



HOMELESS SERVICES OVERSIGHT COUNCIL (HSOC) Data & Performance Committee Meeting Agenda

July 21, 2025, 9:00am

Committee members must participate in person (except for just cause reasons, or personal emergency reasons approved by the HSOC):

Room 356, County of San Luis Obispo Department of Social Services,
3433 South Higuera St, San Luis Obispo, CA 93401

Members with approved just cause reasons and the public may participate by Zoom video call:

<https://us06web.zoom.us/j/81243166438?pwd=T5jCCbAOafcU9ULpGoM4S6UO4xed86.1>

Or dial in:

+1 669 444 9171

Meeting ID: 812 4316 6438

Passcode: 758019

1. Call to Order and Introductions (2 minutes*)
2. Public Comment (3 minutes*)
3. Consent: Approval of Minutes (2 minutes*)
4. Action/Information/Discussion
 - 4.1. Implementing Five-Year Plan Line of Effort 3 – Improve and Expand Data Management Efforts Through HMIS and Coordinated Entry System to Strengthen Data-Driven Operational Guidance and Strategic Oversight
 - 4.1.1. Discussion Item: Supportive Parking Program Model and Outcomes
 - 4.1.2. Discussion Item: SLO County CoC HMIS Minimum Intake Form
 - 4.1.3. Homeless Management Information System (HMIS)
 - 4.1.3.1. Information Item: System Performance Measures (SPM) Update
 - 4.1.3.2. Information Item: HMIS Staff Report



5. Future Discussion/Report Items (3 minutes*)
6. Next Regular Meeting: August 18, 2025
7. Adjournment

The full agenda packet for this meeting is available on the SLO County HSOC web page:

<https://www.slocounty.ca.gov/departments/social-services/homeless-services-division/homeless-services-oversight-council>

**HOMELESS SERVICES OVERSIGHT COUNCIL (HSOC)
DATA & PERFORMANCE COMMITTEE MEETING MINUTES**

Date

June 16, 2025

Time

9:03 am-10:37 am

Location

Room 356, Department of Social Services, 3433 S. Higuera St., San Luis Obispo, CA 93401

Members Present

Hayley Spyksma (alternate for Nathan Rubinoff)
Helene Finger
Janna Nichols
Mark Frauenheim
Mark Lamore

Members Absent

Diana Howard
Jessica Thomas
Nathan Rubinoff
Ranel Porter

Staff and Guests

Amy Blanchard
Ashlee Hernandez
Derek Ferree
Erica Jaramillo
George Solis
Jeff Al-Mashat
Kari Howell
Kate Bourne
Laurel Weir
Lupe Terrones
Merlie Livermore
Nathaniel Bearson
Russ Francis
Staci Dewitt
Trisha Raminha

1. Call to Order and Introductions

Janna called the meeting to order at 9:03 am.

2. Public Comment

None presented.

3. Consent: Approval of Minutes

Mark Lamore moved the motion to approve the minutes. Mark Frauenheim seconded the motion. Minutes were approved by voice vote, with no abstentions and none opposed.

4. Action/Information/Discussion

4.1. Implementing Five-Year Plan Line of Effort 3 – Improve and Expand Data Management Efforts Through HMIS and Coordinated Entry System to Strengthen Data-Driven Operational Guidance and Strategic Oversight

4.1.1. Discussion Item: HHAP (Homeless Housing, Assistance and Prevention Program) Round 6 Application System Performance Measures Development

With the intention to gather feedback prior to its presentation at the HSOC meeting in July, George led the information sharing and discussion regarding the development of the HHAP Round 6 Application System Performance Measures.

4.1.2. Discussion Item: HMIS (Homeless Management Information System) Staff Report

In relaying the HMIS Staff report, Kari started with the HMIS Migration Project wherein she shared the evolution of homelessness data in the community. She also talked about the future of HMIS and the role of the HMIS Lead in the SLO County Continuum of Care.

4.1.3. Discussion Item: Cal ICH (California Interagency Council on Homelessness) HDIS (Homeless Data Integration System) Connect Update

Kate shared that the HDIS meeting talked about Systems Performance Measures (SPM) and focused on Business Systems Logic, a more technical document in looking at clients' homelessness records. Kate also provided website links to the documentation the state has made available to better understand the CA System Performance Measures:

CA SPM Guide: https://www.hcd.ca.gov/sites/default/files/docs/grants-and-funding/calich/performance_measure_guide.pdf

CA SPM Business Logic: <https://dca.app.box.com/s/3p3oeoyr0y76boiaffiix1dy38je2u24>

CA SPM vs HUD SPM Crosswalk:

https://bcsf.ca.gov/calich/documents/crosswalk_of_system_performance_measures.pdf

5. Future Discussion/Report Items

None suggested.

6. Next Regular Meeting: July 21, 2025

Mark Lamore will chair this meeting as Janna will be unavailable.

7. Adjournment

Janna adjourned the meeting at 10:37 am.



COUNTY OF SAN LUIS OBISPO
DEPARTMENT OF SOCIAL SERVICES
HOMELESS SERVICES DIVISION

HOMELESS MANAGEMENT INFORMATION SYSTEM (HMIS)
MINIMUM INTAKE FORM

Background

While conducting agency discoveries, there was an identified need for minimal data collection processes alongside a Services Only (SSO) program enrollment to allow HMIS participating agencies to report on low-barrier services in the Continuum of Care (CoC).

Proposed Data Elements

Prior to SSO program enrollment, the following Data Elements are proposed for a Minimum Intake client profile:

- Name, Age, Gender, Pronouns, Race and Ethnicity, and Veteran Status
- *Also included:* Release of Information and SSO Program Enrollment

Allowable Circumstances

All clients in HMIS have services recorded within a Program Enrollment. All client profiles completed with a Minimal Intake Form must be enrolled in an agency's SSO Program. Clients enrolled in other HMIS Program types such as Street Outreach, Emergency Shelter, etc. are required to complete a full intake, to the best of the client's ability.

The Minimum Intake Form is allowed for specific circumstances, when:

- A client accesses low-barrier services, such as a meal service or one-time assistance.
 - Client(s) must be enrolled in an agency's Services Only Program (SSO).
- Services are offered to all community residents, not limited by homelessness status, and an Agency is required to report on these services.
 - For these circumstances, it is recommended the SSO Program is thereby categorized as a Non-continuum program.

Articles of Support

HMIS participating agencies are invited to build upon the baseline intake for SSO programs and are encouraged to establish internal workflows to meet client needs when circumstances change.

- By supporting low-barrier services in (and out of) the continuum, the CoC advances Line of Effort 2 in the Countywide Plan to Address Homelessness: *Focus efforts to reduce or eliminate the barriers to housing stability for those experiencing homelessness*

or at risk of homelessness, including prevention, diversion, supportive services, and housing navigation efforts.

- By meeting agency reporting needs that fall outside the scope of federal, state, and local reporting, the CoC advances Line of Effort 3 in the Countywide Plan to Address Homelessness: *Improve and expand data management efforts through HMIS and coordinated Entry system to strengthen data-driven operational guidance and strategic oversight.*

CLARITY HMIS: MINIMUM INTAKE FORM
TO BE USED WITH A SERVICES ONLY (SSO) HMIS PROJECT ONLY

CLARITY HMIS: RELEASE OF INFORMATION = ROI is valid for 2 years from the date of document collection (*typically an initial project start date*)

SSO PROJECT START DATE *[All Clients]*

		/			/				
Month			Day			Year			

PERMISSION [All Clients]

DOCUMENTATION

<input type="radio"/> Yes	<input type="radio"/> Electronic (E-SIGN)
<input type="radio"/> No*	<input type="radio"/> Attached PDF
*Clients with a NO response must have Program Enrollment toggled to Private.	<input type="radio"/> Signed Paper Document
Verbal consent allowable for minimum intake and SSO Program Enrollment.	<input type="radio"/> Verbal Consent

SOCIAL SECURITY NUMBER [All Clients]

QUALITY OF SOCIAL SECURITY

- Full SSN reported
- Approximate or partial SSN reported
- Client doesn't know
- Client prefers not to answer
- Data not collected

CURRENT NAME [All Clients] – Alias may include Bell Data ID, separate with comma to add detail

QUALITY OF CURRENT NAME

- Full name reported
- Client doesn't know
- Partial, street name, or code name reported
- Client prefers not to answer
- Data not collected

DATE OF BIRTH [All Clients]

/ / **Month** **Day** **Year** **Age:**

QUALITY OF DATE OF BIRTH

<input type="radio"/> Full DOB reported	<input type="radio"/> Client doesn't know
<input type="radio"/> Approximate or partial DOB reported	<input type="radio"/> Client prefers not to answer
	<input type="radio"/> Data not collected

GENDER [All Clients]

<input type="radio"/> Woman (Girl, if child)	<input type="radio"/> Questioning
<input type="radio"/> Man (Boy, if child)	<input type="radio"/> Different Identity (specify):
<input type="radio"/> Culturally Specific Identity (e.g., Two-Spirit)	<input type="radio"/> Client doesn't know
<input type="radio"/> Transgender	<input type="radio"/> Client prefers not to answer
<input type="radio"/> Non-Binary	<input type="radio"/> Data not collected

PRONOUNS (Select all applicable) [All Clients]

<input type="radio"/> He/him/his	<input type="radio"/> Client doesn't know
<input type="radio"/> She/her/hers	<input type="radio"/> Client prefers not to answer
<input type="radio"/> They/them/theirs	<input type="radio"/> Data not collected
<input type="radio"/> Ze/zir/zirs	<input type="radio"/>

RACE AND ETHNICITY (Select all applicable) [All Clients]

<input type="radio"/> American Indian, Alaska Native, or Indigenous	<input type="radio"/> Native Hawaiian or Pacific Islander
<input type="radio"/> Asian or Asian American	<input type="radio"/> White
<input type="radio"/> Black, African American, or African	<input type="radio"/> Client doesn't know
<input type="radio"/> Hispanic/Latina/e/o	<input type="radio"/> Client prefers not to answer
<input type="radio"/> Middle Eastern or North African	<input type="radio"/> Data not collected

VETERAN STATUS [All Adults]

<input type="radio"/> No	<input type="radio"/> Client doesn't know
<input type="radio"/> Yes	<input type="radio"/> Client prefers not to answer
Additional Veteran Details appear for specific users	<input type="radio"/> Data not collected

ADD RECORD AFTER CLIENT PROFILE AND ROI HAVE BEEN COMPLETED

**MOVE FORWARD WITH REQUIRED DATA ELEMENTS FOR PROGRAM
ENROLLMENT IN SSO HMIS PROJECT**