and the costs reported are allowable and allocable or the purposes and objectives set forth in the terms and conditions of the Federal award. I am aware that any false, fictitious, or fraudulent information, or the omission of ny material fact may subject me to criminal civil or administrative penalties for fraud. Jam aware that any false, claims or otherwise. (U.S. Code Title 18. Section 1001 and						
Title 31, Sections 3729-3730 and	1 3801-3812). I declare to the best of my knowledge the foregoing is true and correct.					
* Authorized submitting						
official's name:						
* Authorized submitting						
official's title:						
* Authorized submitting						
official's email:						
* Applicant Signature						
	/ / / / / / / / / / / / / / / / / / /					
Remove Restore						
	Save Draft Submit Request Deletion					

After submitting the quarterly report, navigate to the main page (shown in step 2) and go to your MY LSV Tasks, your activity/task will indicate **Submitted** status.

My LSV Ta	asks							
MY LSV TA	MY LSV TASKS (37)							
	#	FAIN/Grant ID	Activity Type	Primary Contact	Activity Status	Created Date	Last Modified	
Open	1	XX-LSV-9-22Test	LSV Quarterly Reporting	Test VJP Applicant 1	Submitted	06/16/2023 09:55	06/20/2023 08:48	

LSV program staff will review your report and reach out to the identified point of contact, if there are questions/issues.

Step 7: Approval; activity complete

Grantee will only be notified if corrections are needed, otherwise, it will be reviewed and accepted. Grantees will see the request updated to **Approved** status under "My LSV Tasks"

My LSV Ta	asks						
MY LSV TAS	SKS (37)						
	#	FAIN/Grant ID	Activity Type	Primary Contact	Activity Status	Created Date	Last Modified
Open	1	XX-LSV-9-22Test	LSV Quarterly Reporting	Test VJP Applicant 1	Approved	06/16/2023 09:55	06/20/2023 08:51