City and County of San Francisco

Shelter Monitoring Committee

MEMORANDUM

TO: Shelter Monitoring Committee
FROM: Committee Staff
DATE: June 17, 2025
RE: **May 2025 Staff SOC Report**

Client Complaints

Nine formal complaints were submitted through the SMC to City shelters in May of 2025.
****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.*

Division Circle Navigation Center

Client 1 (98)

Submitted to SMC: 4/30/25 Sent to shelter: 5/5/25 SMC received response: 5/12/25

Standards of Care (SOCs) Allegedly Violated: **1**

Allegation 1 (SOCs 11)

- The complainant reports she went to check out her religious crystals that she had previously been disallowed from bringing into the shelter (complaint 922425-04DCNC). However, she found out that they were missing. According to the complainant the crystals cost her in total about $85.00. These items were taken by staff "in direct disregard for her religious practices" and were lost while in staff possession.
- *The shelter responded that the Program Director discussed this matter with the complainant on May 6, 2025 after Front Desk and Excessive Property containers were searched unsuccessfully. He asked complainant to gather information so that replacement items could be purchased. Complainant was exited on May 9, 2025 as a result of 48-hour bed abandonment. The Program Director promised to reach out to complainant to discuss this further.*

Baldwin SAFE

Client 1 (99)

Submitted to SMC: 5/2/25 Sent to shelter: 5/6/25 SMC received response: 5/ 18/25

Standard of Care (SOC) Violated: 1

Allegation #1 (SOCs 1)

- According to the complainant, the shelter lost his property (mainly clothing) despite him being in medical respite and his intensive care case manager having communicated with the shelter regarding his situation and the intent to recover his property once medically able. The wheelchair-bound client's housing case manager

was able to secure the complainant permanent housing on 3/28/2025 directly from respite and planned to pick up his property. He went to the Baldwin to pick up the property, but what they gave him belonged to someone else. The case manager returned to exchange the property but was informed that his belongings were nowhere to be found.

- *The shelter responded that they were aware the complainant was hospitalized for a period and then required respite services. He took some of his belongings with him. Management coordinated with respite staff to ensure that the client could retrieve additional personal property from the site. He was given multiple opportunities to retrieve his belongings while in respite. They argued it was unreasonably difficult to confirm the accuracy of the items reported to be missing. Their responsibility was limited to accommodating his requests as a courtesy, but they could not at least technically be faulted for any missing items.*
- **SMC investigated this complaint. Though technically not required to store guests' property for lengthy periods, the shelter was found to have failed to meet SOC #1, insofar as they returned someone else's belongings to the complainant and lost the complainant's bags during the time they knew he was recovering from a serious medical problem. A reasonable observer would not judge their efforts as evincing the level of care implicitly called for in SOC #1.**

Client 2 (102)

Submitted to SMC: 5/22/25 Sent to shelter: 5/27/25 SMC received response: 6/5/25

Standard of Care (SOC) Violated: 1, 2, 31*

Allegation #1 (SOCs 1, 2, 31)

- The complainant states that after being wrongly DOS'd (overturned), she is being mistreated, apparently in retaliation, by at least one employee. There is a clear negative attitude in how some staff respond to her requests and questions. She spoke with supervisors, including Damien, who should be able to identify the ambassador whose rudeness has been brought to management's attention. The one described above is not behaving professionally towards her, in speech and action. For example, when he unlocked her door a few days ago, he would not open it, even though her hands were full and it was obvious she could not open it herself. She would like us to investigate the shelter for general bad client relationships and staff training.
- The site manager met with the complainant to reassure her. The "rude" staffer she described, in fact, was no longer employed. They take respect for clients very seriously. They noted that the DOS was not in fact overturned; rather, the shelter voluntarily "gave [the complainant] a second chance."

Adante

Client 1 (100)

Submitted to SMC: 5/6/25 Sent to shelter: 5/13/25 SMC received response: 5/27/25

Alleged Standards of Care (SOC) Violated: **1, 2, 31**

Allegation 1 (SOCs 1, 15)

- The complainant alleges she experienced discrimination based on her gender identity and sexual orientation. She was even physically threatened by a staff member. The complainant states she left the facility to go to a nearby store. She reports that there a staff member tried to punch her in the face. Later that day, around 4:00 p.m., the complainant brought this incident to the attention of the Site Director. She reports he responded with verbal abuse and hate speech, ultimately discharging her from the site.
- *The shelter ambassador named by the complainant had a different interpretation of events. She reported going to the local store to pick up some cigarettes. While in line the complainant*

*appeared behind her, "irate," calling her names and threatening her well-being. She paid for her items and reported the threatening behavior to her supervisor. A site supervisor recounted that while he was outside of the site, he noticed saw the complainant walking up. He said she as agitated. He greeted her and she said, "I had enough of that b***ch looking at me, I told ya'll to keep this b***ch away from me, ya'll want me to put hands on this effing b***ch." Witnessing how angry and agitated Deanna was, Leo attempted to calm the conversation by asking what happened. The complainant continued to make similar comments. He asked again that she explain what happened. He said she looked at him up and down, as if "sizing him up" and made a comment that led him to disengage. He sought out support from the Assistant Director, who went out to speak to the complainant. She expressed that she did not want any Adante staff at the store she frequents. The AD let her know he is not able to control where staff go on their breaks. The complainant made it clear she did not like his response. He promised to ask the store staff what they observed and for video footage, if available. [The information gathered by the AD and SMC staff did not corroborate the complainant's version of events.]*

Allegation 2 (SOC 1)

- The complainant further alleges that staff conducting wellness checks directed transphobic slurs at her and repeatedly invalidated her gender identity, referring to her as a man rather than a woman. Additionally, the complainant states that upon her discharge, she was not permitted to retrieve her personal belongings, which remained on-site
- *The shelter responded that they conduct wellness checks every hour. If there is no response, they announce that we will be opening the door. (The complainant had been granted an exception for no wellness checks after 8 PM.) She was never issued a DOS. Her belongings remained in her room. Management received complaints from the client (via email), and always followed up. They have reviewed video footage and spoken to all parties involved. In addition to required SOGI training, they also offer ongoing cultural sensitivity training specifically focused on LGBTQIA+ individuals to all of their staff*

Harbor House

Client 1 (103)

Submitted to SMC: 5/22/25 Sent to shelter: 5/28/25 SMC received response: 5/30/25

Alleged Standards of Care (SOC) Violated: **1, 31**

Allegation 1 (SOCs 1, 15)

- The complainant states she was in her room in a state of significant undress on a Saturday morning when a male staffer entered abruptly (without audibly knocking). Another employee was present. They explained that they thought someone was smoking in the room. There was no smell, so they apologized and departed.
- *Upon review, the shelter acknowledged that this situation they did not meet the expectations of respectful and trauma-informed engagement outlined in their standards. Harbor House procedures do require staff to knock and clearly announce their presence before entering any guest room, except in emergency situations. While the concern about potential smoking would warrant a check, staff are expected to take appropriate steps to protect guests' privacy and dignity. Staff members involved did apologize at the time of the incident, recognizing that their entry caused distress. However, the verbal announcement should have been made more audibly and respectfully prior to entering. All staff have been reminded of the policy to audibly knock and announce before entering any guest room, and to give a reasonable amount of time*

for a response unless there is an emergency. Additional trauma-informed care training is scheduled to take place in June for all staff. This will include modules specifically on working with women, trauma survivors, and privacy rights within a shelter context. They also committed to clarifying their policy with guests, including what to expect from staff when room checks are necessary. This will be reinforced through posted signage and during intake.

Client 2 (106)

Submitted to SMC: 5/23/25 Sent to shelter: 5/29/25 SMC received response: 5/31/25
Alleged Standards of Care (SOC) Violated: **1, 15**

Allegation 1 (SOCs 1, 15)

- The complainant The client states he and his family were DOS'd unfairly and discriminated against. Another guest at the shelter started a dispute, but "since he was a male," they held him to blame. In fact, it was one-sided insofar as he did not do anything in response to the other client's assertion that past trauma made her extremely uncomfortable to be in proximity to a male. Shelter staff made it clear that they were going to give preference to the other guest without much concern for the facts. Furthermore, the hearing location was changed at the last minute, leading the complainants to miss the appointment. Subsequently, the shelter refused for almost a week to allow the complainant to retrieve the family's property. For several days restrictions worried the client, whose child needed access to medical equipment and medicines.
- *The shelter wants it to be clear they never DOS clients without cause. In this case, it was based on multiple and escalating threats, aggressive outbursts, and safety concerns voiced by both guests and staff. Police were called on multiple occasions. Other residents have active restraining orders against the complainant. They recognize the complainant may feel he was treated unfairly, but their decision followed the appropriate protocols and was necessary to maintain a safe and peaceful environment. While the location of the hearing was changed for safety purposes, notification was provided. The family was given several opportunities to retrieve their belongings after their exit. Initial attempts were not taken up, but they continued to offer additional access windows beyond the standard 48-hour holding period. Ultimately [working with SMC staff], they ensured the safe retrieval of all remaining property. They were not made aware of urgent medical needs related to the family's stored items. Had they been informed of this, they would have acted immediately to ensure access to anything needed for the child's health or well-being.*

Mission Cabins (104)

Client 1

Submitted to SMC: 5/23/25 Sent to shelter: 5/27/25 SMC received response: 5/27/25

Standard of Care (SOC) Violated: 1, 15

- About April 1, 2025 the client states she was DOS'd. Her EBT card was missing from her property when she retrieved the bags. The funds were spent in LA county. From her perspective, it seemed whoever bagged her property took the card and misappropriated the funds, perhaps with the help of an associate in Los Angeles.
- *The site insists they are constantly briefing and training staff on how to treat guests with care and respect. ed her bags her EBT card is was missing. On 3/30/25 the client was DOS'd. She left with her property. She did not have to retrieve it. It was noted that when property is stored, they have two staff members bag all property in the cabin, tag it with the guest's name, cabin*

number, date, how many bags are taken out of the cabin, and the name of the staff member that bagged the property.

Sanctuary (105)

Client 1

Submitted to SMC: 5/26/25 Sent to shelter: 5/28/25 SMC received response: 6/2/25

Standard of Care (SOC) Violated: 1

Allegation #1 (SOC 1)

- The client reports shelter kitchen staff have been ending mealtimes earlier than what is posted. They rush through the meals as if they want to finish fast, not caring if people go without eating.
- *The shelter responded that these allegations are without merit and appear to have been filed in retribution for the shelter's having warned the client to avoid violating the 48-hour rule.*

Taimon Booten (107)

Client 1

Submitted to SMC: 5/27/25 Sent to shelter: 5/28/25 SMC received response: 5/29/25

Standard of Care (SOC) Violated: 1

Allegation #1 (SOCs 1)

- The complainant reports that since her arrival at the site, she has observed a pattern of staff favoritism toward certain clients, even when this causes inconvenience or discomfort to others. For example, if a favored client requested that other clients not use a particular entrance to the dormitory, staff would enforce this request for all clients. Similarly, staff would adjust shared living conditions—such as lighting—based solely on the preferences of the favored client. The complainant further reports ongoing issues with another client with whom the staff appear to have a close relationship. When she these concerns about him to the attention of staff, they dismissed her complaints without proper consideration.
- *Shelter management met with the guest and other clients mentioned, tryimng to find a way for them to either get along or just ignore each other and just be able to live in the same space. There were no verbal threats of violence or acts of violence. After many conversations, they both agreed to leave each other alone. They are in separate dorms. To minimize conflict they suggested they use different doors. (They try to have folks stay out of dorms they don't live in to minimize stealing and conflict.) When asked if she could use a different door while both of them "cooled down," the complainant agreed. She was told it is not a rule, but rather a request. They do their best not to "play favorites'; however, some guests require a higher level of care then others. Regarding the lights, issues have arisen where guests turned them on and off. In the past, guests got to control the lights as they saw fit. After the shelter management was changed, locked covers were placed on all the light switches. They are turned off during quiet hours and turned back on in the morning by staff.*

*** SOC #31 became SOC #30 during the Fiscal Year. For reporting purposes, the old number will be used for the remainder of the FY.**

Total Client Complaints FY 2024-2025*

Site	Site Capacity	7/24	8/24	9/24	10/24	11/24	12/25	1/25	2/25	3/25	4/25	5/25	6/25	Total FY24-25 Red indicates late response		Complaints per 100
Adante	70 Rooms											1		1		.014
711 Post/Ansonia	250 beds	1						1			1			3		.012
Baldwin	179 beds	2	1					1			1	2		7		.039
Bayshore Nav	128 beds	1							1	1				3		.023
Bayview Nav	203 beds	1		1	1									3		.015
Gough Cabins	70 rooms				1									1		.014
Central Waterfront Nav	60 beds							1						1		.017
Dolores Street	92 beds						1							1		.01
Division Circle Nav	186 beds			2	2	1		3	2	1	3	1		15[1]		.08
Ellis Semi-Congregate	130 beds				1	1				1	1/1			4	1	.03
Embarcadero Nav Cntr	200 beds	1			2				1					4		.015
Gough Cabins	70 rooms							1						1		.014
Hamilton	27 fams	1								1				2		.04
Harbor House Family	30 fams		1									2		3		.10
Interfaith Winter Shelter	30-80 bed							1						1		.036
MSC South Shelter	327 beds	2/1	1	2	1	1	4/1		1		2			14[1]	2	.043
Mission Cabins											1	1		2		.034
Monarch	93 beds				1						1/1			2	1	.010
Next Door	334 beds				1		1			2	4			8		.012
Oasis Family	54 beds	1												1		.019
Sanctuary	200 beds	1	1		1				1	2		1		7		.035
Taimon Booten	64 beds									1		1		2		.032
AWP Drop In	30 beds							1/1	1/1					2	2	.067
A Woman's Place	25 beds	2		1							1/1			4	1	.12
Total		13	4	6	11	3	6	10	7		15			92	7	

*Late responses are in red [1] Multiple complaints from the same client(s)

March 2025 Client Allegations by Standard

Standard of Care	Number of allegations of violations of this Standard
Standard 1: Treat all clients equally, with respect and dignity…	10
Standard 2: Provide shelter services in an environment that is safe …	2
Standard 3: Cleaning/ Janitorial	0
Standard 8: ADA	0
Standard 10: Make dietary modifications…	0
Standard 11: Smoking	0
Standard 13: … sleeping at least 8 hours per night.	0
Standard 15: Provide shelter clients with secure property storage…	2
Standard 17: post … when a maintenance problem…	0
Standard 25: Require all staff to wear a badge…	0
Standard 28: …access to free laundry services…	0
Standard 31: Training… (After change in Admin Code, now SOC #30)	3

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

Staff Update and Committee Membership

Membership (Admin. Code Sec. 30.305)

There are currently **three unfilled seats** on the Shelter Monitoring Committee:

Seat 2 - shall be held by a person who is homeless or has been homeless within the three years prior to being appointed to the Committee, and who has a disability.
Seat 6 - shall be held by a person who is homeless or formerly homeless, and who has been nominated by one or more nonprofit agencies that provide advocacy or organizing services for homeless people.
Seat 7 - Shall be held by persons nominated by one or more nonprofit agencies that provide advocacy or organizing services for homeless people

If you or anyone you would be willing to recommend is interested in applying for a Seat on the Committee, please contact staff at 628-652-8080 or email shelter.monitoring@sfgov.org for more information. the Homelessness Oversight Commission has a nominations subcommittee charged with recommending appointments to the SMC (and some other related groups). Applicants submit a form and the candidate(s) name is added to the Nomination Committee meeting agenda and invited to meet the members who conduct a soft interview. At this point, the candidate is also able to ask committee members questions. The full HOC will vote to approve the candidacy

Shelters are reminded that they have **five business days** to respond to complaints or ask for an extension, e.g., if they are unable to interview a key witness. It is important to respond to all of the listed allegations in order to fulfill the requirement. Late responses are indicated in the matrix.

FY2025-2026 Upcoming SMC Meeting Calendar:

September 17