## HOMELESS SERVICES OVERSIGHT COUNCIL (HSOC) Coordinated Entry Committee Meeting Agenda

December 3, 2025, 11am

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

## Room 356, County of San Luis Obispo Department of Social Services 3433 South Higuera Street, San Luis Obispo

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

https://us06web.zoom.us/j/85643818221?pwd=qYfsHyCMSHdzB3rFtfNAkap7jDnoTK.1

Or dial in: +1 669 444 9171 Meeting ID: 856 4381 8221 Passcode: 632490

- 1. Call to Order and Introductions
- 2. Public Comment
- 3. Consent: Approval of Minutes
- 4. Action/Information/Discussion
  - 4.1. Information Item: CES Ongoing Activity and Report
  - 4.2. Information Item: Update on CoC NOFO and Coordinated Entry Project
  - 4.3. Information Item: Coordinated Entry Guidance and Workgroup Updates
  - 4.4. Discussion Item: Update on EHV Vouchers and Alternative Prioritization
  - 4.5. Discussion Item: Update and Input on Memorandum of Understanding
- 5. Future Discussion/Report Items
- 6. Next Regular Meeting: January 28, 2026
- 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-council01

## HOMELESS SERVICES OVERSIGHT COUNCIL (HSOC) **COORDINATED ENTRY COMMITTEE MEETING MINUTES**

#### Date

October 22, 2025

#### Time:

11:08 am-12:38 pm

## Location

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

## **Members Present**

Carrie Collins (alternate for Lisa Fraser) Crystal Racicot (alternate for Mark Lamore) Jack Lahey Janna Nichols Linda Belch Liz Smith Morgan Torell

#### **Members Absent**

Michelle Pedigo Wendy Lewis

Susan Lamont

## **Staff and Guests**

Erica Jaramillo Hayley Spyksma Josephine Price Kari Howell Laurel Weir Lawren Ramos Merlie Livermore

Nathan Rubinoff

Nathanel Bearson

Sheena Luten

#### 1. Call to Order and Introductions

Jack called the meeting to order at 11:08 am.

## 2. Public Comment

Jack announced that CAPSLO has officially launched their rotating community safe parking program. They are in the second month of operations. Currently they have eight enrollments in the program and are still accepting referrals.

## 3. Consent: Approval of Minutes

Liz moved the motion to approve the minutes, seconded by Linda. Janna abstained. The minutes were approved via voice vote.

## 4. Action/Information/Discussion

## 4.1. Information Item: CES Ongoing Activity and Report

Nathan shared a list of activities they are currently working on: Maxine Lewis Grove housing referrals, emergency shelter referrals, Helpscout integration with HMIS team, Memorandum of Understanding (MOU) revision, website development where they are at the stage of collecting provider information, renewed focus on training materials, Housing Program Denial Guidance implementation, Homeless Prevention Workgroup, and Prioritization Criteria change (Permanent Housing Queue addition).

He also presented slides which showed an overview of the current enrollments in the Coordinated Entry system, and snapshots of Permanent Housing and Emergency Shelter queues. In addition, Jack mentioned that they are also working on revising a pie chart that would specify region of origin (location based) instead of agency for the new enrollments in the CE system. They hope to bring this chart back by December.

## 4.2. Information Item: Coordinated Entry Guidance and Workgroup Updates

Nathan provided an update on Homeless Prevention Workgroup. He shared that the previous sessions discussed gaps in the current community Homeless Prevention process, which include inconsistent access, duplicate services and limited community-wide Homeless Prevention data.

He mentioned that Coordinated Entry is proposing implementing a homeless Prevention Community Queue, tied to simple assessment to determine eligibility, within HMIS and managed by the CES team. The queue would centralize referrals to Homeless Prevention, efficiently connect clients to the most appropriate resource, and provide valuable data on prevention in our community.

Nathan also reported that the goal of the workgroup is to hear feedback on the proposed Homeless Prevention community queue, to start a discussion on the best community practices for Homeless Prevention, and to define the role of Coordinated Entry in connection with Homeless Prevention clients.

Additionally, he shared two guidance documents: Alternative Prioritization Guidance & Form, and Standardized Assessment Approach.

## 4.3. Information Item: Updates on CES Communication

Saved for next meeting.

## 5. Future Discussion/Report Items

- Updates on CES Communication
- Alignment of CE with HMIS data
- MOU draft-discussion around agency participation in the CES
- Discussion with HASLO regarding vouchers/preserving peoples' housing status
- 6. Next Regular Meeting: December 3, 2025
- 7. Adjournment: Jack adjourned the meeting at 12:38 pm.

## Prioritization & Referral Policy San Luis Obispo Coordinated Entry System (CES)

#### Purpose

This Policy establishes basic principles for prioritizing and referring households experiencing homelessness in San Luis Obispo County's Coordinated Entry System (CES). As elaborated in subsequent guidance, the principles outlined in this policy will serve as the basis for all prioritization and referral activities. The policy and guidance will ensure the system's resources are utilized equitably to pursue stable and permanent housing solutions.

In SLO CoC, as in many communities, the demand for homeless services exceeds the relative availability of resources. One of the main goals of Coordinated Entry is to help reconcile this disparity by identifying and prioritizing those with the most severe service needs or highest health vulnerabilities and connecting them to the most appropriate life-saving housing to meet their needs. Coordinated Entry tackles this challenge by utilizing community-wide criteria to help decide who gets attached to available housing and service resources. These policies strive to uphold fairness and equity, most often prioritizing those at the highest risk of adverse outcomes or with the most significant needs to receive appropriate, available resources. In this manner, limited resources can be delivered to those with the greatest need, even as a community's overall need levels continue to shift.

Referral (sometimes called "matching"), is the process of connecting households, based on prioritization and participant preferences, to available housing and other resources that meet their needs. A well-coordinated referral process ensures participants are quickly and effectively connected to the appropriate resources, regardless of where they accessed the system or which provider they first contacted.

## **Applicability**

The principles in this policy are the foundation for prioritization and referral and will govern nearly all resource allocation in the CES. At the same time, principles are the foundation of policy guidance defining related service delivery standards for facilitating in populations.

#### Application of Principles for Prioritization & Referral

Applicability	Definition	CES Principal
Faual Matching &	race, color, religion, sex (including gender, gender identity, sexual orientation, and sexual harassment), national origin, familial status, and	

	the CE guidance on Equal Access.	
Low Barrier		Housing First & Consistency
Efficient Utilization	Support an efficient and coordinated process that moves people through the crisis response system from homelessness to housing as quickly as	Consistency & Continuous Improvement Process
Consistent & Equitable Assessments	Establish prioritization standards tailored to different subpopulations that produce consistent and effective outcomes. Ensure that assessment administration is consistent and high quality across providers to maximize	Consistency, Continuous Improvement Process, & Transparency
Progressive Engagement		Progressive Engagement & Housing First
Person-Centered Resource Linkages	Ctratagically prioritize recourses to encure that popula are connected to	Person-Centered Approach

## <u>Prioritization & Referral Processes</u>

Coordinated Entry staff will work with participants, providers, governing bodies, and system partners to develop guidance that will lay out processes for how participants will be matched to relevant resources March 2025

through prioritization. All guidance will align with the principles stated in the above policy.

## Prioritization Scoring & Eligibility Criteria Guidance San Luis Obispo Coordinated Entry System (CES)

## **Prioritization Scoring**

Households experiencing homelessness will be prioritized based on the Vulnerability Index-Services Prioritization Decision Assistance Tool (VI-SPDAT) version 3 for adults, F-VI-SPDAT for families, and TAY-VI-SPDAT version 2 for youth, score. These assessment tools are used strategically and only when necessary to connect households to community resources. Completed assessments will be entered into the Homeless Management Information System (HMIS). Households will then be referred to the Permanent Housing Queue (PHQ) in HMIS. Households will be matched to appropriate and realistic housing resources based on their assessment score, needs (as demonstrated by the assessment tool, data in HMIS, and case-conferencing records and client-stated housing preferences, in alignment with the CES Prioritization and Referral Policy.

The Permanent Housing Queue (PHQ) is a dynamic list that reflects real-time needs by subpopulation. In cases where multiple households have the same score, first households with children and then households with multiple adults will be prioritized, when unit occupancy standards allow. If multiple households of the same size and score are on the PHQ, the list will be filtered by the length of time the household has been in the Coordinated Entry Program (CEP). In this situation, the household with the longest duration enrolled in a Coordinated Entry Program will be prioritized for the housing referral.

Households must have an active CES program enrollment in HMIS to be eligible for referral. CES program enrollments must have a Current Living Situation (CLS) entered every 90 days to remain active, per HUD guidance.

<u>Table 1 — Tiebreakers Within the Permanent Housing Queue (PHQ)</u>

Tie-Breaker Category	Priority Order	Definition / Application
Household Composition	1	Households with children are prioritized first when scores are tied.
Household Composition (cont.)	2	Next, households with multiple adults (if occupancy standards allow).

CE Program	3	If still tied, the household with the
Enrollment		longest duration enrolled in the CE
Duration		Program is prioritized.

Households should be re-surveyed if their circumstances have changed, such as additional hospitalizations, a change in living situation or income, worsening health, or if six months have elapsed since the survey was completed. When a household is re-surveyed, the revised score may impact the household's position on the PHQ.

## Re-survey Required When:

- Household experiences new hospitalization(s)
- Worsening physical or mental health
- Change in income or benefits
- Change in living situation
- 6 months have passed since previous assessment

## **Eligibility Criteria**

## Permanent Supportive Housing with Intensive Services Support (PSH+)

To qualify for these units, a household member's VI-SPDAT score must be 11 or higher. Households will be prioritized based on the highest overall prioritization score. This housing typology has high case management support with low caseload ratios. The supportive services are attached to the units, are not time-limited, and are delivered in a low-barrier, Housing First setting. Examples of PSH+ include, but are not limited to, No Place Like Home-funded units and Housing Now! units.

## Permanent Supportive Housing (PSH)

Generally, households with VI-SPDAT scores of 8-10 are eligible for Continuum of Care (CoC)-funded permanent supportive housing (PSH), with priority given to those with the highest prioritization score. Households scoring higher than 10 on the VI-SPDAT may be offered CoC PSH if they are not eligible for PSH+ or if it is otherwise appropriate to their needs and preferences. CoC PSH provides case management and connects households to additional community resources as relevant and available. CoC housing uses a low-barrier, Housing First approach.

## Rapid Rehousing

Households with VI-SPDAT scores between 4-7 are eligible to be enrolled in RRH (e.g., Emergency Solutions Grant Program Rapid Rehousing (ESG RRH), etc.) based on the client's preferences and the criteria for each program. Households with VI-SPDAT scores of 8 or higher may be considered for referrals to RRH as appropriate.

## Lesser of No Intervention (Problem Solving)

Households with a VI-SPDAT score between 0-3. These cases should be addressed using problem-solving techniques, light-touch reunification, and/or available resources.

Table 2 - VI-SPDAT Score Ranges and Housing Pathways

VI-SPDAT Score Range	Housing Pathway	Description
11+	PSH+ (Permanent Supportive Housing with Intensive Services Support)	High-intensity supportive housing with low caseload ratios in a Housing First framework.
8–10	CoC Permanent Supportive Housing (PSH)	Long-term, low-barrier PSH with case management and community resource linkage.
4–7	Rapid Rehousing (RRH)	Short- to medium-term rental assistance with case management.
0–3	Lesser/No Intervention (Problem Solving)	Diversion, reunification, light-touch support, or self-resolution strategies.

Table 3 - Eligibility Requirements by Housing Type

Housing Type	Score Requirement	HUD/HCD Eligibility Requirements
PSH+	11+	Must meet HUD chronic homelessness definition; county residency not required.
CoC PSH	8–10 (higher accepted if appropriate)	Must meet HUD chronic homelessness definition.

HDAP PSH	8–10	Must have disability; must not yet have SSI benefits.
RRH	4–7 (8+ if appropriate)	Depends on ESG or program criteria.
Problem Solving	0–3	None.

## **Documentation Requirements for Referral**

CE will only refer clients who have uploaded a Social Security card and a government-issued ID or suitable replacements into HMIS. This benchmark supports CES's aims to reduce denial frequency, queue time for clients, and the number and duration of vacant units, promoting CES's policy of efficient utilization and progressive engagement.

Suitable replacements for a Social Security card include a current Social Security card receipt, which will be provided at the earliest opportunity. A letter from the Social Security Administration, listing both the client's legal name and Social Security number.

Suitable replacements for a Photo ID include a CA ID request receipt and a U.S. Passport card with photo ID.

ID and Social Security card receipts are valid for only 30 days from the date they are issued. After this period, case managers are expected to upload the received documents to HMIS.

<u>Table 4- Documentation Requrements for Referral</u>

Required Document	Acceptable Forms
Social Security Verification	Social Security card; SSA letter showing legal name + SSN; SS card receipt (valid 30 days).
Photo Identification	Government-issued ID; CA ID request receipt (valid 30 days); U.S. Passport card.

## **Welcome Home Village Prioritization Guidance**

This guidance outlines the Coordinated Entry System (CES) process for referring individuals to the Welcome Home Village (WHV) Interim Housing units. Eligibility and prioritization align with the CES Prioritization & Referral Policy and the Encampment Resolution Fund (ERF) requirements by prioritizing individuals from the Bob Jones Bike Trail (BJBT) encampment for placement in either Interim Housing (non-congregate shelter) Units. The goal of this guidance is to ensure a low-barrier, person-centered, equitable, and efficient process that prioritizes unsheltered individuals with the highest needs.

## **Eligibility and Prioritization**

To be eligible for referral to interim housing units at WHV, households must

- Contain single adults (18 or older)
- Be experiencing unsheltered homelessness
- Include no minor children

CES will prioritize referrals among eligible households based on the following vulnerability factors:

- VI-SPDAT score
- Chronic homelessness status
- Length of time homeless
- Other risk indicators identified in the CES Prioritization & Referral Policy

Once current BJBT residents are housed, CES will prioritize households with a history of staying at the BJBT encampment who fall within the same high-vulnerability cohort. High vulnerability is defined as individuals and households who have scored an 8–10 or 11+ on the VI-SPDAT survey. If no eligible or interested households from the encampment are available, CES will refer the most vulnerable unsheltered households in the community, as outlined by the current Prioritization Scoring & Eligibility Criteria Guidance. In alignment with Housing First principles and the ERF grant requirements, referrals to interim housing will not be contingent on sobriety, income, service participation, or other preconditions.

## Bob Jones Bike Trail Residence Eligibility Threshold

Households staying or having stayed on the BTBJ will be designated into one of the following four groups. Households from group one (1) will be prioritized first, then group two (2), then group three (3), then group four (4).

**Group 1**: Households currently staying on the BJBT, as verified by outreach efforts or CLS data documented in HMIS.

**Group 2**: Households for whom the BJBT was their primary nighttime residence (the place where a person sleeps most nights) during this period of homelessness, or **after** December 2023, as verified by outreach efforts, CLS data documented in HMIS, or third-party outreach attestation uploaded into HMIS.

**Group 3**: Households for whom the BJBT was their primary nighttime residence during a previous period of homelessness or stayed on the BJBT **before** December 2023. Verified by outreach efforts, CLS data documented in HMIS, client self-report, or third-party outreach attestation uploaded into HMIS.

**Group 4**: Households that have stayed on the BJBT intermittently during a previous period of homelessness. Verified by outreach efforts, CLS data documented in HMIS, client self-report, or third-party outreach attestation uploaded into HMIS.

Group	Group Eligibility Criteria	VI-SPDAT Requirement
1	Current BJBT Resident	No score requirement. Referrals will be from highest to lowest acuity.
2	BJBT stay was after December 2023	Score of 8+; referrals will be from highest to lowest acuity.
3	BJBT stay was before December 2023	Score of 8+; referrals will be from highest to lowest acuity.
4	BJBT stay(s) was intermittent during a previous episode of homelessness	Score of 8+; referrals will be from highest to lowest acuity.

Eligible households will be referred based on vulnerability, beginning with those who score highest on the VI-SPDAT assessment and proceeding in descending order.

## CES will refer:

 All clients in Group 1, regardless of their VI-SPDAT score, prior to considering other groups Clients in Groups 2-4 will only be eligible for referral to Interim Housing if they
have a VI-SPDAT score of eight (8) or higher, consistent with the existing CES
prioritization policy.

Referrals to interim housing will follow the same process as referrals to PSH, while adhering to respective eligibility criteria.

CES may document and consider other relevant factors when assessing residency history and making prioritization decisions, in alignment with the established CES prioritization processes.

#### **Process**

The following processes ensure that WHV supports the BJBT Encampment Resolution goals while maintaining a commitment to serving the most vulnerable individuals through an equitable, coordinated system.

Placement decisions will follow Housing First principles: referrals are not contingent on sobriety, income, service participation, or other preconditions unrelated to basic eligibility.

## Referral Documentation

All referral decisions are documented in HMIS, and the process is designed to be transparent, equitable, and accountable to community priorities and funding requirements. Referrals will include an official match letter documenting the referral date, referral to project, and the referred client's HMIS unique ID.

## **Interim Housing Units**

- When an interim housing unit at WHV becomes available, CES will identify the highest-priority eligible individual or household with a documented current or recent stay at the BJBT encampment, focusing on households with no children under 18.
- Individuals will be prioritized based on established CES vulnerability factors, including VI-SPDAT score, chronic homelessness status, disabling conditions, and length of time homeless.
- If no eligible BJBT residents are available, CES will refer the next highest-priority unsheltered household from the CES Permanent Housing Queue. Whenever possible, CES will prioritize individuals who have previously stayed at the BJBT, provided they meet eligibility requirements and fall within the most vulnerable group.
- CES staff and outreach teams will coordinate to locate, engage, and support individuals through placement and move-in.

• Referrals must align with low-barrier Housing First principles, and all referral decisions will be documented in HMIS, including issuance of a match letter.

Please note that guidance may be updated to reflect changes in CES policies, program requirements, or community priorities.



## **Welcome Home Village Prioritization Guidance**

This guidance outlines the Coordinated Entry System (CES) process for referring individuals to the Welcome Home Village (WHV) Permanent Supportive Housing (PSH) units. Eligibility and prioritization align with the CES Prioritization & Referral Policy and the Encampment Resolution Fund (ERF) requirements by prioritizing individuals from the Bob Jones Bike Trail (BJBT) encampment for placement in either Interim Housing (non-congregate shelter) Units or Permanent Supportive Housing (PSH) Units. The goal is to ensure a low-barrier, person-centered, equitable, and efficient process that prioritizes unsheltered individuals with the highest needs.

## **Eligibility and Prioritization**

## Permanent Supportive Housing Units

To be eligible for PSH units at WHV, households must:

- Be experiencing unsheltered homelessness
- Meet HUD eligibility criteria for PSH, including chronic homelessness, and the presence of a qualifying disabling condition

Households with a documented residence at the BJBT encampment will be prioritized for referral. CES will prioritize referrals among eligible households based on vulnerability factors, including:

- VI-SPDAT score
- Chronic homelessness status
- Length of time homeless
- Other risk indicators as identified in the CES Prioritization Scoring & Eligibility Criteria Guidance

Once current BJBT residents are in housing, CES will prioritize households with a history of staying at the BJBT encampment who fall within the same high-vulnerability cohort. High vulnerability is defined as individuals and households who have scored an 8–10 or 11+ on the VI-SPDAT survey. If a client is referred to an interim housing unit by the BJBT, they will be referred to the next available PSH unit, provided they meet the eligibility criteria for PSH. If no eligible or interested households from the encampment are available, CES will refer the most vulnerable unsheltered households in the community who meet PSH eligibility, as outlined in the Prioritization Scoring & Eligibility Criteria Guidance. In alignment with Housing First principles, referrals to PSH will not be contingent on sobriety, income, service participation, or other preconditions, so long as HUD eligibility requirements are met.

Bob Jones Bike Trail Residence Eligibility Threshold

Households staying or having stayed on the BTBJ will be designated into one of the following four groups. Households from group one (1) will be prioritized first, then group two (2), then group three (3), then group four (4).

**Group 1**: Households currently staying on the BJBT, as verified by outreach efforts or CLS data documented in HMIS.

**Group 2**: Households for whom the BJBT was their primary nighttime residence (the place where a person sleeps most nights) during this period of homelessness, or after December 2023, as verified by outreach efforts, CLS data documented in HMIS, or third-party outreach attestation uploaded into HMIS.

**Group 3**: Households for whom the BJBT was their primary nighttime residence during a previous period of homelessness or stayed on the BJBT before December 2023. Verified by outreach efforts, CLS data documented in HMIS, client self-report, or third-party outreach attestation uploaded into HMIS.

**Group 4**: Households that have stayed on the BJBT intermittently during a previous period of homelessness. Verified by outreach efforts, CLS data documented in HMIS, client self-report, or third-party outreach attestation uploaded into HMIS.

Group	Group Eligibility Criteria	VI-SPDAT Requirement
1	Current BJBT Resident	No score requirement. Referrals will be from highest to lowest acuity.
2	BJBT stay was after December 2023	Score of 8+; referrals will be from highest to lowest acuity.
3	BJBT stay was before December 2023	Score of 8+; referrals will be from highest to lowest acuity.
4	BJBT stay(s) was intermittent during a previous episode of homelessness	Score of an 8+; referrals will be from highest to lowest acuity.

Eligible households will be referred based on vulnerability, beginning with those who score highest on the VI-SPDAT assessment and proceeding in descending order.

#### CES will refer:

- All clients in Group 1, regardless of their VI-SPDAT score, prior to considering other groups
- Clients in Groups 2-4 will only be eligible for referral to PSH if they have a VI-SPDAT score of eight (8) or higher, consistent with the existing CES prioritization policy.

CES may document and consider other relevant factors when assessing residency history and making prioritization decisions, in alignment with the established CES prioritization processes.

## **Process**

The following processes ensure that WHV supports the BJBT Encampment Resolution goals while maintaining a commitment to serving the most vulnerable individuals through an equitable, coordinated system.

Placement decisions will follow Housing First principles: referrals are not contingent on sobriety, income, service participation, or other preconditions unrelated to basic eligibility.

## Referral Documentation

All referral decisions are documented in HMIS, and the process is designed to be transparent, equitable, and accountable to community priorities and funding requirements. Referrals will include an official match letter documenting the referral date, referral to project, and the referred client's HMIS unique ID.

## Permanent Supportive Housing Units

- When a PSH unit at WHV becomes available, CES will identify eligible households with a documented history of residing on the BJBT encampment, prioritizing those who meet both program eligibility and CES prioritization criteria.
- Individuals are ranked based on multiple factors, including VI-SPDAT score, disabling conditions, chronic homelessness status, and length of time homeless.
- If a BJBT resident does not meet PSH eligibility criteria or is not among the most vulnerable group, CES will document the reason and proceed to the next qualified candidate.

- CES may still prioritize individuals with a past connection to the BJBT, if they meet eligibility and are among the highest-priority clients.
- Outreach and CES teams will coordinate to facilitate engagement, documentation, and placement.
- All referrals will be documented in HMIS and include a match letter, ensuring transparency and compliance with both CES policy and funding requirements.

Please note that guidance may be updated to reflect changes in CES policies, program requirements, or community priorities.



#### Prioritization Guidance for Emergency Housing Voucher (EHV) Households

#### **Background**

Emergency Housing Vouchers (EHVs) issued in 2021–2022 provided subsidized rental assistance to 157 households (347 individuals) in San Luis Obispo County. These households have now maintained stable tenancy for 3 years and remain housed in the community. However, HUD has signaled that EHV funding may not be renewed beyond December 31, 2026.

If funding is not extended, these households will lose their rental assistance and become immediately at risk of homelessness, with projected rent burdens far exceeding affordability. Without intervention, many or most of these households will enter literal homelessness upon subsidy expiration.

#### **Purpose**

The purpose of this guidance is to:

- 1. Integrate at-risk EHV households into the existing CES Prioritization and Referral process, using the Permanent Housing Queue (PHQ).
- 2. Create a vulnerability-based prioritization pathway appropriate for a population that is *currently housed* but faces a predictable and severe loss of housing.
- 3. Ensure equitable allocation of limited permanent housing resources for EHV households and those currently experiencing homelessness.
- 4. Prepare the homelessness system to prevent a large influx of homelessness in 2026–2027.

This guidance supplements, but does not replace, Prioritization Scoring & Eligibility Criteria Guidance currently in use.

## **Eligible Population**

This prioritization applies to:

- All households in San Luis Obispo County are currently receiving an Emergency Housing Voucher issued through HASLO, regardless of region (North/Mid/South) or family type.
- Households that remain stably housed through their voucher at the time of the CES assessment.
- Households that would become homeless or return to homelessness solely due to EHV subsidy expiration.

This guidance does not apply to households that lose their voucher due to:

- Lease violations
- Evictions
- · Voluntary moves not related to subsidy expiration
- Loss of eligibility unrelated to HUD renewal status

Those households will be prioritized using standard CES processes.

## **CES Documentation Requirements**

To be considered under this prioritization process, EHV households must:

- Be enrolled in the CES project in HMIS
- · Have current income documentation verifying AMI category
- Provide documentation of active EHV participation and projected expiration date
- Meet the eligibility criteria at the referred housing project

## **Integration Into Existing CES Prioritization Structure**

Because current CES prioritization is anchored on the VI-SPDAT acuity measure and matching households through the PHQ, EHV households cannot be accurately prioritized solely on standard VI-SPDAT scores. Their three years of stable rental housing conflicts with the VI-SPDAT focus on sleeping outside and victimization during homelessness, artificially lowering their vulnerability score.

To address the limitations of the VI-SPDAT, CES will introduce a supplemental prioritization pathway for EHV households, while still placing them into the PHQ using a score-based method consistent with CES policy.

## Prioritization Method: Custom Vulnerability Formula for EHV Homeless Prevention

A formula that incorporates vulnerability factors and economic instability, seeking to understand the most vulnerable EHV households at the highest risk of entering homelessness.

## Composite Score Components

Factor	Description	Points
A. Homeless History	Any homeless history = +1, multiple episodes of homelessness = +2, history of chronic homelessness =+3	0–3
B. Rent Burden / AMI Category	0% AMI = +5; 1–10% AMI = +4; 11–25% AMI = +3; 26–50% AMI = +2	2–5
C. Household Composition	Families w/ children or pregnancy = +2; TAY households = +1; Older adults (55+) = +1	0–2
D. Disability Status	Documented disability (any household member)	2
E. Imminent Loss of Housing (EHV Expiration)	Applies automatically to all EHV households; anchors parity with literal homelessness	1
F. Housing Stability Barriers	Credit score below 580 = +1, Prior eviction within the last 5 years = +1, Criminal background impacting rental access = +1	0-3

Households will be sorted by composite score, from highest to lowest, using the same CES tiebreaker criteria.

Commented [JL1]: I think we remove the VI from here. We can give more weight to the others - but it seems like this is jsut a perfunctory step. Is there a way to put them on the list without the vi being done? It might be that we jsut have the other compsite scores and might be good to add in a score based on HMIS data (disability reported, liftime experience of homelessness)

## San Luis Obispo County Continuum of Care Coordinated Entry System

THIS MEMORANDUM OF UNDERSTANDING, hereafter "MOU", entered into by and between Company 1, County of San Luis Obispo, and Community Action Partnership of San Luis Obispo Inc (hereafter "CAPSLO"), together "Partners".

#### WITNESSETH

WHEREAS, the purpose of this MOU is to record a statement of intent of the Partners to work together toward the goal of commitment to the adherence of relevant program standards, the CAPSLO Coordinated Entry Policies & Procedures (CES Policies and Guidance), and other SLO CoC policies and initiatives.

WHEREAS, CAPSLO is the lead entity in the San Luis Obispo (SLO) County Continuum of Care (CoC) Coordinated Entry System (CES), administered through the County of San Luis Obispo, and;

WHEREAS, the County of San Luis Obispo is the Collaborative Applicant for the San Luis Obispo County Continuum of Care (CoC) and administers the Continuum of Care grants on behalf of the CoC, and:

**WHEREAS**, the County of San Luis Obispo has knowledge in administration of HUD-funded programs, and as the CoC, has funded CAPSLO, and:

WHEREAS, CAPSLO provides direct services to homeless individuals in San Luis Obispo County and is in need of assistance with the implementation of the Coordinated Entry System (CES) throughout the county, and;

## WHEREAS, Independent Contractor is willing to provide these services.

**NOW**, **THEREFORE**, in consideration of the covenants, conditions, agreements, and stipulations set forth herein, the Partners agree as follows:

- 1. Scope of Services. The Partners agree to perform the services set forth in Exhibit A, attached hereto and incorporated herein by reference, all pursuant to the terms and conditions hereinafter set forth.
- **2. Effective Date and Duration**. The effective date and duration of this MOU shall be as specified in Exhibit B, attached hereto and incorporated herein by reference.
- General Conditions. Partners shall comply with all provisions of CAPSLO's General Conditions, a copy of which is attached hereto as Exhibit C and incorporated herein by reference.
- 4. MOU Signatures. This MOU may be executed in counterparts, each of which shall be deemed to be an original, but all of which, when taken together, shall constitute one and the same agreement. This MOU may be executed and delivered by facsimile or scanned signature by any of the parties and the receiving party may rely on the receipt

of such document so executed and delivered by facsimile or email as if the original had been received.



**IN WITNESS WHEREOF** Partners have executed this MOU on the day and year set forth below.

Elizabeth "Biz" Steinberg, CEO	Date
CAPSLO	
	Date
County of San Luis Obispo	
NAME Title	Date
Company 1	

#### **EXHIBIT A**

## Coordinated Entry System SCOPE OF SERVICES

- 1. Description: This Exhibit outlines what role(s) and expectations (Company 1) will have in the SLO County CoC homeless services system. This document seeks to delineate responsibilities and clarify expectations of (Company 1) within the Coordinated Entry System of SLO County CoC.
- 2. The Coordinated Entry System (CES) in San Luis Obispo County Continuum of Care (CoC) serves persons and households who are experiencing or at risk of experiencing homelessness. Households in need of services can access CES via the designated Access Points in the community. These Access Points play a critical role in determining which intervention or resolution might be most appropriate to rapidly connect those households to services. Specifically, households who are seeking services at a Coordinated Entry Access Point, who are eligible to be enrolled in CES; should be enrolled into the CES program within the CoC's Homeless Management Information System (HMIS) unless data must be collected outside of HMIS such as a domestic violence victim service provider. Access Points provide diversion, problem solving, enrollments, needs assessments, and access to housing referrals in addition to other community services for adults, transition aged youth, and families experiencing homelessness in the CoC. Some Access Points focus on subpopulations that benefit from a tailored approach, like veterans, youth, justice-involved people and people who might be fleeing or have experienced domestic violence.
- 3. System-Level Homeless Service Providers

i. Specialized Agency

1.	Phone-Based (	Domestic Violence Hotline) $\Box$
2.	Phone-Based (	Mental Health Hotline) 🗌

3. Phone-Based (General Population Crisis Line)

Shelter and Housing Referral □

5. Specialty Population Provider  $\Box$ 

a. Population Type Served:

ii. Access Agency □

- 4. Services Provided:
  - a. (Company 1) will provide the following SLO County CoC-defined and Cen-Cal Cal-AIM defined and supported services as part of the community's Coordinated Entry System (CES) (check appropriate box[es]):
    - i. General Homeless Service Providers:

## Agenda Item 4.5

	1.	Prevention $\square$	
	2.	Emergency Shelter (ES) $\square$	
	3.	Outreach	
	4.	Rapid Re-Housing (RRH) $\square$	
	5.	Permanent Supportive Housing (PSH) $\square$	
	6.	. Permanent Housing (PH) $\square$	
	7.	Veteran-Specific Services □	
		a. Describe	
	8.	Domestic Violence-Specific Services $\square$	
		a. Describe	
	9.	Other Services	
		a. Describe	
ii. Cen-Cal, Cal-AIM Service Providers:			
	1.	Enhanced Care Management (ECM) $\square$	
	2. Day Habilitation $\square$		
	3. Housing Deposits $\square$		
	4.	Housing Tenancy Sustaining Services $\square$	
	5.	Housing Transition Navigation Services $\square$	
	6.	Recuperative Care □	
	7.	Short Term Post Hospitalization $\square$	
	8.	Other Services $\square$	
		a. Describe	

# EXHIBIT B Coordinated Entry System DURATION AND EFFECTIVE DATE

- Effective Date. This Memorandum of Understanding (MOU) shall become effective on the date the final Partner signs the document. CAPSLO shall sign last to confirm completion of all Partner signatures.
- 2. Service Period.
  - a. Services and activities outlined in this MOU shall begin on or after January 1, 2026.
  - b. This MOU functions as an annual agreement and is not tied to a fiscal or funding year. It formalizes collaborative responsibilities, coordination expectations, and adherence to CES policies and procedures.
- **3.** Duration. This MOU shall remain in effect for a one-year period from the Effective Date and shall automatically renew each year unless terminated earlier in accordance with Exhibit C. Any significant changes to program scope, CES structure, or partner responsibilities may prompt mutual review and amendment prior to renewal.
- **4.** Monitoring and Evaluation.
  - a. Quarterly Monitoring: CAPSLO, as the CES Management Entity, in partnership with the County's Homeless Services Division, will conduct quarterly monitoring with each Partner to review adherence to CES and agency Policies and Procedures; participation in required CES meetings, trainings, and leadership forums; data quality on assessments, referrals, and the CES HMIS project; and alignment with Housing First, trauma-informed care, and data integrity standards. Two consecutive unsatisfactory quarterly monitoring reviews may result in the Partner losing access to make referrals to housing resources within the CES, including shelter, Rapid Re-Housing (RRH), and the Permanent Housing Queue (PHQ), until deficiencies are corrected and compliance is restored.
  - b. Annual Evaluation: An annual evaluation will occur in the month of [Insert Month] to review overall partnership performance, including a review of agency policies and procedures to ensure adherence to CES principle-based policies and guidance, confirm continued participation, and identify opportunities for systemwide improvement.
  - c. Corrective Action: Two consecutive unsatisfactory quarterly monitoring reviews may result in the Partner losing access to make referrals to housing resources within the CES. This includes referral access to shelter, Rapid Re-Housing (RRH), and the Permanent Housing Queue (PHQ), until deficiencies are corrected and compliance is restored.
- **5.** Amendments and Continuity. This MOU may be modified by mutual written agreement of the Partners to reflect updates in CES operations, local priorities, or regulatory guidance. Continued participation by a Partner will indicate agreement with any approved revisions.