SANTA MARIA/SANTA BARBARA COUNTY

Coordinated Entry System

June 2026

VI-SPDAT & Referral Workflow in HMIS for Assessors - Providers - Matchmakers

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Coordinated Entry System (CES)

"Coordinated entry is a process developed to ensure that all people experiencing a housing crisis have fair and equal access and are quickly identified, assessed for, referred, and connected to housing and assistance based on their strengths and needs."

-U.S. Department of Housing and Urban Development (HUD)

To learn more about Santa Barbara County's Coordinated Entry System:
https://www.countyofsb.org/447/Coordinated-Entry-System

To access Resources for Providers:
https://www.countyofsb.org/3311/Resources-For-Providers

To access Training for Providers (information on upcoming trainings, online and self-paced trainings, and training resources):
https://www.countyofsb.org/3377/Training-For-Providers

Assessor

What is a Coordinated Entry (CE) Assessor?
A CE Assessor is often the initial point of contact for individuals and families. Responsibilities include:

- Administer assessments (example: Crisis Needs Assessment and Housing Needs Assessment (VI-SPDAT)) to evaluate housing needs and prioritize for available resources;
- Refer participants to the Housing Queue the Housing Needs Assessment is completed);
- Collect and enter data into HMIS;
- Assist participants in navigating the CE system, including verifying eligibility, communicating about next steps, and available resources;
- When possible, assessors explore Housing Problem Solving/Diversion strategies to help participant avoid entering the homelessness system.

Training resources for Assessors: https://www.countyofsb.org/3377/Training-For-Providers
Scroll down to "Assessor"

Assessor Workflow Overview

1. Switch over to **County of Santa Barbara Community Services**
2. Enroll client/household in **CES Coordinated Entry Shared**
3. Enter **Current Living Situation**
4. Enter **Crisis Needs Assessment**
5. Enter **VI-SPDAT**. refer client to **Housing Queue**
6. Update **Current Living Situation** every 90 days
7. Exit client/household

Document Ready!!

Remember that a client must be document ready to receive a referral. Work with the client to collect necessary documents listed on the Client Profile Document Ready Section

NEW!! There is now a "Document Ready Completion Date," make sure to enter the date you have completed collecting and uploading required client documentation

Assessor Workflow

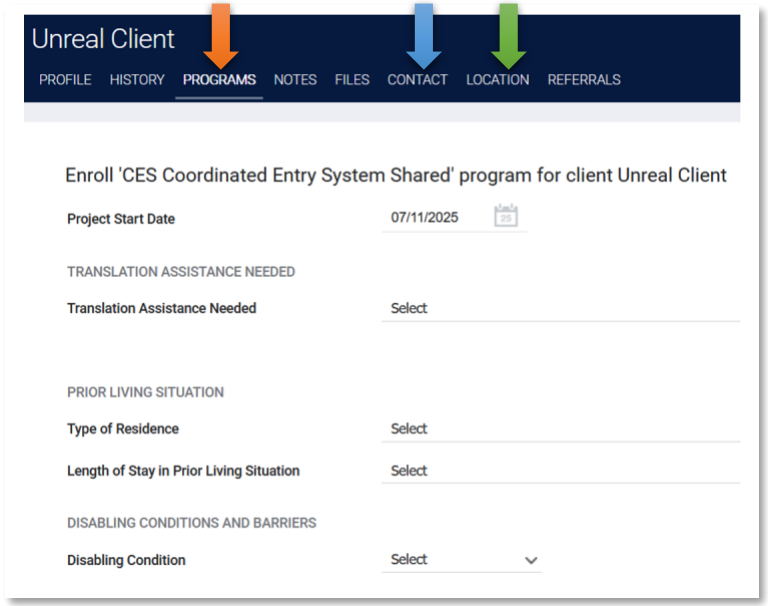
Additional Resources including workflow guides on how to Create clients and enrollments are available on the **HMIS Support Website**.

Step 1: Begin by searching for the participant:

- **Select the participant** then **enroll** the participant in one of your agency's programs if not already enrolled, then switch over to the **County of Santa Barbara Community Services** agency
    - **Participant in a household?** Verify all household members are already in HMIS and a part of their household. **Enroll** the household in one of your agency's programs if not already enrolled, then switch over to the **County of Santa Barbara Community Services Agency**
- **Participant not in HMIS?**
    - **Create the participant (and household members if needed) then enroll them in your agency's program, then switch into the County of Santa Barbara Community Services agency**

Step 2: After switching over to **County of Santa Barbara Community Services:**
Update Participant Contact and Location

- Click **Contact** (**blue arrow**). If there is phone &/or email, or information is outdated, add contact information
- Click **Location** (**green arrow**). Add Location if there is no location information, or if the information is outdated



Enroll the participant (or household) in the CES Coordinated Entry System Shared program.

- Click **Programs** (**orange arrow**)
- Click **CES Coordinated Entry Shared**
- If there are household members: check the toggle next to their name
- Click **Enroll**

The CES Enrollment page displays:

- Review enrollment data, update and enter any missing information
- Click **Save & Close** (if participant is single). **Save & Next** will display if there are household members

NOTE: NEVER Delete a CES Enrollment, if you think a CES enrolment needs to be deleted email hmis@countyofsb.org and let us know why you think an enrollment needs to be deleted. Enrollments are linked to referrals and deleting one can result in having the client drop off the CES list

Assessor Workflow

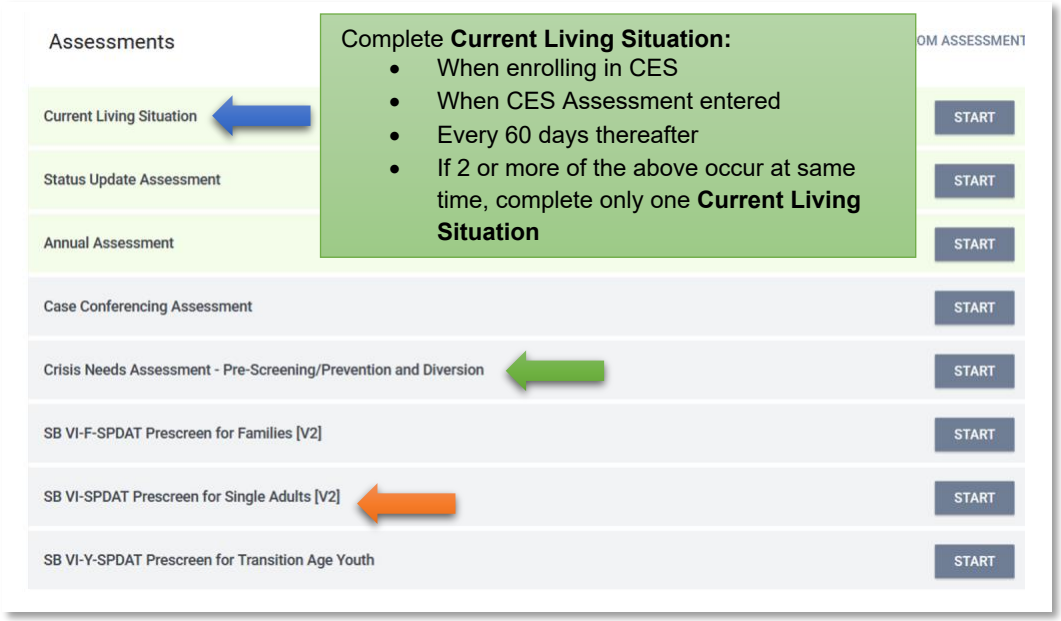
Step 3: Complete Assessments

Current Living Situation (blue arrow)

- Click **Start**
- Enter data in **Current Living Situation** & **Location Details**
- Entering data in **Living Situation Verified By** is optional
- Click **Save & Close**

Crisis Needs Assessment (Pre-Screening Questions) (green arrow)

- Click **Start**
- Enter data
- **<u>Do not make this assessment Private (make sure the dot is white, not blue)</u>**
- Click **Save & Close**



Select the appropriate Housing Needs Assessment (VI-SPDAT) to complete. In this example, the participant is single, so **SB VI-SPDAT Prescreen to Single Adults [V2]** would be selected (orange arrow). Click **Start** to access **SB VI-SPDAT Prescreen for Single Adults**.

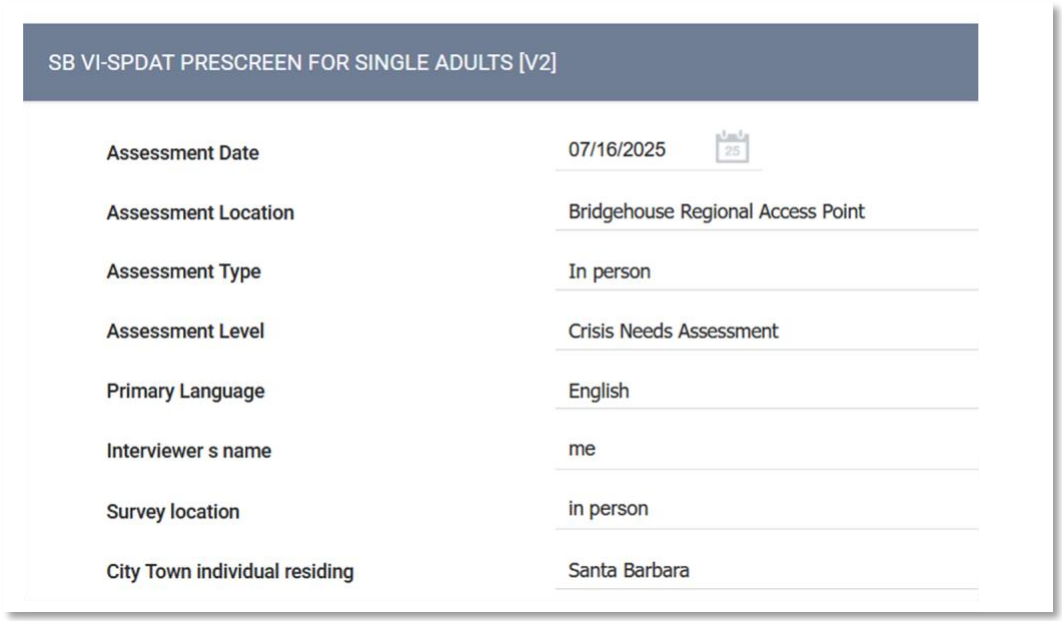
- **SB VI-F-SPDAT Prescreen for Families [V2]** if participant is in a household with minor children
- **SB VI-Y-SPDAT Prescreen for Transition Age Youth** is for youth aged 18-24 and for unaccompanied minors

Assessor Workflow

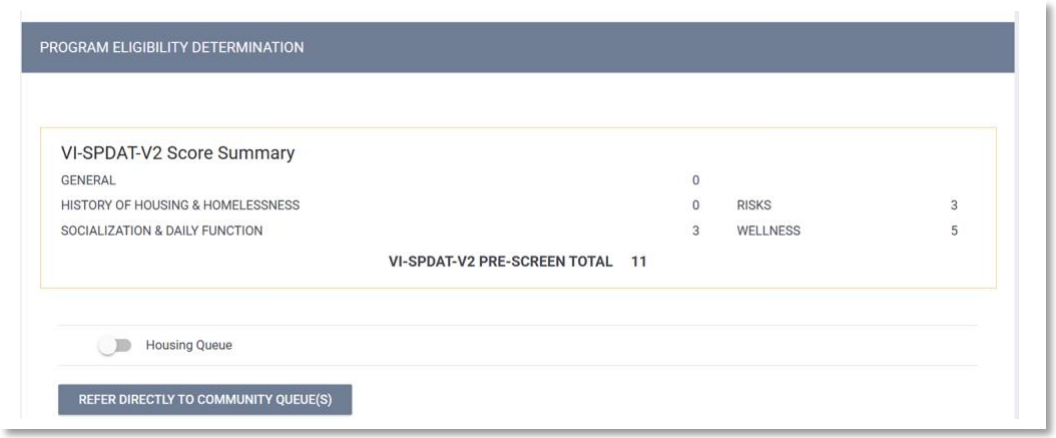
Step 3: Complete SB VI SPDAT

After selecting a **VI-SPDAT** and clicking Start, the **VI-SPDAT** selected will display

- Enter data for each question
- Click **Save** when done



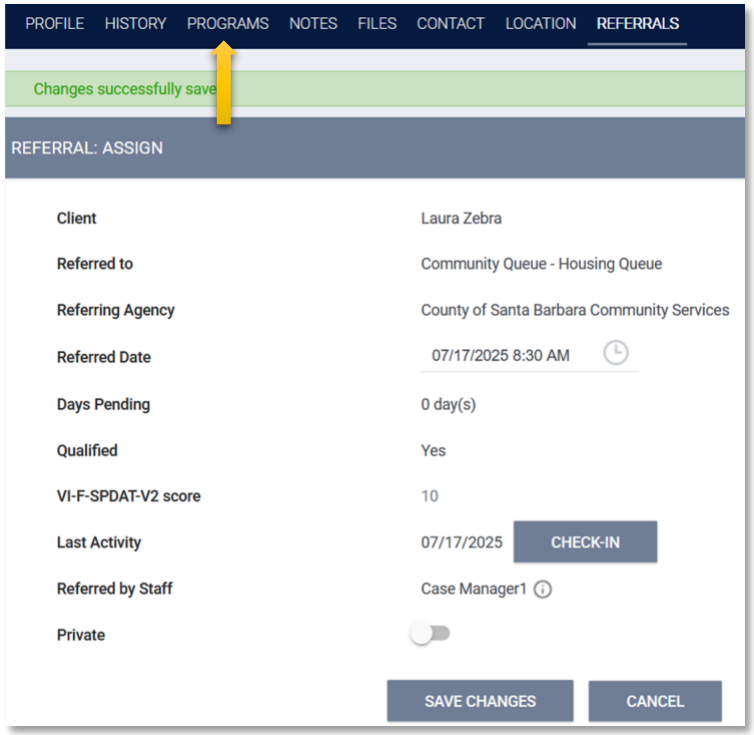
- The page will refresh to display **Program Eligibility Determination**
- After completing the Housing Needs Assessment, select **Housing Queue** (blue arrow)
- Click **Refer Directly to the Housing Queue**

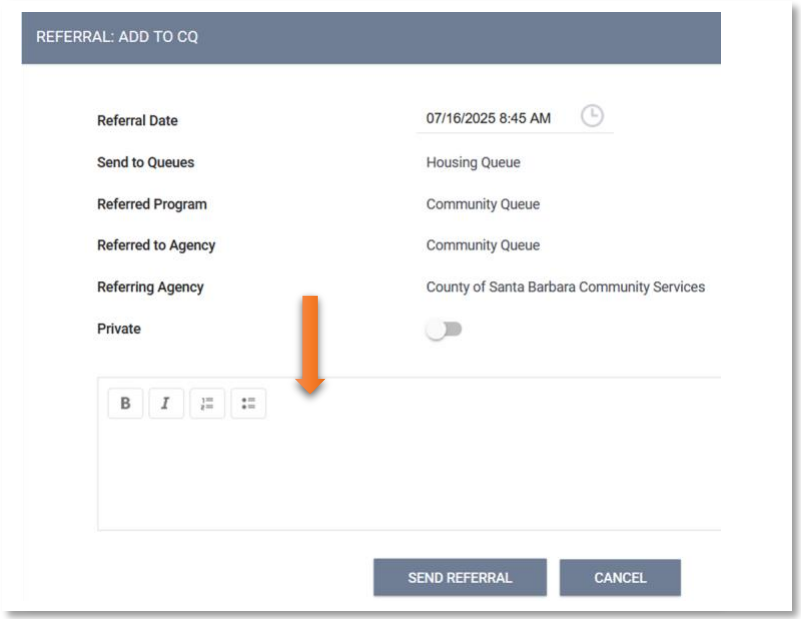


Assessor Workflow

After clicking **Refer Directly to Community Queue**

- **<u>Do not make this Referral Private (make sure the dot is white, not blue)</u>**
- **Optional:** enter a note in the note box (orange arrow)
- Click **Send Referral**





What happens when I click Send Referral?
The page will refresh and **Referral: Assign** will display. The participant is
placed on the Housing Queue so that **the Matchmaker** can match the participant once a suitable housing unit is available.

What do I do next?
There is nothing more you need to do on this page. To return to their CES enrollment, click **Programs** (yellow arrow)

Assessor Workflow: Exits

Exit: Refers to exiting the participant from the **CES Coordinated Entry Shared** program when they no longer need a referral..

A participant should be **exited** from the **CES Coordinated Entry Shared** program if they obtained permanent housing, left the CoC, deceased, or is no longer in need of services.

Need a refresher on exiting a client? Access the HMIS Workflow Manual: Updating & Exiting. Click link to access this manual: **Updating Clients in the HMIS**

Exit the participant following the same workflow as exiting the participant from one of your agency's programs. If your client receives a referral for one of your programs you must first enroll them in that program before exiting them from the CES program.

Automatic Exits happen when:

- No **Current Living Situation** entered in the last 60 days.
- A **housing move-in date** is entered in any PH program.
- Participant is exited from another program to a destination of "Permanent Housing" or "deceased."

When a Participant is Auto Exited from the CES Coordinated Entry System Shared Program.

- **Provider Lost Contact:**
  - Complete a new CES Coordinated Entry System Shared Enrollment; The start date should match the date contact was reestablished with the client
  - (If applicable) Complete a new Crisis/Housing Needs Assessments (VISPDAT);
    - If no new assessment is needed, you can link to the most recent assessment by clicking "Link from Assessments" on the Assessments tab
  - Add to the Housing Queue

- **Active/Open Enrollments But Provider Failed to Log Activity in the CES Coordinated Entry System Shared Program:**
  - Re-Open CES Coordinated Entry System Shared Enrollment:
  - To Re-Open an Auto Exit:
    - EDA County of Santa Barbara Community Services (HAP)
    - Click the pencil next to CES Coordinated Entry System Shared enrollment
    - Click "Exit" at the top left corner
    - Scroll to bottom of screen and click "Reopen Participant Program"
    - You will get a pop-up screen- Toggle "Clear All Exit Data" and click "Save"
    - You will get another pop-up screen asking you to confirm- click "OK"
    - **ADD a current Living Situation otherwise the client will be auto-exited again.**

Assessor Workflow: Removals

Removal: Refers to how participants can be removed from the **Housing Queue**. Removals are either manually or automatically entered. **Matchmakers** are responsible for manually entering a Removal.

How To Keep Active on the Community Queue (Housing Queue)/Enrolled in CES Coordinated Entry System Shared Program

- Update Current Living Situation after contact or at least every 60 days
  - Contact is defined as interaction between a worker and a participant designed to engage the participant;
- Add or edit location on the “Location” tab;
- Add or edit contact on the “Contact” tab;
- Add Services under the CES Enrollment

Assessor Reports

To run these reports: **Switch over to County of Santa Barbara Community Services.** Both reports are located in the Assessment Based Reports located in the Report Library.

[GNRL-404] CE Assessment Details Report
This report includes all assessments (not just the VI-SPDAT) designated for coordinated entry.

- **Who can run this report?** All users

Report Prompts:

- **Assessment(s):** Choose All, or select a single Assessment
  - Want to select 2 or more Assessments? Use the Ctrl (or Command) key to select two or more assessments
- **User Criteria:** select **Not Based on Assessing User** or **Based on Assessing User**
  - If select **Not Based on Assessing User**, the next step is to enter date range
  - If select **Based on Assessing User**: select All or use Ctrl (or Command) key to select two or more users
- **Report Date Range:** enter a start date and end date
- **Report Output Format:** select appropriate format
- **Submit:** Click Submit button

[GNRL-405] CE Assessing Staff Report
The CE Assessing Staff Report details assessments created during the reporting period by the assessing staff person.

- **Who can run report?** All users. Restrictions are in place for which agencies can be accessed based on the rights of the user.

Report Prompts:

- **Assessment(s):** Select All, or select a single Assessment
  - Want to select 2 or more Assessments? Use the Ctrl (or Command) key to select two or more assessments
- **Assessing Users:** Select All or select a single user
  - Want to select 2 or more users? Use the Ctrl (or Command) key to select two or more users
- **Report Date Range:** enter a start date and end date
- **Report Output Format:** select appropriate format
- **Submit:** Click Submit button

Provider

What is a Coordinated Entry (CE) Provider?

- A CES Provider is an agency or organization that manages the process of connecting individuals and families experiencing homelessness with available housing and services
- Providers include shelters, housing programs, and outreach teams
- Providers post openings which then allows Matchmakers to assign openings to eligible individuals and families.

Training resources for Providers: https://www.countyofsb.org/3377/Training-For-Providers
Scroll down to “Provider”

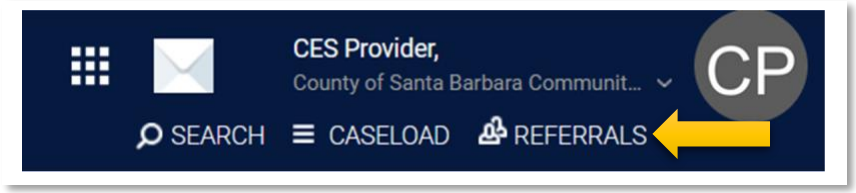
Provider Workflow Overview

1. Switch over to **County of Santa Barbara Community Services**
2. Post program opening so Matchmaker knows what is available
3. Referral: You contact client after Matchmaker matches a client to opening
4. Pending In-Process/Process Referral: update status from Pending to Pending In-Process
5. Program Enrollment/Completing Referral: Complete the enrollment if you accept the referral
6. Exit client

Provider Workflow

Access HMIS, then switch over to the **Your Agency** if necessary. Once you switch over, **Referrals** (yellow arrow) displays immediately below your name.

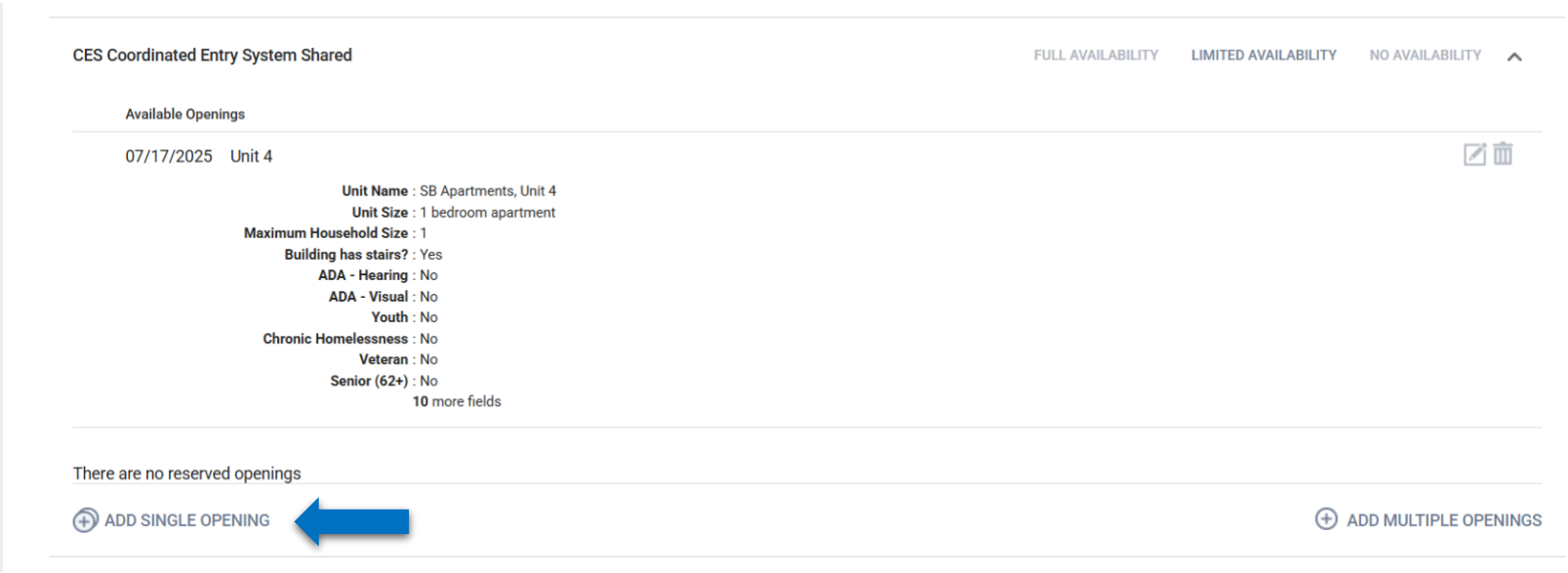
Referrals displays only on the Search page. Once you leave the Search page, Referrals will no longer display.



To add a program opening (e.g., a housing unit):

- Click **Referrals** to display the Referrals page
- Click **Availability** (green arrow)
- Click **Housing Queue** (orange arrow)
- Click **Limited Availability** (black arrow)

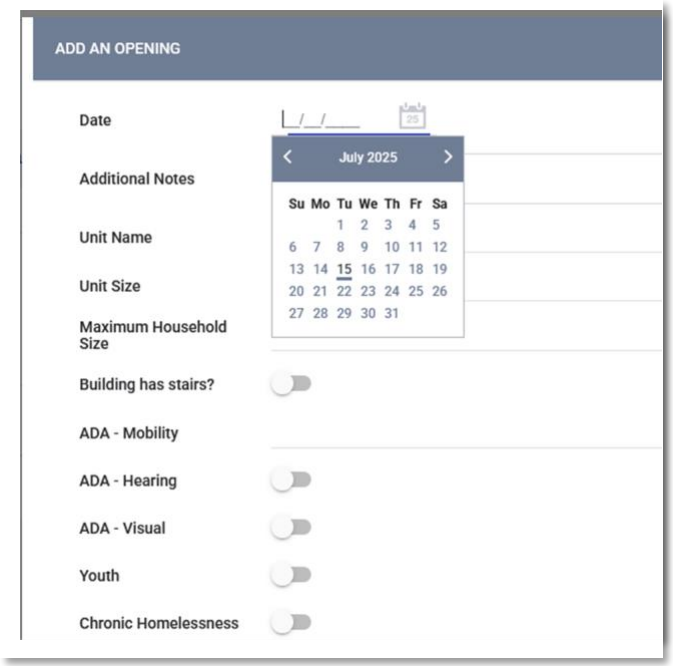
- Select **Add Single Opening** (Blue Arrow)



Provider Workflow

Click **Limited Availability**, then **Add Single Opening** to display the **Add an Opening** window (screenshot of partial contents of **Add an Opening** displayed below).

- **Date**: Select date
- **Additional Notes**: Enter the unit name. if there's a participant associated with this opening add their Unique ID here. If regionally specific, add North/Mid/South (This information is what the Matchmaker sees.)
- **Unit Name**: Enter the same thing as in additional notes
- **Unit Size**: Enter the number of bedrooms or beds.
- **Maximum Household Size**: Enter number of persons this unit can house (enter 99 if not a set size)
- Except for **ADA-Mobility** (enter Yes or No), all other data fields are toggles. Example: click on the white circle to turn it blue for **Chronic Homelessness** if this unit is reserved for participantswho are chronically homeless
- Make sure to select **Mid County**, **North County**, or **South County**
- Click **Save Changes** when done



Provider Workflow: Updating a Referral

After an opening has been posted, the Matchmaker will review and will then assign that opening to a participant.

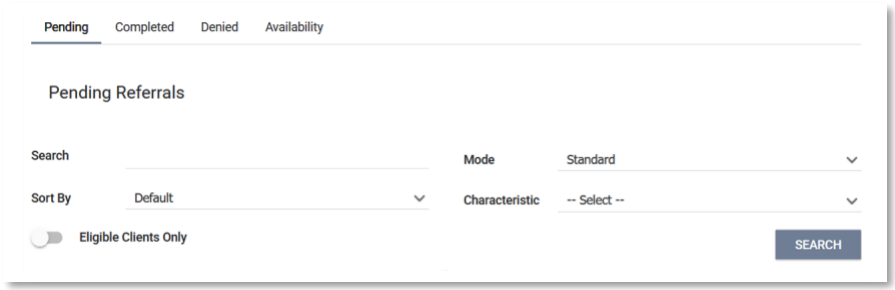
How will a Provider know they have a referral to consider?
Designated staff will receive a notification from a Matchmaker. The notification is sent to the staff's email address and their Clarity inbox.

The notification will include a link to the referral page. When the Matchmaker sends a referral, the status of that referral is **Pending**. The Provider is then responsible to update the status of the referral. Key update statuses:

- **Pending In-Process**: Acknowledges receipt of the referral and will contact the participant
- **Accepted**: Participant is approved and moving into unit
- **Denied**: Participant is not approved for the unit, or the participant declined the resource
- **Expired**: If the referral is not addressed within 15 days the status will automatically update to Expired and the participant returned to the Community Queue

Updating a Referral sent to you
You can access the referral from the link provided in the notification, **OR** you can do the following:

- Access HMIS, then switch to **your Agency** if necessary
- Click **Referrals** (top right of page)
- Page will refresh to show the **Referrals** page
- Any Pending referrals display (i.e., any referrals sent to your Provider by the Matchmaker)



Provider Reports

To run these reports: **Switch over to Your Agency.** Both reports are located in the Assessment Based Reports located in the Report Library.

[GNRL-106] Program Roster (located in the **Program-Based Reports** folder)
This report lists program stay information for participants in the program

- **Who can run this report?** All users

Report Prompts:

- **Programs**: select **Projects you want to report on**
- **Status**: select best match
    - **Active within Report Date Range**: lists participants enrolled within the date range, participants exited within the date range, and participants enrolled before the report date range and exited after the report date range or still active
    - **Enrolled within Report Date Range**: list participants enrolled at any point within the date range
    - **Exited within Report Date Range**: list participants with a program exit at any point within date range
- **HoH Only?**: Select **No** to include all participants. Select **Yes** to include only participants who are the head of household
- **Report Date Range**: enter a start date and end date
- **Report Output Format**: select appropriate format
- **Submit**: Click **Submit** button

[GNRL-405] CE Assessing Staff Report (located in **Community & Referrals Report** folder)
Includes referrals made to the agency running the report. Provides aggregate counts of referrals by status

- **Who can run report?** All users. Restrictions in place for which agencies can be accessed based on the rights of the user.

Report Prompts:

- **Report Date Range**: enter start date and end date

- **Report Output Format**: select appropriate format
- **Submit**: Click **Submit** button

Matchmaker

What is a Coordinated Entry Matchmaker?

- A Matchmaker Manages referrals for participants the next in line for a particular resource based on eligibility criteria and community specific prioritization
- Once a participant is identified, the Matchmaker reassigns that participant from the Community Queue to an agency's program
- This process involves assessing needs, identifying suitable available housing, and facilitating the referral of participants to available housing opportunities

Training resources for Matchmakers: https://www.countyofsb.org/3377/Training-For-Providers
Scroll down to "Matchmaker"

Matchmaker Workflow Overview

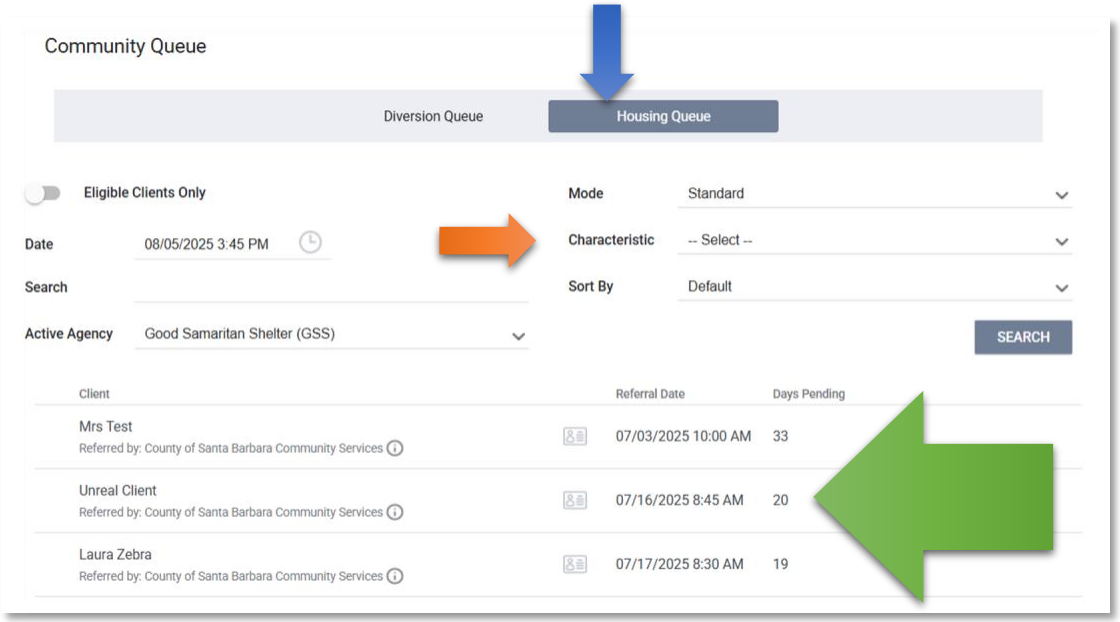
1. A Housing Provider posts an opening. You then receive an email notification of the posting.
2. Determine if there is an eligible client to match to the opening.
3. If there is an eligible client, refer that client to the Housing Provider.

Matchmaker Workflow: How to Make a Referral

As a Matchmaker: You will receive an email notification that a Housing Provider has posted an opening. Your role is to determine if there is an eligible participant for that opening. If there is an eligible participant, you then refer that participant to the Provider.

Referral are sent from the **Community Queue**. To access the **Community Queue**:

- Wwitch over to the **County of Santa Barbara Community Services** agency Access HMIS as a Matchmaker
- Click **Referrals** (top right of page)
- Click **Community Queue** tab, then click **Housing Queue** (blue arrow)



In this example, there are 3 participants on the **Housing Queue** (green arrow)

Filters (orange arrow)
Filters allow you to narrow down the list of participants who are eligible for an opening.

- **Mode:** Select an assessment
- **Characteristic:** Sort by region, gender, (62+), or veteran
- **Sort By:** Click to change to **Participant Name**, **Date of Referral**, or **Referring Agency**

Search: Enter participant's name or Unique ID to find a specific participant

Active Agency: Select the agency with an opening to which you will refer a participant

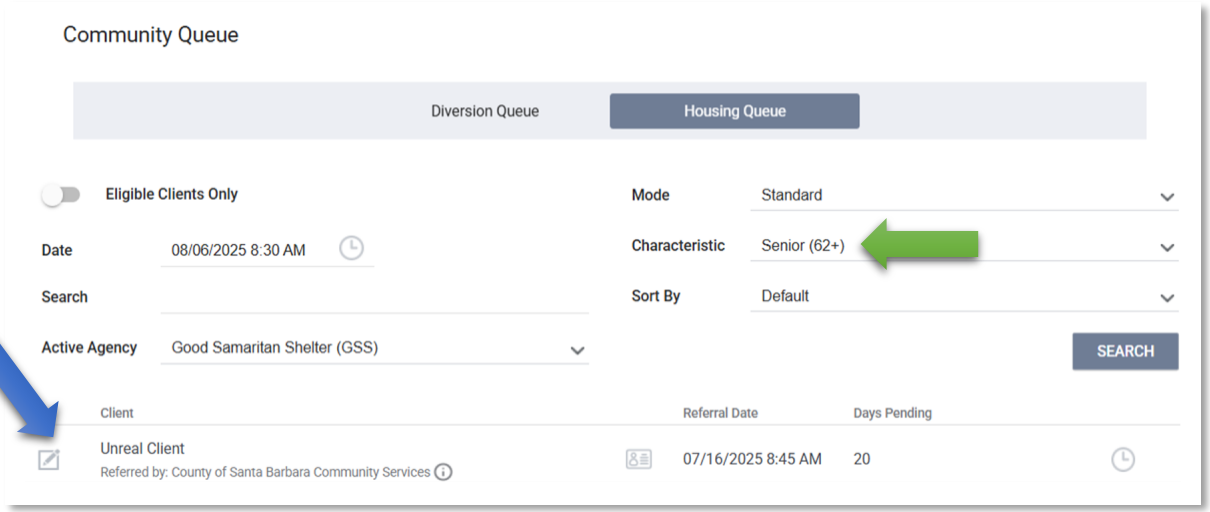
Click **Search**

Matchmaker Workflow: How to Make a Referral

In this example: An email notification was received for an opening for a participant who is 62+. You then accessed the **Housing Queue** and searched for participants 62+ (green arrow)

After clicking **Search**, one eligible participant displays. Scroll over the name of the participant to reveal the **pencil icon** (blue arrow)

Click the **pencil icon**

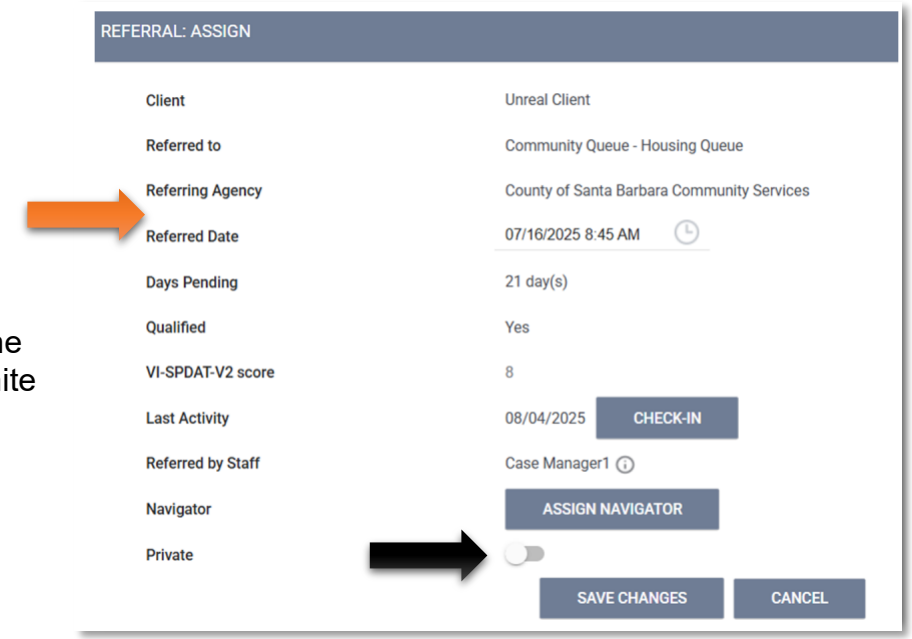


The **Referral: Assign** page will display

This first section details information about the participant. For example, the name of the **Referring Agency** and the **Referred Date** (orange arrow)

Note: **<u>Do not</u>** make this section **Private** (black arrow). The dot needs to be white. Making this private (turning the white dot to a blue dot) means that not everyone who should have access to this data will have access to it

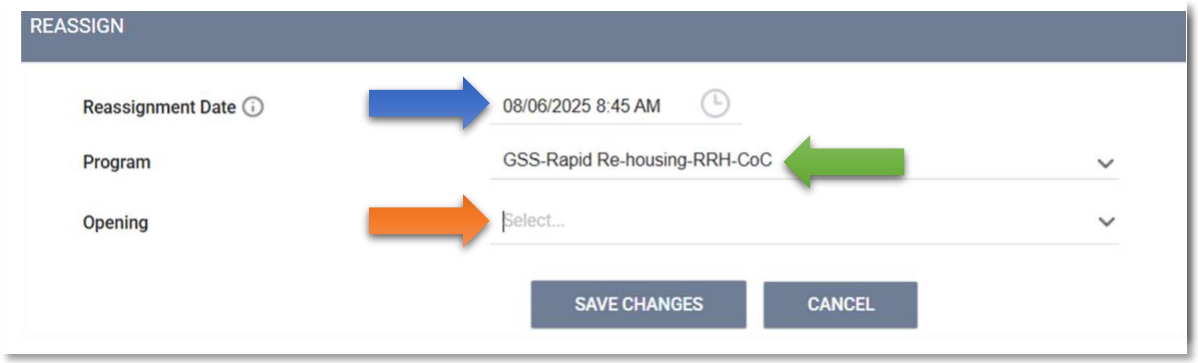
Scroll down to the next section: **Reassign**



Matchmaker Workflow: How to Make a Referral

Scroll down until the **Reassign** section displays:

- **Reassignment Date**: defaults to current date (blue arrow). Change if necessary
- **Program**: select program from drop-down menu (green arrow)
- The **Opening data** field displays (orange arrow)
- Click **Select…**, then click on the name of the unit
- Click **Save Changes**

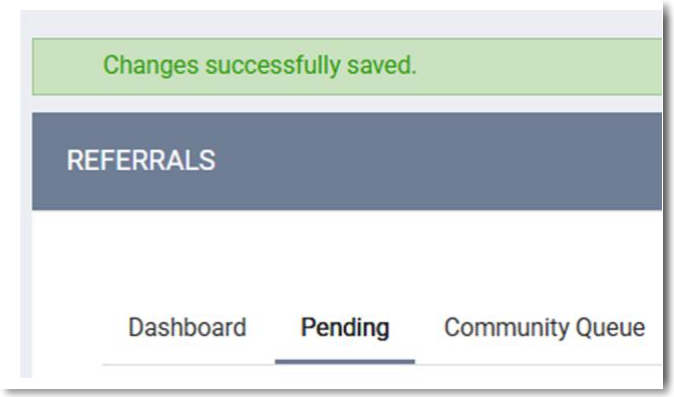


A Program was selected, but the Opening did not display. If a Program is selected and the Opening data field does not display, that means there is no available unit entered in HMIS for Program.

The page will refresh after **clicking Save Changes.** You will be returned to the **Pending** tab on the **Referrals** page

Changes successfully saved. will be highlighted in green

Once the Matchmaker has made the referral: the Housing Provider takes over.



Requirements for Coordinated Entry System Staff:

- Work at an Agency Covered by the Homeless Management Information System (HMIS) Memorandum of Understanding (MOU) and the Coordinated Entry System (CES) MOU;
- Complete the Introduction to the Coordinated Entry System (CES) Training;
- Complete the Clarity Assessor Training and review PowerPoint and Workflow Aid:
  - Assessor Training -YouTube
  - Assessor Training PowerPoint
  - Assessor Workflow Aid
- Complete the VISPDAT Video prior to administering the VISPDAT on https://youtu.be/z_pHYPTw0Zw
- Complete Trauma Informed Care Training prior to administering the VISPDAT;
- Complete other CoC required Trainings (Survivor, Fair Housing, etc)
- Complete HMIS Privacy and Security Training in the last 12 months (New or Advanced End User Training) (at https://www.countyofsb.org/3377/Training-For-Providers)
- Signed HMIS End User Agreement on file;
- Signed 2026 Confidentiality Agreement on file;
- Agree to sign-in at Case Conferences (name accurately displayed in Teams meetings);
- Agree not to use AI Note Taking Apps at Case Conferences;
- Agree to treat other member agencies and their staff with respect, fairness, and good faith