MEMORANDUM

TO: Shelter Monitoring Committee
FROM: Committee Staff
DATE: August 11, 2017
RE: July 2017 SOC Staff Report

Standards of Care Staff Report

July Client Complaints

There were a total of 12 complaints submitted to the Shelter Monitoring Committee by 12 unduplicated clients in July 2017. Of those 12 complaints, one received a response that satisfied the client and three received responses that did not satisfy the client. Sites have responded to the other eight complaints but they are still open pending a response from the client.

The narrative below for each site provides an overview of the types of complaints forwarded to each site. Not all sites have had a chance to respond to the complaints. ***Note: The complaints below may have already been investigated to the satisfaction of the site or its contracting agency; however, the Committee must allow for each complainant to review the responses and the complainant determines whether s/he is satisfied. If the complainant is not satisfied, the Committee conducts an investigation.

Bethel AME

- Client #1
- Complaint submitted: 7/7/17
- Response received: 7/11/17
- Alleged SOC Violations:
  - Standard 13: Make shelter facility available to shelter clients for sleeping at least 8 hours per night
- The complainant alleged that there are several ceiling lights that are left on a few nights a week that prevent clients from falling asleep at night.
- The response stated that the lights that are left on at night are emergency lights that cannot be turned off. The response also stated that the shelter cannot be left in complete darkness at night due to safety reasons.

Not Satisfied – Client is not satisfied with the site’s response and has requested an investigation into this complaint

- Client #2
- Complaint submitted: 7/10/17
- Response received: 7/23/17
- Alleged SOC Violations:
- **Standard 1:** Treat clients equally, with respect and dignity…
- **Standard 22:** Provide 22 inches of space between the sides of sleeping units…

- The complainant alleged that sleeping mats are too close together, that there are cockroaches at the shelter and that staff make statements intended to intimidate clients into not submitting complaints about the shelter.
- The response stated that all mats are 22 inches apart when they are laid out by shelter staff and that clients move the mats closer to each other after “lights out”. The response also denied the allegations that shelter staff are attempting to intimidate clients.

*Pending – Site has responded to this complaint but it is still open pending a response from the client*

### Hamilton Emergency Shelter

- **Client #1**
- **Complaint submitted:** 7/3/17
- **Response received:** 7/11/17
- **Alleged SOC Violations:**
  - **Standard 1:** Treat all clients equally, with respect and dignity…
  - **Standard 10:** Make dietary modifications to accommodate requests from clients…

- The complainant alleged that the shelter served undercooked chicken to clients and did not provide an alternative meal option when the client requested one.
- The response from the Registered Dietician stated that shelter management investigated the complaint by reviewing cooking procedures and food temperature logs, which indicated that the chicken was cooked until it reached 165 degrees. The response also stated that no other complaints or reports about illness were received.

*Pending – Site has responded to this complaint but it is still open pending a response from the client*

### MSC South

- **Client #1**
- **Complaint submitted:** 7/3/17
- **Response received:** 7/11/17
- **Alleged SOC Violations:**
  - **Standard 1:** Treat all clients equally, with respect and dignity…

- The complainant alleged that a security officer is rude to clients and carries an unloaded gun with him while he is working at the shelter. The complaint also alleged that shelter staff will drop utensils, cups and plates on the ground and give them to clients without washing them first.
- The response stated that shelter management and the security supervisor met with the security officer and that he denied ever bringing a gun onto the site. The response also stated that they have not received any other reports about the security officer being rude to clients. The response also states that the registered dietician investigated the allegations of staff dropping items on the floor and that none of those allegations could be confirmed.

*Pending – Site has responded to this complaint but it is still open pending a response from the client*

- **Client #2**
- **Complaint submitted:** 7/17/17
- **Response received:** 7/24/17
- **Alleged SOC Violations:**
  - **Standard 1:** Treat all clients equally, with respect and dignity…
  - **Standard 3:** ...clean shelters on a daily basis…
The complainant alleged that shelter staff were rude to him when he asked for help with bed mites and that staff closed the laundry room while he was still doing a load of laundry.

The response stated that shelter staff denied being rude to the complainant and stated that shelter staff did help the complainant by giving him a new mattress, giving him a new set of clothes and by moving him to another bed. The response also states that the complainant did not put his clothing into the dryer until after the laundry facility had closed for the day, so staff asked him to pick up his dried clothing the following morning.

Pending – Site has responded to this complaint but it is still open pending a response from the client

Next Door

Client #1

Complaint submitted: 7/11/17
Response received: 7/12/17
Alleged SOC Violations:
  o Standard 1: Treat all clients equally, with respect and dignity…
  o Standard 15: Provide shelter clients with pest-free, secure property storage…

The complainant states shelter staff did not give her any paperwork when she was DOS’d from the site and that shelter staff would not return her property to her.

The response stated that shelter staff did not have the chance to give the complainant her DOS paperwork because she immediately left the shelter after pushing another client and yelling at staff. The response also stated that the site had returned seven of the complainant’s nine bags of property to her and the complainant could pick up her remaining two bags at any time.

Not Satisfied – Client is not satisfied with the site’s response and has requested an investigation into this complaint

Client #2

Complaint submitted: 7/11/17
Response received: 7/12/17
Alleged SOC Violations:
  o Standard 1: Treat all clients equally, with respect and dignity…
The complainant alleged that shelter staff were rude to her and tried to DOS her for one night for asking for a new set of sheets. The complainant also alleged that shelter staff denied her requests for towels, cleaning supplies or for access to the door for disabled clients.

The response stated that shelter staff asked the complainant to leave the shelter so she could calm down because the complainant threw her sheets at shelter staff and started causing a disturbance. The response also denied the allegations that staff were not providing the complainant with services.

Not Satisfied – Client is not satisfied with the site’s response and has requested an investigation into this complaint

Client #3:
- Complaint submitted: 7/18/17
- Response received: 7/26/17
- Alleged SOC Violations:
  - Standard 1: Treat all clients equally, with respect and dignity…
- The complainant alleged that a security officer would not allow him to check into the site and told him to leave the shelter for two hours.
- The response stated that shelter management could not find any record of the complainant staying at Next Door, and as a result could not investigate his allegations.

Closed – Client was satisfied with the site’s response

Client #4:
- Complaint submitted: 7/27/17
- Response received: 8/2/17
- Alleged SOC Violations:
  - Standard 1: Treat all clients equally, with respect and dignity…
- The complainant alleged that shelter staff are not following laundry sign-up procedures and that they give preferential treatment to clients they like.
- In the response, the site denied the allegations that staff were not following laundry sign-up procedures or giving preferential treatment to other clients. The response asked the complainant if she would be willing to meet with shelter management to discuss her concerns.

Pending – Site has responded to this complaint but it is still open pending a response from the client
• **Client #2:**
  • Complaint submitted: 7/7/17
  • Response received: 7/26/17
  • Alleged SOC Violations:
    - **Standard 17:** Note in writing and post in common areas…when a maintenance problem will be repaired…
  - The complainant alleged that one of the showers in the men’s restroom is broken and runs for hours after the shower has been turned off. The complaint alleges that the shelter frequently runs out of water due to the broken shower.
  - In the response, shelter management stated that they had identified the broken shower and that repairs were scheduled.

_Pending – Site has responded to this complaint but it is still open pending a response from the client_

### July Client Complaints by Standard

<table>
<thead>
<tr>
<th>Standard of Care</th>
<th>Number of complaints alleging violations of this Standard</th>
</tr>
</thead>
<tbody>
<tr>
<td>Standard 1: Treat all clients equally, with respect and dignity, including in the application of shelter policies…</td>
<td>10</td>
</tr>
<tr>
<td>Standard 3: …hire janitorial staff to clean shelters on a daily basis</td>
<td>1</td>
</tr>
<tr>
<td>Standard 10: Make dietary modifications to accommodate requests from clients based on religious beliefs and practices; health or disability reasons</td>
<td>1</td>
</tr>
<tr>
<td>Standard 13: Make the shelter facility available for sleeping at least 8 hours per night</td>
<td>1</td>
</tr>
<tr>
<td>Standard 15: Provide shelter clients with pest-free, secure property storage inside each shelter…</td>
<td>1</td>
</tr>
<tr>
<td>Standard 17: Note in writing and post in common areas in the shelter when a maintenance problem will be repaired and note the status of repairs</td>
<td>1</td>
</tr>
<tr>
<td>Standard 22: Provide at least one front line staff at each site that is bilingual in English and Spanish</td>
<td>1</td>
</tr>
</tbody>
</table>

Please note that each complaint can include alleged violations of more than one Standard of Care.
July SOC Investigations

Clients who are not satisfied with the site’s response to their complaint can request a Committee investigation into their complaint. The Committee completed three investigations in July, two for clients of Next Door shelter and the other for a client of MSC South Drop In:

**MSC South Drop In**

**Client #1**

**Alleged SOC violations:**

- **Standard 1)** Treat clients equally, with respect and dignity, including in the application of shelter policies and grievance process
- **Standard 2)** Provide shelter services in an environment that is safe…
- **Standard 25)** Require all staff to wear a badge that identifies the staff person by name and position

In the original complaint, the complainant alleged that he was disrespected by security officers and shelter staff, that the site incorrectly applied TB clearance policies when he was denied services due to expired TB clearance, that shelter staff were not wearing their ID badges, that shelter staff mischaracterized the incident on his denial of service paperwork and that a shelter supervisor challenged him to a fight.

In order to investigate this complaint, the Committee visited MSC South Drop In in order to speak with shelter management to discuss their investigation into the complaint, review security camera footage of the incident and to check to see if shelter staff were wearing their ID badges. Committee staff reviewed statements from shelter staff and security officers, which denied the allegations that they were rude to the complainant or challenged the complainant to the fight. Committee staff were unable to confirm the these allegations after viewing the security video because the footage did not record any audio of the incident. As a result, the findings for these allegations were inconclusive.

Committee staff reviewed HSH TB Clearance guidelines and TB protocols, which state that shelter clients must show evidence of TB clearance before accessing shelter services. As a result, the site was adhering to these policies when they denied services to the complainant due to his expired TB clearance. The site was also in compliance with Standard 25, as all shelter staff were wearing ID badges at the time of the investigation. However, security footage of the incident showed that the complainant had thrown a bottle on the ground and not at shelter staff as the original write-up claimed. As a result, the site was found to be out of compliance with Standard 1 for not treating the complainant with respect and dignity during the application of shelter policies and the grievance process.

**Recommendations:** Committee staff recommended that shelter staff involved in the incident review Shelter Training Manual Ch. 6: Intervention with Escalating Clients and shelter rules regarding denials of service. Shelter management agreed with the recommendation and stated that they would follow-up with the Committee once shelter staff had finished reviewing the training manual and shelter rules. During the course of the investigation, Committee staff found that the site attempted to schedule a grievance hearing with the complainant without providing him with a copy of his denial of service paperwork first. Committee staff also recommended that the site provide all clients with denial of service paperwork prior to scheduling a grievance hearing.

**Next Door**

**Client #1**

**Alleged SOC violation:**
**Standard 1)** Treat clients equally, with respect and dignity, including in the application of shelter policies and grievance process

**Standard 25)** Require all staff to wear a badge that identifies the staff person by name and position

In the initial complaint, the complainant alleged that shelter staff wrongfully gave her a write-up for being disruptive and disrespectful to shelter staff as retaliation for the complainant submitting complaints. The complainant also alleged that shelter staff were not wearing ID badges and refused to identify themselves to the complainant.

Shelter Monitoring Committee staff visited Next Door in order to speak to shelter management about their investigation into the original complaint and to check if on-duty staff were wearing ID badges.

After speaking to shelter management about the initial investigation into the complaint and reviewing statements from the complainant and shelter staff, Committee staff have been unable to conclusively determine if the complainant was causing a disruption when she was given the write-up. The two Service Coordinators and the Shift Supervisor listed in the complaint all reported that the complainant was given the write-up after they witnessed her making disruptive and disrespectful comments, not to retaliate against her for filing complaints. However, the complainant denied these allegations and stated that she was respectful to shelter staff throughout the incident. Committee staff did not find any evidence that substantiated the allegation that staff were retaliating against the complainant, and as a result Committee staff could not determine if Next Door was in compliance with Standard 1.

Committee staff inspected the seven shelter staff that were on duty at the time of the investigation and found that all seven staff were wearing their ID badges. As a result, the site was found to be in compliance with Standard 25.

**Client #2**

**Alleged SOC violation:**

**Standard 1)** Treat clients equally, with respect and dignity, including in the application of shelter policies and grievance process

In the initial complaint, the complainant alleged that shelter staff were rude to her, that a shelter employee violated her confidentiality, that shelter staff were giving 90-day bed extensions to certain clients, that staff were not allowing her to use the ADA ramp to enter the site and that shelter staff were not fulfilling her reasonable accommodation request for extra linens.

Shelter Monitoring Committee staff visited Next Door to speak with Next Door’s site manager about their investigation into the original complaint. Committee staff also made an unannounced visit to Next Door that evening to check if the site was fulfilling the complainant’s reasonable accommodation request for extra blankets.

After speaking to shelter management and reviewing statements from the complainant and shelter staff, Committee staff were unable to conclusively determine if shelter staff were rude to the complainant, if a shelter employee had violated her confidentiality or if shelter staff were stopping her from using the ADA ramp to enter the site. Shelter staff denied ever speaking to the complainant using disrespectful language and stated that they only spoke to her about matters that weren’t confidential. Shelter management also denied the allegations that staff did not allow the complainant to use the ADA ramp and stated that all clients are able to use the ramp as long as they consent to a security check once they
enter the building. Committee staff could not find any evidence that substantiated these allegations, as a result could not determine if Next Door was in compliance with Standard 1.

Shelter staff also denied allegations that Next Door was providing clients with 90 day extensions for shelter beds. Committee staff reviewed HSH’s Reservation and Extension Policy and found that clients are given an initial 90 day reservation followed by a 30-day extension. Committee staff also found that the Reservation and Extension Policy states that clients can request an additional 30 day extension under certain circumstances, but could not find any evidences of shelter staff giving 90-day extensions for any shelter clients. As a result, Next Door was found to be in compliance with Standard 1.

Shelter management reported during the investigation that the complainant’s reasonable accommodation request had been approved and that the complainant was receiving extra blankets. Committee staff made an unannounced follow-up visit to Next Door that evening and verified that the complainant was being given an extra set of blankets. As a result, Next Door was found to be in compliance with Standard 1.

Total Client Complaints FY 2017-2018

<table>
<thead>
<tr>
<th>Site</th>
<th>Site Capacity</th>
<th>7/16</th>
<th>Total (17-18 FY)</th>
</tr>
</thead>
<tbody>
<tr>
<td>A Woman’s Place</td>
<td>11 mats</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>A Woman’s Place Drop In Center</td>
<td>63 chairs</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Bethel AME</td>
<td>30 mats</td>
<td>2</td>
<td>2</td>
</tr>
<tr>
<td>Compass</td>
<td>22 families</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>First Friendship</td>
<td>25 families</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Hamilton Emergency</td>
<td>46 beds, 8 cribs</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Hamilton Family</td>
<td>27 families</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>Hospitality House</td>
<td>30 beds/mats</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Interfaith Winter Shelter</td>
<td>60-100 mats depending on the site</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Jazzie’s Place</td>
<td>24 beds</td>
<td>0</td>
<td>0</td>
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<tr>
<td>Lark Inn</td>
<td>40 beds</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Mission Neighborhood Resource Ctr.</td>
<td>70 chairs</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>MSC South Shelter</td>
<td>340 beds</td>
<td>3</td>
<td>3</td>
</tr>
<tr>
<td>MSC South Drop In Center</td>
<td>75 chairs</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Next Door</td>
<td>334 beds</td>
<td>4</td>
<td>4</td>
</tr>
<tr>
<td>Providence</td>
<td>110 mats</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Sanctuary</td>
<td>200 beds</td>
<td>2</td>
<td>2</td>
</tr>
<tr>
<td>Santa Ana</td>
<td>28 beds</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Santa Marta/Maria</td>
<td>56 beds</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>St. Joseph’s</td>
<td>10 families</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>United Council</td>
<td>48 chairs</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>Single adult: 1203 beds/mats</strong></td>
<td><strong>12</strong></td>
<td><strong>12</strong></td>
</tr>
<tr>
<td></td>
<td><strong>Interfaith: 60-100 mats depending on the site</strong></td>
<td></td>
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<tr>
<td></td>
<td><strong>Resource Centers: 256 chairs</strong></td>
<td></td>
<td></td>
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<tr>
<td></td>
<td><strong>Family: 84 family rooms, 46 beds and 8 cribs</strong></td>
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</tbody>
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Committee Membership and Staff Update

Membership
The Committee currently has twelve members and there is one vacancy. Details of the vacant seat is as follows:

Local Homeless Coordinating Board
*Seat 1-Member shall be nominated by a non-profit providing advocacy or organizing to homeless people. Please attach a letter of support from the community agency nominating you for this seat.

Contact Jeff Simbe at 415-255-3647 or email jeff.simbe@sfdph.org if you are interested in applying.

2017 Meeting Calendar
- September 20
- October 18
- November 15
- December 20