



Shelter Monitoring Committee

MEMORANDUM

TO: Shelter Monitoring Committee
FROM: Committee Staff
DATE: June 15, 2026
RE: April & May 2026 Staff SOC Report

Client Complaints

Ten formal SMC complaints were submitted to City shelters in April and eight in May 2026.

****Note: SMC receives Standard of Care complaints each month that do not end up being submitted in writing, either because they were resolved informally or the client did not provide basic necessary details. Narratives provide an overview of the types of complaints forwarded to each site. Not all sites have had a chance to respond to the complaints. Complaints may have already been investigated to the satisfaction of the site or its contracting agency; however, the Committee must allow each complainant to review the response, and the complainant determines whether s/he is satisfied. If the complainant is not satisfied, the Committee will investigate the allegations listed in the complaint.*

Ansonia (98)

Submitted to SMC: 4/2/26 Sent to shelter: 4/6/26 SMC received response: 4/22/26
Standards of Care (SOC) Allegedly Violated: 1, 30

Allegation 1 (SOC 1, 30)

- The complainant reported that he and his partner attempted to enter the shelter carrying pizza and soda. Five Keys staff confronted them and stated that “if [they] took food to [their] room, they would be DOS’d.” They did as they were instructed (e.g., they ate in the kitchen), but the way the rules were enforced amounted to “systematic humiliation.” Multiple staffers were present and witnessed this interaction. Rather than treating this as a straightforward policy matter, these staff members appeared to revel in the guests’ distress. The humiliation seemed deliberate and perhaps condoned by facility management. The complainant’s wife was particularly distressed. And they subsequently felt they had to eat breakfast outside, out of fear of having another confrontation with staff.
- *The shelter apologized for the distress and frustration experienced. The situation described was concerning and “does not reflect the standards of professionalism, dignity, and respect” expected. As for furniture, a memo had outlined requirements for all rooms to be brought into compliance with existing policy, including the removal of unauthorized items. While enforcement was initially scheduled to begin on April 15, the deadline was extended following a town hall meeting on April 13, giving residents additional time. Cleaning and downsizing efforts officially began on April 20, 2026, and were applied uniformly to all rooms to ensure safety and compliance. Glass furniture, including desks, is not permitted on site due to safety concerns. Staff were instructed to address these items consistently across all units. Regarding the report of a staff member allegedly making a threatening statement, this is taken very seriously. The shelter promised to initiate a prompt review to determine what occurred and whether staff conduct met organizational standards. Threatening language is not acceptable under any circumstances, and they stated that appropriate action would be taken based on their findings.*

Allegation 2 (SOC 1)

- The complainant and his wife had just the day before filed grievances regarding the facility transition to a new operator, and associated policy and procedural failures. The complainants see staff behavior as retaliation for their daring to speak up.
- *The shelter reports they found no evidence of retaliation connected to the client's prior grievances. They believe actions taken by staff have been in alignment with site-wide policy enforcement efforts.*

Allegation 3 (SOC 1)

- The complainant says the transition from Urban Alchemy to Five Keys was poorly handled. For example, the internet was down for days (causing the client to miss an important deadline. Communication has been very bad. For example, a letter entitled "Community Expectations & Policy Updates" ends with "Five Keys staff are available to answer questions/clarification," but provides no option to voice concerns or contest policies that have been changed and are being enforced without notice or advance communication.
- *The shelter also acknowledged the broader concerns raised regarding transition management, resident rights, privacy expectations, and access to essential services such as internet connectivity.*

Allegation 4 (SOCs 1, 30)

- The client submitted an internal grievance and there was no timely response to this. He felt disrespected by this and by rules being changed without a reasonable heads up.
- *The shelter manager asked for patience as the team had only been on-site for a few days and was in the early stages of transition and operational setup. At the same time, they recognized that this did not justify the manner in which the situation was handled or how it made you feel. They thanked the complainant for his feedback.*

Ansonia (101)

Submitted to SMC: 3/30/26 Sent to shelter: 4/6/26 SMC received response: Did not respond*
Standards of Care (SOC) Allegedly Violated: 1, 8

Allegation 1 (SOC 1, 13)

- According to complainant, she was granted an ADA Reasonable Accommodation of a single room. The provider was changing, so she requested a copy of the approval to ensure a clean transition and continuity of care. This was not forthcoming. She was avoided and treated with disrespect (even "screamed on"). She alleges she was told by a supervisor that she would receive the proof in mid-February at a group meeting of residents from the 5th floor. Several weeks later, when she had still not received this, she requested it from the manager, who told her she would provide it. Later she asked a care coordinator who said they would get in contact with Kim to get the paperwork. Still waiting, she went back to the manager who told her she had "simply forgotten to get it from [the supervisor]." Finally, she sent management a written request for proof of an ADA or Reasonable Accommodation. When she saw her, the manager "verbally attacked and dismissed" her request. She was "mean and totally unprofessional." She believes the shelter was "playing games" with her.
- **The shelter did not respond. They were under new management who stated they were not in a position to assess the complaint that had arisen under their predecessors.*

Ansonia (102)

Submitted to SMC: 4/5/26 Sent to shelter: 4/7/26 SMC received response: 4/9/26

Standards of Care (SOC) Allegedly Violated: 1, 8

Allegation 1 (SOC 1, 8)

- The client said she had longstanding reasonable accommodations, including for a single room and food preparation; but ensuring that the new site manager (Five Keys) honors these was very difficult. New rules were set to be enforced beginning April 15. The complainant stated that HSH's ADA Coordinator assured her that in the meantime she could buy her special food and he would ask staff to allow her to store this in her refrigerator. However, an employee who has been "harassing her" insulted her and "put [her] out of the building." He screamed at her, was "verbally degrading," and "physically intimidating." Some other staffers seemed offended that she might challenge them over this issue, and "took it personally." Others were more reasonable and agreed it was acceptable for her to sit on the couch in the lobby while waiting for HSH to return her call. But a supervisor intervened and made her leave the building. "He was mean, cold, and punitive." She sees in this inequitable treatment and that she has seen other clients with special food-related needs still being accommodated. She was eventually informed by the ADA Coordinator that staff would store her food in a refrigerator on premises. Unfortunately, the same supervisor was still on duty and he left her perishable items sitting at the front desk. When she came down the next morning and asked for her bags they were missing. The site denied accommodations without going through the interactive process.
- *The shelter responded that they understood the situation was frustrating and stressful, particularly as it relates to dietary needs and previously understood accommodations. "Consistency and clear communication are especially important during a transition between service providers, and we acknowledge the impact this experience has had." The manager said that on 4/2, she met with the complainant regarding the storage of food. There was no documentation of this accommodation on file so the client was invited to engage in the ADA interactive process; however, a requested form was not completed. On 4/3/2026, she encountered the guest entering the site with several grocery bags and reminded her of the rules and again encouraged her to follow up with the reasonable accommodation process. Recognizing the immediate concern regarding the client's groceries, staff agreed to store the food in the office for up to seven days. Unfortunately, during a shift change, there was a delay in locating the groceries; however, staff were able to identify their location and communicated this promptly. When she came to the office, she appeared relieved and indicated she would return to retrieve the groceries and remove them off site. (She did not in fact return.)*

They also want to acknowledge the complainant's concerns about staff interactions. While they did not substantiate claims of staff acting in a verbally abusive or physically intimidating manner, they were willing to commit to keep reinforcing expectations with staff. They expressed a sincere desire to work on determining appropriate accommodations. Staff are available to assist with this process at any time and want the claimant to feel heard, respected, and supported while at the same time upholding policies designed to maintain a safe and equitable environment for everyone.

Ansonia (108)

Submitted to SMC: 4/26/26 Sent to shelter: 4/28/26 SMC received response: 4/29/26

Standards of Care (SOC) Allegedly Violated: 1, 13, 18

Allegation 1 (SOCs 1, 13, 18)

- The client says that while she was asleep a shelter employee “reached under [her] blanket to touch [her] as she performed a bed check.” This was the second time this had happened. The first was around April 3 when “a supervisor was called to wake [her] up at 4 a.m.” She had been asleep and heard what sounded like fighting in the room next door and did not notice someone was in her room until they shook her. They seemed concerned she might “be dead,” and claimed they had reports of her screaming. She has trouble sleeping and therefore tries to nap in the day, because at night on 5th floor the hallway is frequently filled with staff taking noisy breaks. She regularly hears and sees three employees, who “whoop and holler” right near her door, their walky-talkies “chirping and squawking.”
- *The shelter pointed out that policy permits wellness checks when there is a reasonable concern for a resident’s safety. Be this as it may, such checks must be conducted in a manner that respects personal boundaries and minimizes disruption whenever possible. They committed to reviewing staff practices, including training on appropriate wellness check procedures, to ensure they align with SOC requirements regarding respect and sleep. Regarding concerns about noise levels, they acknowledged that excessive noise can disrupt residents’ ability to rest and said they would remind staff of related expectations, particularly in residential areas.*

Allegation 2 (SOC 1)

- The complainant worries staff “are looking for reasons to kick [her] out.” They threaten to write her up for things other people do such as walking in the hallway—once even when she merely asked for help finding her door stopper. Staff rudely laugh at her startled response to being awakened. And she was sternly rebuked for yelling “You Are Not Allowed To Touch Me!” Also, she overheard a supervisor tell staff to “write someone up three times to kick them out.” She worries they are looking to find an excuse to DOS her. Daytime supervisors told her on April 3rd to sleep with the door open and staff will not awaken her, as she is “known to be a sober client not a risk of overdose.” But the graveyard supervisor “was not made aware” of this. She has “become a target” and is scared to be DOS’d “for no cause.” Staff have the power to create false reports and “there is no accountability” for their bad behavior.
- *The shelter responded to say they take seriously any resident’s feeling targeted or unfairly treated. Shelter policy prohibits retaliation and requires that any disciplinary actions be based on documented, objective behavior. They plan to review the situation, including staff conduct and communication, to ensure compliance with standards of fairness and respect. They will reinforce expectations with supervisory staff regarding appropriate guidance and documentation practices. They also recognize the importance of consistent communication between shifts. They will review internal communication procedures to ensure that relevant resident-specific information is properly shared.*

Allegation 3 (SOC 18)

- According to the client the shelter is not providing the required access to a telephone (and “Wi-Fi is dependent on staff permission to use”). She had to make a phone call to the hospital for follow-up after cancer treatment recently. An employee suggested she go “down the street and around the corner” to place the call.
- *Access to a telephone for necessary calls, including medical-related communication, is a required service. The shelter said they regret any instance in which the resident may not have been appropriately supported in accessing a phone. To address this, they have ordered a guest phone and a guest computer. These resources are intended to improve access for residents and ensure compliance with SOC requirements. In the meantime, they will reinforce with staff that*

residents must be provided with appropriate access to phone services and should certainly not be directed offsite when such access is required.

Division Circle Navigation Center (99)

Submitted to SMC: 4/6/26 Sent to shelter: 4/6/26 SMC received response: 4/8/26

Standards of Care (SOCs) Allegedly Violated: 1, 15

Allegation 1, SOCs (1, 15)

- The complainant asserts that, during the graveyard shift, he went to the kitchen and observed that the meal board listed “cheesy potatoes.” He stated that in the past, the board has been vague and has sometimes included meals containing pork or beef, which he does not consume. As a result, he typically asks staff to clarify whether meals contain meat. On this occasion, the complainant approached staff and asked whether the meal contained meat. According to the complainant, they responded, “You are so annoying, I wish you could hear yourself and how annoying you are.” The complainant stated that he informed this employee he would be speaking to a supervisor, as he believed his question required only a simple yes or no response. He reported that he (the staffer) continued to state that he was annoying. The complainant further stated that he planned to escalate the matter to the site manager, and that the employee retorted that he would do the same.
- *The shelter’s Food Service Coordinator disputed the complainant’s allegations. He was attempting to work with the complainant regarding further clarification of the ingredients of the meal being served, as some meals served do have meat bases, when complainant became confrontational. He did attempt to de-escalate the situation to no avail and reiterated that he did not make comments alleged. He was attempting to support the complainant as best he could in answering his question when complainant became confrontational.*

Next Door (100)

Submitted to SMC: 4/6/26 Sent to shelter: 4/17/26 SMC received response: 4/24/26

Standards of Care (SOCs) Allegedly Violated: 1

Allegation 1 (SOCs 1)

- The complainant-client reported having been disrespected and threatened by staff when he went to the charging station one morning to charge a mobile device. He had previously experienced issues with certain charging slots not functioning properly and was speaking with a newer staff member who was assisting in placing the device in a working slot. According to the complainant, once his charger was returned the cord longer worked properly. The phone itself had been moved to a different box without the complainant being informed and not the box he had originally signed off on. During this interaction, a staff member approached and stated that the complainant “shouldn’t tell him how to do his job” and referred to the complainant as a nuisance. The staff member subsequently called the complainant “bitch” and “bitchass” and implied he would attack the complainant if he saw him outside. This caused the complainant to feel unsafe. Another staff member was present and witnessed the incident.
- *The employee denied making any physical threats, however, the shelter determined there was disrespectful conduct and use of profanity. Five Keys promised to take formal internal measures. There will be retraining in de-escalation, implicit bias, and professional conduct. Furthermore, the staff member will offer a formal apology to the complainant. The actions of this individual do not reflect the core mission of Five Keys or the dedication of other staff who*

serve this community daily with integrity. The shelter stated they are committed to maintaining a safe, respectful environment where every voice is heard and treated with dignity, and where “safety is a priority.”

Bayshore Navigation (104)

Submitted to SMC: 4/13/26 Sent to shelter: 4/13/26 SMC received response: 4/14/26
Standards of Care (SOCs) Allegedly Violated: 1, 2, 15, 30

Allegation 1 (SOCs 1, 30)

- The client states a staffer recently began speaking to and wandng her in a sexually suggestive manner. After the 3rd time, when it was clear she was not imagining this, she complained in writing. The shelter responded to the effect that everyone must be checked at entry, i.e., they did not take the assertion seriously that she was receiving unwanted / improper caresses with the wand. This matter needs to be more completely addressed, and the employee disciplined or at least given training regarding working with women in the performance of his duties.
- *The shelter reviewed the guest’s concern. After a full investigation, the site director determined there was no evidence that the wand was used in a sexually suggestive way or that “improper caresses” took place. Their security protocol—emptying pockets, opening bags, and wandng all entrants—is strictly enforced for safety and was correctly followed in this instance. While they respect the guest’s perception, the facts do not support the complaint. To ensure continued professionalism, the involved staff member was assigned to re-take sensitivity training.*

Allegation 2 (SOCs 1, 2)

- The complainant reports that it is clear Joelle was aware of her complaint. He became even more attentive to her and aggressive. He shouted at her, telling her to “shut the f*** up.” This was witnessed by other guests. He has seemed like he is trying to push her into responding in a way that he could use against her. This seems like blatant retaliation for filing a grievance in good will about his behavior.
- *The shelter was unable to confirm that the complainant’s allegation that a staff member shouted “shut the fuck up” at her. While the complainant stated that other guests witnessed the incident, interviews with available witnesses did not yield any corroborating evidence.*

Allegation 3 (SOCs 1, 15, 30)

- The client has not been given a locker. Her property is thus open to being misappropriated any time she is not there. A few days ago a neighbor witnessed the same employee mentioned above (Joelle) perusing her possessions when she left her bed. She does not know if he took anything; however, she has complained about him and he threatened to make her regret it. She fears another form of retaliation he might engage in would be to steal her possessions. After her neighbor told her about Joell’s suspicious behavior, a staffer named Dorothy came to her to say that she (the complainant) should tell her husband/ partner not to go through her stuff. She told Dorothy that it was not her husband; rather, it was Joelle. Her husband was not even on the premises at the time. Dorothy went and told Joelle who immediately came over and threatened her, saying something like, “If this goes further, you and your husband (who he named) will regret it.” She was surprised Dorothy would have told Joelle, rather than a supervisor, presumably knowing Joelle’s reputation for being unprofessional and aggressive with guests. In fact, the staff at the front office were unsurprised, giving each other knowing looks, when she notified them. In other words, the shelter knows this employee needs to be reined in and retrained.

- *Following a thorough investigation into the complainant's allegations, the shelter reached the conclusion that, while staff assigned to a dorm may search or downsize guest property when necessary as part of their responsibility to check beds and maintain order, no one person's bed should be unnecessarily focused upon, especially as a means of retaliation, insofar as they wish to treat all guests fairly. They have spoken directly with the guest and her husband, and they are now both assigned lockers and have been given different beds in close proximity to each other to ensure their sense of safety and security. Regarding the conduct of the accused staffer, the investigation did not find evidence that he stole any possessions or specifically threatened to make her regret filing a grievance, but they did determine that he spoke in an unprofessional manner toward the guest. As a result, disciplinary measures have been taken, and additional training has been assigned to him. Furthermore, they admonished his coworker that any guest concern should be reported to a supervisor rather than to the employee being complained about. They assured the complainant that they are committed to maintaining a respectful and secure environment for all guests.*

Lower Polk TAY (105)

Submitted to SMC: 4/14/26 Sent to shelter: 4/14/26 SMC received response: 4/21/26
Standards of Care (SOCs) Allegedly Violated: 1, 2, 13, 30

Allegation 1 (SOCs 1, 2, 13, 30)

- The complainant-client states that shelter staff, speaking among themselves or even to guests, use unprofessional, profane, and often highly distressing language. For example, referring to women as "bit*hes." This happens frequently and more or less openly.
- *The shelter says staff understand that language described in the complaint is not acceptable and does not align with program standards. They did not identify any staff engaging in the behavior described; however, "expectations have been reiterated and will continue to be closely monitored." They promised to continue reinforcing staff expectations regarding professionalism, communication, and resident engagement as well as to monitor overnight shifts and staff response to incidents.*

Allegation #2 (SOCs 2, 13, 30)

- The client reports that other guests make sexually and racially charged verbal outbursts in the night. This makes it hard to sleep, creates a hostile environment, and interferes with the right of other residents—including those with their own disabilities (such as PTSD or anxiety)—to feel safe. Staff do not take a reasonable steps to deter this behavior.
- *Management says staff are aware of this concern and have identified a resident who has ongoing verbal outbursts during nighttime hours. They are doing their best to intervene promptly when incidents occur to minimize disruption and maintain safety. They are working with the resident to provide appropriate support and identify strategies to reduce these behaviors, including evaluating additional supports or alternative placement options if needed to better support resident needs and community safety.*

Embarcadero Navigation (106)

Submitted to SMC: 4/15/26 Sent to shelter: 4/17/26 SMC received response: 4/20/26
Standards of Care (SOCs) Allegedly Violated: 1, 2, 8

Allegation 1 (SOCs 1, 2, 8)

- The client states the use (and sale) of drugs in the restrooms continues to be a problem for clients who do not wish to be exposed to potential violence or to the toxic fumes. The users

have called him names and challenged him to “go outside.” Beyond this, he is asthmatic; thus, in practice he is unable to safely use the restrooms for long stretches, especially at night. Staff rarely intervene and then only halfheartedly. When he has brought this to the attention of the night staff, including the supervisor, they ignore or even make fun of him. It appears to him that some of them basically condone the use and sale of drugs on the shelter premises.

- *The shelter says it is not accurate that staff condone the use and sale of drugs. They conduct round-the-clock site and restroom checks to mitigate drug use throughout the facility. While substance use remains an ongoing challenge within the population we serve, they actively work to minimize its impact. Clients who violate policies receive warnings, and in cases where behavior affects others, may receive a DOS. They want to make it clear that on-site drug use is neither permitted nor condoned. “Any observed violations are addressed in accordance with City and Five Keys policies.”*

Allegation #2 (SOC 2)

- The complainant reports staff frequently allow individuals or even groups of people who are not guests to enter the facility, e.g., through the smoking area. He theorizes they come to obtain drugs from shelter guests.
- *The shelter denied claims that unauthorized individuals are “frequently allowed onto the site.” They assured SMC and the complainant that “there is only one point of entry—the front entrance. All individuals entering the site are verified against a daily roster to confirm they are current guests.” They noted that the roster of individuals allowed on-site may change frequently, so guests may not always be familiar with who is authorized to be present.*

Allegation #3 (SOC 1)

- The client has complained many times of harassment, even in just the last couple of weeks, from other guests—e.g., unwanted sexual advances, offering him drugs, calling him names, accusing him falsely of touching or “bothering” them, etc.—but the shelter does has not acted on his complaints.
- *The shelter is committed to providing a safe and supportive environment where guests can transition from homelessness to stable housing. Staff do in fact take all concerns seriously and respond appropriately. However, to investigate and address specific issues, “formal reports must be made.” Guests may report concerns to ambassadors, supervisors, care coordinators, medical staff, or the Director. If a guest is not satisfied with the resolution, they may also file a formal grievance. Staff address guest concerns daily and are committed to continuous improvement.*

Taimon Booten (110)

Submitted to SMC: 4/24/26 Sent to shelter: 4/27/26 Response received: 5/12/26

Standards of Care (SOC) Allegedly Violated: 1

Allegation 1 (SOCs 1)

- The client has an ongoing concern with a staff member. This staff member has allegedly been disrespectful. This includes ridiculing guests she does not like. When questioned about this behavior, she says things like, “I don’t care because I don’t live here.” The complainant reports that this staff member gossips about guests she does not like. The only response to internal grievances was for the site to conduct mediation. The complainant has personally witnessed the staff member argue with site supervisors and state that she could always find another job. The complainant did not choose mediation, as she did not believe this staff member would be willing to listen. The site manager responded by saying, “What do you want me to do about it?” Another client approached the complainant and informed her that the staffer in question had spoken to her

and another client in front of the shelter, complaining about something that does not violate any HSH or site policy.

- *The shelter reviewed this complaint with interim program leadership and “met directly with the staff member identified in the complaint to review expectations related to professionalism, respectful communication, maintaining appropriate boundaries, and avoiding discussions about guests in the presence of other clients.” The staff member acknowledged concerns regarding her communication and expressed a willingness to improve. Coaching and corrective feedback were provided, and expectations were reinforced. During this review, the shelter identified that there have been ongoing interpersonal conflicts and complaints involving multiple parties over the past several months, including reports from staff regarding feeling harassed by clients and concerns that some behavioral issues had not been consistently addressed through a clear operational process. At this time, they have identified an opportunity to strengthen internal procedures and supervisory practices to better support both staff and clients. Specifically, they will be: (1) Reviewing and revising current policies and procedures related to behavioral concerns, client grievances, and staff response protocols to ensure staff are appropriately supported in managing complex situations; (2) Increasing the frequency of 1:1 supervision and coaching with frontline staff to provide additional support, accountability, and burnout prevention; (3) Continuing ongoing mandatory staff trainings related to professionalism, communication, de-escalation, and burnout mitigation; and (4) Monitoring the site closely to ensure expectations regarding respectful interactions and Standards of Care compliance are consistently upheld. Current leadership continues to support both the client and staff member through coaching, feedback, and expectation-setting around communication and conduct.*

MSC-South (111)

May

Submitted to SMC: 5/6/26 Sent to shelter: 5/27/26 SMC received response:
Standards of Care (SOCs) Allegedly Violated: 1, 15

Allegation 1, SOC (1, 15)

- According to the complainant, he gave staff the keys to his locker. They claimed these were placed in one of his bags, but they were not. They were never returned to him. This led to the loss of the items he had at the public storage center.
- *The shelter is very sorry the client lost his property, but assured SMC that, after searching, they found and returned his key.*

Allegation 2, SOC (1):

- The complainant was unfairly DOS'd. This decision was overturned on appeal, but he suffered significant consequences as a result of staff's "lies." He called 311 immediately thereafter but ended up incurring close to \$1,200 in hotel expenses (receipts provided). MSC-South management must be aware that there is a lengthy delay in actually getting a bed after calling 311, so their claim that "he could have been served at another location" is nonsense. He would like to be reimbursed or else told explicitly, in writing, exactly why the shelter disagrees with his claim. Additionally, the bed he was assigned upon his return was much less livable, with other guests on all sides of him. The unfair treatment has greatly upset him. He fears further mistreatment or retaliation.
- *The shelter gave the client the benefit of the doubt, despite the staff member's allegations that the language he used rose to the level of a violation of the rules that would support a DOS. "As a non-profit organization," they are not able to reimburse him for the expenses he incurred.*

Next Door (113)

Submitted to SMC: 5/6/26 Sent to shelter: 5/8/26 SMC received response: 5/14/26

Standards of Care (SOCs) Allegedly Violated: 1, 2

Allegation 1, SOC (1, 2)

- According to the complainant, she has experienced discrimination based on her gender identity as a transgender woman. The complainant also reported witnessing another guest being consistently bullied on the same basis in the presence of staff. Specifically, the complainant identified a guest named, whom she described as having significant mental health and medical concerns. According to the complainant, this guest was repeatedly targeted and harassed by her bunkmate over an extended period of time. While staff would reportedly tell the perpetrator to stop, the complainant stated the behavior nevertheless continued throughout the duration of her stay at the shelter and had reportedly been occurring even prior to her arrival. The complainant further stated that when concerns were brought to staff, she was informed that there was little staff could do to address the situation. The complainant additionally reported that this vulnerable client appeared to have unmet supportive service needs related to her medical condition, including incidents of incontinence. The complainant stated that she personally assisted the guest with changing bedding and providing informal support with hygiene-related needs. The complainant also alleged she overheard staff discussing removing the client from the shelter due to odors associated with these incidents, rather than exploring potential supportive interventions, a safety transfer, or referrals for services “including IHSS or other appropriate care resources.” After she finally filed a formal complaint, the responder simply told her that bunk mate denied having bullied the other client and told her to go to supervisor if it happens again, steps the complainant had already repeatedly taken.
- *The shelter claims that after a “thorough investigation into these allegations,” the guest alleged to have made discriminatory comments was moved to a different floor, and reminded of the shelter’s code of conduct. It was noted that disciplinary actions are governed by Department of Homelessness and Supportive Housing rules. They assured the complainant that the mental and physical safety of guests and staff is their number one priority. However, they “must work within the specific intervention tools provided to us by oversight agencies, which can at times feel limited in scope.” They have made active efforts to provide the vulnerable client mentioned with higher levels of care and a more suitable environment. For example, they referred the guest to the Department of Public Health. They also asked the client if she would like a transfer to another shelter. They have helped with emergency washes “on a daily basis and provided her with all the necessary items and supported her with [their] best ability.” Out of “respect for the guest’s privacy and in compliance with confidentiality regulations,” they could not disclose further specific details. But they believe their staff acted “to the best of their ability within the framework of HSH rules and policies to intervene and rectify the situation as it unfolded.” They ended by thanking the complainant for bringing the issue being to their attention.*

Next Door (114)

Submitted to SMC: 5/11/26 Sent to shelter: 5/11/26 SMC received response: 5/15/26

Standards of Care (SOCs) Allegedly Violated: 1, 8

Allegation 1, SOC (1, 8)

- The client complained that multiple staff and guests at the shelter spraying aerosols in the women’s dorm area. She has asthma and these chemicals have been causing pain in her lungs. She respectfully approached various staff who disregarded her concerns. One staffer informed her that since she herself has asthma and the sprays do not bother her, the complainant was lying.

- *In reply, the shelter reported they have been unable to speak with the complainant her. A note was left at her bed requesting that she submit a Reasonable Accommodation request. This formal process will allow them “to identify and implement a specific remedy that meets her health needs while maintaining facility standards.” They are also “currently unable to interview the specific staff member involved, as she is on Protected Leave.” However, management stated they have a formal plan to address this allegation with her upon her return “to ensure all staff treat guest concerns with the necessary dignity and medical sensitivity.”*

Next Door (115)

Submitted to SMC: 5/19/26 Sent to shelter: 5/20/26 SMC received response: 5/27/26
Standards of Care (SOCs) Allegedly Violated: 1, 30

Allegation 1, SOC (1, 30)

- During the complainant’s intake to the shelter on March 30, he says a staffer showed impatience at having to handle “yet another intake on a day when several of his coworkers were out.” Then he apologized and explained the situation. The complainant said he understood and hadn’t minded waiting. There were a lot of questions and the interaction became friendlier. The complainant let his guard down and when this staffer began asking about assault, domestic violence, and issues like this, he shared that he had experienced abuse. The employee’s response was, “Oh no, was someone a little too rough in bed and you didn’t like it?” This “joke” and diminishment of what had been a traumatic experience was most definitely not appreciated, and the complainant made this clear. The interview got back on track and was appropriately concluded. However, a few weeks later when the client spoke with the same employee again, he was “treated like a baby.” It was patronizing—very rude and unprofessional.
- *The shelter manager told SMC that after “an extensive interview and investigation,” he could not substantiate these claims. He spoke with the employee in question, who remembered the encounter with but denied making inappropriate comments. Be this as it may, they promised to schedule him for additional training within the next 60 days.*

Allegation 2, SOC (1)

- The client looked into filing a complaint related to the allegation above, and asked to speak with a supervisor. He was told there was no one on duty as they had called in sick. He did not see a Shelter Monitoring Committee flyer, if one was present. He asked for information to file a complaint in writing and was directed to a bulletin board “with an address and phone number that were both dead ends.” The address was not correct/ up to date. Then he got a number for Five Keys; however, when he called and left a message he didn’t hear back.
- *Next Door’s community bulletin board was checked and has up-to-date SMC signage (and other relevant resources) posted and clearly visible. The respondent went on to say that if staff is not following shelter standards, they will be “held accountable and dealt with internally—with no exceptions” and expressed regret that the complainant felt he had been poorly served.*

Bayview Navigation Center (117)

Submitted to SMC: 5/22/26 Sent to shelter: 5/22/26 SMC received response: 5/26/26
Standards of Care (SOCs) Allegedly Violated: 1, 15

Allegation 1, SOC (1)

- The complainant says (s)he has had mail delayed or lost several times, including important items like their replacement “Direct Express” card. (S)he believes staff are negligent in managing incoming mail

for clients. They sometimes belatedly find items. Incoming mail should be readily available and given to clients promptly after it arrives.

- *The shelter responded that they “have a mailing system in place for guests who receive mail. Incoming mail is sorted by Intake staff and placed into the appropriate mailbox slots based on the guest’s last name. Only managers have access to these mailboxes when guests request their mail.”*

Allegation 2, SOC (15)

- The complainant. While the complainant has been at the shelter, their property left at the front desk (i.e., things not allowed into the shelter) has been lost more than once. They would like to remain anonymous but say management needs to receive this feedback, i.e., to ensure that staff exercise more caution. On a limited income, (s)he does not have many possessions and out of concern for doing their jobs well—and out of common decency—staff should be diligent in keeping track of things left in their control by client-guests
- *The shelter assured SMC that they have a property storage system for guests upon entry. “Any items that are not permitted are given to the Safety Monitors, who then place the items into the guest’s designated property bag. Each guest who enters or has a bed at the Navigation Center is assigned their own weapons locker bag.” If any items are left behind in the black bins after guests empty their belongings, those items are “typically placed in the lost and found box.” The assistant site manager promised to “communicate this matter with management and remind staff to ensure all protocols and procedures are being properly followed.”*

Bayshore Navigation Center (119)

Submitted to SMC: 5/20/26 Sent to shelter: 5/27/26 SMC received response: 5/27/26
Standards of Care (SOCs) Allegedly Violated: 2, 3

Allegation 1, SOC (3)

- The complainant says, “there are way too many people with dogs and multiple dogs.” “Sanitation with animals is an issue.”
- *The shelter responded at some length. They “allow guests to have pets, including multiple dogs, as part of our effort to provide shelter services for individuals with companion animals. However, pet owners are required to properly care for and supervise their animals at all times.” To address the concerns raised, they committed to monitor guests with animals more closely. They also noted that they recently installed a large, enclosed area designated for dogs.*

Allegation 2, SOC (2)

- The client also said they have heard multiple people make threats to each other over animals.
- *The shelter was sorry to hear this report. “While staff work diligently to monitor the shelter environment, it is not always possible to witness every interaction as it occurs,” but “intimidation, or violent behavior are not tolerated” and “when staff become aware of threats or aggressive conduct, appropriate action is taken in accordance with shelter policies, which may include disciplinary measures” or even DOS procedures. They assured SMC they encourage guests to report concerns directly to staff as soon as possible, including details regarding the time, location, and individuals involved whenever available. This “allows management to follow up promptly and take appropriate action to support a safe environment for everyone.”*

Ansonia (122)

Submitted to SMC: 5/27/26 Sent to shelter: 5/29/26 SMC received response on 6/1/26

Standards of Care (SOCs) Allegedly Violated: 1

Allegation 1, SOC (1)

- The complainant reported that about a month after the site had been taken over by Five Keys, his bed was changed from the lower to a top bunk without warning. The complainant explained to staff that he had a medical condition that required his use of a lower bunk. They refused to acknowledge his medical needs. The complainant spoke with the site director. She explained the process of completing and obtaining a reasonable accommodation (RA). The complainant then began the process and filled out the RA request form. The following morning he came down from his room to submit the records to a supervisor, who said the site director was not there and he could not take the forms. The complainant was informed the director would be in soon. The supervisor began complaining about the complainant having filed many grievances and about his prior requests for grievance forms and copies of the site's rules. The complainant understood that since the site had changed organizations it would be important for him to be aware of the rules in order to remain in compliance. This total interaction was less than 10 minutes. The complainant went upstairs to rest and wait for the director. When he went back down to speak with the director, he gave the paper to her, but she was in a meeting and asked him to come back. The supervisor he had been talking to earlier wanted to speak with him, but the complainant declined absent a witness. He was then informed that he was being DOS'd. The complainant asserts the DOS falsely accused him of blocking the front door for 45 minutes.
- *The shelter responded at length. When Five Keys assumed operations at 711 Post, staff had to address a number of site-wide issues, including room assignments and bed occupancy. Multiple complaints were received from the client regarding his roommates. Staff reviewed these complaints; however, the allegations could not be substantiated based on the information available at the time. As part of the transition process, members of the Care Coordinator team conducted a room-by-room review of the entire site to verify that guests were occupying their assigned beds and to establish an accurate count of occupied and available beds. During this review, staff determined that the client was not occupying his assigned bed. Site records reflected an assignment to a top bunk. He was notified that a request for a lower-bunk accommodation would require submission of a reasonable accommodation request so the matter could be reviewed through the established process. Several days later, while the director was in a meeting, staff notified her the client was yelling in the hallway, wanting to speak with her. She requested that he return later so the matter could be addressed without interruption. Staff documentation reflects that the interaction escalated and that the client's conduct created a disturbance within the community. In the complaint, the client says his interactions with staff were brief and appropriate. But staff documentation from that period reflects concerns regarding disruptive conduct, behavior perceived as threatening by staff, and inappropriate comments directed toward two female employees. These documented concerns extended beyond the submission of accommodation paperwork. He also states that services were denied based on an allegation that he blocked the front entrance for 45 minutes. Records indicate that the Denial of Service was based on the totality of documented conduct and observations reported by multiple staff members during the incident. His behaviors violated program expectations and raised concerns regarding the safety and well-being of staff and guests.*

Following the Denial of Service, the client was provided access to the established review process, including a hearing and arbitration. The matter was reviewed through those processes, and the decision was upheld. The shelter noted that after the DOS was issued, there were

multiple occasions when the client returned to the site, confronting, harassing, and threatening staff. In sum, though the client sees things differently,, records indicate that staff followed established procedures regarding bed assignments, reasonable accommodation requests, behavioral expectations, and the DOS process. Staff addressed the client's requests "through the applicable procedures while also responding to documented behavioral concerns affecting staff and the shelter community."

Ansonia (123)

Submitted to SMC: 5/23/26 Sent to shelter: 5/23/26 SMC received response: 6/1/26
Standards of Care (SOCs) Allegedly Violated: 1

Allegation 1 SOC (1):

- According to the client-complainant, since Five Keys staff took over the site, staff have approached guests with what was described as a "kicking-the-door-down" attitude. The complaint reported that when guests request grievance forms, staff will often state that a form will be provided later, but the forms are never provided. The complaint further stated that grievance forms are not made readily available for guests to access independently, forcing guests to interact with staff in order to obtain them. The complaint reported overhearing a staff member state, "He wants a fucking grievance but can't even clean his fucking room." According to the complaint, an unusual number of guests have been exited from the site, which was described as reflecting an "our way or the highway" approach to the management of the site by Five Keys.
- *The shelter responded that upon assuming operations at the site, Five Keys anticipated that the transition could be challenging for some guests due to changes in policies, procedures, and program expectations. To promote transparency and ensure guests had access to available complaint processes, "grievance forms and reasonable accommodation request forms were posted in both English and Spanish in the holding areas immediately upon our arrival. These forms were made available for guests to access directly without requiring staff assistance. Additionally, a grievance submission box was installed in the kitchen area to allow guests to submit grievances anonymously if they preferred." Also, in addition to the posted forms and grievance box, QR codes were posted on every floor of the facility. Guests can scan these QR codes using their mobile devices to submit concerns or complaints directly to Five Keys. "This process allows guests to communicate concerns independently and provides another avenue for reporting issues outside of direct interaction with on-site staff." So the allegation that grievance forms are not readily available to guests is inconsistent with the measures implemented at the site.*

Regarding the allegation that staff have approached guests with a "kicking-the-door-down" attitude, Five Keys assured SMC that "staff have made every effort to communicate program expectations in a respectful and professional manner." Prior to implementing operational changes, staff distributed written notices and memoranda to all guests "regarding topics including program downsizing, room inspections and cleaning expectations, excess property, laundry, bikes, pets policy, and prohibited or unchecked weapons." In several instances, these notices were distributed more than once to ensure guests had adequate notice and understanding of the changes being implemented. They also had town hall meetings where they reminded guests of new policies and guests were able to express their concerns. The complaint references an alleged statement made by a staff member regarding a guest requesting a grievance form. The shelter was not able to determine whether this took place, but stated they do not condone unprofessional or disrespectful language.

Total Client Complaints FY 2025-2026*

Site	Site Capacity	7/25	8/25	9/25	10/25	11/25	12/25	1/26	2/26	3/26	4/26	5/26	6/26	Total FY25-26 Red indicates late response	Complaints per 100
Adante	70 Rooms			1			1						2		
711 Post/Ansonia	250 beds							1			4/1 ²	2		7	1
Baldwin	179 beds	1	1	2										4	
Bayshore Nav	128 beds	2						1			1	1		5	
Bayview Nav	203 beds			1				2	1	1		1		6	
Gough Cabins	70 rooms														
Central Waterfront Nav	60 beds														
Compass Family UAV	130 beds	2												2	
Dolores Street	92 beds			1		1	2/2							4	2
Division Circle Nav	186 beds		1/1		2	1	1		1	1	1			8	1
Ellis Semi-Congregate	130 beds			1		2/2								3	2
Embarcadero Nav Cntr	200 beds	1				1					1			3	
Gough Cabins	70 rooms		1											1	
Hamilton	27 fams	1												1	
Harbor House Family	30 fams														
Hospitality House							1							1	
Interfaith Winter Shelter	30-80 bed														
Lark Inn	36 beds														
MSC South Shelter	327 beds		2/2	2/1	1		2	1		1		1		10 ¹	3
Lower Polk TAY	75 beds				1				1	1	1			4	
Mission Cabins	68 beds		1	closed										1	
Monarch	93 beds											Closed			
Next Door	334 beds		2			2	1		1	1	1	3		11	
Oasis Family	54 beds			1	1					2				4	
Sanctuary (ECS_	200 beds		1	2	4									7 ¹	
Taimon Booten	75 beds	2				1					1			4	
AWP Drop In	30 beds			2/1										2	1
A Woman's Place	25 beds								1					1	
Total		9	9	13	9	8	8	5	5	7	10	8		91	10

*Late responses are in red ¹ Multiple complaints from the same client(s) ² Transition from Urban Alchemy to Five Keys April 2026

Standard of Care

Number of allegations of violations of this Standard

Note that each complaint can include alleged violations of more than one SOC or multiple violations of the same SOC.

SOC ↓	SOC Description	7/25	8/25	9/25	10/25	11/25	12/25	1/26	2/26	3/26	4/26	5/26	6/26	Total FY25-26	Complaints per 100
1 a	Rudeness	11	15	8	3	4	6	3	1	2	9	4		66	
b	Disrespect for property			4	2	4	1	1	1	1		2		16	
c	Bad/Retaliatory DOS			3	3	2		2	1	2	1	2		16	
d	Staff ignore complaints			2	1			1	2		4	2		12	
e	Theft by staff				1			1			1			2	
2 a	Other guests	5	5	3	3	1	1			2	3	2		25	
b	Staff pose a threat			5	2		1	2	1		2			13	
c	Facility is unsafe									1				1	
3a	Restrooms, Cleanliness	2	1	1	1		2							7	
3b	Hygiene supplies														
3c	Generally dirty site						1							1	
4	Hygiene products			1	1									2	
5	Harmful pest products														
6	First Aid, etc.														
7	Drinking water														
8	ADA	4	4			1		1	1	1	1	2		15	
9	Good nutrition	2												2	
10	Dietary options														
11	No smoking					1									
12	Clean bedding														
13	Quiet time/ Sleep	2	1			1				1	3			8	
14	Daytime access to beds														
15	Storage			1	1	2		2		1	2	2		11	
16	Electric outlets														
17	Notice re repairs						1			1				2	
18	Phone availability										1			1	
19	22 inches between beds					1								1	
20	Postings in Spanish														
21	Translation services														
24	Denial of Service > 5PM							1						1	
25	Employee badges						1							1	
26	Transportation available														
28	Laundry						1							1	
29	OSHA									1				1	
30a	Training - hand washing	7	7											14	
30b	-Food handling														
30c	-Emergency procedures														
30d	-Aggressive clients			2							1			3	
30e	-Mental health issues			1	1			1						3	
30g	-ADA requirements			1		1								2	
30h	-Shelter training manual			5	1	3				2	4			15	
30i	-Cultural humility			4								1		5	
Total		33	33	41	20	21	15	15	7	15	16	33		249	

Staff Update and Committee Membership

Membership ([Admin. Code Sec. 30.305](#))

The Board of Supervisors voted to terminate the Committee effective 6/29/2026 and the mayor approved this.