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LEAD AGENCY  
Community Development Commission  
County of Sonoma  
1440 Guerneville Road  
Santa Rosa, CA 95403  
  
CONTACT  
Michael Gause  
(707)565-1977  
Michael.Gause@sonoma-county.org

## Coordinated Entry System - 50/50 Rule Revision

(As Amended and Approved at February 27, 2020 Leadership Council Meeting)

Emergency shelters are required to fill 50% of shelter openings directly through Coordinated Entry referrals. These placements are prioritized for those that are the most vulnerable within the system and awaiting PSH placement. Due to the lack of permanent supportive housing available, clients may exit the emergency shelter and be referred directly back to the project if they remain the highest participant prioritized for placement.

The remaining 50% will be managed through an internal process with the agency (e.g. first come first serve, emergency responders, encampment clearings, etc.).

This new policy pertains to the following Emergency Shelters:

1. COTS, Mary Isaak Center
2. Catholic Charities, Samuel Jones Hall
3. Community Action Partnership, Sloan House
4. Social Advocates for Youth, Dream Center

Emergency shelters are responsible for balancing the referrals equitably between the following referral types:

1. Male Bottom Bunk
2. Male Top Bunk
3. Female Bottom Bunk
4. Female Top Bunk

The Community Development Commission's HMIS Coordinator runs quarterly reports to determine if the agency is balancing out referrals equitably. During the initial four months of implementation, the HMIS Coordinator will run monthly reports, and the CDC will notify the agency if they need to improve their process for balancing out referrals (e.g., the report confirms the agency has only taken 30% of referrals from CES).

Emergency shelter beds may be reserved at any point during the event of an emergency disaster, encampment clearing or an encampment action as directed by a quorum of the Sonoma County Community Development Commission's (Home Sonoma County Lead Agency) Executive Director, the Leadership Council's Chair and Vice-Chair, and the Technical Advisory Committee's Chair and Vice-Chair. This includes the shelters listed above as well as Catholic Charities Family Support Center. Shelter placements during the time of emergency will not be held accountable to the 50/50 referral ratio.