



# *Shelter Monitoring Committee*

## **Second Quarter Report, October through December 2015**

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

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

### ***Executive Summary***

The Shelter Monitoring Committee (The Committee) is responsible for documenting the conditions of shelters and resource centers to improve the health, safety, and treatment of clients, staff, and the homeless community. The Committee monitors the conditions of these shelters and resource centers through two primary methods: Conducting site visits and by taking client complaints. Individual Committee members form teams and make unannounced site visits to all shelters a minimum of 4 times per year, per site. In addition, Committee teams make two announced site visits per year for the purpose of giving shelter residents the opportunity to discuss shelter conditions with members of the Committee. The Committee was able to complete site visits at 17 of 21 sites during the reporting period, or 81% of the total mandated site visits for the 2<sup>nd</sup> Quarter of this fiscal year.

Clients are able to submit complaints regarding their experiences at shelters and resources to the Committee by email, phone or in person. The Committee received 30 Standard of Care complaints during the reporting period (From October 1 to December 31, 2015). The most frequent complaints received by the Shelter Monitoring Committee during the reporting period are staff related issues (81%), followed by health and hygiene issues (11.6%), facility and access issues (5.7%), and ADA (1.4%). Of the 30 complaints submitted by clients this quarter, 21 (70.0%) were closed due to a lack of response from clients, 7 complaints (23.3%) were closed as a result of clients being satisfied with the site response. There are no complaints that are currently open or pending due to a lack of site or client response. The Committee also received 2 responses (6.7%) that were not satisfactory for the client and required an investigation. There were two complaints that were investigated during the reporting period, one complaint from this quarter and one complaint from the Q1 of the 15-16 FY. There is still one complaint from this quarter pending an investigation. Additional information on the investigations conducted this quarter can be found at the bottom of Page 14 of this report.

### ***Policy Recommendations***

For this reporting period, the Shelter Monitoring Committee is recommending that HSA adopt a

formal policy regarding Imminent Danger and incidents of domestic violence. The Committee has approved a set of recommendations for this policy that were written by the Policy Subcommittee with input from the SF Domestic Violence Consortium, the Coalition on Homelessness, shelter providers and other community partners. The full list of recommended changes to the Imminent Danger can be found in Appendix A at the end of the report.

### Site Visits

The inspection teams conducted 17 of the 21 assigned visits (80%) in the second quarter, from October 1 to December 31, 2015. During the reporting period, the Interfaith Emergency Winter Shelters were activated which brought the total number of shelters the Committee must inspect this quarter to 21. The Committee is mandated by legislation to conduct a minimum of four site inspections per site annually, visiting each of the sites once per quarter.

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

The Committee did not visit the site during the reporting period.

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

*Site Visit infractions submitted to site:* 12/28/15

*Reminder sent:* 2/11/16

*Site responded:* The site has yet to respond to the infraction report. As a result, all issues are still ongoing.

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

- No CPR masks available
- No protective gowns available
- ADA information not posted in English and Spanish
- No reasonable accommodation forms available (forms in case manager's office, need to be available for front-line staff to access)
- Smoking prohibited signs not posted in English and Spanish
- No TTY or signage on where clients can access TTY
- No bilingual English and Spanish staff currently on duty
- Not all staff wearing ID badges

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

*Site Visit infractions submitted to site:* 10/26/15

*Site responded:* 11/2/15

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

- No sheets provided to clients – **Ongoing due to issues related to laundering sheets**
- No TTY or signage on where to access TTY - **Resolved**

#### ***Compass Family Shelter***

*Site Visit Date:* 12/3/15

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

***Dolores Street Community Services-Santa Marta/Santa Maria/Jazzie's Place***

*Site Visit infractions submitted to site: 12/30/15*

*Reminders sent: 1/8/16, 1/20/16*

*Site responded: 2/18/16*

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

- Signage regarding meal times, check in times hours of operation, laundry services, shower times posted in English only, none posted in Spanish - **Resolved**
- Case management availability and accessibility not posted in English or Spanish - **Resolved**
- Menu not posted in English or Spanish - **Resolved**
- Broken shower handle in Santa Marta bathroom with no signage – **Signage posted and issue resolved**
- No emergency disaster plan in place or signage posted of how to evacuate the building – **Pending until construction is completed and a new plan can be created**
- No ADA liaison on duty - **Resolved**
- No Language Link – **Ongoing**
- No MUNI tokens available - **Resolved**

***First Friendship Emergency Family Shelter***

*Site Visit infractions submitted to site: 12/29/15*

*Site responded: 1/6/16*

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

- No on duty ADA liaison - **Resolved**
- No sheets provided to clients – **Ongoing due to issues related to laundering sheets**
- No MUNI tokens available (site was out of tokens at the time of the visit) - **Resolved**
- No TTY or signage on where clients could access TTY - **Resolved**

***Hamilton Family Residences***

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

***Hamilton Emergency Shelter***

*Site Visit infractions submitted to site: 1/15/16*

*Site responded: 1/19/16*

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

- Men's restroom on the fourth floor needed cleaning – **Resolved**
- Dust and debris in 4<sup>th</sup> floor emergency shelter area - **Resolved**

***Hospitality House***

*Site Visit infractions submitted to site: 1/12/16*

*Site responded: 1/20/16*

The Committee visited this site once during the reporting period and noted the following Standards of Care infractions:

- No signage posted showing Check In/Check Out times - **Resolved**
- No signage posted showing where clients can access laundry services - **Resolved**
- Hand sanitizer not available throughout the facility - **Resolved**
- Floor not clear of dust and debris - **Resolved**
- Menus not posted in Spanish - **Resolved**
- No TTY or signage on where to access TTY - **Resolved**

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

The Committee did not visit this site during the reporting period.

#### ***Lark Inn***

*Site Visit infractions submitted to site: 1/6/16*

*Site responded: 1/13/16*

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

- No menus posted in English or Spanish - **Resolved**
- Staff not wearing ID badges - **Resolved**
- Several City and shelter printed materials not in Spanish (case management availability and accessibility) - **Resolved**
- Dust and debris in vent (back pod) - **Resolved**
- Men's bathroom not clean - **Resolved**
- No shower head in Men's ADA shower - **Resolved**
- No signage regarding broken/missing shower head - **Resolved**

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

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

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

*Site Visit infractions submitted to site: 12/22/15*

*Site responded: 2/26/16* (Response delayed due to technical issues related to ZixCorp encryption)

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

- Reasonable accommodation forms not available in English and Spanish - **Resolved**
- Emergency drills not practiced monthly (last drill held in September 2015) - **Resolved**
- No AED on site (available at shelter only) - **Resolved**

- No hand sanitizer available in women's restroom - **Resolved**
- Men's restroom needed additional cleaning - **Resolved**
- No signage posted in English and Spanish about services offered at the site (Check in/out times, Hours of operation, Shower times, Case management availability and accessibility) - **Resolved**
- Not all City and Shelter printed materials in English and Spanish - **Resolved**

#### ***MSC South Shelter***

The Committee visited this site once during the reporting period and noted the following Standards of Care infractions:

- Sheets not available for clients - **Resolved**
- Emergency drills not practiced on a monthly basis - **Resolved**

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

The Committee did not visit the site during the reporting period.

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

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

*Site Visit infractions submitted to site: 11/20/15*

*Site responded: 11/30/15*

- Empty hand sanitizer dispensers (throughout the facility) - **Resolved**
- No sheets (ongoing due to laundering issues) - **Resolved**
- One stall in men's restroom had no toilet paper – **Resolved**

#### ***Sanctuary***

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

#### ***United Council – Mother Brown's***

*Site Visit infractions submitted to site: 12/28/15*

*Site responded: 2/17/16*

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

- No Language Link – Ongoing due to lack of funding
- No bilingual staff on duty - Ongoing
- No tokens available (ran out) - Resolved
- No soap, paper towels, and toilet paper in the bathrooms – Ongoing until dispensers are installed
- Hand sanitizer dispensers throughout site are empty - Resolved
- No emergency exit plans posted at each exit - Resolved

***St. Joseph's Family Shelter***

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

Table 1: Site Visit Tally for 2nd QTR for 2015-2016

Shelter and Resource Center	Number of Visits 1st Qtr. 2015-2016 July - September	Number of Visits 2nd Qtr. 2015- 2016 Oct - Dec	Total 2015-2016 FY
A Woman's Place	1	0	1
AWPDI	1	1	2
Bethel AME	1	1	2
Compass	1	1	2
First Friendship	1	1	2
Hamilton Emergency Shelter	1	1	2
Hamilton Family Shelter	1	1	2
Hospitality House	1	1	2
Interfaith *seasonal shelter that operates from November through February	0	0	0
Jazzie's Place	1	1	2
Lark Inn	1	1	2
MSC South Drop In	1	1	2
MSC South Shelter	1	1	2
MNRC	1	1	2
Next Door	1	0	1
Providence	1	1	2
Sanctuary	1	1	2
Santa Ana	1	0	1
Santa Marta/Santa Maria	1	1	2
St. Joseph's	1	1	2
United Council	1	1	2
<b>Total</b>	<b>20</b>	<b>17</b>	<b>37</b>
<b>Assigned Number of Visits</b>	<b>20</b>	<b>21</b>	<b>41</b>
<b>Percentage of Compliance</b>	<b>100%</b>	<b>81%</b>	<b>90%</b>

## Standards of Care Complaints

There were 30 Standard of Care complaints filed by clients from October 1 to December 31, 2015. The table below provides a breakdown of the number of complaints per site and the status of the complaints themselves. A complaint can include allegations of non-compliance for one Standard or multiple Standards. In addition, each complaint can contain multiple allegations of violations of the same Standard of Care. For example, a client alleged the staff did not have their identification (Standard 25), a lack of soap (Standard 3), a lack of paper towels (Standard 3) and lack of a pillow (Standard 12). The Standards of Care complaints fall into four areas of compliance that are depicted below:

There are five status categories for complaints:

**Open** – Indicates that the site has yet to respond to the complaint filed by the client. Of 30 complaints submitted by clients this quarter, none of the complaints remain open.

**Closed** - Indicates that the client who initiated the complaint agrees with the site's response. Of the 30 complaints submitted by clients this quarter, 7 of the complaints (23.3%) have been closed.

**Not Satisfied** - Indicates that the client who initiated the complaint did not agree with the site's response. Responses that are not satisfactory for the client are investigated by the Committee. The Committee's investigation reports are provided to the client, HSA and shelter management. Of the 30 complaints submitted by clients this quarter, 2 (6.7%) received responses that were not satisfactory for the client that required investigations by the Committee. Additional information on investigations conducted by the Committee can be found in the "Investigations" section of this report.

**Pending** - Indicates that the site has responded to the complaint and that the Committee is waiting for the client to indicate whether or not they agree with the site's response. Of the 30 complaints submitted by clients this quarter, none are awaiting a client's response.

**No Contact** - Indicates that the contact information the client provided at the time of the initial complaint is no longer valid or the client did not have contact information when making the initial complaint and has not returned within the 45-day requirement to review the site's response. Of the 43 complaints submitted by clients this quarter, 21 complaints (70%) were closed due to a lack of response from clients.

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

<b>Site</b>	<b># of Complainants</b>	<b># of Complaints filed</b>	<b>Status of Complaints</b>	<b>Investigations</b>
<b>A Woman's Place</b>	0	0	N/A	None
<b>A Woman's Place Drop In</b>	0	0	N/A	None
<b>Bethel AME</b>	1	1	No Contact (1)	None
<b>Compass</b>	3	3	No Contact (3)	None
<b>First Friendship</b>	1	1	No Contact (1)	None
<b>Hamilton Emergency Shelter</b>	1	1	No Contact (1)	None
<b>Hamilton Family Shelter</b>	0	0	N/A	None
<b>Hospitality House</b>	0	0	N/A	None
<b>Interfaith</b> *seasonal shelter that operates from November through February	1	2	No Contact (2)	None
<b>Jazzie's Place</b>	1	1	No Contact (1)	None
<b>Lark Inn</b>	0	0	N/A	None
<b>MSC South Drop In</b>	2	3	Closed (2) No Contact (1)	None
<b>MSC South Shelter</b>	4	7	Closed (3) No Contact (4)	None
<b>MNRC</b>	0	0	N/A	None
<b>Next Door</b>	5	8	Closed (2) Not satisfied (1) No Contact (5)	Pending (1)
<b>Providence</b>	1	1	No Contact (1)	None
<b>Sanctuary</b>	1	1	Not Satisfied (1)	Completed (1)
<b>Santa Ana</b>	1	1	No Contact (1)	None
<b>Santa Marta/Santa Maria</b>	0	0	N/A	None
<b>St. Joseph's</b>	0	0	N/A	None
<b>United Council</b>	0	0	N/A	None
<b>Totals</b>	<b>22</b>	<b>30</b>	<b>Closed (7) No Contact (21) Not Satisfied (2)</b>	<b>Complaints requiring investigation (2)</b>



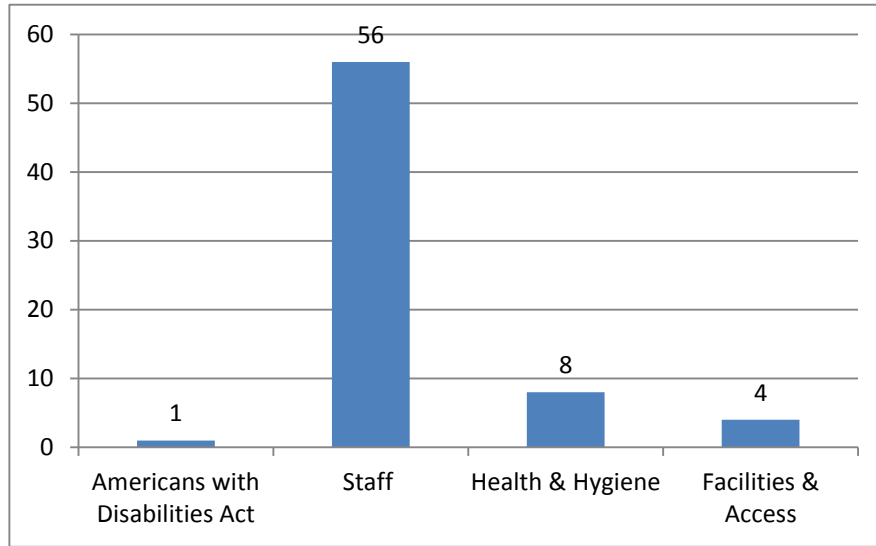


Chart I: Standard of Care Complaint Alleged Violation Breakdown, 2nd Quarter, 2015-2016

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

### ***Staff***

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

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

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

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

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

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

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

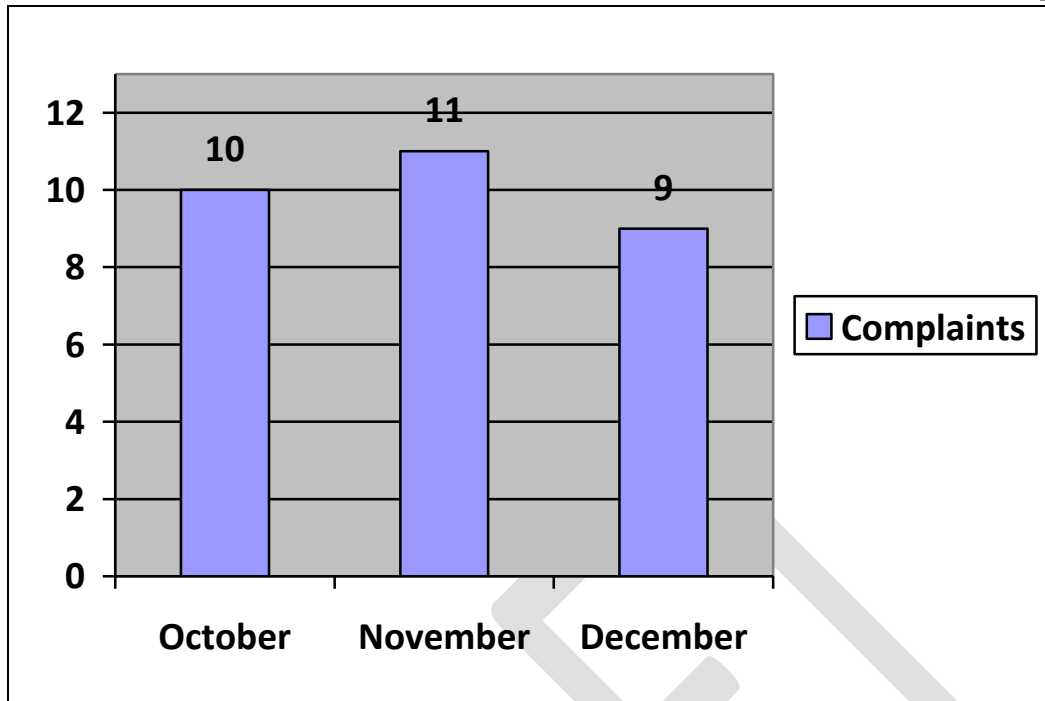


Chart II: Standard of Care Complaint Monthly Breakdown, 2nd Quarter, 2015-2016

### *Client Complaints and Allegations by Site*

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

This site did not receive any client complaints during the reporting period.

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

This site did not receive any client complaints during the reporting period.

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

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

- Client #1:
  - Standard 2: Provide shelter services in an environment that is free and safe of physical violence – 1 allegation
  - **Complaint is closed due to No Contact from the client**

#### ***Compass***

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

- Client #1:
  - Standard 1: Treat clients equally, with respect and dignity – 1 allegation
  - Standard 3: Provide soap...paper/hand towels,...if hand dryers are currently installed they shall be maintained in proper working condition....hire janitorial staff to clean shelters on a daily basis – 1 allegations
  - **Complaint is closed due to No Contact from the client**
- Client #2:

- Standard 1: Treat clients equally, with respect and dignity – 1 allegation
- **Complaint is closed due to No Contact from the client**
- Client #3:
  - Standard 1: Treat clients equally, with respect and dignity – 1 allegation
  - **Complaint is closed due to No Contact from the client**

### ***First Friendship***

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

- Client #1:
  - Standard 1: Treat clients equally, with respect and dignity – 1 allegation
  - Standard 13: Make the shelter facility available to shelter clients for sleeping at least 8 hours per night – 1 allegation
  - **Complaint is closed due to No Contact from the client**

### ***Hamilton***

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

- Client #1:
  - Standard 2: Provide shelter services in an environment that is free and safe of physical violence – 1 allegation
  - Standard 17: Note in writing and post in a common area in the shelter when a maintenance problem will be repaired and note the status of the repairs
  - **Complaint is closed due to No Contact from the client**

### ***Interfaith Winter Shelter***

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

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

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

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

- Complaint #1
  - Standard 1: Treat clients equally, with respect and dignity – 1 allegation
  - Standard 2: Provide shelter services in an environment that is free and safe of physical violence – 1 allegation
  - **Complaint is closed due to no response from the client**

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

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

- Client #1, Complaint #1:
  - Standard 1: Treat clients equally, with respect and dignity – 1 allegations
  - **Complaint is closed due to client satisfaction with the site's response.**
- Client #1, Complaint #2:
  - Standard 1: Treat clients equally, with respect and dignity – 3 allegations

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

### ***MSC South Shelter***

This site received 7 complaints submitted by four separate clients during the reporting period:

- Client #1, Complaint #1:
  - Standard 1: Treat clients equally, with respect and dignity – 4 allegation
  - **Complaint is closed due to client satisfaction with the site's response.**
- Client #1, Complaint #2:
  - Standard 1: Treat clients equally, with respect and dignity – 3 allegations
  - **Complaint is closed due to client satisfaction with the site's response.**
- Client #1, Complaint #3:
  - Standard 1: Treat clients equally, with respect and dignity – 4 allegations
  - Standard 2: Provide shelter services in an environment that is free and safe of physical violence – 1 allegation
  - **Complaint is closed due to No Contact from the client**
- Client #2, Complaint #1:
  - Standard 1: Treat clients equally, with respect and dignity – 1 allegation
  - Standard 2: Provide shelter services in an environment that is free and safe of physical violence – 1 allegation
  - **Complaint is closed due to client satisfaction with the site's response.**
- Client #2, Complaint #2:
  - Standard 1: Treat clients equally, with respect and dignity – 1 allegation
  - Standard 2: Provide shelter services in an environment that is free and safe of physical violence – 1 allegation
  - **Complaint is closed due to No Contact from the client**
- Client #3:
  - Standard 1: Treat clients equally, with respect and dignity – 2 allegations
  - **Complaint is closed due to No Contact from the client**
- Client #4:
  - Standard 1: Treat clients equally, with respect and dignity – 1 allegation
  - Standard 2: Provide shelter services in an environment that is free and safe of physical violence – 1 allegation
  - Standard 16: Provide shelter clients with access to electricity for charging...medical devices for clients with disabilities – 1 allegation
  - **Complaint is closed due to No Contact from the client**

### ***Next Door***

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

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

- Standard 1: Treat clients equally, with respect and dignity – 1 allegations
  - **Complaint is closed due to client satisfaction with the site's response.**
- Client #2, Complaint #2:
  - Standard 13: Make the shelter facility available to shelter clients for sleeping at least 8 hours per night – 1 allegation
  - **Complaint is closed due to client satisfaction with the site's response.**
- Client #2, Complaint #3:
  - Standard 2: Provide shelter services in an environment that is free and safe of physical violence – 1 allegation
  - **Complaint is closed due to No Contact from the client**
- Client #3, Complaint #1:
  - Standard 1: Treat clients equally, with respect and dignity – 1 allegation
  - Standard 2: Provide shelter services in an environment that is free and safe of physical violence – 1 allegation
  - **Complaint is closed due to No Contact from the client**
- Client #3, Complaint #2:
  - Standard 1: Treat clients equally, with respect and dignity – 1 allegation
  - Standard 2: Provide shelter services in an environment that is free and safe of physical violence – 1 allegation
  - **Complaint is closed due to No Contact from the client**
- Client #4:
  - Standard 1: Treat clients equally, with respect and dignity – 1 allegation
  - Standard 10: Make dietary modifications to accommodate request from client based on...health or disability reasons – 1 allegation
  - Standard 13: Make the shelter facility available...for sleeping at least 8 hours per night – 1 allegation
  - **Complaint is closed due to No Contact from the client**
- Client #5:
  - Standard 1: Treat clients equally, with respect and dignity – 1 allegation
  - Standard 2: Provide shelter services in an environment that is free and safe of physical violence – 1 allegation
  - **The client was not satisfied with the response to the complaint, leading to an investigation that was completed outside of the reporting period.**

### ***Providence***

This site received one complaint during the reporting period:

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

### ***Sanctuary***

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

- Complaint #1:
  - Standard 1: Treat clients equally, with respect and dignity – 5 allegation

- Standard 13: Make the shelter facility available to shelter clients for sleeping at least 8 hours per night – 1 allegation
- **Complaint is closed after the an investigation by Committee staff determined that the site was in compliance with both Standard #1 and Standard #13 of the Standards of Care. Additional information about this incident can be found in the “Investigations” section of this report (Page 14, Investigation #2).**

***Santa Ana:***

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

- Complaint #1:
  - Standard 1: Treat clients equally, with respect and dignity – 1 allegation
  - Standard 2: Provide shelter services in an environment that is safe and free from physical violence – 1 allegation
  - Standard 8: ...shelters shall provide orientation to new shelter clients... - 1 allegation
  - Standard 11: Comply with Article 19F of the San Francisco Health Code that prohibits smoking in homeless shelters – 1 allegation
  - Standard 13: Make the shelter available to shelter clients for sleeping at least 8 hours per night – 1 allegation
  - Standard 25: Require all staff to wear a badge that identifies the staff person by name and position badges – 1 allegation
  - Standard 26: Ensure all clients receive appropriate and ADA complaint transportation – 1 allegation
  - Standard 28: Provide clients with access to free laundry services – 1 allegation
  - **Complaint is closed due to No Contact from the client.**

**Investigations**

There were two investigations conducted during this reporting period, both involving clients staying at Sanctuary.

***Sanctuary***

**Investigation #1:**

**Note: This investigation was completed during this reporting period but the original complaint was submitted at the end of the First Quarter of the 15-16 FY.** The complainant was not satisfied with the site's response to her allegations that staff did not appropriately handle a situation where a male client made an unauthorized entry into the female sleeping area. The complainant stated that she was unsatisfied with how staff described the situation to police officers that came to investigate. The complainant alleged that she told shelter staff that the male client had his hands inside his pants (implying that the male client was engaging in sexually inappropriate behavior), but staff did not include this information when they described the incident to police officers.

After speaking with shelter staff and reviewing the Client Complaint Report, Committee staff determined that there was no conclusive evidence to indicate that staff were aware of the male

client's alleged sexually inappropriate behavior prior to giving their description on the incident to police officers. While the Client Complaint Report contained the complainant's allegations that the male client did have his hand inside of his pants and provided the date and time of the incident, it contains no information about when the report itself was submitted to shelter staff. As a result, the report is insufficient to prove that shelter staff were aware of the male client's sexually inappropriate behavior prior to the arrival of police officers and that staff purposefully withheld that information from investigating officers.

Based on the verifiable actions that shelter staff did take on the night of the incident (writing up the male client for making an unauthorized entry into the female sleeping area, explaining the rules about where male and female clients are allowed to go, subsequent follow ups with the male client to ensure compliance with shelter rules), the Shelter Monitoring Committee determined that Sanctuary treated all clients equally and with respect and are maintaining an environment that is safe and free of physical violence. As a result, Sanctuary was found to be in compliance with both Standard 1 and 2 of the Standards of Care.

### **Investigation #2:**

The complainant was not satisfied with the site's response to her allegations that the air freshener dispensers located in the women's restrooms were releasing scents that were harmful to her physical health. The complainant disagreed with the portion of Sanctuary's response that claims that the air freshener dispensers are empty because the complainant claims her medical conditions were being aggravated by the scents released by the dispensers.

After speaking extensively with shelter management and physically examining the women's restroom, the Shelter Monitoring Committee determined that there are no odors or scents being released by the air freshener dispensers. While there were air freshener dispensers located inside the women's restrooms at Sanctuary, they were empty and have not been refilled for a period of several years. The Committee could not detect any residual odors being released by the dispensers during their examination of the women's restroom. Shelter management agreed to remove the empty dispensers from restrooms in order to avoid future confusion about irritating scents in the shelter (shelter management believes that odors the complainant is referring to may come from perfumes/colognes being used by other clients). As a result of their investigation, Committee staff determined that Sanctuary was in compliance of Standard 1 of the Standards of Care and is treating all clients equally, with respect and dignity.

## **Membership**

Committee Chair Nicholas Kimura (Board of Supervisors Seat #3) resigned from the Shelter Monitoring Committee during this reporting period. The Committee now consists of 10 members with three vacancies that still need to be filled. The requirements for the three open seats are:

- Board of Supervisors Seat 1: Seat must be filled by a candidate that is currently homeless that is the legal guardian of a child under the age of 18
- Board of Supervisors Seat 3: Seat must be filled by a candidate that has experience providing direct services to the homeless through a community setting.
- Mayor's Seat 1: Seat must be filled by an individual that is currently or formerly homeless

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

Through the creation of the Committee, the committee is required to submit quarterly and as-needed emergency reports to the Board of Supervisors and Mayor's office. To educate the Board of Supervisors, the Mayor's office and public and private stakeholders, including clients, the Committee provides monthly reports on the Standard of Care complaint process. These reports are discussed monthly at public meetings, provided to the contractors (Human Services Agency and Department of Public Health), and made available upon request to any individual. Committee officers are working on streamlining staff duties to ensure that required information is collected, captured and made public.



## **Appendix A: Imminent Danger Policy Recommendations**

1. *HSA shall adopt a policy on victims of domestic violence. The policy must include the following:*
  - a. *No client shall be denied services on the basis of being a victim of domestic violence.*
  - b. *Self-disclosure of domestic violence cannot be used as grounds for denial of service.*
  - c. *Use lethality assessments upon intake to assess all families for the risk of domestic violence*
  - d. *The creation of procedures where shelters contact law enforcement for the provision of emergency protective orders (EPO) in cases of domestic violence.*
  - e. *Update the shelter training manual for shelter staff on how to handle domestic violence and other crisis situations.*
  - f. *Domestic violence policy should be consistent with the San Francisco Shelter Grievance Policy.*
2. *To increase funding for additional trainings on domestic violence for all shelter staff.*
3. *To support additional funding for the expansion of the domestic violence support system.*

## Appendix B: Client Complaint Process Flowchart

### Client Complaints

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

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



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



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



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



If the client is not satisfied with the site's response, the complaint is investigated by Committee staff. Clients must inform staff that they are not satisfied with the complaint within 45 days of receiving the site's response otherwise the complaint is closed.



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

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

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

## Appendix C: Site Visit Infraction Process Flowchart

### Site Visit Infractions

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

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



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



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



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



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



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

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

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