

Wong, Jocelyn (BOS)

From: Peter Prows <pprows@briscoelaw.net>
Sent: Sunday, June 23, 2019 12:50 PM
To: Mchugh, Eileen (BOS); HSHSunshine; Calvillo, Angela (BOS); Ng, Wilson (BOS); GIVNER, JON (CAT); BOS-Legislative Services; Yee, Norman (BOS); Somera, Alisa (BOS)
Subject: Re: Response to Records Request re "incident reports for Navigation Centers"

This message is from outside the City email system. Do not open links or attachments from untrusted sources.

Attachments available until 23 Jul 2019

Please also include the attached documents in the administrative record.

Thank you.

[Click to Download](#)

Responsive CIRs Volume 7.pdf
3 MB

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Supplemental Production Re Wallace Lee Request 4_Redacted.pdf
30.6 MB

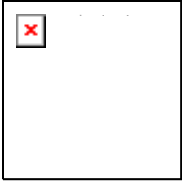
On 19 Jun 2019, at 11:31 AM, Peter Prows <pprows@briscoelaw.net> wrote:

Please also include these documents in the administrative record.

From: Peter Prows
Sent: Saturday, June 15, 2019 12:19 AM
To: Mchugh, Eileen (BOS) <eileen.e.mchugh@sfgov.org>; HSHSunshine <HSHSunshine@sfgov.org>; Calvillo, Angela (BOS) <angela.calvillo@sfgov.org>; Ng, Wilson (BOS) <wilson.l.ng@sfgov.org>; GIVNER, JON (CAT) <Jon.Givner@sfcityatty.org>; BOS-Legislative Services <bos-legislative_services@sfgov.org>; Yee, Norman (BOS) <norman.yee@sfgov.org>; Somera, Alisa (BOS) <alisa.somera@sfgov.org>
Subject: Re: Response to Records Request re "incident reports for Navigation Centers"

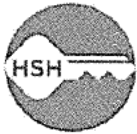
Please also include these documents in the administrative record.

<REPLACEMENT Supplemental Production Re Wallace Lee Request 4 - Redactedpdf>



PETER PROWS

155 Sansome Street, Seventh Floor
San Francisco, California 94104
Direct: (415) 402-2708 Cell: (415) 994-8991



San Francisco Housing and Homeless Division Report of Critical Incident

INSTRUCTIONS FOR REPORTING CRITICAL INCIDENTS

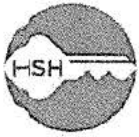
All Navigation Centers should report critical incidents to the Department of Homelessness and Housing as soon as possible. Types of critical incidents include: death, acts of violence, arrests, fire, sexual assaults, suicide attempts or any other critical incidents which require the involvement of emergency services.

A completed Report of Critical Incident form should be forwarded to HSH within **24 hours of the incident** preferably by **email** or TYPE OR PRINT LEGIBLY USING LARGE BLACK PRINT and **fax the report to 415.355.6321**. Please fill in all spaces on the form using N/A if appropriate. **When a death or serious incident occurs, staff should contact HSH immediately and leave a message detailing the event as well as submit a Report of The Critical Incident to:**

- **Brian Quinn, Navigation Center Program Manager at, brian.p.quinn@sfgov.org**
- **Email a copy of this form to Reggie Delos Santos, Online Navigation and Entry System Analyst, at regie.delossantos@sfgov.org**

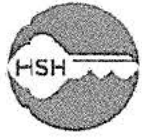
Date of Incident:	Time Incident Occurred:	Type of Incident:
11/24/2018	10:18 pm	<u>Other Emergency Services</u>
Navigation Center Name	Central Waterfront Navigation Center	
Names of Clients Involved Last Four of SSN		
Client A.		
Client B.		
Client C.		
Client D.		
Names of Reporting Staff	Whitney Burnett	





Names of Witnesses:	Client Witnesses	Staff Witnesses
		Jermaine (Security)
<p>Summary of Incident – Continue on separate sheet of paper if necessary. (Please do not include client names below. Refer to Client A, Client B, etc.)</p>		
<p>Guest A came in the office complaining about still having chest pains. Guest A was just discharged from General Hospital today after being in there for 3 days (since Thanksgiving Day).</p>		
Describe any injuries observed: N/A	Supervisor Whitney called 911 to get guest medical attention.	
<input type="checkbox"/> Check if police were involved Time Called: Time Arrived:	Ambulance Interacting with client A seeing if everything was ok asked him a couple questions then Guest A walked to ambulance with medical staff.	
<input checked="" type="checkbox"/> Check if paramedics were involved Time Called: 10:18p.m Time Arrived: 10:24p.m	Name of Police Officer/Badge No.: Engine #25 Medic # King 14 Where was the client taken: UCSF	
IMPORTANT AGENCY INFORMATION		
Date Form Submitted to HSH	11-24-18	
Person Who Completed Report <i>(please print)</i>	Whitney Burnett, Supervisor	
Agency Name/Location/Phone <i>(please print)</i>	Central Waterfront Welcome Center 600, 25st, San Francisco ,94107	
Supervisor Name and Phone	John Ouertani (415)487-3300 EXT 4311	





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- **Janay Washington, Navigation Centers Program Specialist at 415.355-5331, janay.washington@sfgov.org**
- **Scott Walton, Manager for Shelters and Navigation Centers at 415.355-5326, scott.walton@sfgov.org**
- **Email a copy of this form to HSH Data Team at hshdata@sfgov.org**

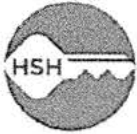
Date of Incident:	Time Incident Occurred:	Type of Incident:	
12/16/2018	11:30 am	Other Emergency Services	
Navigation Center Name	Central Waterfront Navigation Center		
Names of Clients Involved Last Four of SSN	PRINT FIRST NAME AND LAST NAME	LAST FOUR:	
Client A.			
Client B.			
Client C.			
Names of Reporting Staff	Jacqueline Williams		





Names of Witnesses:		Client Witnesses	Staff Witnesses
			Candra Jordan
Summary of Incident – Continue on separate sheet of paper if necessary. (Please do not include client names below. Refer to Client A, Client B, etc.)			
Alarm went off around 11:30am SVC Candra and myself conducted a walk-thru and SVC Candra noticed guest A. in men’s restroom, she also noticed smoke in the stall he was using. When the alarm co. called the stated the alarm was coming from the restroom and advised me to vacate the dorms due to the carbon monoxide reading. All staff assisted with getting the guest up and off site. Engine 25 arrive and checked the site and allowed the guest back on site, after resetting the alarm			
Describe any injuries observed: N/A		Describe any action taken by staff:	
<input type="checkbox"/> Check if police were involved Time Called: Time Arrived:		Describe what actions were performed by the Paramedics or Police: E25 arrived to check site and reset the alarm	
<input checked="" type="checkbox"/> Check if paramedics were involved Time Called: 11:30am Time Arrived: 11:40pm		Where was the client taken: N/A	
IMPORTANT AGENCY INFORMATION			
Date Form Submitted to HSH		12/16/18	
Person Who Completed Report Jacqueline Williams		Jacqueline Williams	
Agency Name/Location/Phone		Central Water Front Navigation Center	
Supervisor Name and Phone		Jacqueline Williams/415 487 3300 X4311	





San Francisco Housing and Homeless Division Report of Critical Incident

INSTRUCTIONS FOR REPORTING CRITICAL INCIDENTS

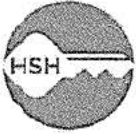
All Navigation Centers should report critical incidents to the Department of Homelessness and Housing as soon as possible. Types of critical incidents include: death, acts of violence, arrests, fire, sexual assaults, suicide attempts or any other critical incidents which require the involvement of emergency services.

A completed Report of Critical Incident form should be forwarded to HSH within **24 hours of the incident** preferably by **email** or TYPE OR PRINT LEGIBLY USING LARGE BLACK. Please fill in all spaces on the form using N/A if appropriate. **When a death or serious incident occurs, staff should contact HSH immediately and leave a message detailing the event as well as submit a Report of Critical Incident to:**

- **Janay Washington, Navigation Centers Program Specialist at 415.355-5331, janay.washington@sfgov.org**
- **Scott Walton, Manager for Shelters and Navigation Centers at 415.355-5326, scott.walton@sfgov.org**
- **Email a copy of this form to HSH Data Team at hshdata@sfgov.org**

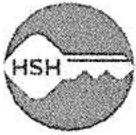
Date of Incident:	Time Incident Occurred:	Type of Incident:
12/20/2018	10:25p.m	<u>Other Emergency Services</u>
Navigation Center Name	Central Waterfront Navigation Center	
Names of Clients Involved Last Four of SSN		
Client A.		
Client B.		
Client C.		
Names of Reporting Staff	Whitney Burnett	





Names of Witnesses:	Client Witnesses	Staff Witnesses
Summary of Incident – Continue on separate sheet of paper if necessary. (Please do not include client names below. Refer to Client A, Client B, etc.)		
<p>Client A. was walking around holding his stomach and making moaning noisy. I could tell Client A. was in pain so I called 911. Client A also said he felt dizzy.</p>		
Describe any injuries observed: N/A	Describe any action taken by staff: Sup Whitney went to dorm to check on Client A and determined he needed medical attention.	
<input type="checkbox"/> Check if police were involved Time Called: Time Arrived:	Describe what actions were performed by the Paramedics or Police: Asked Client A. questions about medical history and then walked guest to ambulance.	
<input checked="" type="checkbox"/> <input type="checkbox"/> Check if paramedics were involved Time Called: 10:25p.m Time Arrived:10:30p.m	Name of Police Officer/Badge No: Medic #66 Where was the client taken: St.Lukes	
IMPORTANT AGENCY INFORMATION		
Date Form Submitted to HSH	12-20-2018	
Person Who Completed Report <i>(please print)</i>	Whitney Burnett	
Agency Name/Location/Phone <i>(please print)</i>	Central Waterfront Navigation Center 600 25 th St. 415-487-3300 ext 4311	
Supervisor Name and Phone	Whitney Burnett 415 417-3300 ext 4311	





San Francisco Housing and Homeless Division Report of Critical Incident

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- **Scott Walton, Manager for Shelters and Navigation Centers at 415.355-5326, scott.walton@sfgov.org**
- **Email a copy of this form to HSH Data Team at hshdata@sfgov.org**

Date of Incident:	Time Incident Occurred:	Type of Incident:
12/23/2018	2:55am	<u>Other Emergency Services</u>
Navigation Center Name	Central Waterfront Navigation Center	
Names of Clients Involved Last Four of SSN		
Client A.	None	
Client B.		
Client C.		
Names of Reporting Staff	Jacqueline Williams	





Names of Witnesses:	Client Witnesses		Staff Witnesses	
Summary of Incident – Continue on separate sheet of paper if necessary. (Please do not include client names below. Refer to Client A, Client B, etc.)				
At 2:55 Hue & Cry Alarm went off, Engine 25 arrived to reset Alarm and stated it may have been a Malfunction , there was no signs of smoke.				
Describe any injuries observed:				
<input type="checkbox"/> Check if police were involved Time Called: Time Arrived: n/a				
Check if paramedics were involved Time Called: ALARMED 2:55 Time Arrived: 3:00		Name of Police Officer/Badge No.: Engine #25 Where was the client taken: n/a		
IMPORTANT AGENCY INFORMATION				
Date Form Submitted to HSH		12/23/18		
Person Who Completed Report <i>(please print)</i>		Jacqueline Williams, Supervisor		
Agency Name/Location/Phone <i>(please print)</i>		Central Waterfront Welcome Center 600, 25st, San Francisco ,94107		
Supervisor Name and Phone		Jacqueline Williams (415)487-3300 EXT 4222		





San Francisco Housing and Homeless Division Report of Critical Incident

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- **Scott Walton, Manager for Shelters and Navigation Centers at 415.355-5326, scott.walton@sfgov.org**
- **Email a copy of this form to HSH Data Team at hshdata@sfgov.org**

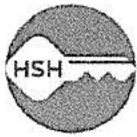
Date of Incident:	Time Incident Occurred:	Type of Incident:
12/24/2018	9:45am	<u>Other Emergency Services</u>
Navigation Center Name	Central Waterfront Navigation Center	
Names of Clients Involved Last Four of SSN		
Client A.		
Client B.		
Client C.		
Names of Reporting Staff	Supervisor Matthew McGill , Case Manager William Henry	





Names of Witnesses:	Client Witnesses	Staff Witnesses
	N/A	Matthew McGill
Summary of Incident – Continue on separate sheet of paper if necessary. (Please do not include client names below. Refer to Client A, Client B, etc.)		
9:45 am Client A reported to Supervisor Matthew that he's having problems with his chest and requested an ambulance. Supervisor Matthew calls the ambulance, and Case Manager William Henry assist with giving him a chair to sit. Ambulance arrives 9:51am, Client A walks outside and meets paramedics outside. Paramedics ask Client A a few questions then took him to General Hospital.		
Describe any injuries observed: n/a	Supervisor Matthew calls ambulance, Case Manager William gives him a chair asking him a few questions about his chest area.	
<input type="checkbox"/> Check if police were involved Time Called: Time Arrived:	Paramedics asked him a few questions about his chest, then paramedics took him to general	
<input checked="" type="checkbox"/> Check if paramedics were involved Time Called: 9:45am Time Arrived: 9:51am	Ambulance: #65 General Hospital	
IMPORTANT AGENCY INFORMATION		
Date Form Submitted to HSH	12/24/2018	
Person Who Completed Report <i>(please print)</i>	Supervisor Matthew McGill	
Agency Name/Location/Phone <i>(please print)</i>	Central Waterfront Navigation Center 400 25th St San Francisco, CA	
Supervisor Name and Phone	S.S.M. John O. 415-487-3300 ext4323	





San Francisco Housing and Homeless Division Report of Critical Incident

INSTRUCTIONS FOR REPORTING CRITICAL INCIDENTS

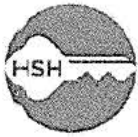
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- **Janay Washington, Navigation Centers Program Specialist at 415.355-5331, janay.washington@sfgov.org**
- **Scott Walton, Manager for Shelters and Navigation Centers at 415.355-5326, scott.walton@sfgov.org**
- **Email a copy of this form to HSH Data Team at hshdata@sfgov.org**

Date of Incident:	Time Incident Occurred:	Type of Incident:
1/1/2019	2:00pm	<u>Other Emergency Services</u>
Navigation Center Name	Central Waterfront Navigation Center	
Names of Clients Involved Last Four of SSN		
Client A.		
Client B.		
Client C.		
Names of Reporting Staff	Matthew McGill	





Names of Witnesses:		Client Witnesses	Staff Witnesses
			Supervisor Rhonda R.
Summary of Incident – Continue on separate sheet of paper if necessary. (Please do not include client names below. Refer to Client A, Client B, etc.)			
Client A calls police because she was feeling uncomfortable about situation. Client A had the police escort her to the dorm so she can pack all her belongings. Client A only spoke to police and nobody else. Client A exit the site.			
Describe any injuries observed:		N/A	
<input checked="" type="checkbox"/> Check if police were involved Time Called: Time Arrived: 2:15pm		Client A calls police off the site and the police met her at CWNC. Escorted Client A to her dorm then escorted off the site.	
Check if paramedics were involved		Name of Police Officer/Badge No.:	
Time Called: Time Arrived:		N/A	
		Where was the client taken:	
IMPORTANT AGENCY INFORMATION			
Date Form Submitted to HSH		1/1/19	
Person Who Completed Report <i>(please print)</i>		Matthew McGill, Supervisor	
Agency Name/Location/Phone <i>(please print)</i>		Central Waterfront Welcome Center 600, 25st, San Francisco ,94107	
Supervisor Name and Phone		John Ouertani (415)487-3300 EXT 4323	





San Francisco Housing and Homeless Division Report of Critical Incident

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- **Janay Washington, Navigation Centers Program Specialist at 415.355-5331, janay.washington@sfgov.org**
- **Scott Walton, Manager for Shelters and Navigation Centers at 415.355-5326, scott.walton@sfgov.org**
- **Email a copy of this form to HSH Data Team at hshdata@sfgov.org**

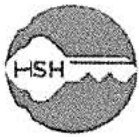
Date of Incident:	Time Incident Occurred:	Type of Incident:
1/4/2019		<u>Other Emergency Services</u>
Navigation Center Name	Central Waterfront Navigation Center	
Names of Clients Involved Last Four of SSN		
Client A.		
Client B.		
Client C.		
Names of Reporting Staff	Supervisor Matthew McGill	





Names of Witnesses:	Client Witnesses	Staff Witnesses
	N/A	Matthew McGill
Summary of Incident – Continue on separate sheet of paper if necessary. (Please do not include client names below. Refer to Client A, Client B, etc.)		
<p>Client A had a painful moan, while Supervisor Matthew making rounds through the dorms. Supervisor Matthew having conversation with another client, and the moans from Client A while tossing and turning, and sounding worse than he sounded yesterday. Sup Matthew went to get Client A Case Manager Glauca Ajsaka , and Site Manger Kim Guillory . For extra support. Supervisor Matthew calls Ambulance 7:42am, and Paramedics show up 7:53am. Paramedics show up and assisted Client A. Client A had a hard time getting up. Client A was taken to General Hospital.</p>		
Describe any injuries observed: n/a	Client A had a lot of pain in his stomach/ Side area preventing him from moving. Hard for Client A to get out of bed and put on clothing.	
<input type="checkbox"/> Check if police were involved Time Called: Time Arrived:	N/A	
<input checked="" type="checkbox"/> Check if paramedics were involved Time Called: 7:48am Time Arrived: 7:53am	Ambulance: #50 General Hospital	
IMPORTANT AGENCY INFORMATION		
Date Form Submitted to HSH	1/4/2019	
Person Who Completed Report <i>(please print)</i>	Supervisor Matthew McGill	
Agency Name/Location/Phone <i>(please print)</i>	Central Waterfront Navigation Center 400 25th St San Francisco ca	
Supervisor Name and Phone	S.S.M. KIM .G 415-487-3300 ext4323	





San Francisco Housing and Homeless Division Report of Critical Incident

INSTRUCTIONS FOR REPORTING CRITICAL INCIDENTS

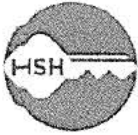
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- **Janay Washington, Navigation Centers Program Specialist at 415.355-5331, janay.washington@sfgov.org**
- **Scott Walton, Manager for Shelters and Navigation Centers at 415.355-5326, scott.walton@sfgov.org**
- **Email a copy of this form to HSH Data Team at hshdata@sfgov.org**

Date of Incident:	Time Incident Occurred:	Type of Incident:
1/26/2019	7:45pm	<u>Other Emergency Services</u>
Navigation Center Name	Central Waterfront Navigation Center	
Names of Clients Involved Last Four of SSN		
Client A.		
Client B.		
Client C.		
Names of Reporting Staff	Gabriel Campos	





	Client Witnesses	Staff Witnesses
Names of Witnesses:		Gabriel Campos
		Amos Franklin
		Jemelle Larry
Summary of Incident – Continue on separate sheet of paper if necessary. (Please do not include client names below. Refer to Client A, Client B, etc.)		
Client D was out on the patio playing with small dog that belongs to Client B. Client B's other dog bit Client D on the top part of his left leg. Client B stated that her larger dog is protective of the little one. 911 was called and Client D was transported to SF General to care for his injury. Animal Control arrived on site and took Client B's dog in for evaluation.		
Describe any injuries observed: Dog Bite on the top of his left leg	Client D stated that he was in a lot of pain	
<input checked="" type="checkbox"/> Check if police were involved Time Called: 7:48 pm Time Arrived: 7:50 pm	SFPD Badge #1022	
<input checked="" type="checkbox"/> Check if paramedics were involved Time Called: 7:48 pm Time Arrived: 7:58 pm	Ambulance: #254 General Hospital	
IMPORTANT AGENCY INFORMATION		
Date Form Submitted to HSH	1/26/2019	
Person Who Completed Report <i>(please print)</i>	Supervisor Gabriel Campos	
Agency Name/Location/Phone <i>(please print)</i>	Central Waterfront Navigation Center 400 25 th St San Francisco, CA	
Supervisor Name and Phone	S.S.M. KIM .G 415-487-3300 ext4323	





Department of Homelessness and Supportive Housing Report of Critical Incident

INSTRUCTIONS FOR REPORTING CRITICAL INCIDENTS

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A completed Report of Critical Incident form should be forwarded to HSH within **24 hours of the incident** preferably by **email** or TYPE OR PRINT LEGIBLY USING LARGE BLACK. Please fill in all spaces on the form using N/A if appropriate. **When a death or serious incident occurs, staff should contact HSH immediately and leave a message detailing the event as well as submit a Report of Critical Incident to:**

- **Janay Washington, Navigation Centers Program Specialist at 415.355-5331, Janay.Washington@sfgov.org**
- **Lisa Rachowicz, Navigation Centers Program Manager at 415.310-3711, Lisa.Rachowicz@sfgov.org**
- **Email a copy of this form to HSH Data Team at hshdata@sfgov.org**

Date of Incident:	Time Incident Occurred:	Type of Incident:	
2/8/2019	10:05 pm	<u>Violence</u>	
Navigation Center Name	Central Waterfront Navigation Center		
Names of Clients Involved Last Four of SSN	PRINT FIRST NAME AND LAST NAME	LAST FOUR:	
Client A.			
Client B.			
Client C.			
Names of Reporting Staff	Jennifer Savidge		
Names of Witnesses:	Client Witnesses	Staff Witnesses	
		Shandai Sawyer	

	Jermaine Phillips
	Jennifer Savidge
Summary of Incident – Continue on separate sheet of paper if necessary. (Please do not include client names below. Refer to Client A, Client B, etc.)	
Client A violently waived a knife at the security guard after telling the security guard	
This is how we do it in Vietnam! The client was verbally calling both staff members.	
Shandai Sawyers and the security guard Jermaine Phillips a “bitch” because the lights	
were turned out at ten o’clock pm. Client left the property with his weapons and said he	
would be back the next day. He frustrated turned back and said to Jermaine that all the	
staff is disrespectful and waived his knife at Jermaine.	
Describe any injuries observed: n/a	Describe any action taken by staff: The client was denied services
<input type="checkbox"/> Check if police were involved Time Called: Time Arrived:	Describe what actions were performed by the Paramedics or Police:
<input type="checkbox"/> Check if paramedics were involved Time Called: Time Arrived:	Name of Police Officer/Badge No.:
	Where was the client taken:
IMPORTANT AGENCY INFORMATION	
Date Form Submitted to HSH	2/13/19
Person Who Completed Report <i>(please print)</i>	Jennifer Savidge
Agency Name/Location/Phone <i>(please print)</i>	Central Waterfront Navigation Center/600 25 th St/415-487-3300 Ext 4311
Supervisor Name and Phone	Kim Guillory



Department of Homelessness and Supportive Housing Report of Critical Incident

INSTRUCTIONS FOR REPORTING CRITICAL INCIDENTS

All Navigation Centers should report critical incidents to the Department of Homelessness and Housing as soon as possible. Types of critical incidents include: death, acts of violence, arrests, fire, sexual assaults, suicide attempts or any other critical incidents which require the involvement of emergency services.

A completed Report of Critical Incident form should be forwarded to HSH within **24 hours of the incident** preferably by **email** or TYPE OR PRINT LEGIBLY USING LARGE BLACK. Please fill in all spaces on the form using N/A if appropriate. **When a death or serious incident occurs, staff should contact HSH immediately and leave a message detailing the event as well as submit a Report of Critical Incident to:**

- **Janay Washington, Navigation Centers Program Specialist at 415.355-5331, Janay.Washington@sfgov.org**
- **Lisa Rachowicz, Navigation Centers Program Manager at 415.310-3711, Lisa.Rachowicz@sfgov.org**
- **Email a copy of this form to HSH Data Team at hshdata@sfgov.org**

Date of Incident:	Time Incident Occurred:	Type of Incident:
2/10/2019	7:51 pm	<u>Other Emergency Services</u>
Navigation Center Name	Central Waterfront Navigation Center	
Names of Clients Involved Last Four of SSN		
Client A.		
Client B.		
Client C.		
Names of Reporting Staff	Jennifer Savidge	
Names of Witnesses:	Client Witnesses	Staff Witnesses
		Jennifer Savidge

Summary of Incident – Continue on separate sheet of paper if necessary. (Please do not include client names below. Refer to Client A, Client B, etc.)	
Client A was robbed and assaulted by her partner several feet away from the navigation center. She entered the welcome center and said I needed to call the police. Client A was robbed by her boyfriend. So I dialed 9-1-1 and she spoke with the operator at 7:51 pm. They showed up about 8:05 pm on the site to speak to the client. The police spoke with Client A and her boyfriend separately before leaving the property about 8:36 pm. A total of five officers came out for the call.	
Describe any injuries observed: The client's nails were broken.	Describe any action taken by staff: Supervisor dialed the call for the client to report her robbery and assault.
<input checked="" type="checkbox"/> Check if police were involved Time Called: 7:51 pm Time Arrived: 8:05 pm	Describe what actions were performed by the Paramedics or Police: The police spoke with both parties and completed the report.
<input type="checkbox"/> Check if paramedics were involved Time Called: Time Arrived:	Name of Police Officer/Badge No.: #836/Mullins and #1279/Brown Where was the client taken: The client was taken into an empty room.
IMPORTANT AGENCY INFORMATION	
Date Form Submitted to HSH	2/10/19
Person Who Completed Report <i>(please print)</i>	Kimberly Guillory
Agency Name/Location/Phone <i>(please print)</i>	Central Waterfront Navigation Center, 600 25th St., 415-487-3300 Ext 4311
Supervisor Name and Phone	Kimberly Guillory 415-487-3300 Ext 4323



Department of Homelessness and Supportive Housing Report of Critical Incident

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Date of Incident:	Time Incident Occurred:	Type of Incident:	
2/19/2019	2:30pm	<u>Other Emergency Services</u>	
Navigation Center Name	Central Waterfront Navigation Center		
Names of Clients Involved Last Four of SSN	PRINT FIRST NAME AND LAST NAME	LAST FOUR:	
Client A.			
Client B.			
Client C.			
Names of Reporting Staff	Matthew McGill		
Names of Witnesses:	Client Witnesses	Staff Witnesses	
		Matthew McGill	

		Edward Bankston
Summary of Incident – Continue on separate sheet of paper if necessary. (Please do not include client names below. Refer to Client A, Client B, etc.)		
<p>Supervisor Matthew knocked on the door of the Men showers and didn't hear nobody in the showers. So Supervisor Matthew opens the door and saw Client A in the showers sitting area with a blowtorch and a broken pipe in his hands. Very smoking in the showers. Supervisor Matthew asked Client A what was he doing with that, Client A didn't say anything about it. Supervisor Matthew confiscated the blowtorch and reported it to the SM that was on site Kimberly Guillory.</p>		
Describe any injuries observed: n/a	Supervisor Matthew Confiscated the blowtorch from the guest. Then reported it to SM Kimberly	
<input type="checkbox"/> Check if police were involved Time Called: Time Arrived:	N/A	
<input type="checkbox"/> Check if paramedics were involved Time Called: Time Arrived:	Name of Police Officer/Badge No.: N/A Where was the client taken: N/A	
IMPORTANT AGENCY INFORMATION		
Date Form Submitted to HSH	2/19/19	
Person Who Completed Report <i>(please print)</i>	Matthew McGill	
Agency Name/Location/Phone <i>(please print)</i>	Central Waterfront Navigation Center/600 25th St/415-487-3300 Ext 4311	
Supervisor Name and Phone	Kim Guillory	



Department of Homelessness and Supportive Housing Report of Critical Incident

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Date of Incident:	Time Incident Occurred:	Type of Incident:	
2/22/2019	8:20 pm	<u>Other Emergency Services</u>	
Navigation Center Name	Central Waterfront Navigation Center		
Names of Clients Involved Last Four of SSN	PRINT FIRST NAME AND LAST NAME	LAST FOUR:	
Client A.			
Client B.			
Client C.			
Names of Reporting Staff	Jennifer Savidge		
Names of Witnesses:	Client Witnesses	Staff Witnesses	
		Jennifer Savidge	

Summary of Incident – Continue on separate sheet of paper if necessary. (Please do not include client names below. Refer to Client A, Client B, etc.)		
The client was complaining of severe pain in the lower parts of the groin. I called the ambulance for client A at 8:22 pm. The ambulance arrived at 8:48 pm and assessed that he had been in excruciating pain for 45 minutes which came every few minutes and lasted 30 seconds to a minute each time. They assessed the pain was from his groin. The client was saying it felt as though his balls and testicles were about to burst. They immediately took him to the hospital after lifting him onto a gurney.		
Describe any injuries observed:	Describe any action taken by staff: The staff called the ambulance for client A.	
<input type="checkbox"/> Check if police were involved Time Called: Time Arrived:	Describe what actions were performed by the Paramedics or Police: The paramedics assessed where the pain came from and helped client A onto the gurney. They took him to the hospital.	
<input checked="" type="checkbox"/> Check if paramedics were involved Time Called: 8:22 pm Time Arrived: 8:48 pm	Name of Police Officer/Badge No.: Paramedics #70 Where was the client taken: Mission Bay Hospital	
IMPORTANT AGENCY INFORMATION		
Date Form Submitted to HSH		
Person Who Completed Report <i>(please print)</i>	Jennifer Savidge	
Agency Name/Location/Phone <i>(please print)</i>	Central Waterfront Navigation Center/ 600 25 th St. / (415) 487-3300 Ext:4311	
Supervisor Name and Phone	Kimberly Guillory (415)487-3300 Ext:4323	



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- **Lisa Rachowicz, Navigation Centers Program Manager at 415.310-3711, Lisa.Rachowicz@sfgov.org**
- **Email a copy of this form to HSH Data Team at hshdata@sfgov.org**

Date of Incident:	Time Incident Occurred:	Type of Incident:	
2/25/2019	4:05pm	<u>Other Emergency Services</u>	
Navigation Center Name	Central Waterfront Navigation Center		
Names of Clients Involved Last Four of SSN	PRINT FIRST NAME AND LAST NAME	LAST FOUR:	
Client A.			
Client B.			
Client C.			
Names of Reporting Staff	Kimberly Guillory		
	Client Witnesses	Staff Witnesses	
		Patrick Harris	



Names of Witnesses:		
		Jennifer Savidge
Summary of Incident – Continue on separate sheet of paper if necessary. (Please do not include client names below. Refer to Client A, Client B, etc.)		
Staff found a BB gun on top of Client A bed while making rounds at 4:05pm. Client A wasn't at the Nav Center at the time. Client A came back at 7:20pm and stated to the supervisor that the BB gun did belong to her.		
Describe any injuries observed: None	Describe any action taken by staff: Notified police.	
<input checked="" type="checkbox"/> Check if police were involved Time Called: 10:15am Time Arrived: 11:40am	Describe what actions were performed by the Paramedics or Police: Police officer took weapon.	
<input type="checkbox"/> Check if paramedics were involved Time Called: Time Arrived:	Name of Police Officer/Badge No.: Paul #1530 Where was the client taken: N/A	
IMPORTANT AGENCY INFORMATION		
Date Form Submitted to HSH		
Person Who Completed Report <i>(please print)</i>	Kimberly Guillory	
Agency Name/Location/Phone <i>(please print)</i>	Central Waterfront Navigation Center 600 25 th Street, S. F., Ca 94107	
Supervisor Name and Phone	John Warner (415)487-3300 x4423	



Department of Homelessness and Supportive Housing Report of Critical Incident

INSTRUCTIONS FOR REPORTING CRITICAL INCIDENTS

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- **Lisa Rachowicz, Navigation Centers Program Manager at 415.310-3711, Lisa.Rachowicz@sfgov.org**
- **Email a copy of this form to HSH Data Team at hshdata@sfgov.org**

Date of Incident:	Time Incident Occurred:	Type of Incident:	
2/27/2019	2:00am	<u>Violence</u>	
Navigation Center Name	Central Waterfront Navigation Center		
Names of Clients Involved Last Four of SSN	PRINT FIRST NAME AND LAST NAME	LAST FOUR:	
Client A.			
Client B.			
Client C.			
Names of Reporting Staff	Turrell Price		
Names of Witnesses:	Client Witnesses	Staff Witnesses	
		Security Jermane	

**Summary of Incident – Continue on separate sheet of paper if necessary.
(Please do not include client names below. Refer to Client A, Client B, etc.)**

Guest [redacted] Was yelling obsessively in dorm and was asked numerous of times to calm down @ 11:00pm by the departing Supervisor from swing shift Jennifer. @2:00am Guest [redacted] entered the CWNC welcome center to file a noise complaint on guest [redacted] as coordinator Scotty the welcome center, security Jermain and I sup Turrell proceeded to dorm B1 to investigate the complaint while doing so the guest [redacted] became violently threatening towards other guest [redacted] towards Security Jermaine Phillips and towards myself Supervisor Turrell Price. I Sup Turrell asked if the guest would like to step out and talk but she refused and continued to threaten me and all the women in the dorm making them feel unsafe. I asked guest [redacted] would she like medical attention and that security can call 911 for her but she then knocked over other guest property threaten to blow the place up and then stormed out. 911 was called for medical assistance, dispatch said it was non-emergency was police will arrive shortly. Police arrived at 2:30am unit #254. A brief description of the incident and the guest was given to the police. Client has broken rule A3 Verbal threats of violence on premises.

Describe any injuries observed:	Describe any action taken by staff: Called police
<input checked="" type="checkbox"/> Check if police were involved Time Called: 2:15am Time Arrived: 2:30am	Describe what actions were performed by the Paramedics or Police: Police went to search for the client but haven't returned with any update
<input type="checkbox"/> Check if paramedics were involved Time Called: Time Arrived:	Name of Police Officer/Badge No.: unit #254 Where was the client taken: She left on her own

IMPORTANT AGENCY INFORMATION

Date Form Submitted to HSH	3/1/2019
Person Who Completed Report <i>(please print)</i>	Turrell Price
Agency Name/Location/Phone <i>(please print)</i>	Central WaterFront Navigation Center 600 25 th street, s.f., CA 94107
Supervisor Name and Phone	Kimberly Guillory (415)4873300x4323



Department of Homelessness and Supportive Housing Report of Critical Incident

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- **Email a copy of this form to HSH Data Team at hshdata@sfgov.org**

Date of Incident:	Time Incident Occurred:	Type of Incident:	
3/4/2019	7:45pm	<u>Other Emergency Services</u>	
Navigation Center Name	Central Waterfront Navigation Center		
Names of Clients Involved Last Four of SSN	PRINT FIRST NAME AND LAST NAME	LAST FOUR:	
Client A.	_____	_____	
Client B.	_____	_____	
Client C.	_____	_____	
Names of Reporting Staff	Turrell Price		
Names of Witnesses:	Client Witnesses	Staff Witnesses	
		Security Steve	

**Summary of Incident – Continue on separate sheet of paper if necessary.
(Please do not include client names below. Refer to Client A, Client B, etc.)**

Client A entered the facility extremely intoxicated and started verbally harassing, intimidating, and bullying other guests. Client B stated that Client A was yelling and calling him names as well. Also at one point tried to hit him. Client A was asked numerous of times to calm down and go for a walk.
Client A refused therefore the police were called to escort him out.

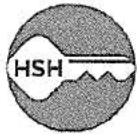
Describe any injuries observed: None	Describe any action taken by staff: Called the police.
--	--

<input checked="" type="checkbox"/> Check if police were involved Time Called: 8:05pm Time Arrived: 8:20pm	Describe what actions were performed by the Paramedics or Police: None
--	---

<input type="checkbox"/> Check if paramedics were involved: Time Called: Time Arrived:	Name of Police Officer/Badge No.: Where was the client taken: Client A left before the police arrived.
--	--

IMPORTANT AGENCY INFORMATION

Date Form Submitted to HSH	
Person Who Completed Report <i>(please print)</i>	Turrell Price
Agency Name/Location/Phone <i>(please print)</i>	Central WaterFront Navigation Center 600 25th Street, S.F., CA 94107
Supervisor Name and Phone	Kimberly Guillory (415)487-3300x4323



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Date of Incident:	Time Incident Occurred:	Type of Incident:	
3/11/2019	3:22pm	<u>Other Emergency Services</u>	
Navigation Center Name	Central Waterfront Navigation Center		
Names of Clients Involved Last Four of SSN	PRINT FIRST NAME AND LAST NAME	LAST FOUR:	
Client A.			
Client B.			
Client C.			
Names of Reporting Staff	Kimberly Guillory		
Names of Witnesses:	Client Witnesses	Staff Witnesses	
		Patrick Harris	

		Herbert Walker
		Glaucia Ajisaka
Summary of Incident – Continue on separate sheet of paper if necessary. (Please do not include client names below. Refer to Client A, Client B, etc.)		
911 was called for Client A because he appeared to be under the influence of something. Staff saw Client A sitting in his bed sweating, pupils appeared to be enlarged, and his eyes were glassy.		
Describe any injuries observed: None	Describe actions taken by staff: Called paramedics and stayed with the guest until they arrived.	
<input type="checkbox"/> Check if police were involved Time Called: Time Arrived:	Describe what actions were performed by the Paramedics or Police: Took vitals and transported him to the hospital.	
☒☒ Check if paramedics were involved: Time Called: 3:23pm Time Arrived: 3:30pm	Name of Police Officer/Badge No.:	
	Where was the client taken: SFGH	
IMPORTANT AGENCY INFORMATION		
Date Form Submitted to HSH	3/12/2019	
Person Who Completed Report <i>(please print)</i>	Kimberly Guillory	
Agency Name/Location/Phone <i>(please print)</i>	Central WaterFront Navigation Center 600 25 th Street, S.F., CA 94107	
Supervisor Name and Phone	John Warner (415)487-3300 x4423	



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- **Lisa Rachowicz, Navigation Centers Program Manager at 415.310-3711, Lisa.Rachowicz@sfgov.org**
- **Email a copy of this form to HSH Data Team at hshdata@sfgov.org**

Date of Incident:	Time Incident Occurred:	Type of Incident:
4/2/2019	8:50pm	<u>Other Emergency Services</u>
Navigation Center Name	Central Waterfront Navigation Center	
Names of Clients Involved Last Four of SSN		LAST FOUR:
Client A.		
Client B.		
Client C.		
Names of Reporting Staff	Turrell L. Price	
Names of Witnesses:	Client Witnesses	Staff Witnesses
		Shandai

Summary of Incident – Continue on separate sheet of paper if necessary. (Please do not include client names below. Refer to Client A, Client B, etc.)	
<p>Client A. was having sharpe pain in his rib area of his body Guest approached me sup Turrell in the welcome and asked for ambulance so I went to see how client A looked and he was hunched over almost falling ut of bed. 911 was called @8:50pm and the ambulance arrived @9:00pm. Eng#64 assisted Client A to UCSF hospital. Client A is able to return when he is released from hospital.</p>	
Describe any injuries observed: Staff leg was bleeding from the dog bite upper thigh.	Describe any action taken by staff: Staff kept Client A. calm until medics arrived
✘ Check if police were involved: Time Called: N/A Time Arrived: N/A	Describe what actions were performed by the Paramedics or Police: Medics took vital signs and transported Client A to the hospital.
✘ Check if paramedics were involved: Time Called: 8:50pm Time Arrived: 9:00pm	Name of Police Officer/Badge No.: Eng #64 Where was the client taken: UCSF
IMPORTANT AGENCY INFORMATION	
Date Form Submitted to HSH	4/3/19
Person Who Completed Report <i>(please print)</i>	Supervisor Turrell Price
Agency Name/Location/Phone <i>(please print)</i>	Central Waterfront Navigation Center,600 25th St., S. F. Ca 94107 415-487-3300 ext:4311
Supervisor Name and Phone	Kim Guillory (415)487-3300 x4323



San Francisco Housing and Homeless Division Report of Critical Incident

INSTRUCTIONS FOR REPORTING CRITICAL INCIDENTS

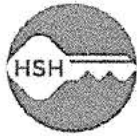
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- **Scott Walton, Manager for Shelters and Navigation Centers at 415.355-5326, scott.walton@sfgov.org**
- **Email a copy of this form to HSH Data Team at hshdata@sfgov.org**

Date of Incident:	Time Incident Occurred:	Type of Incident:
4/12/2019	1:15pm	<u>Other Emergency Services</u>
Navigation Center Name	Central Waterfront Navigation Center	
Names of Clients Involved Last Four of SSN		LAST FOUR:
Client A.		
Client B.		
Client C.		
Names of Reporting Staff	Matthew McGill	





Names of Witnesses:	Client Witnesses	Staff Witnesses
		Matthew McGill
Summary of Incident – Continue on separate sheet of paper if necessary. (Please do not include client names below. Refer to Client A, Client B, etc.)		
Client A called the police to report that Client B stole his rental car. The police came and spoke to the client and a police report was made.		
Describe any injuries observed: N/A	Describe any action taken by staff: Made sure that the client stayed calm.	
<input checked="" type="checkbox"/> Check if police were involved Time Called: 1:18pm Time Arrived: 1:20pm	Describe what actions were performed by the Paramedics or Police: A stolen vehicle report was made.	
<input type="checkbox"/> Check if paramedics were involved Time Called: Time Arrived:	Name of Police Officer/Badge No.: Mayorga #1657	
	Where was the client taken: N/A	
IMPORTANT AGENCY INFORMATION		
Date Form Submitted to HSH	4-12-2019	
Person Who Completed Report <i>(please print)</i>	Matthew McGill	
Agency Name/Location/Phone <i>(please print)</i>	Central Waterfront Navigation Center 600 25 th Street, San Francisco, Ca 94107 (415)487-3300 x4311	
Supervisor Name and Phone	Kimberly Guillory (415)487-3300 x4323	





San Francisco Housing and Homeless Division Report of Critical Incident

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Date of Incident:	Time Incident Occurred:	Type of Incident:	
4/14/2019	6:22 pm	<u>Other Emergency Services</u>	
Navigation Center Name	Central Waterfront Navigation Center		
Names of Clients Involved Last Four of SSN	PRINT FIRST NAME AND LAST NAME	LAST FOUR:	
Client A.	_____	_____	
Client B.	_____	_____	
Client C.	_____	_____	
Names of Reporting Staff	Jennifer Savidge		





Names of Witnesses:		Client Witnesses	Staff Witnesses
			Jennifer Savidge
Summary of Incident – Continue on separate sheet of paper if necessary. (Please do not include client names below. Refer to Client A, Client B, etc.)			
Client A requested an ambulance due to an infected lower right leg. I called the ambulance and they assessed the wounds on his lower leg. They then took him to General Hospital for treatment. Eng#87			
Describe any injuries: Observed Lower leg infection		Describe any action taken by staff: I called the ambulance for the client.	
<input type="checkbox"/> Check if police were involved Time Called: Time Arrived:		Describe what actions were performed by the Paramedics or Police: The paramedics unwrapped his leg and assessed his infection.	
<input checked="" type="checkbox"/> Check if paramedics were involved Time Called: 6:22 pm Time Arrived: 6:32 pm		Name of Police Officer/Badge No: Where was the client taken: General Hospital	
IMPORTANT AGENCY INFORMATION			
Date Form Submitted to HSH		4-15-2019	
Person Who Completed Report <i>(please print)</i>		Jennifer Savidge	
Agency Name/Location/Phone <i>(please print)</i>		Central Waterfront Navigation Center/600 25 th st./415-487-3300 ext. 4311	
Supervisor Name and Phone		Kimberly Guillory/415-487-3300 ext. 4323	





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INSTRUCTIONS FOR REPORTING CRITICAL INCIDENTS

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A completed Report of Critical Incident form should be forwarded to HSH within **24 hours of the incident** preferably by **email** or TYPE OR PRINT LEGIBLY USING LARGE BLACK. Please fill in all spaces on the form using N/A if appropriate. **When a death or serious incident occurs, staff should contact HSH immediately and leave a message detailing the event as well as submit a Report of Critical Incident to:**

- **Janay Washington, Navigation Centers Program Specialist at 415.355-5331, Janay.Washington@sfgov.org**
- **Lisa Rachowicz, Navigation Centers Program Manager at 415.310-3711, Lisa.Rachowicz@sfgov.org**
- **Email a copy of this form to HSH Data Team at hshdata@sfgov.org**

Date of Incident:	Time Incident Occurred:	Type of Incident:	
4/19/2019	3:35am	<u>Other Emergency Services</u>	
Navigation Center Name	Central Waterfront Navigation Center		
Names of Clients Involved Last Four of SSN	Antwan Tolbert	LAST FOUR:	
Client A.			
Client B.			
Client C.			
Names of Reporting Staff			
Names of Witnesses:	Client Witnesses	Staff Witnesses	
		Gabriel Campos	

		Scotty Manley
<p align="center">Summary of Incident – Continue on separate sheet of paper if necessary. (Please do not include client names below. Refer to Client A, Client B, etc.)</p>		
<p>3:35 am- Fire alarm began to go off. The panel in the welcome center identified that the smoke detector in dorm B-2 was the one activated. SC Scotty and I proceeded to dorm B-2 to investigate the alarm. While entering dorm B-2 Client A was observed exiting the back door of dorm B-2. Dorm B-2 had an odor of what could have been burning plastic. Client A then made his way towards the front of the facility and exited the site.</p>		
<p>3:46 am- SFFD engine #25 Arrived on site. Two SFFD firefighters and I proceeded to dorm B-2 to verify the cause of the alarm. There were no signs of fire in the dorm and SFFD reset the alarm system and left the facility. No further incident to report</p>		
Describe any injuries observed:		Describe any action taken by staff:
<input type="checkbox"/> Check if police were involved Time Called: Time Arrived:		Describe what actions were performed by the Paramedics or Police:
<input checked="" type="checkbox"/> Check if paramedics were involved Time Called: Time Arrived:		Name of Police Officer/Badge No.
		Where was the client taken:
IMPORTANT AGENCY INFORMATION		
Date Form Submitted to HSH		
Person Who Completed Report <i>(please print)</i>		Supervisor Gabriel Campos
Agency Name/Location/Phone <i>(please print)</i>		Central Waterfront Navigation Center/600 25th St./415-487-3300 ext:4323
Supervisor Name and Phone		Kim Guillory



Department of Homelessness and Supportive Housing Report of Critical Incident

INSTRUCTIONS FOR REPORTING CRITICAL INCIDENTS

All Navigation Centers should report critical incidents to the Department of Homelessness and Housing as soon as possible. Types of critical incidents include: death, acts of violence, arrests, fire, sexual assaults, suicide attempts or any other critical incidents which require the involvement of emergency services.

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- **Janay Washington, Navigation Centers Program Specialist at 415.355-5331, Janay.Washington@sfgov.org**
- **Lisa Rachowicz, Navigation Centers Program Manager at 415.310-3711, Lisa.Rachowicz@sfgov.org**
- **Email a copy of this form to HSH Data Team at hshdata@sfgov.org**

Date of Incident:	Time Incident Occurred:	Type of Incident:
4/21/19	5:09pm	<u>Other Emergency Services</u>
Navigation Center Name	Central Waterfront Navigation Center	
Names of Clients Involved Last Four of SSN		LAST FOUR:
Client A.		
Client B.		
Client C.		
Names of Reporting Staff	Matthew McGill	
Names of Witnesses:	Client Witnesses	Staff Witnesses
		Matthew McGill

Summary of Incident – Continue on separate sheet of paper if necessary. (Please do not include client names below. Refer to Client A, Client B, etc.)	
Client A having a hard time moving her arms and legs. Engine E25, Ambulance 63	
Describe any injuries observed:	Describe any action taken by staff: Supervisor Matthew calls for Paramedics
Check if police were involved: Time Called: Time Arrived:	Describe what actions were performed by the Paramedics or Police: Paramedics helped guest up from her bed area, helped her to sit down in the chair, and wheeled her to the ambulance for further evaluation.
Check if paramedics were involved: Time Called: 5:09pm Time Arrived: 5:15pm	Name of Police Officer/Badge No.: Where was the client taken: General Hospital
IMPORTANT AGENCY INFORMATION	
Date Form Submitted to HSH	4/21/19
Person Who Completed Report <i>(please print)</i>	Matthew McGill
Agency Name/Location/Phone <i>(please print)</i>	Central Waterfront Navigation Center 600 25th St., S. F. Ca 94107 (415)487-3300 X4311
Supervisor Name and Phone	Kim Guillory (415)487-3300 x4323



Department of Homelessness and Supportive Housing Report of Critical Incident

INSTRUCTIONS FOR REPORTING CRITICAL INCIDENTS

All Navigation Centers should report critical incidents to the Department of Homelessness and Housing as soon as possible. Types of critical incidents include: death, acts of violence, arrests, fire, sexual assaults, suicide attempts or any other critical incidents which require the involvement of emergency services.

A completed Report of Critical Incident form should be forwarded to HSH within **24 hours of the incident** preferably by **email** or TYPE OR PRINT LEGIBLY USING LARGE BLACK. Please fill in all spaces on the form using N/A if appropriate. **When a death or serious incident occurs, staff should contact HSH immediately and leave a message detailing the event as well as submit a Report of Critical Incident to:**

- **Janay Washington, Navigation Centers Program Specialist at 415.355-5331, Janay.Washington@sfgov.org**
- **Lisa Rachowicz, Navigation Centers Program Manager at 415.310-3711, Lisa.Rachowicz@sfgov.org**
- **Email a copy of this form to HSH Data Team at hshdata@sfgov.org**

Date of Incident:	Time Incident Occurred:	Type of Incident:
4/30/19	4:30pm	<u>Other Emergency Services</u>
Navigation Center Name	Central Waterfront Navigation Center	
Names of Clients Involved		
Last Four of SSN		LAST FOUR:
Client A.		
Client B.		
Client C.		
Names of Reporting Staff	Supervisor-Rhonda Reed	
Names of Witnesses:	Client Witnesses	Staff Witnesses
		Patrick Harris, Otis Broom

	Ray H. Ray
	Shandai Sawyer
Summary of Incident – Continue on separate sheet of paper if necessary. (Please do not include client names below. Refer to Client A, Client B, etc.)	
Staff tried to deescalate an angry guest. Otis came out to talk to client A but he became irate and then threatened the staff. He was carrying scissors. He was asked what was he doing with them, he replied, you know what I'm going to do I came to attack. Rhonda came in asked site manager Kim G to call the police.	
Describe any injuries observed: N/A	Describe any action taken by staff:
Check if police were involved: Time Called: 4:25 pm Time Arrived: 4:30 pm	Describe what actions were performed by the Paramedics or Police: The police arrived within 5 minutes and apprehended client A.
Check if paramedics were involved: Time Called: na Time Arrived: na	Name of Police Officer/Badge No.: 790 Reiter
	Where was the client taken: Bayshore Police Department
IMPORTANT AGENCY INFORMATION	
Date Form Submitted to HSH	4/30/19
Person Who Completed Report <i>(please print)</i>	Rhonda Reed
Agency Name/Location/Phone <i>(please print)</i>	Central Waterfront Navigation Center 600 25 th St., S. F. Ca 94107 (415)487-3300 X4311
Supervisor Name and Phone	Rhonda Reed (415)487-3300 x4323

Heckel, Hank (MYR)

From: Marshall, Kaki (HOM)
Sent: Friday, April 12, 2019 10:32 AM
To: Rachowicz, Lisa (HOM); Cannariato, Umecke (HOM); Meskan, Brenda (HOM); wdolcini@chp.ca.gov; Dodge, Sam (DPW); Benavidez, Louie (POL); Cherniss, Jason (POL)
Cc: Streets, Healthy (DEM); Walton, Scott (HOM)
Subject: Re: Tents directly behind Bryant Nav

Brenda please report back to me when you do the Outreach so I can post it here at HSOC and make sure we are tracking Dolcini's response and reporting back to The team here what work is happening.

Warmest Regards-
Kaki

(Prounouns, She/Hers, They/Them)
Kaki W. Marshall MPP
Director Of Outreach and Interim Housing
City and County of San Francisco
Department of Homelessness and Supportive Housing

From: Rachowicz, Lisa (HOM)
Sent: Friday, April 12, 2019 10:00 AM
To: Cannariato, Umecke (HOM); Meskan, Brenda (HOM); wdolcini@chp.ca.gov
Cc: Streets, Healthy (DEM); Marshall, Kaki (HOM); Walton, Scott (HOM)
Subject: RE: Tents directly behind Bryant Nav

Thank you all! Much appreciated!!

Lisa



Lisa Rachowicz, LCSW

Navigation Centers Program Manager
San Francisco Department of Homelessness and Supportive Housing
lisa.rachowicz@sfgov.org | NEW PHONE [REDACTED] | F: 415.355.7408

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From: Cannariato, Umecke (HOM) <umecke.cannariato@sfgov.org>
Sent: Friday, April 12, 2019 9:57 AM
To: Meskan, Brenda (HOM) <brenda.meskan@sfgov.org>; wdolcini@chp.ca.gov
Cc: Rachowicz, Lisa (HOM) <lisa.rachowicz@sfgov.org>; Streets, Healthy (DEM) <healthystreets@sfgov.org>; Marshall,

Kaki (HOM) <kaki.marshall@sfgov.org>; Walton, Scott (HOM) <Scott.Walton@sfgov.org>

Subject: RE: Tents directly behind Bryant Nav

Also Adding Brenda from ERT – she taking the need focus around the navs.

Thanks everyone for you hard work on these efforts, Mecca

Mecca Cannariato, LCSW, MPA

Outreach Manager

San Francisco Department of Homelessness & Supportive Housing

City & County of San Francisco

Umecke.Cannariato@sfgov.org | Phone: 415.525.1257 | F: 415.355.7408

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From: Rachowicz, Lisa (HOM)

Sent: Friday, April 12, 2019 9:42 AM

To: Streets, Healthy (DEM) <healthystreets@sfgov.org>; Cannariato, Umecke (HOM) <umecke.cannariato@sfgov.org>; Marshall, Kaki (HOM) <kaki.marshall@sfgov.org>; Walton, Scott (HOM) <Scott.Walton@sfgov.org>; wdolcini@chp.ca.gov

Subject: RE: Tents directly behind Bryant Nav

Adding Officer Dolcini.



Lisa Rachowicz, LCSW

Navigation Centers Program Manager

San Francisco Department of Homelessness and Supportive Housing

lisa.rachowicz@sfgov.org | NEW PHONE [REDACTED] | F: 415.355.7408

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From: Rachowicz, Lisa (HOM)

Sent: Friday, April 12, 2019 9:39 AM

To: Streets, Healthy (DEM) <healthystreets@sfgov.org>; Cannariato, Umecke (HOM) <umecke.cannariato@sfgov.org>; Marshall, Kaki (HOM) <kaki.marshall@sfgov.org>; Walton, Scott (HOM) <scott.walton@sfgov.org>

Subject: Tents directly behind Bryant Nav

Hi all,

There are 3 tents and 9+ people camped directly along the fence behind the Bryant Nav Center. They arrived late yesterday, and they have a lot of stuff with them – bike parts, belongings, etc. I do not have any photos.

If there is an outreach effort for these folks that result in a Nav placement, please do not place them at Bryant Nav Center.

Thanks,
Lisa



Lisa Rachowicz, LCSW

Navigation Centers Program Manager
San Francisco Department of Homelessness and Supportive Housing
lisa.rachowicz@sfgov.org | NEW PHONE [REDACTED] F: 415.355.7408

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Heckel, Hank (MYR)

From: Rachowicz, Lisa (HOM)
Sent: Tuesday, April 09, 2019 6:28 PM
To: Artie Gilbert
Cc: Lena Miller; Tony Chase
Subject: RE: Fwd: Tent and Items

Thank you, Artie!

Lisa Rachowicz, LCSW
Navigation Centers Program Manager
San Francisco Department of Homelessness and Supportive Housing
lisa.rachowicz@sfgov.org | NEW PHONE [REDACTED] | F: 415.355.7408

Learn: hsh.sfgov.org | Follow: @SF_HSH | Like: @SanFranciscoHSH

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From: Artie Gilbert <artieg@fivekeys.org>
Date: Tuesday, Apr 09, 2019, 3:32 PM
To: Rachowicz, Lisa (HOM) <lisa.rachowicz@sfgov.org>
Cc: Lena Miller <lenam@fivekeys.org>, Tony Chase <tonyc@fivekeys.org>
Subject: Fwd: Tent and Items

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Hi Lisa,

Here is a tent on BARNEVELD AVE and the nearest cross street is JERROLD AVE.
The other photo is items left behind on the corner of BARNEVELD AVE and JERROLD AVE.
I called 311 and reported it.

Thank you,

Artie

----- Forwarded message -----

From: Artie Gilbert <artieg@fivekeys.org>
Date: Tue, Apr 9, 2019 at 2:37 PM
Subject: Tent and Items
To: <artieg@fivekeys.org>

Sent from my iPhone

--



ARTIE GILBERT (he/him)
ASST. DIRECTOR OF OPERATIONS
D: 415.734.3310
F: 415.734.3314
E: artieg@fivekeys.org
A: 70 Oak Grove Street, San Francisco, CA 94107
W: www.fivekeys.org

Heckel, Hank (MYR)

From: Rachowicz, Lisa (HOM)
Sent: Tuesday, April 09, 2019 6:27 PM
To: Streets, Healthy (DEM); Cannariato, Umecke (HOM); Marshall, Kaki (HOM); Walton, Scott (HOM)
Subject: Tent near Bayshore Navigation Center
Attachments: IMG_1117.jpg; IMG_1116.jpg

Hi all,

Outside Bayshore Nav Center, there is a tent on BARNEVELD AVE and the nearest cross street is JERROLD AVE.

The other photo is items left behind on the corner of BARNEVELD AVE and JERROLD AVE.

Thanks,

Lisa Rachowicz, LCSW
Navigation Centers Program Manager
San Francisco Department of Homelessness and Supportive Housing
lisa.rachowicz@sfgov.org | NEW PHONE [REDACTED] F: 415.355.7408

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From: Artie Gilbert <artieg@fivekeys.org>
Date: Tuesday, Apr 09, 2019, 3:32 PM
To: Rachowicz, Lisa (HOM) <lisa.rachowicz@sfgov.org>
Cc: Lena Miller <lnam@fivekeys.org>, Tony Chase <tonyc@fivekeys.org>
Subject: Fwd: Tent and Items

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Hi Lisa,

Here is a tent on BARNEVELD AVE and the nearest cross street is JERROLD AVE.
The other photo is items left behind on the corner of BARNEVELD AVE and JERROLD AVE.
I called 311 and reported it.

Thank you,

Artie

----- Forwarded message -----

From: **Artie Gilbert** <artieg@fivekeys.org>

Date: Tue, Apr 9, 2019 at 2:37 PM

Subject: Tent and Items

To: <artieg@fivekeys.org>

Sent from my iPhone



ARTIE GILBERT (he/him)
ASST. DIRECTOR OF OPERATIONS
D: 415.734.3310
F: 415.734.3314
E: artieg@fivekeys.org
A: 70 Oak Grove Street, San Francisco, CA 94107
W: www.fivekeys.org

Heckel, Hank (MYR)

From: Rachowicz, Lisa (HOM)
Sent: Friday, April 05, 2019 10:43 AM
To: Streets, Healthy (DEM); Cannariato, Umecke (HOM); Walton, Scott (HOM); Marshall, Kaki (HOM)
Subject: Tents near Bryant Nav Center

Hi all,

Bryant Navigation Center has reported about 8 tent in the area around their program. 5 tents by the circle and 3 tents across 5th street.

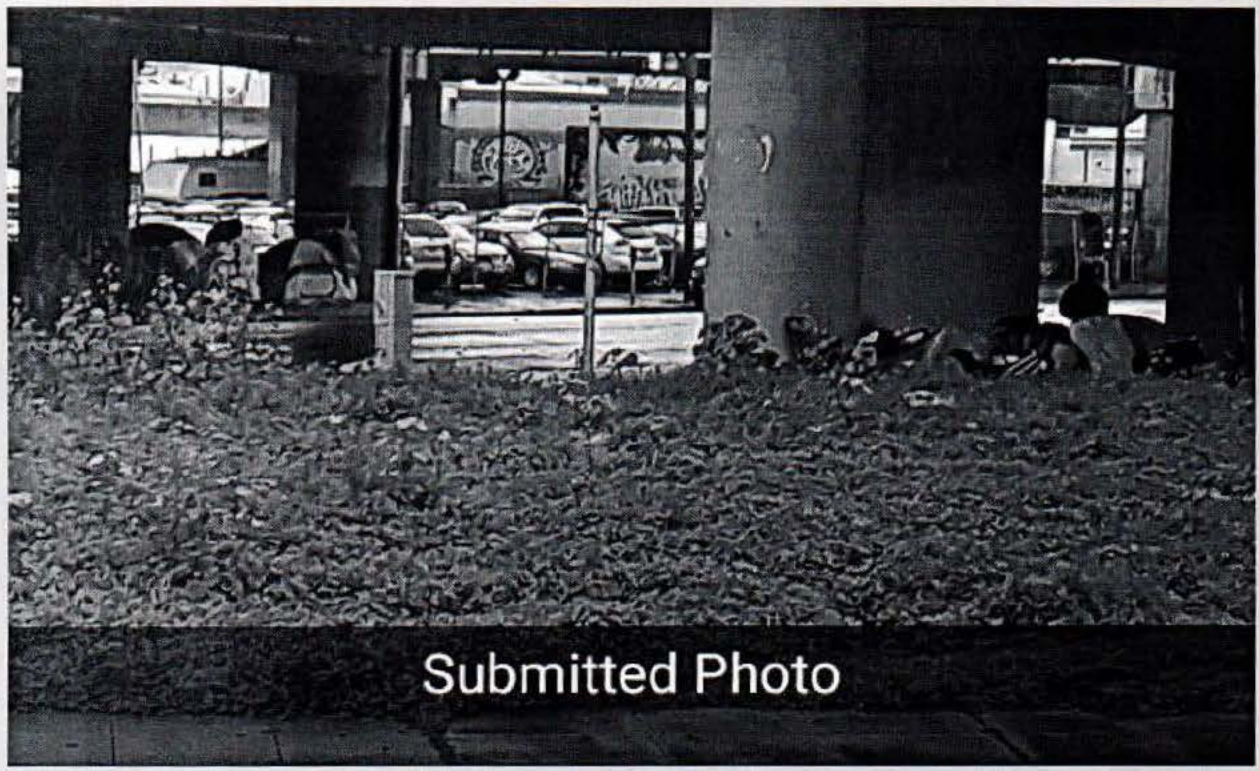
Thanks!



#10689943



Encampment at Intersection of I 80 E Off Ramp & I 80 Eastbound



Submitted Photo

On both sides of 5th street

Is there criminal activity? No | How many people? More than 6 People | How many tents, structures, or tarps? More than 6 Structures | How many shopping carts? 4 - 6 Carts | Is encampment blocking sidewalk? Yes | Are there dogs? Yes |

Lisa Rachowicz, LCSW

Navigation Centers Program Manager
Department of Homelessness and Supportive Housing
City and County of San Francisco
1360 Mission St.
San Francisco, CA 94102

Cell: [REDACTED]
lisa.rachowicz@sfgov.org

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Heckel, Hank (MYR)

From: Rachowicz, Lisa (HOM)
Sent: Thursday, April 04, 2019 2:14 PM
To: Alex Napitan
Cc: Kathy Treggiari; John Ouertani; John Warner; Michael Johnson
Subject: RE: Support and Update

Wonderful! I'm so glad that happened! Thank you ECS for your diligent reporting of tents and debris!

Take care,
Lisa



Lisa Rachowicz, LCSW

Navigation Centers Program Manager
San Francisco Department of Homelessness and Supportive Housing
lisa.rachowicz@sfgov.org | NEW PHONE [REDACTED] | F: 415.355.7408

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From: Alex Napitan <ANapitan@ecs-sf.org>
Sent: Thursday, April 4, 2019 12:46 PM
To: Rachowicz, Lisa (HOM) <lisa.rachowicz@sfgov.org>
Cc: Kathy Treggiari <ktreggiari@ecs-sf.org>; John Ouertani <jouertani@ecs-sf.org>; John Warner <jwarner@ecs-sf.org>; Michael Johnson <MJohnson@ecs-sf.org>
Subject: RE: Support and Update

Hi Lisa

I wanted to thank you for your support. They came today and cleared out all the pipes and debris in the back of the Bryant Navigation Center / Bryant Homeless Storage Program.

Alex Napitan
Property Storage Program Manager
O 415-487-3300 X4429
C [REDACTED]

From: Rachowicz, Lisa (HOM) [<mailto:lisa.rachowicz@sfgov.org>]
Sent: Tuesday, April 2, 2019 10:39 AM

To: Alex Napitan <ANapitan@ecs-sf.org>
Cc: Kathy Treggiari <ktreggiari@ecs-sf.org>; John Ouertani <jouertani@ecs-sf.org>
Subject: RE: Support and Update

Hi Alex,

That is wonderful to hear that things are starting to pick up! Great work!

I have forwarded this photo and a request for the Department of Public Works to come and clean up these items. The land behind the program belongs to CalTrans, so sometimes jurisdiction issues can get complicated. I'll hopefully hear back from them soon about the clean up plan. Please let me know if anything changes, as sometimes they just go respond to my requests without circling back around to me, so I don't know when it gets done. If the stuff is still there later this week, please email me again.

John Warner is also emailing me pretty regularly about the tents that show up back there. I really appreciate all the notifications!

Take care,
Lisa



Lisa Rachowicz, LCSW

Navigation Centers Program Manager
San Francisco Department of Homelessness and Supportive Housing
lisa.rachowicz@sfgov.org [REDACTED] F: 415.355.7408

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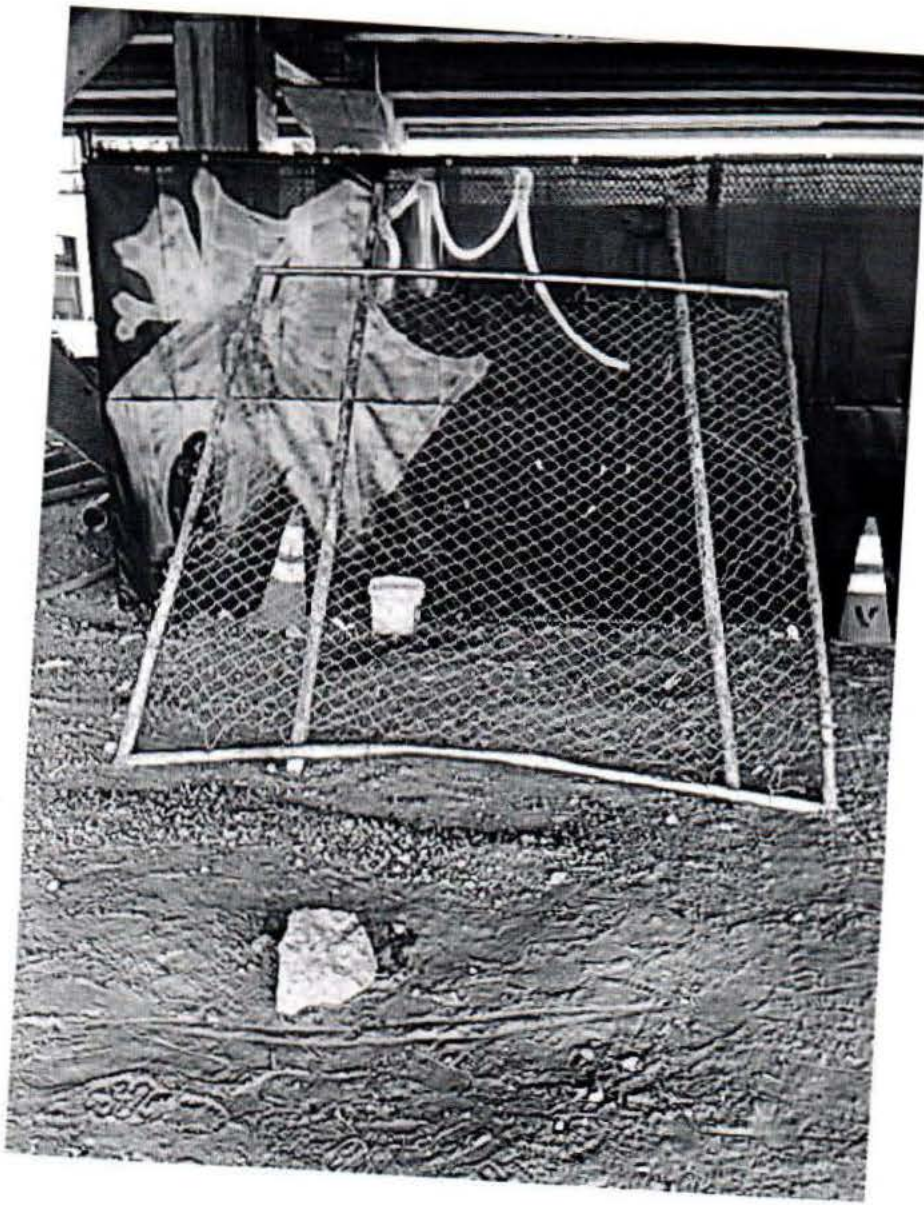
From: Alex Napitan <ANapitan@ecs-sf.org>
Sent: Monday, April 1, 2019 11:54 AM
To: Rachowicz, Lisa (HOM) <lisa.rachowicz@sfgov.org>
Cc: Kathy Treggiari <ktreggiari@ecs-sf.org>; John Ouertani <jouertani@ecs-sf.org>
Subject: Support and Update

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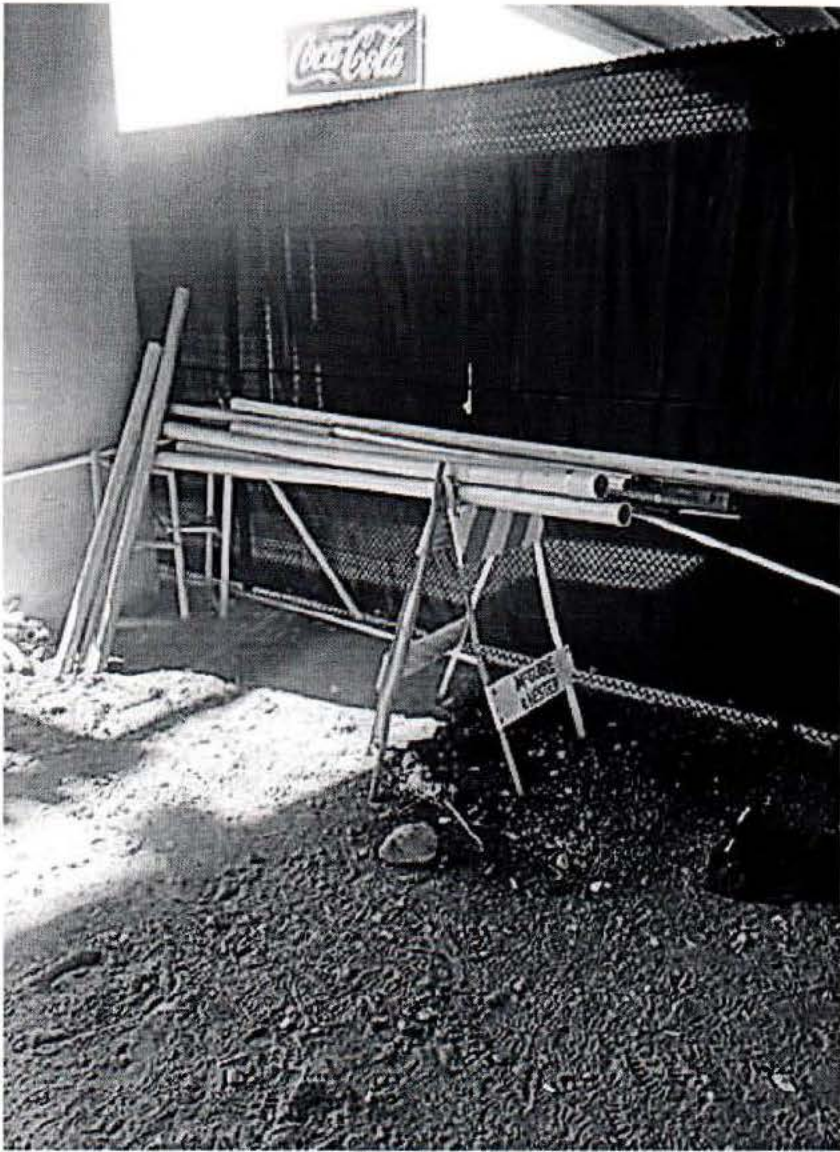
Hi Lisa

I was hoping you could support me with something. Below are a few images of what I have been finding behind the Navigation Center/Storage Program Area. Can DPW come out and remove these items I believe it would be safer for the Navigation Center and Storage Program area if that back area was cleared. Let me know if there is anything I need to do to make that happen. Also things are going well with the storage program. We are starting to pick up, we are seeing about 5 to 7 people a day some storing and some just gathering information about the program. We are currently up to

24 clients that are using the program right now and a few have end their storage. So far all guest have been giving us positive feedback and are grateful the program exist .









Alex Napitan
Property Storage Program Manager
415-487-3300 X4429 415-988-3485

Heckel, Hank (MYR)

From: Cannariato, Umecke (HOM)
Sent: Wednesday, April 03, 2019 4:42 PM
To: Dodge, Sam (DPW)
Cc: Rachowicz, Lisa (HOM); Marshall, Kaki (HOM)
Subject: RE: Structure and Debris near Bayshore Navigation Center

Thank you Sam.

Mecca Cannariato, LCSW, MPA
Outreach Manager
San Francisco Department of Homelessness & Supportive Housing
City & County of San Francisco
Umecke.Cannariato@sfgov.org | Phone: 415.525.1257 | F: 415.355.7408
Learn: hsh.sfgov.org | Follow: [@SF_HSH](https://twitter.com/SFHSH) | Like: [@SanFranciscoHSH](https://twitter.com/SanFranciscoHSH)

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From: Dodge, Sam (DPW)
Sent: Wednesday, April 03, 2019 4:41 PM
To: Cannariato, Umecke (HOM) <umecke.cannariato@sfgov.org>
Cc: Rachowicz, Lisa (HOM) <lisa.rachowicz@sfgov.org>; Marshall, Kaki (HOM) <kaki.marshall@sfgov.org>
Subject: Re: Structure and Debris near Bayshore Navigation Center

We got a bit bogged down in the Bayview today but the crew will come to address the location first thing in the AM. Sorry for the delay.
Sam

On Apr 3, 2019, at 1:36 PM, Cannariato, Umecke (HOM) <umecke.cannariato@sfgov.org> wrote:

Thank you Sam!!

Mecca Cannariato, LCSW, MPA
Outreach Manager
San Francisco Department Homelessness & Supportive Housing
City & County of San Francisco
umecke.cannariato@sfgov.org | phone 415-525-1257

From: Dodge, Sam (DPW)
Sent: Wednesday, April 3, 2019 12:42:33 PM
To: Cannariato, Umecke (HOM)
Cc: Rachowicz, Lisa (HOM); Marshall, Kaki (HOM)
Subject: Re: Structure and Debris near Bayshore Navigation Center

No add me to the email. I will send a truck out now. 311's related to homeless encampments will come to HSOC but not to Public Works. Let me know if your needing assistance from Public Works.
Sam

Sam Dodge

Homelessness Coordinator
San Francisco Public Works | City and County of San Francisco
1155 Market Street, 4th Floor | San Francisco, CA 94102
Office: (415) 554-4813 Text: 718-755-2338

sfpublicworks.org · twitter.com/sfpublicworks

From: Cannariato, Umecke (HOM)
Sent: Wednesday, April 3, 2019 12:36 PM
To: Dodge, Sam (DPW)
Cc: Rachowicz, Lisa (HOM); Marshall, Kaki (HOM)
Subject: FW: Structure and Debris near Bayshore Navigation Center

Hi Sam:
Are you getting these reports from Health Streets email?

Lisa is emailing requesting asking for DPW support. Please confirm, thanks!

Mecca Cannariato, LCSW, MPA

Outreach Manager
San Francisco Department of Homelessness & Supportive Housing
City & County of San Francisco
Umecke.Cannariato@sfgov.org | Phone: 415.525.1257 | F: 415.355.7408
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From: Rachowicz, Lisa (HOM)
Sent: Wednesday, April 03, 2019 10:37 AM
To: Streets, Healthy (DEM) <healthystreets@sfgov.org>; Marshall, Kaki (HOM) <kaki.marshall@sfgov.org>; Cannariato, Umecke (HOM) <umecke.cannariato@sfgov.org>; Walton, Scott (HOM) <Scott.Walton@sfgov.org>
Subject: Structure and Debris near Bayshore Navigation Center

Hi everyone,

There is a cardboard structure, some discarded items, and debris around the Bayshore Navigation Center. The structure is on Barneveld Ave across the street from building 125 Food Service Distribution. Nearest cross-street is Jerrold Ave.

The Bayshore NC program staff cleaned up much of the debris themselves on the street and sidewalk around the program, which they report doing regularly. Is it possible to get more DPW support for this area? I have encouraged them to make 311 reports and report to me daily, as needed.

Thanks,
Lisa



Lisa Rachowicz, LCSW

Navigation Centers Program Manager
San Francisco Department of Homelessness and Supportive Housing
lisa.rachowicz@sfgov.org | F: 415.355.7408

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From: Artie Gilbert <artieg@fivekeys.org>
Sent: Tuesday, April 2, 2019 1:42 PM
To: Rachowicz, Lisa (HOM) <lisa.rachowicz@sfgov.org>
Cc: Lena Miller <lenam@fivekeys.org>; Tony Chase <tonyc@fivekeys.org>
Subject: Fwd: Tent and Debris

This message is from outside the City email system. Do not open links or attachments from untrusted sources.

Hi Lisa,

I made a call to 311 this morning to report a tent and debris on BARNEVELD AVE across the street from building 125 Food Service Distribution. It was a lot of trash piled up on BARNEVELD AVE and we cleaned it up. The nearest cross street is JERROLD AVE.

Thank you,
Artie

Thank you,
Artie

----- Forwarded message -----
From: **Artie Gilbert** <artieg@fivekeys.org>

Date: Tue, Apr 2, 2019 at 12:04 PM
Subject: Tent and Debris
To: <artieg@fivekeys.org>

Sent from my iPhone

--



ARTIE GILBERT (he/him)
ASST. DIRECTOR OF OPERATIONS
D: 415.734.3310
F: 415.734.3314
E: artieg@fivekeys.org
A: 70 Oak Grove Street, San Francisco, CA 94107
W: www.fivekeys.org

Heckel, Hank (MYR)

From: Rachowicz, Lisa (HOM)
Sent: Wednesday, April 03, 2019 10:55 AM
To: Artie Gilbert
Cc: Lena Miller; Tony Chase
Subject: RE: Tent and Debris

Thanks Artie! I have forwarded this on to Healthy Streets (HSOC). Please continue to report to me and to 311 any tent, structure, and/or debris around the program. For the debris, if it is a lot, I would prefer that you hold off on cleaning it up yourselves to see if 311 responds. I am requesting more support from DPW in cleaning around the area. They will look at past reports of debris to see the level of need for cleaning. It's also a lot of work for your staff to be cleaning up large amounts of trash on the streets regularly – above and beyond. For smaller amounts of trash and any trash right outside your door, I think that is realistic for your team to address, as you have been doing.

Thanks for all your commitment to our Good Neighbor Policy and your community!

Thanks,
Lisa



Lisa Rachowicz, LCSW

Navigation Centers Program Manager
San Francisco Department of Homelessness and Supportive Housing
lisa.rachowicz@sfgov.org | [REDACTED] | F: 415.355.7408

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From: Artie Gilbert <artieg@fivekeys.org>
Sent: Tuesday, April 2, 2019 1:42 PM
To: Rachowicz, Lisa (HOM) <lisa.rachowicz@sfgov.org>
Cc: Lena Miller <lenam@fivekeys.org>; Tony Chase <tonyc@fivekeys.org>
Subject: Fwd: Tent and Debris

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Hi Lisa,

I made a call to 311 this morning to report a tent and debris on BARNEVELD AVE across the street from building 125 Food Service Distribution. It was a lot of trash piled up on BARNEVELD AVE and we cleaned it up. The nearest cross street is JERROLD AVE.

Thank you,
Artie

Thank you,

Artie

----- Forwarded message -----

From: **Artie Gilbert** <artieg@fivekeys.org>

Date: Tue, Apr 2, 2019 at 12:04 PM

Subject: Tent and Debris

To: <artieg@fivekeys.org>

Sent from my iPhone

--



ARTIE GILBERT (he/him)
ASST. DIRECTOR OF OPERATIONS
D: 415.734.3310
F: 415.734.3314
E: artieg@fivekeys.org
A: 70 Oak Grove Street, San Francisco, CA 94107
W: www.fivekeys.org

Heckel, Hank (MYR)

From: Rachowicz, Lisa (HOM)
Sent: Wednesday, April 03, 2019 10:41 AM
To: Cannariato, Umecke (HOM); Streets, Healthy (DEM); Marshall, Kaki (HOM); Walton, Scott (HOM)
Subject: RE: Tents and junk behind Bryant Nav Center

Yes, we are doing that as well.

Thanks,
Lisa



Lisa Rachowicz, LCSW

Navigation Centers Program Manager
San Francisco Department of Homelessness and Supportive Housing
lisa.rachowicz@sfgov.org | [REDACTED] | F: 415.355.7408

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From: Cannariato, Umecke (HOM) <umecke.cannariato@sfgov.org>
Sent: Tuesday, April 2, 2019 12:23 PM
To: Rachowicz, Lisa (HOM) <lisa.rachowicz@sfgov.org>; Streets, Healthy (DEM) <healthystreets@sfgov.org>; Marshall, Kaki (HOM) <kaki.marshall@sfgov.org>; Walton, Scott (HOM) <Scott.Walton@sfgov.org>
Subject: RE: Tents and junk behind Bryant Nav Center

Thanks Lisa, can you also call 311 to place a ticket for DPW to clean.

Mecca Cannariato, LCSW, MPA

Outreach Manager
San Francisco Department of Homelessness & Supportive Housing
City & County of San Francisco
Umecke.Cannariato@sfgov.org | Phone: 415.525.1257 | F: 415.355.7408

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From: Rachowicz, Lisa (HOM)
Sent: Tuesday, April 02, 2019 10:34 AM
To: Streets, Healthy (DEM) <healthystreets@sfgov.org>; Marshall, Kaki (HOM) <kaki.marshall@sfgov.org>; Walton, Scott

(HOM) <Scott.Walton@sfgov.org>; Cannariato, Umecke (HOM) <umecke.cannariato@sfgov.org>

Subject: Tents and junk behind Bryant Nav Center

Hi all,

There are 1-2 tents under the freeway ramp behind Bryant Navigation Center. 5 people seen back there. Sorry, no photo.

Also, there is a lot of accumulated junk, such as pipes, fencing, and other construction materials. See photos below. Would it be possible for DPW to clean up that stuff? **The fence part has been used as a ladder to climb over the fence into the Bryant Homeless Storage Program numerous times.** This is a safety concern.

Thanks,
Lisa





Lisa Rachowicz, LCSW

Navigation Centers Program Manager

San Francisco Department of Homelessness and Supportive Housing

lisa.rachowicz@sfgov.org | [REDACTED] F: 415.355.7408

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From: Rachowicz, Lisa (HOM) <lisa.rachowicz@sfgov.org>

Sent: Tuesday, April 2, 2019 9:58 AM

To: Rachowicz, Lisa (HOM) <lisa.rachowicz@sfgov.org>

Subject: Bryant tents



Lisa Rachowicz, LCSW
Navigation Centers Program Manager
Department of Homelessness and Supportive Housing
City and County of San Francisco
1360 Mission St.
San Francisco, CA 94102

Cell: [REDACTED]
lisa.rachowicz@sfgov.org

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Heckel, Hank (MYR)

From: Rachowicz, Lisa (HOM)
Sent: Tuesday, April 02, 2019 9:58 AM
To: Rachowicz, Lisa (HOM)
Subject: Bryant tents





Lisa Rachowicz, LCSW

Navigation Centers Program Manager
Department of Homelessness and Supportive Housing
City and County of San Francisco
1360 Mission St.
San Francisco, CA 94102

Cell: [REDACTED]
lisa.rachowicz@sfgov.org

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Heckel, Hank (MYR)

From: Rachowicz, Lisa (HOM)
Sent: Friday, March 29, 2019 1:04 PM
To: Streets, Healthy (DEM); Cannariato, Umecke (HOM); Walton, Scott (HOM); Marshall, Kaki (HOM)
Subject: Tent across street from Division Circle Nav Center

Hi all,

There is 1 red and gray tent on the corner of 13th and Howard, across the street from Division Circle Nav Center.





Thanks,

Lisa Rachowicz, LCSW
Navigation Centers Program Manager
Department of Homelessness and Supportive Housing
City and County of San Francisco
1360 Mission St.
San Francisco, CA 94102

Cell: [REDACTED]
lisa.rachowicz@sfgov.org

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Heckel, Hank (MYR)

From: Rachowicz, Lisa (HOM)
Sent: Friday, March 29, 2019 9:45 AM
To: Streets, Healthy (DEM); Marshall, Kaki (HOM); Walton, Scott (HOM); Cannariato, Umecke (HOM)
Subject: Tents near Bryant Nav Center this morning

🔍 📧 📎 📌 📁 ▶ 80% 09:33

← #10660381 ☆ 📞 ↵

Encampment at Intersection of I 80 E Off Ramp & I 80 Eastbound



Submitted Photo

4 tents and 10 or more people

Is there criminal activity? No | How many people? More than 6 People | How many tents, structures, or tarps? 4 - 6 Structures | How many shopping carts? Unknown | Is encampment blocking sidewalk? No | Are there dogs? Unknown | How long at the location? New

OPENED moments ago

Lisa Rachowicz, LCSW
Navigation Centers Program Manager
Department of Homelessness and Supportive Housing
City and County of San Francisco
1360 Mission St.

San Francisco, CA 94102

Cell: [REDACTED]
lisa.rachowicz@sfgov.org

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Heckel, Hank (MYR)

From: Rachowicz, Lisa (HOM)
Sent: Thursday, March 28, 2019 11:37 AM
To: Cannariato, Umecke (HOM); Marshall, Kaki (HOM); Walton, Scott (HOM); Streets, Healthy (DEM)
Subject: Tents near Bryant Nav 5th and Bryant

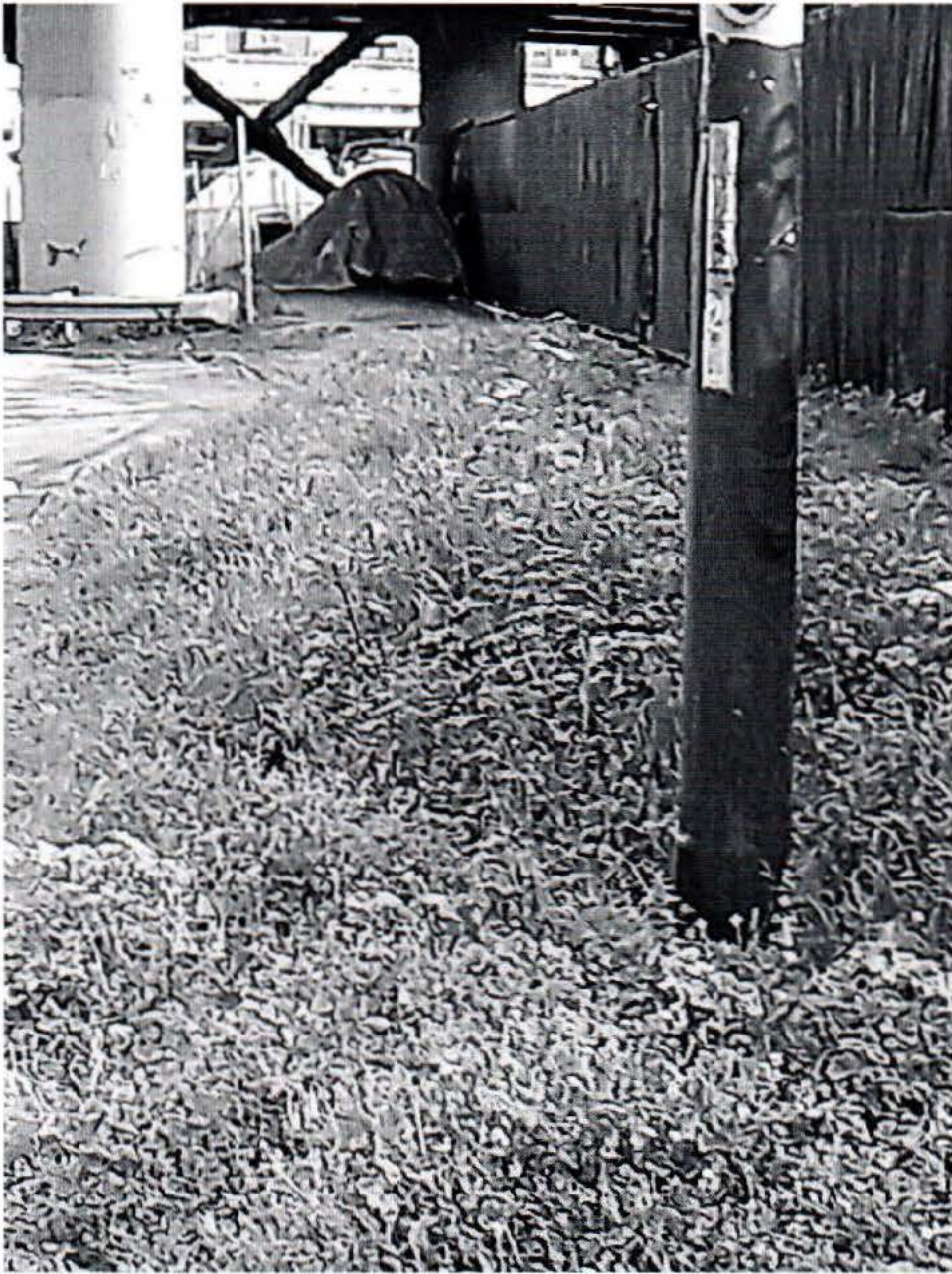
Hi all,

Bryant Nav Center staff reported 3 tents in the Circle and 1 tent next to the Nav Center on the side this morning. See attached photos.

Thanks,
Lisa







Lisa Rachowicz, LCSW
Navigation Centers Program Manager
Department of Homelessness and Supportive Housing
City and County of San Francisco
1360 Mission St.
San Francisco, CA 94102

Cell: [REDACTED]
lisa.rachowicz@sf.gov

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Heckel, Hank (MYR)

From: Marshall, Kaki (HOM)
Sent: Thursday, March 28, 2019 10:44 AM
To: Carbone, Carol (HOM); Meskan, Brenda (HOM)
Cc: Rachowicz, Lisa (HOM); Cannariato, Umecke (HOM)
Subject: Bayshore Nav

Hi guys,

there is a business called Stop and Store at 2285 Jerrold that experienced a fire set by a camper next to their building a few weeks ago. They contacted the Nav and Lisa Rachowicz and informed HSH of the even and their belief that the individual had been a Nav Resident and that they had been "kicked out".

HOT and SFPD I believe have engaged with the alleged camper accused of camping in this spot. I believe its possible that the camper has moved several times and continues to settle near the Nav.

Every one is doing a great job responding and I'm wondering if this might be an opportunity for us to improve and develop protocols for similar situations.

The fist question I have after the obvious safety concerns is whether or not this camper was in fact in the Nav, and if they were since Division Nav is all Pathway to Housing Beds then that means they were Priority Status and likely have a housing Navigator.

If they have a housing Navigator assigned to them from ECS then perhaps the ECS navigator does not have the resources to assist this individual. If that is the case we need to know.

Please outreach them today. They are camped on the sidewalk near 2285 Jerrold. if you face the business at 2285 Jerrold the tent is a hundred yards or so toward Barnaveld.

Please determine if the individual is Priority Status if so who their housing navigator is. This should be visible in ONE. let me know who the housing navigator is and I will contact ECS to find out what they are doing with the person. Thank you.

If the person is not priority status offer to take them to shelter, MSC or 123 10th for an assessment if he does not want to go tell me ASAP by text.

Thank you

Warmest Regards-
Kaki

(Prounouns, She/Hers, They/Them)
Kaki W. Marshall MPP
Director Of Outreach and Interim Housing
City and County of San Francisco
Department of Homelessness and Supportive Housing

Heckel, Hank (MYR)

From: Rachowicz, Lisa (HOM)
Sent: Wednesday, March 27, 2019 3:02 PM
To: Cannariato, Umecke (HOM); Marshall, Kaki (HOM); Walton, Scott (HOM); Streets, Healthy (DEM)
Subject: FW: Tent outside Bayshore Nav Center
Attachments: IMG_1086.jpg; IMG_1085.jpg

Hello all,

Here is another report of a tent/structure outside Bayshore Nav Center. I believe this is the same tent that has been there a while, but I'm not sure. This photo is as of today.

Location: **Barneveld Ave near Jerrold Ave.** in front of the Power Transfer System directly across the street from Stop n Stor Mini Storage business.

Thanks,
Lisa



Lisa Rachowicz, LCSW

Navigation Centers Program Manager
San Francisco Department of Homelessness and Supportive Housing
lisa.rachowicz@sfgov.org | [REDACTED] F: 415.355.7408

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From: Artie Gilbert <artieg@fivekeys.org>
Sent: Wednesday, March 27, 2019 2:43 PM
To: Rachowicz, Lisa (HOM) <lisa.rachowicz@sfgov.org>
Cc: Lena Miller <lenam@fivekeys.org>; Tony Chase <tonyc@fivekeys.org>
Subject: Fwd: Power Transfer system

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Hi Lisa,

The nearest cross street is JERROLD AVE. The tent is located in front of the Power Transfer System directly across the street from STOP n STOR Mini storage on BARNEVELD AVE.

----- Forwarded message -----

From: **Artie Gilbert** <artieg@fivekeys.org>

Date: Wed, Mar 27, 2019 at 12:25 PM

Subject: Power Transfer system

To: <artieg@fivekeys.org>

Sent from my iPhone

--



ARTIE GILBERT (he/him)

ASST. DIRECTOR OF OPERATIONS

D: 415.734.3310

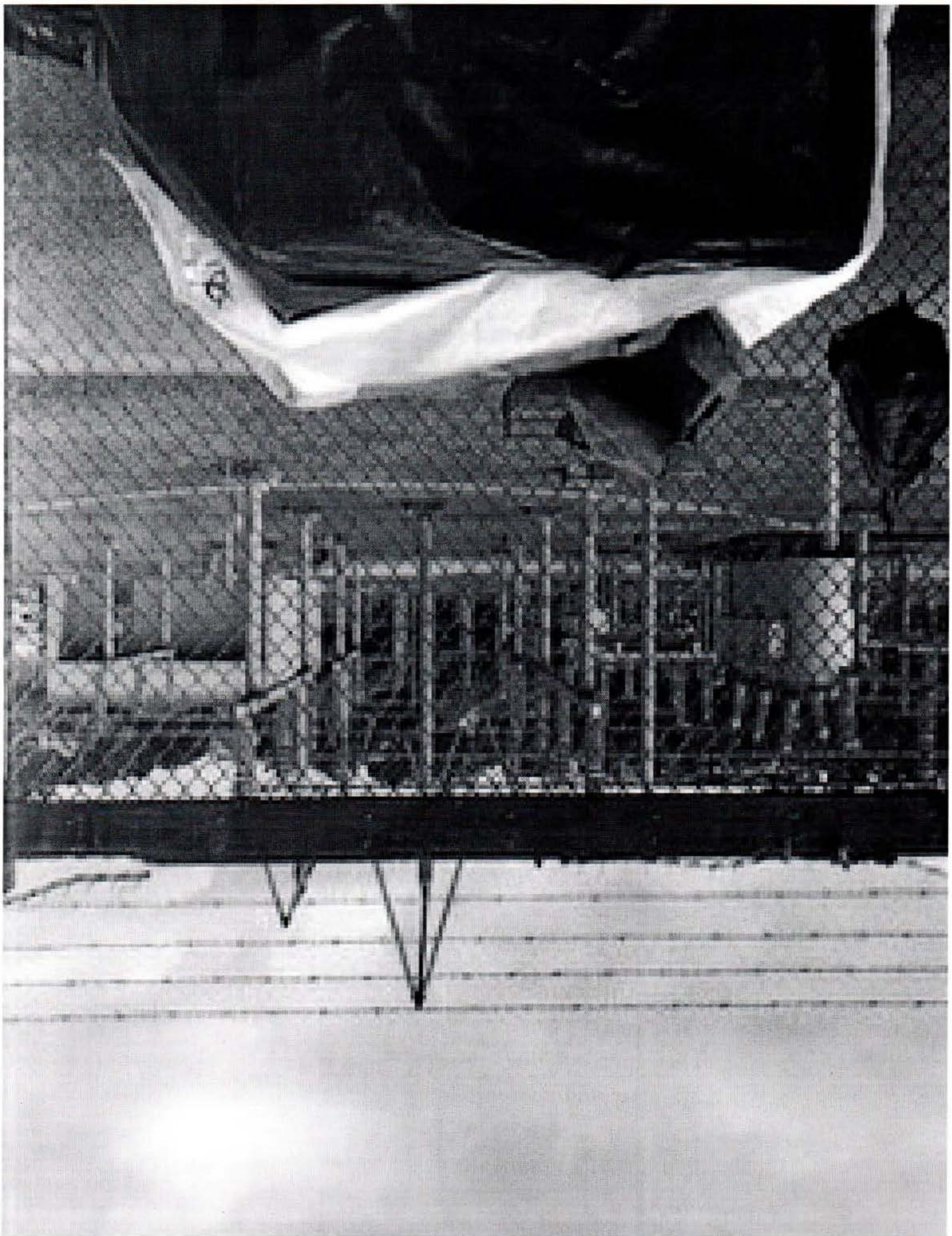
F: 415.734.3314

E: artieg@fivekeys.org

A: 70 Oak Grove Street, San Francisco, CA 94107

W: www.fivekeys.org





Heckel, Hank (MYR)

From: Walton, Scott (HOM)
Sent: Monday, March 25, 2019 5:38 PM
To: Rachowicz, Lisa (HOM)
Subject: FW: 13th and south van ness

Lisa -

Let's touch base on Tuesday about this.

Scott

-----Original Message-----

From: Marshall, Kaki (HOM)
Sent: Monday, March 25, 2019 5:19 PM
To: Kositsky, Jeff (HOM); Walton, Scott (HOM); Abbott, Kerry (HOM)
Subject: RE: 13th and south van ness

We started an advanced operation on the area today. Scott please have SVDP call LT Christ if they need support.

-----Original Message-----

From: Kositsky, Jeff (HOM) <jeff.kositsky@sfgov.org>
Sent: Monday, March 25, 2019 2:12 PM
To: Walton, Scott (HOM) <Scott.Walton@sfgov.org>; Abbott, Kerry (HOM) <kerry.abbott@sfgov.org>; Marshall, Kaki (HOM) <kaki.marshall@sfgov.org>
Subject: 13th and south van ness

I'm getting a great deal of complaints about tents in this area. Can you please Have HSOC handle this today or tomorrow. Also, we need to do a better job of complying with our good neighbor policy in the area. Scott can you please talk to Saint Vincent de Paul about this and coordinate with Kaki so that the hot team and HSOC and the police fulfill our commitment to the neighborhood. Thank you very much

Sent from my iPhone

Heckel, Hank (MYR)

From: Rachowicz, Lisa (HOM)
Sent: Monday, March 25, 2019 4:39 PM
To: Marshall, Kaki (HOM); Walton, Scott (HOM); Cannariato, Umecke (HOM); Streets, Healthy (DEM); wdolcini@chp.ca.gov
Subject: Tents outside Bryant Nav Center FW: SF311 Service Request 10643391
Attachments: behind Bryant Navigation #2 3-25-2019.jpg; behind Bryant Navigation #3 3-25-2019.jpg; behind Bryant Navigation #5 3-25-2019.jpg; behind Bryant Navigation 3-25-2019.jpg

Hello HSOC and HSH Outreach,

Please be aware that there continues to be multiple tents behind Bryant Navigation Center daily - 3 tents/structures currently as of this morning. When they get cleared, the tents return within 24 hours typically. I understand from Brenda at ERT that they are working with a women back there and it will need a longer engagement, but it appears to be more than 1 person back there. In addition, if the area could be sanitized, that would be very helpful. There is feces in buckets, and the Bryant Homeless Storage staff are complaining of the smell when working back there.

The Bryant Navigation Center and Homeless Storage staff have also reported that people were trying to climb the fence in the back into the Homeless Storage program area over the weekend.

I'm not sure who is taking the lead on this response, but I want to keep everyone informed.

Thanks,
Lisa

Lisa Rachowicz, LCSW
Navigation Centers Program Manager
San Francisco Department of Homelessness and Supportive Housing lisa.rachowicz@sfgov.org |  | F:
415.355.7408

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-----Original Message-----

From: John Warner <jwarner@ecs-sf.org>
Sent: Monday, March 25, 2019 12:32 PM
To: Rachowicz, Lisa (HOM) <lisa.rachowicz@sfgov.org>
Cc: Kathy Treggiari <ktreggiari@ecs-sf.org>; John Ouertani <jouertani@ecs-sf.org>
Subject: FW: SF311 Service Request 10643391

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We got some reports from Bryant storage clients that people earlier were trying to climb over. There are more structures and tent, along with buckets used as make shift toilets. It seems like it's getting a bit unsanitary back there.

John Warner

Interim Associate Director of Navigation Centers ECS Navigation Centers Office number: 415-487-3300 X4423

<http://www.ecs-sf.org> Connect with us:

Tickets can be purchased at www.chefsgalasf.org

-----Original Message-----

From: Alex Napitan

Sent: Monday, March 25, 2019 11:49 AM

To: John Warner <jwarner@ecs-sf.org>

Subject: FW: SF311 Service Request 10643391

-----Original Message-----

From: 311.Prodmail@sfgov.org [<mailto:311.Prodmail@sfgov.org>]

Sent: Monday, March 25, 2019 11:13 AM

To: Alex Napitan <ANapitan@ecs-sf.org>

Subject: SF311 Service Request 10643391

PLEASE DO NOT RESPOND TO THIS EMAIL. INSTRUCTIONS ARE PROVIDED BELOW FOR CONTACTING SF311.

Dear Customer,

Thank you for contacting the San Francisco 311 Customer Service Center. Your tracking number regarding City Services >> Homeless >> Encampment is 10643391.

You may check the status of this service request or provide additional information regarding this request at:
<http://www.sf311.org/track>

Please do not respond to this email. You may submit any additional requests or obtain information at <http://www.sf311.org> or call 3-1-1 in San Francisco 7 days a week, 24 hours a day. For 24 x 7 assistance outside of San Francisco, please dial (415) 701-2311. For TTY, dial (415) 701-2323.

Sincerely,

Linda W

San Francisco 311 Customer Service Center City Services Simplified

How do I...

Access services on 311's NEW mobile app? sf311.org/mobile

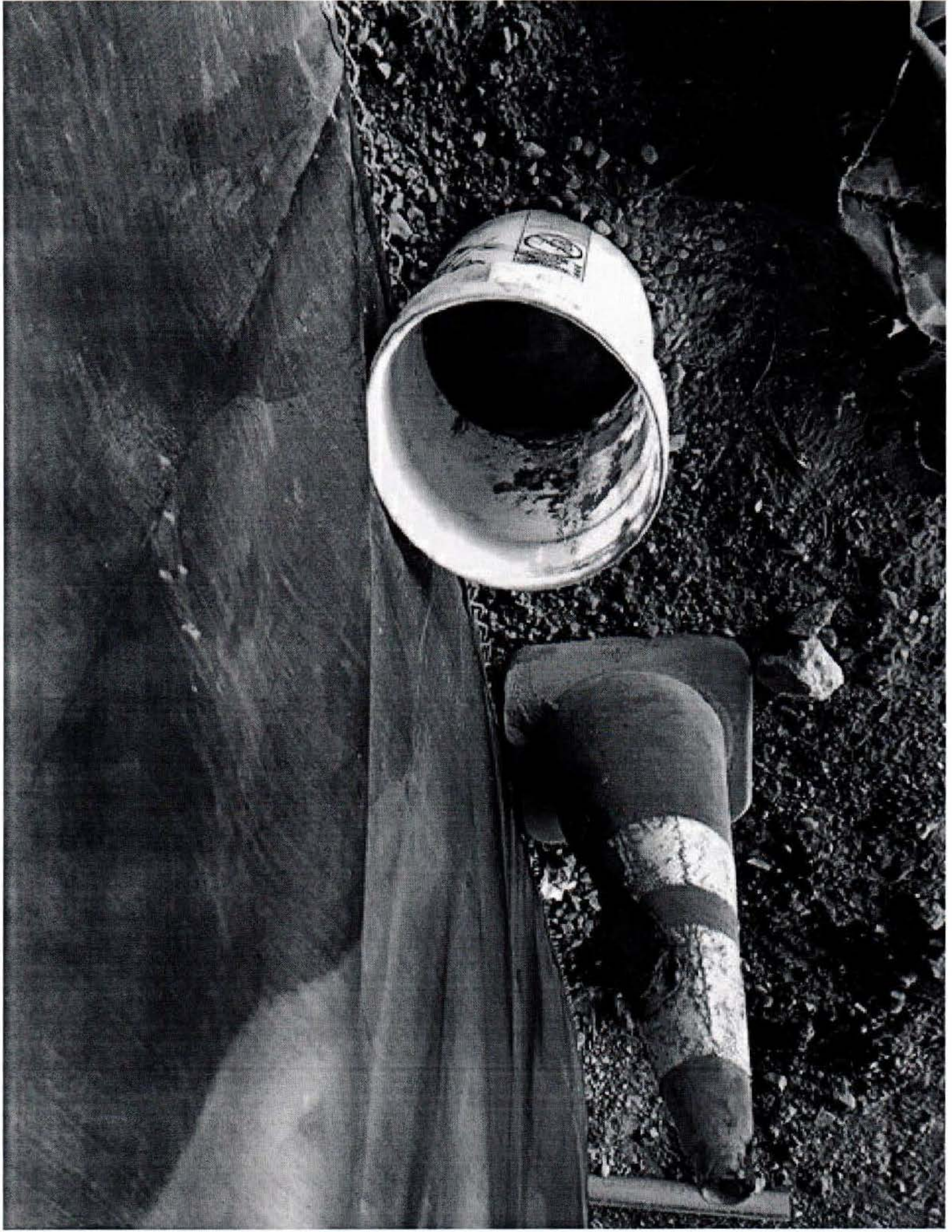
Access services on the web? sf311.org

Provide feedback on 311 services? sf311.org/survey

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Please call 311/TTY (415) 701-2323 if you believe you have received this email in error.









Heckel, Hank (MYR)

From: John Warner
Sent: Monday, March 25, 2019 12:32 PM
To: Rachowicz, Lisa (HOM)
Cc: Kathy Treggiari; John Ouertani
Subject: FW: SF311 Service Request 10643391
Attachments: behind Bryant Navigation #2 3-25-2019.jpg; behind Bryant Navigation #3 3-25-2019.jpg; behind Bryant Navigation #4 3-25-2019.jpg; behind Bryant Navigation #5 3-25-2019.jpg; behind Bryant Navigation #6 3-25-2019.jpg; behind Bryant Navigation #7 3-25-2019.jpg; behind Bryant Navigation 3-25-2019.jpg

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We got some reports from Bryant storage clients that people earlier were trying to climb over. There are more structures and tent, along with buckets used as make shift toilets. It seems like it's getting a bit unsanitary back there.

John Warner

Interim Associate Director of Navigation Centers ECS Navigation Centers Office number: 415-487-3300 X4423 Work cell:
[REDACTED] <http://www.ecs-sf.org> Connect with us:

Tickets can be purchased at www.chefsgalasf.org

-----Original Message-----

From: Alex Napitan
Sent: Monday, March 25, 2019 11:49 AM
To: John Warner <jwarner@ecs-sf.org>
Subject: FW: SF311 Service Request 10643391

-----Original Message-----

From: 311.Prodmail@sfgov.org [<mailto:311.Prodmail@sfgov.org>]
Sent: Monday, March 25, 2019 11:13 AM
To: Alex Napitan <ANapitan@ecs-sf.org>
Subject: SF311 Service Request 10643391

PLEASE DO NOT RESPOND TO THIS EMAIL. INSTRUCTIONS ARE PROVIDED BELOW FOR CONTACTING SF311.

Dear Customer,

Thank you for contacting the San Francisco 311 Customer Service Center. Your tracking number regarding City Services >> Homeless >> Encampment is 10643391.

You may check the status of this service request or provide additional information regarding this request at:
<http://www.sf311.org/track>

Please do not respond to this email. You may submit any additional requests or obtain information at <http://www.sf311.org> or call 3-1-1 in San Francisco 7 days a week, 24 hours a day. For 24 x 7 assistance outside of San Francisco, please dial (415) 701-2311. For TTY, dial (415) 701-2323.

Sincerely,

Linda W
San Francisco 311 Customer Service Center City Services Simplified

How do I...

Access services on 311's NEW mobile app? sf311.org/mobile

Access services on the web? sf311.org

Provide feedback on 311 services? sf311.org/survey

Note: This email and its attachments (if any) may be confidential and is/are intended solely for the use of the individual to whom it is addressed. If you are not the intended recipient of this email and its attachments, you must take no action based upon them, nor must you copy or show them to anyone.

Please call 311/TTY (415) 701-2323 if you believe you have received this email in error.

Heckel, Hank (MYR)

From: Meskan, Brenda (HOM)
Sent: Monday, March 25, 2019 9:04 AM
To: Rachowicz, Lisa (HOM); Streets, Healthy (DEM); Walton, Scott (HOM); Marshall, Kaki (HOM)
Cc: Cannariato, Umecke (HOM)
Subject: Re: Tents on Barneveld - outside Nav Center

This is a SFPD issue first to assess the danger of weapons before HOT ERT is going to address. Please let me know when the area is safe and clear.

Thank you,
brenda



Brenda Meskan, MFT
Encampment Resolution Team Lead
San Francisco Homeless Outreach Team (SFHOT)
San Francisco Department of Homelessness and Supportive Housing

brenda.meskan@sfgov.org | 415.580.8591

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From: Rachowicz, Lisa (HOM)
Sent: Thursday, March 21, 2019 3:58:18 PM
To: Streets, Healthy (DEM); Walton, Scott (HOM); Marshall, Kaki (HOM)
Cc: Cannariato, Umecke (HOM); Meskan, Brenda (HOM)
Subject: FW: Tents on Barneveld - outside Nav Center

Hello all,

Here is additional information on the tent situation outside the Bayshore Navigation Center. This email below and the attached photos outline the interaction and concerns by the storage business owner about issues related to tents, homeless individuals, and damage to his property.

It sounds like the business owner is expecting contact from HSH or another entity to discuss his complaints. Kaki and Scott, how should we move forward with this contact? Please advise if you would like me to reach out directly to this person, or if we should involve Abigail, or another plan.

Thanks,
Lisa



Lisa Rachowicz, LCSW

Navigation Centers Program Manager
San Francisco Department of Homelessness and Supportive Housing
lisa.rachowicz@sfgov.org | 415.310.3711 | F: 415.355.7408

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From: Artie Gilbert <artieg@fivekeys.org>
Sent: Thursday, March 21, 2019 3:05 PM
To: Rachowicz, Lisa (HOM) <lisa.rachowicz@sfgov.org>
Cc: Lena Miller <lenam@fivekeys.org>; Tony Chase <tonyc@fivekeys.org>
Subject: Fwd: Encampments

This message is from outside the City email system. Do not open links or attachments from untrusted sources.

Hi Lisa,

I'm sending you a photo copy of the owner of Stop n Stor on JERROLD AVE & BARNEVELD AVE ([REDACTED] [REDACTED] work card. Here are several photos of encampments on JERROLD AVE & BARNEVELD AVE. Here are photos of items left by guests. Here is a photo of a tree well with several needle caps. Here are several photos of a burnt down tent along with the damage that the fire from the tent caused to Mr. [REDACTED] property. David came to our facility Thursday 3.14.19 and expressed to me his complaints about the several tents setup on JERROLD AVE & BARNEVELD AVE. He told me that the several tents that are setup on JERROLD AVE & BARNEVELD AVE started when our Navigation Center opened. Mr. [REDACTED] told me that his property caught on fire from the burning tent. David took me on his property to show me the damage from the fire. He said he have several photos of individuals living in tents threatening his employees with weapons and verbally threatening to harm them. David said he would like to work together to get JERROLD AVE & BARNEVELD AVE back. I told David that you will be contacting him.

Best,

Artie

----- Forwarded message -----

From: Artie Gilbert <artieg@fivekeys.org>
Date: Thu, Mar 21, 2019 at 12:44 PM
Subject: Encampments
To: <artieg@fivekeys.org>

Sent from my iPhone

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ARTIE GILBERT (he/him)
ASST. DIRECTOR OF OPERATIONS
D: 415.734.3310
F: 415.734.3314
E: artieg@fivekeys.org



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W: www.fivekeys.org