



## **Complaint Policy and Procedure**

### **Article 1.1 Purpose of the Committee**

The purpose of the Shelter Monitoring Committee is to provide the Mayor, the Board of Supervisors, the Local Homeless Coordinating Board, the public, and any other appropriate agency with accurate, comprehensive information about the conditions in and operations of shelters as well as City policies in place that affect operations of shelters or their impact on shelter clients.

The mandate of the Committee as provided by Sec. 20.302 of the San Francisco Administrative is to receive and document complaints made to the Committee regarding shelters and refer such complaints to appropriate committee members for follow-up.

### **Article 1.2 Purpose of the Complaint Policy and Procedure**

The purpose of this Complaint Policy and Procedure is to ensure that homeless shelters that the City funds are safe and sanitary, and shelters' policies and procedures are fair and meet the needs of those accessing shelter services.

The Complaint Policy and Procedure applies to all shelter programs funded by the City. This Policy assists the Committee to determine whether providers are complying with shelter operating standards known as the Standards of Care, and whether providers take corrective action within a stipulated timeframe to ensure compliance with the legislation.

### **Article 1.3 Complaints Covered by SMC**

- a) The Complaint Policy and Procedure covers complaints about
  - i. Violation of the Standards of Care
  - ii. Staff's action and/or inaction when implementing Standards of Care at shelter sites
  - iii. Staff's professional conduct when delivering required Standards of Care
- b) The Complaint Policy and Procedure does not cover
  - i. Complaint about our own internal policies and procedures
  - ii. Complaint about funding decisions, or requests for legal advice and assistance
  - iii. Anonymous Complaints
  - iv. Matters investigated by different governmental agency and those are out of the scope of the Shelter Monitoring Committee.

### **Article 1.4 Impartiality during investigation process**

- a) The Committee will take every effort to ensure the fair and equal treatment of all parties involved during the complaint investigation process.
- b) We will not treat anyone making a complaint or responding to the complaint less favorably on the basis of
  - i. Ancestry, race, ethnicity, color, national origin, or genetic characteristics;
  - ii. sex, sexual orientation, gender expression and/or identity;



- iii. marital status, pregnancy;
- iv. physical or mental disability;
- v. religious or political affiliation; and
- vi. Any other unjustifiable factors, such as language difficulty.

### **Article 1.5 Definition of a Complaint**

A complaint is a formal allegation that a specific Standard of Care or shelter policy has been violated, misapplied, or misinterpreted by the provider of shelter services.

### **Article 1.6 Eligibility for filling a Complaint**

- a) Any individual who is accessing or was accessing services at a shelter or a resource site when a Standard of Care was violated, misapplied, or misinterpreted is eligible to file a complaint. This includes a resource center, operating under a contract with the City, to provide temporary emergency shelter services for homeless single adults or families.
- b) The violation, misapplication or misinterpretation of the Standard of Care or shelter policy must have occurred within the past 120 days.
- c) Individuals making the complaint must show that they have taken efforts to make a complaint to the provider within the past 7 days and either-
  - i. The shelter provider's response was not satisfactory to the shelter resident and/or
  - ii. The shelter provider has not responded to the shelter resident complaint within 5 days.

### **Article 1.7 Complaint Processing Procedure**

- i. A shelter resident who wishes to make a complaint can do so by email or letter.
- ii. Shelter residents who need reasonable modification of our Complaint processing procedure such as assistance with writing out their complaints can contact Committee staff and request for such a modification. The Committee will attempt to make as much adjustments as we can to ensure that all complaints are properly filed.
- iii. Upon receipt of an email, letter or telephone call from a shelter resident, Committee staff shall prepare a formal complaint on SMC letterhead on behalf of the shelter client delineating fact, including documentary evidence that supports the allegation that a Standard of Care or shelter policy that has been violated, misapplied, or misinterpreted by the shelter provider. It is the responsibility of the shelter client to provide the evidence, information and facts surrounding the allegation of Standard of Care or shelter policy infraction by the shelter provider.
- iv. Shelter clients must sign the complaint before it is filed and submitted to the shelter provider. Committee staff shall provide the shelter client with a copy of the Complaint submitted to the shelter



- and a letter acknowledging that the complaint has been properly filed and accepted by the Committee.
- v. Committee staff will forward complaints submitted by shelter clients to the relevant provider for their review. Committee staff must notify DSHS, Chair of the SMC and Chair of the Policy Subcommittee of all allegations involving staff or incidents of violence, fraud, and/or assault.
  - vi. Shelter providers have 48 hours to acknowledge receipt of the complaint, and seven days to investigate the allegations and submit a response to the Committee. Shelter providers can request an extension to respond on case by case basis to Committee staff assigned to investigate the Complaint. Provided that such extension shall not exceed 10 business days.
  - vii. Within the timeframe stipulated by Article 1.7 (v), shelter providers shall-
    - a. Provide their findings and position to the SMC; and/or
    - b. Take remedial action, which may include reviewing or changing a decision on the service given to a shelter resident, and/or providing the service required in first instance if appropriate; and/or
    - c. Training or supervising staff; or a combination of both when the Complaint is staff related.
  - viii. Committee staff shall submit a response to the shelter client within 15 days of receipt of shelter client's complaint. Client has 5 days to inform Committee staff whether they are satisfied with the findings. If the shelter client is satisfied, the complaint will be considered resolved.
  - ix. If the shelter client is not satisfied, Committee staff will review the findings of the shelter provider to determine whether or not the Standard of Care or shelter policy has been violated, misapplied, or misinterpreted.
  - x. The Committee staff shall within 5 days complete their finding and issue a final determination letter, which shall include recommendation for corrective action, to the shelter client, shelter provider, and DSHS.

#### **Article 1.8 Non Retaliation**

Shelter staff and shelter clients shall not be retaliated against for participating in any activity involving the Shelter Monitoring Committee.

#### **Article 1.9 Confidentiality**

#### **Article 2.0 Biannual Review of the Policy**



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