File No. 160618 Committee Item No. 6
Board Item No. 32

COMMITTEE/BOARD OF SUPERVISORS

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Committee: Government Audit and Oversight **Date** September 15, 2016

Board of Supervisors Meeting **Date** SEPTEMBER 27, 2016

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Completed by: Erica Major **Date** September 9, 2016
Completed by: **Date** 9/19/2016

[Board Response - Civil Grand Jury - San Francisco Homeless Health and Housing: A Crisis Unfolding on Our Streets]

Resolution responding to the Presiding Judge of the Superior Court on the findings and recommendations contained in the 2015-2016 Civil Grand Jury Report, entitled "San Francisco Homeless Health and Housing: A Crisis Unfolding on Our Streets;" and urging the Mayor to cause the implementation of accepted findings and recommendations through his/her department heads and through the development of the annual budget.

WHEREAS, Under California Penal Code, Section 933 et seq., the Board of Supervisors must respond, within 90 days of receipt, to the Presiding Judge of the Superior Court on the findings and recommendations contained in Civil Grand Jury Reports; and

WHEREAS, In accordance with California Penal Code, Section 933.05(c), if a finding or recommendation of the Civil Grand Jury addresses budgetary or personnel matters of a county agency or a department headed by an elected officer, the agency or department head and the Board of Supervisors shall respond if requested by the Civil Grand Jury, but the response of the Board of Supervisors shall address only budgetary or personnel matters over which it has some decision making authority; and

WHEREAS, Under San Francisco Administrative Code, Section 2.10(a), the Board of Supervisors must conduct a public hearing by a committee to consider a final report of the findings and recommendations submitted, and notify the current foreperson and immediate past foreperson of the civil grand jury when such hearing is scheduled; and

WHEREAS, In accordance with San Francisco Administrative Code, Section 2.10(b), the Controller must report to the Board of Supervisors on the implementation of

recommendations that pertain to fiscal matters that were considered at a public hearing held by a Board of Supervisors Committee; and

WHEREAS, The 2015-2016 Civil Grand Jury Report, entitled "San Francisco Homeless Health and Housing: A Crisis Unfolding on Our Streets" (Report) is on file with the Clerk of the Board of Supervisors in File No. 160618, which is hereby declared to be a part of this Resolution as if set forth fully herein; and

WHEREAS, The Civil Grand Jury has requested that the Board of Supervisors respond to Finding Nos. F.A.4, F.D.2 and Recommendation Nos. R.A.1.1, R.A.4 and R.D.2 contained in the subject Report; and

WHEREAS, Finding No. F.A.4 states: "Police Ticket: Faced with multiple requests for their service, police use judgment regarding enforcement considering the best chance to have a successful outcome. When called to help, they generally do not ticket because it is not productive;" and

WHEREAS, Finding No. F.D.2 states: "Centers: Reports on the pilot Navigation Center show success in welcoming clients, gathering intake data, tracking the human outcomes, connecting people to services and monitoring exits for recidivism. One key to the success of the Navigation Center has been the innovative partnership with the Controller's Office to track and report on human outcomes;" and

WHEREAS, Recommendation No. R.A.1.1 states: "The number of SF HOT [San Francisco Homeless Outreach Team] personnel should be increased so that they will be available to respond;" and

WHEREAS, Recommendation No. R.A.4 states: "Police policies and legal consequences need to be better coordinated so that police are not put in a position where citations have no effect;" and

WHEREAS, Recommendation No. R.D.2 states: "The Mayor should explore and acquire new sites where additional Navigation Centers can be opened. The Board of Supervisors should urge the Mayor to fund these additional sites:" and

WHEREAS, In accordance with California Penal Code, Section 933.05(c), the Board of Supervisors must respond, within 90 days of receipt, to the Presiding Judge of the Superior Court on Finding Nos. F.A.4, F.D.2 and Recommendation Nos. R.A.1.1, R.A.4 and R.D.2 contained in the Report; now, therefore, be it

RESOLVED, That the Board of Supervisors reports to the Presiding Judge of the Superior Court that they agree with Finding No. F.A.4; and, be it

FURTHER RESOLVED, That the Board of Supervisors reports that they agree with Finding No. F.D.2; and, be it

FURTHER RESOLVED, That the Board of Supervisors reports that Recommendation No. R.A.1.1 will not be implemented per the Mayor's and the Department's response that increasing SF HOT personnel in order for them to act as first responders is not within SF HOT's job expertise and training, level of staffing, capacity or enforcement authority; and, be FURTHER RESOLVED, That the Board of Supervisors reports that Recommendation No. R.A.4 has been implemented through the creation and integration of the Department of Homelessness and Supportive Housing into the overall network of City departments' support services for homeless residents; and, be it

FURTHER RESOLVED, That the Board of Supervisors reports that Recommendation No. R.D.2 has been implemented with the passage of File No. 160278 (Administrative Code – City Navigation Centers for the Homeless) and will continue to be implemented through the Department of Homelessness and Supportive Housing's ongoing efforts to open and maintain Navigation Center sites throughout the City; and, be it

FURTHER RESOLVED, That the Board of Supervisors urges the Mayor to cause the implementation of the accepted findings and recommendations through his/her department heads and through the development of the annual budget.

CITY AND COUNTY OF SAN FRANCISCO
OFFICE OF THE CONTROLLER

Ben Rosenfield
Controller

Todd Rydstrom
Deputy Controller

September 9, 2016

Received via email
9/9/2016
File Nos. 160617 and 160618

The Honorable John K. Stewart
Presiding Judge, Superior Court of California, County of San Francisco
400 McAllister Street, Room 008
San Francisco, CA 94102

Re: Controller's Office response to the 2015-16 Civil Grand Jury Report entitled "SF Homeless Health & Housing: A Crisis Unfolding on our Streets"

Dear Judge Stewart:

Pursuant to Penal Code Section 933 and 933.05, the following is in response to the Civil Grand Jury report issued on July 12, 2016.

Finding: F.C.2. MONITORING: The non-profit agencies that perform services for the homeless monitor their own Outcome Performance. The Controller's Office only performs fiscal and compliance monitoring, except for the Navigation Center.

Controller's Response: Disagree, in part.

In FY2015-16, 136 nonprofit agencies, with an aggregate of over $460 million in City funding from nine departments, were monitored through the Controller's Citywide Nonprofit Monitoring and Capacity Building Program that focuses on fiscal and compliance measures. The Controller also reported on the outcomes and challenges of the Navigation Center in a series of dashboards and reports. Outcomes, performance and results of nonprofit service agencies are tracked by the departments that hold the contracts. The City has considered a joint monitoring program for outcome performance in the past, but in general the subject matter expertise required, and the variety of service types is so wide that joint outcome performance monitoring did not seem practicable. As the new Homelessness and Supportive Housing Department is developed, the monitoring approach can be revisited. In addition, the Controller's Whistleblower Unit investigates complaints related to non-profit agencies in all service areas, and the Controller's Audit Division carries out compliance and performance audits as part of its on-ongoing programs. These audits test results, productivity and compliance with contract requirements.

If you have any questions about this response, please contact Deputy Controller Todd Rydstrom or me at 415-554-7500.

Respectfully submitted,

Ben Rosenfield
Controller

cc: Todd Rydstrom, Deputy Controller, City and County of San Francisco
Angela Calvillo, Clerk of the Board, City and County of San Francisco

2015-16 Civil Grand Jury
SF Homeless Health Housing
Office of the Controller :FINDINGS Response Template

CGJ Year	Report Title	Findings	Respondent assigned by CGJ	2016 Responses (Agree/Disagree)Use the drop down menu	2016 Response Text
2015-16	SF Homeless Health & Housing: A Crisis Unfolding on our Streets	F.C.2. MONITORING: The non-profit agencies that perform services for the homeless monitor their own Outcome Performance. The Controller's Office only performs fiscal and compliance monitoring, except for the Navigation Center.	Controller	disagree with it, partially (explanation in next column)	In FY2015-16, 136 nonprofit agencies, with an aggregate of over $460 million in City funding from nine departments, were monitored through the Controller's Citywide Nonprofit Monitoring and Capacity Building Program that focuses on fiscal and compliance measures. The Controller also reported on the outcomes and challenges of the Navigation Center in a series of dashboards and reports. Outcomes, performance and results of nonprofit service agencies are tracked by the departments that hold the contracts. The City has considered a joint monitoring program for outcome performance in the past, but in general the subject matter expertise required, and the variety of service types is so wide that joint outcome performance monitoring did not seem practicable. As the new Homelessness and Supportive Housing Department is developed, the monitoring approach can be revisited. In addition, the Controller's Whistleblower Unit investigates complaints related to non-profit agencies in all service areas, and the Controller's Audit Division carries out compliance and performance audits as part of its on-going programs. These audits test results, productivity and compliance with contract requirements.

OFFICE OF THE MAYOR
SAN FRANCISCO

EDWIN M. LEE
MAYOR

Received via email
9/8/2016
File Nos. 160617 and 160618

September 8, 2016

The Honorable John K. Stewart
Presiding Judge
Superior Court of California, County of San Francisco
400 McAllister Street
San Francisco, CA 94102

Dear Judge Stewart:

Pursuant to Penal Code sections 933 and 933.05, the following is in reply to the 2015-16 Civil Grand Jury report, *San Francisco Homeless Health and Housing: A Crisis Unfolding on Our Streets.* As noted in the report, the City recently created the Department of Homelessness and Supportive Housing (DHSH) that consolidates services formerly provided by the Human Services Agency and Department of Public Health and singly focuses on getting homeless individuals housed. Led by DHSH, the City is calling for the development of six Navigation Centers in the next two years, with the second 93-bed Navigation Center at the Civic Center Hotel at 20 12th street opened in June 2016, as noted in the report. This site replicates the successful service model of the first Navigation Center at 1950 Mission Street. The third Navigation Center is expected to be located on Port property on 25th street and open in January 2017. The City continues to evaluate sites for additional Navigation Centers.

In addition, the City provides Permanent Supportive Housing (PSH), an evidence based practice for resolving chronic homelessness. Between January 2004 and December 2015, the City placed 12,708 individuals into permanent housing and reduced chronic homelessness. The City has 6,278 units in its supportive housing portfolio; added 1,301 units and placed over 3,000 individuals in a supportive unit between Fiscal Year (FY) 2011-12 and FY 2015-16. The City is in the planning phases for three additional PSH sites to be opened within the next year and continues to look for new units and resources to expand supportive housing to meet the City's goal of ending chronic homelessness.

Short-term rental assistance is another opportunity to house people with fewer barriers to long term stability and is a critical tool for assisting individuals that are non-chronically homeless. Local and state resources have allowed the City to develop a robust rapid rehousing program for families and to pilot similar programs for transitional aged youth (TAY), seniors and persons with disabilities, and single adults.

On the November 2016 election, San Franciscans will consider Proposition J, a Charter amendment creating a homeless housing and services fund and transportation improvement fund. If approved by voters, the Homeless Housing and Services Fund (Fund) would provide additional funding for services to homeless individuals, including homelessness prevention, exits from homelessness, and stabilizing lives of homeless individuals. Proceeds of the Fund can be used to support operations, including implementation of a coordinated entry system and capital investments required to maintain or expand the system infrastructure. These positive outcomes address many of the recommendations of the Civil Grand Jury.

1 DR. CARLTON B. GOODLETT PLACE, ROOM 200
SAN FRANCISCO, CALIFORNIA 94102-4681
TELEPHONE: (415) 554-6141

A detailed response from the Mayor's Office, Department of Homelessness and Supportive Housing, Police Department, and City Administrator to the Civil Grand Jury's findings and recommendations follows.

Thank you again for the opportunity to comment on this Civil Grand Jury report.

Sincerely,

Edwin Lee
Mayor

Jeff Kositsky
Director,
Homelessness and Supportive Housing

Toney D. Chaplin
Interim Chief of Police

Naomi M. Kelly
City Administrator

Findings:

Finding F.A.1. DISPATCH HOT: San Francisco HOT is the most informed first responder for non-violent events, as they are part of DPH and have access to the database CCMS, but health providers are neither dispatched with police nor linked as responders to 311 calls.

Disagree with finding, partially.

The City's current first responders – the San Francisco Police Department (SFPD) and the San Francisco Fire Department (SFFD), including the Emergency Medical System (EMS), are the most prepared, resourced, and equipped agencies to respond to emergency calls for service. These emergency responders operate 24/7 and have the staffing capacity to respond to emergencies at any time of day or night. They are also trained to assess a wide range of critical public safety and medical situations.

SFHOT does not share that level of staffing, capacity, training or enforcement authority. DHSH is currently partnering with the SFFD to embed SFHOT staff with first responders through the EMS-6 pilot program. The pilot will be evaluated and the decision to expand this model will be based on that evaluation. We will also be working with the Department of Public Health (DPH) on a plan to address first responder needs related to individuals with mental health or related issues.

Finding F.A.2: POLICE ACCESS: There is no coordinated plan to support police first responders in a role that is not dealing with criminal behavior. When the police are called out for homeless or encampment issues they have no access to health or substance abuse providers or information regarding the client's mental health.

Agree with finding.

City workers (HOT or DPH) who have access to health or substance abuse providers or a client's mental health information are prohibited by law (HIPAA) from sharing it with law enforcement officers. The SFPD may not be the proper respondent for this finding due to the fact the department has no control over changing the law or the practices or procedures of another agency.

Finding F.A.3: POLICE TRAINING: Police say they have limited training, or limited access to data to deal successfully with the mentally ill. With the high numbers of mentally ill on our streets, even the most compassionate of police when threatened could find themselves in a position where they must follow their procedures and shoot.

Disagree with finding, wholly.

Over 500 first-responder members have received Crisis Intervention Team (CIT) training in the past 2 years (see SFPD Department Bulletin 16-097, Response by Crisis Intervention Trained Officers). In addition, there has been a specific policy (Department Bulletins 11-113, 13-120, and 15-155, Response to Mental Health Calls with Armed Suspects) since 2011 outlining how officers are to respond to persons in crisis which involves a weapon other than a firearm. This policy establishes the guidelines officers are to follow, including promptly requesting a supervisor to respond, with an emphasis on creating time and distance when a person in crisis is armed with a weapon other than a firearm and poses a danger only to him/herself.

Officers are trained in this approach beginning in the basic academy, through CIT training, and as part of continued professional training (CPT).

Finding F.A.4: POLICE TICKET: Faced with multiple requests for their service, police use judgment regarding enforcement considering the best chance to have a successful outcome. When called to help, they generally do not ticket because it is not productive.

Disagree with finding, partially.

Police officers are trained to use judgment when enforcing lower-level crimes, including infractions pertaining to local City ordinances and codes. Officers issue thousands of tickets every year for quality-of-life violations. While some may argue that ticketing may not be the most effective method, the SFPD does enforce laws and write incident reports, especially when responding to complaint-generated calls for service from a member of the public

Finding F.B.1. DISPARATE SOURCES: Many agencies are providing services and gathering information without a common data source.

Agree with finding.

Finding F.B.2. INTAKE SYSTEM: Local agencies providing services are not required to use the same intake database. There is no coordinated Data Entry System. This results in duplication of entries with homeless clients having to enter the same information in multiple places.

Disagree with finding, partially.

A coordinated entry process is in place for DHSH's federally funded housing programs for chronically homeless adults and veterans. There is also a coordinated in-take process in place for the family shelter system. These efforts are informing the process of building the system-wide Coordinated Entry System for all populations and housing programs.

Finding F.B.3. INITIAL CONTACTS: First responders do not have access to a coordinated access/entry system.

Agree with finding.

Finding F.B.4. HOUSING SERVICES: Multiple agencies are looking for housing resources – shelters, apartments, etc. for their clients. Each maintains their own databases of resources and compete with each other. There is no single coordinated resource for government sponsored housing.

Disagree with finding, partially.

While the system is insufficient, the City does have some coordinated processes in place. The CHANGES system is the coordinated shelter database and is accessible by the four shelter reservation sites and through 311. The City also has the newly created affordable housing portal which serves as a centralized database and application process for affordable housing (excluding permanent supportive housing) in San Francisco.

DHSH agrees that more centralized and consistent information about shelter and housing resources would be beneficial.

Finding F.C.1. OUTCOME PERFORMANCE: Contracts are awarded through HSA and DPH with few requirements to include Client Outcome in performance reports used to evaluate the success of a contract or program. Number of Clients Served is more often used.

Agree with finding.

Finding F.C.2. MONITORING: The non-profit agencies that perform services for the homeless monitor their own Outcome Performance. The Controller's Office only performs fiscal and compliance monitoring, except for the Navigation Center.

Disagree with finding, wholly.

DHSH program staff who were formerly a part of the Human Services Agency and the Department of Public Health regularly monitor performance outcomes by service providers. The contracts are not currently structured for performance based funding.

Finding F.D.1. SHELTERS: The "old style" short-term shelters are used by some of the homeless population but are disliked and perceived as unsafe. They are not designed for positive outcomes; they are merely a means to get people out of the weather. They do not address the need to accommodate partners, possessions and pets. Chronic homeless avoid non-supportive shelters because they fear being robbed and/or victimized.

Disagree with finding, partially.

While imperfect, short-term shelters are a necessary and critical component of the City's system of care for homeless individuals. Short-term shelters provide an essential alternative for individuals that are not housed and can provide connections to service providers. San Francisco's City sponsored shelters are on average approximately 95% full at all times. Based on Point-in-Time Count data, it was estimated there were 1,745 chronically homeless individuals families living in San Francisco on January 29, 2015. 32% of this population is sheltered.

Finding F.D.2. CENTERS: Reports on the pilot Navigation Center show success in welcoming clients, gathering intake data, tracking the human outcomes, connecting people to services and monitoring exits for recidivism. One key to the success of the Navigation Center has been the innovative partnership with the Controller's Office to track and report on human outcomes.

Agree with finding.

Finding F.D.3. HOUSING: The Navigation Center currently serves only 75 clients at a time and moves them out by way of Homeward Bound or to supportive housing - temporary or permanent. The Center keeps beds open specifically for Homeward Bound (a short turnaround). Exits to local housing have been difficult since properties are unavailable, making the Navigation Center seem more like permanent housing instead of transitional housing.

Disagree with finding, partially.

The Navigation Center model is in no way implemented like or perceived to be permanent housing. The average length of stay at the 1950 Mission Navigation Center is currently 49 days for all clients and 93 days for those who are placed into Permanent Supportive Housing (as of July 2016). New permanent housing is difficult to acquire because of limited availability and costs. Despite these challenges, adding new supportive housing continues to be a priority for the City. In the past 5 fiscal years the City has added 1,301 units to its supportive housing portfolio.

Finding F.D.4. SUPPORTIVE HOUSING: Research on other city and state homeless practices confirm that providing supportive housing is the most successful way to end homelessness. This is especially true for the chronically homeless population, a group that has health and addiction issues. San Francisco has not provided sufficient supportive housing to this homeless population.

Disagree with finding, partially.

Permanent Supportive Housing (PSH) is an evidence based practice for resolving chronic homelessness. There has been a reduction in chronic homelessness in San Francisco due to the City's significant investments in PSH. Between January 2004 and December 2015, the City has placed 12,708 individuals into permanent housing. The City has 6,278 units in its supportive housing portfolio; 1,301 added between FY 2011-12 and FY 2015-16. Due to new units and turnover, over 3,000 individuals have been placed in a supportive unit in this time period. DHSH is in the planning phases for three additional PSH sites to be opened within the next year. DHSH continues to look for new units and resources to expand supportive housing to meet the City's goal of ending chronic homelessness.

PSH, however, is not the only answer to homelessness. Short-term rental assistance is another opportunity to house people with fewer barriers to long term stability and is an appropriate response for non-chronic homelessness. Local and state resources have allowed the City to develop a robust rapid rehousing program for families and to pilot similar programs for transitional aged youth (TAY), seniors and persons with disabilities, and single adults.

Finding F.D.5. ENCAMPMENTS: DPH does not act to condemn encampments as unsafe and reduce the health problem associated with them unless there are shelter and housing options available to the people in the encampments. Currently there are few options.

Disagree with finding, partially.

DPH considers multiple factors when evaluating the conditions of encampments, including the conditions, the ability for those conditions to be improved, and the availability of community-based services and supports. San Francisco has an array of community-based services that are available to care for this vulnerable population.

On the November 2016 election, San Franciscans will consider Proposition Q, an ordinance prohibiting the placement of tent encampments on public sidewalks. If approved by the voters, Proposition Q would prohibit tent encampments and require the City to offer housing or shelter. The City would also be required to offer homeless services, defined as a program (Homeward Bound) that pays for transportation to reunite individuals with family or friends outside of San Francisco. It also requires the City to provide written notice

24 hours in advance to individuals and also to post the notices in the area of the encampment. The affected individuals' personal property, with certain exceptions, would be stored by the City for at least 90 days.

Finding F.E.1. 311 HOMELESS HELP ORGANIZATION: mySF311.org's Homeless -- Person Seeking Help page presents an alphabetical, uncategorized list of links and lacks detail.
Homeless -- Person Seeking Help page found at http://sf311.org/homeless%E2%80%93-person-seeking-help as of May, 2016. Also available in Figure 13.

Agree with finding.

Recommendations:

Recommendation R.A.1. If safe to do so, SF HOT should be the first responders, and the SFPD should accompany when necessary.

Recommendation will not be implemented.

The City's existing first responders – SFPD, SFFD, and Department Emergency Management (DEM) – are the most prepared, resources and equipped agencies to respond to emergency calls. DHSH's Homeless Outreach Team is not staff or trained to be first responders.

Recommendation R.A.1.1. The number of SF HOT personnel should be increased so that they will be available to respond.

Requires further analysis.

The mission of SFHOT is to serve people in need of non-urgent medical care and service connection. DHSH will continue to support the pilot EMS-6 partnership and is developing a strategic plan that considers the size and scope of the role of the SFHOT team.

Recommendation R.A.2: Police should have access to mental health and substance abuse data as well as historical interaction with city services when they are called to respond to a homeless issue.

Recommendation will not be implemented because it is not warranted or reasonable.

City workers (HOT or DPH) who have access to health or substance abuse providers or a client's mental health information are prohibited by law (HIPAA) from sharing it with law enforcement officers.

Recommendation R.A.3: Police training should include methods to deal with mentally unstable individuals.

Recommendation has been implemented.

Over 500 first-responder members have received Crisis Intervention Team (CIT) training in the past 2 years (see SFPD Department Bulletin 16-097, Response by Crisis Intervention Trained Officers). In addition, there has been a specific policy (Department Bulletins 11-113, 13-120, and 15-155, Response to Mental Health Calls with Armed Suspects) since 2011 outlining how officers are to respond to persons in crisis which involves a weapon other than a firearm. This policy establishes the guidelines officers are to follow, including promptly requesting a supervisor to respond, with an emphasis on creating time and distance when a person in crisis is armed with a weapon other than a firearm and poses a danger only to him/herself. Officers are trained in this approach beginning in the basic academy, through CIT training, and as part of continued professional training (CPT).

Recommendation R.A.4. Police policies and legal consequences need to be better coordinated so that police are not put in a position where citations have no effect.

Requires further analysis.

The SFPD is but one part of the larger "Law Enforcement" model. Police Officers enforce laws that are passed by lawmakers. The District Attorney's office, courts, and legislators have a much stronger role to play when it comes to legal consequences.

Recommendation R.B.1. Take advantage of the coordination opportunities provided by the formation of the new Department on Homelessness and Supportive Housing to fund and implement a coordinated entry system.

Recommendation will be implemented in the future.

DHSH is in the process of moving its system to a coordinated entry process to better coordinate services and prioritize people for housing, shelter, and services based on system-wide priorities. DHSH has begun this process by piloting coordinated entry for federally funded housing programs for chronically homeless adults and veterans. DHSH is in the planning process for the family system and plans to expand coordinated entry to all subpopulations by October 2018.

On the November 2016 election, San Franciscans will consider Proposition J, a Charter amendment creating a homeless housing and services fund and transportation improvement fund. If approved by voters, the Homeless Housing and Services Fund would be used to provide services to the homeless, including programs to prevent homelessness, create exits from homelessness, and move homeless individuals into more stable situations. Proceeds of the fund can be used to support operations, including implementation of a coordinated entry system.

Recommendation R.B.2. Develop a consistent intake system for information sharing across all departments servicing the homeless.

Recommendation will be implemented in the future.

DHSH is working on developing data and information sharing protocols and processes. This protocols will be consistent with Health Insurance Portability and Accountability Act (HIPAA) regulations.

Recommendation R.B.3. Take advantage of the coordination opportunities provided by the formation of the Department on Homelessness and Supportive Housing to require all agencies using city/state/federal funding to use the same database to find housing opportunities.

Recommendation will be implemented in the future.

DHSH plans to require all DHSH contracted service providers to utilize this common database for homeless services. DHSH plans to offer technical assistance to providers to train staff and make the transition. Exceptions may need to be made for programs where anonymity is key to safety.

Recommendation R.B.4. First Responders need access to a coordinated entry system.

Requires further analysis.

DHSH is prioritizing setting up a coordinated entry system and ensuring access and full utilization by DHSH funded service providers. Further analysis is required to determine what components of the system are most appropriate and useful for first responders to be able to access.

Recommendation R.C.1. Contracts with organizations receiving City funding should require comprehensive Outcome Performance Measures which include client outcomes.

Recommendation will be implemented in the future.

As contracts are renewed, DHSH will look to add in comprehensive client outcome measurements. It is important that outcome expectations are consistent across like programs for like subpopulations and that DHSH takes guidance from HUD on the minimum client level outcomes to track. All current DHSH contracts will come up for renewal between now and 2021.

Recommendation R.C.2. The Department of Homelessness and Supportive Housing should arrange for homeless service agencies to follow the Navigation Center model and have ongoing monitoring of their Outcome Performance objectives overseen by a new program in the Controller's Office, rather than at the department or service agency level when new programs are initiated.

Recommendation will not be implemented.

The Controller's Office will continue to play its role as chief accounting officer and auditor for City services but will not establish a new program to oversee DHSH outcomes. DHSH has established a Data and Performance Unit within the department to evaluate the impact of programs and will continue to partner with the Controller's Office, as appropriate.

Recommendation R.C.3. The Department of Homelessness and Supportive Housing should generate a public annual report showing the outcome scores of all homeless services agencies and the funding they received.

Recommendation will be implemented in the future.

Once the DHSH coordinated database is fully implemented, DHSH plans to have live dashboards available on the department's website to show system level outcomes and funding information.

Recommendation R.D.1. The Mayor should direct the newly organized Department of Homelessness and Supportive Housing to move from the restrictive shelter system to the Navigation Center style system which triages clients to the appropriate services.

Recommendation will be implemented in the future.

There were many lessons learned from the Navigation Centers, including how to operate low-threshold environment and the importance of co-locating services at shelters. There are plans to implement some of the lessons learned at traditional shelters. The timeframe for these reforms are budget dependent.

Recommendation R.D.1.1. The Mayor should direct the newly organized Department of Homelessness and Supportive Housing to provide emergency shelters when there is a natural disaster. These shelters should not be permanent housing.

Recommendation will not be implemented.

In previous years the Human Services Agency has operated emergency shelter in the case of extreme rain or weather. DHSH, Human Services Agency and Department of Emergency Management are working together to determine which department or team of departments should be responsible for opening and managing emergency shelters in the event of a natural disaster. DHSH recommends that the responsibility for opening and managing emergency shelters in the event of a natural disaster to the Human Services Agency and Department of Emergency Management. These agencies have the capacity and experience to manage these types of emergency shelters.

Recommendation R.D.2. The Mayor should explore and acquire new sites where additional Navigation Centers can be opened. The Board of Supervisors should urge the Mayor to fund these additional sites.

Recommendation has been implemented.

The Board of Supervisors recently passed and the Mayor signed legislation calling for the development of six Navigation Centers in the next two years. On June 28, 2016 the City opened the second Navigation Center at the Civic Center Hotel at 20 12th street. This second site will replicate the successful service model at 1950 Mission Street and will add 93 beds of capacity to the Navigation Center System. DHSH is in process of opening a third Navigation Center on Port property in the Central Waterfront area on 25th street. This site is likely to be opened in January 2017. DHSH continues to evaluate sites for additional Navigation Centers. Staffing is a key component of the success of the Navigation Centers. As DHSH works to open additional sites, funding for staff and operations is essential for success.

Recommendation R.D.2.1. The Mayor should ensure that the new coordinated Department of Homelessness and Supportive Housing provide sufficient staff at each Navigation Center location to deal with the mental, physical and emotional issues the homeless bring to the sites. The Board of Supervisors should approve funding.

Recommendation has been implemented.

Staffing is a key component of the success of the Navigation Centers. As DHSH works to open additional sites, funding for staff and operations is essential for success.

Recommendation R.D.5. The city must increase the stock very low income housing to meet the current need.

Requires further analysis.

Between January 2004 and December 2015, the City placed 12,708 individuals into permanent housing. The City has 6,278 units in its supportive housing portfolio; 1,301 added between FY 2011-12 and FY 2015-16. Due to new units and turnover, over 3,000 individuals have been placed in a supportive unit in this time period. DHSH is in the planning phases for three additional PSH sites to be opened within the next year.

Recommendation R.E.1.1. mySF311.org's Homeless -- Person Seeking Help page should not be alphabetical, but instead be categorized, and include detail about each link as demonstrated on HSA's Housing & Homeless Services page captured in Figure E-4.
Homeless -- Person Seeking Help page found at http://sf311.org/homeless%E2%80%93-person-seeking-help as of May, 2016. Also available in Figure13.
Housing & Homeless Services page found at http://www.sfhsa.org/76.htm in May, 2016. Also in Figure 14

Recommendation will be implemented.

311 agrees with this recommendation and has made the changes to the website as reflected in the following link: https://sf311.org/homeless-person-seeking-help.

DHSH is prepared and eager to collaborate with 311 to ensure that information about services is accessible and available to those seeking assistance. DHSH will proactively work with 311 to ensure DHSH's website has all up-to-date information that can be linked from the SF311.org site.

Recommendation R.E.1.2. mySF311.org's Homeless -- Person Seeking Help page should include the detailed shelter information found on 311's Shelters page
Person Seeking Help page found at http://sf311.org/homeless%E2%80%93-person-seeking-help, as of May, 2016. Also available in Figure 13.
SF311.org's Shelters page found at http://sf311.org/homeless-reservation-centers, in May, 2016.

Requires further analysis.

311 redesigned its website and in the process removed pages that repeated information gathered from other agencies. 311 does not have staffing resources to ensure the accuracy of the information provided on those pages and many of the pages contained information no longer accurate due to changes made by the service provider. One of these pages included the Shelter Page referenced in the recommendations (http://sf311.org/homeless-reservation-centers) so this page is no longer in existence. However, 311 agrees that in the Homeless -- Person Seeking Help page there should be a section containing shelter information. Our page: https://sf311.org/homeless-person-seeking-help contains a "Shelter" category, with hyperlinks to each of the included sub-categories. One of these sub-categories, "Reservation Centers for Shelters" (shown in highlight below), links directly to the HSA Homeless and Housing web (http://sfhsa.org/76.htm) page to ensure information is relevant and accurate since it is maintained by HSA staff.

DHSH is prepared and eager to collaborate with 311 to ensure that information about services is accessible and available to those seeking assistance. DHSH will proactively work with 311 to get them the information needed for the sf311.org.

Recommendation R.E.1.3. mySF311.org's Homeless -- Person Seeking Help page should remove the "Human Services" link and replace it with clearly named links and attendant details similar to HSA's Housing & Homeless Services page, copied here:

Requires further analysis.

311 has limited staffing available to create separate web pages and ensure their accuracy when the responsible agency already has this information available on their respective website; therefore, 311 aims at

linking to pages from the responsible agencies. This ensures, as information changes (i.e. shelter address, hours, phone number), 311's staff does not need to update a duplicative page, and 311 staff can be assured to always have up-to-date and accurate information to provide to its customers. There are only a few instances when an exception is made, and 311 will create its own page, such as in the case of the category of "Homeless Concerns and Resources" (previously named "Homeless"). Since this category expands through many different agencies, 311 has created its own web page, allowing users to more easily navigate and obtain information rather than having to visit different department's website. Since the redesign of the website, we have removed the "Human Services" link as was recommended but did not replace with similar information to HSA's Housing and Homeless page as recommended. Instead, a newly created page https://sf311.org/homeless-person-seeking-help has been created, which provides a more organized set of links along with a brief explanation to each, including a link to HSA's Housing & Homeless Services page when clicking on the "Resource Centers for Homeless Assistance" link found in the "Shelter" subsection.

DHSH is prepared and eager to collaborate with 311 to ensure that information about services is accessible and available to those seeking assistance. DHSH will proactively work with 311 to get them the information needed for the sf311.org.

CITY AND COUNTY OF SAN FRANCISCO
CIVIL GRAND JURY

July 7, 2016

Angela Calvillo
Clerk of the Board
SF Board of Supervisors
City Hall, Room 244
1 Dr. Carlton B. Goodlett Place
San Francisco, CA 94102

Dear Ms. Calvillo,

The 2015 – 2016 Civil Grand Jury will release its report entitled, "San Francisco Homeless Health and Housing: A Crisis Unfolding in our Streets" to the public on Tuesday, July 12, 2016. Enclosed is an advance copy of this report. Please note that by order of the Presiding Judge of the Superior Court, Hon. John K. Stewart, this report **is to be kept confidential until the date of release (July 12th).**

California Penal Code §933 (c) requires a response to be submitted to the Presiding Judge no later than 90 days. California Penal Code §933.5 states that for each finding in the report, the responding person or entity shall indicate one of the following: (1) agree with the finding; or (2) disagree with it, wholly or partially, and explain why.

Further, as to each recommendation, your response must either indicate:

1) That the recommendation has been implemented, with a summary of how it was implemented;
2) That the recommendation has not been, but will be, implemented in the future, with a timeframe for implementation;
3) That the recommendation requires further analysis, with an explanation of the scope of that analysis and a timeframe for discussion, not more than six months from the release of the report; or
4) That the recommendation will not be implemented because it is not warranted or reasonable, with an explanation.

Please provide your response to Presiding Judge Stewart at the following address:
400 McAllister Street, Room 008
San Francisco, CA 94102-4512

Respectfully,

Jay Cunningham, Foreperson
2015 – 2016 Civil Grand Jury

City Hall, Room 482
1 Dr. Carlton B. Goodlett Pl, San Francisco, CA 94102
Phone: 415-554-6630

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SAN FRANCISCO HOMELESS HEALTH & HOUSING

A CRISIS UNFOLDING ON OUR STREETS

June 2016

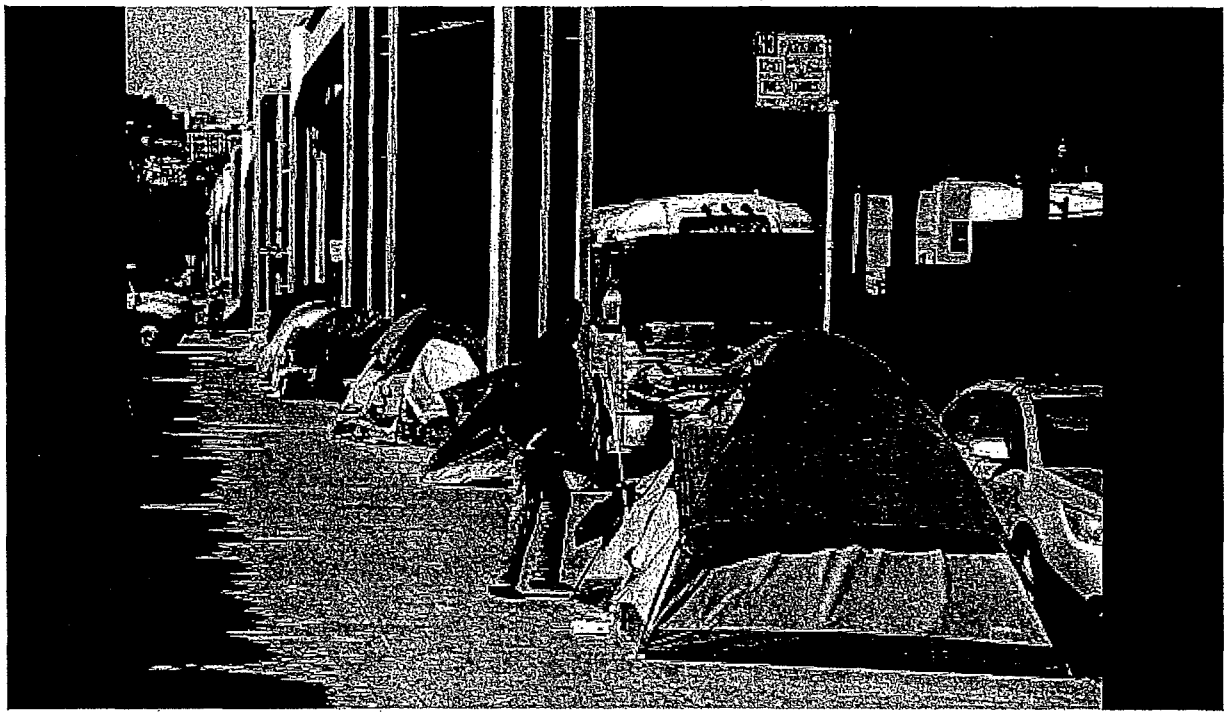

Photo: Eric Risberg/Associated Press

City and County of San Francisco
Civil Grand Jury, 2015-2016

Members of the Civil Grand Jury

Jay Cunningham, Foreperson

Alison Ileen Scott, Esq., Foreperson Pro Tem

Arti M. Sharma, M.S., Recording Secretary

Sheldon Bachus

Richard Baker-Lehne

Mary Lou Bartoletti, M.B.A.

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Andrew Lynch

Wassim J. Nassif

Patti Schock

Michael Skahill, Ph.D.

David Stein

Charles Thompson

Eric S. Vanderpool, Esq.

THE CIVIL GRAND JURY

The Civil Grand Jury is a government oversight panel of volunteers who serve for one year. It makes findings and recommendations resulting from its investigations.

Reports of the Civil Grand Jury do not identify individuals by name. Disclosure of information about individuals interviewed by the jury is prohibited. California Penal Code, section 929

STATE LAW REQUIREMENT

California Penal Code, section 933.05

Each published report includes a list of those public entities that are required to respond to the Presiding Judge of the Superior Court within 60 to 90 days as specified.

A copy must be sent to the Board of Supervisors. All responses are made available to the public.

For each finding, the response must:

1) agree with the finding , or
2) disagree with it, wholly or partially, and explain why.

As to each recommendation the responding party must report that:

1) the recommendation has been implemented, with a summary explanation; or
2) the recommendation has not been implemented but will be within a set timeframe as provided; or
3) the recommendation requires further analysis. The officer or agency head must define what additional study is needed. The Grand Jury expects a progress report within six months; or
4) the recommendation will not be implemented because it is not warranted or reasonable, with an explanation.

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SUMMARY

Motivated by an increasingly visible homeless population in the neighborhoods of eastern San Francisco, the jury undertook the daunting challenge of understanding why, with all the money being spent, there is not a marked improvement in providing housing and supportive services for the neediest citizens of San Francisco.

San Francisco's current public-sector efforts to address the increase in homeless citizens began in the 1980s. Existing City departments were provided funding to work on the problem. Presently the Human Services Agency (HSA) and the Department of Public Health (DPH) provide programs and services mainly by contracting with outside agencies.

We believe that spreading services among numerous City departments and contractors makes it more challenging for the City to have a coordinated approach to addressing the needs of the homeless. By interviewing personnel in City departments, as well as the agencies hired by the City to provide homeless services, we identified changes that could make the City's homeless programs more successful.

Now, in July of 2016, a new department, the Department of Homeless and Supportive Housing, is coming into existence and hopefully will be a unifying force to address the needs of the homeless.Realizing that a new department creates a great opportunity to improve coordination, we recommend the following changes:

- First responders should be used more effectively - We believe that the San Francisco Homeless Outreach Team (HOT) should serve as first responder to non-violent incidents involving the homeless.
- A coordinated intake system is necessary - We heard from many sources of the need for a coordinated intake system. We believe that an integrated, standardized system containing health, housing and police information on the homeless should be available to all service providers to assist them in providing needed homeless services. Although the Health Insurance Portability and Accountability Act of 1996 (HIPAA) restricts the sharing of some health data, this restriction can be waived with permission from the client. A rich set of data available to all providers identifying and coordinating services is needed.
- Meaningful outcome data should be developed and monitored - Tracking outcome results at the individual level is key to determining program success. However, this appears not to be a priority among homeless service organizations except in federal grants from the US Department of Housing and Urban Development (HUD). We also found that the monitoring of this data by the Controller's department helped the Navigation Center continually improve by measuring client success and failure.
- Supportive housing and a shared distribution system are needed - We believe that supportive housing with ease of access is needed to move the homeless from the street to a more humane living situation. We found that there is a need for a single housing application system where case managers and housing providers can be properly matched. This would be a common shared distribution system for low income and supportive housing. Realizing that there is insufficient very low income housing available and that

tents on city sidewalks are both illegal and a health hazard, we recommend an intensive effort to put very low income housing in place.

- A helpful website is needed - We found no comprehensive, helpful source for reaching the City's homeless services.

We hope that with a greater understanding of how we arrived at the homeless situation we find ourselves in today, we can support a view that we need to help and not blame. A strong commitment to strengthening existing programs will enable the City to provide housing and/or housing with services for the citizens who are unable to provide for themselves.

OBJECTIVES

The overall objective of this investigation is to evaluate the efficiency and effectiveness of the City's program to eliminate homelessness by examining the inter-agency management provided by the City and examining whether the goals could be better coordinated to result in more beneficial outcomes. These agencies include:

- SF Health Services Authority (SF-HSA)
- SF Department of Public Health (SF-DPH)
- US Housing and Urban Development (US-HUD)
- The Mayor's Office of Housing, Opportunity, Partnership and Engagement (HOPE)

First Responders

We sought to understand which city services are the first to respond to calls about homeless issues and whether the response could be improved.

Data Collection and Data Sharing

Knowing that multiple agencies, using their own databases, serve the homeless, we sought to understand whether there were negative issues arising from lack of database coordination.

Outcome Requirements and Monitoring

Realizing that funding is distributed to nonprofit agencies by SF-HSA, SF-DPH and US-HUD, we wanted to understand contract requirements and contract monitoring across the funding agencies to see if there was consistency and if outcomes were effectively monitored.

Housing

Learning that "Housing First" is a City concept with an objective matching its name, we wanted to know if there were issues in availability of housing and how that affected the programs that are designed to transition clients into supportive housing.

SF311.org

Knowing that computer use is an excellent way to get information and help, we wanted to know if connecting to homeless services on our SF311.org website was an easy task.

SCOPE AND METHODOLOGY

We interviewed previously homeless residents, as well as those who provide services to them, to understand why, with all the resources aimed at "solving" "homelessness" in San Francisco, little progress has been made at reducing this population.

We examined the outcome measures of several homeless service programs funded or controlled by the City and compared them to the federal requirements for outcome monitoring.

When we started this investigation in September 2015, we were impressed with the number of separate City departments providing services to the homeless.

As visits and interviews continued, we searched for common practices, information portals and shared tools. We also looked for indications of resource shortages. We wondered if the various City agencies serving the homeless had a good understanding into their client's' situation and predicament. We also asked who was in charge. We apparently were not alone in our questioning; during our investigation our Mayor announced the formation of a new department: the Department of Homelessness and Supportive Housing (DHSH).

We interviewed managers working for the Human Service Agency (HSA) and Department of Public Health (DPH). We attended meetings of the Local Homeless Coordinating Board (LHCB) as well as meetings of the San Francisco Interagency Committee on Homelessness (SFICH). We visited the new shelter called The Navigation Center at 1950 Mission, as well as the Behavioral Health Access Center (BHAC) at 1380 Howard and the HSA County Adult Assistance Program (CAAP) building at 9th and Mission. We met with "311" staff and performed our own web searches.

BACKGROUND

San Francisco was subject to the same conditions that led to an increase of homelessness across the U.S. in the 1970s. "Since the mid-1970s, affordable housing has become increasingly scarce and beyond the reach of many people living in poverty because they are forced to contribute increasingly larger proportions of their income towards housing. Moreover, once they are homeless they find it increasingly difficult to get themselves back into affordable housing."[1] Changes in support for affordable housing as well as support for mental care, an increase in drug use, changes in job opportunities from manufacturing to service jobs, have all contributed to the current rise in homelessness in the United States.

San Francisco's recovery from the 2008 financial crisis has been robust. Attributed to a growth in job opportunities and a growth in Urban Mixed Use (UMU) housing, our City budget has increased 47 percent in these eight years. Yet the size of our homeless population has barely moved, recording a slight increase from last year in the December 2015 Point-in-Time survey, the federally required actual count on one evening and statistical count over 6 months of homeless which occurs every two years. Now in 2016, during and since the City's hosting of Super Bowl 50, our streets are inundated with multiple tent encampments distributed under the freeways and alongside commercial buildings. Clearly this growth in job and housing opportunities does not benefit the entire spectrum of the population.

Who are the Homeless?

The 2015 Point-in-Time Count tries to shed light on conditions that cause homelessness as well as the health conditions of those living on the streets.

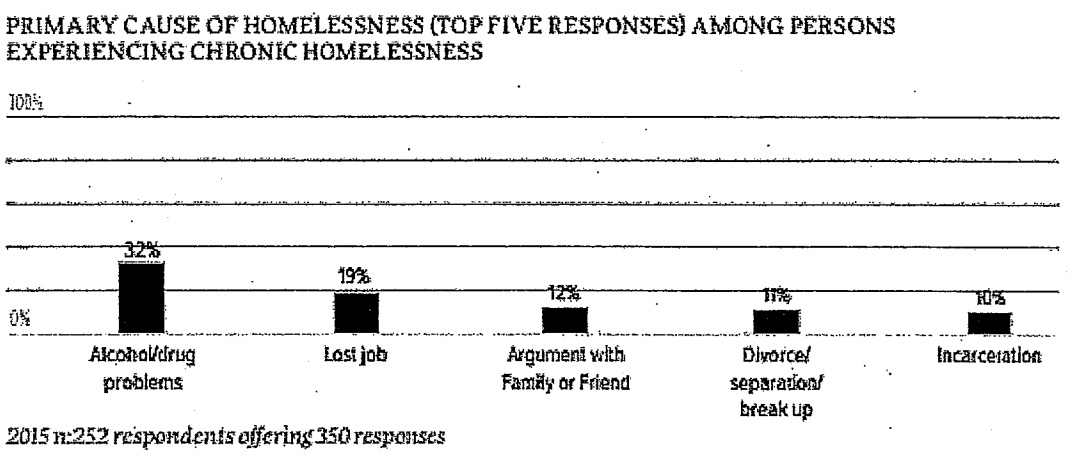
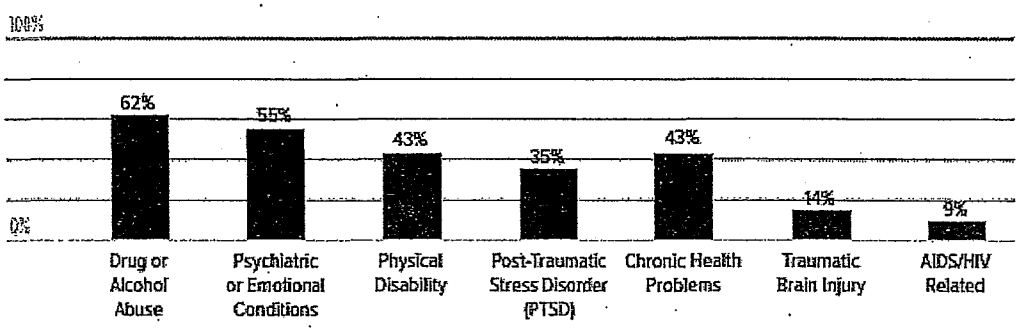


Figure 1: Primary Causes of homelessness

[1] *The Causes of Homelessness in America, Daniel Weinberger, Ethics of Development in a Global Environment (EDGE) | Poverty & Prejudice | Social Security at the Crossroads | Updated July 26, 1999*

Figure 1 shows that alcohol and drug problems are the highest cause listed for those experiencing chronic homelessness. We all have observed and read about the serious issues of needles being dropped on sidewalks and in public parks. These addictions are not only bad for the addicted, but also bad for the community dealing with the consequences.



Drug or alcohol abuse n:253; Psychiatric or emotional conditions n:252; Physical disability n:248; Post-Traumatic Stress Disorder (PTSD) n:254; Chronic health problems n:252; Traumatic Brain Injury n:246; AIDS/HIV related n:243

Figure 2: Health Conditions among the homeless

Figure 2 shows that both substance abuse and psychiatric or emotional conditions are significant issues for the population living on the streets. In order to deal with these issues, we need both housing and treatment services, as well as a triage system to get people to the right services.

Looking at Table 1 from the 2015 Point-in-Time Count and Survey[2] results, we can see that more than half of our homeless are unsheltered and living in cars, tents or on the streets.

Since 1979, San Francisco Civil Grand Juries have submitted six reports focusing on either the homeless problem or the use of community-based nonprofits supported by city and federal taxes which deal with the homeless. Reports have been made, recommendations considered, Homeless Czars appointed, commissions formed, dollars budgeted and spent, but the problem has not ebbed; and San Francisco now faces a crisis with tents lining neighborhood streets.

San Francisco and San Franciscans cannot be accused of apathy. Homeless services are funded by both private donations and City funding. Homelessness is a frequent topic in media, neighborhood computer chat sites, and even discussions by the Board of Supervisors. The City spends significantly over and above its federal and state funding to try to address housing and health problems. While the total cost of the homeless issue is difficult to determine, the San Francisco Budget and Legislative Analyst's Office[3] reported that in Fiscal Year 2012-2013 (FY12-13) the City spent $165,710,629, with $123,181,587 (74.3 percent) of those funds from

[2] 2105 San Francisco Point-in-Time Homeless Count & Survey, report produced by ASR

[3] Homeless Services and Benefits Provided by the City and County of San Francisco, Harvey Rose, July 26, 2013

our City coffers. Since then, the San Francisco budget dollar amounts have increased as reflected in Table 2 in section B.

SAN FRANCISCO HOMELESS POINT-IN-TIME COUNT RESULTS BY SETTING (2015)

	SINGLE ADULTS 25 YEARS AND OLDER	UNACCOM-PANIED CHILDREN AND YOUTH UNDER 25	PERSONS IN FAMILIES	TOTAL	% OF TOTAL
Shelter Count	2,378	206	597	3,181	42%
Emergency shelter and safe havens	1,194	68	337	1,599	21%
Transitional housing	162	32	226	420	6%
Resource centers	204	6	0	210	3%
Stabilization rooms	180	4	4	188	2%
Residential Programs	373	96	30	499	7%
Jail	242	0	0	242	3%
Hospitals	23	0	0	23	<1%
Street Count	2,962	1,363	33	4,358	58%
General Count	2,962	513	30	3,505	47%
Youth Count	0	850	3	853	11%
Total	5,340	1,569	630	7,539	100%
Percent	71%	21%	8%	~100%	-

Source: Applied Survey Research. (2015). San Francisco Homeless Count. Watsonville, CA.

Note: Street Count includes individuals, persons in families, as well as those residing in cars, vans, RVs, and encampments.

Table 1: San Francisco Homeless Point-in-Time Count Results by Setting

There have been some successes reducing homelessness for specific populations in the United States. One example is Utah.[4] The success in ending chronic homelessness there is attributed to providing housing along with supportive services. "Housing First" has grown to be a mantra, from the federal level down to city programs, ours included. Data clearly shows that providing housing along with services is proving successful. Studies also show that living on the streets is unhealthy. Homelessness exacerbates health and abuse problems because treatments fail in an unstable environment.

There have been successes in San Francisco as well. With the help of federal programs, the number of homeless veterans has been significantly reduced. Also, the City's focus on housing homeless families has resulted in recent improvements. The Point-in-Time Survey reveals San Francisco Unified School District's efforts to identify at-risk children and HSA's determination to house homeless families is paying off. In 2009, there were 549 "persons in families," 635 in 2011, 668 in 2013, but in 2015, the number was reduced to 630. (See Table 1, above).

We wonder why, with money and good intentions, hasn't the homeless population been reduced in San Francisco? Perhaps a hint is found in a quote from the Utah Report: "Although the

[4] Comprehensive Report on Homelessness, State of Utah, 2014

causes of homelessness are complex, there are solutions. It takes a high level of *collaboration and focus* to implement effective interventions."

This report offers a close look at the City's work to address the problems of the homeless and understand why the homeless problem has not been significantly reduced.

We were delighted to hear, on May 11, 2016, of the new department and director of Department of Homelessness and Supportive Housing (DHSH), and that they intend to consolidate relevant HSA and DPH services.

A: FIRST RESPONDERS

DISCUSSION

SF HOT

The San Francisco Homeless Outreach Team (SF HOT) provides outreach, case management and services to homeless people who are on the street and not using other city homeless services. SF HOT, a part of DPH, has two parts, the medical team and the outreach team. The medical team has access to the Coordinated Care Management System (CCMS) database managed by DPH. This approximately 47 member team has about 17 city employees and 3 subcontractors. The rest are contractors from the non-profit organization, Public Health Foundation Enterprises (PHFE). See Appendix A for the September 2015 organization chart.

SF HOT works with a social worker and interfaces with the homeless. Most recently this team has been helping direct chronically homeless clients to the Navigation Center. The medical team, directed by a medical doctor, consists of nurses who are called upon when needed. From our interviews we have learned that of all the city programs, SF HOT is the program with staff that best relates to the clients living on the streets.

SF HOT focuses on the chronic homeless population. The organization is not large enough to address the larger homeless population, but will work with the Public Works Department as well as the SF Police when closing a homeless encampment. SF HOT members also work with Community Benefit Districts as they attempt to address homeless issues. From our interviews with agencies serving the homeless and with formerly homeless individuals, we have learned that these teams often have a better chance of engaging the homeless than the police, because they are seen by the homeless as providing help and are not as readily feared.

Neighbors and Police

With the rapid increase in residential and commercial development in San Francisco since 2008, areas of the city that were formerly vacant lots or abandoned buildings are no longer havens for the homeless. The resulting development has moved the homeless into local neighborhoods - mostly in Districts 6, 9 and 10.[5] Suddenly residents find encampments at their doorsteps, along with the accompanying problems of drug use, crime, and unsanitary conditions. Pedestrians are often confronted by the mentally ill when navigating the now crowded sidewalks.

The traditional response to these encampments is for citizens to call the police. This is also the response to individuals sleeping on the sidewalks, using needles, or yelling and talking to the air, etc. This seems logical, because camping and drug use are illegal. However, the police told us they see themselves as "tickets and handcuffs guys" and are taking a back seat to other agencies who are trying to help the homeless (SF HOT, DPH or perhaps their own SFPD Crisis Intervention Team). They prefer to let 911/311 respond to citizen issues and concerns.

[5] 2015 Point-in-Time Homeless Count and Survey, produced by ASR
http://www.sfmayor.org/modules/showdocument.aspx?documentid=455

From discussions with police captains, we have learned that the police who have been trained to deal with traditional crime are now faced with a population of people with significant health and mental health issues. Residents also understand traditional crime, but are unable to cope with human beings in mental/physical health crisis.

We understand that the Police Department offers a course in Crisis Intervention. Considering the high percentage of mental illness identified in the homeless population, this class and refresher courses are necessary. During our interviews we were told that it would be good for Police to have CIT training.

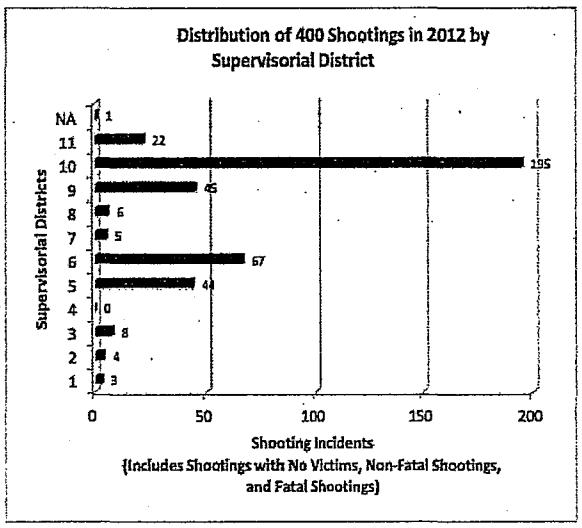
It is easy to understand that residents calling the police are frustrated by the inability of the police to solve the problem. The police are, as first responders, often faced by an ill person yet have no access to their mental/physical health history.

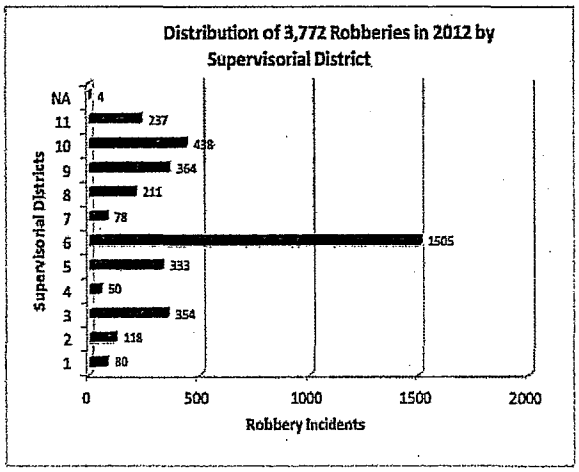
City policies have allowed people with physical/mental health issues to live on the streets or on public land. City residents have only a disconnected way of interfacing with city services to solve a homeless issue. They call 311 or 911 or use the SF311.org website or app. Issues may be addressed, but are often only temporarily solved. Residents don't have a way to coordinate with city services at an individual level to follow problems with individuals to positive conclusions.

Police Resource Decisions

In the districts with the highest rate of homeless residents (6, 9, 10), there is also the highest crime rate as shown in Figure 3 below. We learned from interviews with police captains that with limited police resources, decisions need to be made about where to send the resources. Dealing with one homeless individual may take hours. If the individual is considered a danger to themselves or others (5150[6]), the police may spend hours waiting for the person to be placed on a 72 hour hold. We learned from interviews with homeless providers that handing out tickets to homeless individuals does not help anyone. The latest twist we learned is that the credit rating of the homeless person will be negatively affected if tickets are not paid. The irony of that is obvious.

[6] **Welfare and Institutions Code - WIC DIVISION 5. COMMUNITY MENTAL HEALTH SERVICES [5000 - 5912]** http://leginfo.legislature.ca.gov/faces/codes_displaySection.xhtml?lawCode=WIC&sectionNum=5150





Source: San Francisco Police Department Crime Analysis Unit

Figure 3: Charts of Shootings and Robberies by district from 2012

FINDINGS

F.A.1. DISPATCH HOT: San Francisco HOT is the most informed first responder for non-violent events, as they are part of DPH and have access to the database CCMS, but health providers are neither dispatched with police nor linked as responders to 311 calls.

F.A.2. POLICE ACCESS: There is no coordinated plan to support police first responders in a role that is not dealing with criminal behavior. When the police are called out for homeless or encampment issues, they have no access to health or substance abuse providers or information regarding the client's mental health.

F.A.3. POLICE TRAINING: Police say they have limited training, or limited access, to data to deal successfully with the mentally ill. With the high numbers of mentally ill on our streets, even the most compassionate of police when threatened could find themselves in a position where they must follow their procedures and shoot.

F.A.4. POLICE TICKET: Faced with multiple requests for their service, police use judgment regarding enforcement considering the best chance to have a successful outcome. When called to help, they generally do not ticket because it is not productive.

RECOMMENDATIONS

R.A.1. [DHSH] If safe to do so, SF HOT should be the first responders, and the SFPD should accompany when necessary.

R.A.1.1 [DHSH, Mayor, BOS] The number of SF HOT personnel should be increased so that they will be available to respond.

R.A.2. [SFPD CHIEF] Police should have access to mental health and substance abuse data as well as historical interaction with city services when they are called to respond to a homeless issue.

R.A.3. [SFPD CHIEF] Police training should include methods to deal with mentally unstable individuals.

R.A.4. [SFPD CHIEF BOS MAYOR] Police policies and consequences need to be better coordinated so that police are not put in a position where citations have no effect.

B. DATA COLLECTION AND DATA SHARING

DISCUSSION

Before 1982, there was not a great need to track San Francisco's homeless population. "The San Francisco homeless program officially started in October 1982. That winter had historically high levels of rain and historically low temperatures.The downside of this crisis was that the emergency response activated what was supposed to be a short-term emergency solution. The whole shelter system was opened immediately but was identified as a temporary program, in spite of the fact that State cuts to residential and community-based treatment for indigent, mentally ill community members and a good four years of massive federal cuts to America's affordable housing program have created neither out-of-the-blue nor temporary crises."[7]

Spending and Revenue Categories

Spending and Revenue

	Fiscal Year:	2016	Time Span:	5 Year	
	Report Type:	Spending	Related Govt Units:	Exclude	
Character	2011-2012 Amount	2012-2013 Amount	2013-2014 Amount	2014-2015 Amount	2015-2016 YTD Amount**
Aid Assistance	$3,019,706	$8,909,557	$11,320,261	$12,594,255	$10,671,595
Capital Outlay	0	0	0	7,410	1,950
City Grant Programs	66,205,196	67,511,430	73,148,930	78,035,556	48,143,829
Intrafund Transfers Out	0	0	382,093	0	0
Mandatory Fringe Benefits	727,814	817,500	946,284	1,106,436	711,993
Materials & Supplies	35,217	57,811	27,343	8,825	18,785
Non Personnel Services	4,166,013	1,068,115	1,968,862	1,688,456	512,380
Other Support & Care Of Persons	510,731	23,339	3,969	0	0
Salaries	1,851,606	2,064,833	2,277,695	2,531,487	1,758,626
Services of Other Depts	5,458,593	6,272,979	7,536,951	8,472,816	6,537,011
Gross Total	**$81,974,877**	**$86,725,563**	**$97,612,387**	**$104,445,242**	**$68,356,170**
Transfer Adjustments (Citywide)	(2,876,054)	(1,298,762)	(3,357,988)	(3,470,367)	(627,805)
Net Total	**$79,098,823**	**$85,426,802**	**$94,254,400**	**$100,974,875**	**$67,728,364**
** Data as of 03/11/2016*					
*** 2016 is a partial year*					

Table 2. Human Services-> Homeless Services from SF Open Data.

[7] "House Keys not Handcuffs", Paul Boden 2015

As the need grew, so did the money spent and the number of programs supported by city/state/federal funds. Over the four-year period from FY11/12 to FY14/15, the amount spent by Human Services Agency on homeless services increased by 28 percent as shown in Table 2.

Because there is no unified system which tracks the City's spending on homelessness, it is difficult to determine what is being spent in specific categories. If we identify the two groups that service the homeless, we can start to total at least some of the money:

- The first group is HSA and DPH services (now Department of Homeless and Supportive Housing), where the City has budgeted programs to try to address the problems of homelessness. Each has its own method to budget, monitor and distribute funds. While services to people without homes are identified in the categories used by the HSA, that is not the case for the DPH. Appendix B shows the list of DPH programs costing a total of one billion dollars in FY15-16. The budget categories used by HSA in Table 2 do not clearly describe the services or correspond to the table in Appendix B. It is difficult to total the amount spent by each City agency on services affecting the homeless. It is necessary to contact the Budget and Legislative Analyst in order to get an accounting.
- The second group is comprised of the hospitals, police, jails, and Public Works and the money they spend dealing with the existing situation. We have no estimate that connects this spending to homeless issues because services are not budget line items or categories of expenses.

HSA and DPH are separate agencies with separate directors, each appointed by the mayor, yet serve similar homeless populations and provide some similar services. Figure 4 from the "Analysis of Supportive Housing Programs" from the Budget and Analysis Office, December 15, 2014 shows a comparison of units of housing and expenditures on those units. DPH supportive housing units cost more because they provide more supportive services.

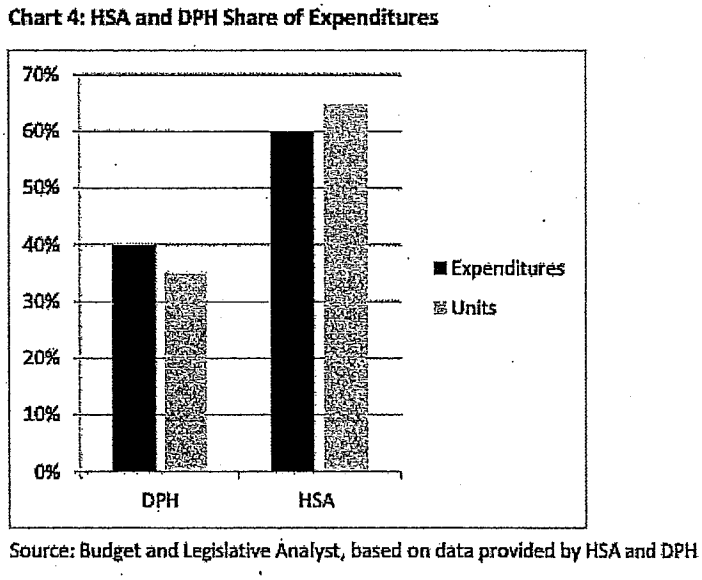


Figure 4: HSA and DPH Share of Expenditures from Policy Analysis Report December 2014

Starting in 1982, programs evolved to serve the homeless in these different city agencies. There was no comprehensive plan which identified the categories (of specific populations of homeless people) we now use when we provide services: Chronic Homeless, Homeless Families, Homeless Veterans, Transitional Age Youth. Additionally there are sub-groupings within each of demographics such as mental illness and substance abuse. This labyrinth was confusing to the Jury when we tried to determine both the amount of money spent on the homeless and its sources.

Evolution of Data Tracking of Individuals

In 1982, agencies used paper systems to keep track of activities and people. As computer usage advanced, individual agency databases and spreadsheets were developed to track services and people. As a result, these have evolved into many disparate systems. Uncoordinated systems have created barriers, some of which create a danger to the very homeless they are trying to serve. For example, if a first responder or a hospital psychiatric ward has to blindly treat a person experiencing methadone withdrawal (because the substance treatment relationship is not revealed), the treatment or prescription might be incorrect because the responder does not have access to the data needed to identify the core problem.

The Human Service Agency (HSA) uses a database called Homeless Management Information System (HMIS) along with other databases. DPH uses a database called CCMS for medical data. They also use AVATAR (Mental Health), LCR (Lifetime Clinical Record) and ECW (E Clinical Work). At the private contracting level, we see positive movement toward using the same client intake database. Non-Government Organizations (NGO's) and non-profit agencies that contract with San Francisco to help homeless families are taking steps to embrace a common database. HSA initiated an RFP for consultant services to work with programs that serve Homeless Families. Currently Salesforce or Apricot databases are used by different agencies that have similar clientele and goals. Using the same system would allow for cross-contract coordination.

As San Francisco moves towards coordinated assessment, a shared process for connecting people experiencing homelessness with needed resources, it is clear why sharing information becomes critical. For example, if a person on the street is exhibiting threatening behavior, HOT's database (and/or personnel) might be able to reveal that this person is actively being treated for a condition and provide a rational basis for the situation. This can give medical/health personnel the chance to de-escalate -- saving the person from the fatal mistake of threatening an officer (who has no access to medical information).

As we talked to HSA and DPH service providers, we found that there was no common intake database which contained basic identification information as well as health history, housing history and criminal history. We talked to providers who had worked in other cities where such databases existed. Yes, the medical information was given to the intake personnel by consent, in order not to violate HIPAA, but there was one database system used by all service providers. It is easy to see how things evolved in a different way, but now that there is a new "Department of Homelessness and Supportive Housing" the time is ripe for correcting the disorganization that resulted from information silos and develop a common intake or coordinated assessment system for individuals.

Tracking Housing Resources

As we met with different service providers, whether they provide services for homeless families or homeless shelter residents, we found that every agency was on its own to find housing, limited as it may be, for their clients. This resulted in competition between agencies as well as duplication of efforts.

We have been told that there is an inequality to the method that supportive housing units are disseminated to the homeless. A client of the Navigation Center currently has priority (for permanent housing) over other temporary shelters. Thus, the distribution of permanent housing for chronically homeless may not be provided to those who have been homeless the longest.

We heard the desire from the agencies to have a single shared resource to help them find appropriate housing situations for their clients who were ready for that step.

FINDINGS

F.B.1. DISPARATE SOURCES: Many agencies are providing services and gathering information without a common data source.

F.B.2. INTAKE SYSTEM: Local agencies providing services are not required to use the same intake database. There is no coordinated data entry system. This results in duplication of entries with homeless clients having to enter the same information in multiple places.

F.B.3. INITIAL CONTACTS: First responders do not have access to a coordinated access/entry system.

F.B.4. HOUSING SERVICES: Multiple agencies are looking for housing resources – shelters, apartments, etc. for their clients. Each maintains its own databases of resources and compete with each other. There is no single coordinated resource for government sponsored housing.

RECOMMENDATIONS

R.B.1. [DHSH]: Take advantage of the coordination opportunities provided by the formation of the new Department on Homelessness and Supportive Housing to fund and implement a coordinated entry system.

R.B.2. [DHSH]: Develop a consistent intake system for information sharing across all departments servicing the homeless.

R.B.3. [DHSH]: Take advantage of the coordination opportunities provided by the formation of the Department on Homelessness and Supportive Housing to require all agencies using city/state/federal funding to use the same database to find housing opportunities.

R.B.4. [DHSH]: First Responders should have access to a coordinated entry system.

C: CONTRACT OUTCOME REQUIREMENTS AND CONTRACT MONITORING

DISCUSSION

The US-HUD Continuum of Care contracts require outcome performance measures. Of the amount in Table 3 below[8] spent on Homeless issues in San Francisco for FY 2012-2013, $42,529,042 is federal/state funding with $24M being federal funding. While contracts with the City paid for by federal grants require measuring the client outcome, this is not a requirement for all City negotiated contracts.

FY 2012-13 Expenditures on Homeless Services by Category and Funding Source

Service Category	Local Funding	Federal/State Funding	All Funding Sources
Permanent Supportive Housing	$64,282,828	$17,248,182	$81,531,010
Transitional Housing	$7,975,866	$1,949,147	$9,925,013
Emergency Shelters	$16,277,080	$1,330,001	$17,607,081
Resource Centers and Drop-in Clinics	$5,417,895	$1,327,801	$6,745,696
Outreach and Case Management	$8,503,527	$6,142,998	$14,646,525
Substance Abuse and Mental Health	$3,754,510	$5,032,575	$8,787,085
Primary Care	$9,093,260	$5,207,630	$14,300,890
Education and Employment Services	$0	$1,638,034	$1,638,034
Eviction Prevention/Rapid Rehousing	$7,876,621	$2,652,674	$10,529,295
GRAND TOTAL	**$123,181,587**	**$42,529,042**	**$165,710,629**

Sources: Human Services Agency, Department of Public Health, Mayor's Office of Housing

Table 3: FY 2012-2013 Expenditures on Homeless Services by Category and Funding Source

The McKinney-Vento Education of Homeless Children and Youth Assistance Act [9] is a federal law that ensures immediate enrollment and educational stability for homeless children and youth. McKinney-Vento provides federal funding to states for the purpose of supporting district programs that serve homeless students. This US-HUD program requires Outcome Performance Measures as shown in Table 4.

[8] Homeless Services and Benefits Provided by the City and County of San Francisco, Harvey Rose, July 26, 2013, pg 2 http://sfmuna.net/wp-content/uploads/2014/12/HarveyRose-Report-2013.pdf

[9] http://www2.ed.gov/policy/elsec/leg/esea02/pg116.html

2015 McKinney-Vento Continuum of Care Homeless Assistance Grants

2015 CoC Performance Measures

#	Measure	Defined
1	Obtain/Retain PH	% of participants remaining in PH or exited to PH
		% of participants exited to PH
2	Reduce evictions	% of households evicted this year
3	Recidivism	% of participants who did not exit to PH, death, or institution
4	Recidivism	% of participants that exited to PH returning to homelessness within 12 months of exit, using HMIS data showing reentry in the system
5	Reduce time to access permanent housing	% of participants obtaining permanent housing within 90 days of being accepted into the program.
6	Increase employment income	% of adults who increased employment income between entry and follow-up/exit
7	Increase total income	% of participants with increased income between entry and follow up/exit
8	Maintain or increase total income	% of participants that either increased or maintained income between entry and follow up/exit
9	Reduce households with no income	% of households exiting with income (of any amount)
10	Increase enrollment in SSI/SSDI, SDI, CAPI and veterans benefits	% of disabled participants with SSI/SSDI, SDI, CAPI, or veterans benefits by follow-up or exit
11	Obtain non-cash mainstream benefits	% of participants with non-cash mainstream benefits by follow up/exit (includes health insurance)
12	Occupancy	% reflecting average # of households residing in a program per night relative to capacity

Table 4: Examples of Continuum of Care measures

Most contracts with local agencies serving homeless families, funded by HSA, contain some client Outcome Performance measures, such as the objectives excerpted from Hamilton Family Center[10] shown below. These are minimal compared to the Continuum of Care measures, above. All four of the HSA funded programs for homeless families use the same minimal client performance objectives.

[10] Appendix A, Scope of Services to an agreement between the Department of Human Services (DHS) and Hamilton Family Center, effective July 1, 2013 through June 30, 2016, p5 of 7

VIII. Outcome Objectives

A. A minimum of 60% of clients exiting the program who have stayed for 30 days or more will move into permanent housing, transitional housing or a residential treatment program.

B. A minimum of 80% of clients residing in the shelter over 30 days who have no income and are eligible for benefits or entitlements will obtain them by the end of their stay.

C. A minimum of 75% of clients surveyed will rate the program as good or excellent.

Figure 5: Excerpted from Appendix, Hamilton Family Center, July 1, 2013 -June 30 2016

Requiring client Outcome Performance measures in HSA contracts is part of the story. Monitoring these contracts is the other. In 2003, the City passed Proposition C, a City Charter amendment (Controller's Audit Fund) requiring 2 tenths of 1 percent of the City budget be dedicated to the Controller's Office in order to monitor non-profit organizations with city contracts.

The Jury examined the auditing objectives of the Controller's office in spending this money, and we learned that the monitoring was only of Fiscal and Compliance issues for these service agencies. In nearly all cases, the categories of the Controller Audits listed in Figure 6[11] shows *no monitoring* of any client outcome objectives. That work is typically left to the department or funded agency, the exception being the City's Navigation Center.

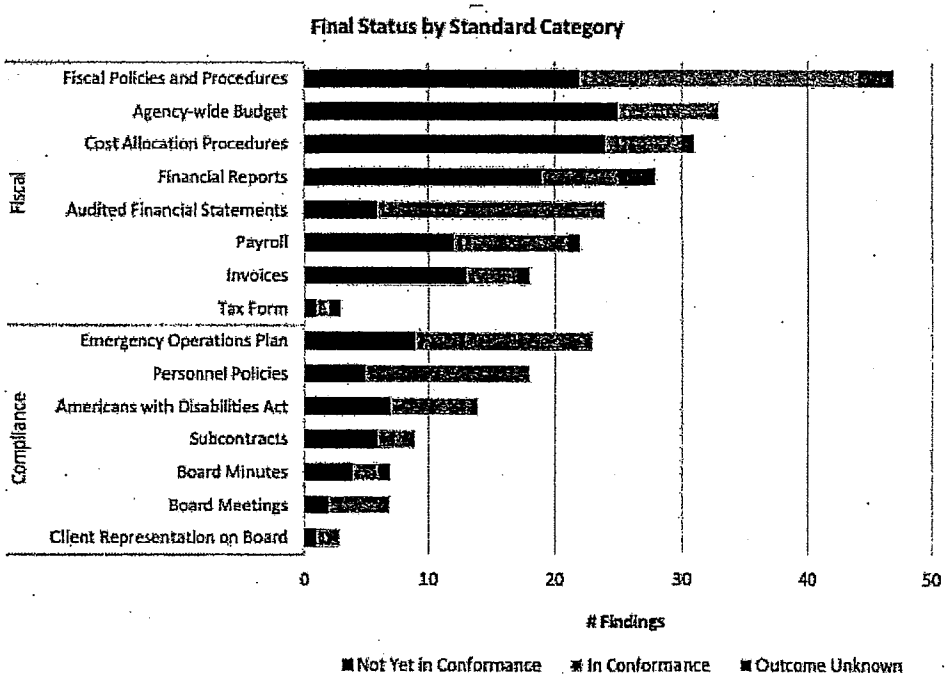


Figure 6 : Categories monitored by San Francisco Controller

[11] Citywide Nonprofit Monitoring and Capacity Building Program, Fiscal Year 2014-15 Annual Report, September 3, 2015

In 2015, the City opened the first Navigation Center, on Mission Street, operated by contract with Episcopal Community Services (ECS). Money from the Mayor's budget paid the Controller's Office to develop tools and provide data to monitor Navigation Center client outcomes. This one-of-a-kind monitoring extended the reach of the Controller's Office to track the effectiveness from point of service to final outcome. Extending the Controller's tracking into the human "metrics" via the Controllers "Dashboard", powerful insights were regularly offered to the Navigation Center management and a powerful learning relationship was created. The Navigation Center program was able to adapt and grow, and ultimately succeed using this process. Valuable outcome data was shared not only with management, but also with the Mayor, Board of Supervisors (BOS) and the public.

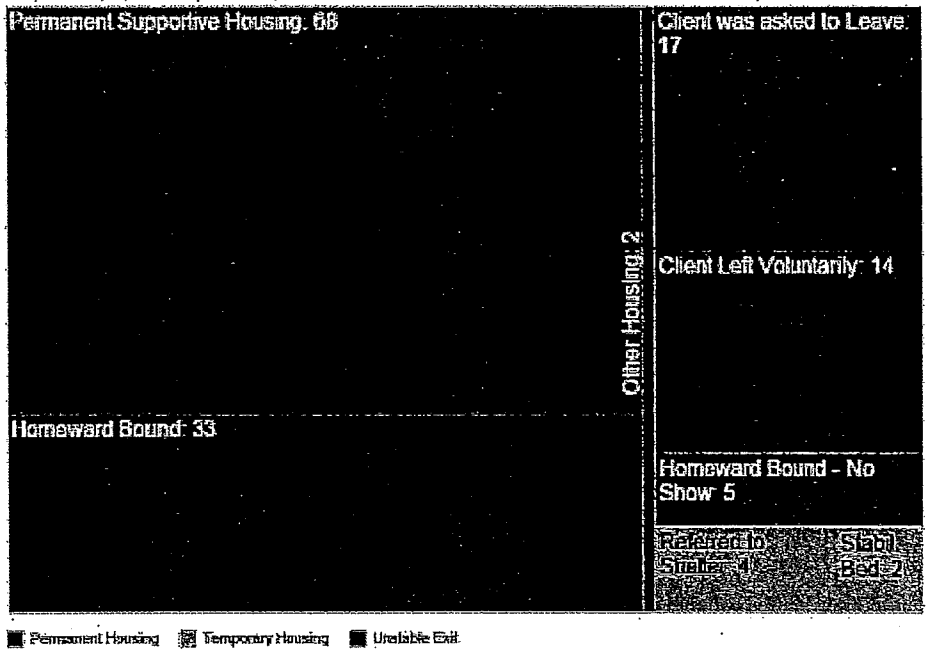


Figure 7: Exit data from 6 month Navigation Center Controller Report[12]

Monitoring outcomes, as pioneered by the Controller's Office at the Navigation Center, is a way to focus and hone the objectives of programs and services people receive. Likewise, if objectives cannot be met, identifying the reason for failure will help improve the program. Increased funding for more Navigation Centers is directly linked to its documented outcome successes provided by the Controller's Office.

Now that there is a new department, The Department of Homelessness and Supportive Housing, the time is right to coordinate data monitoring and outcome objectives as part of the City's efforts to end the homeless problem.

[12] More Than A Shelter, An Assessment of the Navigation Center's First Six Months, City and County of San Francisco, Office of the Controller, City Services Auditor December 10, 2015
http://www.sfmayor.org/modules/showdocument.aspx?documentid=473 (5/20/2016)

FINDINGS

F.C.1. OUTCOME PERFORMANCE: Contracts are awarded through HSA and DPH with few requirements to include Client Outcome in performance reports used to evaluate the success of a contract or program. Number of Clients Served is more often used.

F.C.2. MONITORING: The non-profit agencies that perform services for the homeless monitor their own Outcome Performance. The Controller's Office only performs fiscal and compliance monitoring, except for the Navigation Center.

RECOMMENDATIONS

R.C.1. [DHSH] Contracts with organizations receiving City funding should require comprehensive Outcome Performance Measures which include client outcomes.

R.C.2. [DHSH] The Department of Homelessness and Supportive Housing should arrange for homeless service agencies to follow the Navigation Center model and have ongoing monitoring of their Outcome Performance objectives overseen by a new program in the Controller's Office, rather than at the department or service agency level when new programs are initiated.

R.C.3. [DHSH] The Department of Homelessness and Supportive Housing should generate a public annual report showing the outcome scores of all homeless services agencies and the funding they received.

D: HOUSING

DISCUSSION

"Through the provision of coordinated, compassionate, and high-quality services the Department of Homelessness and Supportive Housing will work toward the goal of making homelessness in San Francisco rare, brief, and one time."[13] *—Mayor Ed Lee, May 11, 2016*

According to the Center of Budget & Policy Priorities:

> California has one-fifth of the nation's homeless people, more than any other state. A large body of research shows that poverty, overcrowding, housing instability, and homelessness can impair children's health and development and undermine their chances of success in school and later in the workforce. Housing vouchers help some 300,000 low-income California families afford the rent, more than all other state and federal rental assistance programs combined. Vouchers reduce poverty, homelessness, and housing instability.[14]

Housing First is the answer of many cities across the country, including San Francisco, when asked for the solution to homelessness. But, in reality, this answer seems all but unachievable in cities such as ours.

"Housing First approaches are based on the concept that a homeless individual or household's [family's] first and primary need is to obtain stable housing, and that other issues that may affect the household can and should be addressed once housing is obtained. In contrast, many other programs operate from a model of 'housing readiness' — that is, that an individual or household must address other issues that may have led to the episode of homelessness prior to entering housing."[15]

Even if we did have four walls to offer everyone in need, some of the homeless are not prepared or equipped to thrive on their own. They need health, medical and substance services, often referred to as supportive services, to help them integrate into permanent housing. They need to transition from their street survival mentality into collaborating with counselors, neighbors, confinement and rules... none of which are present when living on the street.

Before a discussion about housing and the homeless can be effective, some distinctions have to be made.

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[13] San Francisco Mayor Edwin M. Lee press release dated May 11, 2016. http://www.sfmayor.org/index.aspx?recordid=1153&page=846

[14] Center of Budget & Policy Priorities, CBPP.org, May 16, 2016, http://www.cbpp.org/research/housing/how-housing-vouchers-can-help-address-californias-rental-crisis

[15] https://en.wikipedia.org/wiki/Housing_First **(May 7, 2016)**

Housing vs. Sheltering

Housing for the homeless means just that. It speaks to the goal of providing permanent walls in a safe and, if necessary, supportive environment that a resident can call home. It also includes efforts made to prevent homelessness (rental assistance and eviction prevention, for example). Sheltering, on the other hand, provides a temporary environment with a hopeful end result of permanent housing. In a shelter, supportive services may or may not be available.

Sheltered vs. Unsheltered

San Francisco's homeless population is comprised of two parts, sheltered and unsheltered. The sheltered homeless are currently living in City shelters, jails, hospitals or doubled-up in Single Room Occupancy (SRO) hotels. Our unsheltered homeless are living on the streets, in tents, doorways or in cars.

The biggest obstacle to "Housing First" is obvious -- the lack of affordable housing in San Francisco. Although developers have been building thousands of new "affordable" units, they are not accessible to people trying to move from homelessness. The Planning Pipeline[16] identifies 34,754 new units that have been entitled by San Francisco Planning as of Q4 2015, with 6,852 identified as affordable. "Affordable" is not within reach to the homeless population.

Some of our temporary shelters have been seen as a failure. The police we interviewed said our short-term shelters were almost universally refused by the chronic homeless. The reasons are simple: difficulty getting a place, rules when there, and predatory behavior generally make them difficult places in which to work, let alone stay. We heard many stories that shelters "were worse than the streets". Thefts and mayhem often occur in these cramped, locked-in quarters. Yet, the staff at shelters appear dedicated to helping people in difficult situations.

FINDINGS

F.D.1. SHELTERS: The "old style" short-term shelters are used by some of the homeless population but are disliked and perceived as unsafe. They are not designed for positive outcomes; they are merely a means to get people out of the weather. They do not address the need to accommodate partners, possessions and pets. Chronic homeless avoid non-supportive shelters because they fear being robbed and/or victimized.

RECOMMENDATIONS

R.D.1. [MAYOR] The Mayor should direct the newly organized Department of Homelessness and Supportive Housing to move from the restrictive shelter system to the Navigation Center style system which triages clients to the appropriate services.

R.D.1.1 [MAYOR] The Mayor should direct the newly organized Department of Homelessness and Supportive Housing to provide emergency shelters when there is a natural disaster. These shelters should not be permanent housing.

[16] http://sf-planning.org/pipeline-report (5/7/2016)

The City Tries Something New

Our highly touted Navigation Center[17], based on a successful New York model, is so far offering the best solution to sheltering the homeless in San Francisco. The Navigation Center has been covered frequently in the press, and most readers are probably familiar with the bold new concepts it has introduced. It provides an open come-and-go environment with supportive services on site, it accepts couples, pets and possessions - even entire street encampments. Some of these individuals are provided tickets to go back home by means of Homeward Bound; some leave of their own accord. But, the majority are readied to be moved into permanent or semi-permanent supportive housing.

Another novel and successful concept introduced by the Navigation Center is to have the City's Controller's Office monitor and track the all-important human results (instead of the usual compliance, budget/plan tracking, etc.). The Controller publishes a weekly Navigation Center "Dashboard" which reports client exits (turnover), benefits received, referrals for additional services and length of stay. In addition, the Controller's Office sends representatives to speak at public homeless meetings (LHCB, SFICH), when requested. They have created comprehensive reports from almost a social worker's perspective,[18] providing deep analysis of the strengths and weaknesses of the entire program. It is noteworthy to add that this relationship with the Controller's Office is very different from the way other City contracts are monitored, generally only budgets and compliance are monitored.

A new temporary shelter opened on Pier 80 in February 2016 that incorporated many of the successes of the Navigation Center in its design. It welcomed partners, possessions and pets into a come-and-go environment. There was some initial public criticism, including from a Navigation Center official about its look and feel and distance from services, but the official quickly added that the issues were addressable.

It should not be forgotten that much of the reason for the success of the Navigation Center is both the welcoming and accepting environment and the focus on triaging the clients to determine the services they need.

One way to demonstrate the successes of the Navigation Center is to look at the quality of the exits; i.e., the way that clients leave. As reported by the Controller's Office as of October 2015[19] , 132 clients exited the Navigation Center. Most found stable housing or participated in Homeward Bound (a ticket home). Of those exiting to permanent supportive housing, 88 percent went to HSA Master Lease units. The remainder went to Shelter Plus Care units (9 percent) or DPH's Direct Access to Housing (DAH) sites (3 percent). Of 59 clients permanently housed by September 1, 2015, all but one remained in housing thirty days later. Also reported was an exit survey distributed to housed clients, 91 percent of whom reported being satisfied with their stay.

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[17] http://navigationcentersf.org

[18] More than a Shelter An Assessment of the Navigation Center's First Six Months, CSA Project Team, December 10, 2015 http://www.sfmayor.org/modules/showdocument.aspx?documentid=473

[19] Source *http://ecs-sf.org/_documents/NavCenter_FirstSixMonths_Assessment.pdf*]

The Navigation Center is an example of an excellent supportive shelter and of the utility of the outcome performance tracking performed by the Controller's Office.

FINDINGS

F.D.2. CENTERS: Reports on the pilot Navigation Center show success in welcoming clients, gathering intake data, tracking the human outcomes, connecting people to services and monitoring exits for recidivism. One key to the success of the Navigation Center has been the innovative partnership with the Controller's Office to track and report on human outcomes.

F.D.3. HOUSING: The Navigation Center currently serves only 75 clients at a time and moves them out by way of Homeward Bound or to supportive housing - temporary or permanent. The Center keeps beds open specifically for Homeward Bound (a short turnaround). Exits to local housing have been difficult since properties are unavailable, making the Navigation Center seem more like permanent housing instead of transitional housing.

F.D.4. SUPPORTIVE HOUSING: Research on other city and state homeless practices confirm that providing supportive housing is the most successful way to end homelessness. This is especially true for the chronically homeless population, a group that has health and addiction issues. San Francisco has not provided sufficient supportive housing to this homeless population.

RECOMMENDATIONS

R.D.2. [MAYOR & BOS, DHSH] The Mayor should explore and acquire new sites where additional Navigation Centers can be opened. The Board of Supervisors should urge the Mayor to fund these additional sites.

R.D.2.1 [MAYOR] The Mayor should ensure that the new coordinated Department of Homelessness and Supportive Housing provide sufficient staff at each Navigation Center location to deal with the mental, physical and emotional issues the homeless bring to the sites. The Board of Supervisors should approve funding for this work.

Has the City Accepted Tents?

There has been a recent explosion of tents in San Francisco. The violations and hazards are straightforward. Camping on the public sidewalk is illegal. San Francisco's Civil Sidewalk Ordinance, Section 168 of the San Francisco Police Code, makes it unlawful, with certain exceptions, to sit or lie on a public sidewalk, or on an object placed on a public sidewalk, between 7 AM and 11 PM. The sidewalks are public, and their designated use is for pedestrian passage. Camping on public sidewalks without bathrooms is unsanitary. Discarded hypodermic needles on the sidewalks are dangerous, especially to children. Encampments prevent other citizens from using the sidewalks.

Why then are unsanitary encampments allowed on the sidewalks of San Francisco? We were told that police, barring other criminal activity in encampments, will not clear encampments until the Department of Public Health declares the area unsanitary, and DPH will not condemn encampments until there are enough shelter beds to accommodate those living in the encampments.

City sidewalks and below freeway overpasses are not set up for outdoor camping. Not surprisingly this has led to public defecation reports to SFPD and the City's 311 help line. See the figure 8 below.

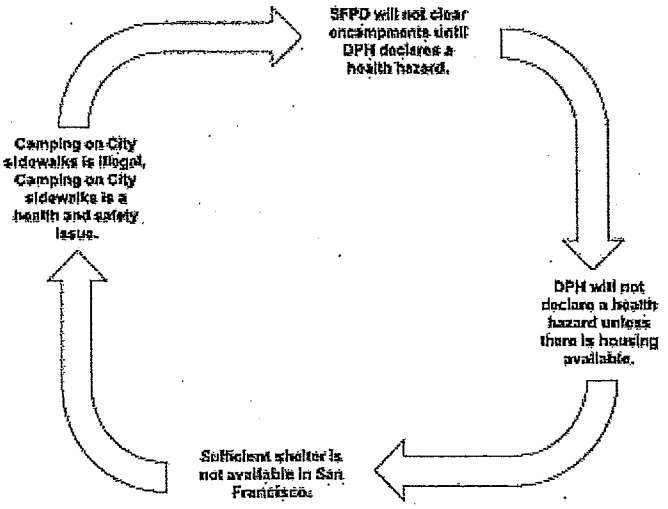


Figure 8 : Why Street Tents Persist - A SFPD-DPH Loop

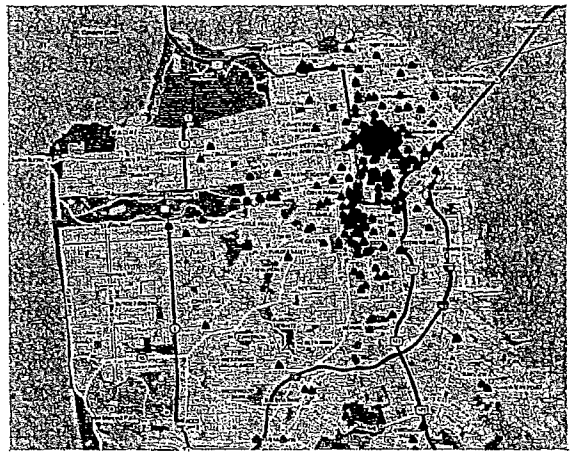


Figure 9: SF 311 reports of human waste

Supportive Housing Can be Cost Effective

Figure 2 in the Background section, Health Conditions Among the Homeless, lists high percentage of the homeless are struggling with health problems. Drug or Alcohol abuse (62%), Psychiatric or Emotional Conditions (55%), Physical Disability (43%) are the top three listed. These conditions suggest the need for supportive housing, but there is a concern about the cost. In order to explore the cost effectiveness of supportive housing, the Budget and Legislative Analyst's office was called upon to examine the "Impact of Supportive Housing on the Costs of Homelessness"[20]. 1818 adults who entered City supportive housing programs in FY 2010-11 or 2011-12 were identified. The cost for 3 years before entering supporting housing and 3 years after were examined. The result of this study points to a reduction in cost to the City as a result of supporting housing as shown in Figure 10.

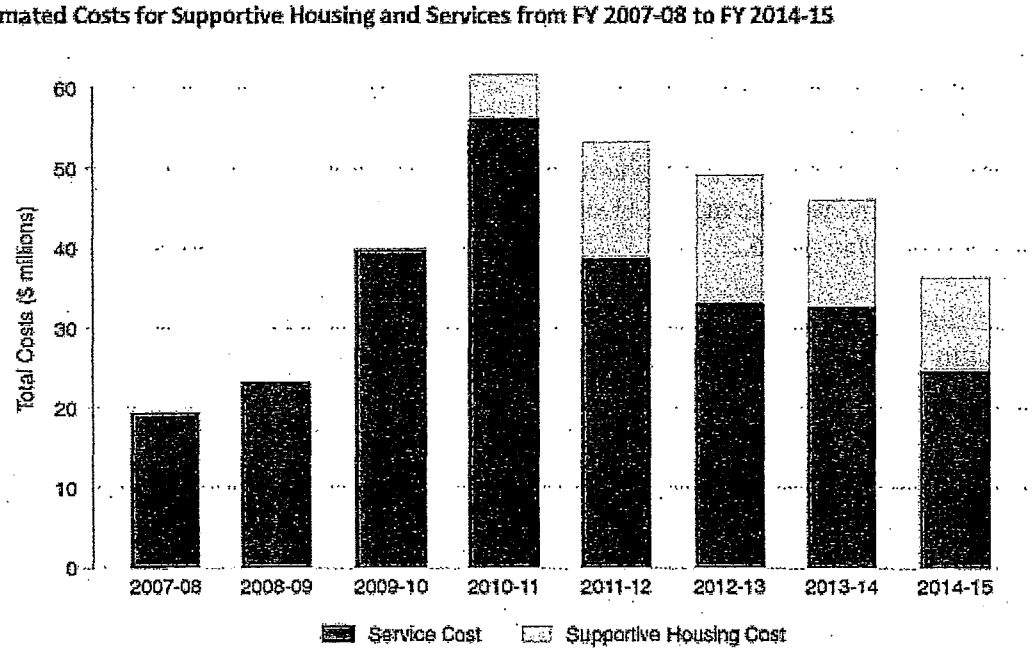


Figure 10: Estimated Costs of Supportive Housing for 1818 adults 3 years before and 3 years after

FINDINGS

F.D.5. ENCAMPMENTS: DPH does not act to condemn encampments as unsafe and reduce the health problem associated with them unless there are shelter and housing options available to the people in the encampments. Currently there are few options.

RECOMMENDATIONS

R.D.5. [Mayor] The city must increase the stock of very low income and supportive housing to meet the current need to reduce tents and campsites.

[20] Impact of Supportive Housing on the Costs of Homelessness, Budget and Legislative Analyst's Office, May 31, 2016

E: SF311.org Needs To Become A Portal For Homeless Help

DISCUSSION

San Francisco provides 311 as a portal to City services and communication. It is staffed 24/7 with live operators, and also provides a companion website at SF311.org as well as a smartphone app.

Residents as well as commuters and visitors can use 311 to report non-emergency issues such as graffiti, blocked driveways, water/sewer leaks, and to access literally hundreds of different services including the lighting plan of City Hall. The live 311 operators use scripts that are created in partnership with the agency involved. 311 even allows users to create a Service Request to open an issue and follow it to resolution.

The homeless as well as their advocates can and do use 311. Using terminals at the library, or feature phones issued by the Federal Lifeline Assistance program, the homeless can initiate shelter requests or find agencies.

The Jury set out to see how 311's website helps to connect people to homeless services and service providers. The website mySF311.org is San Francisco's beta (test) version of SF311.org, which we tested in May, 2016.

First, we conducted a straightforward search of "homeless". See Figure 11, below. This search clearly brought up 311's link page on "Homeless Concerns" as well as HSA's website. Note: 311's Homeless Concerns page can also be found via the top link "City Services", choosing the alphabetical listing, and then selecting Homeless Concerns.

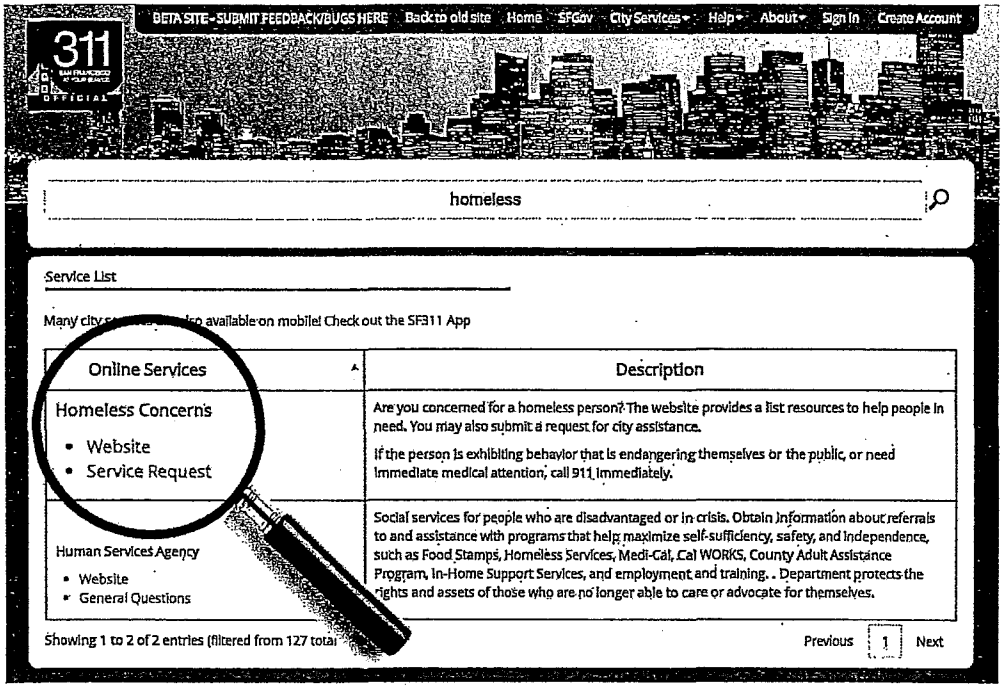


Figure 11: mySF311.org's search results for "Homeless"

The two online services links offered for Homeless Concerns are "Website" and "Service Request". While the latter is very clear, "Website" doesn't clearly describe the jump page that follows. A different page title: *Homeless Issues - All Matters* would be clearer.

Clicking on the "Website" link brings up the jump page presented below in Figure 12.[21]

Entitled "Homeless Issues - All Matters", this web page offers the user 3 large buttons and a small "shelter" link:

- "Seeking Help" brings up a list of links for people in need of homeless services.
- "Concern" attempts to provide links and instructions for non-homeless residents seeking help dealing with issues presented by homeless.
- "Volunteer" links the user to either United Way or Project Homeless Connect for volunteer opportunities.
- The small "Shelters" link at the bottom brings up a 311 page offering detailed help about matching needs to shelters.

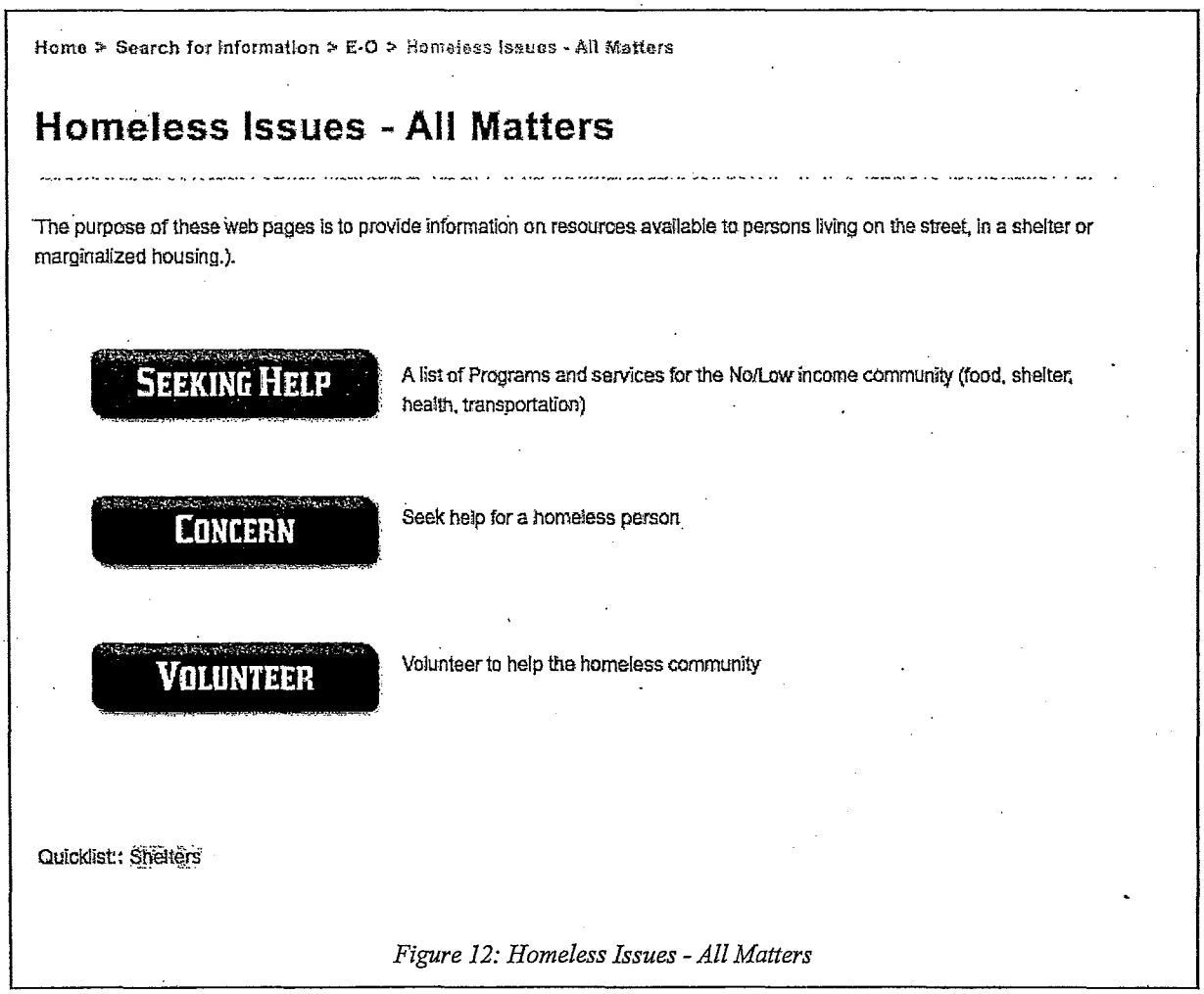


Figure 12: Homeless Issues - All Matters

[21] http://sf311.org/homeless-issues-all-matters (May 15, 2016)

When we click the "Seeking Help" button, we are presented with the *Homeless -- Person Seeking Help* page shown below in Figure 13
(Found at http://sf311.org/homeless%E2%80%93-person-seeking-help as of May, 2016.)

This alphabetical list of links in Figure 12 is better than nothing, especially considering the many agencies that provide homeless services. However, often the text of a link isn't helpful or descriptive enough.

A better approach would be to present a categorized list along with some detail. This would transform the page from a list of links into a homeless services portal.

A good example of how links can be categorized and made descriptive is found on HSA's website, pictured below in Figure 14. (*Housing & Homeless Services* page found at http://www.sfhsa.org/76.htm in May, 2016. Also in Figure14)

Home > Search for Information > E-O > Homeless– Person Seeking Help

Homeless– Person Seeking Help

- 2-1-1 United Way/HelpLink
- Addiction Treatment
- Alcoholics Anonymous
- AA Oficina Central Hispana – (415) 824-1834
- Belongings are Missing
- Birth Certificate
- Carworks
- California ID
- Clean Up Services – Call 3-1-1
- Clothing Program
- Crisis Hotlines
- Detox Centers
- Drop In Centers (provides non-shelter services such as Showers, Voicemail, Mail, etc.)
- Dental Clinics
- Dental Services - Community Health Network
- Eye Exams/Glasses - Contact (415) 206-8000 for Eligibility Information
- Food Services and Programs
- General Assistance/Workfare
- Health Center for the Homeless
- Homeless Count
- Homeward Bound (Assistance to return to home town)
- Human Services – List of Services and Locations
- Job Training Programs
- Laundry Service (see Page 2)
- Legal Service
- Lifeline Service
- Low Income Housing
- Meals
- Medical Clinics
- Mental Health Services
- Needle Exchange
- Prenatal Care
- Reservation Centers for Shelters
- Resource Centers for Homeless Assistance
- Shelters for Single Adults
- Shelters for Families
- Shelters for Women and Children
- Shelter Monitoring Committee
- Showers (see Page 2)
- Social Security Card
- Storage for Belongings
- Substance Abuse Centers
- Tattoo Removal for Youths
- Transportation - Call San Francisco Homeless Outreach Team (SF HOT) 415-734-4233
- Veterans Assistance
- Volunteer
- Youth/Teen – Homeless Programs and Services

Figure 13: SF311.org Homeless - Person Seeking Help

We see HSA's page (below) as taking a very informative approach to listing and describing services:

Human Services Agency of San Francisco
Department of Aging & Adult Services | Department of Human Services
HSA Home > Housing & Homeless Services

Housing & Homeless Services

Emergency Shelter for Single Adults in San Francisco
To get a reservation for an available shelter bed in the Adult Emergency Shelter System, go to a shelter Reservation Station to enroll in CHANGES, the online shelter reservation system, or phone 3-1-1. (Click the link for further information.)

Help for Homeless Families (with dependent child under 18 years of age)
Is your family facing a housing crisis? We can help with referrals to services and even child care.

Project Homeless Connect
Project Homeless Connect can connect you with many free services and programs all in the same day.

A Bus Ticket Home
If you'd like to return home but don't have the money for a ticket, the Homeward Bound Program can help.

Help Getting into Housing

- Transitional Housing
- Rental Assistance
- Housing for Low-Income Adults and Families

If You Face Eviction
We provide eviction prevention services that include funds to pay back rent to prevent eviction, one-time rental assistance, security deposit funds to move into permanent housing, legal services, counseling, and other support services. Call the San Francisco Rental Assistance Program Information Line at (415) 557-5484 for more information.

Eviction Prevention Services
The Family Eviction Program provides eviction prevention services including funds to pay back rent, case management, budgeting advice, and other referrals.

Other Resources

- County Veterans Service Office
- If You Are Concerned About a Homeless Person
- Local Homeless Coordinating Board
- Seniors and Adults with Disabilities in SROs 2012: A Report by Community Organizations (pdf)

Figure 14: SFHSA.org Housing and Homeless Services Page

FINDINGS

F.E.1. [DHSH, Dir of 311] 311 HOMELESS HELP ORGANIZATION: mySF311.org's *Homeless -- Person Seeking Help* page presents an alphabetical, uncategorized list of links and lacks detail.

Homeless -- Person Seeking Help page found at http://sf311.org/homeless%E2%80%93-person-seeking-help as of May, 2016. Also available in Figure 13.

RECOMMENDATIONS

R.E.1.1 [DHSH, Dir of 311] mySF311.org's *Homeless -- Person Seeking Help* page should not be alphabetical, but instead be categorized, and include detail about each link as demonstrated on HSA's Housing & Homeless Services page captured in Figure 14.

Homeless – Person Seeking Help page found at http://sf311.org/homeless%E2%80%93-person-seeking-help as of May, 2016. Also available in Figure 13.
Housing & Homeless Services page found at http://www.sfhsa.org/76.htm in May, 2016. Also in Figure14.

R.E.1.2 [DHSH, Dir of 311] mySF311.org's *Homeless -- Person Seeking Help* page should include the detailed shelter information found on 311's Shelters page

Person Seeking Help page found at http://sf311.org/homeless%E2%80%93-person-seeking-help as of May, 2016. Also available in Figure 13.
SF311.org's Shelters page found at http://sf311.org/homeless-reservation-centers in May, 2016.

R.E.1.3 [DHSH, Dir of 311] mySF311.org's *Homeless -- Person Seeking Help* page should remove the "Human Services" link and replace it with clearly named links and attendant details similar to HSA's Housing & Homeless Services page, copied here:

- Emergency Shelter for Single Adults in San Francisco
- Help for Homeless Families (with dependent child under 18 years of age)
- Project Homeless Connect can connect you with many free services & programs in the same day.
- A Bus Ticket Home - If you'd like to return home, the Homeward Bound Program can help.
- Help Getting into Housing
- Transitional Housing
- Rental Assistance
- Housing for Low-Income Adults and Families
- Eviction Prevention Services
- The Family Eviction Program provides eviction prevention services including funds to pay back rent, case management, budgeting advice, and other referrals.
- County Veterans Service Office
- If You Are Concerned About a Homeless Person
- Local Homeless Coordinating Board

Homeless – Person Seeking Help page found at http://sf311.org/homeless%E2%80%93-person-seeking-help as of May, 2016. Also available in Figure13.
Housing & Homeless Services page found at http://www.sfhsa.org/76.htm in May, 2016. Also in Figure14.

CONCLUSION

During the time we have been investigating the homeless problem in San Francisco, changes have begun to take place. The highest profile change is the creation of The Department of Homelessness and Supportive Housing (DHSH). Just as important is the opening of the Navigation Center, a transition center attempting to move chronically homeless from the street to some form of housing. We have made some recommendations that we feel will have significant impact on improving the existing conditions and should be implemented regardless of the agencies and services reorganizing into DHSH.

The jury is thankful for all the help we received from City departments, non-profit agencies and formerly homeless clients as we tried to understand why the homeless problem appears to be more pronounced.

If all the City's services and grantmaking intended to serve the homeless population are unified within DHSH, that unit would be well positioned to correct the problems that have resulted from the attempts to address homelessness in multiple organizations.

If we believe that our community needs to support people who have not been able to find work, or are not able to work, and who have not been able to find housing, we need to continue to improve the ways we provide support.

Some of the improvements this jury recommends are organizational in nature, related to communication and data sharing. Others ask the City to look at solving the problem in a different way - focus on intake, triage and outcome. In order to be successful, there needs to be housing. This could be supportive housing, rental supplement housing, or housing in programs addressing addiction or mental illness. Programs like the Navigation Center require some sort of housing to be available after the client leaves the center.

Finally, we are very concerned about the City's acceptance of sidewalk camping during the day. This is a health and safety issue that must be corrected.

There is no simple solution, but we feel our recommendations, if followed, will help.

REQUEST FOR RESPONSES

FINDING		RESPONDER
F.A.1.	DISPATCH HOT: San Francisco HOT is the most informed first responder for non-violent events, as they are part of DPH and have access to the database CCMS, but health providers are neither dispatched with police nor linked as responders to 311 calls..	DHSH
F.A.2.	POLICE ACCESS: There is no coordinated plan to support police first responders in a role that is not dealing with criminal behavior. When the police are called out for homeless or encampment issues they have no access to health or substance abuse providers or information regarding the client's mental health.	SFPD CHIEF
F.A.3.	POLICE TRAINING: Police say they have limited training, or limited access to data to deal successfully with the mentally ill. With the high numbers of mentally ill on our streets, even the most compassionate of police when threatened could find themselves in a position where they must follow their procedures and shoot.	SFPD CHIEF
F.A.4.	POLICE TICKET: Faced with multiple requests for their service, police use judgment regarding enforcement considering the best chance to have a successful outcome. When called to help, they generally do not ticket because it is not productive.	SFPD CHIEF BOS MAYOR
F.B.1.	DISPARATE SOURCES: Many agencies are providing services and gathering information without a common data source.	DHSH
F.B.2.	INTAKE SYSTEM: Local agencies providing services are not required to use the same intake database. There is no coordinated Data Entry System. This results in duplication of entries with homeless clients having to enter the same information in multiple places.	DHSH
F.B.3.	INITIAL CONTACTS: First responders do not have access to a coordinated access/entry system.	DHSH
F.B.4.	HOUSING SERVICES: Multiple agencies are looking for housing resources – shelters, apartments, etc. for their clients. Each maintains their own databases of resources and compete with each other. There is no single coordinated resource for government sponsored housing	DHSH
F.C.1.	OUTCOME PERFORMANCE: Contracts are awarded through HSA and DPH with few requirements to include Client Outcome in performance reports used to evaluate the success of a contract or program. Number of Clients Served is more often used.	DHSH

F.C.2.	MONITORING: The non-profit agencies that perform services for the homeless monitor their own Outcome Performance. The Controller's Office only performs fiscal and compliance monitoring, except for the Navigation Center.	DHSH Controller's Office
F.D.1.	SHELTERS: The "old style" short-term shelters are used by some of the homeless population but are disliked and perceived as unsafe. They are not designed for positive outcomes; they are merely a means to get people out of the weather. They do not address the need to accommodate partners, possessions and pets. Chronic homeless avoid non-supportive shelters because they fear being robbed and/or victimized.	MAYOR
F.D.2.	CENTERS: Reports on the pilot Navigation Center show success in welcoming clients, gathering intake data, tracking the human outcomes, connecting people to services and monitoring exits for recidivism. One key to the success of the Navigation Center has been the innovative partnership with the Controller's Office to track and report on human outcomes.	MAYOR BOS
F.D.3.	HOUSING: The Navigation Center currently serves only 75 clients at a time and moves them out by way of Homeward Bound or to supportive housing - temporary or permanent. The Center keeps beds open specifically for Homeward Bound (a short turnaround). Exits to local housing have been difficult since properties are unavailable, making the Navigation Center seem more like permanent housing instead of transitional housing.	DHSH
F.D.4.	SUPPORTIVE HOUSING: Research on other city and state homeless practices confirm that providing supportive housing is the most successful way to end homelessness. This is especially true for the chronically homeless population, a group that has health and addiction issues. San Francisco has not provided sufficient supportive housing to this homeless population.	DHSH
F.D.5.	ENCAMPMENTS: DPH does not act to condemn encampments as unsafe and reduce the health problem associated with them unless there are shelter and housing options available to the people in the encampments. Currently there are few options.	MAYOR
F.E.1.	311 HOMELESS HELP ORGANIZATION: mySF311.org's *Homeless -- Person Seeking Help* page presents an alphabetical, uncategorized list of links and lacks detail. *Homeless -- Person Seeking Help* page found at http://sf311.org/homeless%E2%80%93-person-seeking-help as of May, 2016. Also available in Figure 13.	Mayor 311

Recommendations and Required Response Matrix

RECOMMENDATION	RESPONDER
R.A.1. If safe to do so, SF HOT should be the first responders, and the SFPD should accompany when necessary.	DHSH
R.A.1.1. The number of SF HOT personnel should be increased so that they will be available to respond.	MAYOR, BOS, DHSH
R.A.2. Police should have access to mental health and substance abuse data as well as historical interaction with city services when they are called to respond to a homeless issue.	SFPD CHIEF
R.A.3. Police training should include methods to deal with mentally unstable individuals.	SFPD CHIEF
R.A.4. Police policies and legal consequences need to be better coordinated so that police are not put in a position where citations have no effect.	SFPD CHIEF BOS MAYOR
R.B.1. Take advantage of the coordination opportunities provided by the formation of the new Department on Homelessness and Supportive Housing to fund and implement a coordinated entry system.	DHSH
R.B.2. Develop a consistent intake system for information sharing across all departments servicing the homeless.	DHSH
R.B.3. Take advantage of the coordination opportunities provided by the formation of the Department on Homelessness and Supportive Housing to require all agencies using city/state/federal funding to use the same database to find housing opportunities.	DHSH
R.B.4. First Responders need access to a coordinated entry system.	DHSH
R.C.1. Contracts with organizations receiving City funding should require comprehensive Outcome Performance Measures which include client outcomes..	DHSH
R.C.2. The Department of Homelessness and Supportive Housing should arrange for homeless service agencies to follow the Navigation Center model and have ongoing monitoring of their Outcome Performance objectives overseen by a new program in the Controller's Office, rather than at the department or service agency level when new programs are initiated.	DHSH

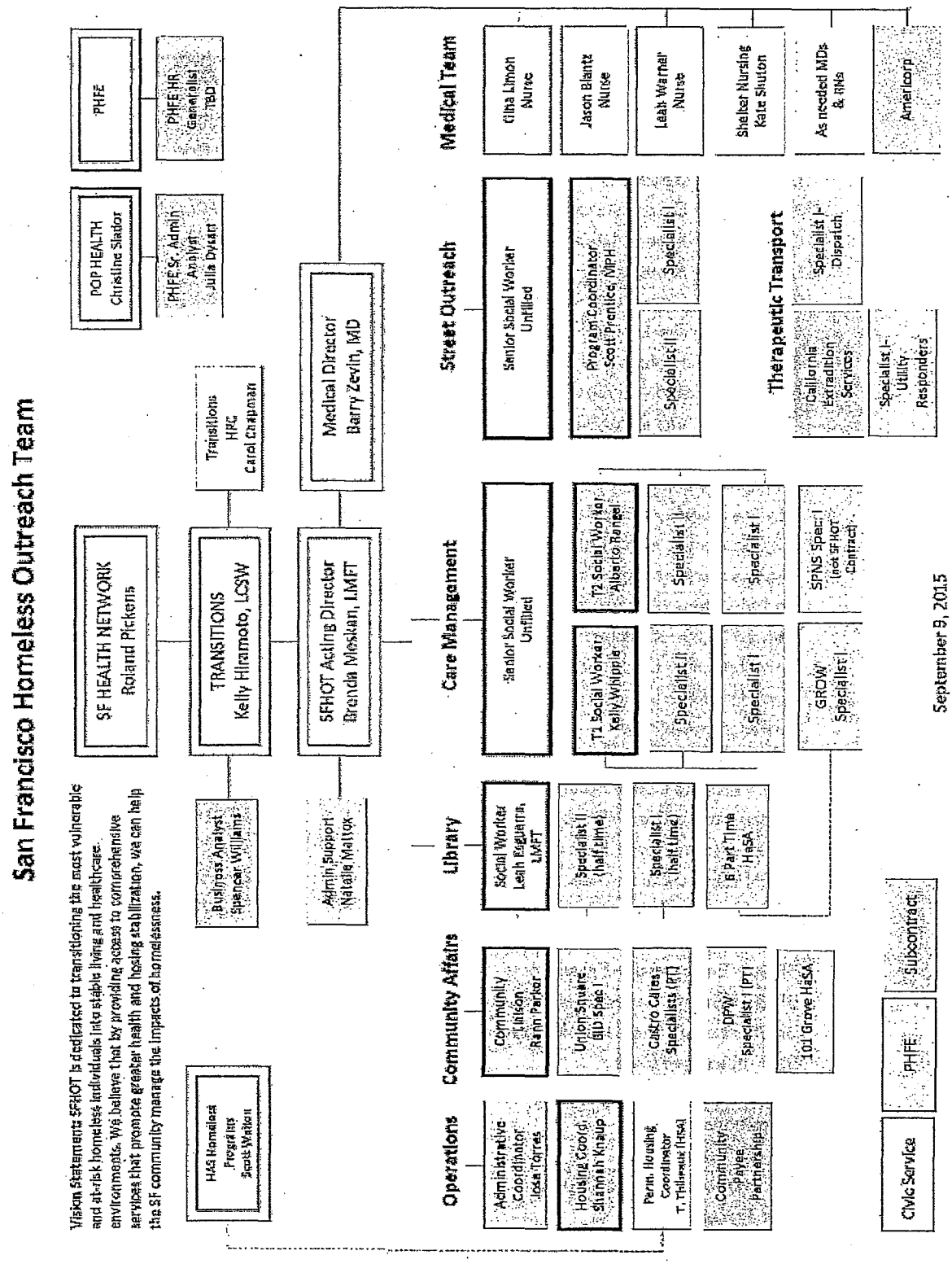
R.C.3. The Department of Homelessness and Supportive Housing should generate a public annual report showing showing the outcome scores of all homeless services agencies and the funding they received.	DHSH
R.D.1. The Mayor should direct the newly organized Department of Homelessness and Supportive Housing to move from the restrictive shelter system to the Navigation Center style system which triages clients to the appropriate services.	MAYOR
R.D.1.1. The Mayor should direct the newly organized Department of Homelessness and Supportive Housing to provide emergency shelters when there is an natural disaster. These shelters should not be permanent housing.	MAYOR
R.D.2. The Mayor should explore and acquire new sites where additional Navigation Centers can be opened. The Board of Supervisors should urge the Mayor to fund these additional sites.	MAYOR BOS
R.D.2.1. The Mayor should ensure that the new coordinated Department of Homelessness and Supportive Housing provide sufficient staff at each Navigation Center location to deal with the mental, physical and emotional issues the homeless bring to the sites. The Board of Supervisors should approve funding.	MAYOR
R.D.5. The city must increase the stock very low income housing to meet the current need.	MAYOR
R.E.1.1. mySF311.org's *Homeless -- Person Seeking Help* page should not be alphabetical, but instead be categorized, and include detail about each link as demonstrated on HSA's Housing & Homeless Services page captured in Figure E-4. *Homeless -- Person Seeking Help* page found at http://sf311.org/homeless%E2%80%93-person-seeking-help as of May, 2016. Also available in Figure13. *Housing & Homeless Services* page found at http://www.sfhsa.org/76.htm in May, 2016. Also in Figure 14.	DHSH Dir of 311
R.E.1.2. mySF311.org's *Homeless -- Person Seeking Help* page should include the detailed shelter information found on 311's Shelters page Person Seeking Help page found at http://sf311.org/homeless%E2%80%93-person-seeking-help as of May, 2016. Also available in Figure 13. SF311.org's Shelters page found at http://sf311.org/homeless-reservation-centers in May, 2016.	DHSH Dir of 311

R.E.1.3. mySF311.org's *Homeless -- Person Seeking Help* page should remove the "Human Services" link and replace it with clearly named links and attendant details similar to HSA's Housing & Homeless Services page, copied here: o Emergency Shelter for Single Adults in San Francisco o Help for Homeless Families (with dependent child under 18 years of age) o Project Homeless Connect can connect you with many free services & programs in the same day. o A Bus Ticket Home - If you'd like to return home, the Homeward Bound Program can help. o Help Getting into Housing o Transitional Housing o Rental Assistance o Housing for Low-Income Adults and Families o Eviction Prevention Services o The Family Eviction Program provides eviction prevention services including funds to pay back rent, case management, budgeting advice, and other referrals. o County Veterans Service Office o If You Are Concerned About a Homeless Person o Local Homeless Coordinating Board *Homeless -- Person Seeking Help* page found at http://sf311.org/homeless%E2%80%93-person-seeking-help as of May, 2016. Also available in Figure 13. *Housing & Homeless Services* page found at http://www.sfhsa.org/76.htm in May, 2016. Also in Figure14.	DHSH Dir OF 311

GLOSSARY

Term	Definition
CAAP	County Adult Assistance Program/General Assistance
CCMS	Coordinated Care Management System (CCMS) database managed by DPH
Chronic homeless individual (HUD)	Under the Department of Housing and Urban Development's new definition, a chronically homeless individual is someone who has experienced homelessness for a year or longer, or who has experienced at least four episodes of homelessness in the last three years (must be a cumulative of 12 months), and has a disability.
Continuum of Care	Federal grant program stressing permanent solutions to homelessness HEARTH definition: the local group of providers and stakeholders in a community
DHSH	Department of Homeless and Supportive Housing
DPH	San Francisco Department of Public Health
FEMA	U.S. Federal Emergency Management Agency
HEARTH	Homeless Emergency and Rapid Transition to Housing (HEARTH) Act of 2009, S.
HMIS	Homeless Management Information System
HSA	San Francisco Human Services Agency
Homeward Bound	A program that gives a homeless person a bus ticket home if the destination location is willing to accept them.
HUD	U.S. Department of Housing and Urban Development
LHCB	Local Homeless Coordinating Board
McKinney	The McKinney-Vento Homeless Assistance Act—the primary federal law to address homelessness
MOH	San Francisco Mayor's Office of Housing
PHA	San Francisco Public Housing Authority
PIT (Point-in-Time)	Point-in-Time count (biannual counts of sheltered and unsheltered homeless persons in a specific geographic area)
SAMSA	Substance Abuse &; Mental Health Services Administration
S+C	Shelter + Care (US-HUD CoC Program- permanent housing/rental assistance)
SFHA	San Francisco Housing Authority
SFICH	San Francisco InterAgency Council on Homelessness, Executive Directive 14-02
SRO	SRO Single-Room Occupancy housing units
TAY	Transition Age Youth
VASH	Veterans Affairs Supportive Housing

APPENDIX A


San Francisco Homeless Outreach Team
Vision Statement: SFHOT is dedicated to transitioning the most vulnerable and at-risk homeless individuals into stable living and healthcare environments. We believe that by providing access to comprehensive services that promote greater health and housing stabilization, we can help the SF community manage the impacts of homelessness.
SF HEALTH NETWORK
Roland Pickens
TRANSITIONS
Kelly Hiramoto, LCSW
SFHOT Acting Director
Brenda Meskan, LMFT
Transitions HPC
Carol Chapman
Medical Director
Barry Zevin, MD
POP HEALTH
Christine Slador
PHFE
PHFE Sr. Admin Analyst
Julia Dysart
PHFE HR Generalist
TBD
HAS Homeless Programs
Scott Walton
Business Analyst
Spencer Williams
Admin Support
Natalie Maltos
Operations
Community Affairs
Library
Care Management
Street Outreach
Medical Team
Therapeutic Transport
Civic Service
Administrative Coordinator
Josa Torres
Housing Coord.
Shannah Knaup
Perm. Housing Coordinator
T. Thibeaux (HSA)
Community Police Partnership
Community Liaison
Rahn Parker
Union Square BID Spec I
Castro Cafes Specialists (PT)
DPW Specialist I (PT)
101 Grove HSA
Social Worker
Leah Eggiuerra, LMFT
Specialist II (half time)
Specialist I (half time)
8 Part Time HSA
Senior Social Worker
Unfilled
T1 Social Worker
Kelly Whipple
T2 Social Worker
Alberto Rangel
Specialist II
Specialist I
GROW
Specialist I
SPNS Specl
(not SFHOT Contract)
Senior Social Worker
Unfilled
Program Coordinator
Scott Prentice, MPH
Specialist II
Specialist I
California Extradition Services
Specialist I - Dispatch
Specialist I - Utility Responders
Gina Limon
Nurse
Jason Blantz
Nurse
Leah Warnat
Nurse
Shelter Nursing
Kate Shuton
As needed MDs & RNs
Americorp
PHFE
Subcontract
September 9, 2015

APPENDIX B

Spending and Revenue Data For Community Health->Public Health from SF Open Data

Program	2015-2016 YTD Amount**
Central Administration	$33,750,845
Children's Baseline	19,299,522
Comm Hlth - Comm Support - Housing	19,677,638
Comm Hlth - Prev - Maternal & Child Hlth	15,949,819
Comm Hlth - Prevention - Aids	13,146,237
Comm Hlth - Prevention - Disease Control	12,025,901
Comm Hlth - Prevention - Hlth Education	3,462,810
Emergency Services Agency	454,961
Environmental Health Services	13,805,995
Forensics - Ambulatory Care	20,205,639
Health At Home	4,748,744
Hiv Health Services	7,124,364
Laguna Honda - Long Term Care	159,048,536
Laguna Honda - Non Lhh Program Expenses	114,167
Laguna Honda Hosp - Acute Care	2,659,124
Mental Health - Acute Care	683,032
Mental Health - Children's Program	22,226,245
Mental Health - Community Care	89,515,149
Mental Health - Long Term Care	22,554,496
No Program Defined	63,301
Primary Care - Ambu Care - Health Cntrs	50,815,390
SFGH - Acute Care - Forensics	1,555,684
SFGH - Acute Care - Hospital	455,008,222
SFGH - Acute Care - Psychiatry	20,087,753
SFGH - Ambu Care - Adult Med Hlth Cntr	26,993,857
SFGH - Ambu Care - Methadone Clinic	2,029,349
SFGH - Ambu Care - Occupational Health	2,487,435
SFGH - Emergency - Emergency	28,628,895
SFGH - Emergency - Psychiatric Services	5,513,805
SFGH - Long Term Care - Rf Psychiatry	7,643,145
Sfhn-Managed Care	21,169,387
Substance Abuse - Community Care	27,154,404
Transitions	675,670
Gross Total	**$1,110,279,524**
Transfer Adjustments (Citywide)	(7,322,984)
Net Total	**$1,102,956,540**
"Data as of 03/11/2016"	
*"** 2016 is a partial year"*	

BIBLIOGRAPHY

Homeless Services and Benefits Provided by the City and County of San Francisco, Harvey Rose, July 26, 2013
Http://sfmuna.net/wp-content/uploads/2014/12/HarveyRose-Report-2013.pdf

Analysis of Supportive Housing Programs, Budget and Legislative Analyst's Office, December 15, 2014 http://sfmuna.net/wp-content/uploads/2014/12/2014-Dec-Sup-Report.pdf

San Francisco's Ten Year Plan to End Chronic Homelessness: Anniversary Report Covering 2004 to 2014, June 2014
http://www.sfmayor.org/modules/showdocument.aspx?documentid=413

TOWARD ENDING HOMELESSNESS IN SAN FRANCISCO, Five-Year Strategic Plan of the San Francisco Local Homeless Coordinating Board 2008-2013
http://www.sfgov3.org/ftp/uploadedfiles/lhcb/documents/SFCoCFinalPlan030308FULLPLAN.pdf

SAN FRANCISCO HOMELESS POINT-IN-TIME COUNT & SURVEY comprehensive report 2015 http://www.sfmayor.org/modules/showdocument.aspx?documentid=455

The San Francisco Plan To Abolish Chronic Homelessness, Ten Year Planning Council, 2004http://www.sfgov3.org/modules/showdocument.aspx?documentid=2450

Birmingham's "OneRoof" (Ten Year Plan to End Chronic Homelessness) Continuum of Care Best Practices Report, 2014
http://oneroofonline.org/wp-content/uploads/2014/08/One-Roof-Best-Practices-Report-.pdf

House Keys Not Handcuffs, Paul Boden,2015, Freedom Voices
http://wraphome.org/research-landing-page/housekeysbook/

The San Francisco Department of Homelessness and Supportive Housing

Human Services Agency

SAN FRANCISCO HOMELESS HEALTH & HOUSING
A CRISIS UNFOLDING ON OUR STREETS

HSH welcomes the findings and recommendations of the Civil Grand Jury

- HSH is planning to implement many of the recommendations
- HSH is currently undergoing a strategic planning process which will influence the timing of many of the recommendations

Homelessness In San Francisco

Homelessness is the #1 issue impacting our community

- There are currently 6,200 single adults experiencing homelessness.
- 1 in 25 public school students are homeless.
- There are 3,500 unsheltered homeless in San Francisco

Homelessness in San Francisco

Some of the most cutting edge solutions to homelessness have roots in San Francisco:

- ❑ Direct Access to Housing
- ❑ Project Homeless Connect
- ❑ Navigation Centers
- ❑ LGBTQ Shelter

Homelessness in San Francisco

- The City has ended homelessness for over 23,000 people since 2004 through supportive housing & Homeward Bound.

- Approximately 770 of every 100,000 San Francisco resident is homeless, a 3% increase over the past 2 years.

- This compares favorably to many major cities.

Homelessness in San Francisco

Despite these successes, San Francisco has a highly visible homeless population due to:

- Geography, location and climate
- Concentration of services in the central part of the City
- Dramatic increase in real estate development in the City
- Growing heroin epidemic

Great Programs, Lack of Coordination

Mayor Lee created the Department of Homelessness and Supportive Housing to:

- ❑Consolidate programs
- ❑Increase accountability
- ❑Develop a unified strategy
- ❑Create a coordinated entry and data system

Department of Homelessness and Supportive Housing

Through the provision of **coordinated,** compassionate, and high-quality services the Department will work toward the goal of making homelessness in San Francisco rare, brief, and onetime. We will focus on:

- Prevention
- Street homelessness
- Housing

Departmental Goals

- End chronic homelessness among veterans by 2018
- Reduce unsheltered homeless population by 50% 2019
- End family homelessness by 2020
- End homelessness for 8,000 people by 2021

Departmental Priorities

- Conducting a gaps analysis and a strategic plan
- Developing a coordinated entry and resource prioritization system
- Expanding housing exits
- Investing in homelessness prevention
- Addressing encampments and street homelessness

Civil Grand Jury: HSH Response to Recommendations

R.A.1. *If safe to do so, SF HOT should be the first responders, and the SFPD should accompany when necessary.*

HSH Response:

- Recommendation will not be implemented

- The City's current first responders are the most prepared respond to emergency calls.

Civil Grand Jury: HSH Response to Recommendations

R.A.1.1. *The number of SF HOT personnel should be increased so that they will be available to respond.*

HSH Response:

- Recommendation will not be implemented

- The mission of SFHOT is to serve people on the streets by providing non-urgent medical care and service connection

- HSH will continue to pilot the EMS-6 partnership

Civil Grand Jury: HSH Response to Recommendations

R.B.1. *Take advantage of the coordination opportunities provided by the formation of the new Department on Homelessness and Supportive Housing to fund and implement a coordinated entry system.*

- ☐ Recommendation will be implemented
- ☐ HSH is moving its system to a coordinated entry process
- ☐ HSH is piloting coordinated entry for federally funded housing
- ☐ HSH is in the planning process for the family system
- ☐ Coordinated entry for all subpopulations by October 2018

Civil Grand Jury: HSH Response to Recommendations

R.B.2. *Develop a consistent intake system for information sharing across all departments servicing the homeless.*

- ☐ Recommendation will be implemented

- ☐ HSH is developing data and information sharing protocols consistent with Health Insurance Portability and Accountability Act (HIPAA) regulations

Civil Grand Jury: HSH Response to Recommendations

R.B.3. *Take advantage of the coordination opportunities provided by the formation of the Department on Homelessness and Supportive Housing to require all agencies using city/state/federal funding to use the same database to find housing opportunities.*

- □ Recommendation will be implemented
- □ HSH will require all contracted service providers to utilize this database
- □ HSH will offer technical assistance

Civil Grand Jury: HSH Response to Recommendations

R.B.4. *First Responders need access to a coordinated entry system.*

- Recommendation requires further analysis.
- HSH is prioritizing system development & ensuring access and utilization by providers
- Further analysis is required to determine what components are most appropriate and useful for first responders

Civil Grand Jury: HSH Response to Recommendations

R.C.1. *Contracts with organizations receiving City funding should require comprehensive Outcome Performance Measures which include client outcomes.*

- □ Recommendation will be implemented
- □ As contracts are renewed, HSH will add in client outcome measurements
- □ All current HSH contracts will be renewed between now and 2021

Civil Grand Jury: HSH Response to Recommendations

R.C.2. *The Department of Homelessness and Supportive Housing should arrange for homeless service agencies to follow the Navigation Center model and have ongoing monitoring of their Outcome Performance objectives overseen by a new program in the Controller's Office, rather than at the department or service agency level when new programs are initiated.*

- Recommendation will not be implemented
- The Controller's Office will not establish a new program to oversee HSH outcomes
- HSH has established a Data and Performance Unit to evaluate the impact of programs

Civil Grand Jury: HSH Response to Recommendations

R.C.3. *The Department of Homelessness and Supportive Housing should generate a public annual report showing the outcome scores of all homeless services agencies and the funding they received.*

- Recommendation will be implemented

- Once the HSH coordinated database is fully implemented, HSH will have live dashboards available on its website to show system level outcomes and funding information

Civil Grand Jury: HSH Response to Recommendations

R.D.1. *The Mayor should direct the newly organized Department of Homelessness and Supportive Housing to move from the restrictive shelter system to the Navigation Center style system which triages clients to the appropriate services. (Mayor)*

- HSH plans to implement this recommendation.
- There are plans to implement some of the lessons learned from Navigation Centers at traditional shelters.
- The timeframe for these reforms are budget dependent.

Civil Grand Jury: HSH Response to Recommendations

R.D.1.1 *. The Mayor should direct the newly organized Department of Homelessness and Supportive Housing to provide emergency shelters when there is an natural disaster. These shelters should not be permanent housing. (Mayor)*

- Human Services Agency and Department of Emergency Management are responsible for providing shelter in the event of a natural disaster
- HSH will provide emergency rain shelters to the homeless during extreme weather

Civil Grand Jury: HSH Response to Recommendations

R.D.2. *The Mayor should explore and acquire new sites where additional Navigation Centers can be opened. The Board of Supervisors should urge the Mayor to fund these additional sites. (Mayor)*

- Recommendation is being implemented
- BOS recently pass and the Mayor signed legislation calling for the development of 6 Navigation Centers in the next two years
- In June the City opened Navigation Center 2 at the Civic Center Hotel
- HSH is in the process of opening a 3rd Navigation Center on Port property in the Central Waterfront

Civil Grand Jury: HSH Response to Recommendations

The Mayor should ensure that the new coordinated Department of Homelessness and Supportive Housing provide sufficient staff at each Navigation Center location to deal with the mental, physical and emotional issues the homeless bring to the sites. The Board of Supervisors should approve funding. (Mayor)

- Staffing is a key component of the success of the Navigation Centers.

Civil Grand Jury: HSH Response to Recommendations

R.D.5. *The city must increase the stock very low income housing to meet the current need. (Mayor)*

- DHSH agrees partially

- Additional resources for supportive housing, navigation centers and rapid re-housing subsidies would help alleviate the pressure on the streets and in our shelters

- These resources should be deployed strategically and assigned to people based on need

Civil Grand Jury: HSH Response to Recommendations

R.E.1.1 *. mySF311.org's Homeless Person Seeking Help page should not be alphabetical, but instead be categorized, and include detail about each link as demonstrated on HSA's Housing & Homeless Services page.*

- 311 to determine if and when this recommendation can be implemented
- HSH will collaborate with 311 to ensure that information is accessible
- HSH will proactively work with 311 to get them the information needed

Civil Grand Jury: HSH Response to Recommendations

R.E.1.2. *mySF311.org's Homeless Person Seeking Help page should include the detailed shelter information found on 311's Shelters page.*

- 311 to determine if and when this recommendation can be implemented
- HSH will collaborate with 311 to ensure that information is accessible
- HSH will proactively work with 311 to get them the information needed

Civil Grand Jury: HSH Response to Recommendations

R.E.1.3. *mySF311.org's Homeless Person Seeking Help page should remove the "Human Services" link and replace it with clearly named links and attendant details similar to HSA's Housing & Homeless Services page*

- 311 to determine if and when this recommendation can be implemented
- HSH will collaborate with 311 to ensure that information is accessible
- HSH will proactively work with 311 to get them the information needed

160617 | 160618

om: Board of Supervisors, (BOS)
ent: Tuesday, September 20, 2016 2:26 PM
To: BOS-Supervisors; Major, Erica (BOS)
Subject: FW: BoS Case #160617 #160618 - 2015-2016 Civil Grand Jury Homelessness Report

From: Dennis Hong [mailto:dennisj.gov88@yahoo.com]
Sent: Tuesday, September 20, 2016 2:15 PM
To: Board of Supervisors, (BOS) <board.of.supervisors@sfgov.org>
Cc: Lee, Mayor (MYR) <mayoredwinlee@sfgov.org>; Kim, Jane (BOS) <jane.kim@sfgov.org>; Kositsky, Jeff (HOM) <jeff.kositsky@sfgov.org>
Subject: BoS Case #160617 #160618 - 2015-2016 Civil Grand Jury Homelessness Report

Good morning Honorable Mayor Edwin Lee and Honorable members of the San Francisco Board of Supervisors. My name is Dennis, I have been an resident of San Francisco for more than 70 years, and yes still counting. You have all heard from me in the past on various issues. I trust this email makes some sense.

For starters, the Nivagation centers seem to be working well and the Project Homeless Connect is working but both are are limited. Having said that, I would like for these two above items to be approved and moved forwarded to the Mayors office for his final approval per the Civil Grand Jury's findings and the BoS Gov & Audit committee of 9/15/2016 amendments. With that said, we really need to be on the same page with everyone's input and not a **My Way or No Way** approach or even a not in my back yard. Come on, it's happening in all of our neighborhoods. It's been too long and as I see it we are getting no where. I had reviewed this 2015-2016 Civil Grand Jury report, it say's it all and it is very elementry.

I sent you and the mayor an email awhile back (3/21/2016) encouraging the same - citing case #160228 has anything been done with this? Please! Enough is enough, we need to communicate and collaborate together on these issues. We have

spent enough time and money on this and as I see it - here we are still not much has happened.

What are the how stoppers? If anyone has any questions or why we can't take this approach to at least communicate and collaborate together on these issues and come up with a sensible plan of action and a timeline. If not I would like to hear why we can't. Please reach out and let's make this happen, Mr. Kositsky of our mayors new Homeless Department, made some interesting comments and commitments on 9/15/206 to the Gov and Audit Committee. Now lets follow thru with it and not have a report sitting on a shelf collecting dust.

Again, thanks for letting me vent, but this Homeless issue is really embarrassing to our wonderful city, don't you all agree? It should also be a priority issue. You all have my email.

Best regards, Dennis

BOARD of SUPERVISORS

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Tel. No. 554-5184
Fax No. 554-5163
TDD/TTY No. 544-5227

DATE: September 14, 2016

TO: Members of the Board of Supervisors

FROM: Angela Calvillo, Clerk of the Board

SUBJECT: 2015-2016 Civil Grand Jury Report "San Francisco Homeless Health and Housing: A Crisis Unfolding on Our Streets."

We are in receipt of the following required responses to the San Francisco Civil Grand Jury report released July 12, 2016, entitled: **San Francisco Homeless Health and Housing: A Crisis Unfolding on Our Streets**. Pursuant to California Penal Code, Sections 933 and 933.05, the City Departments shall respond to the report within 60 days of receipt, or no later than September 9, 2016.

For each finding, the Department response shall:

1) agree with the finding; or
2) disagree with it, wholly or partially, and explain why.

As to each recommendation, the Department shall report that:

1) the recommendation has been implemented, with a summary explanation; or
2) the recommendation has not been implemented but will be within a set timeframe as provided; or
3) the recommendation requires further analysis. The officer or agency head must define what additional study is needed. The Grand Jury expects a progress report within six months; or
4) the recommendation will not be implemented because it is not warranted or reasonable, with an explanation.

The Civil Grand Jury Report identified the following City Departments to submit responses (attached):

- Mayor's Office submitted a consolidated response for the following departments:
  a. Department of Homeless and Supportive Housing
  b. Police Department
  c. 311
  Received September 8, 2016
- Office of the Controller
  Received September 9, 2016

These departmental responses are being provided for your information, as received, and may not conform to the parameters stated in California Penal Code, Section 933.05 et seq. The Government Audit and Oversight Committee will consider the subject report, along with the responses, at an upcoming hearing and will prepare the Board's official response by Resolution for the full Board's consideration.

c: Honorable John K. Stewart, Presiding Judge
Kathie Lowry, 2016-2017 San Francisco Civil Grand Jury
Kitsaun King, 2016-2017 San Francisco Civil Grand Jury
Jay Cunningham, 2015-2016 San Francisco Civil Grand Jury
Alison Scott, 2015-2016 San Francisco Civil Grand Jury
Kate Howard, Mayor's Office
Anthony Ababon, Mayor's Office
Naomi Kelly, Office of the City Administrator
Ben Rosenfield, Office of the Controller
Asja Steeves, Office of the Controller
Jon Givner, City Attorney's Office
Alisa Somera, Office of the Clerk of the Board
Severin Campbell, Budget and Legislative Analyst's Office
Jadie Wasilco, Budget and Legislative Analyst's Office
Jeff Kositsky, Department of Homelessness and Supportive Housing
Toney Chaplin, Police Department
Christine Fountain, Police Department
Nancy Alfaro, 311
Andy Maimoni, 311

BOARD of SUPERVISORS

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TDD/TTY No. 554-5227

MEMORANDUM

Date: July 12, 2016

To: Honorable Members, Board of Supervisors

From: Angela Calvillo, Clerk of the Board

Subject: 2015-2016 CIVIL GRAND JURY REPORT

We are in receipt of the San Francisco Civil Grand Jury (CGJ) report released Tuesday, July 12, 2016, entitled: **San Francisco Homeless Health and Housing: A Crisis Unfolding on Our Streets** (attached).

Pursuant to California Penal Code, Sections 933 and 933.05, the Board must:

1. Respond to the report within 90 days of receipt, or no later than August 30, 2016.
2. For each finding:
   - agree with the finding or
   - disagree with the finding, wholly or partially, and explain why.
3. For each recommendation indicate:
   - that the recommendation has been implemented and a summary of how it was implemented;
   - that the recommendation has not been, but will be, implemented in the future, with a timeframe for implementation;
   - that the recommendation requires further analysis, with an explanation of the scope of the analysis and timeframe of no more than six months; or
   - that the recommendation will not be implemented because it is not warranted or reasonable, with an explanation.

Pursuant to San Francisco Administrative Code, Section 2.10, in coordination with the Committee Chair, the Clerk will schedule a public hearing before the Government Audit and Oversight Committee to allow the Board the necessary time to review and formally respond to the findings and recommendations.

Print Form

Introduction Form

By a Member of the Board of Supervisors or the Mayor

Time stamp
or meeting date

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

☒ 1. For reference to Committee. (An Ordinance, Resolution, Motion, or Charter Amendment)

☐ 2. Request for next printed agenda Without Reference to Committee.

☐ 3. Request for hearing on a subject matter at Committee.

☐ 4. Request for letter beginning "Supervisor [ ] inquires"

☐ 5. City Attorney request.

☐ 6. Call File No. [ ] from Committee.

☐ 7. Budget Analyst request (attach written motion).

☐ 8. Substitute Legislation File No. [ ]

☐ 9. Reactivate File No. [ ]

☐ 10. Question(s) submitted for Mayoral Appearance before the BOS on [ ]

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

☐ Small Business Commission ☐ Youth Commission ☐ Ethics Commission

☐ Planning Commission ☐ Building Inspection Commission

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

Sponsor(s):

Clerk of the Board

Subject:

Board Response - Civil Grand Jury - San Francisco Homeless Health and Housing: A Crisis Unfolding on Our Streets

The text is listed below or attached:

Resolution responding to the Presiding Judge of the Superior Court on the findings and recommendations contained in the 2015-2016 Civil Grand Jury Report, entitled "San Francisco Homeless Health and Housing: A Crisis Unfolding on Our Streets"; and urging the Mayor to cause the implementation of accepted findings and recommendations through his/her department heads and through the development of the annual budget.

Signature of Sponsoring Supervisor: Alisa Somera
for

Clerk's Use Only: