

File No. 140353

Committee Item No. 5

Board Item No. \_\_\_\_\_

## COMMITTEE/BOARD OF SUPERVISORS

### AGENDA PACKET CONTENTS LIST

Committee: Rules Committee

Date March 10, 2016

Board of Supervisors Meeting

Date \_\_\_\_\_

#### Cmte Board

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| <input type="checkbox"/>            | <input type="checkbox"/> | Ordinance                                    |
| <input type="checkbox"/>            | <input type="checkbox"/> | Legislative Digest                           |
| <input type="checkbox"/>            | <input type="checkbox"/> | Budget and Legislative Analyst Report        |
| <input type="checkbox"/>            | <input type="checkbox"/> | Legislative Analyst Report                   |
| <input type="checkbox"/>            | <input type="checkbox"/> | Youth Commission Report                      |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | Introduction Form (for hearings)             |
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| <input type="checkbox"/>            | <input type="checkbox"/> | Grant Information Form                       |
| <input type="checkbox"/>            | <input type="checkbox"/> | Grant Budget                                 |
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| <input type="checkbox"/>            | <input type="checkbox"/> | Public Correspondence                        |

#### OTHER (Use back side if additional space is needed)

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| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <u>Shelter Monitoring Committee Q1 Report</u>            |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <u>Shelter Monitoring Committee Leg. Recommendations</u> |
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Completed by: Derek Evans Date March 7, 2016

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The complete document can be found in the file.



# *Shelter Monitoring Committee*

## **First Quarter Report, July through September 2015**

### *Mission Statement of the Shelter Monitoring Committee*

*The Shelter Monitoring Committee is an independent vehicle charged with documenting the conditions of shelters and resource centers to improve the health, safety, and treatment of residents, clients, staff, and the homeless community. The Committee's mission is to undertake this work recognizing individual human rights and promoting a universal standard of care for shelters and resource centers in the City and County of San Francisco*

### *Executive Summary*

The Shelter Monitoring Committee (The Committee) is responsible for documenting the conditions of shelters and resource centers to improve the health, safety, and treatment of clients, staff, and the homeless community. The Committee is responsible for processing client complaints regarding alleged violations of the Standards of Care as well as conducting site visits to identify unreported violations (violations are logged as Standard of Care complaints). The Committee received 43 Standard of Care complaints during the reporting period (From July 1 to September 30, 2015). The most frequent complaints received by the Shelter Monitoring Committee during the reporting period are staff related issues (81%), followed by facility and access issues (9%), health and hygiene (8.1%) and ADA (1.8%). Of the 43 complaints submitted by clients this quarter, 18 (41.9%) were closed due to a lack of response from clients, 9 complaints (20.9%) were closed as a result of clients being satisfied with the site response, 10 (23.3%) are awaiting a client's response and 1 (2.3%) complaint remains open due to a lack of response from the site. The Committee also received 5 responses (11.6%) that were not satisfactory for the client and required an investigation. There were three complaints that were investigated during the reporting period, two complaints from this quarter and one complaint from the Q4 of the 14-15 FY. There are still three complaints from this quarter with investigations pending.

The Committee was able to complete 20 of 20 assigned visits (100%) during the reporting period, meeting the amount mandated by the City and County of San Francisco. During the reporting period, the Committee began inspecting the Hamilton Shelter site as two separate sites instead of one combined site (Hamilton Family Shelter and Hamilton Emergency Shelter). The Committee also began visiting the newly opened Jazzie's Place LGBTQ shelter, bringing the total number of shelters the Committee must inspect every quarter to 20 (compared to 18 sites for the 14-15 FY).

### ***Consistent Standard of Care Violations***

The Committee works to identify sites that repeatedly violate specific Standards of Care during the reporting period. For example, there are some emergency shelters that provide two blankets instead of one blanket and a pair of sheets; this is an ongoing issue due to problems related to the laundering of linens.

### ***Policy Recommendations***

The Shelter Monitoring Committee does not have any policy recommendations from this reporting period.

## **Site Visits**

The inspection teams conducted 20 of the 20 assigned visits (100%) in the first quarter, from July 1 to September 30, 2015. During the reporting period, the Committee began inspecting the Hamilton Shelter site as two separate sites instead of one combined site (Hamilton Family Shelter and Hamilton Emergency Shelter). The Committee also began visiting the newly opened Jazzie's Place LGBT shelter, bringing the total number of shelters the Committee must inspect every quarter to 20. The Committee is mandated by legislation to conduct a minimum of four site inspections per site annually, visiting each of the sites once per quarter. The only site that was not visited during the 1st quarter was the Interfaith Winter Shelter, which was not operating during the reporting period.

### ***A Woman's Place Shelter***

*Site Visit infractions submitted to site: 7/30/15*

*Site responded: 7/30/15*

The Committee conducted one inspection during the reporting period and noted the following Standards of Care infractions:

- No paper towels or toilet paper in basement floor bathroom – **Resolved**
- No signage on laundry services, shower times, case management availability or accessibility – **Resolved**
- No AED – **Resolved**
- Identification badges not worn by all staff – **Resolved**
- No signage posted regarding where to access TTY – **Resolved**
- No Language Link, professional translation service or alternative translation procedures in place – **Ongoing due to lack of funding**
- No MUNI tokens – **Resolved**
- Empty hand sanitizer dispensers – **Resolved**

### ***A Woman's Place Drop In***

*Site Visit infractions submitted to site: 8/3/15*

*Site responded: 8/10/15*

The Committee conducted one inspection during the reporting period and noted the following Standards of Care infractions:

- No incontinence supplies – **Resolved**
- No bath towels available - **Resolved**
- No on duty ADA liaison - **Resolved**

- No reasonable accommodation forms in English and Spanish - **Resolved**
- No signage regarding where to access TTY - **Resolved**
- No bilingual staff on duty - **Resolved**
- Emergency drills no practiced on a monthly basis - **Resolved**
- No tokens – **Resolved**

***Bethel AME***

*Site Visit infractions submitted to site: 9/2/15*

*Site responded: 10/28/15 (extension granted)*

The Committee conducted one inspection during the reporting period and noted the following Standards of Care infractions:

- No sheets provided to clients – **Ongoing due to issues related to laundering sheets**
- Information about meal and check in times not posted in Spanish – **Resolved**
- No TTY or signage on where to access TTY - **Resolved**

***Compass Family Shelter***

The Committee completed one inspections of the site during the reporting period and did not note a single Standard of Care infraction.

***Dolores Street Community Services-Santa Ana***

*Site Visit infractions submitted to site: 8/27/15*

*Site responded: 9/2/15*

The Committee conducted one inspection during the reporting period and noted the following Standards of Care infractions:

- No soap or hand sanitizer in the restroom – **Resolved**

***Dolores Street Community Services-Santa Marta/Santa Maria***

The Committee completed one inspection of the site during the reporting period and did not note a single Standard of Care infraction.

***First Friendship Emergency Family Shelter***

*Site Visit infractions submitted to site: 8/28/15*

*Site responded: 11/3/15 (extension granted)*

The Committee completed one inspection of the site during the reporting period and noted the following Standards of Care infractions:

- ID badges were not worn by all staff - **Resolved**
- No reasonable accommodation forms - **Resolved**
- No MUNI tokens available (site was out of tokens at the time of the visit) - **Resolved**
- No Cultural Competency training for staff (or staff was not aware of the date of the last Cultural Competency training) - **Resolved**
- No TTY or signage on where clients could access TTY - **Resolved**
- No Language Link or other professional translation services – **Resolved (Language Board)**

### ***Hamilton Family Residences***

The Committee conducted one visit to this site during the reporting period and did not note any Standards of Care infractions.

### ***Hamilton Emergency Shelter***

*Site Visit infractions submitted to site:* 9/3/15

*Site responded:* 9/11/15

The Committee conducted one visit to this site during the reporting period and noted the following Standards of Care infractions:

- Men's restroom on the fourth floor needed cleaning – **Resolved**

### ***Hospitality House***

The Committee visited this site once during the reporting period and did not note any Standards of Care infractions.

### ***Interfaith Emergency Winter Shelters***

Please note that the Interfaith system is operated out of different volunteer churches by Episcopal Community Services and is only open from **November to February** of each calendar year. As a result, this site was not inspected during the reporting period.

### ***Jazzie's Place***

Please note that the Jazzie's Place LGBT shelter is a new shelter that just opened during the reporting period. The Committee conducted an initial visit to this site and did not note any Standards of Care infractions.

### ***Lark Inn***

*Site Visit infractions submitted to site:* 7/29/15

*Site responded:* 8/9/15

The Committee conducted one visit to this site during the reporting period and noted the following Standards of Care infractions:

- No soap or hand sanitizer in the Men's restroom - **Resolved**
- Men's shower stalls needed cleaning - **Resolved**

### ***Mission Neighborhood Resource Center***

*Site Visit infractions submitted to site:* 10/5/15 (Site visit conducted on 9/30/15)

*Site responded:* 10/5/15

The Committee conducted one visit to this site during this reporting period and noted the following Standards of Care infractions:

- No Language Link, professional translation service or alternative translation procedures in place – **Ongoing due to lack of funding**

### ***MSC South Drop-In***

*Site Visit infractions submitted to site:* 10/6/15 (Site visit conducted on 9/30/15)

*Site responded:* No response from site, reminder sent out on 10/19/15

The Committee conducted one visit to this site during this reporting period and noted the following Standards of Care infractions:

- No ADA information posted in English and Spanish – **Ongoing due to lack of site response**
- No Emergency Disaster Plan posted – **Ongoing due to lack of site response**

***MSC South Shelter***

The Committee visited this site once during the reporting period and did not note any Standards of Care infractions.

***Next Door***

*Site Visit infractions submitted to site:* 10/6/15 (Site visit conducted on 9/29/15)

*Site responded:* 10/6/15

The Committee conducted one visit to this site during this reporting period and noted the following Standards of Care infractions:

- No dinner menu posted in English - **Resolved**
- “No Smoking” signs not posted in Spanish - **Resolved**

***Providence and Providence Emergency Family Shelter***

The Committee conducted one visit to this site during this reporting period and noted the following Standards of Care infractions:

*Site Visit infractions submitted to site:* 10/21/15 (Site visit conducted on 9/17/15, submission of infractions to the site was delayed due to technical difficulties)

*Site responded:* 10/28/15 (extension granted)

- ID badges not worn by staff – **Resolved**
- No sheets provided to clients – **Ongoing issue related to the laundering of linens**
- Empty hand sanitizer dispensers - **Resolved**
- No de-escalation training or staff was unaware of when the last de-escalation training was held - **Resolved**

***Sanctuary***

*Site Visit infractions submitted to site:* 8/3/15

*Site responded:* 8/10/15

The Committee conducted one visit to this site during this reporting period and noted the following Standards of Care infractions:

- No bilingual English/Spanish speaking staff on duty – **Resolved**

***United Council – Mother Brown’s***

*Site Visit infractions submitted to site:* 10/2/15 (Site visit conducted on 9/30/15)

*Site responded:* 10/22/15

The Committee conducted one visit to this site during this reporting period and noted the following Standards of Care infractions:

- No Spanish reasonable accommodation forms - **Resolved**

***St. Joseph’s Family Shelter***

The site was inspected once during the reporting period and the Committee did not note any Standards of Care infractions.

Table 1: Site Visit Tally for 1<sup>st</sup> QTR for 2015-2016

Shelter and Resource Center	Number of Visits 1st Qtr. 2015-2016 July - September	Total 2015- 2016 FY
A Woman's Place	1	1
AWPDI	1	1
Bethel AME	1	1
Compass	1	1
First Friendship	1	1
Hamilton Emergency Shelter	1	1
Hamilton Family Shelter	1	1
Hospitality House	1	1
Interfaith *seasonal shelter that operates from November through February	0	0
Jazzie's Place	1	1
Lark Inn	1	1
MSC South Drop In	1	1
MSC South Shelter	1	1
MNRC	1	1
Next Door	1	1
Providence	1	1
Sanctuary	1	1
Santa Ana	1	1
Santa Marta/Santa Maria	1	1
St. Joseph's	1	1
United Council	1	1
<b>Total</b>	<b>20</b>	<b>20</b>
<b>Assigned Number of Visits</b>	<b>20</b>	<b>20</b>
<b>Percentage of Compliance</b>	<b>100%</b>	<b>100%</b>

## Standards of Care Complaints

There were 43 Standard of Care complaints filed by clients from July 1 to September 30, 2015. The table below provides a breakdown of the number of complaints per site and the status of the complaints themselves. A complaint can include allegations of non-compliance for one Standard or multiple Standards. Each individual complaint form submitted to the sites averaged allegations of three Standard of Care violations. In addition, each complaint can contain more than one allegation of violations of the Standards of Care. For example, a client alleged the staff did not have their identification (Standard 25), a lack of soap (Standard 3), a lack of paper towels (Standard 3) and lack of a pillow (Standard 12). The Standards of Care complaints fall into four areas of compliance that are depicted below:

There are five status categories for complaints:

**Open** – Indicates that the site has yet to respond to the complaint filed by the client. Of 43 complaints submitted by clients this quarter, 1 of the complaints (2.3%) remain open.

**Closed** - Indicates that the client who initiated the complaint agrees with the site's response. Of 43 complaints submitted by clients this quarter, 9 of the complaints (20.9%) have been closed.

**Not Satisfied** - Indicates that the client who initiated the complaint did not agree with the site's response. Responses that are not satisfactory for the client are investigated by the Committee. The Committee's investigation reports are provided to the client, HSA and shelter management. Of the 43 complaints submitted by clients this quarter, 5 (11.6%) received responses that were not satisfactory for the client that required investigations by the Committee. Additional information on investigations conducted by the Committee can be found in the "Investigations" section of this report.

**Pending** - Indicates that the site has responded to the complaint and that the Committee is waiting for the client to indicate whether or not they agree with the site's response. Of the 43 complaints submitted by clients this quarter, 10 (23.3%) are awaiting a client's response.

**No Contact** - Indicates that the contact information the client provided at the time of the initial complaint is no longer valid or the client did not have contact information when making the initial complaint and has not returned within the 45-day requirement to review the site's response. Of the 43 complaints submitted by clients this quarter, 18 complaints (41.9%) were closed due to a lack of response from clients.



**Shelter Monitoring Committee  
December 16, 2015  
1st Qtr 2015-2016 Report Draft**

Table 2: Standard of Care Complaints Tally Per Site for 1st Quarter 2015-2016

<b>Site</b>	<b># of Complainants</b>	<b># of Complaints filed</b>	<b>Status of Complaints</b>	<b>Investigations</b>
<b>A Woman's Place</b>	1	1	Closed (1)	None
<b>A Woman's Place Drop In</b>	1	2	Open (1) No Contact (1)	None
<b>Bethel AME</b>	2	4	Closed (2) Pending (2)	None
<b>Compass</b>	0	0	N/A	None
<b>First Friendship</b>	3	3	Pending (3)	None
<b>Hamilton Emergency Shelter</b>	0	0	N/A	None
<b>Hamilton Family Shelter</b>	0	0	N/A	None
<b>Hospitality House</b>	0	0	N/A	None
<b>Interfaith</b> *seasonal shelter that operates from November through February	0	0	N/A	None
<b>Jazzie's Place</b>	0	0	N/A	None
<b>Lark Inn</b>	0	0	N/A	None
<b>MSC South Drop In</b>	4	5	No Contact (3) Not Satisfied (2)	2
<b>MSC South Shelter</b>	8	8	Pending (3) No Contact (4) Not satisfied (1)	None
<b>MNRC</b>	0	0	N/A	None
<b>Next Door</b>	7	11	No Contact (3) Closed (6) Not satisfied (2)	1
<b>Providence</b>	2	2	Pending (1) No Contact (1)	None
<b>Sanctuary</b>	6	7	No Contact (6) Pending (1)	None
<b>Santa Ana</b>	0	0	N/A	None
<b>Santa Marta/Santa Maria</b>	0	0	N/A	None
<b>St. Joseph's</b>	0	0	N/A	None
<b>United Council</b>	0	0	N/A	None
<b>Totals</b>	<b>35</b>	<b>43</b>	<b>Closed (9) Pending (10) Open (1) No Contact (18) Not Satisfied (5)</b>	<b>Investigations Completed during Q1 (3)</b>

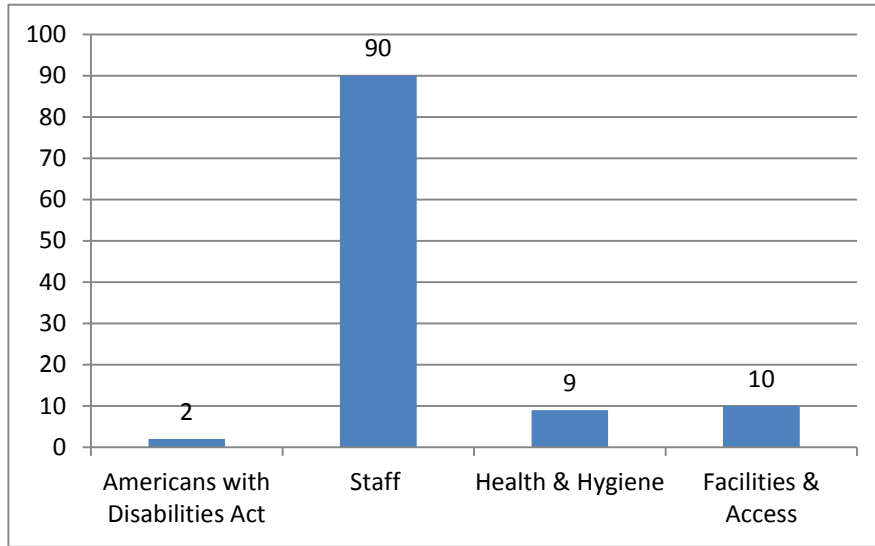


Chart I: Standard of Care Complaint Alleged Violation Breakdown, 1st Quarter, 2015-2016

Chart I, the *Standard of Care Complaint 1<sup>st</sup> Quarter Breakdown*, provides an overview of the type of complaints that were filed with the Committee. This chart does not provide the outcomes of each complaint. Instead, it provides an overview of the types of complaints received in the quarters. At the end of each fiscal year, there is a report that breaks down the types of complaints generated at each site and the outcome of each of that site's specific complaints. The quarterly reports are intended to provide an overview of the type of complaint received. Table II, *Standard of Care Complaints Tally Per Site*, on the preceding page, provides the outcomes of complaints generated by clients and the Committee.

### ***Staff***

The staff category refers to four Standards [1, 2, 25 & 31] that focus on how the client is treated at the site and by staff, including how staff identifies themselves through the use of photo identification or name tags and the amount of training they have received.

### ***Americans with Disabilities Act (ADA)***

The ADA category refers to Standard 8 and the majority of complaints in this category focus on either a lack of or a denial of access through an accommodation request or a facility problem.

### ***Health & Hygiene***

This category refers to 11 Standards focusing on meals, access to toiletries, and stocked first aid kits. The 11 Standards include Standards 3, 4, 5, 6, 7, 9, 10, 11, 13, 19, and 30.

### ***Facility & Access***

Sixteen Standards make up this category. The Standards that make up this area are 12, 14, 15, 16, 17, 18, 20, 21, 22, 23, 24, 26, 27, 28, 29, and 32.

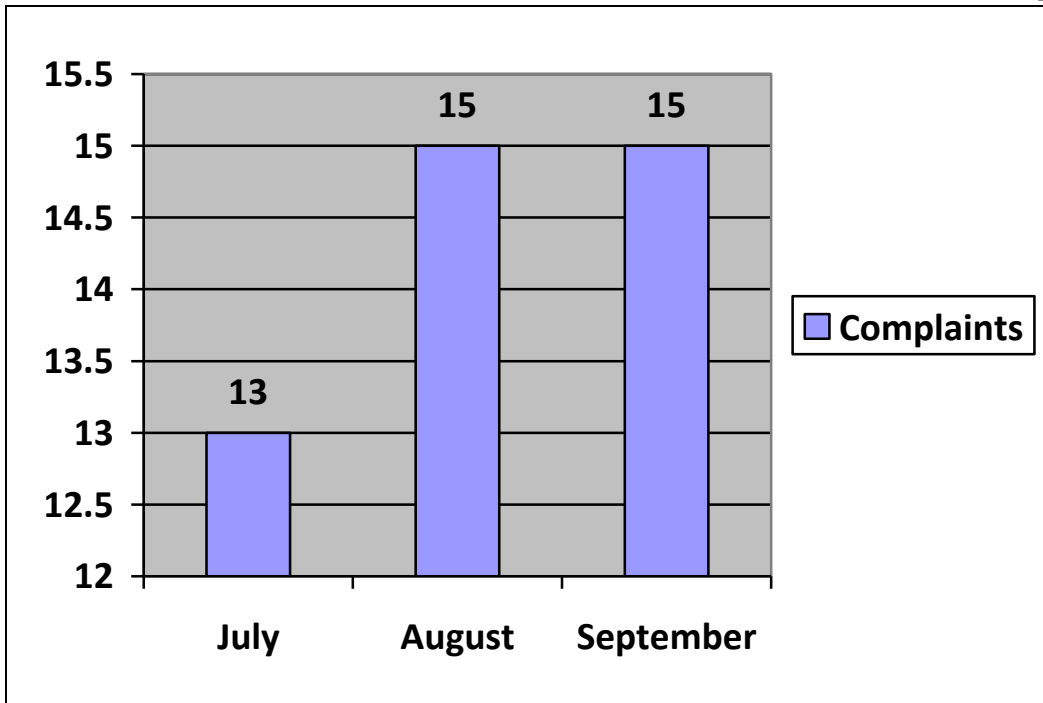


Chart II: Standard of Care Complaint Monthly Breakdown, 1st Quarter, 2015-2016

### *Client Complaints and Allegations by Site*

#### ***A Woman’s Place***

This site received one complaint submitted by a client during the reporting period:

- Client #1:
  - Standard 1: Treat clients equally, with respect and dignity... - 1 allegation
  - Standard 2: Provide shelter services in an environment that is safe and free of physical violence – 1 allegation
  - Standard 3: ...Hire janitorial staff to clean shelters on a daily basis – 1 allegation
  - **Complaint resolved to client’s satisfaction**

#### ***A Woman’s Place Drop-In***

This site received two complaints submitted by one client during the reporting period:

- Client #1, Complaint #1:
  - Standard 1: Treat clients equally, with respect and dignity... - 4 allegations
  - Standard 2: Provide shelter services in an environment that is free and safe of physical violence – 1 allegation
  - **Complaint closed due to No Contact from client**
- Client #1, Complaint #2:
  - Standard 1: Treat clients equally, with respect and dignity... - 1 allegation
  - Standard 2: Provide shelter services in an environment that is free and safe of physical violence – 4 allegations
  - **Complaint open due to lack of site response**

#### ***Bethel AME***

This site received four complaints submitted by two separate clients during the reporting period:

- Client #1, Complaint #1:
  - Standard 1: Treat clients equally, with respect and dignity... - 6 allegations
  - **Complaint resolved to client's satisfaction**
- Client #1, Complaint #2:
  - Standard 1: Treat clients equally, with respect and dignity... - 4 allegations
  - **Complaint is open due to pending client response**
- Client #1, Complaint #3:
  - Standard 7: Supply shelter clients with fresh cold or room temperature drinking water at all times... - 1 allegation
  - Standard 9: Engage a nutritionist who shall develop all meal plans... - 1 allegation
  - **Complaint is resolved to client's satisfaction.**
- Client #2:
  - Standard 1: Treat clients equally, with respect and dignity... - 1 allegation
  - **Complaint is open due to pending client response**

### ***First Friendship***

This site received three complaints submitted by three separate clients during the reporting period:

- Client #1:
  - Standard 1: Treat clients equally, with respect and dignity – 1 allegation
  - Standard 2: Provide shelter services in an environment that is free and safe of physical violence – 1 allegation
  - **Complaint is open due to pending client response**
- Client #2:
  - Standard 3: Provide soap...paper/hand towels,...if hand dryers are currently installed they shall be maintained in proper working condition....hire janitorial staff to clean shelters on a daily basis – 2 allegations
  - Standard 13: Make the shelter facility available to shelter clients for sleeping at least 8 hours per night – 1 allegation
  - **Complaint is open due to pending client response.**
- Client #3:
  - Standard 1: Treat clients equally, with respect and dignity – 8 allegations
  - **Complaint is open due to pending client response**

### ***MSC South Drop-In***

This site received five complaints submitted by four separate clients during the reporting period:

- Client #1:
  - Standard 1: Treat clients equally, with respect and dignity – 2 allegations
  - **Complaint is closed due to No Contact from the client**
- Client #2, Complaint #1:
  - Standard 1: Treat clients equally, with respect and dignity – 1 allegation
  - **Complaint is closed due to No Contact from the client**
- Client #2, Complaint #2:
  - Standard 1: Treat clients equally, with respect and dignity – 2 allegations

- Standard 11: Comply with Article 19F...that prohibits smoking in homeless shelters – 1 allegation
- Standard 15: Provide shelter clients with...secure property storage – 1 allegation
- Standard 19: Provide a minimum of 22 inches between the sides of sleeping units – 1 allegation
- **Complaint is open due to the client's dissatisfaction with the site's response. The complaint will remain open until the Committee completes an investigation into the incident.**
- Client #3:
  - Standard 1: Treat clients equally, with respect and dignity – 2 allegations
  - Standard 2: Provide shelter services in an environment that is free and safe of physical violence – 1 allegation
  - **Complaint is closed after the Committee's investigation determined that the site did violate Standard 1. The site has taken internal steps to discipline staff involved with the incident which cannot be shared with the Committee or members of the public due to labor laws. Additional information about this incident can be found in the "Investigations" portion of this report.**
- Client #4:
  - Standard 1: Treat clients equally, with respect and dignity – 1 allegation
  - **Complaint is closed due to No Contact from the client**

### *MSC South Shelter*

This site received eight complaints submitted by eight separate clients during the reporting period:

- Client #1:
  - Standard 1: Treat clients equally, with respect and dignity – 1 allegation
  - Standard 2: Provide shelter services in an environment that is free and safe of physical violence – 1 allegation
  - Standard 17: Note in writing and post in a common areas...when a maintenance problem will be repaired and note the status of the repairs – 1 allegation
  - **Complaint is closed due to No Contact from the client**
- Client #2:
  - Standard 1: Treat clients equally, with respect and dignity – 1 allegation
  - **Complaint is closed due to No Contact from the client**
- Client #3:
  - Standard 1: Treat clients equally, with respect and dignity – 1 allegation
  - **Complaint is closed due to No Contact from the client**
- Client #4:
  - Standard 1: Treat clients equally, with respect and dignity – 3 allegations
  - **Complaint is closed due to No Contact from the client**
- Client #5:
  - Standard 2: Provide shelter services in an environment that is free and safe of physical violence – 1 allegation
  - **Complaint is open due to pending client response**
- Client #6:
  - Standard 1: Treat clients equally, with respect and dignity – 2 allegations
  - **Complaint is open due to pending client response**

- Client #7:
  - Standard 1: Treat clients equally, with respect and dignity – 1 allegation
  - Standard 2: Provide shelter services in an environment that is free and safe of physical violence – 1 allegation
  - **Complaint is open due to pending client response**
- Client #8:
  - Standard 1: Treat clients equally, with respect and dignity – 2 allegations
  - Standard 2: Provide shelter services in an environment that is free and safe of physical violence – 1 allegation
  - **Complaint is open due to the client's dissatisfaction with the site's response. The complaint will remain open until the Committee completes an investigation into the incident.**

### *Next Door*

This site received eleven complaints submitted by seven separate clients during the reporting period:

- Client #1:
  - Standard 1: Treat clients equally, with respect and dignity – 5 allegations
  - **Complaint is closed due to No Contact from the client**
- Client #2, Complaint #1:
  - Standard 1: Treat clients equally, with respect and dignity – 2 allegations
  - Standard 2: Provide shelter services in an environment that is free and safe of physical violence – 1 allegation
  - **Complaint is closed due to client satisfaction with the site's response**
- Client #2, Complaint #2:
  - Standard 1: Treat clients equally, with respect and dignity – 2 allegations
  - Standard 2: Provide shelter services in an environment that is free and safe of physical violence – 1 allegation
  - **Complaint is closed due to No Contact from the client**
- Client #3, Complaint #1:
  - Standard 1: Treat clients equally, with respect and dignity – 1 allegation
  - Standard 13: Make the shelter facility available...for sleeping at least 8 hours per night – 1 allegation
  - **Complaint is closed due to client satisfaction with the site's response**
- Client #3, Complaint #2:
  - Standard 2: Provide shelter services in an environment that is free and safe of physical violence – 1 allegation
  - **Complaint is open due to the client's dissatisfaction with the site's response. The complaint will remain open until the Committee completes an investigation into the incident.**
- Client #3, Complaint #3:
  - Standard 1: Treat clients equally, with respect and dignity – 2 allegations
  - **Complaint is closed due to client satisfaction with the site's response**
- Client #4, Complaint #1:
  - Standard 2: Provide shelter services in an environment that is free and safe of physical violence – 1 allegation
  - **Complaint is closed due to client satisfaction with the site's response**

- Client #4, Complaint #2:
  - Standard 15: Provide shelter clients with...secure property storage... - 1 allegation
  - **Complaint is closed after the Committee's investigation determined that the site was in compliance with Standard 15. Additional information about this incident can be found in the "Investigations" portion of this report.**
- Client #5:
  - Standard 13: Make the shelter facility available to shelter clients for sleeping at least 8 hours per night – 1 allegation
  - **Complaint is closed due to client satisfaction with the site's response**
- Client #6:
  - Standard 1: Treat clients equally, with respect and dignity – 2 allegations
  - **Complaint is closed due to client satisfaction with the site's response**
- Client #7:
  - Standard 2: Provide shelter services in an environment that is free and safe of physical violence – 1 allegation
  - **Complaint is closed due to No Contact from the client**

### *Providence*

This site received two complaints submitted by two separate clients during the reporting period:

- Client #1:
  - Standard 1: Treat clients equally, with respect and dignity – 3 allegations
  - **Complaint is closed due to No Contact from the client**
- Client #2:
  - Standard 1: Treat clients equally, with respect and dignity – 1 allegation
  - Standard 16: Provide shelter clients with access to electricity for charging cell phones... - 1 allegation
  - **Complaint is open due to pending response from the client.**

### *Sanctuary*

This site received seven complaints submitted by six separate clients during the reporting period:

- Client #1:
  - Standard 1: Treat clients equally, with respect and dignity – 1 allegation
  - **Complaint is closed because the client did not come back to pick up the response and did not provide any contact information (No Contact).**
- Client #2:
  - Standard 1: Treat clients equally, with respect and dignity – 1 allegation
  - Standard 2: Provide shelter services in an environment that is free and safe of physical violence – 1 allegation
  - **Complaint is closed due to No Contact from the client**
- Client #3:
  - Standard 1: Treat clients equally, with respect and dignity – 1 allegation
  - Standard 8: Provide shelter services in compliance with the Americans with Disabilities Act... - 1 allegation
  - Standard 14: Provide daytime access to beds in all 24-hour shelters – 1 allegation
  - Standard 15: Provide shelter clients with...secure property storage – 1 allegation

- Standard 16: Provide shelter clients with access to electricity for charging cell phones... - 1 allegation
- Standard 24: Locate alternate sleeping unit for a client who has been immediately denied services... - 1 allegation
- **Complaint is closed due to No Contact from the client**
- Client #4:
  - Standard 8: Provide shelter services in compliance with the Americans with Disabilities Act... - 1 allegation
  - **Complaint is closed due to No Contact from the client**
- Client #5:
  - Standard 12: Provide shelter clients with one clean blanket, two clean sheets and one pillow... - 1 allegation
  - Standard 17: Note in writing and post in a common areas...when maintenance problem will be repaired – 1 allegation
  - **Complaint is closed due to No Contact from the client**
- Client #6, Complaint #1:
  - Standard 1: Treat clients equally, with respect and dignity – 2 allegations
  - **Complaint is closed due to No Contact from the client**
- Client #6, Complaint #2:
  - Standard 1: Treat clients equally, with respect and dignity – 1 allegations
  - Standard 2: Provide shelter services in an environment that is free and safe of physical violence – 1 allegation
  - Standard 25: Require all staff to wear a badge that identifies the staff person by name... - 1 allegation
  - **Complaint is open due to pending client response**

### **Investigations**

There were three investigations conducted during this reporting period, one involving Next Door and two involving MSC South Drop In Center:

#### ***Next Door***

The complainant claimed that after she was denied services for breaking shelter rules, she was told by shelter staff to bag her belongings and that they would be stored for her at the site. The complainant claims that when she returned to the site after her DOS to pick up her possessions, staff was not able to locate her property. Committee staff met with shelter management who interviewed shelter staff that were on duty on the night of the original incident. Multiple staff stated that they saw the complainant leaving the site with her possessions on the night of the incident. Committee staff checked the property storage logs to determine whether or not there were any inconsistencies in property storage recordkeeping and to see if they could locate the complainant's possessions. After conducting an investigation, the Shelter Monitoring Committee has determined that Next Door was in compliance of Standard 15. The property storage logs were found to be accurate and consistent. As a result, Next Door is complying with Standard 15 which requires the site to provide pest-free, secure property storage inside the shelter.

#### ***MSC South Drop-In***



The first investigation at MSC South Drop-In conducted by the Committee involved a complainant was not satisfied with the site's response to his allegations that staff are showing favoritism to certain clients by allowing them to bring in prohibited items such as folding chairs and glass jars. (Note: The original complaint was submitted during the 4<sup>th</sup> Quarter of the 14-15 FY). Shelter Monitoring Committee staff met with shelter management to discuss the site's prohibited item policies. Committee staff also conducted an unannounced inspection of the Drop-in area to see if there were any clients possessing the prohibited items. After conducting an investigation, the Shelter Monitoring Committee determined that MSC South Drop-In is in compliance of Standard 1. Committee staff could not locate any folding chairs or glass jars during the inspection of the Drop-in Center. In addition, shelter management explained that the folding chairs the complainant alleged staff were allowing clients bring in to the Drop-in Center were not actually folding chairs, but were medical walkers with a built in seat. These walkers are allowed into the site because they are considered medical devices and not folding chairs. As a result of these findings, the Committee determined that MSC South Drop-in was not selectively enforcing prohibited item policies and is complying with Standard 1 which requires the site to treat all clients equally, with respect and dignity.

The second investigation at MSC South Drop-In conducted by the Committee involved a complainant that was not satisfied with the site's response to his allegations that staff verbally and physically abused him. Committee staff met with shelter management to discuss the circumstances surrounding the night of the incident. Committee staff also reviewed two videos taken by the complainant that allegedly showed the verbal and physical abuse taking place. After conducting an investigation, Committee determined that one of the employees listed in the complaint did speak to the client using disrespectful language. As a result, MSC South Drop-In was not in compliance with Standard 1 which requires the site to treat all clients equally, with respect and dignity. Shelter management informed Committee staff that the employee in question was already undergoing an internal disciplinary process. As a result, Committee staff had no recommendations for additional action to be taken by shelter management.

### **Membership**

There were no changes made to the membership of the Shelter Monitoring Committee during the reporting period. The Committee currently consists of 11 members with two vacancies that still need to be filled. The requirements for the two open seats are:

- Board of Supervisors Seat 1: Seat must be filled by a candidate that is currently homeless that is the legal guardian of a child under the age of 18
- Mayor's Seat 1: Seat must be filled by an individual that is currently or formerly homeless

One officer position was filled during the reporting period, with Member Steen elected to serve as Secretary for the Shelter Monitoring Committee.

Through the creation of the Committee, the committee is required to submit quarterly and as-needed emergency reports to the Board of Supervisors and Mayor's office. To educate the Board of Supervisors, the Mayor's office and public and private stakeholders, including clients, the

Committee provides monthly reports on the Standard of Care complaint process. These reports are discussed monthly at public meetings, provided to the contractors (Human Services Agency and Department of Public Health), and made available upon request to any individual. Committee officers are working on streamlining staff duties to ensure that required information is collected, captured and made public.

## Appendix A: Client Complaint Process Flowchart

### Client Complaints

- Committee staff screens complaint, and if valid, complaint is written up and emailed to site director and site manager
- Copy of the complaint given to client

Note: HSA is immediately notified of all allegations involving staff or incidents of violence, fraud, and/or assault



- Sites have 48 hours to acknowledge receipt of complaint
- Sites investigate complaints/allegations and are required to send a formal response to the Committee along with its findings 7 days after complaint is submitted to site



When the Committee receives site's response, the client is notified and is provided with a copy of the site's response for their review



If the client is satisfied with the site's response, the process stops here.



If the client is not satisfied with the site's response, the complaint is investigated by Committee staff



Committee staff will investigate the client's allegations at the site and determine whether or not site is in compliance with the Standards of Care.

- If Committee staff are able to verify the client's allegations, then the site is not in compliance
- If Committee staff are unable to verify the client's allegations, then the site is in compliance

Committee staff will compile their findings in an Investigation Report (which includes any recommendations for corrective actions) which will be sent to the client, site management and HSA

## Appendix B: Site Visit Infraction Process Flowchart

### Site Visit Infractions

- The Committee notes any Standards of Care infractions during site visits and submits them to shelter management

Note: HSA is immediately notified for all incidents of violence, fraud, and/or assault that take place during a site visit



- Sites have 48 hours to acknowledge receipt of the infractions
- Sites investigate infractions and are required to send a formal response to the Committee along with its findings and corrective actions 7 days after they are submitted



- When the Committee receives site's response, Committee staff will review site's response and check for completion of corrective actions



If Committee staff are satisfied with the site's response, the process stops here.



If Committee staff are not satisfied with the site's response, the infractions will be investigated by Committee staff



Committee staff will conduct an investigation at the site and determine whether or not the site has addressed the infractions.

- If the site has addressed the infractions, the site is now in compliance
- If the site has not addressed the infractions, the site is not in compliance

Committee staff will compile their findings in an Investigation Report (which includes any recommendations for corrective actions) which will be sent to site management and HSA



City and County of San Francisco

# Shelter Monitoring Committee

## Shelter Monitoring Committee Legislation Recommendations

Approved by Shelter Monitoring Committee Policy Subcommittee: November 13<sup>th</sup>, 2015  
Submitted to Human Services Agency for comments: January 13<sup>th</sup>, 2016  
Approved by Shelter Monitoring Committee: January 20<sup>th</sup>, 2016  
Approved by Dept. Public Health Policy and Planning: January 26<sup>th</sup>, 2016  
Approved by Director of Public Health: January 26<sup>th</sup>, 2016  
Submitted to Local Homeless Coordinating Board for comments: February 9<sup>th</sup>, 2016

Please direct any questions to Charlie Morimoto at [Charles.Morimoto@sfdph.org](mailto:Charles.Morimoto@sfdph.org). He can also be reached by telephone after March 28<sup>th</sup>, 2016 at 415-255-3750.

## Shelter Monitoring Committee Legislation Recommendations

Ongoing linen issue – Section 20.404(a) CONTRACT REQUIREMENTS #12:

- “Provide shelter clients with one clean blanket, **two clean sheets**, and one pillow enclosed in a plastic or vinyl sleeve with a clean pillowcase; sheets shall be cleaned at least once per week and upon client turnover;”
- **Issue:** Certain emergency shelters do not have the capability to launder sheets and provide extra blankets as a workaround. These sites continue to be cited for violating Standard #12 during site visits.
- **Recommendation:** Allow extra blankets to be provided to clients as a substitute for sheets in emergency shelters that cannot provide sheets due to laundering issues.

Shelter Monitoring Committee Appointments, Board of Supervisors Seat #1 – Section 20.305(a):

- “...one of whom shall be a homeless person (or homeless within the 3 years prior to the appointment) **living with their homeless child who is under the age of 18.**”
- **Issue:** It has been difficult for the Committee to identify and keep candidates that meet the requirements for this seat.
- **Recommendation:** Change the requirement to someone who has lived with a homeless child who was under the age of 18 at some point within the candidate’s lifetime.

Section 20.306 TERMS OF OFFICE.

- “**The term of office of each Committee member shall be two years.** In the event that a vacancy occurs during the term of office of any Committee member, a successor shall be appointed to complete the expired term of office. The interim appointment shall be made in the same or similar manner that governed the initial appointment of the departing member.”
- **Issue:** Currently, the only legislation related to terms of office is the section describing the 2 year term limit. With all Committee members being nominated and having their seats expire at the same time, there have been problems with the Committee maintaining full membership.
- **Recommendation:** Establish a new system where member terms are staggered instead of all expiring at the same time. This system would be implemented by splitting the Committee seats in half and have one half of the Committee have their terms expire on odd years and the other half would have their terms end on even years. This would allow the Committee to have half of the seats expire at the same time instead of all of the seats expiring at the same time.

## Evans, Derek

---

**From:** Tang, Katy (BOS)  
**Sent:** Thursday, February 11, 2016 6:19 PM  
**To:** Evans, Derek; Avalos, John (BOS); Hsieh, Frances (BOS); Pollock, Jeremy (BOS); Rubenstein, Beth (BOS); Quizon, Dyanna (BOS)  
**Cc:** Somera, Alisa (BOS)  
**Subject:** RE: File No. 140353 - Hearing - Shelter Monitoring Committee Reports (Sponsorship)

That's fine with me - thanks

### Katy Tang

District 4 Supervisor  
San Francisco Board of Supervisors  
City Hall, Room 264  
Phone: (415) 554-7460

Office website:

[www.sfbos.org/Tang](http://www.sfbos.org/Tang)

View our Sunset District Blueprint:

[www.sfbos.org/SunsetBlueprint](http://www.sfbos.org/SunsetBlueprint)

---

**From:** Evans, Derek  
**Sent:** Thursday, February 11, 2016 4:47 PM  
**To:** Avalos, John (BOS) <[john.avalos@sfgov.org](mailto:john.avalos@sfgov.org)>; Hsieh, Frances (BOS) <[frances.hsieh@sfgov.org](mailto:frances.hsieh@sfgov.org)>; Pollock, Jeremy (BOS) <[jeremy.pollock@sfgov.org](mailto:jeremy.pollock@sfgov.org)>; Rubenstein, Beth (BOS) <[beth.rubenstein@sfgov.org](mailto:beth.rubenstein@sfgov.org)>; Law, Ray (BOS) <[ray.law@sfgov.org](mailto:ray.law@sfgov.org)>; Ng, Wilson (BOS) <[wilson.l.ng@sfgov.org](mailto:wilson.l.ng@sfgov.org)>; Quizon, Dyanna (BOS) <[dyanna.quizon@sfgov.org](mailto:dyanna.quizon@sfgov.org)>; Tang, Katy (BOS) <[katy.tang@sfgov.org](mailto:katy.tang@sfgov.org)>  
**Cc:** Somera, Alisa (BOS) <[alisa.somera@sfgov.org](mailto:alisa.somera@sfgov.org)>  
**Subject:** File No. 140353 - Hearing - Shelter Monitoring Committee Reports (Sponsorship)

Hello,

Hearing files for Shelter Monitoring reports are introduced by the Rules Committee Chair. Since we have had a change in committee makeup, can we switch sponsorship of the following hearing file to reflect the committee changes?

**File No. 140353** - Hearing - Shelter Monitoring Committee Reports  
Sponsor: Avalos (*change to Tang?*)

Thank you,

### Derek K. Evans

Assistant Clerk, Board of Supervisors  
1 Dr. Carlton B. Goodlett Place, City Hall, Room 244  
San Francisco, CA 94102  
Phone: (415) 554-7702 | Fax: (415) 554-5163  
[Derek.Evans@sfgov.org](mailto:Derek.Evans@sfgov.org) | [www.sfbos.org](http://www.sfbos.org)

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## Somera, Alisa (BOS)

---

**From:** Hsieh, Frances (BOS)  
**Sent:** Wednesday, September 16, 2015 11:18 AM  
**To:** Somera, Alisa (BOS); Rubenstein, Beth (BOS)  
**Cc:** Pollock, Jeremy (BOS)  
**Subject:** RE: 140353: Hearing, Shelter Monitoring Committee

We are okay with the transfer.

**From:** Somera, Alisa (BOS)  
**Sent:** Wednesday, September 16, 2015 8:48 AM  
**To:** Rubenstein, Beth (BOS) <beth.rubenstein@sfgov.org>  
**Cc:** Pollock, Jeremy (BOS) <jeremy.pollock@sfgov.org>; Hsieh, Frances (BOS) <frances.hsieh@sfgov.org>  
**Subject:** FW: 140353: Hearing, Shelter Monitoring Committee

Can you confirm its okay to transfer sponsorship of this hearing from Yee to Avalos?

### *Alisa Somera*

Assistant Clerk  
San Francisco Board of Supervisors  
1 Dr. Carlton B. Goodlett Place, Room 244  
San Francisco, CA 94102  
415.554.4447 direct | 415.554.5163 fax  
[alisa.somera@sfgov.org](mailto:alisa.somera@sfgov.org)

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**From:** Scanlon, Olivia (BOS)  
**Sent:** Tuesday, September 15, 2015 12:09 PM  
**To:** Somera, Alisa (BOS) <[alisa.somera@sfgov.org](mailto:alisa.somera@sfgov.org)>  
**Subject:** RE: 140353: Hearing, Shelter Monitoring Committee

That is fine.

**Olivia Scanlon**  
Legislative Aide  
Supervisor Norman Yee | District 7  
1 Dr. Carlton B. Goodlett Place, Room 244  
San Francisco, CA 94102



## Somera, Alisa (BOS)

---

**From:** Scanlon, Olivia (BOS)  
**Sent:** Tuesday, September 15, 2015 12:09 PM  
**To:** Somera, Alisa (BOS)  
**Subject:** RE: 140353: Hearing, Shelter Monitoring Committee

That is fine.

**Olivia Scanlon**  
Legislative Aide  
Supervisor Norman Yee | District 7  
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**From:** Somera, Alisa (BOS)  
**Sent:** Tuesday, September 15, 2015 12:09 PM  
**To:** Low, Jen (BOS) <jen.low@sfgov.org>; Scanlon, Olivia (BOS) <olivia.scanlon@sfgov.org>; Mormino, Matthias (BOS) <matthias.mormino@sfgov.org>; Rubenstein, Beth (BOS) <beth.rubenstein@sfgov.org>; Pollock, Jeremy (BOS) <jeremy.pollock@sfgov.org>; Hsieh, Frances (BOS) <frances.hsieh@sfgov.org>  
**Subject:** 140353: Hearing, Shelter Monitoring Committee

Hey all,

Currently File No. 140353 (Hearing, Shelter Monitoring Committee Quarterly Report) is sponsored by Supervisor Yee (since he was the previous Rules Chair), but it should be changed over to Supervisor Avalos (as the current Chair).

Can you both confirm this would be okay to switch?

*Alisa Somera*

Assistant Clerk  
San Francisco Board of Supervisors  
1 Dr. Carlton B. Goodlett Place, Room 244  
San Francisco, CA 94102  
415.554.4447 direct | 415.554.5163 fax  
[alisa.somera@sfgov.org](mailto:alisa.somera@sfgov.org)

 Click [HERE](#) to complete a Board of Supervisors Customer Service Satisfaction form.

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# Introduction Form

By a Member of the Board of Supervisors or the Mayor

2014 APR -8 PM 12:43

Time stamp  
for meeting date

I hereby submit the following item for introduction (select only one):

- 1. For reference to Committee:
- An ordinance, resolution, motion, or charter amendment.
- 2. Request for next printed agenda without reference to Committee.
- 3. Request for hearing on a subject matter at Committee:
- 4. Request for letter beginning "Supervisor  inquires"
- 5. City Attorney request.
- 6. Call File No.  from Committee.
- 7. Budget Analyst request (attach written motion).
- 8. Substitute Legislation File No.
- 9. Request for Closed Session (attach written motion).
- 10. Board to Sit as A Committee of the Whole.
- 11. Question(s) submitted for Mayoral Appearance before the BOS on

Please check the appropriate boxes. The proposed legislation should be forwarded to the following:

- Small Business Commission
- Youth Commission
- Ethics Commission
- Planning Commission
- Building Inspection Commission

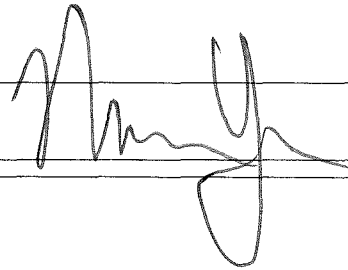
**Note: For the Imperative Agenda (a resolution not on the printed agenda), use a different form.**

**Sponsor(s):**

**Subject:**

**The text is listed below or attached:**

Signature of Sponsoring Supervisor: \_\_\_\_\_



For Clerk's Use Only:

140353