

Shelter Monitoring Committee Annual Report July 1, 2017-June 30, 2018



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Foreword

This time next year, The Shelter Monitoring Committee will celebrate a decade and a half since its creation in 2004 by the Board of Supervisors. At its core, SMC's mission remains to recommend training, health and other safety protocols that guarantees all clients assessing shelter services, including our grievance processes, are treated equally, and with dignity, and respect.

Our 2018 report comes at a critical moment: Mayor London Breed has recently announced our city's plan to expand shelter beds by 1,000 by summer of 2020; and local community organizations continue to partner with the city to expand the Navigation Centers' model to serve additional clients. SMC's role will need a legislative clarity and its methodology revamped to ensure that it has the required capacity in terms of staffing and membership to discharge its mission.



As our 2018 report reveals, we continue to make remarkable progress with shelter providers to resolve shelter residents' complaints. What's worthy to note is that we have witnessed a three-year reduction of client complaints since my assumption to this office four years ago. Importantly, we have built a robust information sharing system with shelter providers, Department of Homelessness and Supportive Housing, and Department of Public Health to address our client's needs efficiently.

However, allegations of staff's misconduct and unprofessional behavior remain prevalent. John C. Maxwell was right: Everything rises and falls on leadership. This report should serve as a call on the conscience of shelter directors to provide a trans-formative leadership approach to diminish this trend.

My tenure as the Chair of SMC comes to a close in a year we observe the centennial commemoration of the end of the First World War and commemorate the 70th anniversary of the Universal Declaration of Human Rights. These two events calls us, on one hand, to follow the valor of those who fought for freedom and justice, and on the other, emulate the ethos of those who understood that the dignity of each one of us is premised on a simple, yet powerful idea: All human beings are born free and equal in dignity and rights.

The task of our generation is to ensure that this idea rings true for our shelter residents and staff, a task that we must endeavor to complete.

A handwritten signature in black ink, consisting of a large, stylized 'M' followed by several horizontal strokes and a small flourish at the end.

Mwangi Mukami, Chair

Executive Summary

The Shelter Monitoring Committee was established in 2004 to provide government agencies and the general public with comprehensive information about City-funded shelters, resource centers and any policies that may affect shelter operations or shelter clients. The Committee does so by monitoring whether shelter programs are in compliance with the 32 Standards of Care through site visits and the investigation of client complaints.

Site Visits

This year, the Committee was able to complete 117 site visits, 100% of the mandated total. The Committee saw compliance with Standards of Care improve overall as there were only 114 infractions noted during this year's site visits, 40 fewer than in the previous fiscal year. The 5 Standards that received the most site visit infractions this year were:

- **Standard 3** – Facilities must be clean, maintained and stocked with hygiene supplies
- **Standard 12** – Provide clients with sheets, blankets, pillows and a pillowcase
- **Standard 21** – Communicate with clients in their primary language or have access to professional translation services
- **Standard 25** – Require all staff to wear ID badges
- **Standard 8** – Sites must comply with ADA and provide clients with information on shelter rules and services

Out of those 5 Standards, 4 of them (Standards 3, 12, 21 and 25) were also in the Top 5 site visit infractions in 2016-2017 as well. Although the Standards that received the most infractions were mostly the same as last year, the actual number of infractions that each Standard received decreased with the exception of Standard 8, which stayed the same at 9 total infractions.

Client Complaints

The Committee received 174 complaints this year filed by 98 unduplicated clients, 46 fewer complaints than the Committee received last year. As has been the case for the past three years, clients submitted the most complaints alleging unprofessional behavior from staff (Standard 1) followed by complaints about unsafe shelter environments (Standard 2) and restroom issues (Standard 3). However, there were significant decreases in the number of complaints that were submitted about each of these Standards.

Committee staff completed investigation for 30 of the 174 complaints last year and were able to verify non-compliance with the Standards of Care in 8 of those cases.

**SHELTER MONITORING COMMITTEE
COMMITTEE MEMBERS | 2016-2018 Term**



Mwangi Mukami, Chair



Gary McCoy, Vice Chair



Loretta Gaines, Member



Lauren Kahn, Member



Traci Watson, Member



Gavin James, Member



Stephen Irwin, Member



Jonathan Adler, Member



Charlie Morimoto, Member

Photo Unavailable: Nicholas Kimura, Policy Subcommittee Chair

Introduction to the Committee

WHO WE ARE

The Shelter Monitoring Committee (The Committee) was established in 2004 to provide the Mayor, the Board of Supervisors, the Local Homeless Coordinating Board, the public and any other government agencies with comprehensive information about shelter conditions, operations and any City policies that affect shelter operations or shelter clients. The Committee is also responsible for monitoring shelters and resource centers to ensure that they are complying with the 32 Standards of Care (The Standards), which are a set of shelter operating standards that were adopted by the Board of Supervisors in 2008.

The Committee is comprised of 13 members who serve on a volunteer basis. 7 of the Committee's members are homeless or formerly homeless individuals, while the remaining 6 members are a mix of representatives from City agencies and other individuals with experience providing services to the homeless.

WHAT WE DO

The Committee monitors the conditions of shelters and resource centers and their compliance with the Standard of Care by conducting site visits and taking client complaints. The Committee also offers Standard of Care trainings for shelter staff.

HOW WE DO IT

Unannounced and Announced Site Visits

Committee members form teams and conduct site visits to all shelters and resource centers. The Committee conducts four unannounced visits per site per year to verify if sites are complying with the Standards of Care. Committee teams note and submit Standard of Care infractions to shelter management, who are given 7 days to investigate and resolve the infractions. In addition, the Committee also makes two announced site visits each year in order to survey shelter clients and to give them the opportunity to discuss shelter conditions with Committee members.

Investigation of Client complaints

Clients are able to submit complaints regarding their experiences at shelters and resource centers to Committee staff by email, phone or in person. Client complaints must contain allegations of shelters not complying with the Standards of Care. Complaints are submitted to shelter management, who have 7 days to investigate the allegations and respond to the complaint in writing. Clients have 45 days to inform staff whether or not they are satisfied with the site's response before the complaint is closed.

Clients who are not satisfied with the response can request that Committee staff conduct an independent investigation into their complaint. Committee staff investigates the client's allegations and determines if the site is in compliance with the Standards of Care. Committee staff summarizes their findings and submits them to the client, the site and the Department of Homelessness and Supportive Housing. Committee staff also submits recommendations for corrective action if the investigation determines that the site was not in compliance with the Standards of Care.

Shelter Programs Monitored by the Committee

The Shelter Monitoring Committee is tasked with monitoring shelters and resource centers that receive City funding for compliance with the Standards of Care. For the 2017-2018 fiscal year, the Committee monitored 11 single adult shelters, 5 family shelters and 4 reservation/resource/drop in centers. Please note that these sites do not represent every shelter in San Francisco, just those under the purview of the Committee. Together, these 20 sites provide services for over 1100 homeless individuals each and every night. Homeless clients can access services at three different types of shelters:



Next Door single adult shelter

Family shelters

There are five emergency family shelters being monitored by the Committee, many of which offer private rooms for individual families. The length of stay at family shelters varies from one night to six months depending on availability. These five family shelters can provide shelter for a total of 106 families at a time.

Single Adult shelters

There are 11 single adult shelters in San Francisco that provide temporary shelter for homeless adults over the age of 18: 10 year-round shelters and 1 seasonal shelter open during winter months. Clients are able to stay at these single-adult shelters for up to 90 days, though one night and weekend stays are also available. These 11 single adult shelters have a total capacity of 1203 year-round beds.



Hamilton Family Shelter private room



Staff station at MSC South Drop In

Resource centers and reservation stations

Homeless individuals are also able to access a variety of different services at reservation stations, resource centers and drop-in centers. Resource centers offer services on a drop-in basis and provide chairs for clients to sit in as well as access to services such as showers, laundry facilities, meals and snacks. Reservation stations allow clients to make shelter reservations at single-adult shelters as well as offering some of the amenities that are also available at resource centers. There are two resource centers/reservation stations, 1 reservation station and 1 drop-in center in San Francisco that can seat 256 clients at one time.

2017-2018 Facts and Figures

SITE VISITS

Completed 117 out of 117 site visits, 100% of mandated total

Sites with less than 2 infractions this year: Hamilton Emergency Shelter, Compass, Sanctuary, St. Joseph's

Sites with the most infractions this year:
Bethel AME and First Friendship, 13 infractions each

Top 5 Site Visit Infractions

21

infractions for insufficient hygiene supplies, unclean facilities or broken restroom amenities

16

infractions for insufficient bedding and linens

12

infractions for lack of translation services

9

infractions for ADA compliance and lack of required signage about shelter rules and services

9

infractions for staff not wearing ID badges

CLIENT COMPLAINTS

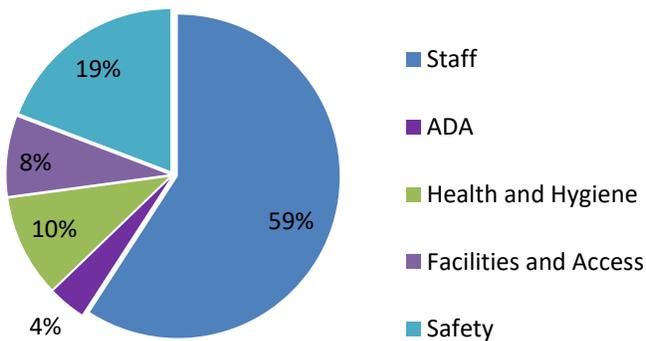
174 total complaints filed by

98 unduplicated clients

Sites with **0** client complaints: [Lark Inn](#) | [St. Joseph's](#) | Santa Marta/Maria

Most complaints this year: Next Door with **68** client complaints

Client Allegations



Status of Complaints

33 Satisfied

28 Not Satisfied

113 Closed

2017-2018

Year in Review



Accolades

Site Visits

There were 9 shelters performed exceptionally well on site visits this year and received 4 or fewer infractions. These 9 sites in order of least to most infractions were:

1. Hamilton Emergency Shelter (0 infractions)
2. Compass (1 infraction)
2. Sanctuary (1 infraction)
2. St. Joseph's (1 infraction)
5. Hamilton Family Shelter (2 infractions)
5. Mission Neighborhood Resource Center (2 infractions)
7. Santa Ana (2 infractions)
7. MSC South Drop In (3 infractions)



Needs Improvement

Site Visits

Bethel AME and the First Friendship family shelter received the most site visit infractions this year with 13 infractions each. A significant portion of these infractions are related to Standard 12, which requires that shelter clients receive blankets, sheets, pillows and pillowcases. Because both of these sites are emergency shelters, they do not have the facilities to launder sheets on site. As a result, both sites provide clients with an extra blanket that can be used as a set of sheets. The Shelter Monitoring Committee is also recommending that the Standards of Care legislation be changed to allow emergency shelters to provide extra blankets instead of a pair of sheets.

Client Complaints

10 shelters received fewer than 4 total client complaints this year. These 10 sites in order of least to most complaints were:

1. Lark Inn (0 complaints)
1. St. Joseph's Family Shelter (0 complaints)
3. Hamilton Family Shelter (1 complaints)
3. Interfaith Winter Shelter (1 complaints)
3. United Council (1 complaints)
6. Compass Family Shelter (2 complaints)
6. Santa Marta/Maria/Jazzie's (2 complaints)
8. Santa Ana (3 complaints)
8. Hamilton Emergency Shelter (3 complaints)
10. Mission Neighborhood Resource Center (4 complaints)

Client Complaints

The site that received the most client complaints this year was Next Door with 68 total complaints. When compared to the previous fiscal year, Next Door actually had 55 fewer complaints than they did in the previous fiscal year, reduction of 44% (FY16-17: 123 client complaints).

Out of the 68 complaints submitted about Next Door last year, clients requested a Committee investigation for 9 of those complaints due to unsatisfactory responses from the site. Committee staff investigated each of those complaints and verified non-compliance with the Standards of Care in 3 of those cases. The Committee will continue to monitor client complaints about Next Door and will notify management of any trends or reoccurring complaints.

Comparison to 2016-2017

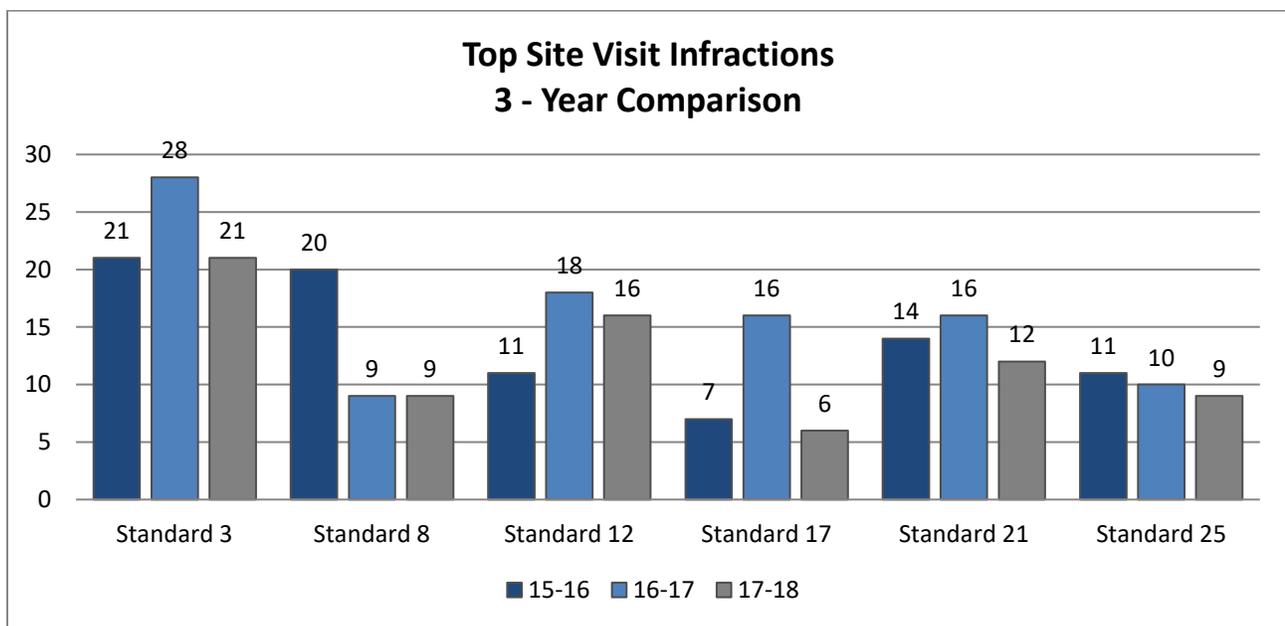
The Committee focused on three main areas when reviewing how San Francisco’s shelter system is performing when compared to last year:

- Conditions inside shelters
- Treatment and Personal Experience of Shelter Clients
- Adequacy of Policies

By reviewing each of these subject areas, the Committee is able to have a more comprehensive understanding of how San Francisco’s shelter system is performing.

Conditions inside shelters

Committee teams monitor conditions inside shelters and note Standard of Care infractions during quarterly site visits. The Committee noted 114 total site visit infractions this year, 40 fewer than the year before¹. The table below provides an overview of which specific Standards received the most infractions from site visits over the past three years:



Four of the five Standards that received the most site visit infractions remained the same as last year, which indicates a need for shelters to improve in those areas. Those four Standards were:

- Standard 3: Facilities must be clean, maintained and stocked with hygiene supplies
- Standard 12: Provide clients with sheets, blankets, pillows and a pillowcase
- Standard 21: Communicate with clients in their primary language or have access to professional translation services

¹ FY15-16: 164 infractions, FY16-17: 154 infractions, FY17-18: 114 infractions

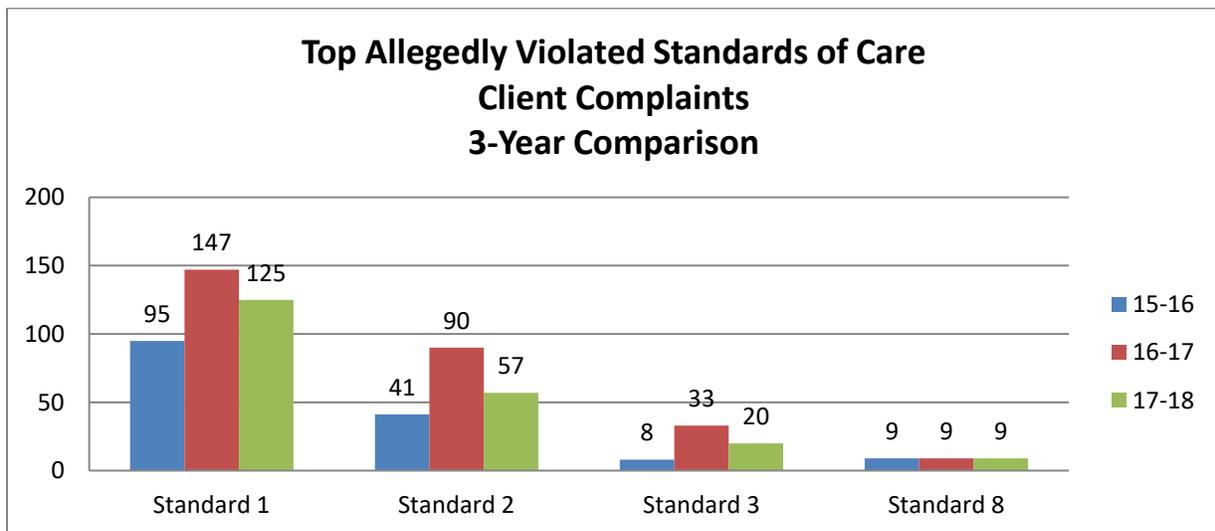
- Standard 25: Require all shelter staff to wear ID badges

The number of infractions the Committee noted for all four of those Standards decreased when compared to last year, which indicates that more sites are complying with those Standards than the year before.

Although Standard 17 received the third most infractions of any Standard last year, the Committee only noted 6 instances of non-compliance this year. This indicates that shelters have improved their compliance with this Standard, which requires that shelters post signage noting the status of repairs whenever there is a maintenance issue.

Treatment and Personal Experience of Shelter Clients

The Committee monitors client complaints to gather information on the treatment and personal experience of shelter clients. The Committee received 174 complaints submitted by 98 shelter clients this year (out over 1100 individual clients served by San Francisco’s shelter system every night). This represents a 20.9% decrease in complaints and a 26.9% decrease in the number of clients filing complaints compared to last year.² The table below shows which Standards clients submitted the most complaints about over the past three years:



(Please note that each complaint can contain allegations non-compliance with multiple Standards of Care)

As has been the case for the past three years, clients submitted the most complaints about unprofessional behavior from staff (Standard 1) followed by complaints about unsafe shelter environments (Standard 2) and restroom issues (Standard 3). However, there were significant decreases in the number of complaints that were submitted about each of these Standards.

² FY15-16: 121 complaints, 96 clients; FY16-17: 219 complaints, 133 clients; FY17-18: 174 complaints, 98 clients

Adequacy of Policies

The Committee is also responsible for reviewing City policies that can impact shelter clients in addition to monitoring shelter conditions and the personal treatment of shelter clients. On August 22, 2017, the Committee wrote a letter to the Department of Homelessness and Supportive Housing (HSH) asking for clarification on the implementation and monitoring of the Standards of Care at the Navigation Centers. In the response to that letter, HSH indicated that they were interested in working together to expand the scope of the Committee's work to include monitoring of the Navigation Centers.

Since then, the Shelter Monitoring Committee's Policy Subcommittee has been working with HSH staff to identify which of the Standards of Care could be applied to the unique program models of the Navigation Centers. The Policy Subcommittee reviewed the 32 Standards of Care and identified which Standards that they recommended to be monitored for compliance at the Navigation Centers. Those Standards have been approved by the Shelter Monitoring Committee and were provided to HSH for review.

The Committee also approved a set of recommended edits to HSH's Domestic Violence and Imminent Danger policy this year. The Domestic Violence/Imminent Danger policy dictates how shelter staff should address incidents of domestic violence that occur inside family shelters. The Shelter Client Advocates brought a set of recommended changes for the policy to the Shelter Monitoring Committee to review. These changes were approved by the Shelter Monitoring Committee and have also been sent to HSH for consideration.

I. Site Visits

The Shelter Monitoring Committee completed 117 out of 117 site visits, or 100% of the mandated total for the fiscal year. Although the Committee completed 8 more visits than they did in 2016-2017, there were only 114 total infractions noted this year, 40 fewer than the previous year.

The five Standards that shelters had the most difficulty meeting this year were:



Standard 3 (Health and Hygiene)

21 infractions: A Woman's Place, A Woman's Place Drop In, Bethel AME, Compass, First Friendship, Hamilton Family, Interfaith Winter Shelter, Mission Neighborhood Resource Center, MSC South, MSC South Drop In, Next Door, Providence, Santa Ana, Santa Marta/Maria/Jazzie's Place, United Council



Standard 12 (Facilities and Access)

16 infractions: Bethel AME, First Friendship, Interfaith Winter Shelter, Lark Inn, MSC South, Next Door, Providence, Santa Marta/Maria/Jazzie's Place



Standard 21 (Facilities and Access)

12 infractions: Bethel AME, First Friendship, Providence, United Council



Standard 8 (ADA)

9 infractions: A Woman's Place, Sanctuary, Interfaith Winter Shelter, Hospitality House, MSC South



Standard 25 (Staff)

9 infractions: A Woman's Place Drop In, A Woman's Place, Interfaith Winter Shelter, Lark Inn, MSC South, Santa Marta/Maria/Jazzie's Place

Explanation of Infractions

Standard 3: Shelter cleanliness and availability of hygiene supplies



21 infractions: With 21 infractions this year, Standard 3 continues to receive the most infractions out of any Standard. Standard 3 requires that shelters provide soap and paper towels/hand dryers inside restrooms, toilet paper in each individual bathroom stall and for restrooms to be cleaned at least once per day. Sites received Standard 3 infractions if one of the required items were missing or if the restroom facilities needed additional cleaning. The majority of Standard 3 infractions were due to programs needing to restock required hygiene supplies.

Standard 12: Providing required bedding and linens



16 infractions: Sites received Standard 12 infractions if they did not provide all clients with required linens: 2 sets of sheets, 1 blanket, 1 pillow and 1 pillowcase. 10 of the 12 infractions were noted at emergency shelters who do not have the capability to launder sheets on-site and provide an extra blanket to clients instead of sheets. The Committee approved a set of recommended changes to the Standards of Care legislation that will allow emergency shelters to provide two blankets to clients instead of sheets. These recommended changes have been submitted to the Board of Supervisors for consideration.

Standard 21: Provide professional translation services



12 infractions: Standard 21 requires that shelters communicate with clients in their primary language or have access to professional translation services. Three of the sites that received Standard 21 infractions (Bethel AME, Providence, First Friendship) have access to translators that are proficient in Spanish, Mandarin, Cantonese, and Tagalog but do not offer translation services in other languages.

Standard 8: ADA compliance and providing shelter information



9 infractions: Standard 8 requires that shelters provide services in compliance with the Americans with Disabilities Act and provide information to clients on shelter rules and services (such as reasonable accommodations, case management, laundry services, etc.) in English and Spanish. Shelters received Standard 8 infractions when required information on ADA access and shelter services were not posted in English and Spanish.



Standard 25: All staff must wear ID badges

9 infractions: Sites received Standard 25 infractions if Committee members observed any on-duty shelter staff not wearing an ID badge during a site visit.

II. Client Complaints

The Committee received 174 Standard of Care complaints filed by 98 unduplicated clients this year (out of over 1100 shelter clients served every night). This represents a 20.9% decrease in the number of complaints and a 26.9% decrease in the number of unduplicated clients filing complaints when compared to the previous fiscal year.³

Client Complaints – Top 3 Allegedly Violated Standards

Standard of Care	Category	# of complaints alleging violations of this Standard	# of unduplicated complainants submitting complaints	# sites receiving complaints about this Standard
Standard 1: Treat clients equally, with respect and dignity, including in the application of shelter policies and grievance process	Staff 	125	76	15
Standard 2: Provide shelter services in an environment that is safe and free from physical violence; by ensuring safety protocols are in place that include training to shelter staff regarding de-escalation techniques	Staff 	57	37	12
Standard 3: Provide...soap...paper/hand towels...hand sanitizers...and hire janitors staff to clean shelters on a daily basis	Health and Hygiene 	20	15	6

Please note that each complaint can include alleged violations of more than one Standard or multiple alleged violations of the same Standard.

³ 2016-2017: 220 total complaints submitted by 134 unduplicated clients

Client Complaint Investigations

There were 30 investigations conducted this year resulting from site responses that were not satisfactory for the complainants. There are four categories for Investigation results:

In Compliance – Committee staff found sufficient evidence to determine that the site is in full compliance with the Standards of Care that were listed in the original client complaint.

Not in Compliance – Committee staff found sufficient evidence to determine that the site was not fully complying with the Standards of Care and recommended corrective action.

Inconclusive – Committee staff were unable to find sufficient evidence to conclusively determine if the site was or was not fully complying with the Standards of Care listed in the original client complaint.

Split – The original complaint contained multiple allegations that the site was not complying with the Standards of Care. The Split category indicates that Committee staff determined that the investigation results differed depending on each individual allegation.

2017-2018 Investigation Results

Site	Investigations	Findings	Split Investigation Findings
A Woman’s Place Drop In	1	Inconclusive (1)	N/A
Bethel AME	4	Out of Compliance (1) Inconclusive (2) Split (1)	Investigation #1: Standard 1: Inconclusive Standard 2: Out of Compliance
First Friendship	2	Out of Compliance (2)	
Mission Neighborhood Resource Center	2	Split (1) Inconclusive (1)	Investigation #2: Standard 1: Inconclusive Standard 16: In Compliance
MSC South	6	Inconclusive (4) Out of Compliance (1) Split (1)	Investigation #3: Standard 1: Inconclusive Standard 9: In Compliance
MSC South Drop In	1	Inconclusive (1)	N/A
Next Door	9	In Compliance: (2) Out of Compliance: (2) Inconclusive: (4) Split: (1)	Investigation #4: Standard 3: Inconclusive Standard 17: Out of Compliance
Sanctuary	5	In Compliance (1) Inconclusive (4)	N/A
Total:	30	In Compliance: 3 Out of Compliance: 6 Inconclusive: 17 Split: 4	Total Split Investigations: 4

Investigation Highlight:

Clients who are not satisfied with the shelter's response to their complaint can request that the Committee conduct an investigation. At the conclusion of the investigation, there is a determination on whether or not the site is in compliance with the Standards of Care. If the investigation determines that the site was out of compliance, Committee staff will offer technical assistance to assist the program to meet the Standards of Care.

A client staying at Next Door shelter filed a complaint alleging that the wall dividers in the client sleeping areas were covered dust and debris. Next Door responded by stating that they would clean the divider tops but that they had some challenges. Specifically, due to employee union rules cleaning divider tops was a task that could only be completed by maintenance staff or the assigned City Engineer. Committee staff made two visits to Next Door during the investigation: Once to meet with shelter management to discuss the issue and to examine the facility and the second time to check on the status of cleaning. By the time of the second visit, Committee staff confirmed that all divider tops had been cleaned and were free of lint, dust and debris.

At the end of the investigation, Next Door management informed Committee staff that moving forward, they would schedule monthly inspections and quarterly cleanings of the divider tops. The Committee has also continued monitoring on the cleanliness of the divider tops on subsequent site visits. The Committee has not received any complaints about the cleanliness of the dividers tops or noted any dust and debris on the divider tops since the completion of the investigation.



Appendices

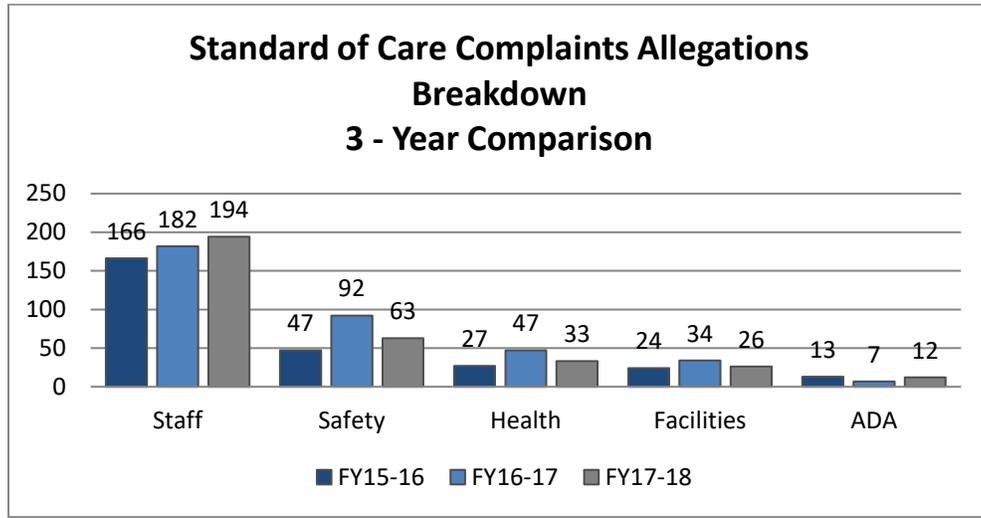
Standards of Care	Type of Standard
1. Treat clients equally, with respect and dignity, including in the application of shelter policies and grievance process	STAFF
2. Provide shelter services in an environment that is safe and free of physical violence; by ensuring safety protocols are in place that include training to shelter staff regarding de-escalation techniques	STAFF
3. Provide, liquid soap with a dispenser permanently mounted on the wall in the restrooms; small individual packets of liquid soap, or small bar soap for use by one individual only, paper/hand towels, hand sanitizers, at least one bath-size (24"x48") towel to shelter clients and staff in each bathroom; if hand-dryers are currently installed they shall be maintained in proper working condition; in addition, shelters shall provide toilet paper in each bathroom stall and hire janitorial staff clean shelters on daily basis	HEALTH
4. Provide feminine hygiene and incontinence supplies	HEALTH
5. Comply with current City policy set forth in the San Francisco Environment Code, including the requirements set forth in Chapter 3 (the Integrated Pest Management Code) and Chapter 2 (the Environmentally Preferable Purchasing Ordinance) to ensure that shelter operators use products that are least harmful to shelter clients, staff, and the environment	HEALTH
6. Ensure that first aid kits, CPR masks, and disposable gloves are available to staff at all times and make Automatic External Defibrillators (AED) available to staff in compliance with all regulatory requirements of state and local law relating to the use and maintenance of AEDs.	HEALTH
7. Supply shelter clients with fresh cold or room temperature drinking water at all times during normal operating hours	HEALTH
8. Provide shelter services in compliance with the Americans with Disabilities Act (ADA), including but not limited to: (i) appropriate and secure storage of medication, (ii) the provision of accessible sleeping, bathing and toileting facilities in previously designated as accessible shall comply with federal and state law requiring a minimum of 36 inches between sleeping units and sleeping surface height between 17-19 inches above the finished floor. In consultation with the contracting City department, and based on a history of previous usage, shelter operators shall designate an adequate number of accessible sleeping units to meet the needs of shelter clients requiring such facilities due to a mobility disability; and (iii) reasonable modifications to shelter policies, practices, and procedures; (iv) In addition, shelters shall provide orientation to new shelter clients that includes information on shelter rules and how to access case management services, and shall ensure case management services go to those shelter clients most in need of case management services. This information shall be made accessible to shelter clients with disabilities through the use of appropriate auxiliary aid and/or services, such as large print for clients with visual impairments or ASL interpreting for Deaf clients. The City shall provide equal access to shelter clients with disabilities without regard to whether they accept auxiliary aids.	ADA
9. Engage a nutritionist, who shall develop all meal plans, including meal plans for children and pregnant women; and post menus on a daily basis.	HEALTH
10. Make dietary modifications to accommodate request from clients based on religious beliefs and practices; health or disability reasons	HEALTH
11. Comply with Article 19F of the San Francisco Health Code that prohibits smoking in homeless shelters.	HEALTH
12. Provide shelter clients with one clean blanket, two clean sheets, and one pillow enclosed in a plastic or vinyl sleeve with a clean pillowcase; sheets shall be cleaned at least once per week and upon client turnover	FACILITY

13.	Make the shelter facility available to shelter clients for sleeping at least 8 hours per night	HEALTH
14.	Provide daytime access to beds in all 24-hour shelters	FACILITY
15.	Provide shelter clients with pest-free, secure property storage inside each shelter. Shelter staff shall provide closable bags to clients for storage purposes. If storage inside a shelter is unavailable, the shelter operator may provide free, pest-free storage off-site as long as the off-site storage is available to the shelter client up until the time of evening bed check	FACILITY
16.	Provide shelter clients with access to electricity for charging cell phones; and other durable medical equipment for clients with disabilities	FACILITY
17.	Note in writing and post in a common areas in the shelter when a maintenance problem will be repaired and note the status of the repairs	FACILITY
18.	Provide access to free local calls during non-sleeping hours; including TTY access and amplified phones for clients who are deaf and hearing-impaired	FACILITY
19.	Provide a minimum of 22 inches between the sides of sleeping units, excluding the designated ADA-accessible sleeping units and sleeping units separated by a wall	HEALTH
20.	Provide all printed materials produced by the City and shelters in English and Spanish and other languages upon and ensure that all written communications are provided to clients with sensory disabilities in alternate formats such as large print, Braille, etc., upon request	FACILITY
21.	Communicate with each client in the client's primary language or provide professional translation services; including but not limited to American Sign Language interpretation; however, children or other clients may be asked to translate in emergency situations	FACILITY
22.	Provide at least one front line staff at each site that is bilingual in English and Spanish	FACILITY
23.	Ensure that each shelter has an emergency disaster plan that requires drills on a monthly basis and that, in consultation with the Mayor's Office on Disability, includes specific evacuation devices and procedures for people with disabilities	FACILITY
24.	Locate alternate sleeping unit for a client who has been immediately denies services after 5:00 PM, unless the denial was for acts or threats of violence	FACILITY
25.	Require all staff to wear a badge that identifies the staff person by name and position badges	STAFF
26.	Ensure all clients receive appropriate and ADA-compliant transportation to attend medical, permanent housing, substance abuse treatment, job-search, job interview, mental health, shelter services (etc)	FACILITY
27.	Provide public notification at least 24 hours in advance of on-site, community meetings	FACILITY
28.	Provide clients with access to free laundry services with hot water and dryer that reaches a temperature between 120-130 degrees Fahrenheit, on or off site	FACILITY
29.	To the extent not inconsistent with Proposition N, passed by the voters on November 5, 2002, ensure all single adult shelter reservations be for a minimum of 7 nights.	FACILITY
30.	Agree to comply with the California Department of Industrial Relations, Division of Occupational Safety and Health (Cal-OSHA) General Industry regarding Blood borne Pathogens (8 CCR 5193) and its injury and illness Prevention Program (8CCR 3203), including but not limited to applicable requirements regarding personal protective equipment, universal precautions, and the development of an exposure control plan, as defined therein,	HEALTH
31.	Annual all-staff mandatory trainings: (1) hand washing requirements and other communicable disease prevention; (2) proper food handling and storage; (3) emergency procedures in case of disaster, fire, or other urgent health or safety risk, including but not limited to CPR requirements; (4) safe and appropriate intervention with violent or aggressive shelter clients, including training on the harm reduction model in dealing with substance abuse; (5) safe and appropriate interaction with shelter clients who suffer from mental illness or substance abuse; (6) On-the-job burn-out	STAFF

<p>prevention; (7) requirements under the ADA, in collaboration with the Mayor’s Office on Disability and the City Attorney’s Office; (8) policies and procedures explained in shelter training manuals; (9) cultural humility, including sensitivity training regarding homelessness, the lesbian, bisexual, gay, and transgender communities, people with visible and invisible disabilities, youth, women, and trauma victims.</p>	
<p>32. Maximize the space for sleeping in the shelter to the fullest extent possible.</p>	<p>FACILITY</p>

Standard of Care Complaints Tally Per Site 2017-2018

Site	Capacity	# of Complainants	# of Complaints filed	Status of Complaints	Investigations
A Woman's Place	11 mats	1	1	Closed (1)	N/A
A Woman's Place Drop In	63 chairs	4	4	Not Satisfied (1) Closed (3)	Completed (1)
Bethel AME	30 mats	14	21	Satisfied (3) Not Satisfied (4) Closed (14)	Completed (4)
Compass	22 families	1	2	Satisfied (1) Closed (1)	N/A
First Friendship	25 families	5	5	Satisfied (1) Closed (4)	Completed (2)
Hamilton Emergency Shelter	22 families	3	3	Closed (3)	N/A
Hamilton Family Shelter	27 families	1	1	Closed (1)	N/A
Hospitality House	30 beds/mats	0	0	N/A	N/A
Interfaith Winter Shelter (Open from Nov. through Feb.)	60-100 mats depending on the site	1	1	Closed (1)	N/A
Jazzie's Place	24 beds	1	1	Closed (1)	N/A
Lark Inn	40 beds	0	0	N/A	N/A
MSC South Drop In	70 chairs	2	2	Closed (1) Not Satisfied (1)	Completed (1)
MSC South Shelter	340 beds	20	24	Closed (17) Not Satisfied (7)	Completed (7)
MNRC	75 chairs	4	4	Closed (2) Not Satisfied (2)	Completed (2)
Next Door	334 beds	28	68	Satisfied (21) Not Satisfied (9) Closed (38)	Completed (9)
Providence	110 mats	3	3	Satisfied (1) Closed (2)	N/A
Sanctuary	200 beds	22	30	Satisfied (6) Not Satisfied (4) Closed (20)	Completed (4)
Santa Ana	28 beds	3	3	Closed (3)	N/A
Santa Marta/Santa Maria	56 beds	0	0	N/A	N/A
St. Joseph's	10 families	0	0	N/A	N/A
United Council	48 chairs	1	1	Closed (1)	N/A
Totals	Single adult: 1203 beds/mats Interfaith: 60-100 mats Resource Centers: 256 chairs Family: 106 families	114	174	Satisfied (33), Not Satisfied (28), Closed (113)	Completed (30)



Total allegations: FY17-18: 343, FY16-17: 362, FY15-16: 277

The *Standard of Care Complaint Allegations Breakdown* chart provides an overview of the types of complaints that were filed with the Committee over the past two fiscal years. There are four Standard of Care complaint categories:

Staff 

The staff category refers to three Standards (1, 25 & 31) that focus on how the client is treated at the site. This category includes complaints alleging staff being unprofessional, not applying shelter policies equally to all clients and not receiving required trainings.

Safety 

This category refers to Standard 2, which requires that shelter services be provided in environment that is safe and free from physical violence.

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, shelter cleanliness and stocked first aid kits. The 11 Standards include Standards 3, 4, 5, 6, 7, 9, 10, 11, 13, 19, and 30.

Facility & Access 

The sixteen Standards in this category focus on whether shelter facilities are accessible and providing clients with items and services such as property storage, bedding and transportation. 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.

Programs Monitored by the Shelter Monitoring Committee

Program Name	Program Type	Population Served	Client Capacity	Hours of Operation	Address
A Woman's Place	Single Adult Shelter	Women only	11 mats	4:30 PM – 8:00 AM	1049 Howard St.
A Woman's Place Drop In	Drop-In	Women, children, and fathers accompanied by women and children	63 chairs	24-hours	211 13 th St.
Bethel AME	Single Adult Shelter	Women only	30 mats	6:00 PM – 7:00 AM	916 Laguna St.
Compass	Family Shelter	Families	22 families	24-hours	626 Polk St.
First Friendship	Family Shelter	Families	25 families	3:00 PM – 7:00 AM	501 Steiner St.
Hamilton Emergency Shelter	Family Shelter	Families	46 beds	24-hours	260 Golden Gate
Hamilton Family Shelter	Family Shelter	Families	27 families	24-hours	260 Golden Gate
Hospitality House	Single Adult Shelter	Men only	30 beds and mats	4:00 PM - 8:00 AM (weekdays), 24-hours (weekends)	146 Leavenworth
Interfaith Winter Shelter	Single Adult Shelter (seasonal winter shelter)	Men only	Varies depending on the site (60-100 mats)	Seasonal Winter Shelter open from Nov. through Feb.	Varies depending on the site
Lark Inn	Single Adult Shelter	Young Adult Women and Men (18-24)	40 beds	24-hours	869 Ellis St.
MSC South Drop In	Reservation Station	Women and Men	70 chairs	24-hours	525 5 th St.
MSC South Shelter	Single Adult Shelter	Women and Men	340 beds	24-hours	525 5 th St.
MNRC	Resource Center and Reservation Station	Women and Men	75 chairs	Monday – Friday: 7:00 AM – 12:00 Noon, 2:00 PM – 7:00 PM. Thursdays: Open until 8:00 PM Saturday: 7:00 AM – 12 Noon	165 Capp St.
Next Door	Single Adult Shelter	Women and Men	334 beds	24-hours	1001 Polk St.
Providence	Single Adult Shelter	Women and Men	110 mats	10:00 PM - 7:00 AM	1601 McKinnon Ave.
Sanctuary	Single Adult Shelter	Women and Men	200 beds	24-hours	201 Eighth St.
Santa Ana	Single Adult Shelter	Men only	28 beds	7:00 PM – 6:45 AM	2909 24 th St.
Santa Marta/Santa Maria/Jazzie's Place	Single Adult Shelter	Men, Women and Gender Non-Conforming	56 bunk beds (Santa Marta/Maria) 24 beds (Jazzie's Place)	7:00 PM – 6:45 AM	1050 S. Van Ness
St. Joseph's	Family Shelter	Families	10 families	24-hours	899 Guerrero
United Council	Resource Center and Reservation Station	Women and Men	48 chairs	7:00 AM – 9:00 AM 7:00 PM to 9:00 PM	2111 Jennings St.