



Shelter Monitoring Committee

MEMORANDUM

TO: Shelter Monitoring Committee
FROM: Committee Staff
DATE: October 19, 2025
RE: September 2025 Staff SOC Report

Client Complaints

13 formal complaints were submitted through the SMC to City shelters in September 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.*

Baldwin Client 1 (24)

Submitted to SMC: 8/28/25 Sent to shelter: 9/4/25 SMC received response: 9/11/25

Standards of Care (SOC) Violated: 1, 30

Allegation #1 (SOCs 1, 30)

- The complainant, a case manager visiting clients at the shelter, says. The complainant says a staffer at the entrance security desk behaved in an outrageously discriminatory, threatening manner. He looked the complainant up and down, put on a latex glove (which he had not done for any other person in line) and snapped it audibly twice while looking the complainant up and down. He (twice) asked, "are you ready?," implying a cavity search. He did this in front of several shelter staff members, two of the complainant's coworkers, and the client in line behind them. He did not act on his threat; however, his utter disdain for the complainant was apparent then, and confirmed when the complainant next visited the shelter. At that time, he spoke only to the complainant's male coworker when they approached the desk together, and did not look the complainant in the eyes.
- *The site manager responded that they interviewed staff and reviewed video, finding no evidence to back up the complainant's assertions.*

Baldwin Client 2 (36)

Submitted to SMC: 9/19/25 Sent to shelter: 9/26/25 SMC received response: 9/29/25

Standards of Care (SOC) Allegedly Violated: 1, 2, 30

Allegation 1 (SOCs 1, 2, 30)

- The complainant reports he submitted a laundry bag containing clothes valued at over \$1,000. On 07/16/2025 he submitted an internal grievance requesting that his clothes be returned to him. He received his first response on 07/25/2025, and this only said staff were looking into it. The second response dismissed his claim, explaining that because of discrepancies in his report

in how many articles of clothing were in his bag to two different staff, he was inconsistent. The complainant finds this to be an excuse, used to avoid accountability.

- *The shelter investigated and found no evidence the client turned in any additional clothing items after receiving his full laundry in the morning. In his grievance and verbal statement, he claimed that a few items were still wet, and that he brought them back to staff to be re-dried. However, they interviewed multiple staff members who all said that once his full laundry was returned, he did not bring any additional items back. Also, he provided conflicting information at different points to different managers. They noted that they gave him the opportunity to access their "clothing room" to replace any items he felt were missing. He declined those offers and instead demanded \$1,000 in reimbursement for three pairs of jeans. Without clear justification or evidence, reimbursement for that amount is not feasible.*

MSC-South

Client 1 (25)

Submitted to SMC: 9/4/25 Sent to shelter: 9/5/25 SMC received response: 9/23/25

Standards of Care (SOC) Violated: 1, 2, 8, 30

Allegation 1 (SOCs 1, 8, 30)

- A night supervisor removed medication and other personal property from the complainant's bed, alleging excess property. The complainant has a reasonable accommodation that staff were aware of, and this action was an unreasonable violation of the complainant's rights under ADA regulations and the Standards of Care. Additionally, staff spoke to the client in a sarcastic, demeaning way, embarrassing her in the presence of other guests and employees.
- *The shelter asked the guest if any medical equipment, paperwork or medical apparatuses had been taken and she said no. They say guests can fill their lockers with property and have one large bag of soiled clothing at the end of their bed. Any reasonable medical equipment in addition is allowed. This client had two additional 30-gallon bags of property besides the one bag of soiled clothing. In instances such as this excessive property has to be moved to the Guest Property Room. Guests can take their property to a storage facility, which this client in fact did. Some "guests who go through this feel disrespected," but no disrespect is intended. This is a special time of the year when the HSH audit is happening and the training manuals are reviewed. The supervisor in question will be asked to read and go over the Shelter Training Manual on Customer Service and Professionalism. As for reasonable accommodation, the only documents on file say that this guest can have an extra mattress, which she has. As far as disrespectful commentary by staff, the details were not provided. Be this as it may, management will talk to staff about the importance of being compassionate when moving or rearranging clients' property (and that guests should be present).*

Allegation 2 (SOC 2)

- The complainant expressed serious concerns for her safety due to ongoing harassment from another client within the shelter. Despite submitting written requests for action, shelter management failed to respond or implement measures to address the harassment and ensure the complainant's safety.
- *The shelter assured the client that they provide an environment that is safe and free from violence. They often have to de-escalate issues between guests. Of course, they offer safety transfers. They did in this case and the client refused it. In reference to the Temporary Restraining order, it has specific instructions allowing both people to stay at the shelter at designed distance until the final Hearing.*

MSC-South
Client 2 (32)

Submitted to SMC: 9/13/25 Sent to shelter: 9/15/25 SMC received response: 9/25/25

Standards of Care (SOC) Allegedly Violated: 1, 30

Allegation 1 (SOCs 1, 30)

- The complainant reports he requested a bed reassignment after his bunkmate offered him substances. When he returned that evening, he discovered that his lock had been cut and his belongings were only partially packed, with some toiletries left behind in the drawers. He approached staff about his missing property and was informed that his items had been bagged and placed upstairs in the property storage area. He states that the night shift staff involved included a thin Black female with tattoos and another staff member with long dreadlocks. When he asked why his lock had been cut, the female supervisor repeatedly responded, "We are not responsible for your property," The complainant was missing two cell phones, three drives and other items. The following morning, the complainant spoke with the Assistant Director, who contacted the supervisor and due to fact that locks are not supposed to be cut in these circumstances. According to the complainant, the female supervisor then falsely stated that he had called and given permission to cut the lock.
- *The shelter responded to say that when the reassignment took place the client was not available to make the move. In instances like this they try to wait until the guest returns to make the move. However, once the move has been granted, the bed became available for another guest to occupy. Someone else was in fact assigned to that bed so they had to make it available. At that time the complainant's property was bagged and tagged. Guests are given time to review their property and sign saying that they've been given all their property or refuse to sign and stipulate what is or isn't there. The client signed saying that he received all of his property. Later he said he didn't give anyone permission to cut his lock. The manager explained to him that this is standard procedure in a case like the one at hand and that they would replace the lock. He also promised to check to see if any items were left behind or not bagged. The supervisor on duty at the time of the property transfer reported the client was given everything. It was recognized that everyone can improve verbal and nonverbal communication, as well as improving their listening skills.*

AWP Drop-in Center
Client 1 (26)

Submitted to SMC: 9/4/25 Sent to shelter: 9/9/25 SMC received response: 10/8/25 (late)

Standards of Care (SOC) Violated: 1, 2, 30

Allegation 1: SOC(s) 1, 2, 30

- The complainant reports that since entering the site, she experienced discrimination based on her transgender identity. According to the complainant, she has been consistently harassed by other guests at the site. Most staff members have been indifferent to her experiences, including an incident in which one individual mockingly pretended to spit at her. The complainant further states that staff singled her out by requiring her to wait until bathrooms were completely empty before she could use them. Staff members reportedly stood by the sinks and watched her while she used the facilities. When distributing goods, staff consistently gave items to the complainant last, regardless of the situation, and she has frequently been denied a blanket. The situation escalated when her case manager called her into the office and questioned her appearance, asking why she was not dressed in a more feminine manner and why she had not legally changed her

name. The case manager also asked about her sexuality, despite the complainant's visible discomfort. Upset by this interrogation, the complainant approached the site manager. However, the manager interrupted her, and informed the complainant that staff and clients had raised complaints about her presence. Subsequently, when the complainant attempted to return to the site, she was denied entry and told it was due to "crouching down next to a chair" during her previous stay. No further explanation was provided, and she was turned away. She notes that no other guest has been questioned about their choice of clothing, such as wearing jeans or sweats instead of more traditionally feminine attire. Furthermore, the complainant was not offered any supportive services or linkages that would have been relevant based on staff questions.

- *The drop-in site responded that they had gone to great lengths to work with the complainant. Much of the frustration the complainant expressed to them revolved around the drop-in site's having declined to DOS an elderly, non-English-speaking client who referred to the complainant with male pronouns. This outraged the complainant, who began speaking in a threatening way to the site manager, which made any meeting of the minds unworkable, i.e., cut off further conversation.*

AWP Drop-in **Client 2 (33)**

Submitted to SMC: 9/19/25 Sent to shelter: 9/22/25 SMC received response: 9/25/25
Standards of Care (SOC) Allegedly Violated: 1, 30

Allegation 1 (SOCs 1, 30)

- The complainant says she had to see a doctor for a problem that she suspects arose due to unclean conditions at the drop-in site. Her case manager (CM) took it upon herself to contact SF General Hospital to ask for her diagnosis and other medical information she was not entitled to. The doctor even expressed surprise that the CM did not realize it was inappropriate to ask for this.
- *The shelter responded that the guest believed she had a contagious infection and needed to go to the ER. The CM had been working closely with the client as her clinician and offered to send her in a Lyft to the ER. Later she missed a call from her number. She could not reach her, so she called the ER and was connected to staff. She explained she was calling the client back to see if she had received the results of her [redacted] test, as she was scared and had agreed to provide her with an update. The nurse stated the results would not be back for a couple of days. She let him know she uses EPIC to complete her documentation, so she would just check in a couple of days to see if she had been could offer her support and connect her with the DPH nurses on-site for aftercare. She and the client also needed to configure plans for rehab if she tested positive for [redacted], as she was set to leave the City. After this call, the client sent multiple text messages to the CM, saying "you are all dirty and don't know how to do your job", and "you're all trash". She also stated that she would not be coming back to the site again because she believed she had caught [redacted] there. The CM had been working with a residential treatment center in [redacted city] on admitting her into treatment for substance use disorder, and she was set to fly to them that Saturday." She notified the rep that she would no longer be working with this client and that they would need to reach out to her directly. The client never went, and remained at the drop-in center.*

Allegation 2 (SOC 1)

- The case manager also lied about the incident mentioned in Allegation #1. She also told the client she is about "the most unsuccessful person she currently works with" at the site.
- *The shelter does not believe this to be accurate. In fact, the client met with the CM later and apologized for her behavior.*

Dolores Street (27)

Submitted to SMC: 9/2/25 Sent to shelter: 9/3/25 SMC received response: 9/10/25

Standards of Care (SOC) Violated: 1, 2, 15, 30

Allegation #1 (SOCs 1, 2, 30)

- The complainant reports some staffers are rudely dismissive of client concerns, pressing them to the limits of their endurance. He saw this happen to a client recently, who was repeatedly questioned about his approach to caring for his dog. Staff who are trained in cultural humility would not behave like this. The complainant himself was asked by staff why he moved his mat closer to his bed. He responded that he was being proactive, to avoid having his neighbor kick and step on it, to avoid potential trouble. The employee responded by badmouthing him to the neighbor and others. This encounter, like several others the complainant has had with staff in just a few weeks at the shelter, was unnecessary. Taken together, they project an unearned animus towards the complainant, if not racial profiling. Staff also allow “a big loudmouthy racist guy who sleeps by the door,” to intimidate and disturb the peace of clients.
- *The shelter manager responded that they enforce program rules when safety is at risk. The main concern raised was that other residents were making racial comments in another language within the dorm; however, complainant was unable to identify who made the remarks. Those who might have done so were apparently wearing headphones and facing another direction at the time. They did not want to make assumptions and said their priority was to secure housing. They informed him they would conduct an investigation without disclosing the identity of anyone reporting incidents. They also discussed navigating the housing system, how assessments work through Access Points, and available housing options. They brought up the possibility of transfers between shelters and alternative program settings. The client was assured he could bring forward any concerns in the future, and that the management team would address them confidentially and in accordance with program rules. Following this, the participant contacted our Program Manager to explore a transfer. With the support of HSH, the participant was successfully transferred to a Navigation Center.*

Allegation #2 (SOCs 1, 15, 30)

- The client woke up to find that his locker had been tampered with. Staff provided a new one, but a few days later he found that someone had attempted to pry it open. The shelter needs to take measures to protect clients and their property. At the same time, the client is, for no legitimate reason, himself “over-policed.” He “can’t go to the locker area without being followed “and hawked—it’s like somebody is sitting by the cameras monitoring & soon as I get ready to go over there, they’re given the cue to come over and watch me—like clockwork.” He was told he “can’t be over there ‘for [his] safety’.” At the same time, staff “don’t say anything about the people hanging out there in the morning.” The fact that he is closely observed, but his locker gets repeatedly tampered with, makes it seem “like staff is in on it.” Again, it comes across as racial profiling.
- *As for the allegation that there was tampering of the lockers, the shelter reviewed footage and were not able to find anyone tampering with other participants lockers.*

Oasis (28)

Submitted to SMC: 9/8/25 Sent to shelter: 9/8/25 SMC received response: 9/9/25

Standards of Care (SOC) Violated: 1, 2, 30

Allegation #1 (SOCs 1, 2, 30)

- The client told SMC staff “stacked” warning notices against him with the express intention of denying service (DOS) to him and his 7-yr-old son. He received 4 written warnings for the same event and an immediate DOS within a 20-minute period. The warnings were all either false or “petty,” e.g., for accessing the refrigerator. The client had been granted access to the refrigerator because he has a special diet. This reasonable accommodation was granted by the site manager. One of the warnings, the one for which he was DOS’d, involved taking a photograph of the sign-in log page. The write-up says there were multiple names on the list. This is not true. His was the only name on the page that he photographed. The person who “wrote him up” falsely stated, in writing, that there were “multiple clients’ names and information” in the photo.
- *The shelter stated the client took a photograph of the logbook without permission. He had been informed that this action is against policy, regardless of whether names are covered. The client was written up the same day for entering restricted areas without staff supervision. He was informed that all clients must be accompanied by staff when entering these areas. Another staff member reported that the client stated, “You will see me Monday.” The staff member felt threatened. Multiple staff reported that the client was yelling and being rude and cursing them out after being reminded of the rules. The client displayed disregard for staff instructions and program policies. He also attempted to use appliances without staff assistance. Clients are not permitted to handle appliances directly, to prevent damage. The Client was DOS’d for taking pictures of logbook and not for the write ups. In our program agreement that the client signed says no video taping or pictures are allowed on site and that this can lead into an automatic DOS.*

Bayview Navigation (29)

Submitted to SMC: 8/29/25 Sent to shelter: 9/17/25 SMC received response: 9/22/25

Standards of Care (SOC) allegedly violated: 1, 2, 15

Allegation 1 (SOCs 1, 15)

- The complainant says his backpack was stolen by another client while he was in the shower. Over \$1,000 in property is missing, including a \$500 Motorola phone, \$60 earbuds, two chargers, and clothing. Staff refused to assist even when he showed them the thief was in possession of his pack.
- *Shelter staff investigated and concluded that Mr. Moore retrieved all of his items except for the backpack itself. They gave him a replacement backpack. In the log of events there is mention of a staffer who the complainant felt was withholding information and talking about him to another guest. This was not found to be credible. Records show that the grievance was closed.*

Allegation 2 (SOC 1)

- The complainant filed a grievance against the shelter using the internal process, for failure to act after he reported the theft mentioned in Allegation #1, but they did not respond, which they are required by their own rules to do.
- *The client submitted an internal grievance which was officially recorded. An investigation was done and the client met regarding this with the Assistant Director on two separate occasions. The client was an active participant throughout the process and was notified when the grievance concluded as well as being told the findings and outcome.*

Allegation 3 (SOCs 1, 2)

- The client was falsely accused of disparaging and threatening other clients. Then he was DOS’d for this. Staff threatened him implicitly with physical violence in the process.
- *The shelter reported the client received a non-immediate DOS for breaking shelter rule 2H, verbal harassment, intimidation, bullying of other guests, staff, or volunteers, in which he accumulated*

(3) three within a 30-day period. He was able to stay on site until his scheduled hearing on which date he received three additional grievances for the same shelter rule. The hearing decision was upheld. He then requested an arbitration hearing. The decision was upheld.

Ellis Hotel (30)

Submitted to SMC: 9/11/25 Sent to shelter: 9/12/25 SMC received response: 9/19/25

Standards of Care (SOC) allegedly violated: 1, 8, 30

Allegation 1 (SOCs 1, 2, 30)

- The complainant asserts he was entering the shelter with his Case Manager and a staff member mocked his stutter. Staff did not exhibit the expected standard of professionalism in this interaction.
- *Management was unable to confirm that the alleged behavior occurred. However, they acknowledged the seriousness of the concern raised and the impact that such behavior could have on the client wellbeing. Mockery and belittling are unacceptable. All staff are being reminded of “the expectation to interact with clients with dignity, respect, and sensitivity to individual vulnerabilities.” Additional training will be provided regarding ADA awareness, respectful communication, and trauma-informed care. Supervisors will continue to monitor staff conduct to ensure all interactions reflect professionalism and adherence to SOC guidelines.*

Adante (31)

Submitted to SMC: 9/11/25 Sent to shelter: 9/12/25 SMC received response: 9/22/25

Standards of Care (SOC) allegedly violated: 1, 30

Allegation 1 (SOCs 1, 30)

- The complainants assert that a staff member has been consistently rude and disrespectful to residents at the site. He has also been “inconsistent in the way he provides services,” often “creating new policies based on how he is feeling and what he is willing or unwilling to do.” These issues occur most often at the hotel’s front entrance. At times, he requires residents to empty all items from their bags into a plastic container, while other times he does not. In some cases, depending on his mood, he will sit at his desk and instruct residents to bring their bags directly to him, without explanation, while staring at them as though they should already know what to do. On another day, however, the process will change, and when residents question the inconsistency, he becomes dismissive and tells them to “deal with it.”
- *Management spent two days observing the staffer in question to see how he treats guest and performs as security. Based on this he's very consistent, specifically when working at the security post. He is very thorough when checking the property that's brought into the site, and finds a lot of contraband. Guests that complain or push back during the security checks tend to be the ones trying to sneak in property that is not allowed on site—alcohol, weapons, lighters, appliances, etc. One area where more training was found to be needed is in how to explain to guests why certain things are not allowed. It was noted that since the complainant was made anonymously, this was the extent to which the matter could be investigated.*

Sanctuary/ECS
Client 1 (34)

Submitted to SMC: 9/22/25 Sent to shelter: 9/23/25 SMC received response: 9/26/25

Standards of Care (SOC) Allegedly Violated: 1, 30

Allegation 1 (SOCs 1, 30)

- The complainant reports that while she was with her IHSS worker, staff demanded that the worker downsize the complainant's property. The worker was taken aback, as enforcing shelter property policies was not part of her role. The staff became irritated and began asking if she could understand, if she spoke English, and then raised their voices, insisting that she clean out the locker and reduce the client's property, citing health hazards. The staff behaved "rudely and made racist remarks toward the worker." Feeling pressured, the worker opened the locker and immediately noticed an infestation of bedbugs. Following IHSS policy, she sought guidance from staff, since the proper protocol would have been to leave and allow the site to handle the issue. Instead, staff began yelling, "making a scene," displaying disgusted expressions, and demanding that she bag the clothes. Concerned for the client, the worker put on protective gear and bagged the clothes, assisted by a male staff member. She then attempted to move the bags to a storage area, but staff told her to take them outside. Once outside, they demanded she throw the clothes away. The worker told the client she was uncomfortable with the staff's yelling and would need to depart.
- *Staff denied instructing the IHSS Worker to throw away any of the complainant belongings or making any racially tinged remarks. Staff have been welcoming the IHSS very warmly and have not shown any disrespect towards the IHSS worker. The IHSS worker discovered a large infestation of bed bugs. The facility staff were notified so that the bed area could be treated. Staff asked the complainant to bag her belongings so that her bed could be treated for bed bugs. Staff told her she needed to wash her clothing and bedding so that her bed could be treated and she refused saying her worker needs to go to the pharmacy. Staff repeated that they needed to get her things washed and treated. The IHSS worker came back in a hazmat suit and mask and filled up a bag with papers and some shirts. The site director was called over and told her that these things may need to be discarded due to the degree of infestation. She then said, "throw it away, I don't care." So the bag that was filled was thrown away she was given another bag to fill. She said couldn't do it so they told her worker again that her things needed to be washed and treated. But complainant insisted that she needed to go get her meds from the pharmacy and not to worry about the bed bugs. Staff repeated that it was imperative to get her things washed and treated but the client refused to cooperate. Thereafter, staff left her alone. The site also stated that all staff are trained in safety measures, and de-escalation. All staff have also completed all annual training.*

Sanctuary/ECS
Client 2 (35)

Submitted to SMC: 9/22/25 Sent to shelter: 9/23/25 SMC received response: 10/7/25

Standards of Care (SOC) Allegedly Violated: 1, 2, 30

Allegation 1 (SOCs 1, 2, 30)

- The client reported he was physically attacked by another resident after a dispute over a hat. The assailant struck the complainant multiple times, causing bleeding wounds, near loss of a tooth, and chest injuries from both biting and body blows, leaving the complainant with "difficulty breathing" and reduced mobility. Staff intervention was minimal and ineffective. The complainant, who defended himself only with a chair and, according to him, did not throw punches, is disabled and was particularly vulnerable. Following the assault, the shelter refused to release the assailant's name to police, denied the existence of video, and expelled the complainant from the shelter.

When the complainant returned for his belongings, staff had already cut the lock. Attempts to raise concerns with management were met with hostility. The complainant asserts the shelter failed to protect him, shielded the assailant, and punished the victim.

- *Staff witnessed the complainant in threatening body language yelling and pacing and screaming around Client A, Client A jumped up from where he was seated and got into a fight with the Complainant. Staff did what they could to break the fight up. Both clients were denied services. The shelter informed the police officer he can come and obtain the camera footage. The shelter has to cut locks when clients are denied services.*
- **SMC staff investigated the complaint. The complainant's account of events was unconvincing. Video seems to show the complainant instigating the dispute, gesticulating and speaking in an excited manner to the other client at close quarters for an extended period. Eventually, the other client stood up, evincing an inclination to assault the complainant. Staff held him back as the complainant retreated; however, he continued to hector the other client, who broke free from staff, ran over, and began violently hitting the complainant (who did in fact strike back, using a chair). Staff appeared to act reasonably to again break up the fight.**

Total Client Complaints FY 2024-2025*

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	
711 Post/Ansonia	250 beds														
Baldwin	179 beds	1	1	2										4	
Bayshore Nav	128 beds	2												2	
Bayview Nav	203 beds			1										1	
Gough Cabins	70 rooms														
Central Waterfront Nav	60 beds														
Compass Family UAV	130 beds	2												2	
Dolores Street	92 beds			1										1	
Division Circle Nav	186 beds		1											1	1
Ellis Semi-Congregate	130 beds			1										1	
Embarcadero Nav Cntr	200 beds	1												1	
Gough Cabins	70 rooms		1											1	
Hamilton	27 fams	1												1	
Harbor House Family	30 fams														
Interfaith Winter Shelter	30-80 bed														
Lark Inn	36 beds														
MSC South Shelter	327 beds		2/2	2/1										4 ¹	3
Mission Cabins	68 beds		1											1	
Monarch	93 beds														
Next Door	334 beds		2											2	
Oasis Family	54 beds			1											
Sanctuary (ECS_	200 beds		1	2										3 ¹	
Taimon Booten	75 beds	2												2	
AWP Drop In	30 beds			2/1										2	1
A Woman's Place	25 beds														
Total		9	11	13										30	5

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

August 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...	17
Standard 2: Provide shelter services in an environment that is safe ...	8
Standard 3: Cleaning/ Janitorial	0
Standard 8: ADA	1
Standard 9: Engage a nutritionist...	0
Standard 15: Property Storage	2
Standard 30: Training... (Was 31 before change in Admin Code)	13

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 4 - shall be held by persons with experience providing direct services to homeless people through a community setting.

Seat 7 - Shall be held by persons nominated by one or more nonprofit agencies that provide advocacy or organizing services for homeless people

Seat 12 - shall be held by an employee of the Department of Public Health.

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

FY2025-2026 Upcoming SMC Meeting Calendar:

December 17, 2025
January 21, 2026
February 18, 2026

March 18, 2026
April 15, 2026
May 20, 2026