

**SAN FRANCISCO LOCAL HOMELESS COORDINATING BOARD**  
**LHCB-HSOC Quarterly Meeting- November 20, 2019**

**Emily Cohen:** Mayor's Office: HSOC is collaboration between city agencies. There was a had a 17% increase in our HUD point in time count between 2017 and 2019 and in 19% increase in unsheltered homelessness and the context of the presentation today. 4,000 people living at the crossroads of homelessness, mental illness, substance use disorder. The context of methamphetamine use or the increase in overdoses of folks using methamphetamines as well as approximately 24,000 folks using injection drugs in San Francisco. HSOC is a work in process to work with this crisis. HSOC has been selected to work with the Bloomberg Harvard City Leadership Initiative.

**Peg Stevenson:** City Controller's Office. Controller's office is tasked with facilitation and data wrangling (understand and improve the data that's collected by each department, how it's recorded, how it can be improved and how it can be used for decision making both at the operations level and then when things come up to the department heads).

HSOC is using a collaborative model and our collective impact model to coordinate the efforts of city departments that have to respond to calls on homelessness and quality of life and street conditions.

The agencies that meet in the collaborative meetings are: 311, Department of Emergency Management, Department of Homelessness and Supportive Housing, Public Health, SFPD, Public Works, MTA, EMS Six, and the Controller's Office. More ancillary participation from Adult Probation, and the Department of Rec and Park. The Sheriff's Department and Port are sometimes present.

HSOC Vision: San Francisco streets are healthy for everyone and those experiencing homelessness marginally housed or in need of social connections, health care, have access to appropriate resources and services.

[Please refer to HSOC slide presentation](#)

**Kelley Cutler:** Requests the HSOC dashboard data be presented. Wanting data on which departments respond and what services are being offered?

**Kelley Cutler:** Are there still encampment resolutions being done? And if so is it still the original module?

**Peggy Stevenson:** Confirms that there are and colleagues can respond in greater deal.

**Kelley Cutler:** Examining linkages and outcomes. Is there the ability to connect operations with different outcomes? Because in the past the systems did not seem to be able to do that?

**Peggy Stevenson:** There has been a steady improvement how data gained in the field is later reported on. The process involves tracking and programmatic intakes. To figure out how agencies can protect privacy, do de-identification, report in an aggregate level, and then bring back up examine where a service connection has been strong and also weak.

No Public Comment:

**Mary Ellen Caroline:** Executive Director for the Department of Emergency Management.

The discontinuation of the seven day bed for HSOC set asides. Policy changed so the fifteen beds are no time limited with a minimum stay of 30 days.

Launching of the Joint Priority Project which is collaboration between HSH and the Health Department to better coordinate and provide priority services to individuals.

Piloting of Police Encounter Tracker- More closely tracking encounters with police officers and using the data from those encounters.

**Del Seymour: Asks how the new Police Tracker affects an officer at an encampment?**

**SFPD Officer:** The Data is collected and then brought to HSOC where it is shared with our city partners. Both HSOC and city-wide outreach officers are doing the tracking but not all of our patrol officers.

**Kelley Cutter: asks when the 7 day beds were discontinued?**

**Mary Ellen Caroline:** The policy started on November 12<sup>th</sup> and confirms it was being enforced.

Public Comment:

**Brian Edwards:** Why are HSOC officers the only ones who can make referrals to the fifteen – thirty day beds? Was very skeptical that the beds have been offered? HR change at DPW were people can no longer claim there belongs over the weekend and how that presents a major problem for people who are working or engaged during the week.

**Daryl Fong:** Commander of Communications Division-SFPD. Responding to public comment. Clarifies that HSOC 30 day beds are available to all patrol officers. Officers who are referring someone to the beds are instructed to call HSOC to refer clients.

**Daryl Fong:** San Francisco Police Department is responsible for the overall public safety within the community. They include behavior and mental health concerns. When responding to public safety concerns, SFPD will assess the situation and respond and determine whether enforcement is necessary to mitigate any particular issue.

San Francisco Police Department leads with services to connect individuals with services. Oftentimes will call upon partners at HSOC both at the DPH as well as the HSH for available support and resources.

Officer engaged in training from DPW around de-escalation as well as the Salvation Army coming in and providing an overview of services and resources available to veterans and particularly unsheltered ones on the streets.

**Del Seymour: What do you do in the engagements do you give slips? What is the notification process for referrals?**

**Daryl Fong:** Often we work through HSH or the Healthy Streets Operations Center and involve our partner agencies. Most often SF Hot or the Department of Public Health and ideally like to connect with them in the field.

**Brenda Jewett: How do you explain the discrepancies between the referrals and the connections?**

**Daryl Fong:** Officers are well trained in engaging individuals that are receptive to services. It is the Departments goal to have every individual exit homelessness. Our officers will engage individuals and determine if they are candidates for services and involve our city partners.

**Del Seymour: Asked whether there is the potential for duplication on the list?**

Emily Cohen: These are interactions and encounters.

**Kelley Cutler: asks how many SFHOT workers there are connected with HSOC?**

**Jeff Kositsky:** There are not specific hot members that are connected to HSOC. SF Hot will coordinate with HSOC around encampment resolution or people in vehicles. If the officer calls and requests SF Hot assistance staff there will dispatch a hot team member that's available.

There are 40 or so outreach workers spread across two shifts 7 days a week.

Community responders also kind of SF Hot team members that are addressing 311 calls, HSOC or other dispatch calls.

We have not assigned specific workers to HSOC unless there is a specific resolution.

**Kelley Cutler: It sounds like HSOC is leading with law enforcement?**

**Jeff Kositsky:** Law enforcement are often the individuals who have the first encounters with people. Officers' be due through coordination with HSOC have access to the SF HOT team, shelter beds, to navigation center beds to EMS 6, and to public health. HSOC services are away that the officers, can assist those needing services.

**Kelley Cutler: There is a disconnect. There was just a sweep this morning and talking with Hot there were not services being offered. That the outreach workers do not have the same authority and law enforcement is the lead agency.**

**Daryl Fong:** In large and encampment resolution, there is a process, typically three weeks. Often prior there is extensive intentional outreach that's provided by our city partners in

advance, in terms of what available resources are available to provide prior to any type of enforcement.

**Kelley Cutler: What I'm hearing directly from people is that they're being hit regularly and being told to move along. Their stuff being taken but never offered any resources.**

**Muhammed Nuru:** For items that have been picked within 24 hours, DPW is open for 72 hours and open around the clock to retrieve. Within the 72 hours items can be picked up by calling dispatch. There is also a Monday through Friday schedule and is open from 9am-3pm. Within the 72 hours the items are temporarily stored and then placed in a locker after the 72 hours.

**Brian Edwards: Questions why the schedule was changed not to include Saturday hours to retrieve property?**

**Jeff Kositsky:** 3,400 emergency shelter beds in San Francisco with 15 beds that are 30 day minimum stay. They are for encounters that are initiated by the police department or EMS 6 as the Hot team has other beds available to them. There are 41 SF Hot set aside beds within the traditional shelter system. Additionally there are navigation center placements when available as well as traditional one night shelter beds. HSOC truly is about having a platform for improved collaboration and communications between the agencies.

**Kelley Cutler: From the Controller's Report what was being tracked were tents and 311 calls and that is very different from what HSH is tracking.**

**Jeff Kositsky:** We are working with the Controller's Office to improve outcomes. The Controller's Office has expressed their frustration in HSH not being able to produce HSOC client level data about outcomes. We are able to effectively track the data on the 15 shelter beds.

Vehicle Triage Center is schedule to open with Urban Alchemy. The vehicle resolution team is an offshoot of the HOT team and driven by observations on the street. We did commit to the neighbors around the vehicle encampment triage center that we would prioritize people who are in that area who want to go into that site.

There were over 600 vehicles counted about probably 1,000 people, more than one person per vehicle, in the last PIT Count. The VERT engages about 16 people per resolution and is another tool supporting people. We will have a number for people who are in their vehicles to get assistance and problems solve how we can assist them.

**Kelley Cutler: It is important to talk about MTA and the more restrictions that are being created and how those restrictions are being enforced.**

**Jeff Kositsky:** SFMTA has done well responding to concerns of people who are not living in their vehicles and the placement of restrictive signs. There is a difference between HOT team responding and requesting that people move because it is too crowded versus MTA coming in and placing additional restrictive signage. To my knowledge there has not been additional signage since Duval Street. *(public comment challenges whether more restrictive signs have been place)*

**Kelley Cutler: Questions what HSOC role is in VRT?**

**Jeff Kositsky:** SFMTA is involved with the planning of HSOC but their presence within HSOC has not led to additional restrictive signs being placed. Was a mistake not to invite them to this meeting and they will be present at the next meeting. Working hard to find a balance between residence and people who are housed in their vehicles. Folks are parked in lower income neighborhoods and those residents who live in those neighborhoods have the same rights as any resident of San Francisco around having safe and clean streets.

**Kelley Cutler: Questioned why the 311 Application and why encampments are even an option for the public to report?**

**Nancy Alfaro:** Director of 311- The app contains what is requested from departments. People often do call about encampments. Using with HSOC the app can track and people could report. When there were wellness concerns in the app it was more people related. It was removed to make sure responses were appropriately made when people were calling about the wellbeing of an individual. And why those reports go to non-emergency police or 911. For an encampment the information goes to HSOC. It is triage and all the coordinating departments are there to review the request and that way it can be dispatched appropriately.

A lot of the encampment requests go through the app are about blocking sidewalks, drug use, and we want to make sure people can report and have an outlet to report those issues.

**Naveena Bobba:** Executive Director of Health. Policy change has occurred within HSOC. The shared high priority list between HSH, DPH, and HAS is being instituted to find the people with the highest priority and to figure how to get them services.

Taking a population-based focus working with the 4,000 people that have a mental health as well, substance use issues and are homeless homelessness as well as many other medical issues. Taking that small subset to work inter agency wide and use evidence based practice. Once the individuals have been identified engaging them through alerts and team building as well as coordination.

**Emily Cohen:** Importance of HSOC is the ability of departments to collaborate and rather than having departments doing all their own activities out on the street, either their own outreach or their own enforcement, we've created the process to collaborate better and to increase our service integration, especially among our service departments.

Public Comment:

Journey: Works in SF and lives in her vehicle. There are workers and working class people who live in their vehicles. Sanitation is an issue for people who live in vehicles and is an area for support. That

people who are making it work, live in their vehicles do not need more parking restrictions to because they are self-sufficient and making it work.

I prefer my autonomy and not to be in a parking lot and to have the ability to park on the street.

**Brain Edwards:** HSOC simply normalizes different ways to approach homelessness. HSOC has taken away trained professionals doing the outreach and now DPW and SFPD lead encounters with homeless encounters. What are the services that DPW and DPH truly have? HSOC has taken the focus away from the paucity of resources that we actually have that can be constructive and exit someone from homelessness.

**Mary Kate Bacalao:** Expresses her concern with families living in vehicles. How children and their moms are impacted. Request that family service providers be included with HSOC to collaborate around how services are being brought to that population and how that population can be better served.

**Flo Kelley:** Question directed to Director Nuru about Bag and Tag policy. Questions why Bag and Tag does not happen on the site of the sweep and why items are brought back to the DPW yard where they can be lost or not properly categorized.

**Mohamed Nuru:** Items that are picked-up most are unclaimed. When people claim items, they are not taken. During a cleanup if an item is left there, there is no way for it to be claimed. Items are bagged and taken to the yard. Items are logged with the date and location where they were taken and that is the information that people need to retrieve their items.

**Flo Kelley:** Requests that SFMTA be a part of the HSOC meetings.

**Tonta Tolbert:** Comments that there are different types of Homelessness. As someone who stays in an RV and had her RV towed after restricted signs quickly appeared on streets where she was parked. Stressed how credit and use of credit is used against people who are seeking housing. Her RV provides shelter. The 72 hour vehicle list is causing stress and is being improperly enforced. Willing to be a part of the RV park.

**Henry:** There is a certain trauma with young people on the streets when law enforcement engages with them. Requests a round table between SFPD officials and HSH Youth Department and Youth Advisory Board.

**Melody:** Would like to have more services offered to those who have suffered brain injuries. Worried about her RV being towed and how ticketing in the city has increased. Questions why city continues to increase parking restrictions.

**Mary Ellen Carroll:**

HSOC isn't a department or an agency of the city where it stands for healthy streets operation center

and that's what it is. It's an operation center where all of these city departments come together. Incident Command System is used when there is the need to manage an emergency. It is a best practice model for bringing in many different agencies, disparate multidisciplinary teams together. The policy oversight for HSOC is the Mayor's Office and the policy group which is made up of department heads of the agencies that are represented and work together. Is a unified command model so there is no lead agency. However main departments are HSH, SFPD, DPW, and DPH all work together to make decisions. One of the most important things is it creates some discipline for Departments around how those decisions are made and how those scarce resources are, are used effectively.

**Del Seymour: Wants more LHCB involvement in HSOC. That Board members have expertise to assist HSOC on a regular basis. Board members should have a more active role to advise HSOC on policy.**

**Mary Ellen Carroll:** A reminder that each department in HSOC has its own government governance structure. If there are issues around how HSH addresses homelessness or public works addresses a bag and tag for instance, there are policies that department has to answer that directly. How we coordinate is outside of that. However, HSOC is open to increased feedback.

**Kelley Cutler: I have concerns about HSOC as a partner. That I would like to see more transparency and community involvement from HSOC. For example the public who have come today and spoken about their vehicles, how can their feedback be incorporated?**

**Public Comment**

**Adjournment**