

1 [Urging Flexible Incentive Pay and Testing for Frontline Non-Profit Workers During Public
2 Health Emergency]

3 **Resolution urging City Departments to authorize additional funds and support to their**
4 **contracted non-profit homeless service providers, including guaranteed free testing**
5 **and incentive pay through increased contract amounts and flexible contract spending.**

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7 WHEREAS, The City and County of San Francisco is currently experiencing an
8 outbreak of the coronavirus (COVID-19) which has been deemed a pandemic by the World
9 Health Organization; and

10 WHEREAS, On March 6, 2020, the San Francisco Health Officer issued a Declaration
11 of Local Health Emergency Regarding Novel Coronavirus 2019 (COVID-19), which was
12 preceded by a February 25, 2020, Proclamation by the Mayor Declaring the Existence of a
13 Local Emergency; and

14 WHEREAS, As outlined by the Shelter in Place Order No. C19-07, the San Francisco
15 Health Officer has determined that businesses that provide food, shelter, and social services,
16 and other necessities of life for economically disadvantaged or otherwise needy individuals,
17 and residential facilities and shelters for seniors, adults, and children are exempted from the
18 Shelter in Place ordinance and are encouraged to still operate and provide essential services
19 to the City and County of San Francisco; and

20 WHEREAS, Non-profit staff in the Homelessness Response System serve over 3,000
21 vulnerable individuals and families in shelters and navigation centers, over 5,000 San
22 Franciscans who live on the street or in encampments, over 10,000 people in transitional and
23 supportive housing, and countless other vulnerable clients through drop-in centers, access
24 points, outreach teams, residential treatment centers, and other services; and

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1 WHEREAS, The essential services that non-profit organizations and their workers in
2 the Homelessness Response System deliver are vital to the safety of our homeless
3 neighbors, housed neighbors and our entire community; and

4 WHEREAS, The City has an enormous responsibility to take care of the workers who
5 keep our essential services running and who must continue to work outside the home; and

6 WHEREAS, Among workers deemed essential, many reporting to work sites know they
7 will not be able to social distance due to the nature of their work, putting their own lives at risk;
8 and

9 WHEREAS, While some of these workers earn competitive wages, the vast majority
10 earn between \$16.50 and \$24.00 per hour per the City’s Minimum Compensation Ordinance
11 for Contracts and Contract Amendments with Nonprofit Corporations, well below the local
12 median wage; and

13 WHEREAS, Even in the midst of this crisis, these workers have been asked to continue
14 their daily work tasks, sometimes with little to no additional Personal Protective Equipment,
15 reduced public transportation options, a lack of guaranteed free testing or basic testing
16 protocols in their workplace, and unclear guidance from local health officials to keep their
17 facilities and staff safe; and

18 WHEREAS, As of April 13, 2020, there were already 10 known cases of homeless
19 shelter staff testing positive for COVID-19, and more than 80 cases for homeless guests of
20 shelters and Navigation Centers; and

21 WHEREAS, Staffing shortages have long been a barrier for the City’s non-profits, as
22 organizations have struggled to pay competitive wages and their employees have to live
23 further and further out of the City; and

1 WHEREAS, The increased risk of working directly with vulnerable populations during
2 the pandemic has put a strain on non-profit operations, with some workers having to stay
3 home to protect their own health and the health of their at-risk family members; and

4 WHEREAS, During this emergency, many non-profit employers are experiencing
5 extreme challenges in maintaining adequate direct service staff, which has a negative effect
6 on client care and safety; and

7 WHEREAS, As the City seeks to expand and shift its homeless services to prevent the
8 rapid spread of COVID-19 in congregate settings and among the unsheltered population,
9 staffing challenges have been cited as a top barrier, indicating the magnitude to which we rely
10 on our frontline homeless response system staff for our collective health; and

11 WHEREAS, The San Francisco Human Services Agency (HAS) has reached out to its
12 contracted non-profits citing “an urgent staffing need to support the City’s emergency
13 operations during the COVID-19 pandemic“ and deploying “both City and non-profit staff as
14 disaster service workers to support housing operations at hotels, congregate sites, and other
15 housing arrangements we are securing for the most vulnerable San Franciscans;” and

16 WHEREAS, In the request for non-profit staff to be re-assigned as Disaster Service
17 Workers, the memo from HSA further states that “To support staff deployed for this purpose,
18 HSA will fund these essential positions at a rate of \$24 per hour,” with “Any differential
19 between the \$24 per hour wage rate for this position and participating employees’ current
20 hourly wage rates will be covered through your existing HSA contract—using contingency
21 funding in your contract, as needed;” and

22 WHEREAS, Last month, the Los Angeles Homeless Services Authority (LAHSA), the
23 lead agency in the Los Angeles County Continuum of Care, passed Enhanced Risk Service
24 Delivery Procedures that authorized “Emergency Pay” for LAHSA essential personnel who
25 provide security, operations management, front line support, cleaning and maintenance, and

1 supportive service delivery, and gave their funded contractors the discretion to increase hourly
2 wages to necessitate continued delivery of services, not to exceed time and a half; and

3 WHEREAS, Non-profit service providers have taken on additional, unanticipated costs
4 related to food for tenants, clients, and staff; transportation; janitorial services and cleaning
5 supplies; laptops; and more, and many have already implemented incentive pay out-of-pocket
6 without explicit agreement that the additional costs will be covered by their existing contracts;
7 and

8 WHEREAS, As of April 13, 2020, Department of Homelessness and Supportive
9 Housing contract managers had reached out their contracted non-profits to augment service
10 contracts one-off, and had allocated modest funding augmentation to select contracts,
11 intended to give each organization the flexibility to address their need; and

12 WHEREAS, For many non-profits on the frontlines of the COVID and homelessness
13 crisis, many of their janitors, desk clerks, maintenance techs, and resident support staff are
14 not funded through City contracts through the Department of Homelessness and Supportive
15 Housing; and

16 WHEREAS, San Francisco was recently given \$6.2M by the State of California for
17 emergency homeless services support during COVID, allocated \$11M from the federal
18 government via the CARES Act for homelessness, and also granted flexibility for its previously
19 allocated Homeless Emergency Aid Program funds from the state by Executive Order from
20 the Governor; and

21 WHEREAS, The Board of Supervisors already passed a Resolution urging the Mayor
22 to require employers in large retail grocery, retail drug store, and food delivery services to
23 offer expanded workers' rights package that includes hazard pay and access to personal
24 protection equipment during the Coronavirus (COVID-19) emergency; now, therefore, be it
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1 RESOLVED, That the San Francisco Board of Supervisors (“The Board”) reaffirms its
2 commitment to front line workers employed in essential non-profit homeless services in order
3 to ensure the health and well-being of the city from COVID-19; and, be it

4 FURTHER RESOLVED, That the Board urges the Department of Public Health to
5 immediately expand free testing to all clients and on-site service workers in the homelessness
6 response system, and to the extent possible provide free testing onsite, not only when there is
7 a confirmed case in the worksite but also proactively before any cases are identified; and, be
8 it

9 FURTHER RESOLVED, The Board urges the Department of Public Health to conduct
10 robust contact tracing in shelters and supportive housing sites, and publish a comprehensive
11 plan to notify individuals and their worksite of test results; and, be it

12 FURTHER RESOLVED, That the Board urges the Department of Homelessness and
13 Supportive Housing, Department of Public Health, and any other Department that contracts
14 with non-profit organizations to provide homeless services, to explicitly authorize incentive pay
15 as part of new contract flexibility rules; and, be it

16 FURTHER RESOLVED, That the Board urges the above-referenced Departments to
17 further augment contracts with funds for incentive pay for all frontline service workers
18 employed doing on-site, direct service work deemed essential by the City of San Francisco in
19 homeless and community service shelters, navigation centers, outreach programs, supportive
20 housing, drop in centers, homeless medical and respite programs, and the like; and, be it

21 FURTHER RESOLVED, That the Board urges the above-referenced Departments to
22 include augmented funds for on-site employees of all Community Service and Homeless
23 Service programs of this type even if those employees are not part of City contracts or funded
24 in majority by the City and County of San Francisco, as all front line homeless service workers
25 providing essential services are serving the community of San Francisco; and, be it

1 FURTHER RESOLVED, That the Board of Supervisors urges Mayor Breed to exercise
2 her authority under Charter, Section 3.100.13 emergency powers clause to develop an
3 emergency order that provides homelessness response system workers with expanded rights
4 that includes incentive pay and free COVID-19 testing; and, be it

5 FURTHER RESOLVED, That the Clerk of the Board transmit this Resolution upon its
6 passage to Mayor Breed, the Department of Homelessness and Supportive Housing, and
7 Department of Public Health.

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