

Draft Minutes LHCB

February 4, 2019

Del Seymour: Okay, good morning, everyone. Thank you for coming on this rainy, wet, San Francisco morning. We really appreciate your concern for our neighbors outside who are not able to come in out of the rain. First thing on the agenda we will do, we will deal with, we will go over the minutes from January. Okay, now that we've gone over the minutes do we have any exclusions or comments?

Kelley Cutler: On page nine, it says Jennifer Friedenbach from the Coalition on Homelessness. It's actually the Coalition on Homelessness.

I'd like to make a motion that we approve these minutes.

Minutes approved

Aram Hausliab: I am a staff attorney with Homebase. For those of you who haven't heard, I've announced the 2018 award for the COC competition for renewal competitions. Right when the government opened up, they did us a service on a lovely Saturday morning of letting us know. So this past September we applied for about \$40,500,000.

So I really want to thank the community and HSH as the collaborative applicant. Really getting a lot of support and hard work from HSH to put together a really competitive application. The providers in the community hear from us a ton about what they need to do in order to put competitive applications together for themselves.

And this board, themselves, really helped look at that final product of our priority list with the public moving forward. So really just want to say thank you to everyone for all their hard work, and congratulations are in order because we got-- so far, we just heard about renewals, but we have \$40,739,000 that exceeds or total request from last year. And we haven't even heard about our planning grants and new products that we have applied for.

So we've got a lot of increases through fair market rent increases, which is great knowing this market. San Francisco had 54 of its 55 renewal projects renewed, which is pretty incredible. Still waiting on 7 new projects, 1 planning grant, 2 permanent supportive housing and we're waiting to hear about the two products we applied for through additional money that the government put forward through a domestic violence bonus. So we're excited to see that. One project was not funded. That was the tenant based rental assistance program. Unfortunate, but it was expected as you know with this board with that project, it was right at the bottom of our priority list. So that always runs a risk of not getting funded.

As a comparison, last year new planning and renewal hit \$41,476,000, and it looks very likely that we're going to exceed that going forward. So again, thank you, everyone, for putting in that hard work.

Del Seymour: So is that a done deal that assistance will not be funded this year?

Aram Hauslib: From everything we can tell, they've put out a list of awards for the renewals only, and that wasn't a renewable project.

Del Seymour: So is there no procedure to come to the city for assistance?

Aram Hauslib: The Department is aware of this going on now, and that's what they're looking at now is how to actively plan for that.

Okay. All right.

Public Comment

Jacob Donnelly: I'm the supportive service's director at Swords to Plowshares. I'm here because we're requesting your support to send a letter of support regarding our SSVS Supportive Services for Veterans and Families' renewal application and I submitted that letter. And so, under the next program year we plan to continue serving 250 veterans in San Francisco under existing Supportive Services for Veterans and Families program so that's a combination of rapid rehousing for homeless vets along with eviction prevention services. And then we have the opportunity to apply for a new category of funding under what's called Priority 3 and that would allow for a shallow rental subsidy for low-income homeless veterans for up to two years and so that would be new and so we would shoot for at least initially 60 veterans under that category.

Brenda Jewett: Just generally what is the grant amount that you're requesting?

Jacob Donnelly: Our existing grant amount I believe is \$5 million dollars but that covers two counties that covers Alameda County and San Francisco County. Under Priority 3 that would be just San Francisco and that would be 3 million dollars.

Brenda Jewett: And is the shallow subsidy an additional amount?

Jacob Donnelly: The shallow subsidy is an additional amount, yeah. Oh no, so sorry, the shallow subsidy is Priority 3 so that's an additional \$3 million.

Erik Brown: How long is the shallow subsidy?

Jacob Donnelly: It could be provided for up to two years. Our understanding is that veterans would have to retain their extremely low-income status and be recertified after a year, and if they are still extremely low income then they would be able to be recertified for a second year.

Jacob Donnelly: My understanding is that we would be working with veterans who are homeless and placing them into housing and so it wouldn't be for veterans who are currently housed. If they were recertified they would be housed at the time that they would have had to come in as a homeless veteran prior to receiving the initial subsidy.

Jacob Donnelly: There's a letter that we provided that our communications team wrote that drafted asking for you to sign off on it saying that you support Swords to Plowshares in pursuing this funding.

Del Seymour: Addressed to him, okay. Dear Mr. Kohn, on behalf of the local homeless coordinating board, the lead entity in San Francisco continuing care, I invite you to endorse Swords to Plowshares' application for renewal their Priority 2 Supportive Services For Veteran's Family SSVF grant through the VA's SSVF program office.

Kim Mae-Cutler: Can you tell us a little bit more about this grant program?

Jacob Donnelly: So, that's our existing rapid rehousing and eviction prevention program so we originally, a few years ago, were serving 1,000 homeless veterans in San Francisco and Oakland. And as the numbers have reduced, our goal now, our target goal, is to serve 250 homeless veterans. And so we can-- there's a number of different types of rental assistance that we can currently provide under that program. So it's primarily a rental assistance program. You can provide security deposit, and in many cases, ongoing rental assistance for a brief amount of time. And then we can do some eviction prevention assistance for payment of past due back rent that is leading to-- in the risk of homelessness. So somebody still has to be an eligible veteran. They have to qualify based on low income status. To get a security deposit, you can only do that every-- somebody is only eligible for a security deposit every two years. And if a veteran is below 50% of AMI, they can receive up to six months of rental assistance. If they're extremely low income, they could receive up to nine months of full rental assistance.

Jill Hrozienick of HSH. And we've been working with Swords on this RFP, and just talking about how the RFP, the requirements match their services. This is a new RFP put out by the VA. So the VA has identified 10 communities across the country that are struggling in high rent areas who want to target families who need that extra boost to have long-term housing success. So this project won't be on the NOFA list. It's a VA grid, not a HUD grid and brand new RFP.

So one thing that the RFP is very clear about is that any work that the qualifying agencies who are applying for this money are doing is that they are in complete coordination with our Coordinated Entry or Coordinated Access program. They don't want a side door. They want to make sure that this money is targeting the people that our community has already identified as in need, so that we can really kind of add an extra boost to what's out there for services.

Public Comment

Vote: Passed (*Del Seymour refrains*)

Howard Chen: My name is Howard Shannon. I'm the policy analyst for the Shelter Monitoring Committee. And today, I will be presenting the committee's 2017-2018 2018 annual report.

So I'd like to quickly begin by introducing the Shelter Monitoring Committee and who they are. The committee is composed of 13 appointed volunteers, half of whom are homeless or formerly homeless individuals. There are also four seats that are filled with individuals who have experience providing services to homeless individuals, and two representatives from city departments, one from the Department of Homelessness and Supportive Housing, and the other from the Department of Public Health.

There's a few responsibilities that the committee has been tasked with, but primarily the goal is to provide information on shelter conditions, operations, and relevant city or shelter policies that impact shelter clients to the mayor, the board of supervisors, this body, and other city agencies as well as the public. As well as monitoring city-funded shelter programs for compliance with all three standards known as the standards of care. To do so, the committee conducts site visits at various shelter programs as well as investigating client complaints.

There are three general categories of different sites that are monitored by the shelter monitoring committee. The first are resource centers, reservations centers, or drop-in centers. These are locations that provide different services for clients on a drop-in basis such as shelter reservations, meals, laundry, but the services that are available depends on each location and each program will differ what they have available for clients. In addition, the community monitors single adult shelters, which provide temporary shelter for homeless adults over the age of 18, and family shelters which provide emergency shelter for homeless families

Moving on to the findings from our site visits from last year, the committee completed 117 visits, or 100% of the mandated total. The committee also noted 114 standards of care infractions, and these are instances where the program was not in compliance with one of these standards of care.

Although the committee actually increased the number of visits that were completed from the previous fiscal year from 109 to 117, we noted a decrease of infractions from the previous year, dropping from 154 to 114, indicating to us, at least, that system wide, there has been an overall improvement with compliance with the standards of care.

We want to recognize that the Hamilton Emergency Shelter performed exceptionally on site visits last year, with zero infractions noted on all four visits that we made to that site. There were some programs that had a little bit more difficulty meeting the standards of care. These would be Bethel AME and First Friendship, where 13 infractions were noted at each site.

Out of the five standards that received the most infractions from sites were standard 3, which is related to cleaning shelters on a daily basis and providing required hygiene supplies; standard 12,

which requires that sites provide clients with sheets, blankets, pillows, and pillowcases; standard 8, which requires compliance with the Americans with Disabilities Act; standard 21, which requires that sites communicate with the clients in their primary language or provide a professional translation service; and lastly, standard 25, which require that all staff wear ID badges.

Del Seymour: So do you rate these infractions differently? Or is that, well, if the shelter is not clean and not being cleaned daily, is that the same level of infraction as someone not wearing their ID badge?

Howard Chen: At this point, we try all infractions equally. And we don't give more weight to one particular standard or not. But what we do is we keep track of how many times each site was not in compliance with each individual standard. We kind of just track it as the number of infractions noted.

When comparing the infractions that were noted in '17-'18 compared to 2016 and '17, we saw that there was an overall improvement in compliance with the standards of care. However, many of the most common issues remain the same.

For instance, you'll see that there was a drop in the infractions noted for essentially all four of the most frequently cited standards, with the exception of standard 8, which remains the same, with nine infractions noted each.

Standard 8 requires that the sites comply with the Americans with Disabilities Act, so provide--

The committee received 174 complaints last year filed by 98 unduplicated clients. This represents a drop, compared to the previous year. We've actually received 46 fewer complaints, which results into an approximate 20% decrease in complaints and 27% decrease in the number of clients who've filed complaints with our office.

Once again, to recognize some of the programs that did exceptionally well as far as the number of complaints received, Larkin, St. Joseph's, and Santa Marta and Santa Maria, all of those sites received zero complaints, at least submitted through the Shelter Monitoring Committee. However, another program that had a little bit more difficulty with complaints was Next Door, with 68 total complaints.

While Next Door also received the most complaints last year, I did want to point out that they actually had a decrease of 55 complaints compared to the previous year, which was about a 44% reduction. And so that's actually something that the committee was very happy to see, that they were making significant improvement on that end.

Lastly, sites responded to all of the complaints that were submitted with 33 receiving responses that were satisfactory to the client, 28 that were not satisfactory, required an investigation by the committee, and 113 where the when the complaint was closed either due to the client not

following up with us once they received the response or in some instances the clients just simply wished to close the matter and did not wish to let us know whether they were satisfied or not satisfied. They just simply wished to close the matter.

Similar to previous years, three standards that came up the most frequently in client complaints were standard one, which requires that staff treat clients with respect and dignity and apply all shelter policies equally, standard two, which requires that shelter services be provided in an environment that is safe and free from physical violence, and standard three, which requires that the provision of hydrating supplies and cleaning the shelters on a daily basis.

Also, on this page, you'll see a breakdown of the client complaints by category. The one kind of separate thing that we did this year was to separate out the standard two complaints from the standard one, as standard two with the safety, that is also one of the staff related standards. But due to the number that we've received, we decided to separate that out to show a difference in the complaint between just about staff, about other standards versus the complaints that were just about standard two, client safety. And lastly, although the standards of care, the top three that were most frequently were, once again, standards one, two, and three, we've noticed when looking at the data over the past three years is that although there was an increase in complaints last year, which is from '16, '17, we actually saw a decrease this year. Although we are not back to the levels that we've seen in 2015, 2016, we are encouraged by the downward trend and we will continue to monitor the complaints to see if there is any continued improvement in those areas.

In summary, what we've seen this year is that from site visits, the compliance with the standards of care have improved overall. Although the committee completed more visits, the total number of infractions across all monitored sites actually decreased. And when compared to previous years, the standards of care that sites had difficulty complying with, remained the same held the number of infractions those standards received actually decreased.

Similarly, for the client complaints, we saw 20% decrease in complaints and a 26% decrease in the number of clients that were filing complaints. Although, the three standards that were most frequently named issues remained the same. Those were standard one and two and standard three. Where there any questions from the board about the standard report?

Sophia Isom: So I see where you indicated that there still appears to be a challenge with providing sheets at Bethel and First Friendship.

Scott Walton: I work for the Department of Homelessness and Supportive Housing and I manage our navigation center and shelter programs. Since the beginning of the standards of care we have some shelters where we aren't able to offer sheets. We offer extra blankets. By the nature of the shelter and these being overnight shelters in borrowed facilities, we don't have laundry on-site.

We've done that consistently. I'm very pleased that over the last two years with the Department of Public Health, with the Shelter Monitor Committee, we proposed changes in the standard of care that acknowledge that it can be sheets or blankets rather than sheets and blankets but the shelter monitor committee needed to track based on the legislation.

So most of those complaints were based on a situation that we could not alter. Our only choice would have been close those shelters. So we're very pleased with the fact that the language going forward-- and we think it passed in October of 2018. We will now be tracking accordingly that particular set of complaints.

Sophia Isom: So it appears there's still a challenge with unprofessional behavior by staff, and so I'm just curious. I think when this came up last year, we talked about the need for training. So is there enough training or are you having a high turnover with staff that's causing a problem to make sure people are in compliance?

Scott Walton: So to put this in context-- first of all, these are great questions. Thank you. To put this in context, we want more training than we have. And yes, there is high turnover. These are entry-level jobs. People get trained, and they move on to other positions that can pay more. I put this in context that we treat every complaint seriously.

So when you see 68 complaints at Next Door-- first of all, every one of those is investigated by our provider at that site, which is Episcopal Community Services. All of those responses go back to the shelter monitoring committee. We get reports that HSH-- that look for patterns, and we try to address those. But to put those 68 complaints also in context, that is one of the two shelters that operate 24-7. And there's 121,910 bed nights at that shelter in a year, so it's 68 complaints among that level of service. It's much higher than a shelter smaller shelters. We have some shelters of only 30 beds. But I don't say that to make light of the fact that we treat these complaints.

We're challenged on training because there's a cost not only to provide the training but to backfill, especially the 24-7 shelter. You have to backfill with acting staff while other staff are in training. And so that's a financial challenge. Although, over the years we've worked with the Department of Public Health and the shelter monitor committee on our side to try to look at how we can better structure training so it's more easily obtainable. But our providers do regularly train in the case of the ECS, which is the Next Door. Example, they do regular training on the standards of care quarterly with all of their staff with the purpose of trying to retrain that whole set of training issues over each year. So that they're not just training people once. So it is a challenge, but it's something that is being tried to address. And like Howard, I am sure that we are pleased to begin to see a decrease, and we want to continue it.

Del Seymour: So I have a few questions. Instead of watching football yesterday, I spent a whole afternoon going over all these papers, which I don't normally do. So I'm good and prepared. But to kind of get back to what you were saying, Scott. I'm in the shelters all the time. And I don't

know if you can train somebody to be a decent human being. Because training is-- and I'm in there all the time and 99.9% of the staff are wonderful, but that 1% makes up a lot. And I don't think training-- you could train a person to-- just, you got a bad attitude and don't treat a person like a human being. I don't think that's training. I think that's selection. So my suggestion would be for the providers to do a better job in selection of a person. You could almost train anyone to do the job. But it's the fact they have a good attitude about being able to do that job every day, seven days a week, whatever days you working, and having a good attitude every day you come in. I just want to-- I'm not complaining or tripping at all. I'm just saying that maybe training isn't a buzzword that's needed to make our complaint level lower.

Scott Walton: Well, one I agree that occasionally you encounter somebody who will not change their approach, although we have learned over the years how to provide training to give people alternatives to acting in a negative way towards clients. And that has helped. When we introduced our Access to Shelters for Persons with Accommodations training-- and I don't remember what year that was. We saw a great decrease in those complaints and part of that training was to help people understand not only what needed-- what the clients needed but how to respond to client requests when sometimes those requests don't come in very nicely.

So we do see that that's partially trainable. The other thing is when I talk about we respond to every one of these complaints and look for patterns, that's what helps identify, no matter what kind of screening and hiring process-- as you say, it's a very small portion of people who are a problem and don't treat our clients with respect and dignity. But you may make a mistake. But that's where this complaint process where clients can either go to the shelter program staff, up the chain, and or the Shelter Monitor Committee. And those all get investigated. That helps identify a client who is-- I mean, a staff person who may be repetitive in an issue, and then they may through their own individual personnel issues, which they're the employer, they may do some training. But eventually, we've seen staff who were let go, because of the-- either the egregious nature of one incident or multiple incidents and no change in the way they act. So we have this system in place to try to this.

And it's very important that we look at these numbers from the Shelter Monitoring Committee as the total number of complaints. Some of them do get resolved. Some of the clients are unsatisfied.

Del Seymour: But it's not the total number of complaints.

Scott Walton: Well, no, it's the total number of complaints that they get.

Scott Walton: There are other ways that-- I mean, complaints go into the provider themselves. And to in any advocacy group in the community, if they're getting complaints we like those to come to us real-time so we can investigate them because if they wait and accumulate them to a total that's upsetting, the point is we can't look at the individual cases and look for those patterns. So we have a system in place that tries to address that. I mean, we will raise your concern with

our providers about their screening and try to spend some of our group time looking at different ways people are screening.

Del Seymour: But you are the contractor and they are the subcontractor?

Scott Walton: We contract with them. They're the employers.

Del Seymour: So we're the boss. This department is our funds that we're using and we should be demanding full responsibility and oversight on those employers that are affecting our clients.

Scott Walton: But we take every complaint back to them and if Shelter Monitoring Committee doesn't get a response to one of their complaints or if an outside provider comes to us with a complaint, every one of them gets passed to each of our providers and we ask them to look into it. And we look for patterns, and they look for patterns, and Shelter Monitoring Committee will look for unusual changes and things so we are doing that. I do want to be clear that we are not, though, the staff employer so we can't go to our provider if we want them to operate and say, "You have to fire this person." We have to say, "We have major concerns about this person," but they have to do it through their personnel policies, their union relationships and so forth. We have to respect that. That's the nature of granting out to a provider to run these programs, but we have seen improvement and will continue to work on that.

Del Seymour: This is really good. This is easy to read, it makes sense. So I really want to commend you for giving this report. I guess your chairman is here today? The shelter monitoring chairman is here? With Bethel and First Friendship, when we have someone with this record, what did we do? Or what can we do, kind of piggybacked on what you and I just talked about?

Scott Walton: The Bethel First Friendship around the blankets and sheets? The complaint about the ADA is a combination of ADA and the proper signage being posted. So when we get those reports, we follow up with checking with our providers as well looking for ways they solve.

The challenge in some of these sites in Bethel and Providence, First Friendship are all ones where we only are in the site overnight, late at night until the next morning or in the afternoon to the next morning. And so we work with them to try to come up with posting boards that they bring out each day and put back each day and so forth. So we are looking for solutions to solve each of the individual service issues.

But the other complaints, yes, we take those seriously and we follow up. And so not only does the shelter monitoring committee follow up, but our program manager appropriate to that program will do follow up as well to make sure things aren't left unaddressed.

Del Seymour: And I want to say we want to support you 100%. Whatever you need from us to advocate for your operation, we'll give it to you. I'm glad that you are out there, someone's out there doing the work. Well, if it's you and your volunteers and your crew doing it, thank you.

Scott Walton: It is very useful that clients have the opportunity to go either to the provider or to the shelter monitoring committee. That gives them a real choice of how they want to pursue their concern. We encourage them to do it everywhere they can. And then, we also want any outside group that gets a complaint to make sure it gets to us or to the shelter monitoring committee so it becomes tracked and followed through in the process.

Kelley Cutler: First off, I want to say it's really tough for service providers to find folks to work, who can afford to live here, and so it's a challenge. It's a huge challenge. I think we spoke about it this last year with the navigation centers, are those going to be incorporated?

Scott Walton: We've had two challenges. One, the shelter monitoring committee-- part of the change that occurred last October was to change the fact that, for all the years of its existence, every two years, everybody went off and had to be reappointed. And so now they're going to a staggered, the two-year terms but every other year it's half or every year it's half. So that was a problem that left them understaffed.

And then, we are also negotiating how the standards of care apply to navigation centers because a few of them don't fit. So that's underway, and we're just waiting for them to be up to staff. And to be honest, we were waiting to launch our last two sites and will I assume this year and 2019, we will be adding that when the committee has the staffing to visit these additional sites. 117 visits a year is pretty overwhelming when they have a committee of mostly volunteers, and some of the committee members are excluded from visiting because they're very much involved with a particular type of program, so they can't visit those programs. So they need to address that.

Andrea Evans: It is very detailed and helpful. And I really enjoyed the cover letter. So please thank your chair. So regarding the data of complaints that don't come into the shelter monitoring committee that just go into the service providers, is there a place where we can access that data to find out how many of those types of complaints exist and how they're resolved?

Scott Walton: The place that we're tracking that data would be letters related to denials of service. We have a separate process that involves the shelter grievance policy that's established by the shelter grievance advisory committee. And there's a shelter advocacy contract that supports advocates to work with clients if there's a denial of service through the hearing arbitration process. Then that shelter grievance and the shelter advocates do keep data on that issue. We do not have an automatic reporting system for all complaints that our providers get. Although when we monitor, we look at their process. When we do our program monitoring, we do look at their complaint records and complaint handling process. But we have not asked for reports on them. We do get critical incident reports any time emergency service personnel or whatever are brought to an agency. We have not expanded it to getting any sort of report on all complaints that they've received. We do review that they do have a complaint procedure process. And if a complaint rises to our department's attention, our main focus is to make sure they follow

the procedures as they have established them. And part of the posting is that the procedures be posted.

Andrea Evans. But do you ask the service providers too to tackle complaints? Or only if it's a denial of service are they required to even be collected?

Scott Walton: We've only been doing the shelter monitoring committee's reporting and the shelter grievance reporting. We have not, at this point, asked them to track every complaint that they receive and process it and keep track of it.

Andrea Evans: So then, I guess-- and I understand that the work is very hard and I'm not trying to suggest the service providers aren't doing the very best that they can. But I'm just wondering, what are the consequences for--not getting the full picture of what might be going on in the shelter if that information isn't coming to you. What are the consequences for the providers that are regularly having some pretty serious deficiencies in their standards of care?

Scott Walton: Well, the standards of care, that's through the shelter monitoring. I mean, we follow-- as I said, the program managers do follow up if there's a concern. So when something is repetitive particularly-- I mean, most of the complaints-- so if they do a site visit, and they go out and see something and something's missing, not posted or whatever, between their follow-up and our program manager follow-up, we see that corrected right away. If it repeats, we look for solving solutions. But if somebody is not following the standards of care, then we can go through our internal process to look at are they in violation of their contract or grant agreement and how we process that. I mean, obviously, we balance that with our great concern of trying to keep as many shelter beds available as possible.

We want them to be of quality service, so we're balancing all of those components as we go. So we don't have an established set of consequences that are applied automatically, so much as we have a follow-up procedure with the goal that our partners, our clients, our providers, our services. We're trying to partner to make this system as good as possible and continue to keep it as good as possible or make it better, and so that's our process.

Del Seymour: So just to piggyback on that, are you able, as a department, to use, say, the figures or the infraction record of a provider for the next RFP?

Scott Walton: Well, an RFP process gets put out and, to be honest, an RFP process you'd state what you want and how you want it delivered, and anybody can apply, and we can't issue to the screeners the history of a provider because we can't, but this department can then lay that on after the review panel has reviewed, and they could decide, "We are not going to proceed with this provider even though they scored well on the RFP." But you can't interject into an RFP process, "And here's the history on this provider."

Because it wouldn't be fair when you have a new provider that there's no history, so we have to follow city procurement procedures, and we do that very carefully, but we don't wait for procurement. Every year we are adjusting. With each monitoring visit, we send follow up with-- we do regular monitoring, but we do a formal annual monitoring, and with every monitoring, we will send results of that, and that's where we can interject. And besides what we saw, we're seeing this complaint occur three and four times a year, and we'd like that addressed some way. So we try to build those things into our process with our providers.

James Loyce: My question has to do with the-- if there are continuing deficiencies in a provider's performance, does the department itself create a corrective path to the plan with that provider so that they can monitor whether or not they're actually meeting the corrective goals that are stated in that plan?

Scott Walton: I mean, that is one of our tools. That's probably the one that's farthest down the line because we don't want to wait to have to go through a formal process of creating a performance plan and monitoring. We want to bring these complaints and problem solve right away. So we have program managers, great staff who work with these providers on a regular basis, and they will look at-- we get a monthly summary, in advance of the quarterlies, and so forth. They will look at those things. They will call up a provider and say, "Hey, what's going on?" They'll raise concerns about an increase and not a decrease or staying the same on certain types of complaints, and then that's what they'll work at. If we don't get change, then we can do just what you're talking about. Our program and our contracts department can craft a performance plan and issue it related to them not being in compliance with their grant agreement. And grant agreements do include standards of care.

James Loyce: Does that mean that when you're noting these kinds of things, and your program managers are or you have to resolve them with the provider that you put a note to the file to indicate that you've had these kinds of contacts, just in case you have to go further down the line.

Scott Walton: I mean our providers, our managers do it a number of ways. They track their emails because a lot of it will purposely do it in email so there is a reference or they will respond after a meeting with an email summary, things like that. So we try to create a method of tracking. We also need to say that we're doing this as a partnership. Our city could not run the systems we have if we had to use only city employees. The cost would way exceed the cost now. And we'd love more money infused into our program and we want more beds but we have to manage and so we try to treat all of our providers as partners but hold them accountable and it's that balance of both things.

Andrea Evans: Can you just remind me that where does the mandate of 117 site visits?

Howard Chen: So the shelter monitoring committee is required to visit each site a total of six times. It's going to be four unannounced visits where we members show up to do a site session

and then also two announced visits where they come through and survey shelter clients with previous notification to the site.

But one interception to this is going to be the interfaith winter shelters because they are open, not only several months out of the year, we do not go there six times a year. But we do try to make at least two unannounced visits and one announced visit to the interfaith sites.

Kelley Cutler: So it's just kind of challenging because we're talking about some shelters that are really big and then some that are smaller so it's just a little more complex and with the data which-- I'm wondering with the shelter advocates and some of the data may be coming from there could I think help. Because when I was reading through this yesterday as I wasn't watching the Super Bowl....The ones that were actually kind of stood out more to me were where they were zero.

Because I'm like if for example for number one, with treating client complaints equally with not having complaints, just being in the same office space with shelter advocates, so I see folks coming in on a daily basis. So if there haven't been complaints within a year, this is kind of surprising to me. And also I'm kind of wondering where it takes from meetings with the shelter advocates to maybe the next step to get to you guys. I'm saying is that data? Can that actually be incorporated somehow? Do they show in other complaints?

Scott Walton: So they are two different processes that are not connected. They're parallel is the way I describe it. Shelter monitoring committee is focused on the standards of care but visits and hearing from clients about people that didn't meet and if they get a complaint that doesn't fit that, they will make sure the clients know they can come to us or go to the provider or go to some alternative.

The shelter client advocates are focused around specifically people who get to that point of denial of service. They get complaints and they pass those on but we don't channel someone with just a complaint about a shelter to the shelter advocates because we want to keep them available to represent clients who are in the denial of service hearing and arbitration process they do keep statistics on that where they know how many actions were, how many denials were taken, and how many hearings happened, how many times they were present at hearings and so forth through that whole process.

It's not that one tails into the other. As much as the advocates may refer somebody to Shelter Monitoring Committee who's just want to say I wasn't treated well. Were you denied service? No. That's where you could go or you can complain to the Shelter or both, and Shelter monitor committee if it's related to a service, wants to get the client because it's a time-limited grievance process. Get the client into that process affected.

Kelley Cutler: And just wondering if the data can somehow-- it seems like it's just kind of naturally overlap somewhat.

Scott Walton: Well, what I would suggest is that if you're asking the Shelter Monitoring Committee to present an annual report here, you might want to do the same timeframe and request the Shelter Client Advocates to present a report here as two separate processes, but you'd have the material in front of you and then between all of us we can help answer questions because it's a complex-- we try to make it as simple for clients as possible, but it's a complex system when you're looking at different sets of data. But that would be a request from your committee to these various entities rather than the Shelter Monitor Committee wouldn't take that on in their charter. I don't think.

Del Seymour: Yeah. So there's really three batches of information, three batches of complaints, but I'm sure the largest one is probably from client to the front desk. Now, do we want to know that or do you want to know that? I don't know. If we want to know that?

Scott Walton: I mean our department is very interested like as I said that our providers have a clearly stated and posted complaint and grievance policy. So clients know how to make complaints and what they can expect when they happen. We have not to date ask for reports on this. We often though, if a complaint comes that surfaces to our program manager level, we'll go back and we'll ask for all the details and then we'll get details from the provider. It shows that the process is working well. They'll say, "This is when we got the complaints and this is the steps we took and we have some providers that are activating restorative justice and they've used those processes." And so forth. So that we know that we can ask for that material and if we'd asked for some summary and we don't get it, then we have to explore what's not happening in the policy that you set. But we've not asked for those numbers before this. And I don't know if we've even explored it, but the point is we explore that the processes are working.

Howard Chen: Just for a quick addition regarding the relationships when we shut the client advocates monitoring and maybe I can say a little bit more about that because I'm actually the person who takes in all the client complaints. And so we do have very close relationship with Shelter Client Advocates because we do have two pretty distinct rules. Anytime we get a client comes in and does a report that they happened in denied services, the first thing I ask is, "Have you contacted the Shelter Client Advocates? Firstly because we know that there is a time limit update three days that they have to get this process going and so we don't send folks over to the Shelter Clients all the time with the client advocates. They will contact us if they've met a client, and they report some sort of issue. A lot of times they will either send that client to meet with us directly, or they can sometimes provide a summary of the complaint, some contact information, refer them over to us that way so we can also follow up with that client as well. So I'm not sure how the advocates keep track of their own complaints, but whenever the shelter advocates refer a client over with an issue, if we can, if it falls within the standards of care, we will submit a formal complaint about that as well.

Del Seymour: And so you have an open door at your office?

Howard Chen: So our office is actually in the Department of Public Health building on Howard Street. Unfortunately, we are currently down to one staff person, and so we have had to reduce our drop-in hours. But as soon as we fill that position, we will be reopening it up to four days a week, Monday through Friday.

Public Comment

Joseph Keenan: I'm a member of the Shelter Monitor Committee. I'm a member of the Shelter Grievance Committee. I'm here with my own statements and nothing that represents the committee. I think you all asked a lot of great questions that comes down to the point that, How can our shelters be as awful as they are now, and you all are getting some statements from the committees that doesn't reflect the terrible places that our shelters are? The unsafe places. The dirty places. Places where the members of the staff are regularly abusive to our community members who are in the shelter. I mean, I can speak mostly about the Episcopalian shelters.

Those are the ones that I know about. But I can tell you right now that you ask 10 people who come out of the shelters, Next Door or Sanctuary, ask them, "If you want to make an impact on creating change in the shelter, who do you complain to?" Not one will know they can go to the Shelter Monitoring Committee. They will all say, "Oh, I guess you go to Emeka?," who's the head of Sanctuary. I can go on and on about how our system is not set up for you all to understand the problems. If our shelters aren't good, people stay on the streets. And how do you know so much about the shelters. So I lived in a shelter for one year. At the sanctuary. Now, I don't live in a shelter. I've climbed out that system, and I'm dedicating my life to make things better for the whole system.

Olivia Glowacki. I'm at the Coalition on Homelessness, and I just have a question. So I want to know how can we get complaints that we're getting from other clients who aren't reporting-- how can we give those to you guys so it's more centralized that is because I have around two dozen complaints for one of the shelters on this list that is listed as having zero or one complaint. So I kind of want to know how you get that all together?

Howard Chen: So we can exchange contact information later and you can send me any complaints from shelter clients. The thing is we are limited to taking complaints about the standards of care. But as long as they fit within those standards of care we can submit a complaint.

Dawn: Through my trials and tribulations of addiction and recovery and addiction and recovery, I got evicted in May. The first navigation I was at was 13th of this year. I actually got us to be able to carry Narcan. Narcan actually helps people prevent-- it actually puts them into immediate opioid overdose. Excuse me. It actually puts them into immediate opioid overdose.

Since good Friday this past year I saved at least 50 people from going on into overdoses. And the second medication I was at is Fifth and Bryant?. Now the staff at Fifth and Bryant, they actually

need actually to be taught how to talk to people like they're human beings. No person, regardless if they're homeless or not, needs to be talked down to, especially if they have children. I was at Hamilton, never talked to by staff like that at all when I was at Hamilton twice.

Regardless of what anybody goes through, living in San Francisco, you're 0.5 seconds away from being homeless yourself as expensive as this city is. I've been homeless on both coasts, and I've never been talked down to as much as I was talked down to as I was talked down to at Fifth and Bryant. I nearly threw a cup of water on one of the security guards because she was dismissing me. You weren't my conversation to begin with, why are you in my conversation now.

Brenda Jewett: I was going to ask you what do you suggest doing in those circumstances or how would you address them? What would be your solution to those issues?

Dawn: Well, put it this way. I've worked on both sides. I've been caregiver to caregivers, I've been in and out in a psych ward, I've never been arrested in my life, but people, even the cops, even the cops, we all need mental health training. We all need to learn how to deal with the mentally ill because it's not just a stigma. It does exist. Addiction does exist. Regardless of what anybody says, we're all recovering from something. And I already told the person that's in charge of the needle exchange and everything. I want to carry it to the east coast because we don't have shit like that on the east coast. Excuse my language, but we don't have stuff like that. I literally helped two or three of my friends get clean right on my couch, kicking heroin. And even my best friend died from a heroin overdose. That's why I'm so passionate about this. Plus I worked in the medical field too, so I've seen both ends of the spectrum. I worked in a level three NICU, so. Thank you, guys.

Del Seymour: Thank you. And Scott and Howard, I just wanted to say it may seem like we were getting into you a little intense there but we're all on the same team. Now, Scott, I've worked with you for a long time, and no one I know hardly has the passion that you have for treating people and helping our homeless. So I'm just trying to keep our game stepped up man, that's all.

Scott Walton: I appreciate it. I appreciate this kind of dialogue. The more we do it the better. I take to heart that some people are saying people don't know about these committees and so we need to look at that issue, that navigation centers aren't in this process yet because there's limited capacity and we're trying to build that in. But I hear these complaints, or if individuals from the coalition or anybody who want to send complaints to Shelter Monitoring Committee, if they are appropriate they will get them to us. I mean, the point is we have some back systems that work. What we're interested in is real-time complaints, meaning complaints within a short time of receiving them with as much detail as the client is willing to share so that we actually can investigate. We can learn from them.

Over the years, we have changed our programs and improved them based on complaints. Occasionally, our providers have dealt with a staff person who isn't changing and they've terminated their employment, although again, that's under their personal policies, not the city's.

So I feel like the system can work, but it sounds to me like part of it is making sure that all the complaints get to people that can address them. And we try to treat that the same way as we treat coordinated entry. No wrong door. So if you go to Shelter Monitoring Committee and they can't help, they get to someone else. And the same when things come to our office, we encourage people to use the systems that are available to them and so forth. So I don't take it personally. I will try to explain how the system works because it is, from the back-end, complicated because we're trying to make it as easy on clients as possible. But I do want to make sure that anybody who gets a complaint or has a complaint can find out where to go.

Del Seymour: And all complaints don't get to you, don't get to the-- and then I will say in the last 30 days, probably, because I walk the streets, three people come to me for help that are having a problem with the shelter. I've gone over to the shelters with them and got it resolved within the hour.

Scott Walton: And that's one of the ways that we hope that happens because if they've got a complaint at a specific location with a specific provider, the most expedient way to address it, hopefully, is that. But if when you and that client walk away, they are unsatisfied, Shelter Monitoring Committee is just a great resource. And it's independent. And that's why they're not moving with us. DPH is providing us staff, so it's independent from HSH, which oversees the grants.

Kelley Cutler: Just going back to discussion that we had last month at the last meeting about starting up SAW process again, to be coming together, to be looking at shelter process I think would be very good to do that.

Kerry Abbott: I'm the deputy director for programs at HSH, and I'll go through the slides. I did want to preface the presentation this month by saying that I'm aware that our outstanding request from the Homeless Emergency Service Providers Association for an update on our procurement process for monies that were added to the HSH budget in 18-19. So from my understanding from our admin and finance team that everything is in process for either being procured or being added to the existing contract where appropriate. There's one outstanding item that was just moved from the department of public health for mental health clinical services for families in shelter, and that we have decided to conduct a community-stakeholder meeting to get additional input on how that funding should get deployed. We intend to do that within the next month and so should have an update on that process for the local board next month, but we don't have enough guidance just from the board of supervisors and we felt we need some guidance from our producers and clients before kicking off that process.

Del Seymour: You don't have the date yet, right?

Kerry Abbott: It is being set up between our family shelter, family coordinated entry, and family permanent supportive housing staff.

Kerry Abbott: So our monthly report will cover our housing subsidy placements and any other program updates. Our exits from homelessness-- sorry. So exits from homelessness this month. We had 959 exits so far in fiscal year 18-19. This data is through the end of December of 2018. 284 through problem-solving, and 675 housing placements. We are not yet at 50% through the end of December partly because of when the different programs come on and partly because of the slowdown in the housing ladder programs, but we'll get into some more details. This is our homeless outreach team data for December. 373 street outreach attempts, and 314 successful engagements, and 438 referrals.

Obviously, some people received multiple referrals, and 173 were successful and linked with services. For temporary housing, shelters, navigation centers, we have the 311 waitlist request at 1,117 in December. We had the available beds versus the new waitlist request. So a little bit closer to keeping pace despite obviously having a long backlog. And then our occupancy rate for all shelters was just over 92% in December, and our bed utilization is broken out there by shelter. For navigation centers, these are the monthly intakes. They were just over 200 in December.

The pathways to housing beds have obviously much slower turnover than and the time limited beds. We also have found that we are meeting the permanent supportive housing referral request needs with the current pathway to housing beds and so trying to figure out the right balance so that we're not keeping people in navigational centers longer than expected.

Del Seymour: So those clients that you are only giving a shower to who mainly get on a bus, where are they at in here?

Kerry Abbott: So they are in the Homeward Bound number.

Kerry Abbott: So if we're problem-solving, 284 people were served through December. Again, so we're almost 35% to the total fiscal year goal. The total fiscal year goal is , pardon the phrase, the total goal includes the new problem-solving that we implemented in our coordinated entry access points and so the numbers have been gradually rounding up since October so we expect to actually be closer to our percentage of goals as we get further on in the fiscal year. This is the Homeward Bound summary here today.

Yeah. And actually with our problem-solving resources we are trying to be more creative about how to help people travel safely, where they can stay while they're waiting to travel, whether they need additional things, I mean our Homeward Bound staff has always been really creative. They'll buy diapers and other things that people need to be able to travel the distance.

Del Seymour: Is it difficult sending a single mom with two kids back to New York or Florida? Have you done that and how did you do it?

Kerry Abbott: I think it would be interesting to bring in the Homeward Bound staff to talk about some of the specific instances but I would say what our mandate is right now is to try to assist

people even if the traditional Homeward Bound methods were inadequate, we're trying to figure out new ways to solve those clients and help them return to family in a way that is as humane and safe as possible.

Del Seymour: Would you consider air travel?

Kerry Abbott: We're looking into the implication of using air travel, yeah.

Sophia Isom: I have a quick question. And so regarding the youth under 18, are you guys tracking where they're going within the system?

Kerry Abbott: Yeah. So far young people under 18. That would be done through the family reunification programs run by Huckleberry. So they're actually reunited directly to parents or guardians.

Kerry Abbott: So for housing, we've had 675 housing placements so far in '18, '19 and about 41.3% to goal. Most of those increments are afforded housing, 123 in rapid rehousing. And in terms of the rapid rehousing, I know there have been some questions about the numbers in rapid rehousing. What I know from the analysis we've been able to do so far, is that the family programs are having very low turnover right now. We're not seeing a lot of new slots opening up so those end up pretty stable. And, of course, it's still taking a fair bit of time to place new families. That simply put, the monies not going as far as it once did for family rapid rehousing. And then with a lot of the new programs for youth, we just launched the Rising Up placements in January. And so again a lot of the numbers for rapid rehousing for '18, '19 are projected to happen in the last six months of the fiscal year. I know that we placed, I think, four people in January through Rising Up and that'll continue to grow every month. Housing ladder is not very active in the summer. I think there actually were a few placements that maybe did not get into this report in time. It takes awhile for us to verify new leases with the housing authority. There have been some moving on initiative vouchers still out on the street that they allowed us to honor. And so we're really excited to see those placements come to bare. And so in the Bristol Hotel conversation on that possibility and we're looking for other ways to try to bring vouchers back in that system to continue to have a housing ladder. It definitely will have an impact on our ability to free up permanent support housing units if we're not able to bring in new vouchers for that program.

So some of the program highlights-- the 2019 length of time homeless census. I wanted to note there were over 800 people participating in the point in time count, some of them in this room, very many of them from our non-profit partners from our planned population and loads and loads of the staff from, not just our department, but also HSA and DPH, other agencies serving homeless clients, so it was really wonderful. I was at Civic Center, and I got to see a lot of the people coming in and getting their maps and participating. It's always very heartening to see the number of people who want to participate in something they see as constructive.

Kerry Abbott: We expanded emergency shelter due to inclement weather. We have mats available at MSC-South. Those are available all the way through, and then we're adding additional beds as the climate policy warrants. We currently have beds open-- or cots open, rather, at Next Door. Those are open, currently, through tomorrow. And looking at the policy with our shelter team to see if it warrants additional expansion with the cold coming later in the week. And then as HomeBase updated, HUD announced our preliminary awards for the 2018 Continuum of Care Competition. Just to your early questions, we are making a plan to ensure that the Tenant-Based Rental Assistance tenants have stable subsidies. We're working with HUD to figure out how long we can extend the existing grants and to figure out whether we-- for example, if we have underutilization in another grants.

Kerry Abbott: So preliminary support of housing, we're fully rented up in the two family sites that opened late in the year. Lots of folks moved in. It's been, I mean, kind of amazing to have our clients moving into the Mission Bay neighborhood and moving into some really beautiful new units. And we just had a groundbreaking this month for 2060 Folsom for 29 units for homeless transition age youth. Then Navigation centers and shelters, their Fifth and Bryant Navigation Center's open.

We had 500 clients enrolled in the one system in December families were assessed by Access Points in December, 78 at Central City, 23 at Bayview, and 15 at the Mission Access Point. We had 35 referrals made for families who are visiting Access Points in December. We had 228 adults assessed during December, for a total of 4,404 by the end of December. And I just wanted to note that for Coordinated Entry, the family Access Point evaluation will be starting up in the spring to look at the first year or so of operations for family Access Points.

So out in the community, we have 4 Corner Friday. The next one coming up is February 8th, from 3:00 to 4:30, where we go out and set up tables and give people information about resources at HSH and our partner, Provider Resources.

Kerry Abbott: Our department employment opportunities. We have several. Of course, I'm the most knowledgeable about the ones in programs. We're looking for a program support analyst, some of these making positions permanent and some new positions. We're trying to hire, for example, a new program support analyst for the shelters and navigations centers that to help with all the expansions within the department. We still have open the principle analyst for adult housing so that person really will be the central person in bringing on new permanent supportive housing and overseeing the portfolio. So say that again, you're confirming HOSC will be here in March?

You are confirming that HSOC will be here next month?

Charles Minor: that is correct? Sam Dodge. I can put the request for commander lazar as well but my understanding was that Sam was in fact the point person for meetings and community boards so I can extend that request through Sam.

Del Seymour: I personally talked to Mohammad. He said if we invited him he would be here and that's who we would like to see. We love Sam and all but we want to see the directors.

Kelley Cutler: Also, when we're talking to Sam about something and he's like, as SFPD, it's really important for SFPD to be here when HSOC presents because they play a major role within HSOC and the response. I was thinking they were going to be here this month, I have a lot of concerns, I continue to have a lot of concerns -- I've been saying this for the last year since they started -- but particularly here where I was looking at the program highlights, talking about the 25 mats in response to the weather.

At the same time that there was only 25 mats when there's almost 1,200 people in the shelter waitlist, we were seeing sweeps across the city. It seems like during the winter the sweeps are much worse during storms. We continue to talk about this and around this issue. This is a major human rights violation that's taking place all over the city and HSOC is coordinating this effort in response and they're not held accountable and they're not coming and really being transparent. But I really do think that Commander Lazar needs to be here as well as Mohammad or Sam or any of them.

One of the issues that we have when we have a tour of a facility is that it is considered an active meeting and open to the entire public. That's something we can speak on and we can figure out if there are certain members who would like to go. Maybe see if we can arrange that. Again, the issue with the whole boarding going is then that becomes a meeting.

Del Seymour: We never asked for the whole board to go and they know that. Not trying to be combative but in a while.

Kelley Cutler: It's been over a year and there's been no transparency. It's ridiculous.

Andrea Evans: Lots of things are happening, and we have been told that as part of the policy community that we would be smooth exchanges with our action making policy changes when we have no insight into them whatsoever. So I think Sam is great and having him come back-- I don't know, actually, will get us much further than the last time he was here, unfortunately.

So I think it's time to really figure out a different way to get more information. And I think more sunlight to be brought to the issue.

Del Seymour: Well, we're representing the people that are out there, the tenants, this Board up here. And a counselor comes to us and says, "Who's running this thing? HSH or SFPD?"

And I mean, it sure looks like SFPD is running the homeless management on our streets. And if it is, say it.

Kerry Abbott: So, I mean, the project management for HSOC has just, in the last months, had DEM step into it more to try and give a little bit more hands-on oversight, to keeping track of

what's going on where and who's doing what. I think that that'll be really helpful. DEM has been a really great partner in both hosting the different departments and structuring the meetings and structuring the work for-- most of the departments have one person there max. And many of them not all of the time.

Kelley Cutler: And you're heads of departments there, but what about the community? What about service providers? What about people experiencing homelessness and the transparency, the policy, all of these things are not coming out. It's like it has to be done-- it was funny you're wording was some sunlight on it. Sunshine is like how-- there is no sunshine in, the only way you can seem to get any policy or any information is through a sunshine request. There's just no transparency at all.

Del Seymour: Well, the presentation was great, as always. I've got a couple of questions that are not on here. Maybe, sometimes I like to sit down and entertain how we can get some other presentations from you, was having some very-- two, what I felt were two very important measures that were initiated by the mayor in the last few days regarding your department. And I would have liked to have seen those presented. One being where she has a bill that you can bypass the recruitment process to fast-track our shelters. And I would like to get a report on the department's attitude towards that bill.

Kerry Abbott: This is the emergency ordinance. It'll go before the Board of Supervisors.

Del Seymour: Yes. Has it gone? Has it passed? Where is it at?

Kerry Abbott: It has not yet. I believe it's going to get introduced, I think we just saw an email list of hearings but not all on the board yet. I mean, obviously, they're all on the board calendar. But it's just it has been introduced, it has not been heard yet.

Del Seymour: Okay. And the bill that will allow shelters to be built without a permit so that we don't have the, "Not in my backyard," people coming complaining about them? Where is that at? No, I'm serious.

Kerry Abbott: No, there are two ordinances, one about procurement and the other sort of the planning, DBI role. I'm not sure it's quite as empowering as all that. And that has also been scheduled but not heard yet. I think, hopefully, we can get a list of when those hearings are out to the board.

Del Seymour: And the last thing, I just want to make a comment on. HSH is a department that's very close to the community. That's what you all do. You do community. And we're part of this department also. So I was very concerned on Friday when we had one of our city's cultural events, the Martin Luther King black history month celebration at the rotunda of city hall with the mayor, the police chief, the fire chief, Department of Public Health, Department of Public Works, almost every department in the city was there, and I don't remember seeing you guys. We

were there. So I just want to advocate for the department to be better at community events. Whether it's for the Chinese community, African-American community, the LGBT community. You have 117 people there. Maybe you could bring one out to send out to one of our community events so the community will feel that you really are in this.

Kerry Abbott: I did not personally see an invitation, and I'm very grateful that you were there to represent. And I agree that it's important for our department to participate where we can.

Del Seymour: Just going whatever channels we found out about it, maybe you could do the same way for all the community events. Because you know what? This department here is about 100% with the community. That's what you all do. So questions were asked about that, "Where is HSH?" "I don't know."

James Loyce: Yeah, in addition to that, you are acutely aware, I'm sure, that the mayor gave a state of the city address last week.

And I was there wearing two hats; one a LHCB, and the other as the health commission. And so I did not either see anyone from HSH there. They may have been, but I was wandering around a lot and I didn't see any representation. So the most visible representation obviously is Jeff--

Kerry Abbott: Jeff was there.

Andrea Evans: I'm just wondering two things. If you could give us update with the status of the rehab of the Bristol Hotel? And also Providence, as we've heard over the months trying to find a new location. And I'm just wondering if you have any updates on a new site.

Kerry Abbott: So the Bristol, as I said, we are working with the Tenderloin Housing Clinic in terms of referrals. My understanding is that referrals will be in a couple months and not in a couple weeks. But we're not currently in contract with Tenderloin Housing Clinic or directly overseeing the program during the in term of the salesforce funding for the sight. So our relationship with them is a little bit different from our typical supportive housing contacts. So we have an agreement that the agreement is simply that we will refer people for the moving on the initiative waiting list.

So I believe April but please don't hold me to that. And in terms of confidence, we are sort of taking a multi-faceted approach. Jeff is meeting with the board for the church site where Providence Shelter is currently is housed. And we are looking at several additional potential sites for our replacements. The real estate department has started identifying sites that are potentially large enough that are available for lease or sale in the Bay View or potential replacement.

Kelley Cutler: Quick question about the vehicle camper resolution team? Do we have any updates about when they'd been able to do replacements? The new acronym of Vehicle Encampment Resolution Team because they're doing all of the bands for that and so the camp resolution team is now the vehicle encampment resolution team but like when they presented in

we learned the specifics on the details of placements that they've been able to hook up with. So I'm wondering if that one's going to be presented here.

Kerry Abbott: I'm not sure what-- I don't have the details here in front of me. I can tell you that we have had our encampment resolution team doing work. They're continuing to do work on encampments that have tent structures and encampments that have vehicles or have a mix. They have been able to place some people directly into housing. They've had several placements into shelters or navigation centers. And we're still looking for ways to respond a little bit differently from the traditional tent encampments with the vehicles and really trying to develop our collaboration with MTA to sort of figure out how we can respond jointly as a community and make sure that we're helping people end up in a place that is going to be safe for better long term option.

Kelley Cutler: There's a lot of an issue now but tomorrow in the board meeting they're looking at more streets to be banning overnight parking when there hasn't been any new alternatives created. And supervisors have started a process that they're working on like, say, parking programs but as of now, there aren't any new ones. We got great outreach workers but they need tools in their toolbox. They need housing and option for folks. All these things but MTA has definitely played a role in continuing to increase more work enforcement and new bands and stuff that are parking restrictions.

Erik Brown: If we're having a problem with HSOC and for this particular issue we're going to have to clear the agenda so we have a cogent discussion cause we can't invite these folks in here. We either look to the department to create a new meeting or start a conversation here but if they're coming next month or the month after, we're not going to accomplish, that we know, that it's going to be walls and barriers that are going to be put up from them because they've been asked to participate.

Del Seymour: Will we be allowed to --and Charles you can chime in on this -- to have a regular meeting but a specialized regular meeting lasting maybe two and a half hours on the next date that we can to make it more of a community meeting and have a longer conversation with HSOC.

My understanding of the time frame that we have the room is probably for two hours there might be a 30 minute and so there might be a 30 minute window after that. I can look into that. One of the things we can definitely do is clear the agenda of all the other agenda items. That would be the possibility.

Charles Minor: I think there are two parts to that and I think that's an excellent idea of convening before then. One of the things I definitely want to do is to make sure that we can get that time commitment from HSOC because there is a big difference for requesting someone to stay for 30 minutes versus having them stay for two hours. That's definitely a different level of preparation and commitment.

So I want to make sure that that ask would be able to occur. When it comes to having a meeting prior to that, with the board, I don't think that would be something that would be difficult. If we were saying something in the next 10 days, something like that, to be able to schedule a room, come up with an agenda, we're looking at really narrowing down the subject matter and the questions and things like that, I don't think that would be an issue.

Angela Rasmussen: HPP. I have a couple of quick questions regarding the coordinated entry program. There was 116 families assessed and then 35 referrals made. Were those referrals to a shelter or housing or both? My other question. At the last LHCB there was discussion around the eligibility definition for pregnant women so they could be eligible for family coordinated entry prior to the third semester, wanting an update on that, and then also an update regarding Jelani House and when we'll be starting to look at that transitional housing program for pregnant women.

Kerry Abbott: So the referrals would be referrals to shelter or housing and could also lead to rapid rehousing. The pregnancy policy, so HSH started to internally look at the implications of changing the pregnancy policy and the impact on the family shelter system, also on the adult system, and on housing and shelter prioritization this month. And so once HSH has sort of come to what the different implications would be from a policy perspective we will be bringing that back. And got Jelani House, I can report that the HAZMAT testing was completed and we're waiting for results from the testing so that we can then integrate that into a final scope of a warrant for construction.

Malea Chavez from the Homeless Prenatal Program and also here as the co-chair of HESPA. So as a follow-up on the family shelter update, I know you mentioned under Providence being able to work with the Department of Real Estate on potential locations, I would love to hear an update around that.

The last conversation that we had with the Department of Real Estate was that there were no viable options or even in some of the suggested survey list of locations that HSH had gathered almost two years ago some of them weren't viable because one was like a Bank of America and the city doesn't do business with Bank of America or there were all these different reasons that made it so that there was no location. Anyway, I would love to know more about that process, given that we've had two years of add back funding specifically allocated for that and there's been no movement on it and we all know how much it's needed. And then a suggestion for the agenda if you are going to hear the agenda and have a special features guest, if you can please still provide HSH's monthly report, even if that's just a five-minute or 10-minute or even just providing the handouts, that information is critical, and we really do rely on it month after month and really thank the department for taking the time to put that together. It's super helpful.

And then the last thing I just wanted to say around the referral for shelter housing just as a note for families, we are getting rapid housing referrals, and some of the families in unsheltered, and

so making sure that there is that transition, and so that by the time they come to providers, providers aren't scrambling to put them up in a hotel or trying to figure out working with them and coordinate an entry to a shelter that piece should be resolved before the referrals are happening to a shelter, to housing, to rapid rehousing.

Randy True: I'm the public still trying to learn about homelessness and find ways to help. And I wanted to bring up the fifteen unanswered questions that were answered and posted to the local homeless coordinating board website in May of 2018. That was a super helpful format and some of those questions addressed this same issue around HSOC which seems super reported from suspected major human rights violations. Then on the other hand, it seems like the HSOC is following a set policy and this is still squirrely and it seems super important. And perhaps that process of the board collecting the pointed questions and submitting them in advance to HSOC and getting a formal response that gets posted to the local coordinating board website so that everyone in the community that attends these meeting can then view those official answers and that might make a really accountable kind of productive discussion when you do finally get HSOC in this room or the leaders of HSOC in this room. So that's just something I was thinking listening to all this.

Paul Monge: Compass Family Services. At the last OACB meeting there seemed to be a lot of interest on revisiting in the future at some point the conversation related to how the pit count historically undercounts families. And for many of us who did participate in that count, it sort of affirmed the fact that the visibility count doesn't necessarily work or is correlated with catching the true prevalence of family homelessness in the city. So one thing I'd ask is that we kind of keep that in mind as the data's being collected and analyzed. I know that in about six months is when the department will be printing out the report and I'd encourage the committee to maybe pin that somewhere and revisit that when we get to June and July to see how we can revamp or improve our methodology to make sure that we're doing justice by the way we're accessing family homelessness in San Francisco. Thank you.

Charles Minor: Leslie wanted me to remind everyone that there will be kind of a split meeting tomorrow. It's going to be a little bit of a change, but we're going to deal with coordinated entry. So tomorrow at 9:00 AM in room 408 will be the adult coordinated entry meeting and then at 10 o'clock will be the family coordinated entry meeting. And what she's trying to do is just have one meeting, but kind of split it in two so that she's kind of being able to really address the needs of both of those kind of separate groups. So I'll be sending an email out a little bit later this afternoon, but just wanted to remind folks of that. And an email has already gone out about that.

Jason: The Ark Mission has contacted us at the Health Commission and has requested an opportunity to sit with us and do both an information exchange and an educational exchange with regard to how the fire department responds to the issues of homelessness and how we respond at the Health Department. We don't have a set meeting date, but that's on the front

burner. I just wanted to let this body know that that will probably occur within the next six months or so.

Del Seymour: So before we conclude I just want to add to the department hearing that I guess we will be losing Randy Queszada, very important member of your department.

Kerry Abbott: I know. And he has worked with this board so closely since he's been here, since the day he was appointed to your department. We will sadly miss him, but we'll wish him well, so would you convey that to him?.

Del Seymour: Thank you, Carrie.

DRAFT