

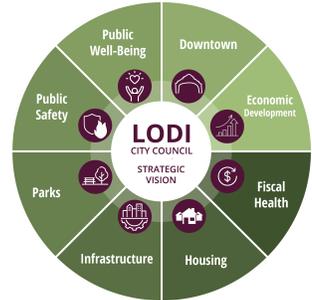


LODI CITY COUNCIL

Carnegie Forum
305 West Pine Street, Lodi

AGENDA - Regular Meeting
Date: February 4, 2026
Time: Closed Session: 6:30 p.m.
Regular Session: 7:00 p.m.

Mayor Ramon Yepez
Mayor Pro Tempore Mikey Hothi
Councilmember Cameron Bregman
Councilmember Lisa Craig-Hensley
Councilmember Alan Nakanishi



Notice Regarding Public Comments

Public Comment may be submitted in the following ways:

- In-person
- Zoom Webinar
 - > Meeting ID: 890 6230 3364
 - > Passcode: 599633
 - > Phone number: 1 253 215 8782 or 1 346 248 7799
 - > Link:
<https://us06web.zoom.us/j/89062303364?pwd=Tbs7B0Z7rCwsbyYGc9PONEPw9gkOux.1>
- Email – councilcomments@lodi.gov
 - > Received no later than two hours prior to the meeting
- Mail – City Clerk’s Office, P.O. Box 3006, Lodi, CA 95241
- Hand delivered to: City Clerk’s Office, 221 W. Pine Street, Lodi, CA 95240
 - > Received no later than two hours prior to the meeting

Public comment received via email, mail, or hand delivery will be provided to the City Council and included in the official minutes of the meeting, but will not be read aloud at the meeting.

C-1 Call to Order / Roll Call

C-2 Announcement of Closed Session

- a) PUBLIC EMPLOYEE APPOINTMENT, Pursuant to Government Code § 54957(b). One Position: Interim City Manager.
- b) CONFERENCE ON LABOR NEGOTIATIONS – Regarding International Brotherhood of Electrical Workers, Lodi City Mid-Management Association, AFSCME General Services and Maintenance & Operators, Police Mid-Managers, Lodi Police Officers Association, Lodi Police Dispatchers Association, Lodi Professional Firefighters, Lodi Fire Mid-Management, Confidential General Services, Confidential Mid-Managers, Executive Managers, and Appointed Employees, Pursuant to Government Code § 54957.6 (HR)
- c) CONFERENCE WITH LEGAL COUNSEL - ANTICIPATED LITIGATION, significant Exposure to Litigation pursuant to Gov. Code § 54956.9(d)(2). Two cases.

C-3 Adjourn to Closed Session

6:55 p.m. Invocation/Call to Civic Responsibility.

Invocations/Calls may be offered by any of the various religious and non-religious organizations within and around the City of Lodi. These are voluntary offerings of private citizens, to and for the benefit of the Council. The views or beliefs expressed by the Speaker have not been previously reviewed or approved by the Council, and the Council does not endorse the beliefs or views of any speaker.

NOTE: THE FOLLOWING ITEMS WILL COMMENCE NO SOONER THAN 7:00 P.M.

C-4 Return to Open Session / Disclosure of Action**A. Call to Order / Roll Call****B. Presentations****C. Consent Calendar (Reading; Comments by the Public; Council Action)**

All matters listed on the consent calendar are considered to be routine and will be acted upon by one motion. There will be no separate discussion of these items. If a member of the public would like a consent calendar item pulled and discussed separately, refer to the Notice at the beginning of this agenda.

Res. **C.1** Adopt a Resolution Authorizing the Interim City Manager to Approve Amendment No. 2 to Patrick Clark Consulting, a Sole Proprietorship, for Labor Relations Consulting Services and Increasing the Agreement by Sixty Thousand Dollars (\$60,000) for a Total Not-to-Exceed Amount of One Hundred Twenty Thousand Dollars (\$120,000) (IS-HR)

Attachments: [Attachment 1 - Amendment No. 2](#)
[Attachment 2 - Resolution](#)

C.2 Accept Improvements Under Contract for Lodi Lake North Restroom Restoration Project (PRCS)

Attachments: [Attachment 1 - Change Orders 1-3](#)
[Attachment 2 - Before/After Photos](#)

Res. **C.3** Adopt a Resolution Authorizing the Interim City Manager to Execute Amendment No. 2 to Agreement with United Site Services, Inc. of California for Portable Restroom Services at Various City Parks By \$10,000 for a Total Not To Exceed Amount of \$136,826 (PRCS)

Attachments: [Attachment 1 - Amendment No. 2](#)
[Attachment 2 - Resolution](#)

Res. **C.4** Adopt a Resolution Approving Updates to the City of Lodi Public Transportation Agency Safety Plan (PW)

Attachments: [Attachment 1 - Public Transportation Agency Safety Plan \(PTASP\)](#)
[Attachment 2 - Resolution](#)

C.5 Approve Specifications and Authorize Advertisement for Bids for Rental and Cleaning of Uniforms for Certain Field and Warehouse Employees (PW)

Res. **C.6** Consider Adopting a Resolution Approving the Allocation of Public Benefit Funds of \$15,870 from District 1 Non-Profit Funds to Lodi Sister City Committee (Total \$15,870) (CLK)

Attachments: [Attachment 1 - Reso 2025-120 and Adopted Nonprofit Fund Policy](#)
[Attachment 2 - Proposal Letter](#)
[Attachment 3 - Resolution](#)

Res. **C.7** Consider Adopting a Resolution Approving the Allocation of Public Benefit Funds of \$4,130 from District 1 Non-Profit Funds to Lodi Boys and Girls Club (Total \$4,130) (CLK)

Attachments: [Attachment 1 - Reso 2025-120 and Adopted Nonprofit Fund Policy](#)
[Attachment 2 - Proposal Letter](#)
[Attachment 3 - Resolution](#)

C.8 Post for a Vacancy and an Expiring Term on the Lodi Improvement Committee (CLK)

C.9 Set Public Hearing for February 18, 2026 to Consider Introduction of Ordinance Amending Lodi Municipal Code Chapter 13.20 "Electrical Service" Section 13.20.240 Schedule G1-General Service-Group 1 Commercial/Industrial and Section 13.20.250 Schedule G2-General Service-Group 2 Commercial/Industrial (EU)

D. Comments by the Public on Non-Agenda Items

THE TIME ALLOWED PER NON-AGENDA ITEM FOR COMMENTS MADE BY THE PUBLIC IS LIMITED TO FIVE MINUTES.

Public comment may only be made on matters within the Lodi City Council's jurisdiction (Government Code Section 54954.3, Lodi City Council Protocol Manual Section 6.3I). The Council cannot take action or deliberate on items that are not on this agenda unless there is an emergency and the need to take action on that emergency arose after this agenda was posted (Government Code Section 54954.2(b)(2)). All other items may only be referred for review to staff or placement on a future Council agenda.

If you wish to address the Council, please refer to the Notice at the beginning of this agenda. Individuals are limited to one appearance during this section of the Agenda.

E. Comments by the City Council Members on Non-Agenda Items

F. Public Hearings

G. Regular Calendar

G.1 Receive Update from Lodi Senior Citizens Commission (PRCS)

Attachments: [Attachment 1 - Senior Commission PowerPoint Presentation](#)

- Res. **G.2** Receive Report and Adopt a Resolution Approving Fiscal Year 2025-26 Mid-Year Budget Adjustments; and Approving the Addition of One Police Officer, One Senior Billing Specialist, One Management Analyst - Confidential, and a Senior Plans Examiner; Deletion of One Customer Service Representative and One Health and Safety Specialist, and the Reclassification of a Deputy City Clerk to an Assistant City Clerk and Program Manager to a Recreation Manager; and Adopt Updates to the Budget and Fiscal Policy (IS - Budget)

Attachments: [Attachment 1 - Mid-Year Budget Adjustments \(Exhibit A\)](#)
[Attachment 2 - Mid-Year CIP Requests](#)
[Attachment 3 - Redlined Budget and Fiscal Policy](#)
[Attachment 4 - Resolution](#)

- Res. **G.3** Adopt a Resolution Awarding Operation of the Lodi Access Center and Emergency Shelter to the Council-Selected Operator, of Outreach Ministries International, Inc., Based on Ranking and Recommendation Provided by the Evaluation Committee, and Authorizing City Staff to Negotiate an Agreement and Return to City Council for Final Contract Approval (CD)

Attachments: [Attachment 1 - First Step Communities Proposal](#)
[Attachment 2 - Five Keys Proposal](#)
[Attachment 3 - Outreach Ministries International Proposal](#)
[Attachment 4 - The Salvation Army Proposal](#)
[Attachment 5 - Resolution](#)

H. Ordinances

I. Adjournment

Pursuant to Section 54954.2(a) of the Government Code of the State of California, this agenda was posted at least 72 hours in advance of the scheduled meeting at a public place freely accessible to the public 24 hours a day.

Olivia Nashed
City Clerk

All staff reports or other written documentation relating to each item of business referred to on the agenda are on file in the Office of the City Clerk, located at 221 W. Pine Street, Lodi, and are available for public inspection. Agendas and staff reports are also posted on the City's website at www.lodi.gov. If requested, the agenda shall be made available in appropriate alternative formats to persons with a disability, as required by Section 202 of the Americans with Disabilities Act of 1990 (42 U.S.C. Sec. 12132), and the federal rules and regulations adopted in implementation thereof. To make a request for disability-related modification or accommodation contact the City Clerk's Office as soon as possible and at least 72 hours prior to the meeting date. Language interpreter requests must be received at least 72 hours in advance of the meeting to help ensure availability. Contact Olivia Nashed at (209) 333-6702. Solicitudes de interpretación de idiomas deben ser recibidas por lo menos con 72 horas de anticipación a la reunión para ayudar a asegurar la disponibilidad. Llame a Olivia Nashed (209) 333-6702.

Meetings of the Lodi City Council are telecast on SJTV, Channel 26. The City of Lodi provides live and archived webcasts of regular City Council meetings. The webcasts can be found on the City's website at www.lodi.gov by clicking the meeting webcasts link. Members of the public may view and listen to the open session of this meeting at www.facebook.com/CityofLodi/.



COUNCIL COMMUNICATION

AGENDA TITLE:

Adopt a Resolution Authorizing the Interim City Manager to Approve Amendment No. 2 to Patrick Clark Consulting, a Sole Proprietorship, for Labor Relations Consulting Services and Increasing the Agreement by Sixty Thousand Dollars (\$60,000) for a Total Not-to-Exceed Amount of One Hundred Twenty Thousand Dollars (\$120,000) (IS-HR)

MEETING DATE:

February 4, 2026

PREPARED BY:

Cristina Gonzales, Interim Human Resources Manager

RECOMMENDED ACTION:

Adopt a resolution authorizing the Interim City Manager to approve Amendment No. 2 to Patrick Clark Consulting, a sole proprietorship, for labor relations consulting services and increasing the agreement by sixty thousand dollars (\$60,000) for a total not-to-exceed amount of one hundred twenty thousand dollars (\$120,000)

BACKGROUND INFORMATION:

The City of Lodi’s labor groups include Lodi Fire Mid-Management, Lodi Police Dispatchers Association (LPDA), Lodi Police Mid-Management Organization (LPMO), Police Officer’s Association (POAL), General Services, Lodi City Mid-Management Association (LCMMA), Lodi Professional Firefighters (LPF), Maintenance and Operators (M&O) and International Brotherhood of Electrical Workers (IBEW). As of December 2025, the City has successfully entered into successor Memorandum of Understandings (MOUs) or Statement of Benefits with five (5) of the nine (9) units.

The City entered into an agreement for labor relations consulting services on September 3, 2024 with Patrick Clark Consulting, a sole proprietorship, to help advise labor negotiations with the 9 units. The original Agreement was amended to extend the term of the Agreement through August 31, 2026 and increase the agreement amount from \$30,000 to \$60,000. As negotiations are still ongoing with the four (4) remaining groups, General Services, LCMMA, M&O and LPF, the City is requesting services from Patrick Clark Consulting continue through completion of successor MOUs.

STRATEGIC VISION:

3C. Fiscal Health: Ensure elected leaders & staff retain focus on fiscal priorities.

FISCAL IMPACT:

Not-to-exceed \$120,000

FUNDING AVAILABLE:

10020302.72450

AMENDMENT NO. 2

PATRICK CLARK CONSULTING
AGREEMENT FOR CONSULTING SERVICES

THIS AMENDMENT NO. 2 FOR CONSULTING SERVICES (“Amendment No 2”) made and entered this ____ day of _____, 2026, by and between the CITY OF LODI, a municipal corporation (hereinafter “CITY”), and PATRICK CLARK CONSULTING, a sole proprietorship (hereinafter “CONTRACTOR”).

WITNESSETH:

1. WHEREAS, CONTRACTOR and CITY entered into an Agreement for Consulting Services to provide labor negotiation on September 3, 2024, and Amendment No. 1 on October 1, 2025 (“ collectively they Agreement” as set forth in Exhibit 1, attached hereto and made part of; and
2. WHEREAS, CITY now requests to extend the Agreement to December 31, 2026, and add additional funds to the Agreement in the amount of \$60,000, for a total contract amount not-to-exceed \$120,000; and
3. WHEREAS, CITY now requests to revise the contact information on Section 18 of the original Agreement and remove the email address listed; and
4. WHEREAS, CONTRACTOR agrees to said amendments.

NOW, THEREFORE, all parties agree to amend the Agreement as set forth above. All terms and conditions remain unchanged.

IN WITNESS WHEREOF, CITY and CONTRACTOR have executed this Amendment No. 2 on the date first written above.

CITY OF LODI, a municipal corporation
hereinabove called “CITY”

PATRICK CLARCK CONSULTING,
a sole proprietorship, hereinabove
called “Contractor”

JAMES LINDSAY
Interim City Manager

PATRICK CLARK
Consultant

Attest:

Approved as to Form:

OLIVIA NASHED
City Clerk

KATIE O. LUCCHESI
City Attorney
KL

AMENDMENT NO. 1

PATRICK CLARK CONSULTING
AGREEMENT FOR CONSULTANT SERVICES

This AMENDMENT NO. 1 TO AGREEMENT FOR CONSULTANT SERVICES ("Amendment No. 1") is made and entered this 1st day of October, 2025, by and between the CITY OF LODI, a municipal corporation, hereinafter called "CITY", and PATRICK CLARK CONSULTING, a sole proprietorship, hereinafter called "CONTRACTOR".

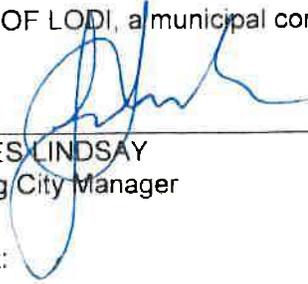
WITNESSETH:

1. WHEREAS, CONTRACTOR and CITY entered into an Agreement for Consultant Services to provide labor negotiations on September 3, 2024 ("Agreement"), attached hereto as Exhibit 1 and made a part hereof; and
2. WHEREAS, CITY now requests to extend the term of the Agreement through August 13, 2026; and
3. WHEREAS, CITY also requests to add funds in an amount not to exceed \$30,000, for a total Agreement amount not-to-exceed \$60,000; and
4. WHEREAS, CONTRACTOR agrees to said amendments.

NOW, THEREFORE, the parties agree to amend the Agreement as set forth above. All other terms and conditions of the Agreement remain unchanged.

IN WITNESS WHEREOF, CITY and CONTRACTOR have executed this Amendment No. 1 on the date and year first above written.

CITY OF LODI, a municipal corporation



JAMES LINDSAY
Acting City Manager

Attest:



OLIVIA NASHED
City Clerk

Approved as to Form:



KATIE O. LUCCHESI
City Attorney

PATRICK CLARK CONSULTING, a sole proprietorship, hereinabove called "CONTRACTOR"



PATRICK CLARK
Consultant

for

**AGREEMENT FOR CONSULTANT SERVICES BETWEEN
THE CITY OF LODI
AND
PATRICK CLARK CONSULTING**

This Agreement ("Agreement") is made between the City of Lodi, a municipal corporation ("CLIENT") and Patrick Clark Consulting, a sole proprietorship ("CONSULTANT").

AGREEMENT

1. TERM – This Agreement will become effective on the date by which both parties have signed the Agreement ("Effective Date") and will continue in full force and effect until terminated in accordance with Section 15, except to the extent renewed or extended in accordance with Section 16. All days set out are calendar days unless otherwise specified.

2. SERVICES –
 - a. Services Provided – CONSULTANT shall provide labor relations consulting services in accordance with Attachment A, which is incorporated into this Agreement by this reference, but only to the extent Attachment A services are strictly limited by and interpreted in accordance with Section 2.b. of this Agreement; reasonably accomplishable, either by the date of termination, which date shall be established in accordance with Section 15, or any later date established in accordance with Section 16; and otherwise consistent with this Agreement. These services, as thus defined and limited, shall be collectively known as "CONSULTANT Services."

 - b. Services NOT PROVIDED: Complementary/Sub-Specialist and Licensed Professional Services – CONSULTANT Services shall be strictly limited and interpreted to *exclude* any work that might be construed to require any complementary or sub-specialization or professional license. CLIENT understands that CONSULTANT hires no employees or sub-contractors to provide complementary/sub-specialist or licensed professional services, directly or indirectly for the benefit of CLIENT, and possesses no complementary/sub-specialist expertise or professional licensure himself. Therefore, both parties agree that:
 - i. CONSULTANT shall provide no complementary/sub-specialist or licensed professional services, directly or indirectly to CLIENT, pursuant to this Agreement or otherwise;
 - ii. *Excluded* complementary/sub-specialist and licensed professional services include, but are not necessarily limited to, services properly performed instead by an attorney, accountant, actuary, banker, insurance agent/broker/company, investment banker, investment advisor, mortgage banker/broker, security broker/dealer, structured settlement broker, or expert in compensation studies.
 - iii. CLIENT shall not construe or rely upon any CONSULTANT Services, or any analysis, advice, or services in fact provided by CONSULTANT, pursuant to this Agreement or otherwise, as complementary/sub-specialist or licensed professional services;

 - iv. Although CONSULTANT might periodically recommend CLIENT hire various complementary/sub-specialists or licensed professionals, CLIENT shall be required to and shall be solely responsible for determining if and when CLIENT reasonably requires

complementary/sub-specialists or licensed professionals, for any purpose, including any contemplated by or reasonably required to accomplish the purposes of Section 2.a. or Attachment A; and

- v. CLIENT shall be solely responsible for directly selecting, vetting, employing, or contracting with, and supervising any necessary or desired complementary/sub-specialists and licensed professionals, including but not limited to any contemplated by or reasonably required to accomplish the purposes of Section 2.a. or Attachment A. Such complementary/sub-specialists and licensed professionals shall include, but not necessarily be limited to:
- a) Legal counsel, for all CLIENT's legal advice, legal analysis, and legal services, including, but not necessarily limited to final drafting, reviewing, approving, and assuring legal adequacy of all language and content of all Memorandums of Understanding (MOUs), prior to MOU adoption by CLIENT's City Council;
 - b) Actuaries, for all CLIENT's actuarial needs, including, but not necessarily limited to any actuarial analysis needed to sufficiently consider and develop desired proposals, counter-proposals, strategies, and human resources and labor relations documents as are necessary to negotiations, for example as may be required for consideration and analysis of employee and retiree benefits options' viability, cost, pros and cons, and risks;
 - c) Accountants, for CLIENT's accountancy needs, including, but not necessarily limited to tax counseling related to the language and content of all Memorandums of Understanding (MOUs), prior to MOU adoption by CLIENT's City Council;
 - d) Appropriate financial, investment, and insurance professionals, for all other financial advice and services including, but not necessarily limited to advice and services related to the availability of funds or specified rate of return or interest; the expected performance, fluctuation in or future market value of investments or securities; potential sales, earnings, profitability or economic value; securing financing; and the preparation of pro-forma statements, such as those which are the basis of and/or are used with third parties for the purpose of securing capital through debt, equity creditor or other means;
 - e) Compensation study experts, for all CLIENT's necessary or desired compensation studies helpful in forming appropriate bargaining proposals related to compensation; and
 - f) Any and all other complementary/sub-specialists or licensed professionals, needed or desired, for any and all other analysis, advice, or services, requiring such complementary/sub-specialization or professional licensure, which are reasonably required in order to accomplish any CLIENT purpose, including the purposes of Section 2.a and Attachment A

3. ABILITY TO PERFORM – CONSULTANT agrees and represents that it has the availability, ability, and expertise to perform CONSULTANT Services.
4. DISCLAIMER OF GUARANTEE – CONSULTANT shall perform CONSULTANT Services in a manner consistent with the level of due diligence normally observed by a person of CONSULTANT’s qualifications, offering CONSULTANT Services, as defined by Section 2.a, Attachment A, and this Agreement generally. However, nothing in this Agreement and nothing in CONSULTANT’s statements to CLIENT should be construed as a promise or guarantee about outcomes, completion time, or total fees. CONSULTANT makes no such promises or guarantees. CONSULTANT’s comments about such topics are expressions of opinions only. Actual outcomes, time required, and fees due (other than hourly rate and other billing policies specified in Section 7 and Attachment B) may vary from any estimates given.
5. DIRECTION & EXECUTION –
 - a. Direction: To the extent consistent with Section 6 and the rest of this Agreement, CONSULTANT shall take direction from, and be monitored by CLIENT’s City Manager, and/or a duly authorized designee, except as otherwise specified in this Agreement.
 - b. Execution: CONSULTANT shall assign Patrick Clark to have overall responsibility for the progress and execution of CONSULTANT’s obligations under this Agreement. Any change in this assignment may be cause for termination of this Agreement by CLIENT, in accordance with Section 15.
6. ENTITY AS CLIENT – CLIENT is the client, and the only client, under this Agreement. Therefore, CONSULTANT’s duty under this Agreement is to the CLIENT itself, as represented by its duly elected legislative body, when acting in accordance with all applicable laws. Accordingly, and notwithstanding Section 5, or any other provision of this Agreement, CONSULTANT
 - a. Adopts no separate duty by this Agreement to any individual or entity working with or for CLIENT;
 - b. Shall only take direction from any individual or entity working with or for CLIENT to the extent CONSULTANT finds it consistent with CONSULTANT’s duty to CLIENT pursuant to this Agreement; and
 - c. Shall be permitted to consult with CLIENT’s legislative body, as CONSULTANT deems necessary, and in the manner and to the extent permitted by California law, to properly execute CONSULTANT’s obligations to CLIENT under this Agreement.


 (CONSULTANT’s initials)
 
 (CLIENT’s initials)

7. COMPENSATION –

- a. Compensation Rates, Definitions, and Policies – Compensation rates, definitions, and policies are as set forth in Attachment B, and incorporated into this Agreement by this reference
- b. Method of Billing and Payment – At or near the end of each calendar month, CONSULTANT shall submit to CLIENT an invoice for CONSULTANT’s Time Worked, and, at CONSULTANT’s discretion, Billable Expenses, incurred during that calendar month, in accordance with the compensation rates, definitions, and policies described in Attachment B. CLIENT shall pay each invoice in full within 30 days of its receipt.
- c. Total Compensation – The total compensation and costs payable to Consultant under this Agreement shall not exceed the sum of thirty thousand dollars \$30,000.00 (“Compensation Cap”), except to the extent Compensation Cap is increased or removed by renewal or extension of this Agreement, per the terms of Section 16.

8. INSURANCE – CONSULTANT, at CONSULTANT’s own cost and expense, shall procure and maintain for the duration of the Agreement, insurance policies and endorsements of the type described below.

- a. Coverage Required –
 - i. Business General Liability Insurance Policy – \$1,000,000.00 per claim and \$2,000,000.00 general aggregate;
 - ii. Auto Liability Insurance Policy – \$1,000,000.00;
 - iii. Errors and Omissions Insurance Policy – \$1,000,000.00; and
 - iv. Workers Compensation Insurance Policy, if/when applicable – Currently CONSULTANT has no employees and is not planning to hire any employees. Therefore, currently CONSULTANT maintains no workers compensation insurance. However, if CONSULTANT hires employees in the future, at that time CONSULTANT shall obtain workers compensation insurance and maintain it for so long as CONSULTANT retains such employees.
- b. Endorsements – Within a reasonable amount of time after the later of the following two dates, if those dates differ: i) the Effective Date of this Agreement, stated in Section 1; and ii) the date by which all parties have signed this Agreement, CONSULTANT shall ensure that CONSULTANT’s business general liability and auto liability insurance policies, referenced in Sections 8.a.i-ii, name CLIENT and related parties as additional insured(s), as follows: “City of Lodi and its officers, employees, agents, and volunteers.”
- c. Evidence of Coverage –
- d. As soon as practicable upon securing the endorsements required by Section 8.b., CONSULTANT shall ensure that (a) certificates of insurance indicating evidence

 (CONSULTANT’s initials)
  (CLIENT’s initials)

- of the endorsements required by Section 8.b are delivered to CLIENT; and, (b) within a reasonable period of time after a copy of any particular policy required by Section 8.a is requested by CLIENT in writing, that requested copy is delivered to CLIENT.
- e. Thereafter, at reasonable intervals, in order to assure that required insurance coverage has not lapsed, with a reasonable period of time after written request by CLIENT (a) CONSULTANT shall ensure CLIENT is provided with requested additional certificates of insurance, indicating evidence of the endorsements required by Section 8.b; and (b) CONSULTANT shall ensure CLIENT is provided with any requested copies of any particular policy required by Section 8.a, if the language in that policy may have changed since CLIENT's last request.
 - f. Substitute Insurance – CONSULTANT agrees that if it fails to maintain insurance coverage of the type described under Section 8.a. and 8.b., for the duration of this Agreement, whether due to the required insurance lapsing, expiring, terminating, being suspended, or otherwise failing to be maintained, and then fails to reinstate such insurance within 8 business days of receiving written notice from CLIENT of CLIENT's plan to exercise its rights under this Section 8.d., CLIENT may either (i) immediately terminate this Agreement, upon delivery of written notice; or (ii) take out the minimum insurance necessary to rectify the lapse and pay the premium(s) thereon, at CONSULTANT's expense.
 - g. Self-Insured Retention or Deductible – CONSULTANT shall be responsible for all deductibles and self-insured retentions on CONSULTANT's insurance policies, except when CLIENT makes a claim as an additional insured, in which case CLIENT shall be responsible.
 - h. Subcontractors – CONSULTANT subcontractors must also carry insurance policies of the type described in Section 8.a. and 8.b., but only to the extent and for the duration they directly perform CONSULTANT Services, as opposed to services performed for CONSULTANT and/or for the general operation of CONSULTANT's business, including, but not limited to secretarial services, accountancy services, and legal services to assist CONSULTANT in drafting and negotiating this Agreement, for example.
9. INDEPENDENT CONTRACTOR – Both parties agree that CONSULTANT shall perform CONSULTANT Services as an independent contractor, not as an employee of CLIENT. Accordingly, CONSULTANT shall retain the right to perform similar and different services for others during the term of this Agreement; shall determine the means, methods, timing, and manner of performing CONSULTANT Services, subject only to the requirements of the Agreement; and shall be the primary provider of the tools and supplies needed to perform CONSULTANT Services.
 10. ASSIGNMENT AND SUBCONTRACTING – A substantial inducement to CLIENT for entering this Agreement is to avail itself of CONSULTANT's unique combination of experience, reputation, and skill in delivering CONSULTANT Services. Therefore,



(CONSULTANT's initials)



(CLIENT's initials)

CONSULTANT agrees to refrain from assigning this Agreement or subcontracting any portion of CONSULTANT Services to a third party, without prior written permission from CLIENT. However, nothing in this Section shall prohibit CONSULTANT, with or without prior written permission from CLIENT, from hiring independent contractors or employees to provide support services for the general operation of CONSULTANT's business, including, but not limited to secretarial services, accountant services, and legal counsel to assist CONSULTANT in drafting and negotiating this Agreement, for example.

11. COMPLIANCE WITH LAWS – CONSULTANT agrees to comply with all federal, state, county and local laws, ordinances, and regulations applicable to CONSULTANT, except as otherwise inconsistent with Section 2.b or any other provisions of this Agreement. CONSULTANT'S obligation includes, but is not limited to, a) applying for a City of Lodi business license required by CLIENT for businesses working but not maintaining offices in CLIENT's jurisdiction, and b) filing Forms 700. However, CONSULTANT shall be required to comply with a) and b), *only* if/when CLIENT notifies CONSULTANT in writing of any such requirements, each applicable year. CLIENT's notification obligation, related to b), is consistent with FPCC policy, as indicated by its July 26, 2016 Informal Assistance letter, File No. 1-16-062, stating, in part "The City must have a method in place to review current and future City contracts and identify those contracts ... For the contracts identified, the City has a responsibility to notify each contractor of the contractor's obligation to file."

12. CONFIDENTIALITY – All data, documents, discussions, and other information developed or received by CONSULTANT in performing CONSULTANT Services shall be deemed confidential ("Confidential Information"), except that which is either immaterial, shared in communications with representatives of CLIENT bargaining units, publicly available, generally known, and/or released by CLIENT to the public. CONSULTANT shall not disclose Confidential Information, except as CONSULTANT reasonably and in good faith determines is either required by law, authorized by CLIENT, helpful in order either to perform CONSULTANT Services or to execute any other provision this Agreement, or is otherwise reasonable, as in the event of a dispute between CONSULTANT and CLIENT. CONSULTANT acknowledges that CLIENT is required to comply with the California Public Records Act.

13. OWNERSHIP AND LICENSING OF INTELLECTUAL PROPERTY –
 - a. Ownership of Intellectual Property – CONSULTANT owns the copyright to any and all reports, documents, and other written material provided by CONSULTANT to CLIENT in the performance of this Agreement ("Written Products"). Therefore, CLIENT shall not attempt to register copyright or resell any version of such Written Products. CONSULTANT may take, retain, disclose, reformulate, reuse, resell and register copyright versions of such Written Products from which any and all of CLIENT's confidential information has been removed.

- b. Licensing of Intellectual Property – This Agreement creates a nonexclusive and perpetual license for CLIENT to copy, use, modify, or reuse any and all Written Products, for direct use by CLIENT.
14. RECORDS AND INSPECTIONS – CONSULTANT shall maintain materially complete records with respect to CONSULTANT Services for a period of three years after the termination of this Agreement, digitized at CONSULTANT's option. CLIENT shall have the right, at its own expense, to request, access, examine, and make copies such records, during normal business hours, pursuant to specific, reasonable date, time, and other relevant logistical arrangements made in advance with CONSULTANT.
15. TERMINATION OF AGREEMENT –
- a. Elective Termination – Either party, CONSULTANT or CLIENT, may terminate this Agreement, either i) with 15 days advance written notice, with or without cause; or ii) immediately upon delivery of written notice, with cause, as defined by Section 8.d.i. or Section 5.c.
- b. Automatic Termination – If the Compensation Cap described in Section 7.c is reached, this Agreement shall automatically terminate, except to the extent renewed or extended per the terms of Section 16.
- c. Requirements Upon Termination – In the event of termination, in accordance with either Sections 15.a. or 15.b., CLIENT shall compensate CONSULTANT for CONSULTANT's Time Worked and any Billable Expenses incurred up to the date of termination within thirty days of CONSULTANT's delivery to CLIENT of both a final invoice and all significant work product generated prior to the date of termination but not yet provided to CLIENT, if any.
16. RENEWAL OR EXTENSION OF AGREEMENT – In the event a date of termination is established, in accordance with Section 15.a or 15.b, this Agreement may be renewed or amended to extend beyond that date of termination only by written agreement of the parties, entered into either before or within 30 days after that date of termination. However, nothing in this Section, or in this Agreement generally, requires either party to renew or extend this Agreement or to enter into negotiations regarding the renewal or extension of this Agreement.
17. NO THIRD PARTY BENEFICIARY – This Agreement is made solely for the benefit of the parties to this Agreement and their respective successors, heirs, and assigns, and no other person or entity may have or acquire any right by virtue of this Agreement.
18. NOTICE – Any notice required by Section 8, 15, or Attachment B of this Agreement shall be in writing and either delivered personally or sent by prepaid, first class mail, to the applicable party's physical address, provided below. Any other notice required by this Agreement may be emailed, to the applicable party's email address, provided below. Either party may change its addresses or phone number by notifying the other party in


 (CONSULTANT's initials)


 (CLIENT's initials)

writing of the change. Any notice, request, or other communication between the parties, whether required by this Section or in voluntary compliance with it, shall be deemed communicated upon personal delivery, or within 72 hours from the time of mailing or emailing, if sent as provided in this Section.

If to CLIENT:
City of Lodi
Attn.: City Manager
221 West Pine Street
Lodi, CA 95241
Tel: (209) 333-6700
Email: scarney@lodi.gov

If to CONSULTANT:
Patrick Clark Consulting
Attn.: Patrick Clark
428 J Street, 4th Floor
Sacramento, CA 95814
Tel: (916) 838-2306
Email: pc@patrickclarkconsulting.com

19. ENTIRE AGREEMENT – This Agreement and all other agreements, exhibits, attachments, and schedules incorporated into this Agreement constitute(s) the final, complete, and exclusive statement of the terms of the agreement between the parties, pertaining to CLIENT hiring CONSULTANT to perform CONSULTANT Services, and supersedes all other prior or contemporaneous oral or written understandings and agreements of the parties pertaining thereto. No party has been induced to enter into this Agreement by, nor is any party relying on, any representation or warranty, except those expressly set forth in this Agreement.
20. SEPARATE WRITINGS AND EXHIBITS – The following agreements, exhibits, attachments, schedules, or other separate writings, as executed contemporaneous herewith or as amended in the future in accordance with Section 21, and are hereby incorporated into this Agreement by this reference:
- a. ATTACHMENT A – Scope of Work
 - b. ATTACHMENT B – Compensation Rates, Definitions, and Policies
 - c. Any additional exhibits, attachments, schedules, or other separate writings, added to this Agreement in the future, by amendment, in accordance with Section 21.

If any inconsistency exists or arises between a provision of this Agreement and a provision of any exhibit, attachment, schedule, or other incorporated writing, the provisions of this Agreement shall control.

21. AMENDMENTS – This Agreement and its attachments may be supplemented, amended, or modified only by a writing signed by both parties, except as allowed by Attachment B.

 (CONSULTANT's initials)  (CLIENT's initials)

22. SEVERABILITY – If a court of competent jurisdiction holds any provision of this Agreement to be illegal, unenforceable, or invalid for any reason, the validity and enforceability of the remaining provisions of this Agreement shall not be affected. However, notwithstanding the foregoing, this clause shall not be applied so as to defeat the primary purpose of the parties, which is CLIENT hiring CONSULTANT to perform CONSULTANT Services in exchange for compensation described in Section 7 and Attachment B.
23. JURISDICTION OF LAW; VENUE – The laws of the State of California shall govern the validity, construction, and effect of this Agreement, except to the extent said laws are superseded by, or in conflict with applicable federal laws and/or federal regulations. Any action to interpret or enforce this Agreement shall be brought and maintained exclusively in the San Joaquin County Superior Court, if Consultant is plaintiff, and in Sacramento County Superior Court, if Client is plaintiff.
24. CAPTIONS – The captions in this Agreement are included solely for convenience of reference and shall not affect the interpretation of any provision of this Agreement or any of the rights or obligations of the parties to this Agreement.
25. WAIVER – No delay or omission to exercise any right, power, or remedy accruing to parties under this Agreement shall impair any right, power, or remedy of parties, nor shall it be construed as a waiver of, or consent to, any breach or default. No waiver of any breach, any failure of a condition, or any right or remedy under this Agreement (1) shall be effective unless it is in writing and signed by the party making the waiver; (2) shall be deemed to be a waiver of, or consent, to any other breach, failure of a condition, or right or remedy; or (3) shall be deemed to constitute a continuing waiver unless the writing expressly so states.
26. AUTHORITY TO ENTER AGREEMENT – Each party warrants that the individuals who have signed this Agreement have the legal power, right, and authority to make this Agreement on behalf of each respective party.

IN WITNESS WHEREOF, CLIENT and CONSULTANT have executed this Agreement as of the dates written below.

 (CONSULTANT's initials)  (CLIENT's initials)

CLIENT (City of Lodi)

By:



Scott R. Carney
City Manager

Date

Approved as to Form:




Katie O. Lucchesi
City Attorney

Date

CONSULTANT (Patrick Clark Consulting)

By:



Patrick Clark
Consultant

8/26/24

Date

Attest:



Olivia Nashed
City Clerk

9.3.24

Date

ATTACHMENT A

SCOPE OF WORK

As limited by Section 2.a. of this Agreement; as otherwise consistent with this Agreement; and to the extent under the direction and supervision of CLIENT's City Manager, and/or a duly authorized designee, and in consultation with and with review and approval by CLIENT's duly provided, appropriate, relevant, necessary, and desired complementary/sub-specialists and licensed professionals, including, but not necessarily limited, to those described in Section 2.b. of this Agreement, "CONSULTANT Services" to include:

1. Serve as the CLIENT's Labor Negotiations Advisor and Labor Negotiator;
2. Accept and advocate for CLIENT's City Council guidelines and parameters for ensuing discussions with CLIENT's recognized employee group(s);
3. Meet with CLIENT's Negotiation Committee and City Council to assist in the formulation of CLIENT's position(s) for forthcoming meetings with CLIENT's recognized employee group(s);
4. Collaboratively develop guidelines, proposals, counter-proposals, strategies, and human resources and labor relations documents as are necessary to negotiations, specifically in cooperation with CLIENT's duly provided complementary/sub-specialists and licensed professionals, needed, or desired for input, review, or approval, as described in Section 2.b. of this Agreement, including, but not necessarily limited to, CLIENT's Negotiation Committee members and, without limitation, CLIENT's City Council, as well as CLIENT's legal counsel and actuary(ies), if/as necessary or desired.
5. Assist in developing tentative agreements, and MOU provisions, as are reasonable and/or necessary to negotiations, specifically at the direction of CLIENT's City Council as shared by CLIENT's negotiation committee, and with the cooperation, review, and/or approval of any other appropriate, duly provided CLIENT complementary/sub-specialists and licensed professionals, as described in Section 2.b. of this Agreement, including, but not necessarily limited to CLIENT'S legal counsel, where CLIENT shall ensure that all tentative agreements and MOU provisions are subject to final review and approval by CLIENT's legal counsel and any other necessary or desired Section 2.b. complementary/sub-specialists and licensed professionals, prior to MOU adoption by CLIENT's City Council.
6. Serve as the CLIENT's Labor Negotiations Advisor and Labor Negotiator in any impasse proceedings or unit determination disputes.



ATTACHMENT B

COMPENSATION RATES, DEFINITIONS, AND POLICIES

1. **CONSULTANT Invoices:** CONSULTANT invoices shall include brief descriptions of Time Worked, including dates and amount of time spent, and amounts for Time Worked at CONSULTANT's Rate, and, at CONSULTANT's discretion, amounts for Billable Expenses, if any, in accordance with the following definitions and related rates and policies.
2. **Definitions:**
 - a. "Time Worked" Time Worked shall include both CONSULTANT's time spent performing Consultant Services and CONSULTANT's related drive time, including time spent driving between CLIENT's location(s) and CONSULTANT's office, home, or any other location.
 - b. "CONSULTANT's Rate": CONSULTANT's Rate is \$250.00 per hour, billable in increments of 15 minutes.
 - c. "Billable Expenses:" CONSULTANT'S actual, reasonable, documented expenses shall be considered "Billable Expenses," and shall be reimbursed by CLIENT at cost, without mark-up, if and when billed by CONSULTANT.

Signature: 
Katie Lucchesi (Jan 22, 2026 10:13:23 PST)

Email: klucchesi@lodi.gov

Attachment B Page 1 of 1  (CONSULTANT's initials)  (CLIENT's initials)

Patrick Clark Amendment No. 2

Final Audit Report

2026-01-22

Created:	2026-01-22
By:	Vanessa Serna (vserna@lodi.gov)
Status:	Signed
Transaction ID:	CBJCHBCAABAAMkC8QoKVEIy5W6tzR4onil6O-9Csc811

"Patrick Clark Amendment No. 2" History

-  Document created by Vanessa Serna (vserna@lodi.gov)
2026-01-22 - 6:05:24 PM GMT
-  Document emailed to Katie Lucchesi (klucchesi@lodi.gov) for signature
2026-01-22 - 6:06:35 PM GMT
-  Email viewed by Katie Lucchesi (klucchesi@lodi.gov)
2026-01-22 - 6:12:22 PM GMT
-  Document e-signed by Katie Lucchesi (klucchesi@lodi.gov)
Signature Date: 2026-01-22 - 6:13:23 PM GMT - Time Source: server
-  Agreement completed.
2026-01-22 - 6:13:23 PM GMT

RESOLUTION NO. 2026-_____

A RESOLUTION OF THE LODI CITY COUNCIL AUTHORIZING THE INTERIM CITY MANAGER TO EXECUTE AMENDMENT NO. 2 TO THE PROFESSIONAL SERVICES AGREEMENT WITH PATRICK CLARK CONSULTING SERVICES, A SOLE PROPRIETORSHIP

WHEREAS, Patrick Clark Consulting Services was selected for labor relations consulting services on September 3, 2024; and

WHEREAS, the original Agreement was amended and approved in October 2025 to include all remaining bargaining units; and

WHEREAS, the term of the contract had an expiration date of August 13, 2026 and an amount not-to-exceed \$60,000; and

WHEREAS, negotiations are still ongoing with four (4) remaining groups, General Services, Lodi City Mid-Management Association, Lodi Professional Firefighters, and Maintenance and Operators; and

WHEREAS, Amendment No. 2 increases the contract by \$60,000, bringing the total not-to-exceed amount to \$120,000; and

NOW, THEREFORE, BE IT RESOLVED that the Lodi City Council does hereby authorize the Interim City Manager to execute Amendment No. 2 to the Professional Services Agreement with Patrick Clark Consulting, increasing the total not-to-exceed amount to \$120,000 and through completion of successor MOUs as shown in Attachment 1; and

BE IT FURTHER RESOLVED that the Lodi City Council authorizes the Interim City Manager to take all actions necessary to implement the terms of Amendment No. 2 to the agreement; and

BE IT FURTHER RESOLVED, pursuant to Section 6.3q of the City Council Protocol Manual (adopted 11/6/19, Resolution No. 2019-223), the City Attorney is hereby authorized to make minor revisions to the above-referenced document(s) that do not alter the compensation or term, and to make clerical corrections as necessary.

Dated: February 4, 2026

I hereby certify that Resolution No. 2026-_____ was passed and adopted by the City Council of the City of Lodi in a regular meeting held February 4, 2026, by the following vote:

- AYES: COUNCIL MEMBERS –
- NOES: COUNCIL MEMBERS –
- ABSENT: COUNCIL MEMBERS –
- ABSTAIN: COUNCIL MEMBERS –

OLIVIA NASHED
City Clerk

2026-_____



COUNCIL COMMUNICATION

AGENDA TITLE:

Accept Improvements Under Contract for Lodi Lake North Restroom Restoration Project (PRCS)

MEETING DATE:

January 7, 2026

PREPARED BY:

Parks, Recreation and Cultural Services Director

RECOMMENDED ACTION:

Accept improvements under contract for Lodi Lake North Restroom Restoration Project.

BACKGROUND INFORMATION:

The Lodi Lake North restroom was damaged by arson fire on June 4, 2023. At its October 18, 2023 meeting, the City Council approved a contract with WMB Architects, Inc. of Stockton, California (WMB) to perform design services. The services included investigation of the damages, construction documents, permitting, bidding assistance, construction support, as well as associated American Disabilities Act (ADA) improvements. City staff worked with WMB to complete the architecture, structural engineering, mechanical engineering, electrical engineering and ADA Code requirements.

City Council approved plans and specifications on November 20, 2024. After publicly bidding the project, staff recommended and Council approved award on March 5, 2025, of the construction contract for the Lodi Lake North Restroom Restoration Project to Kaler General Contractors, Inc., of Rancho Cordova, California in the amount of \$469,000. The Council action also authorized the City Manager to execute changes orders not to exceed \$100,000.

The original contract completion was 120 calendar days. The contract work was suspended on August 7, 2025 due to material procurement lead time for the pump control panel. Contract work was reinstated on October 21, 2025 and completed on November 8, 2025. The final contract price was \$516,717. The difference between the contract amount and the final contract price is due to three (3) change order adjustments totaling \$47,717, refer to Attachment 1.

A general description of each Change Order is noted below.

Change Order 1 (\$33,574):

- Changed the toilet partitions from powdered coated steel partitions to brushed stainless steel.
- Scraped loose plaster from interior and exterior masonry walls damaged by the fire and applied a new skim coat of plaster and filled old plumbing location holes within the masonry walls.
- Relocated the electrical panel to a uni-strut rack, added a new disconnect switch and added exterior wall mounted electrical cans for the lift station pump operations.

Change Order 2 (\$3,807):

COUNCIL COMMUNICATION

- Changes for pump panel configuration for proper operations.

Change Order 3 (\$10,336):

- Accounted for work suspension due to material lead times, and additional pump panel operations.

This contract has been completed in substantial conformance with the plans and specifications approved by City Council on November 20, 2024. Before and after photos are attached, Attachment 2.

Following acceptance by the City Council, as required by law, the Parks Superintendent will file a Notice of Completion with the County Recorder's Office. The notice serves to notify vendors and subcontractors that the project is complete and begins their 30-day period to file a stop notice requiring the City to withhold payments from the prime contractor in the event of a payment dispute.

STRATEGIC VISION:

6C. Parks: Develop & maintain sports/recreational facilities for City & public use including an indoor sports facility.

FISCAL IMPACT:

This project has replaced the fire damaged restroom structure and brings the facility to current ADA code compliance. The total cost to complete this project is \$516,717.

FUNDING AVAILABLE:

Property Insurance (66125200.7020) PKCP-24001.Misc S&S	\$569,000
--	-----------

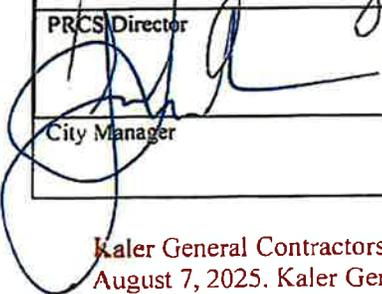
CITY OF LODI

PROPOSED CHANGE ORDER AND REQUEST FOR PROPOSAL

PROJECT: Lodi Lake North Restroom Restoration CONTRACTOR: Kaler General Contractors, Inc. ARCHITECT: WMB Architects	C.O. NO: 3
	PCO NO: 3
	RFI NO:
	Submittal NO:
Submit Proposal Within 15 Days Upon Receipt of This Request	

Brief Description of Work

This Change Order includes:
 1. Installation of additional pump components not on the approved set of plans. Kaler COR #7 \$10,336.00

Request, Proposal, Recommendation and Approval		
Requesting Official: Steve Virrey	Date of Request: July 21,	Schedule Impact <u>0</u> Days
Contractor Proposal Date:	2025 Add Amount: \$10,336.00	Deduct Amount: \$0.00
Reason For Change: Owner requested	Account: 66125200.77020	
Requested By: Steve Virrey		
CONTRACTOR AGREES TO FURNISH ALL LABOR AND MATERIALS AND PERFORM ALL WORK REQUIRED TO COMPLETE THE ABOVE DESCRIBED WORK CHANGE IN ACCORDANCE WITH THE REQUIREMENTS FOR SIMILAR WORK COVERED BY THE CONTRACT EXCEPT AS OTHERWISE STIPULATED HEREIN FOR THE STATED CONSIDERATION. TO PERFORM THE CHANGES FOR THE AMOUNT INDICATED WHICH INCLUDES ANY EXTENDED OR JOBSITE OVERHEAD, DISRUPTION, RIPPLE EFFECT AND OTHER IMPACT COSTS. NO WORK WILL BE STARTED UNTIL THIS PROPOSAL IS ACCEPTED.		
Bill Kaler	01/09/26	ORIGINAL CONTRACT \$469,000.00
Contractor	Date	PREVIOUS ADDS \$33,574.00
	01-08-26	PREVIOUS DEDUCTS \$0
Parke Superintendent	Date	THIS CHANGE \$10,336.00
	1/8/2026	CONTRACT TO DATE \$516,717.00
PRCS Director	Date	CONTRACT TIME ADJUSTMENT <u>0</u> DAYS
	1/8/26	ORIGINAL CONTRACT COMPLETION DATE: 120 Calendar Days August 26, 2025
City Manager	Date	ADJUSTED CONTRACT 120 Calendar Days Note Work Suspension COMPLETION DATE: November 8, 2025

Kaler General Contractors, Inc. and the City of Lodi agreed to the suspension of contract work beginning August 7, 2025. Kaler General Contractors, Inc. and the City of Lodi agreed to reinstate work beginning October 21, 2025 with a new completion date of November 8, 2025.

1/8/2026

CITY COUNCIL

Cameron Bregman, Mayor
Ramon Yopez, Mayor Pro Tempore
Mikey Hothi
Lisa Craig-Hensley
Alan Nakanishi



James Lindsay
Acting City Manager

Katie O. Lucchesi
City Attorney

Olivia Nashed
City Clerk

October 16, 2025

Kaler General Contractors, Inc.
Attn: Bill Kaler
3720 Omec Circle
Rancho Cordova, CA 95742

SUBJECT: Lodi Lake North Restroom Restoration Project Schedule – Work Reinstatement Dates

Mr. Kaler,

This letter is to document the mutually agreed reinstatement of contract work due to material procurement lead time for the pump control materials. Kaler General Contractors, Inc. and the City of Lodi agreed to the suspended contract work beginning on August 7, 2025. The necessary pump control materials have now been successfully procured and will be delivered to the job site on October 21, 2025. Nineteen (19) calendar days remain on the contract, with a NEW completion date of November 8, 2025.

The original last contract date was: August 26, 2025. Caltrans Workday calendar reflects the suspension of work. See attached for reference.

Thank you,

Steve Virrey
Parks and Properties Superintendent
City of Lodi

cc: Parks, Recreation and Cultural Services Director, Christina Jaromay
PRCS Administrative Assistant, Patty Moreno
PRCS Administrative Analyst, Shahanna Tate

CONSTRUCTION WORKDAY CALENDAR 2025 - 7 Day

JANUARY

SUN	MON	TUE	WED	THU	FRI	SAT
			594	595	596	597
			1	2	3	4
598	599	600	601	602	603	604
5	6	7	8	9	10	11
605	606	607	608	609	610	611
12	13	14	15	16	17	18
612	613	614	615	616	617	618
19	20	21	22	23	24	25
619	620	621	622	623	624	
26	27	28	29	30	31	

JULY

SUN	MON	TUE	WED	THU	FRI	SAT
		775	776	777	778	779
		1	2	3	4	5
780	781	782	783	784	785	786
6	7	8	9	10	11	12
787	788	789	790	791	792	793
13	14	15	16	17	18	19
794	795	796	797	798	799	800
20	21	22	23	24	25	26
801	802	803	804	805		
27	28	29	30	31		

FEBRUARY

SUN	MON	TUE	WED	THU	FRI	SAT
						625
						1
626	627	628	629	630	631	632
2	3	4	5	6	7	8
633	634	635	636	637	638	639
9	10	11	12	13	14	15
640	641	642	643	644	645	646
16	17	18	19	20	21	22
647	648	649	650	651	652	
23	24	25	26	27	28	

AUGUST

SUN	MON	TUE	WED	THU	FRI	SAT
					806	807
					1	2
808	809	810	811	812	813	814
3	4	5	6	7	8	9
815	816	817	818	819	820	821
10	11	12	13	14	15	16
822	823	824	825	826	827	828
17	18	19	20	21	22	23
829	830	831	832	833	834	835
24	25	26	27	28	29	30
836						
31						

MARCH

SUN	MON	TUE	WED	THU	FRI	SAT
						653
						1
654	655	656	657	658	659	660
2	3	4	5	6	7	8
661	662	663	664	665	666	667
9	10	11	12	13	14	15
668	669	670	671	672	673	674
16	17	18	19	20	21	22
675	676	677	678	679	680	681
23	24	25	26	27	28	29
682	683					
30	31					

SEPTEMBER

SUN	MON	TUE	WED	THU	FRI	SAT
	837	838	839	840	841	842
	1	2	3	4	5	6
843	844	845	846	847	848	849
7	8	9	10	11	12	13
850	851	852	853	854	855	856
14	15	16	17	18	19	20
857	858	859	860	861	862	863
21	22	23	24	25	26	27
864	865	866				
28	29	30				

APRIL

SUN	MON	TUE	WED	THU	FRI	SAT
		684	685	686	687	688
		1	2	3	4	5
689	690	691	692	693	694	695
6	7	8	9	10	11	12
696	697	698	699	700	701	702
13	14	15	16	17	18	19
703	704	705	706	707	708	709
20	21	22	23	24	25	26
710	711	712	713			
27	28	29	30			

OCTOBER

SUN	MON	TUE	WED	THU	FRI	SAT
			867	868	869	870
			1	2	3	4
871	872	873	874	875	876	877
5	6	7	8	9	10	11
878	879	880	881	882	883	884
12	13	14	15	16	17	18
885	886	887	888	889	890	891
19	20	21	22	23	24	25
892	893	894	895	896	897	
26	27	28	29	30	31	

MAY

SUN	MON	TUE	WED	THU	FRI	SAT
				714	715	716
				1	2	3
717	718	719	720	721	722	723
4	5	6	7	8	9	10
724	725	726	727	728	729	730
11	12	13	14	15	16	17
731	732	733	734	735	736	737
18	19	20	21	22	23	24
738	739	740	741	742	743	744
25	26	27	28	29	30	31

NOVEMBER

SUN	MON	TUE	WED	THU	FRI	SAT
						898
						1
899	900	901	902	903	904	905
2	3	4	5	6	7	8
906	907	908	909	910	911	912
9	10	11	12	13	14	15
913	914	915	916	917	918	919
16	17	18	19	20	21	22
920	921	922	923	924	925	926
23	24	25	26	27	28	29
927						
30						

JUNE

SUN	MON	TUE	WED	THU	FRI	SAT
745	746	747	748	749	750	751
1	2	3	4	5	6	7
752	753	754	755	756	757	758
8	9	10	11	12	13	14
759	760	761	762	763	764	765
15	16	17	18	19	20	21
766	767	768	769	770	771	772
22	23	24	25	26	27	28
773	774					
29	30					

DECEMBER

SUN	MON	TUE	WED	THU	FRI	SAT
	928	929	930	931	932	933
	1	2	3	4	5	6
934	935	936	937	938	939	940
7	8	9	10	11	12	13
941	942	943	944	945	946	947
14	15	16	17	18	19	20
948	949	950	951	952	953	954
21	22	23	24	25	26	27
955	956	957	958			
28	29	30	31			

START DATE
04-28-25

WORK WAS
SUSPENDED AT
101 CALENDAR
DAYS FOR
PUMP CONTROL
MATERIALS

ORIGINAL CONTRACT
COMPLETION

(120 CALENDAR
DAYS)

* NEW
COMPLETION DATE
TO BE DETERMINED
ON DELIVERY OF
PUMP CONTROL
MATERIALS.

WORK
REINSTATEMENT
OCTOBER 21, 2025
(19 DAYS TO
COMPLETE WORK)

NEW COMPLETION
DATE: NOV. 8, 2025
FOR MATERIAL
PROCUREMENT

RESOLUTION NO. 2025-027

A RESOLUTION OF THE LODI CITY COUNCIL AWARDING CONTRACT FOR
LODI LAKE PARK NORTH RESTROOM RESTORATION PROJECT TO KALER
GENERAL CONTRACTORS, INC., OF RANCHO CORDOVA, CALIFORNIA AND
AUTHORIZING THE CITY MANAGER TO EXECUTE CHANGE ORDERS

=====

WHEREAS, Lodi Lake Park North Restroom was damaged by an arson fire on June 4, 2023; and

WHEREAS, on October 18, 2023 Council approved a Professional Services Agreement with WMB Architects, Inc., of Stockton, California to perform the design services; and

WHEREAS, this project includes architecture, structural engineering, mechanical engineering, electrical engineering and ADA Code requirements; and

WHEREAS, plans and specifications for this project were approved on November 20, 2024. The City received the following bids for this project on January 30, 2025; and

Bidder	Location	Bid	Engineer's Estimate
Engineer's Estimate		\$800,000.00	
Kaler General Contractors, Inc.	Rancho Cordova	\$469,000.00	(\$331,000.00)
345 Builders	Galt	\$473,600.00	(\$326,400.00)
Bickford Construction	Lodi	\$584,999.00	(\$215,001.00)
Diede Construction	Woodbridge	\$645,000.00	(\$155,000.00)
Bobo Construction	Elk Grove	\$654,032.00	(\$145,968.00)
TSI Engineering, Inc.	North Highlands	\$975,786.00	\$175,786.00

WHEREAS, staff recommends awarding the contract for the Lodi Lake Park North Restroom Project to Kaler General Contractors, Inc., of Rancho Cordova, California, in the amount of \$469,000 and

WHEREAS, staff further recommends authorizing the City Manager to execute change orders in an amount not to exceed \$100,000; and

WHEREAS, an appropriation of \$800,000 from the General Liability account was approved during the 2024-25 fiscal year budget for these purposes; and

WHEREAS, staff anticipates an estimated insurance settlement in the amount of \$740,000 for reimbursement to the General Liability account.

NOW, THEREFORE, BE IT RESOLVED that the Lodi City Council does hereby RESOLVED that the Lodi City Council does hereby award the contract for the Lodi Lake Park North Restroom Restoration Project to Kaler General Contractors, Inc., of Rancho Cordova, California, in the amount of \$469,000 with anticipated change orders in the amount of \$100,000 for a total not to exceed of \$569,000; and

BE IT FURTHER RESOLVED that the Lodi City Council does hereby pursuant to Section 6.3q of the City Council Protocol Manual (adopted 11/6/19, Resolution No. 2019-223), the City Attorney is hereby authorized to make minor revisions to the above-referenced document(s) that do not alter the compensation or term, and to make clerical corrections as necessary.

Dated: March 5, 2025

=====

I hereby certify that Resolution No. 2025-027 was passed and adopted by the City Council of the City of Lodi in a regular meeting held March 5, 2025, by the following votes:

AYES: COUNCIL MEMBERS – Craig-Hensley, Hothi, Nakanishi, Yopez, and Mayor Bregman

NOES: COUNCIL MEMBERS – None

ABSENT: COUNCIL MEMBERS – None

ABSTAIN: COUNCIL MEMBERS – None


OLIVIA NASHED
City Clerk

2025-027



GENERAL CONTRACTORS, INC.
3720 DINEC CIRCLE, RANCHO CORDOVA CA 95742
CCL #577112 916.631.7211

CHANGE ORDER REQUEST # 05

KG-25-143-COR-5

Date: 10/1/2025

Project Address:
Lodi Lake Park North Restroom
1101 Turner Road
Lodi, CA 95242

To: City of Lodi
CM: Steve Virrey

Architect: WMB Architects, Inc.
Brandon Kleinert

Scope of Work:
Pump panel design changes.

COR #05

Additional Cost: \$3,807.00

We hereby agree to the above as an additional/reduced project cost(s) to be added/deleted to the original scope of work:

10/1/2025

Contractors Signature

Date

	10-06-2025
City of Lodi Authorized Signature STEPHEN VIRREY - PARKS SUPERINTENDENT	Date
	10-06-2025
Architects Authorized Signature	Date

Kaler General Contractors Inc.					
Lodi Lake Park North Restrooms Restoration				COR	5
Work Description:	Pump Panel Design Changes				
Costs					
Labor	Work Description	Quantity	Units	Rate	Total Labor
Foreman		0	Hours	\$121.91	\$0.00
Carpenter		0	Hours	\$116.06	\$0.00
Drywall Finisher		0	Hours	\$106.61	\$0.00
Painter		0	Hours	\$75.70	\$0.00
Labor Cost					\$0.00
Labor Markup 15%					\$0.00
Total					\$0.00
Materials	Description				Total Cost
					\$0.00
					\$0.00
					\$0.00
Material Cost					\$0.00
Materials Markup 15%					\$0.00
Total					\$0.00
Equipment	Description	Quantity	Units	Rate	Total Cost
		0	Hours	\$ 45.00	\$0.00
		0	Hours	\$ 5.00	\$0.00
					\$0.00
					\$0.00
Equipment Cost					\$0.00
Equipment Markup 15%					\$0.00
Total					\$0.00
Subcontractor					Total Cost
Diamond Electric	Pump Panel Design Changes				\$3,519.97
					\$0.00
					\$0.00
Total Subcontractor Cost					\$3,519.97
P/OH for Contractor 5%					\$176.00
Total					\$3,695.97
Time					Total Cost
	Add Days		Each	\$0.00	\$0.00
Subtotal COR Cost					\$3,695.97
Bonds 3%					\$110.88
COR Total					\$3,806.85



Change Order pump panel changes

Diamond Electric Group Inc.

233 Technology Way Suite 6
Rocklin, CA 95765
Phone: 916-408-6901

Diamond Electric Group Inc.
233 Technology Way Suite 6
Rocklin, CA 95765

1 October 2025
Job ID: JOB-0090

Attention: Brad Hail

Re: Change Order CO-0006 for: lodi lake

We are pleased to quote on the above Change Order CO-0006 as follows.

1. changes to pump panel
- 2.
- 3.

We reserve the right to correct this quote for errors and or omissions. All wiring to meet the requirements of the 2020 National Electrical Code.

Pricing:

Qty	Description	Unit	Ext
-----	-------------	------	-----

For the Sum of \$3,519.97

The Change Order expires on .

We request an additional days be added to the completion date of the project.

Sincerely,

Brad Hail
Diamond Electric Group Inc.

Job ID: JOB-0090
 Project: lodl lake



CO: CO-0006: pump panel changes

Summary by Item Number

1 Oct 2025 12:30:34

Item #	Size	Description	Q/M	Quantity	UOM	Mat Unit	Mat Result	Lab Unit	Lab Result	Quo Unit	Quo Result
2		changes to pump panel	M	1.00	EA	1,875.9600	1,875.96	0.0000	0.00	0.0000	0.00
Phase/Group totals:							1,875.96		0.00		0.00
Job totals:							1,875.96		0.00		0.00
Grand Material, Quote, Equipment, and Subcontract Total:											1,875.96

Job ID: JOB-0090
 Project: Iodi lake



CO: CO-0006: pump panel changes

Top Sheet Report

1 Oct 2025 12:30:56

Tax Rate status: Default Bid Name: Base Bid Bid Template: CHANGE ORDER ADJUST

Description	Column 1	Column 2
DIRECT LABOR HRS	8.00	
DIRECT LABOR DOLLARS		1,188.00
INDIRECT LABOR HRS		
INDIRECT LABOR DOLLARS		
LABOR TAX		
MATERIAL DOLLARS		1,875.96
QUOTES DOLLARS		
MATERIAL & QUOTE TAX		136.01
DJC		
SUBCONTRACTS TOTAL		
EQUIPMENT TOTAL		
EQUIP/SUBCONTRACT TAX		
OVERHEAD TOTAL		
PROFIT TOTAL		320.00
MISC TOTAL		

Bid Memo: Bid Total: 3,519.97



CHANGE ORDER REQUEST # 07

KG-25-143-COR-6

Date: 12/16/2025

Project Address:
Lodi Lake Park North Restroom
1101 Turner Road
Lodi, CA 95242

To: City of Lodi
CM: Steve Virrey

Architect: WMB Architects, Inc.
Brandon Kleinert

Scope of Work:

Coordination with City of Lodi for pump panel changes and issues.
 Onsite visits and office coordination to provide support and installation of materials not on the approved plans for the pump panel.
 Kaler GC Coordination, Site Visits & Supervision of work

COR #07

Additional Cost: \$10,336.00

We hereby agree to the above as an additional/reduced project cost(s) to be added/deleted to the original scope of work:

12/16/2025

Contractors Signature

Date

	<u>01-07-2026</u>
City of Lodi Authorized Signature STEPHEN VIRREY, PARKS SUPERINTENDENT	Date
	<u>01-07-2026</u>
Architects Authorized Signature Brandon Kleinert, WMB Architects	Date

Kaler General Contractors Inc.
Lodi Lake Park North Restrooms Restoration **COR 7**

Work Description: Pump Panel Coordination, materials & added Site Visits

Costs					
Labor	Work Description	Quantity	Units	Rate	Total Labor
Foreman	Supervision	16	Hours	\$121.91	\$1,950.56
Carpenter		0	Hours	\$116.06	\$0.00
Drywall Finisher		0	Hours	\$106.61	\$0.00
Painter		0	Hours	\$75.70	\$0.00
Labor Cost					\$1,950.56
Labor Markup 15%					\$292.58
Total					\$2,243.14

Materials	Description	Total Cost
		\$0.00
		\$0.00
		\$0.00
Material Cost		\$0.00
Materials Markup 15%		\$0.00
Total		\$0.00

Equipment	Description	Quantity	Units	Rate	Total Cost
		0	Hours	\$ 45.00	\$0.00
		0	Hours	\$ 5.00	\$0.00
					\$0.00
					\$0.00
Equipment Cost					\$0.00
Equipment Markup 15%					\$0.00
Total					\$0.00

Subcontractor	Description	Total Cost
Diamond Electric	Pump Panel Coordination	\$7,420.88
		\$0.00
		\$0.00
Total Subcontractor Cost		\$7,420.88
P/OH for Contractor 5%		\$371.04
Total		\$7,791.92

Time	Add Days	Each	Rate	Total Cost
			\$0.00	\$0.00
Subtotal COR Cost				\$10,035.07
Bonds 3%				\$301.05
COR Total				\$10,336.12



Change Order

coordination meetings

Diamond Electric Group Inc.

233 Technology Way Suite 6
Rocklin, CA 95765
Phone: 916-408-6901

Diamond Electric Group Inc.
233 Technology Way Suite 6
Rocklin, CA 95765

12 December 2025
Job ID: JOB-0090

Attention: Brad Hail

Re: Change Order CO-0007 for: lodi lake

We are pleased to quote on the above Change Order CO-0007 as follows.

1. onsite coordination for my super and foreman with the continuation of this pump issue
2. coordination between lloyd and bob emails to make sure we provide what is suppose to be installed that was different than bid day drawings

We reserve the right to correct this quote for errors and or omissions. All wiring to meet the requirements of the 2020 National Electrical Code.

Pricing:

Qty	Description	Unit	Ext
-----	-------------	------	-----

For the Sum of \$7,420.88

The Change Order expires on .

We request an additional days be added to the completion date of the project.

Sincerely,

Brad Hail
Diamond Electric Group Inc.

CITY OF LODI

PROPOSED CHANGE ORDER

PROJECT: Lodi Lake North Restroom Restoration Project	CO No.: 2
CONTRACTOR: Kaler General Contractors, INC.	PCO No.: 2
PROJECT MANAGER: Steve Virrey, Parks Superintendent	RFI No.:
	FI No.:
	Submit Proposal Within 15 Days Upon Receipt of This Request

Brief Description Of Work

This change order includes:

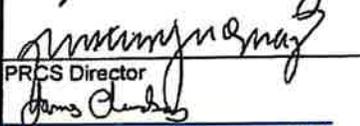
1. Changes for pump panel configuration. Kaler COR #5 \$3,807.00

TOTAL: \$3,807.00

Request, Proposal, Recommendation And Approval

Requesting Official: Steve Virrey	Request Date: 7/21/2025	Schedule Impact: 0 Days
Contractor Proposal Date:	Add Amount: \$3,807.00	Deduct Amount: \$0.00
Reason For Change: Owner requested		Account: 66125200.77020

CONTRACTOR AGREES TO FURNISH ALL LABOR AND MATERIALS AND PERFORM ALL WORK REQUIRED TO COMPLETE THE ABOVE DESCRIBED WORK CHANGE IN ACCORDANCE WITH THE REQUIREMENTS FOR SIMILAR WORK COVERED BY THE CONTRACT EXCEPT AS OTHERWISE STIPULATED HEREIN FOR THE STATED CONSIDERATION. TO PERFORM THE CHANGES FOR THE AMOUNT INDICATED WHICH INCLUDES ANY EXTENDED OR JOBSITE OVERHEAD, DISRUPTION, RIPPLE EFFECT AND OTHER IMPACT COSTS. NO WORK WILL BE STARTED UNTIL THIS PROPOSAL IS ACCEPTED. IF THE CONTRACTOR DOES NOT SIGN ACCEPTANCE OF THIS ORDER, THE CONTRACTOR SHOULD REFER TO SECTION 4-1.03A OF THE STANDARD SPECIFICATIONS REGARDING FILING A WRITTEN PROTEST WITHIN THE SPECIFIED TIME.

Bill Kaler	Oct 16, 2025	ORIGINAL CONTRACT:	\$469,000.00
		PREVIOUS ADDS:	\$33,574.00
Contractor	Date	PREVIOUS DEDUCTS:	\$0.00
	10-16-2025	THIS CHANGE ORDER:	\$3,807.00
Parks Superintendent	Date	TOTAL CONTRACT AMOUNT INCLUDING ALL CHANGE ORDERS:	\$506,381.00
	10/16/2025	CONTRACT TIME ADJUSTMENT	120 DAYS
PRCS Director	Date	ORIGINAL COMPLETION DATE:	26-Aug-25
James Lindsay (Oct 20, 2025 08:02:08 PDT)	Oct 20, 2025	ADJUSTED CONTRACT COMPLETION DATE:	11/8/2025
City Manager	Date		

* Kaler General Contractors, INC. and the City of Lodi agreed to the suspension of contract work beginning August 7, 2025 See attached letter/ Kaler General Contractors, INC. and the City of Lodi agreed to reinstate work beginning October 21, 2025, with a new completion date of November 9, 2025.

CITY COUNCIL
Cameron Bregman, Mayor
Ramon Yopez, Mayor Pro Tempore
Mikey Hothi
Lisa Craig-Hensley
Alan Nakanishi



James Lindsay
Acting City Manager
Katie O. Lucchesi
City Attorney
Olivia Nashed
City Clerk

October 16, 2025

Kaler General Contractors, Inc.
Attn: Bill Kaler
3720 Omec Circle
Rancho Cordova, CA 95742

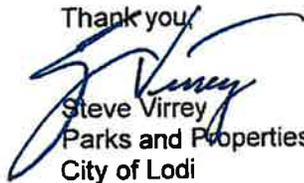
SUBJECT: Lodi Lake North Restroom Restoration Project Schedule – Work Reinstatement Dates

Mr. Kaler,

This letter is to document the mutually agreed reinstatement of contract work due to material procurement lead time for the pump control materials. Kaler General Contractors, Inc. and the City of Lodi agreed to the suspended contract work beginning on August 7, 2025. The necessary pump control materials have now been successfully procured and will be delivered to the job site on October 21, 2025. Nineteen (19) calendar days remain on the contract, with a NEW completion date of November 8, 2025.

The original last contract date was: August 26, 2025. Caltrans Workday calendar reflects the suspension of work. See attached for reference.

Thank you,



Steve Virrey
Parks and Properties Superintendent
City of Lodi

cc: Parks, Recreation and Cultural Services Director, Christina Jaromay
PRCS Administrative Assistant, Patty Moreno
PRCS Administrative Analyst, Shahanna Tate

CONSTRUCTION WORKDAY CALENDAR 2025 - 7 Day

JANUARY

SUN	MON	TUE	WED	THU	FRI	SAT
			594	595	596	597
			1	2	3	4
598	599	600	601	602	603	604
5	6	7	8	9	10	11
605	606	607	608	609	610	611
12	13	14	15	16	17	18
612	613	614	615	616	617	618
19	20	21	22	23	24	25
619	620	621	622	623	624	
26	27	28	29	30	31	

JULY

SUN	MON	TUE	WED	THU	FRI	SAT
		775	776	777	778	779
		1	2	3	4	5
780	781	782	783	784	785	786
6	7	8	9	10	11	12
787	788	789	790	791	792	793
13	14	15	16	17	18	19
794	795	796	797	798	799	800
20	21	22	23	24	25	26
801	802	803	804	805		
27	28	29	30	31		

FEBRUARY

SUN	MON	TUE	WED	THU	FRI	SAT
						625
						1
626	627	628	629	630	631	632
2	3	4	5	6	7	8
633	634	635	636	637	638	639
9	10	11	12	13	14	15
640	641	642	643	644	645	646
16	17	18	19	20	21	22
647	648	649	650	651	652	
23	24	25	26	27	28	

AUGUST

SUN	MON	TUE	WED	THU	FRI	SAT
					806	807
					1	2
808	809	810	811	812	813	814
3	4	5	6	7	8	9
815	816	817	818	819	820	821
10	11	12	13	14	15	16
822	823	824	825	826	827	828
17	18	19	20	21	22	23
829	830	831	832	833	834	835
24	25	26	27	28	29	30
836						
31						

MARCH

SUN	MON	TUE	WED	THU	FRI	SAT
						653
						1
654	655	656	657	658	659	660
2	3	4	5	6	7	8
661	662	663	664	665	666	667
9	10	11	12	13	14	15
668	669	670	671	672	673	674
16	17	18	19	20	21	22
675	676	677	678	679	680	681
23	24	25	26	27	28	29
682	683					
30	31					

SEPTEMBER

SUN	MON	TUE	WED	THU	FRI	SAT
		837	838	839	840	841
		1	2	3	4	5
843	844	845	846	847	848	849
7	8	9	10	11	12	13
850	851	852	853	854	855	856
14	15	16	17	18	19	20
857	858	859	860	861	862	863
21	22	23	24	25	26	27
864	865	866				
28	29	30				

APRIL

SUN	MON	TUE	WED	THU	FRI	SAT
		684	685	686	687	688
		1	2	3	4	5
689	690	691	692	693	694	695
6	7	8	9	10	11	12
696	697	698	699	700	701	702
13	14	15	16	17	18	19
703	704	705	706	707	708	709
20	21	22	23	24	25	26
710	711	712	713			
27	28	29	30			

OCTOBER

SUN	MON	TUE	WED	THU	FRI	SAT
			867	868	869	870
			1	2	3	4
871	872	873	874	875	876	877
5	6	7	8	9	10	11
878	879	880	881	882	883	884
12	13	14	15	16	17	18
885	886	887	888	889	890	891
19	20	21	22	23	24	25
892	893	894	895	896	897	
26	27	28	29	30	31	

MAY

SUN	MON	TUE	WED	THU	FRI	SAT
			714	715	716	
			1	2	3	
717	718	719	720	721	722	723
4	5	6	7	8	9	10
724	725	726	727	728	729	730
11	12	13	14	15	16	17
731	732	733	734	735	736	737
18	19	20	21	22	23	24
738	739	740	741	742	743	744
25	26	27	28	29	30	31

NOVEMBER

SUN	MON	TUE	WED	THU	FRI	SAT
						898
						1
899	900	901	902	903	904	905
2	3	4	5	6	7	8
906	907	908	909	910	911	912
9	10	11	12	13	14	15
913	914	915	916	917	918	919
16	17	18	19	20	21	22
920	921	922	923	924	925	926
23	24	25	26	27	28	29
927						
30						

JUNE

SUN	MON	TUE	WED	THU	FRI	SAT
						745
						1
746	747	748	749	750	751	752
2	3	4	5	6	7	8
753	754	755	756	757	758	759
9	10	11	12	13	14	15
760	761	762	763	764	765	766
16	17	18	19	20	21	22
767	768	769	770	771	772	773
23	24	25	26	27	28	29
774	775					
30	31					

DECEMBER

SUN	MON	TUE	WED	THU	FRI	SAT
						928
						1
929	930	931	932	933		
2	3	4	5	6		
934	935	936	937	938	939	940
7	8	9	10	11	12	13
941	942	943	944	945	946	947
14	15	16	17	18	19	20
948	949	950	951	952	953	954
21	22	23	24	25	26	27
955	956	957	958			
28	29	30	31			

START DATE
04-28-25

WORK WAS SUSPENDED AT 101 CALENDAR DAYS FOR PUMP CONTROL MATERIALS

ORIGINAL CONTRACT COMPLETION (120 CALENDAR DAYS)

* NEW COMPLETION DATE TO BE DETERMINED ON DELIVERY OF PUMP CONTROL MATERIALS.

WORK REINSTATEMENT OCTOBER 21, 2025 (19 DAYS TO COMPLETE WORK)

NEW COMPLETION DATE: NOV. 3, 2025 FOR MATERIAL PROCUREMENT



CHANGE ORDER REQUEST # 05

KG-25-143-COR-5

Date: 10/1/2025

Project Address:
Lodi Lake Park North Restroom
1101 Turner Road
Lodi, CA 95242

To: City of Lodi
CM: Steve Virrey

Architect: WMB Architects, Inc.
Brandon Kleinert

Scope of Work:
Pump panel design changes.

COR #05

Additional Cost: \$3,807.00

We hereby agree to the above as an additional/reduced project cost(s) to be added/deleted to the original scope of work:

B. Kelly _____

10/1/2025

Contractors Signature

Date

<i>Stephen Virrey</i> City of Lodi Authorized Signature STEPHEN VIRREY - PARKS SUPERINTENDENT	10-06-2025
Architects Authorized Signature	Date
<i>Brandon Kleinert</i>	10-06-2025

Kaler General Contractors Inc.						
Lodi Lake Park North Restrooms Restoration				COR	5	
Work Description:		Pump Panel Design Changes				
Costs						
Labor	Work Description	Quantity	Units	Rate	Total Labor	
Foreman		0	Hours	\$121.91	\$0.00	
Carpenter		0	Hours	\$116.06	\$0.00	
Drywall Finisher		0	Hours	\$106.61	\$0.00	
Painter		0	Hours	\$75.70	\$0.00	
					Labor Cost	\$0.00
					Labor Markup 15%	\$0.00
					Total	\$0.00
Materials						
Description					Total Cost	
					\$0.00	
					\$0.00	
					\$0.00	
					Material Cost	\$0.00
					Materials Markup 15%	\$0.00
					Total	\$0.00
Equipment						
Description	Quantity	Units	Rate	Total Cost		
	0	Hours	\$ 45.00	\$0.00		
	0	Hours	\$ 5.00	\$0.00		
					\$0.00	
					\$0.00	
					Equipment Cost	\$0.00
					Equipment Markup 15%	\$0.00
					Total	\$0.00
Subcontractor						
Description					Total Cost	
Diamond Electric	Pump Panel Design Changes				\$3,519.97	
					\$0.00	
					\$0.00	
					Total Subcontractor Cost	\$3,519.97
					P/OH for Contractor 5%	\$176.00
					Total	\$3,695.97
Time						
Add Days					Total Cost	
					\$0.00	
					Subtotal COR Cost	\$3,695.97
					Bonds 3%	\$110.88
					COR Total	\$3,806.85



Change Order

pump panel changes

Diamond Electric Group Inc.

233 Technology Way Suite 6
Rocklin, CA 95765
Phone: 916-408-6901

Diamond Electric Group Inc.
233 Technology Way Suite 6
Rocklin, CA 95765

1 October 2025
Job ID: JOB-0090

Attention: Brad Hall

Re: Change Order CO-0006 for: lodi lake

We are pleased to quote on the above Change Order CO-0006 as follows.

1. changes to pump panel
- 2.
- 3.

We reserve the right to correct this quote for errors and or omissions. All wiring to meet the requirements of the 2020 National Electrical Code.

Pricing:

Qty	Description	Unit	Ext
-----	-------------	------	-----

For the Sum of \$3,519.97

The Change Order expires on .

We request an additional days be added to the completion date of the project.

Sincerely,

Brad Hall
Diamond Electric Group Inc.

Job ID: JOB-0090
 Project: lodi loda



CD: CC-0006: pump panel changes

Summary by Item Number

1 Oct 2025 12:38:34

Item #	Qty	Description	Unit	Unit Price	Material	Lab Unit	Lab Result	Unit Price	Unit Price
2	1.00	changes to pump panel	EA	1,873.98	1,873.98	0.00	0.00	0.00	0.00
Phase/Group Totals:					1,873.98	0.00	0.00	0.00	0.00
Job Totals:					1,873.98	0.00	0.00	0.00	0.00

Grand Material, Equip, and Subcontract Total: 1,873.98

Phone: 916 408 6901
 Web:

Job ID: JOB-0090
 Project: Iodi Lake



CO: CO-0006: pump panel changes

Top Sheet Report

1 Oct 2025 12:30:56

Bid Template: CHANGE ORDER ADJUST

Tax Rate status: Default

Bid Name: Base Bid

Description	Column 1	Column 2
DIRECT LABOR HRS	8.00	
DIRECT LABOR DOLLARS		1,188.00
INDIRECT LABOR HRS		
INDIRECT LABOR DOLLARS		
LABOR TAX		
MATERIAL DOLLARS		1,875.95
QUOTES DOLLARS		
MATERIAL & QUOTE TAX		136.01
DJC		
SUBCONTRACTS TOTAL		
EQUIPMENT TOTAL		
EQUIP/SUBCONTRACT TAX		
OVERHEAD TOTAL		
PROFIT TOTAL		320.00
MISC TOTAL		

Bid Total: 3,519.97

Bid Memo:

RESOLUTION NO. 2025-027

A RESOLUTION OF THE LODI CITY COUNCIL AWARDING CONTRACT FOR LODI LAKE PARK NORTH RESTROOM RESTORATION PROJECT TO KALER GENERAL CONTRACTORS, INC., OF RANCHO CORDOVA, CALIFORNIA AND AUTHORIZING THE CITY MANAGER TO EXECUTE CHANGE ORDERS

=====

WHEREAS, Lodi Lake Park North Restroom was damaged by an arson fire on June 4, 2023; and

WHEREAS, on October 18, 2023 Council approved a Professional Services Agreement with WMB Architects, Inc., of Stockton, California to perform the design services; and

WHEREAS, this project includes architecture, structural engineering, mechanical engineering, electrical engineering and ADA Code requirements; and

WHEREAS, plans and specifications for this project were approved on November 20, 2024. The City received the following bids for this project on January 30, 2025; and

Bidder	Location	Bid	Engineer's Estimate
Engineer's Estimate		\$800,000.00	
Kaler General Contractors, Inc.	Rancho Cordova	\$469,000.00	(\$331,000.00)
345 Builders	Galt	\$473,600.00	(\$326,400.00)
Bickford Construction	Lodi	\$584,999.00	(\$215,001.00)
Diede Construction	Woodbridge	\$645,000.00	(\$155,000.00)
Bobo Construction	Elk Grove	\$654,032.00	(\$145,968.00)
TSI Engineering, Inc.	North Highlands	\$975,786.00	\$175,786.00

WHEREAS, staff recommends awarding the contract for the Lodi Lake Park North Restroom Project to Kaler General Contractors, Inc., of Rancho Cordova, California, in the amount of \$469,000 and

WHEREAS, staff further recommends authorizing the City Manager to execute change orders in an amount not to exceed \$100,000; and

WHEREAS, an appropriation of \$800,000 from the General Liability account was approved during the 2024-25 fiscal year budget for these purposes; and

WHEREAS, staff anticipates an estimated insurance settlement in the amount of \$740,000 for reimbursement to the General Liability account.

NOW, THEREFORE, BE IT RESOLVED that the Lodi City Council does hereby RESOLVED that the Lodi City Council does hereby award the contract for the Lodi Lake Park North Restroom Restoration Project to Kaler General Contractors, Inc., of Rancho Cordova, California, in the amount of \$469,000 with anticipated change orders in the amount of \$100,000 for a total not to exceed of \$569,000; and

BE IT FURTHER RESOLVED that the Lodi City Council does hereby pursuant to Section 6.3q of the City Council Protocol Manual (adopted 11/6/19, Resolution No. 2019-223), the City Attorney is hereby authorized to make minor revisions to the above-referenced document(s) that do not alter the compensation or term, and to make clerical corrections as necessary.

Dated: March 5, 2025

I hereby certify that Resolution No. 2025-027 was passed and adopted by the City Council of the City of Lodi in a regular meeting held March 5, 2025, by the following votes:

AYES: COUNCIL MEMBERS – Craig-Hensley, Hothi, Nakanishi, Yopez, and Mayor Bregman

NOES: COUNCIL MEMBERS – None

ABSENT: COUNCIL MEMBERS – None

ABSTAIN: COUNCIL MEMBERS – None


OLIVIA NASHED
City Clerk

2025-027

3007_001

Final Audit Report

2025-10-20

Created:	2025-10-16
By:	patricia moreno (pmoreno@lodi.gov)
Status:	Signed
Transaction ID:	CBJCHBCAABAA_V_3CjAH5QHKYO4uRcjbXci9ZkH4LO3W

"3007_001" History

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2025-10-16 - 9:17:34 PM GMT
-  Document emailed to James Lindsay (jlindsay@lodi.gov) for signature
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-  Document e-signed by James Lindsay (jlindsay@lodi.gov)
Signature Date: 2025-10-20 - 3:02:08 PM GMT - Time Source: server
-  Agreement completed.
2025-10-20 - 3:02:08 PM GMT

COPY

CITY OF LODI

PROPOSED CHANGE ORDER

PROJECT: Lodi Lake North Restroom Restoration Project	CO No.:	1
CONTRACTOR: Kaler General Contractors, INC.	PCO No.:	1
	RFI No.:	
PROJECT MANAGER: Steve Virrey, Parks Superintendent	FI No.:	
	Submit Proposal Within 15 Days Upon Receipt of This Request	

Brief Description Of Work

1. Change toilet compartment partitions to stainless steel. Kaler COR #1 \$6,249.00
2. Masonary slump stone wall plaster repairs. Kaler COR #2 \$8,148.00
3. Electrical Panel: Framework, disconnect switch & additional electrical cans. Kaler COR #3 \$19,177.00

TOTAL: \$33,574.00

Request, Proposal, Recommendation And Approval

Requesting Official: <u>Steve Virrey</u>	Request Date: <u>4/28/2025</u>	Schedule Impact: <u>0</u> Days
Contractor Proposal Date: _____	Add Amount: <u>\$33,574.00</u>	Deduct Amount: <u>\$0.00</u>
Reason For Change: <u>Owner requested</u>	Account: <u>66125200.77020</u>	

CONTRACTOR AGREES TO FURNISH ALL LABOR AND MATERIALS AND PERFORM ALL WORK REQUIRED TO COMPLETE THE ABOVE DESCRIBED WORK CHANGE IN ACCORDANCE WITH THE REQUIREMENTS FOR SIMILAR WORK COVERED BY THE CONTRACT EXCEPT AS OTHERWISE STIPULATED HEREIN FOR THE STATED CONSIDERATION. TO PERFORM THE CHANGES FOR THE AMOUNT INDICATED WHICH INCLUDES ANY EXTENDED OR JOBSITE OVERHEAD, DISRUPTION, RIPPLE EFFECT AND OTHER IMPACT COSTS. NO WORK WILL BE STARTED UNTIL THIS PROPOSAL IS ACCEPTED. IF THE CONTRACTOR DOES NOT SIGN ACCEPTANCE OF THIS ORDER, THE CONTRACTOR SHOULD REFER TO SECTION 4-1.03A OF THE STANDARD SPECIFICATIONS REGARDING FILING A WRITTEN PROTEST WITHIN THE SPECIFIED TIME

<i>Bill Kaler</i>	Date	Sept 22, 2025
Contractor		ORIGINAL CONTRACT: \$469,000.00
		PREVIOUS ADDS: \$0.00
		PREVIOUS DEDUCTS: \$0.00
		THIS CHANGE ORDER: \$33,574.00
<i>Stephen Virrey</i>	Date	09.18.2025
Parks Superintendent		TOTAL CONTRACT AMOUNT INCLUDING ALL CHANGE ORDERS: \$502,574.00
<i>Christina Heromay</i>	Date	Sep 18, 2025
PRCS Director		CONTRACT TIME ADJUSTMENT 0 DAYS
<i>L. Han</i>	Date	Sept 22, 2025
City Manager		ORIGINAL COMPLETION DATE: 26-Aug-25
		ADJUSTED CONTRACT COMPLETION DATE:

* Kaler General Contractors, INC. and the City of Lodi agreed to the suspension of contract work beginning August 7, 2025. See attached letter

CITY COUNCIL

Cameron Bregman, Mayor
Ramon Yepez, Mayor Pro Tempore
Mikey Hothi
Lisa Craig-Hensley
Alan Nakanishi



James Lindsay
Acting City Manager

Katie O. Lucchesi
City Attorney

Olivia Nashed
City Clerk

September 17, 2025

Kaler General Contractors, Inc.
Attn: Bill Kaler
3720 Omec Circle
Rancho Cordova, CA 95742

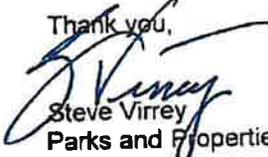
SUBJECT: Lodi Lake North Restroom Restoration Project Schedule – Work Suspension Dates

Mr. Kaler,

This letter is to document the mutually agreed suspension of contract work due to material procurement lead time for the pump control materials. Kaler General Contractors, Inc. and the City of Lodi agreed to the suspension of contract work beginning on August 7, 2025. Nineteen (19) calendar days remain on the contract. Once the pump controls are received the contract calendar day count will resume.

The original last contract date was: August 26, 2025. Caltrans Workday calendar reflects the suspension of work. See attached for reference.

Thank you,



Steve Virrey
Parks and Properties Superintendent
City of Lodi

cc: Parks, Recreation and Cultural Services Director, Christina Jaromay
PRCS Administrative Assistant, Patty Moreno
PRCS Administrative Analyst, Shahanna Tate

CONSTRUCTION WORKDAY CALENDAR 2025 - 7 Day

JANUARY

SUN	MON	TUE	WED	THU	FRI	SAT
		594	595	596	597	
		1	2	3	4	
598	599	600	601	602	603	604
5	6	7	8	9	10	11
605	606	607	608	609	610	611
12	13	14	15	16	17	18
612	613	614	615	616	617	618
19	20	21	22	23	24	25
619	620	621	622	623	624	
26	27	28	29	30	31	

JULY

SUN	MON	TUE	WED	THU	FRI	SAT
		775	776	777	778	779
		1	2	3	4	5
780	781	782	783	784	785	786
6	7	8	9	10	11	12
787	788	789	790	791	792	793
13	14	15	16	17	18	19
794	795	796	797	798	799	800
20	21	22	23	24	25	26
801	802	803	804	805		
27	28	29	30	31		

FEBRUARY

SUN	MON	TUE	WED	THU	FRI	SAT
						625
						1
626	627	628	629	630	631	632
2	3	4	5	6	7	8
633	634	635	636	637	638	639
9	10	11	12	13	14	15
640	641	642	643	644	645	646
16	17	18	19	20	21	22
647	648	649	650	651	652	
23	24	25	26	27	28	

AUGUST

SUN	MON	TUE	WED	THU	FRI	SAT
					806	807
					1	2
808	809	810	811	812	813	814
3	4	5	6	7	8	9
815	816	817	818	819	820	821
10	11	12	13	14	15	16
822	823	824	825	826	827	828
17	18	19	20	21	22	23
829	830	831	832	833	834	835
24	25	26	27	28	29	30
836						
31						

MARCH

SUN	MON	TUE	WED	THU	FRI	SAT
						653
						1
654	655	656	657	658	659	660
2	3	4	5	6	7	8
661	662	663	664	665	666	667
9	10	11	12	13	14	15
668	669	670	671	672	673	674
16	17	18	19	20	21	22
675	676	677	678	679	680	681
23	24	25	26	27	28	29
682	683					
30	31					

SEPTEMBER

SUN	MON	TUE	WED	THU	FRI	SAT
						837
						1
838	839	840	841	842		
2	3	4	5	6		
843	844	845	846	847	848	849
7	8	9	10	11	12	13
850	851	852	853	854	855	856
14	15	16	17	18	19	20
857	858	859	860	861	862	863
21	22	23	24	25	26	27
864	865	866				
28	29	30				

APRIL

SUN	MON	TUE	WED	THU	FRI	SAT
		684	685	686	687	688
		1	2	3	4	5
689	690	691	692	693	694	695
6	7	8	9	10	11	12
696	697	698	699	700	701	702
13	14	15	16	17	18	19
703	704	705	706	707	708	709
20	21	22	23	24	25	26
710	711	712	713			
27	28	29	30			

OCTOBER

SUN	MON	TUE	WED	THU	FRI	SAT
				867	868	869
				1	2	3
870	871	872	873	874	875	876
4	5	6	7	8	9	10
877	878	879	880	881	882	883
11	12	13	14	15	16	17
884	885	886	887	888	889	890
18	19	20	21	22	23	24
891	892	893	894	895	896	897
25	26	27	28	29	30	31

START DATE
04-28-25

MAY

SUN	MON	TUE	WED	THU	FRI	SAT
				714	715	716
				1	2	3
717	718	719	720	721	722	723
4	5	6	7	8	9	10
724	725	726	727	728	729	730
11	12	13	14	15	16	17
731	732	733	734	735	736	737
18	19	20	21	22	23	24
738	739	740	741	742	743	744
25	26	27	28	29	30	31

NOVEMBER

SUN	MON	TUE	WED	THU	FRI	SAT
						898
						1
899	900	901	902	903	904	905
2	3	4	5	6	7	8
906	907	908	909	910	911	912
9	10	11	12	13	14	15
913	914	915	916	917	918	919
16	17	18	19	20	21	22
920	921	922	923	924	925	926
23	24	25	26	27	28	29
927						
30						

JUNE

SUN	MON	TUE	WED	THU	FRI	SAT
						745
						1
746	747	748	749	750	751	752
2	3	4	5	6	7	8
753	754	755	756	757	758	759
9	10	11	12	13	14	15
760	761	762	763	764	765	766
16	17	18	19	20	21	22
767	768	769	770	771	772	773
23	24	25	26	27	28	29
774	775					
30	31					

DECEMBER

SUN	MON	TUE	WED	THU	FRI	SAT
						928
						1
929	930	931	932	933		
2	3	4	5	6		
934	935	936	937	938	939	940
7	8	9	10	11	12	13
941	942	943	944	945	946	947
14	15	16	17	18	19	20
948	949	950	951	952	953	954
21	22	23	24	25	26	27
955	956	957	958			
28	29	30	31			

WORK WAS SUSPENDED AT 101 CALENDAR DAYS FOR PUMP CONTROL MATERIALS

ORIGINAL CONTRACT COMPLETION

(120 CALENDAR DAYS)

* NEW COMPLETION DATE TO BE DETERMINED ON DELIVERY OF PUMP CONTROL MATERIALS.

RESOLUTION NO. 2025-027

A RESOLUTION OF THE LODI CITY COUNCIL AWARDING CONTRACT FOR
LODI LAKE PARK NORTH RESTROOM RESTORATION PROJECT TO KALER
GENERAL CONTRACTORS, INC., OF RANCHO CORDOVA, CALIFORNIA AND
AUTHORIZING THE CITY MANAGER TO EXECUTE CHANGE ORDERS

=====

WHEREAS, Lodi Lake Park North Restroom was damaged by an arson fire on June 4, 2023; and

WHEREAS, on October 18, 2023 Council approved a Professional Services Agreement with WMB Architects, Inc., of Stockton, California to perform the design services; and

WHEREAS, this project includes architecture, structural engineering, mechanical engineering, electrical engineering and ADA Code requirements; and

WHEREAS, plans and specifications for this project were approved on November 20, 2024. The City received the following bids for this project on January 30, 2025; and

Bidder	Location	Bid	Engineer's Estimate
Engineer's Estimate		\$800,000.00	
Kaler General Contractors, Inc.	Rancho Cordova	\$469,000.00	(\$331,000.00)
345 Builders	Galt	\$473,600.00	(\$326,400.00)
Bickford Construction	Lodi	\$584,999.00	(\$215,001.00)
Diede Construction	Woodbridge	\$645,000.00	(\$155,000.00)
Bobo Construction	Elk Grove	\$654,032.00	(\$145,968.00)
TSI Engineering, Inc.	North Highlands	\$975,786.00	\$175,786.00

WHEREAS, staff recommends awarding the contract for the Lodi Lake Park North Restroom Project to Kaler General Contractors, Inc., of Rancho Cordova, California, in the amount of \$469,000 and

WHEREAS, staff further recommends authorizing the City Manager to execute change orders in an amount not to exceed \$100,000; and

WHEREAS, an appropriation of \$800,000 from the General Liability account was approved during the 2024-25 fiscal year budget for these purposes; and

WHEREAS, staff anticipates an estimated insurance settlement in the amount of \$740,000 for reimbursement to the General Liability account.

NOW, THEREFORE, BE IT RESOLVED that the Lodi City Council does hereby RESOLVED that the Lodi City Council does hereby award the contract for the Lodi Lake Park North Restroom Restoration Project to Kaler General Contractors, Inc., of Rancho Cordova, California, in the amount of \$469,000 with anticipated change orders in the amount of \$100,000 for a total not to exceed of \$569,000; and

BE IT FURTHER RESOLVED that the Lodi City Council does hereby pursuant to Section 6.3q of the City Council Protocol Manual (adopted 11/6/19, Resolution No. 2019-223), the City Attorney is hereby authorized to make minor revisions to the above-referenced document(s) that do not alter the compensation or term, and to make clerical corrections as necessary.

Dated: March 5, 2025

I hereby certify that Resolution No. 2025-027 was passed and adopted by the City Council of the City of Lodi in a regular meeting held March 5, 2025, by the following votes:

AYES: COUNCIL MEMBERS – Craig-Hensley, Hothi, Nakanishi, Yopez, and Mayor Bregman

NOES: COUNCIL MEMBERS – None

ABSENT: COUNCIL MEMBERS – None

ABSTAIN: COUNCIL MEMBERS – None


OLIVIA NASHED
City Clerk

2025-027

2895_001

Final Audit Report

2025-09-22

Created:	2025-09-22
By:	patricia moreno (pmoreno@lodi.gov)
Status:	Signed
Transaction ID:	CBJCHBCAABAA3-FFLHeAI7yzfbEEoIOC7ZHAR_CvscSE

"2895_001" History

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2025-09-22 - 10:40:59 PM GMT
-  Email viewed by Ricardo Garcia (rgarcia@lodi.gov)
2025-09-22 - 10:57:31 PM GMT
-  Document e-signed by Ricardo Garcia (rgarcia@lodi.gov)
Signature Date: 2025-09-22 - 11:11:29 PM GMT - Time Source: server
-  Agreement completed.
2025-09-22 - 11:11:29 PM GMT



CHANGE ORDER REQUEST # 1

KG-25-143-COR-1

Date: 4/25/2025

Project Address:
Lodi Lake Park North Restroom
1101 Turner Road
Lodi, CA 95242

To: City of Lodi
CM: Steve Virrey

Architect: WMB Architects, Inc.
Brandon Kleinert

Specified Material Change: Division 10 Section 10 21 13 - Metal Toilet Compartments
Change the toilet compartments from powdered coated steel partitions to Brushed Stainless Steel as per submittal #2 review.

COR #01

Additional Cost: **\$6,249.00**

We hereby agree to the above as an additional/reduced project cost(s) to be added/deleted to the original scope of work:

B. Kleinert

4/25/2025

Contractors Signature

Date

<i>Stephen Virrey</i>		<i>07-08-2025</i>
City of Lodi Authorized Signature	STEPHEN VIRREY PARKS SUPERINTENDENT	Date
<i>Brandon Kleinert</i>		07-08-2025
Architects Authorized Signature	Brandon Kleinert WMB Architects	Date

Chad Ehl

9.16.25

for James Lyndsay

Kaler General Contractors Inc.					
Lodi Lake Park North Restrooms Restoration				COR	1
Work Description:	Change partitions from powder coated steel to stainless steel				
Costs					
Labor	Work Description	Quantity	Units	Rate	Total Labor
Foreman		0	Hours	\$116.91	\$0.00
Carpenter		0	Hours	\$111.06	\$0.00
Drywall Finisher		0	Hours	\$101.61	\$0.00
Painter		0	Hours	\$75.70	\$0.00
Labor Cost					\$0.00
Labor Markup 15%					\$0.00
Total					\$0.00
Materials	Description				Total Cost
					\$0.00
					\$0.00
					\$0.00
Material Cost					\$0.00
Materials Markup 15%					\$0.00
Total					\$0.00
Equipment	Description	Quantity	Units	Rate	Total Cost
		0	Hours	\$ 45.00	\$0.00
		0	Hours	\$ 5.00	\$0.00
					\$0.00
					\$0.00
Equipment Cost					\$0.00
Equipment Markup 15%					\$0.00
Total					\$0.00
Subcontractor					Total Cost
Golden State Specialties	SS Partitions				\$5,778.00
					\$0.00
					\$0.00
Total Subcontractor Cost					\$5,778.00
P/OH for Contractor 5%					\$288.90
Total					\$6,066.90
Time					Total Cost
	Add Days		Each	\$0.00	\$0.00
Subtotal COR Cost					\$6,066.90
Bonds 3%					\$182.01
COR Total					\$6,248.91

Golden State Specialties



P.O. Box 1716 Hollister, CA 95024
 Deb Reid (805) 591-0457 Direct License #955523
 (831) 630-7040 Fax Deb@GoldenStateSpecialties.com

ATTENTION: **Kaler General Contractors**
 DATE: **3/28/25**
 TOTAL PAGES: **Three**

Project: Lodi Lake Park

City: Lodi

We are pleased to submit the following quote to: **FURNISH & INSTALL**

	Description	Total
	Change The Partitions From Baked Enamel Floor Mounted Overhead Braced To Stainless Steel #4 Brushed Finish Floor Mounted/Overhead Braced - Standard Material & Hardware <div style="text-align: right;"> Credit For Baked Enamel Materials: (5,138.00) Tax 8.25% (423.89) Freight: (538.11) Total Credit (6,100.00) </div> <div style="text-align: right;"> Stainless Steel Partitions Materials: \$ 10,475.00 Tax 8.25% \$ 864.19 Freight: \$ 538.81 Total: \$ 11,878.00 </div>	
	Price Includes: Materials, Tax, & Freight	\$ 5,778.00
REGISTRATION #1000012202		

EXCLUDES: DEMO, PATCHING, BLOCKING, BACKING & CUTOUTS

Prices Are Valid For 60 Days From Date On Quote

If you notice any large discrepancies in our quote please contact
 Deb 805.591.0457 Direct

GOLDEN STATE SPECIALTIES

**P.O. Box 1716
Hollister, CA 95024
(805) 591-0457
License #955523**

SUBMITTAL

SECTION 10 21 13- Metal Toilet Compartments

3/24/25

**The Attached Shop Drawings ARE NOT Field Dimensions
Golden State Specialties Will Field Measure Prior To
Production**

PROJECT:

**Lodi Lake Park
North Restroom Renovations
Kaler General Contractors**

NOTES:

Hadrian Baked Enamel

Floor Mounted/Overhead Braced

6 Toilet Stalls

2 Wall Mount Urinal Screens 24" x 48"H

Chrome Plated Zinc Stirrup Brackets

Chrome Plated Zinc Gravity Type Hinges

Chrome Plated Zinc Door Hardware

ST/ST Shoes

58"H Doors & Panels

Color: TBD

Warranty Information

Hadrian Manufacturing Inc. ("Hadrian") provides the following warranty with respect to the Hadrian product(s) supplied for the project indicated above.

Subject to the terms set out herein, the product(s) are warranted against defects in material and workmanship from the date of receipt by the authorized Hadrian distributor for the warranty period outlined below:

Powder Coated Toilet Partitions	3 years
Stainless Steel Toilet Partitions	5 years
Solid Plastic Toilet Partitions	25 years
Phenolic Black Core Toilet Partitions	25 years
Emperor (corridor) Lockers	2 years
Gladiator (athletic) Lockers	5 years
Replacement Front Lockers	2 years
Boot Racks	1 year

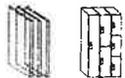
The warranty is for Hadrian material only and excludes damages caused by installation errors, vandalism, improper usage, improper maintenance, exposure to harsh environments or chemicals (such as chlorine, bromine, etc.) or failure of the building structure to adequately support the product. Site preparations (i.e. wood blocking, etc.) must meet final drawing specifications and Hadrian's recommended maintenance procedure must be followed.

The exclusive remedy under this warranty shall, at Hadrian's discretion, be replacement or repair of the defective material. Hadrian will not pay any removal, installation or other labor costs associated with the repair or replacement. Replacement material will be warranted for the unused portion of the original warranty period.

No warranty of merchantability or fitness for a particular purpose is made or implied. In no event shall Hadrian be liable for any other costs or damages, including loss of profit, loss of revenue, indirect, incidental, special or consequential damages howsoever arising, whether under warranty, contract, statute, tort, equity or otherwise.

This warranty extends only to the original authorized Hadrian customer and is non-transferable. Warranty claims must be made during the applicable warranty period and initiated by contacting Hadrian at the following coordinates: USA: 440-942-9118 / CANADA: 905-333-0300.

The foregoing constitutes the entire warranty given by Hadrian and no one is authorized to change or expand this warranty on behalf of Hadrian.



Hadrian Manufacturing Inc., 965 Syscon Road, Burlington, ON, L7L 5S3 T: 905-333-0300 F: 905-333-1841
Hadrian Manufacturing Inc., 2550 - 61 Avenue SE, Calgary, AB, T2C 4V2 T: 905-333-0300 F: 905-333-1841
Hadrian Inc., 7420 Clover Avenue, Mentor, OH, 44060 T: 440-942-9118 F: 440-942-9618
Hadrian Inc., 3602 West Washington Street, Suite 200, Phoenix, AZ, 85009 T: 440-942-9118 F: 440-942-9618

08/2023

Maintenance Procedure

FOR POWDER COATED PAINTED FINISH

MAINTENANCE OF YOUR TOILET PARTITIONS SHOULD BE A PART OF YOUR REGULAR BUILDING PREVENTIVE MAINTENANCE PROCEDURE

1. Tighten any screws that have become loose due to vibrational forces or attempted vandalism.

Check the top door pin to be sure it is flush with the top of the hinge.
2. Be sure the surfaces are dry after being cleaned and rinsed with clear water (when required).
3. Partitions exposed to severe humidity should be washed and dried frequently. If partitions are in a shower room, a coat of paste wax is recommended on painted surfaces.
4. Periodically, remove any dirt, grime or foreign matter with a soft cloth
5. Where surfaces reveal spotting resulting from hand perspiration, soil, or grease, a thorough cleaning with warm water and a mild detergent (ie. Ivory Soap), followed by rinsing, and removal of excess moisture, will renew the clean even surface, providing a pleasant sanitary appearance. (Use of cleaning agents containing abrasives such as household cleaning powder, steel wool, and harsh detergents or acids ARE NOT RECOMMENDED).
6. To maintain the brilliance of hardware, these components can be periodically improved by an application of non-abrasive cleaner with a damp cloth.
7. Where additional gloss and protection is desirable, light applications of commercial liquid or paste waxes are highly recommended.
8. If your partitions have a continuous hinge, regular application of an LPS II or an industrial type, non-drying lubricant is recommended.

LEED V4 CREDIT INFORMATION

Building Product Disclosure and Optimization – Sourcing of Raw Materials

Hadrian products can contribute toward Option 2. Leadership Extraction Practices (1 Point)

Use products that meet at least one of the responsible extraction criteria below for at least 25%, by cost, of the total value of permanently installed building products in the project.

- **Recycled content.** Recycled content is the sum of post-consumer recycled content plus one half the Pre-consumer recycled content, based on cost. Products meeting recycled content criteria are valued at 100% of their cost for the purposes of credit achievement calculation.

For credit achievement calculation, products sourced (extracted, manufactured, and purchased) within 100 miles (160 km) of the project site are valued at 200% of their base contributing cost. For credit achievement calculation, the base contributing cost of individual products compliant with multiple responsible extraction criteria is not permitted to exceed 100% its total actual cost (before regional multipliers) and double counting of single product components compliant with multiple responsible extraction criteria is not permitted and in no case is a product permitted to contribute more than 200% of its total actual cost.

Hadrian's Recycled Content Documentation

LEED CATEGORY	DESCRIPTION	POWDER COATED TOILET PARTITIONS	STAINLESS STEEL TOILET PARTITIONS	SOLID PLASTIC TOILET PARTITIONS	LOCKERS BOOT RACKS
				CLASSB	
Recycled content	Post-consumer	16%	76%	0%	30%
	Pre-consumer	14%	15%	Minimum of 30%	14%
	In addition to the recycled content of the material above, the honeycomb / vertical core of powder coated toilet partitions, stainless steel toilet partitions and lockers contains 9% post-consumer and 9% pre-consumer recycled content				
Regional materials	Product weight	92% Steel	92% Steel	N/A	99% Steel
	Distribution	8% Honeycomb	8% Vertical		1% Honeycomb
Regional materials	Manufacturing / final assembly location	Burlington, ON	Burlington, ON	Mentor, OH	Calgary, AB
	Material extraction / harvest location				

Hadrian's manufacturing sites in the United States and lockers are all pre-1990 recycled paper that contribute to the global recycling program. USA is 100% recycled paper that contribute to the global recycling program. USA is 100% recycled.

VOLATILE ORGANIC COMPOUNDS (VOCs)

Hadrian's products are low VOC products. Hadrian's products are low VOC products.

UREA FORMALDEHYDE

Hadrian's products are low Urea Formaldehyde products. Hadrian's products are low Urea Formaldehyde products. Hadrian's products are low Urea Formaldehyde products.

BUILDING PRODUCT DISCLOSURE AND OPTIMIZATION – MATERIAL INGREDIENTS

Option 1. Leadership Extraction Practices (1 Point)

Use products that meet at least one of the responsible extraction criteria below for at least 25%, by cost, of the total value of permanently installed building products in the project.

For credit achievement calculation, products sourced (extracted, manufactured, and purchased) within 100 miles (160 km) of the project site are valued at 200% of their base contributing cost. For credit achievement calculation, the base contributing cost of individual products compliant with multiple responsible extraction criteria is not permitted to exceed 100% its total actual cost (before regional multipliers) and double counting of single product components compliant with multiple responsible extraction criteria is not permitted and in no case is a product permitted to contribute more than 200% of its total actual cost.

Hadrian's Contribution - Hadrian's contribution toward the credit is 100% of the total value of the products used in the project.

Material Specification

HEADRAIL BRACED - POWDER COATED METAL TOILET PARTITIONS - STANDARD

1.01 Construction Features

Shall be 1461mm (57.5") high and (1") thick with cover sheets not less than 0.8mm (.030") thick. Headrails shall be 25mm (1") by 41mm (1.625") extruded anodized aluminum with anti-grip design. Wall thickness to be 1.5mm (.060") and shall be securely attached to wall and pilasters with manufacturer's fittings in such a way as to make a strong and rigid installation. All joints in headrails shall be made at a pilaster.

1.02 Doors

Doors shall be 1461mm (57.5") high and 635mm (25") wide with cover sheets not less than 0.8mm (.030") thick.

1.03 Panels

Shall be 1461mm (57.5") high and (1") thick with cover sheets not less than 0.8mm (.030") thick.

1.04 Pilasters

Shall be 32mm (1.25") thick with cover sheets not less than 0.8mm (.030").

1.05 Headrail

Shall be 25mm (1") by 41mm (1.625") extruded anodized aluminum with anti-grip design. Wall thickness to be 1.5mm (.060") and shall be securely attached to wall and pilasters with manufacturer's fittings in such a way as to make a strong and rigid installation. All joints in headrails shall be made at a pilaster.

1.06 Pilaster Fastening Method

Pilasters shall be securely and rigidly fastened to the floor and fitted with a jack levelling screw for vertical adjustment. The floor fastening shall be concealed and protected by a 102mm (4") high, die-formed stainless steel pilaster shoe.

1.07 Hardware and Fittings

All panel and pilaster brackets and all door hardware shall be chrome plated zinc die castings.

Fasteners are zinc plated 12 x 1-3/4" and 12 x 5/8" TR-27 6-lobe security screws.

Doors shall be equipped with chrome plated zinc die cast gravity type hinges, mounted on upper and lower pilaster hinge brackets.

Threaded top hinge pin shall be metal with a self-lubricating nylon sleeve. Door hinges shall be fully concealed within the thickness of the door and adjustable to permit the door to come to rest at any position when not latched.

Coat Hook and Bumper: Each door to be fitted with a combined coat hook and bumper. Finish to match other hardware items.

Latch to be a concealed, chrome plated zinc die casting with face mortised flush with edge strip of door.

The combined stop and keeper shall have a 19mm (0.75") diameter bumper locked in place. Finish to match other hardware items.

Pilaster shoes to be stainless steel with a #4 brushed finish.

1.08 Finish

All sheet metal to be thoroughly cleaned, phosphated and finished with a high performance powder coating, baked on to provide a uniform smooth protective finish. Color shall be as selected from Hadrian's color card.

This specification applies to room(s): Women's, Men's

WALL MOUNTED - POWDER COATED METAL URINAL SCREENS - STANDARD**1.01 Construction**

Screens shall be constructed of two sheets of panel flatness zinc-coated galvalume steel, ASTM A653 GR33, laminated under pressure to a honeycomb core for sound deadening and rigidity. Formed edges to be welded together and inter-locked under tension with a roll-formed oval crown locking bar, mitred, welded and ground smooth at the corners. Honeycomb to have a maximum 25mm (1") cell size.

1.02 Wall Mounted

Screens shall be 25mm (1") thick with cover sheets not less than 22-gauge (0.8mm / .030") Screens shall be 457mm (18") or 610mm (24") deep by 1219mm (48") high and anchored into the wall approximately 305mm (12") off the floor.

1.03 Hardware & Fittings

Screens shall be fastened to the wall with double-ear brackets that are chrome plated zinc die cast. Floor mounted with pilaster and floor to ceiling mounted with post to be fastened to the front support with "U" brackets that are chrome plated zinc die cast.

1.04 Finish

All sheet metal to be thoroughly cleaned, phosphated and finished with a high performance powder coating, baked on to provide a uniform smooth protective finish. Color shall be as selected from Hadrian's color card.

This specification applies to room(s): Men's

Solid Colors



535   ★
Light Grey



609 
Colonial Blue



541
Extra White



603  ★
Almond



576
Ruby Red



621 
Slate



639
Sapphire Blue



504  ★
Linen



532 
Latte



607
Bordeaux



545 
Charcoal



510 
Black



500
White



585
Sahara



581
Moss Green

Anti-Graffiti Colors *(Subject to upcharge)*

Proven ASTM D6578 Graffiti Resistance to easily remove:

Permanent Marker • Lipstick
• Water Based Ink Marker •
Wax Crayon • Spray Paint



833
Tricorn Black



828
Dovetail



829
Desert



826
Kilim Beige

Special Effects Colors *(Subject to upcharge)*



837
Black Fox



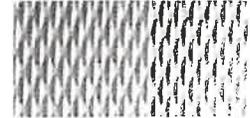
831
Nickel Metallic



814
Cast Iron Metallic



900
304 #4 Brushed
Stainless Steel



90R
Embossed Stainless
Steel

★ Headrail braced toilet partitions available for Premium Quick Ship in USA; subject to upcharge.

 Headrail braced, ceiling hung (for 9 ft ceilings and lower) and floor mounted toilet partitions available for Quick Ship in USA.

 Headrail braced toilet partitions available for Quick Ship in Canada.

For custom colors, a minimum of 20 units for toilet partitions and 100 units for lockers is required per color. Custom colors are subject to upcharge.

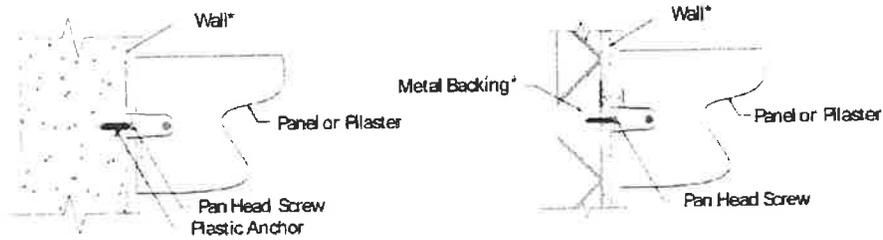
Colors shown are approximations only. For accurate color matches, refer to Hadrian's printed color card. Hadrian reserves the right to change colors and/or finishes without prior notice.

Drawing Notes

- Compartment widths on drawings are shown at center line of panels.
- Compartment depths on drawings are shown from front face of pilaster to finished wall.
- Cut headrail in field to suit (if applicable).
- "X" on drawings indicates that backing is required.
- Fabrication will not commence until approval has been received.
- Material supplied will conform to the dimensions indicated on drawings.
- Scale of drawings - none.
-  on drawings indicates location of pilaster reinforcing channel(s).

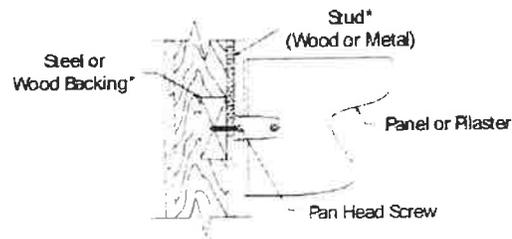
Recommended Methods for Attaching to a Wall

The details below demonstrate the recommended methods for attaching panels and pilasters to common wall types. Other wall types may be encountered. In all cases, proper wall backing is required to achieve a successful toilet partition installation.



Masonry Wall

Sheet Metal Wall



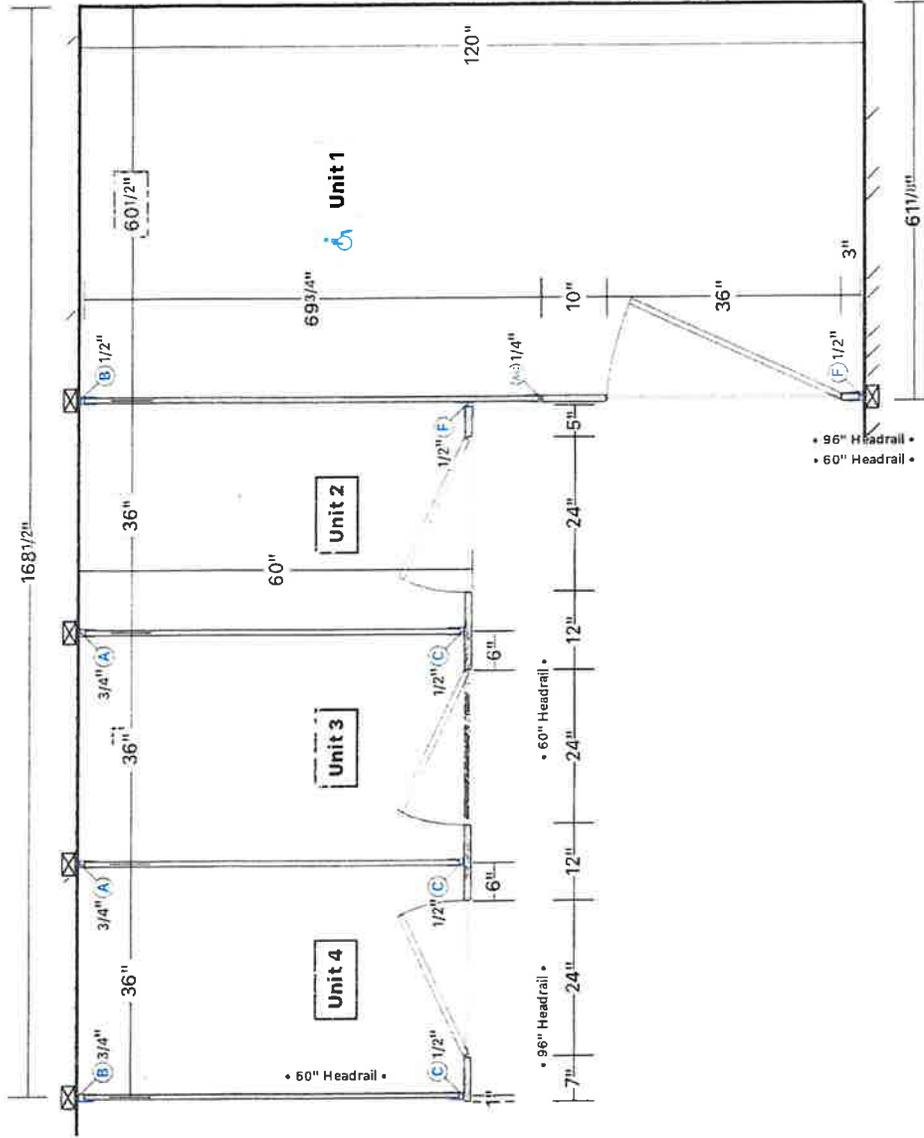
Stud Wall

Project Title Lodi Lake Park
Drawing Title Women's

Created By Jesus Osuna
Date Printed 03/16/2025

Last edit date 01/29/2025
Project Number P0928091

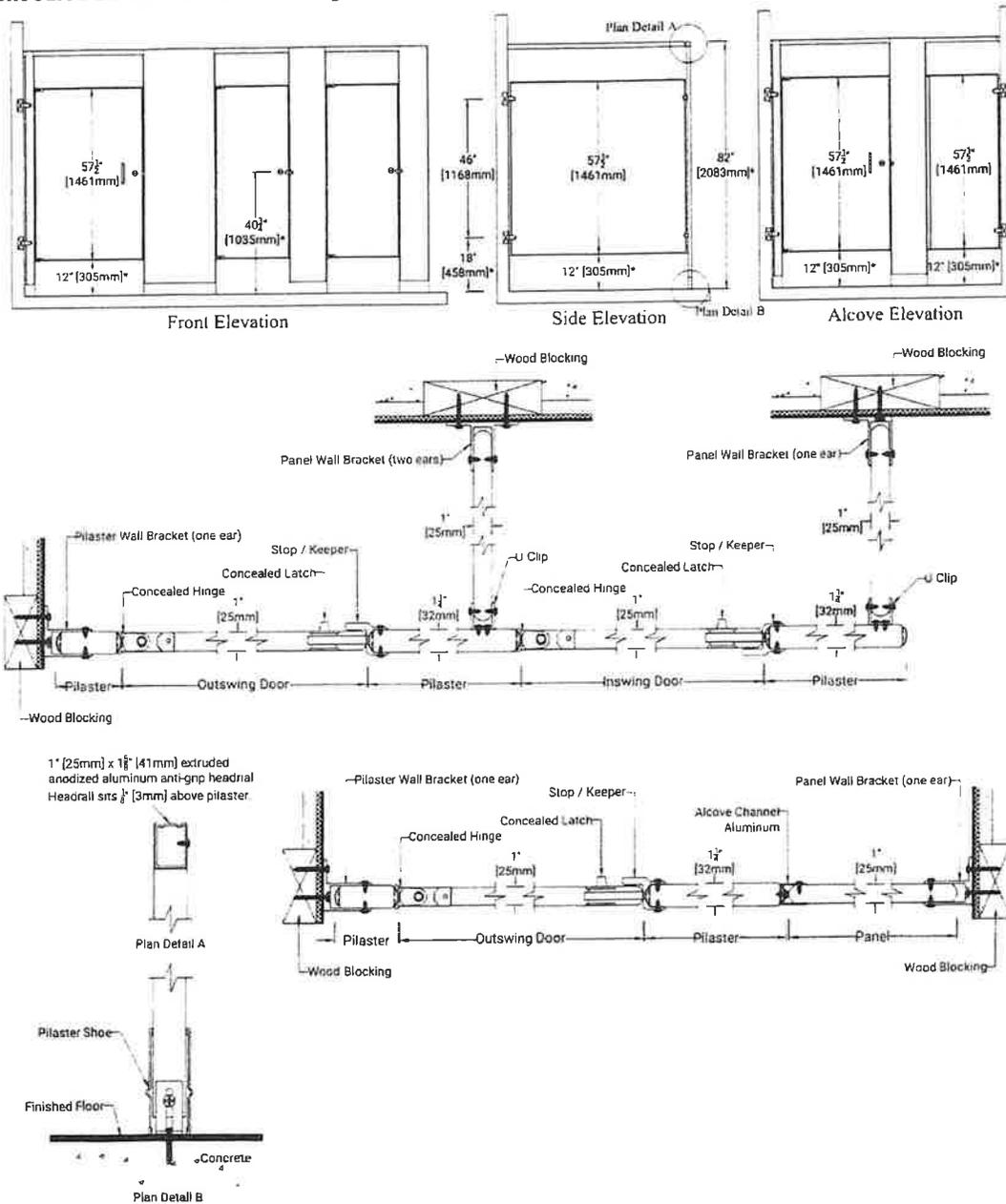
Distributor Stumbaugh and Associate...



LEGEND	
(A)	H Bracket
(AC)	Alcove Channel
(B)	F Bracket
(C)	Clip
(F)	Plaster F Bracket

Product	Unit	Panel/Door height = 58"
Series	Standard	Panel/Door AFF = 12"
Sightline Option	None	
Material	Powder Coated	
AFF	12"	
Hinge	Concealed	
Finish	TBA Color TBA	
Hardware	Standard Chrome	
Latch	Concealed	
Partition Options	Headrail Braced	
	None	

Metal Toilet Partitions
Standard Series - Headrail Braced - 12" [305mm] AFF
Chrome - Concealed Latch & Concealed Hinge



Important Notes:

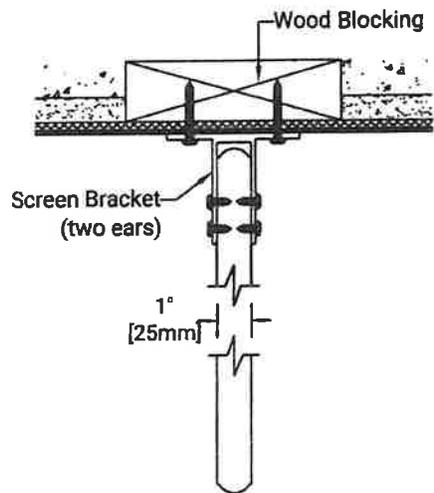
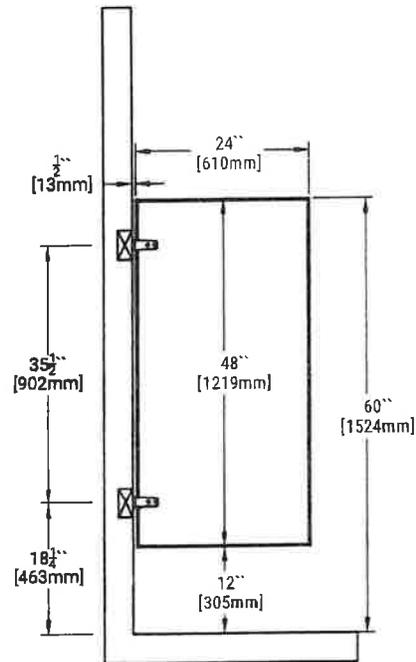
Refer to final drawings for wood blocking information. Wood blocking is critical to ensure a rigid installation. See material specifications for material and hardware finishes.

*Above finish floor: dimensions may vary due to floor level and cam position

Metal Urinal Screens

Standard Series - Wall mounted
12" [305mm] AFF

Stirrup Bracket Installation



Available Panel Depths

18" [457mm]

24" [610mm]

GOLDEN STATE SPECIALTIES

**P.O. Box 1716
Hollister, CA 95024
(805) 591-0457
License #955523**

SUBMITTAL

SECTION 10 28 00- Toilet Accessories

3/24/25

PROJECT:

**Lodi Lake Park
North Restroom Renovations
Kaler General Contractors**

Cubicles and Toilet Partitions

Cubicles and Toilet Partitions⁴

Privada® Cubicles	10 Year ⁸
Evolve Cubicles	10 Year ⁸
Cubicle Hardware	10 year⁸

Traditional

DuraLineSeries®, CGL 1080/1180	25 years
SierraSeries®, SCRC 1090	25 years ⁶
DesignerSeries™, HPL 1040	2 Year ⁵

Budget HPL Series

MetroSeries™, HPL 1550	2 Year ⁵
ClassicSeries®, HPL 1540	2 Year ⁵

Toilet Partition Hardware

1 year⁷

¹ The following Bobrick mirrors are warranted against silver spoilage from the date of purchase for the periods set forth.

² The following Bobrick hand dryers are warranted to be free from defects in workmanship and material under normal usage from the date of purchase for the periods set forth.

³ The following Koala Kare® Products are warranted to be free of defects in workmanship and material under normal usage, and a replacement policy against vandalism from the date of purchase for periods set forth.

⁴ The following Bobrick toilet partition panels, doors and stiles are warranted against breakage, corrosion, delaminating and defects in workmanship from the date of purchase for the periods set forth (*this limited warranty is conditioned on the toilet partitions being properly installed, used and serviced*).

⁵ Spraying down or hosing HPL partitions voids warranty.

⁶ SCRC is a natural material comprised of wood chips, dyes and resins with a melamine surface. Edges lack a melamine surface and may discolor in environments with significant UV lighting. Discoloration of edges, should it occur, is not covered under warranty.

⁷ *All hardware and mounting brackets are guaranteed to be free from defects in material and workmanship provided for a period of one year from date of purchase. (this limited warranty is conditioned on the hardware being properly installed, used and serviced)*

⁸ *Manufacturer's Warranty: Manufacturer's standard 10 year warranty for material and workmanship. Manufacturer's standard 10 year guarantee against defects in material and workman ship for door hardware, frame, and mounting brackets.*

Other Products

Bobrick washroom accessories not listed above and hardware for all series of Bobrick toilet partitions are warranted to be free from defects in workmanship and material under normal usage service for one year from the date of purchase. (*Rust and discoloration to stainless steel parts resulting from exposure to harsh environmental and/or chemical conditions are not considered to be defects in workmanship or material and there is no expressed or implied warranty provided for such condition. Refer to Bobrick Advisory Bulletin TB-21, Effective Ways to Clean Stainless Steel.*)

Limitations on Warranties

In all instances, the purchaser's exclusive remedy against Bobrick is for the repair or replacement, at Bobrick's option, of warranted defective products or parts. Bobrick will also bear the cost of the purchaser's return of defective products or parts to Bobrick. Bobrick's warranties set forth above do not cover damage resulting from vandalism. No other remedy (including, but not limited to, damages for field labor charges, lost profits, lost sales, injury to persons or property or any other incidental or consequential losses) is available.

Date of Terms: Last updated 1/13/2023

Advisory Bulletin



BUILDING VALUE SINCE 1908

TB-21 Stainless Steel Cleaning and Maintenance

- Always:** Wipe or polish with the grain direction of satin finishes.
Remove any cleaning or soap residue from stainless surface with water and wipe dry with clean cloth.
- Caution:** Avoid cleaning products containing bleach, hydrochloric acids and or chlorides . . . these are frequently found in toilet bowl or tile cleaners and in abrasive scrubbing powders.
Avoid use of steel wool which can leave behind fine particles that cause surface rust.
Avoid use of abrasive cleaners on bright polish stainless steel surfaces.

CONDITION	CLEANING AGENT	METHOD OF APPLICATION
Dirt, smudges, and fingerprints	Use mild cleaning solution or stainless steel cleaners.	Apply cleaner. Wipe off soil using a cloth or sponge for smooth surfaces and a soft brush for textured surfaces. Rinse and dry.
Graffiti	Bobrick Graffiti Remover, part #891099 or equivalent .	Apply cleaner, rub spots with soft cloth or sponge. Rinse and dry.
Stubborn spots, atmospheric discoloration	Liquid or spray stainless steel polish.	As recommended by manufacturer. Rinse or dry.
Mineral deposit or scale from hard water	Bathroom cleaners containing phosphoric acid or acetic acids.	Apply liberally, allow to stand for a few minutes; scrub with coarse toweling or soft bristle brush in direction of grain. Rinse and dry.
“Rust” discoloration resulting from exposure to harsh environmental and or chemical conditions Note: Shower and other wet environments may need to be cleaned daily to minimize “rust” discoloration.	Appropriate cleaner listed above, plus 3M Scotch Brite pad #7447 or equivalent.	Clean surface as above, then rub stained area lightly with 3M Scotch Brite pad. Clean with stainless steel polish. Rinse and dry. Rub only with the grain direction of satin finishes. . . do not use on bright polish stainless steel.

continued . . .

Special Note for Toilet Partition Hardware

Although stainless steel is very resistant to rust, there are certain conditions where this can happen depending on various factors listed below:

- Cleansers containing Chloride or Muriatic Acid (hydrochloric acid).
- Concentrated soap residue where chemical additives to soap may cause discoloration and potentially dry out and result in a rusting appearance.
- Environments where water has high iron content or where contact with iron occurs (such as steel wool, machining chips or iron residue or dust from installation or cleaning of other steel products) can leave a rusty residue.
- Presence of salt containing chlorides.

Remove rust discoloration or corrosion as soon as possible to prevent permanent discoloration and pitting of the surface. Regular cleaning can restore the original condition in most cases with proper maintenance and cleaning. DAILY cleaning should prevent discoloration (rusting and rusting appearance) and corrosion in high moisture environments such as showers and shower compartments.

Materials and Tools Required:

- Mid abrasive cleaner such as Bar Keepers Friend (available at Home Improvement or Discount Stores).
- Soft Sponge and/or 3M Scotch Brite pad #7447 or equivalent.

Follow the Steps Below During Daily Cleaning:

1. Apply a generous amount on the affected areas and rub with a damp sponge in the direction of the grain. NOTE: Avoid using caustic cleaners that contain chlorides as the abrasive nature of these products will further damage the steel's chromium film.
2. Rinse with clear water and gently towel dry.
3. Repeat cleaning process daily or more often depending on severity of rusting.

TB-94 Bobrick Mirror Care and Maintenance

In order to avoid unnecessary damage to mirrors, it is important to clean and care for them properly. Much of the damage that occurs to mirrors (i.e. silver spoilage) is often easily preventable. If followed, the below guidelines will help prevent this damage from occurring to mirrors and possibly voiding the warranty.

Care & Cleaning: Clean mirrors properly to prevent damage

- The best and safest cleaner for a mirror is clean, warm water used with a soft, lint/ grit-free cloth. Wring all water from the cloth before wiping mirror. Dry immediately with a dry, lint/ grit-free cloth. Do not spray cleaners directly on the mirror. Always apply cleaners directly to the cloth and then wipe mirror. Do not ever hose down the mirror.
- Do not use commercial mirror cleaning products that contain ammonia, vinegar, acid or alkali cleaners. These substances can attack the front surface and edges as well as the backing of the mirror. No abrasive cleaners should ever be used on any mirror surface.
- After cleaning a mirror, make sure all joints and edges are dry so that no liquid or cleaner comes into contact with the edges and backing.
- Use #0000 oil-free steel wool, not solvents, to remove surface marks or stubborn dirt. Use of solvents can attack and damage edges and backing of mirrors.

While proper maintenance is important, sometimes installation can be the cause of eventual damage to mirrors. The below recommendations for best installation of mirrors will also help to ensure that mirrors remain damage-free and avoid silver spoilage.

Installation: Install mirrors correctly as per these guidelines

- Never install mirrors on unsealed plaster, masonry, or on a freshly painted wall until dried and/or properly sealed. Sprayed material, such as wall texture or adhesives for wall covering, should be completely cured before mirror installation.
- Mirrors should be installed with a breathing space behind them to promote air flow over the back of the mirror and prevent moisture condensation and entrapment.
- Never install a mirror in contact with a splash board or sink back, or permit edges of the mirror to be exposed to puddling conditions. Insist on at least 2/5" (10 mm) of space between the bottom edge of the mirror and other surfaces.
- If using adhesives, use those that are 'neutral-cure'. Avoid adhesives containing strong solvents or acids like acetone, toluene, methylene chloride, acetic acid, etc.
- Do not install mirrors when airborne solvents or heavy-duty cleaners or chemicals are in the air. In humid climates, wait until air conditioning is operating before installation.
- Mirrors should be the last materials to be installed after final cleanup.

Lodi Lake Park

LOCATION	GB 42"	GB 36"	TTD	TSC	SND	Mirror	HD
Womens (4)	1	1	4	4	4	2	1
Mens (2/2)	1	1	2	2		2	1
TOTALS	2	2	6	6	4	4	2

MODEL NUMBERS	B-6806	B-6806	B-274	B-221	B-270	B-1556	HU02
						24x36	

Excludes: Soap Dispensers



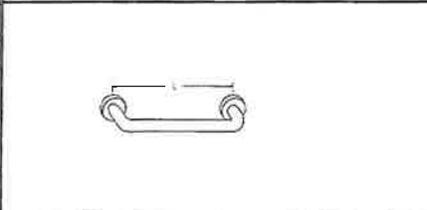
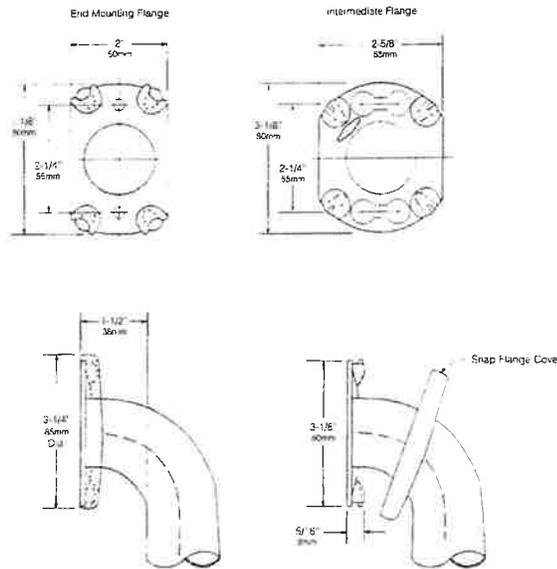
Technical Data

**1½" (38mm) DIAMETER
STAINLESS STEEL GRAB
BARS WITH SNAP FLANGE**

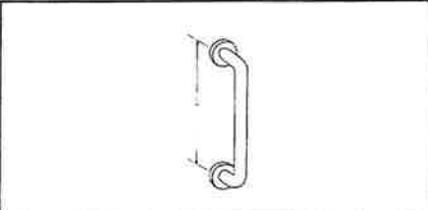
**B-6806
SERIES**

Specify Finish Required:

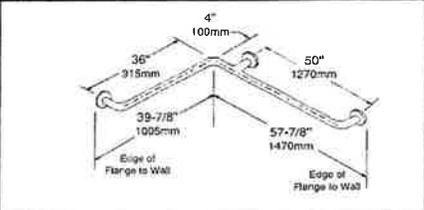
- Satin finish
- Satin finish with peened gripping surface; add suffix .99 to model number



HORIZONTAL



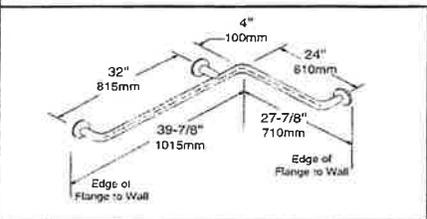
VERTICAL



**TWO-WALL WHEELCHAIR
TOILET COMPARTMENT**

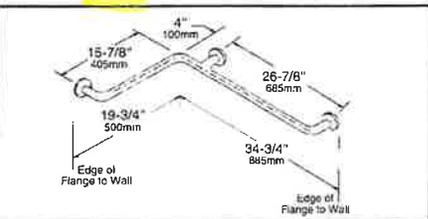
B-6806 x 12, 18, 24, 30, 36, 42, 48

B-68137



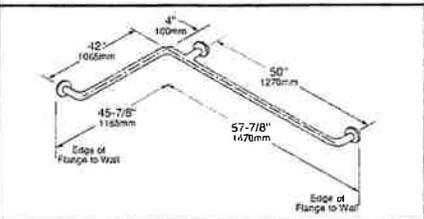
**HORIZONTAL TUB / SHOWER / TOILET
COMPARTMENT BAR 24 x 36**

B-68616



**HORIZONTAL TWO-WALL BAR
for Shower Stall**

B-6861



**TWO-WALL
TOILET COMPARTMENT BAR 42 x 54**

B-6897

continued ...

The illustrations and descriptions herein are applicable to production as of the date of this Technical Data Sheet. The manufacturer reserves the right to, and does from time to time, make changes and improvements in designs and dimensions.

Rev. 8/16/13 5th Printed in U.S.A.
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MATERIALS:

Grab Bar — 18-8 S, type-304, 18-gauge (1.2mm) stainless steel tubing with satin-finish, 1-1/2" (38mm) outside diameter. Ends are heliarc welded to flanges. Clearance between the grab bar and wall is 1-1/2" (38mm).

Concealed Mounting Flanges — 18-8 S, type-304, 1/8" (3mm) thick, stainless steel plate; end flanges 2" x 3-1/8" (50 x 80mm) with two holes for attachment to wall. Intermediate flanges 2-5/8" x 3-1/8" (65 x 80mm) wide x 3-1/8" (80mm) diameter.

Snap Flange Covers — 18-8 S, type-304, 22-gauge (0.8mm) drawn stainless steel with satin-finish, 3-1/4" (85mm) diameter x 1/2" (13mm) deep. Each cover snaps over mounting flange to conceal mounting screws.

STRENGTH:

Bobrick grab bars that provide 1-1/2" (38mm) clearance from wall can support loads in excess of 900 pounds (408kg) if properly installed. Other grab bar configurations can support loads in excess of 250 pounds (113kg) if properly installed, complying with accessible design (including ADAAG in the U.S.A.) for structural strength

Safety Warning: Grab bars are no stronger than the anchors and walls to which they are attached and, therefore, must be firmly secured in order to support the loads for which they are intended. To avoid potential injury, the building owner or maintenance personnel should remove the grab bar from service if the grab bar is not adequately secured to wall or if there is any observed damage to the welds.

INSTALLATION:

Provide concealed anchor device or backing as specified or required in accordance with local building codes before wall is finished. Fasten concealed mounting flanges to anchor device or backing with two screws in each flange. Snap flange covers over each mounting flange to conceal mounting screws. Concealed anchor devices and mounting screws are not included with Bobrick grab bars and must be specified as an accessory.

For Grab Bars with an Intermediate Flange(s), Pull Snap-Flange Covers away from mounting flanges. Place grab bar in desired mounting location. Use intermediate flange as a template to mark location of mounting screws at intermediate flange only. Mark screw locations at the center of the slot in the middle of the double-keyhole shaped mounting holes (2) in the intermediate flange. Remove grab bar from wall. Drive the intermediate flange mounting screws into wall at marked locations. **Note:** Make sure to leave a space of just over 1/8" (3.17mm) between the underside of the screw head and the wall. Install grab bar on the wall by placing the round ends of the intermediate flange double-keyhole shaped mounting holes over the mounting screws (2) are located in the middle of the flange slots. Install the mounting screws into the wall at the end flanges and secure tightly. Tighten the mounting screws at the intermediate flange. Press all snap-flange covers into place to conceal mounting flanges.

Note: Recommend use of 1/4" or #14 sheet metal or wood screws to install Intermediate Flange. #12 screws may also be used.

Important Notes:

- 1. **Mounting Kits** — Bobrick offers a mounting kit for installing grab bars; **one Bobrick mounting kit is required for each flange.**

Mounting Kit No.	Description
252-30	Consists of #14 x 2 1/2" type-304 stainless steel, Phillips round-head, sheet-metal screws.

- 2. **Grab Bar Fastener** — Bobrick offers a grab bar fastening system that secures all Bobrick grab bar series; **one Bobrick fastener is required for each flange.** Install grab bar without backing in wall requires minimum 5/8" (16mm) thick painted or tiled drywall.

WingIt™ Fastener No.	Description
251-4	Consists of 10–32 x 5/16" round-head, Phillips 18/8 stainless steel screws. (1) WingIt grab bar fastener.

- 3. **Optional Anchor Device** — Bobrick grab bar anchor device includes stainless steel machine screws to be used for attaching grab bars to anchors. **one Bobrick concealed anchor device is required for each flange.**

Optional Anchor No.	Description
2583	Anchor for 3/4" to 1" (19-25mm) panel 1 anchor required for each flange.
2586	Anchor for 1/2" to 1" (13mm) panel 1 anchor required for each flange.

SPECIFICATION:

Grab bar shall be type-304 stainless steel with satin-finish. Grab bar shall have 18-gauge (1.2mm) wall thickness and 1-1/2" (38mm) outside diameter. Clearance between the grab bar and wall shall be 1-1/2" (38mm). Concealed mounting flanges shall be 1/8" (3mm) thick stainless steel plate, 2" x 3-1/8" (50 x 80mm), and equipped with two screw holes for attachment to wall. Flange covers shall be 22 gauge (0.8mm), 3-1/4" (85mm) diameter x 1/2" (13mm) deep, and shall snap over mounting flange to conceal mounting screws and/or WingIt fasteners. Ends of grab bar shall pass through concealed mounting flanges and be heliarc welded to form one structural unit. Grab bar shall comply with accessible design (including ADAAG in the U.S.A.) for structural strength.

Grab Bar shall be Model _____ (insert model number) of Bobrick Washroom Equipment, Inc., Clifton Park, New York; Jackson, Tennessee; Los Angeles, California; Bobrick Washroom Equipment Company, Scarborough, Ontario; Bobrick Washroom Equipment Pty. Ltd., Australia; and Bobrick Washroom Equipment Limited, United Kingdom.

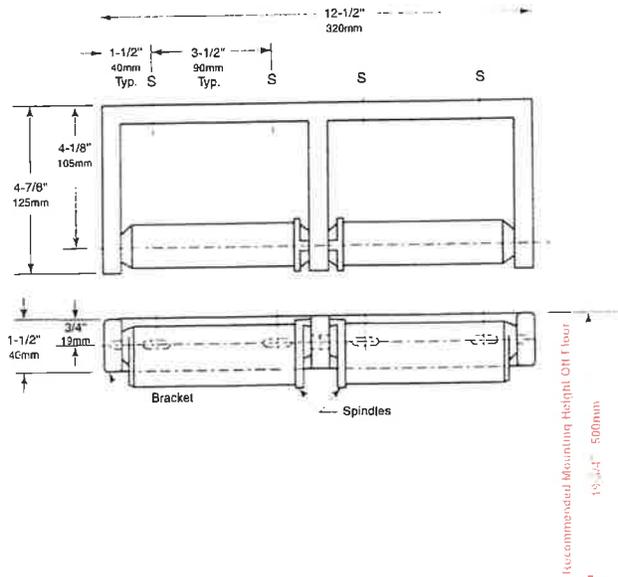
The illustrations and descriptions herein are applicable to production as of the date of this Technical Data Sheet. The manufacturer reserves the right to, and does from time to time, make changes and improvements in designs and dimensions.

B-6806 Rev. 8/16/13 58 Printed in U.S.A.
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DOUBLE-ROLL TOILET TISSUE DISPENSER WITH CONTROLLED DELIVERY

B-274



MATERIALS:

- Bracket** — Heavy-duty cast aluminum with satin finish. Small extrusion limits rotation of spindle to 3/4 revolution.
- Spindles (2)** — Molded high-impact ABS. Equipped with retractable pin and concealed locking mechanism.

OPERATION:

Controlled delivery of toilet tissue rolls; 3/4 revolution of spindles on each dispensing operation. Counterbalanced spindles automatically return to original position. Eliminates waste. Accommodates two standard-core toilet tissue rolls up to 6" (152mm) diameter (2000 sheets). Spindles can only be removed with special key furnished. Theft-resistant.

INSTALLATION:

- For partitions with particle-board or other solid core, provide sheet-metal screws or through-bolts, nuts, and washers.
- For hollow-core metal partitions, provide solid backing into which sheet-metal screws can be secured. If two units are installed back-to-back, then provide threaded sleeves and machine screws for the full thickness of partition.
- For plaster or dry wall construction, provide concealed backing to comply with local building codes, then secure unit with sheet-metal screws.
- For other wall surfaces, provide sheet-metal screws and fiber plugs or expansion shields, or provide 1/8" (3mm) toggle bolts or expansion bolts.

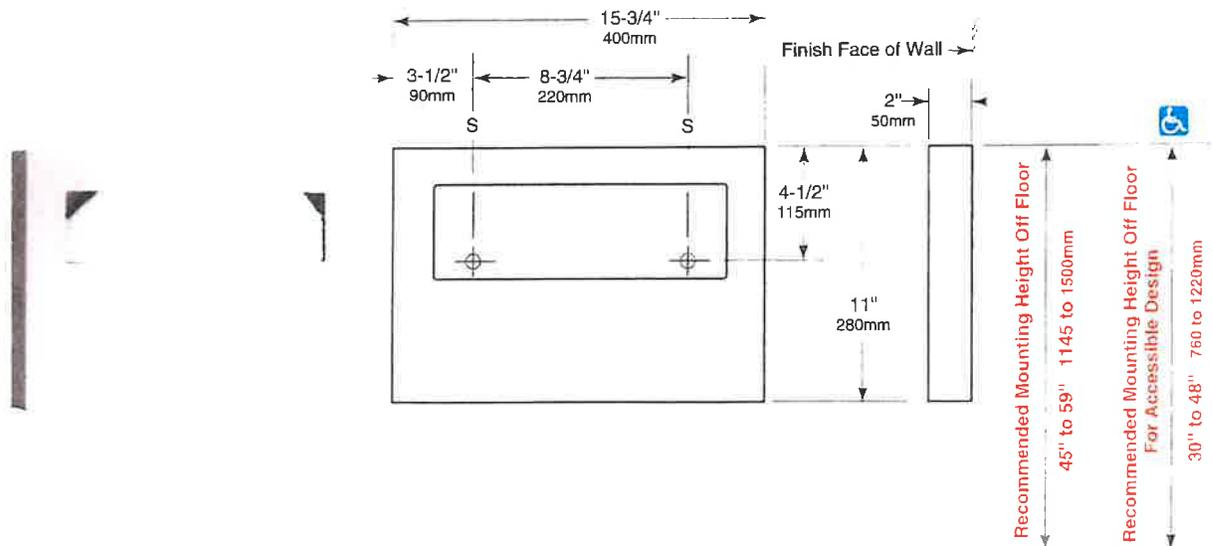
SPECIFICATION:

Double-roll toilet tissue dispenser shall have a heavy-duty cast-aluminum bracket with satin finish. Theft-resistant spindles shall be molded high-impact ABS with retractable pins and concealed locking mechanisms. Unit shall accommodate two standard-core toilet tissue rolls up to 6" (152mm) diameter (2000 sheets) and provide controlled delivery operation.

Double-Roll Toilet Tissue Dispenser shall be Model B-274 of Bobrick Washroom Equipment, Inc., Clifton Park, New York; Jackson Tennessee; Los Angeles, California; Bobrick Washroom Equipment Company, Scarborough, Ontario; Bobrick Washroom Equipment Pty. Ltd., Australia; and Bobrick Washroom Equipment Limited, United Kingdom.

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Revised 6/22/16 Printed in U.S.A.
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MATERIALS:

18-8, type-304, 22-gauge (0.8mm) stainless steel with satin finish. All-welded construction with beveled opening.

OPERATION:

Dispenses single- or half-fold paper toilet seat covers from beveled opening. Dispenser fills from bottom through concealed opening. Capacity: 250 toilet seat covers or one box.

INSTALLATION:

Mount unit on wall or toilet partition with two flat-head screws, not furnished by manufacturer, at points indicated by an S. For plaster or dry wall construction, provide concealed backing that complies with local building codes, then secure unit with flat-head screws not furnished. For other wall surfaces, provide fiber plugs or expansion shields for use with screws, not furnished, or provide 1/8" (3mm) toggle bolts or expansion bolts.

Note: Provide a 5" (125mm) minimum clearance from bottom of dispenser to top of any horizontal projection to provide room for filling dispenser from bottom.

SPECIFICATION:

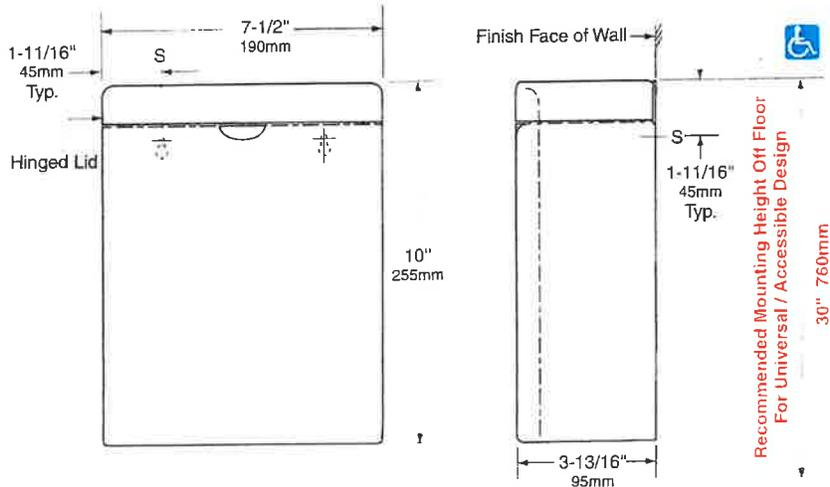
Surface-mounted toilet-seat-cover dispenser shall be type-304, 22-gauge (0.8mm) stainless steel with all-welded construction; exposed surfaces shall have satin finish. Dispenser shall have a concealed opening in bottom for filling. Capacity shall be 250 paper toilet seat covers or one box.

Surface-Mounted Seat-Cover Dispenser shall be Model B-221 of Bobrick Washroom Equipment, Inc., Clifton Park, New York; Jackson, Tennessee; Los Angeles, California; Bobrick Washroom Equipment Company, Scarborough, Ontario; Bobrick Washroom Equipment Pty. Ltd., Australia; and Bobrick Washroom Equipment Limited, United Kingdom.



ConturaSeries® SURFACE-MOUNTED SANITARY NAPKIN DISPOSAL

B-270



MATERIALS:

Container — 18-8, type-304, 22-gauge (0.8mm) stainless steel. All-welded construction. Exposed surfaces have satin finish. Integral finger depression for opening cover. Front of container has same degree of arc as front of cover and other Bobrick ConturaSeries washroom accessories. Radius on side edges of container match corners and edges of cover and other ConturaSeries accessories.

Cover — 18-8, type-304, 22-gauge (0.8mm) stainless steel with satin finish. Drawn, one-piece, seamless construction. Front of cover has same degree of arc as front of container and other Bobrick Contura Series washroom accessories. Radius on corners and edges of cover match side edges of container and other Contura Series accessories. Secured to container with a full-length stainless steel piano-hinge.

OPERATION:

Cover flips up for disposal of sanitary napkins and for servicing container.

INSTALLATION:

For partitions with particle-board or other solid core, secure with two #8 x 3/4" (4.2 x 19mm) sheet-metal screws (not furnished) at all points indicated by an S, or provide through-bolts, nuts, and washers.

For hollow-core metal partitions, provide solid backing into which sheet-metal screws can be secured. If two units are installed back-to-back, then provide threaded sleeves and machine screws for the full thickness of partition.

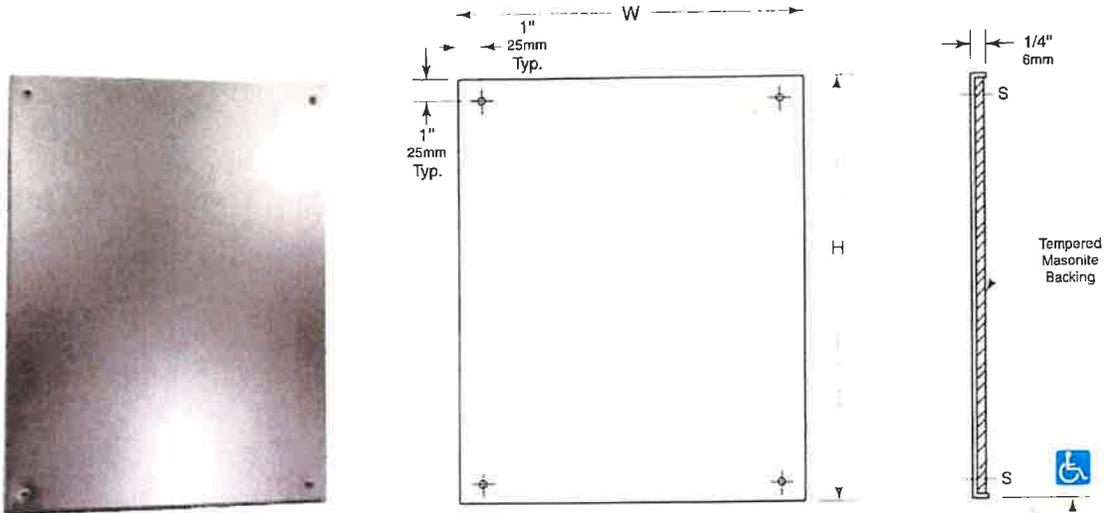
For masonry walls, provide fiber plugs or expansion shields for use with sheet-metal screws, or provide 3/16" (5mm) toggle bolts or expansion bolts.

For plaster or dry wall construction, provide concealed backing to comply with local building codes, then secure unit with sheet-metal screws.

SPECIFICATION:

Surface-mounted sanitary napkin disposal shall be type-304 stainless steel with all-welded construction; exposed surfaces shall have satin finish. Front of sanitary napkin disposal shall have same degree of arc and match other Bobrick ConturaSeries accessories in the washroom. Radius on corners and edges of sanitary napkin disposal shall complement other Bobrick ConturaSeries washroom accessories. Cover shall be drawn, one-piece, seamless construction and secured to container with a full-length stainless steel piano-hinge. Container shall have integral finger depression for opening cover.

Surface-Mounted Sanitary Napkin Disposal shall be Model B-270 of Bobrick Washroom Equipment, Inc., Clifton Park, New York; Jackson, Tennessee; Los Angeles, California; Bobrick Washroom Equipment Company, Scarborough, Ontario; Bobrick Washroom Equipment Pty. Ltd., Australia; and Bobrick Washroom Equipment Limited, United Kingdom.



STANDARD B-1556 SERIES MIRRORS

Model No.	Overall Size		Number of Mounting Screws
	(W)	(H)	
B-1556 1824	17-1/2" (445mm)	23-1/2" (597mm)	4
B-1556 1830	17-1/2" (445mm)	29-1/2" (749mm)	4
B-1556 2436	23-1/2" (597mm)	35-1/2" (902mm)	4

Recommended Mounting Height Off Floor
 for Universal / Accessible Design
 40" Max. 1015mm

Designer's Notes:

1. Special-order sizes available on request.
2. Maximum size mirror available, 48" x 36" (122 x 91cm) or 36" x 48" (91 x 122cm); minimum size, 12" x 12" (30 x 30cm).
3. Overall width and height of custom 1556-series mirrors will be 1/2" (12mm) smaller than dimension specified.

MATERIALS:

Mirror — 18-8, type-304, 20 gauge (0.9mm) stainless steel polished to a No. 8 mirror finish. Mirror has 1/4" (6mm) return.
Backing — 1/4" (6mm) thick tempered masonite.

INSTALLATION:

Mount mirror on wall with four #8 oval head screws, furnished by manufacturer, at points indicated by an S. For plaster or dry wall construction, provide concealed backing to comply with local building codes, then secure unit with sheet-metal screws furnished. For other wall surfaces, provide fiber plugs or expansion shields for use with sheet-metal screws furnished, or provide 1/8" (3mm) toggle bolts or expansion bolts.

SPECIFICATION:

Frameless stainless steel mirror shall be 18-8, type-304, 20-gauge (0.9mm) stainless steel polished to a No. 8 mirror finish. Mirror shall have 1/4" (6mm) return concealing 1/4" (6mm) tempered masonite backing. Four corner countersunk holes provide flush fit of mounting screws with mirror surface.

Mirror shall be Model B-1556 _____ (insert width and height) of Bobrick Washroom Equipment, Inc., Clifton Park, New York; Jackson, Tennessee; Los Angeles, California; Bobrick Washroom Equipment Company, Scarborough, Ontario; Bobrick Washroom Equipment Pty. Ltd., Australia; and Bobrick Washroom Equipment Limited, United Kingdom.

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dyson airblade V

HU



Electrical

Input voltage/Frequency: 200-240 V 50&60 Hz

Standby power consumption: Less than 0.5 W

Motor specification: 1,000 W digital brushless motor

Heater type: None

Construction

Fascia: Polycarbonate

Antibacterial coating type:

HU02 (Sprayed Nickel) contains antibacterial additive in paint.

HU02 (White) contains antibacterial moulded additive.

Can help prevent the growth of bacteria.

Back plate mounting bracket: ABS/PBT Plastic

Exterior screw type: Anti-lamper 4 mm Pin-Hex

Water ingress protection to IP24

Filter

HEPA filter (Glass fibre and fleece prelayer)

99.9% of particles captured

Operation

Touch free capacitive sensor activation

Hand dry time measurement: 12 seconds

(Measurement based on NSF Protocol P.335)

Sound power level: 79 dB(A)

Sound pressure level @ 2 m: 63 dB(A)¹

Operation lock-out period: 30 seconds

Airspeed at aperture: 690 km/h / 430 mph

Maximum altitude: 2,000 metres / 6,561 ft.

Logistics

Single unit order code:

Malaysia: Sprayed Nickel 307735-01, White 307734-01

South Korea: Sprayed Nickel 307596-01, White 307595-01

Rest of world: Sprayed Nickel 307170-01, White 307169-01

Unit barcode:

Malaysia: Sprayed Nickel 5025155025871, White 5025155025864

South Korea: Sprayed Nickel 5025155025833, White 5025155025826

Rest of world: Sprayed Nickel 5025155025796, White 5025155025710

Net weight: 2.9 kg / 6.17 lbs

Packaged weight: 4.0 kg / 8.81 lbs

Packaged dimensions:

(H)145 x (W)455 x (D)274 mm / (H)5³/₄" x (W)17⁷/₈" x (D)10³/₄"

Standard guarantee

5 year guarantee



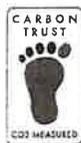
Product range

Sprayed Nickel

White



¹Sound pressure measured at 2 m distance, in a semi-anechoic chamber.

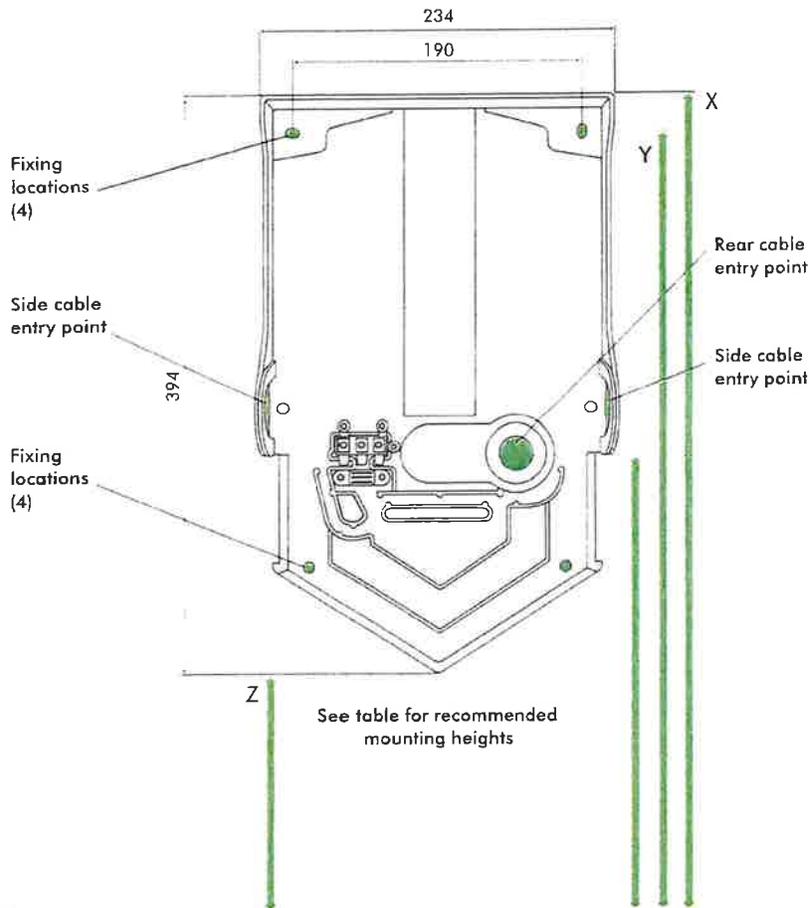


The Carbon label is a trademark of the Carbon Trust.
The NSF logo is the registered trademark of NSF International.
QuietMark is a registered trademark of the Noise Abatement Society.

TECHNICAL SPECIFICATION



REAR ELEVATION



SIDE ELEVATION



All dimensions shown in mm (+/-5 mm)

Recommended installation heights from floor

Male	X 1324 mm	Y 1300 mm	Z 930 mm
Female	X 1289 mm	Y 1265 mm	Z 895 mm
Child or disabled	X 1074 mm	Y 1050 mm	Z 680 mm
Child 5-8	X 952 mm	Y 928 mm	Z 558 mm
Child 8-11	X 1052 mm	Y 1028 mm	Z 658 mm
Child 11-14	X 1132 mm	Y 1108 mm	Z 738 mm

Machine dimensions

Height 394 mm Width 234 mm Depth 100 mm

Minimum clearance

220mm clearance either side and 30mm above machine.

Cable entry point from floor

Male	1089 mm
Female	1054 mm
Child or disabled	839 mm
Child 5-8	717 mm
Child 8-11	817 mm
Child 11-14	897 mm



CHANGE ORDER REQUEST # 02

KG-25-143-COR-2

Date: 8/11/2025

Project Address:
Lodi Lake Park North Restroom
1101 Turner Road
Lodi, CA 95242

To: City of Lodi
CM: Steve Virrey

Architect: WMB Architects, Inc.
Brandon Kleinert

Scope of Work:

RFI #5 Slump Stone Wall Damage
Scrape loose & damaged plaster from the interior and exterior walls
Repair damaged areas and holes by applying new skim coat plaster

COR #02

Additional Cost: **\$8,148.00**

We hereby agree to the above as an additional/reduced project cost(s) to be added/deleted to the original scope of work:

8/11/2025

Contractors Signature

Date

		08-15-2025
City of Lodi Authorized Signature	STEPHEN VIRREY PARKS SUPERINTENDENT	Date
		08-15-2025
Architects Authorized Signature	Brandon Kleinert WMB Architects	Date

for James Lyndsay

9.16.25

Kaler General Contractors Inc.					
Lodi Lake Park North Restrooms Restoration				COR	2
Work Description:	RFI #5 Slump stone wall repair Scrape loost plaster from interior & exterior walls Repair walls with new plaster				
Costs					
Labor	Work Description	Quantity	Units	Rate	Total Labor
	Foreman	4	Hours	\$121.91	\$487.64
	Carpenter	0	Hours	\$116.06	\$0.00
	Drywall Finisher	0	Hours	\$106.61	\$0.00
	Painter	0	Hours	\$75.70	\$0.00
				Labor Cost	\$487.64
				Labor Markup 15%	\$73.15
				Total	\$560.79
Materials	Description				Total Cost
					\$0.00
					\$0.00
					\$0.00
				Material Cost	\$0.00
				Materials Markup 15%	\$0.00
				Total	\$0.00
Equipment	Description	Quantity	Units	Rate	Total Cost
		0	Hours	\$ 45.00	\$0.00
		0	Hours	\$ 5.00	\$0.00
					\$0.00
					\$0.00
				Equipment Cost	\$0.00
				Equipment Markup 15%	\$0.00
				Total	\$0.00
Subcontractor					Total Cost
DL Star	Repair Plaster				\$7,000.00
					\$0.00
					\$0.00
				Total Subcontractor Cost	\$7,000.00
				P/OH for Contractor 5%	\$350.00
				Total	\$7,350.00
Time					Total Cost
	Add Days		Each	\$0.00	\$0.00
				Subtotal COR Cost	\$7,910.79
				Bonds 3%	\$237.32
				COR Total	\$8,148.11

Proposal
D.L. STARR ENTERPRISES, INC.
Lath and Plaster-General Contractor
California License # 686679
2320 Downar Way, Ste. #5, Sacramento, CA. 95838
Phone: (916) 925-3000/ Fax: (916) 925-3003
DIR. REG. # 1000402512

Wednesday, June 4, 2025

Attention: Jason Standley

Kaler General Contractors, Inc.
3720 Omec Circle
Rancho Cordova, CA. 95742

PROJECT: Lodi Lake Park North Restroom Plaster Repair
1101 W Turner Road
Lodi, CA. 95242

SCOPE Plaster repair over slump stone at interior and exterior restroom walls.
Will patch all indentations in slump stone and brush the plaster finish over walls to
match existing finish with one base color. Final colors to be paint applied "By Others."

BID AMOUNT: \$ 7,000.00

(Bid includes all labor and materials to complete the plaster work indicated.)

EXCLUSIONS:

- a. Demo. Pressure Washing or Scraping.
- b. Head Flashings/Metal Flashings, Reglets.
- c. Caulking/Backer Rods.
- d. Furring, Framing or Sheathing.
- e. Multiple Colors, Painting or Waterproofing.

Thank you for inviting our bid for the plastering work involved on this project. If you
have any questions or comments, please call me at (916) 996-7375 or dls9253000@gmail.com

Sincerely,


Matthew L. Fehl
Estimator



GENERAL CONTRACTORS, INC.
3780 DIMEC CIRCLE, RANCHO CORDOVA CA 95742
CCL # 577112 916.631.7211

CHANGE ORDER REQUEST # 03

KG-25-143-COR-3

Date: 7/24/2025

Project Address:
Lodi Lake Park North Restroom
1101 Turner Road
Lodi, CA 95242

To: City of Lodi
CM: Steve Virrey

Architect: WMB Architects, Inc.
Brandon Kleinert

Scope of Work:

RFI's 11 & 12

Move the electrical panel onto a struck rack and add a new disconnect switch.

Add new cans on the exterior wall to move the exterior electrical conduit entering the building

COR #03

Additional Cost: **\$19,177.00**

We hereby agree to the above as an additional/reduced project cost(s) to be added/deleted to the original scope of work:

7/24/2025

Contractors Signature

Date

City of Lodi Authorized Signature 07-24-2025
Date

Architects Authorized Signature Brandon Kleinert
WMB Architects 07-25-2025
Date

Chil Ehl
for James Lyndsay 9.16.25

Kaler General Contractors Inc.					
Lodi Lake Park North Restrooms Restoration				COR	3
Work Description:	RFI's 11 & 12 Electrical Panel Clearances - Move Panel onto a strut rack & add a disconnect Exterior Electrical Conduit Penetrations - add two cans				
Costs					
Labor	Work Description	Quantity	Units	Rate	Total Labor
Foreman		8	Hours	\$121.91	\$975.28
Carpenter		0	Hours	\$116.06	\$0.00
Drywall Finisher		0	Hours	\$106.61	\$0.00
Painter		0	Hours	\$75.70	\$0.00
				Labor Cost	\$975.28
				Labor Markup 15%	\$146.29
				Total	\$1,121.57
Materials	Description				Total Cost
					\$0.00
					\$0.00
					\$0.00
				Material Cost	\$0.00
				Materials Markup 15%	\$0.00
				Total	\$0.00
Equipment	Description	Quantity	Units	Rate	Total Cost
		0	Hours	\$ 45.00	\$0.00
		0	Hours	\$ 5.00	\$0.00
					\$0.00
					\$0.00
				Equipment Cost	\$0.00
				Equipment Markup 15%	\$0.00
				Total	\$0.00
Subcontractor					Total Cost
Diamond Electric	Electrical panel rack & disconnect				\$10,669.89
	Exterior cans for conduit penetrations				\$5,994.05
					\$0.00
				Total Subcontractor Cost	\$16,663.94
				P/OH for Contractor 5%	\$833.20
				Total	\$17,497.14
Time					Total Cost
	Add Days		Each	\$0.00	\$0.00
				Subtotal COR Cost	\$18,618.71
				Bonds 3%	\$558.56
				COR Total	\$19,177.27



Change Order

Add Disconnect before main panel

Diamond Electric Group Inc.

233 Technology Way Suite 6
Rocklin, CA 95765
Phone: 916-408-6901

22 July 2025
Job ID: JOB-0090

Diamond Electric Group Inc.
233 Technology Way Suite 6
Rocklin, CA 95765

Attention: Brad Hail

Re: Change Order CO-0001 for: lodi lake

We are pleased to quote on the above Change Order CO-0001 as follows.

1. strut rack and disconnect
- 2.
- 3.

We reserve the right to correct this quote for errors and or omissions. All wiring to meet the requirements of the 2020 National Electrical Code.

Pricing:

Qty	Description	Unit	Ext
-----	-------------	------	-----

For the Sum of \$10,669.89

The Change Order expires on .

We request an additional days be added to the completion date of the project.

Sincerely,

Brad Hail
Diamond Electric Group Inc.

Job ID: JOB-0090
 Project: lodi lake



CO: CO-0001: Add Disconnect before main panel

Summary by Item Number

22 Jul 2025 8:37:38

Item #	Size	Description	QTY	Unit	Mat Unit	Mat Result	Lab Unit	Lab Result	Quo Unit	Quo Result
2		mini handoper	1.00	EA	300.0000	300.00	4.0000	4.00	0.0000	0.00
3		re work existing wiring from can to panel	1.00	EA	0.0000	0.00	0.0000	0.00	0.0000	0.00
14005	2	GRC	10.00	FT	38.5000	385.00	0.1370	1.37	0.0000	0.00
30005	2	SPRING COUPLERS	0.88	EA	98.9499	88.87	0.8708	1.48	0.0000	0.00
10011		GRC THREADLESS CONNECTOR	8.00	EA	79.4993	635.99	0.6200	4.98	0.0000	0.00
18134	3/8 x 1 1/2 - 3"	HAMMER DRILLED HOLE	8.00	EA	0.0000	0.00	0.1708	1.38	0.0000	0.00
21441	1000 3 5N	FWD/240V NBR RT SAFETY-SW	1.00	EA	1,101.6400	1,101.64	5.5000	5.50	0.0000	0.00
23280	100 AMP	RES TIME DELAY 250V FUSE	3.00	EA	44.8288	135.49	0.0908	0.16	0.0000	0.00
24001	1 1/2 x 1 1/2 x 1/4"	1/2 G STRUT CHNL SOLID GREEN	30.00	FF	7.5126	225.38	0.1525	4.58	0.0000	0.00
24028	3/8-1/8	STRUT CHANNEL NUT-EG	50.00	EA	1.8428	92.14	0.8758	3.76	0.0000	0.00
24040	P1087LV	STRUT FLAT PLATE 4 HOLE	4.00	EA	8.3455	33.38	0.2033	0.83	0.0000	0.00
24042	02050-ZM	3-1/2" POST BASE GALV	2.00	EA	168.8588	337.72	0.4657	0.93	0.0000	0.00
24053	P2143R-EG	STRUT SW WING 1 HOLE	1.00	EA	20.9051	162.45	0.0521	0.42	0.0000	0.00
28088	12 x 12	WIRING TROUGH HEMA-3R SLIP-ON CVR 4FT	1.00	EA	890.0000	890.00	1.3000	1.30	0.0000	0.00
Phase/Group totals:						4,082.49		35.63		0.00
Job totals:						4,082.49		35.63		0.00

Grand Material, Quote, Equipment, and Subcontract Total: 4,082.49

Phone: 916.775.1111
 Web: www.conest.com

Job ID: JOB-0090
 Project: lodi lake



CO: CO-0001: Add Disconnect before main panel

Top Sheet Report

22 Jul 2025 8:38:09

Tax Rate status: Default

Bid Name: Base Bid

Bid Template: CHANGE ORDER ADJUST

<u>Description</u>	<u>Column 1</u>	<u>Column 2</u>
DIRECT LABOR HRS	35.63	
DIRECT LABOR DOLLARS		5,290.81
INDIRECT LABOR HRS		
INDIRECT LABOR DOLLARS		
LABOR TAX		
MATERIAL DOLLARS		4,082.49
QUOTES DOLLARS		
MATERIAL & QUOTE TAX		326.60
DJC		
SUBCONTRACTS TOTAL		
EQUIPMENT TOTAL		
EQUIP/SUBCONTRACT TAX		
OVERHEAD TOTAL		
PROFIT TOTAL		969.99
MISC TOTAL		
Bid Memo:		
		Bid Total: 10,669.89



Change Order

add exterior cans rfi 12

Diamond Electric Group Inc.

233 Technology Way Suite 6
Rocklin, CA 95765
Phone: 916-408-6901

22 July 2025
Job ID: JOB-0090

Diamond Electric Group Inc.
233 Technology Way Suite 6
Rocklin, CA 95765

Attention: Brad Hail

Re: Change Order CO-0002 for: Iodi lake

We are pleased to quote on the above Change Order CO-0002 as follows.

1. add cans
2. add chase between cans
3. add extra wire to pull for the off set

We reserve the right to correct this quote for errors and or omissions. All wiring to meet the requirements of the 2020 National Electrical Code.

Pricing:

Qty	Description	Unit	Ext
-----	-------------	------	-----

For the Sum of \$5,994.05

The Change Order expires on .

We request an additional days be added to the completion date of the project.

Sincerely,

Brad Hail
Diamond Electric Group Inc.

Job ID: JOB-0090
 Project: Iodi Lake



CQ: CO-0002: add exterior cans rfi 12

Summary by Item Number

22 Jul 2025 9:03:01

Item #	Size	Description	Qnt	Quantity	Unit	Mat Unit	Mat Result	Lab Unit	Lab Result	Qus Unit	Qus Result
2		TRAC Handplane	M	1.00	EA	150.0000	150.00	1.0000	1.00	0.0000	0.00
3		add nuts to make up the length for cans	M	1.00	EA	800.0000	800.00	3.0000	3.00	0.0000	0.00
10095	2	GR2	M	10.00	FT	39.5000	395.00	0.1310	1.17	0.0000	0.00
240003	1.58" x 1.58"	120 STRUT CHAN, SOLID GALV	M	10.00	FT	11.9887	119.89	0.1625	1.83	0.0000	0.00
110284	3/8x3/4x10	PULL BOX-PAN T SCREW C VR HC AD	M	2.00	EA	0.123000	1.224.00	0.0000	1.00	0.0000	0.00
Phase/Group totals:							2,388.09		17.90		0.00
Job totals:							2,388.09		17.90		0.00

Grand Material, Quote, Equipment, and Subcontract Total: 2,388.09

Phone
 Web

Job ID: JOB-0090
 Project: lodi lake



CO: CO-0002: add exterior cans rfi 12

Top Sheet Report

22 Jul 2025 9:02:41

Tax Rate status: Default Bid Name: Base Bid Bid Template: CHANGE ORDER ADJUST

Description	Column 1	Column 2
DIRECT LABOR HRS	17.90	
DIRECT LABOR DOLLARS		2,657.41
INDIRECT LABOR HRS		
INDIRECT LABOR DOLLARS		
LABOR TAX		212.59
MATERIAL DOLLARS		2,388.09
QUOTES DOLLARS		
MATERIAL & QUOTE TAX		191.05
DJC		
SUBCONTRACTS TOTAL		
EQUIPMENT TOTAL		
EQUIP/SUBCONTRACT TAX		
OVERHEAD TOTAL		
PROFIT TOTAL		544.91
MISC TOTAL		

Bid Memo: Bid Total: 5,994.05



CHANGE ORDER REQUEST # 03

KG-25-143-COR-3

Date: 7/24/2025

Project Address:

Lodi Lake Park North Restroom
1101 Turner Road
Lodi, CA 95242

To: City of Lodi
CM: Steve Virrey

Architect: WMB Architects, Inc.
Brandon Kleinert

Scope of Work:

RFI's 11 & 12

Move the electrical panel onto a struck rack and add a new disconnect switch.

Add new cans on the exterior wall to move the exterior electrical conduit entering the building

COR #03

Additional Cost: **\$19,177.00**

We hereby agree to the above as an additional/reduced project cost(s) to be added/deleted to the original scope of work:

7/24/2025

Contractors Signature

Date

	<u>07-24-2025</u>
City of Lodi Authorized Signature	Date
STEPHEN VIRREY - PARKS SUPERINTENDENT	
Architects Authorized Signature	Date

Kaler General Contractors Inc.
Lodi Lake Park North Restrooms Restoration **COR 3**

Work Description: RFI's 11 & 12
 Electrical Panel Clearances - Move Panel onto a strut rack & add a disconnect
 Exterior Electrical Conduit Penetrations - add two cans

Costs					
Labor	Work Description	Quantity	Units	Rate	Total Labor
		8	Hours	\$121.91	\$975.28
Foreman		0	Hours	\$116.06	\$0.00
Carpenter		0	Hours	\$106.61	\$0.00
Drywall Finisher		0	Hours	\$75.70	\$0.00
Painter		0	Hours		\$0.00
Labor Cost					\$975.28
Labor Markup 15%					\$146.29
Total					\$1,121.57

Materials	Description					Total Cost
						\$0.00
						\$0.00
						\$0.00
Material Cost					\$0.00	
Materials Markup 15%					\$0.00	
Total					\$0.00	

Equipment	Description	Quantity	Units	Rate	Total Cost
		0	Hours	\$ 45.00	\$0.00
		0	Hours	\$ 5.00	\$0.00
					\$0.00
					\$0.00
Equipment Cost					\$0.00
Equipment Markup 15%					\$0.00
Total					\$0.00

Subcontractor					Total Cost
Diamond Electric	Electrical panel rack & disconnect				\$10,669.89
	Exterior cans for conduit penetrations				\$5,994.05
					\$0.00
Total Subcontractor Cost					\$16,663.94
P/OH for Contractor 5%					\$833.20
Total					\$17,497.14

Time					Total Cost
	Add Days		Each	\$0.00	\$0.00
Subtotal COR Cost					\$18,618.71
Bonds 3%					\$558.56
COR Total					\$19,177.27



Change Order

Add Disconnect before main panel

Diamond Electric Group Inc.

233 Technology Way Suite 6
Rocklin, CA 95765
Phone: 916-408-6901

22 July 2025
Job ID: JOB-0090

Diamond Electric Group Inc.
233 Technology Way Suite 6
Rocklin, CA 95765

Attention: Brad Hail

Re: Change Order CO-0001 for: lodi lake

We are pleased to quote on the above Change Order CO-0001 as follows.

1. strut rack and disconnect
- 2.
- 3.

We reserve the right to correct this quote for errors and or omissions. All wiring to meet the requirements of the 2020 National Electrical Code.

Pricing:

Qty	Description	Unit	Ext
-----	-------------	------	-----

For the Sum of \$10,669.89

The Change Order expires on .

We request an additional days be added to the completion date of the project.

Sincerely,

Brad Hail
Diamond Electric Group Inc.

Job ID: JOB-0090
 Project: lodl lake



CO: CO-0001: Add Disconnect before main panel

Summary by Item Number

22 Jul 2025 8:37:38

Item #	Size	Description	Q/M	Quantity	UM	Mat Unit	Mat Result	Lab Unit	Lab Result	Quo Unit	Quo Result
2		msc hardware	M	1.00	EA	300.0000	300.00	4.0000	4.00	0.0000	0.00
3		re work existing wiring from can to panel	M	1.00	EA	0.0000	0.00	5.0700	5.07	0.0000	0.00
10005	2	GRC	M	10.00	FT	39.5000	395.00	0.1370	1.37	0.0000	0.00
30003	2	GRC/MC COUPLING	M	4.00	EA	15,1424	60.57	0.3700	1.48	0.0000	0.00
30077	2	GRC THREADLESS CONNECTOR	M	8.00	EA	79.4993	635.99	0.6200	4.96	0.0000	0.00
181318	3/8 x 1 1/2 - 3"	HAMMER DRILLED HOLE	M	8.00	EA	0.0000	0.00	0.1700	1.38	0.0000	0.00
220147	100/3 SN	FWD/240V N-3R RT SAFETY-SW	M	1.00	EA	1,101.6400	1,101.64	5.5000	5.50	0.0000	0.00
230549	100 AMP	RKS TIME DELAY 250V FUSE	M	3.00	EA	44,0200	132.08	0.0600	0.18	0.0000	0.00
240001	1 5/8" x 1 5/8" H	12G STRUT CHNL SOLID GREEN	M	30.00	FT	7.5128	225.38	0.1525	4.58	0.0000	0.00
240298	3/8-18	STRUT CHANNEL NUT-EG	M	50.00	EA	1,8429	92.15	0.0750	3.75	0.0000	0.00
240420	P1067EG	STRUT FLAT PLATE 4 HOLE	M	4.00	EA	8.3455	25.38	0.2083	0.83	0.0000	0.00
240442	E280SQ-ZN	3-1/2" H POST BASE GALV	M	2.00	EA	155,9338	311.87	0.4167	0.83	0.0000	0.00
240528	P2343R-EG	STRUT 90d WING 4 HOLES	M	8.00	EA	20.3061	162.45	0.0521	0.42	0.0000	0.00
250958	12 x 12	WIRING TROUGH NEMA-3R SLIP-ON CVR 4FT	M	1.00	EA	640.0000	640.00	1.3000	1.30	0.0000	0.00
Phase/Group totals:						4,082.49		35.63		0.00	
Job totals:						4,082.49		35.63		0.00	

Grand Material, Quote, Equipment, and Subcontract Total: 4,082.49

Phone: 774-344-4444
 Web: www.conest.com

Job ID: JOB-0090
 Project: lodi lake



CO: CO-0001: Add Disconnect before main panel

Top Sheet Report

22 Jul 2025 8:38:09

Tax Rate status: Default Bid Name: Base Bid Bid Template: CHANGE ORDER ADJUST

Description	Column 1	Column 2
DIRECT LABOR HRS	35.63	
DIRECT LABOR DOLLARS		5,290.81
INDIRECT LABOR HRS		
INDIRECT LABOR DOLLARS		
LABOR TAX		
MATERIAL DOLLARS		4,082.49
QUOTES DOLLARS		
MATERIAL & QUOTE TAX		326.60
DJC		
SUBCONTRACTS TOTAL		
EQUIPMENT TOTAL		
EQUIP/SUBCONTRACT TAX		
OVERHEAD TOTAL		
PROFIT TOTAL		969.99
MISC TOTAL		

Bid Memo: Bid Total: 10,669.89



Change Order

add exterior cans rfi 12

Diamond Electric Group Inc.

233 Technology Way Suite 6
Rocklin, CA 95765
Phone: 916-408-6901

22 July 2025
Job ID: JOB-0090

Diamond Electric Group Inc.
233 Technology Way Suite 6
Rocklin, CA 95765

Attention: Brad Hail

Re: Change Order CO-0002 for: Iodi lake

We are pleased to quote on the above Change Order CO-0002 as follows.

1. add cans
2. add chase between cans
3. add extra wire to pull for the off set

We reserve the right to correct this quote for errors and or omissions. All wiring to meet the requirements of the 2020 National Electrical Code.

Pricing:

Qty	Description	Unit	Ext
-----	-------------	------	-----

For the Sum of \$5,994.05

The Change Order expires on .

We request an additional days be added to the completion date of the project.

Sincerely,

Brad Hail
Diamond Electric Group Inc.

Job ID: JOB-0090
 Project: lodi lake



CO: CO-0002: add exterior cans rfi 12

Summary by Item Number

22 Jul 2025 9:03:01

Item #	Size	Description	Q/M	Quantity	UM	Mat Unit	Mat Result	Lab Unit	Lab Result	Quo Unit	Quo Result
	2	misc hardware	M	1.00	EA	150.0000	150.00	1.0000	1.00	0.0000	0.00
	3	add wire to make up the length for cans	M	1.00	EA	500.0000	500.00	2.0000	2.00	0.0000	0.00
10005	2	GRC	M	10.00	FT	39.5000	395.00	0.1370	1.37	0.0000	0.00
240003	1 5/8" x 1 5/8"H	12G STRUT CHNL SOLID GALV	M	10.00	FT	11.9087	119.09	0.1525	1.53	0.0000	0.00
710264	36x36x10	PULL BOX-PAINT SCREW CVR NO/KO	M	2.00	EA	612.0000	1,224.00	6.0000	12.00	0.0000	0.00
Phase/Group totals:							2,388.09		17.90		0.00
Job totals:							2,388.09		17.90		0.00

Grand Material, Quote, Equipment, and Subcontract Total: **2,388.09**

Phone: 510-438-1100
 Web: www.conest.com

Job ID: JOB-0090
Project: lodi lake



CO: CO-0002: add exterior cans rfi 12

Top Sheet Report

22 Jul 2025 9:02:41

Tax Rate status: Default Bid Name: Base Bid Bid Template: CHANGE ORDER ADJUST

Description	Column 1	Column 2
DIRECT LABOR HRS	17.90	
DIRECT LABOR DOLLARS		2,657.41
INDIRECT LABOR HRS		
INDIRECT LABOR DOLLARS		
LABOR TAX		212.59
MATERIAL DOLLARS		2,388.09
QUOTES DOLLARS		
MATERIAL & QUOTE TAX		191.05
DJC		
SUBCONTRACTS TOTAL		
EQUIPMENT TOTAL		
EQUIP/SUBCONTRACT TAX		
OVERHEAD TOTAL		
PROFIT TOTAL		544.91
MISC TOTAL		

Bid Memo: Bid Total: 5,994.05



**Lodi Lake
North Restroom
Fire Damage
June 4, 2023**



**Lodi Lake
North Restroom
Fire Damage
Restoration
Improvements**



COUNCIL COMMUNICATION

AGENDA TITLE:

Adopt a Resolution Authorizing the Interim City Manager to Execute Amendment No. 2 to Agreement with United Site Services, Inc. of California for Portable Restroom Services at Various City Parks By \$10,000 for a Total Not To Exceed Amount of \$136,826 (PRCS)

MEETING DATE:

February 4, 2026

PREPARED BY:

Tracey Roletto, Senior Administrative Clerk

RECOMMENDED ACTION:

Adopt a resolution authorizing the Interim City Manager to execute Amendment No. 2 to the agreement with United Site Services, Inc. of California for portable restroom services at various city parks by \$10,000 for a total not to exceed amount of \$136,826.

BACKGROUND INFORMATION:

Various parks throughout Lodi host youth and adult athletic programs including city-run league play and the Booster of Boys/Girls Sports (BOBS) practices and games. Some of the parks used for city programming, BOBS programs and general public use, do not have permanent restrooms. Parks, Recreation and Cultural Services (PRCS) is beginning its heavy sports season and will need to rent and maintain port-a-pots and wash stations used for personal hygiene and convenience.

The City solicited bids from three (3) vendors including United Site Services, Inc., ASAP Services and Honeybucket. One response was received from United Site Services of California, Inc. The bid includes the delivery, set-up, removal and weekly service of ADA restrooms, standard restrooms, and sink and wash stations for up to twelve months at Lodi Lake, DeBenedetti and Vinewood Park. Due to the delay of construction of the new restroom facilities at Lodi Lake, there is a need to continue to rent portables from United Site Services, Inc. until the restroom buildings are completed. Staff recommends that the City Council authorize the City Manager to execute Amendment No. 2 to the agreement with United Site Services, Inc. to add \$10,000 to the overall Agreement for a total not to exceed amount of \$136,826.

STRATEGIC VISION:

6C. Parks: Develop & maintain sports/recreational facilities for City & public use including an indoor sports facility.

FISCAL IMPACT:

PRCS Fund 200 Operating Expenses

FUNDING AVAILABLE:

20072202.72499

AMENDMENT NO. 2

UNITED SITE SERVICES OF CALIFORNIA, INC.
AGREEMENT FOR PROFESSIONAL SERVICES

THIS AMENDMENT NO. 2 TO AGREEMENT FOR PROFESSIONAL SERVICES, is made and entered this ____ day of _____ 2026 (“Amendment No. 2”), by and between the CITY OF LODI, a municipal corporation (hereinafter “CITY”), and UNITED SITE SERVICES OF CALIFORNIA, INC., a California Corporation (hereinafter “CONTRACTOR”).

WITNESSETH:

1. WHEREAS, CONTRACTOR and CITY entered into an Agreement for Professional Services on November 6, 2024 and Amendment No. 1 on July 15, 2025 (collectively the “Agreement”), as set forth in Exhibit 1, attached hereto and made part of; and
2. WHEREAS, CITY requests to amend the Agreement and increase the funds by an amount not to exceed \$10,000, for a total not to exceed Agreement amount of \$136,826; and
3. WHEREAS, CITY and CONTRACTOR agree to said amendment.

NOW, THEREFORE, the parties agree to amend the Agreement as set forth above. All other terms and conditions of the Agreement remain unchanged.

IN WITNESS WHEREOF, CITY and CONTRACTOR have executed this Amendment No. 2 on the date and year first above written.

CITY OF LODI, a municipal corporation
hereinabove called “CITY”

UNITED SITE SERVICES, INC., a California
Corporation, hereinabove called
“CONTRACTOR”

JAMES LINDSAY
Interim City Manager

ANGELA FLEMING
Bid Lead - Contracts

Attest:

Approved as to Form:

OLIVIA NASHED
City Clerk

KATIE O. LUCCHESI
City Attorney

KL

AMENDMENT NO. 1

UNITED SITE SERVICES OF CALIFORNIA, INC.
AGREEMENT FOR PROFESSIONAL SERVICES

THIS AMENDMENT NO. 1 TO AGREEMENT FOR PROFESSIONAL SERVICES, is made and entered this 15th day of July 2025, by and between the CITY OF LODI, a municipal corporation (hereinafter "CITY"), and UNITED SITE SERVICES OF CALIFORNIA, INC., a California Corporation (hereinafter "CONTRACTOR").

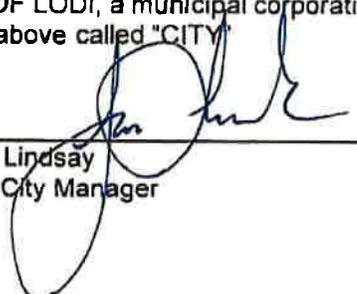
WITNESSETH:

1. WHEREAS, CONTRACTOR and CITY entered into an Agreement for Professional Services on November 6, 2024 ("Agreement"), as set forth in Exhibit 1, attached hereto and made part of; and
2. WHEREAS, CITY desires to amend the term of the Agreement through August 31, 2026; and
3. WHEREAS, CITY requests to amend the contract and increase the funds by an amount not to exceed \$60,000, for a total not to exceed amount of \$126,826, as set forth in Exhibit 2, attached hereto and made part hereof; and
4. WHEREAS, CONTRACTOR agrees to said amendments.

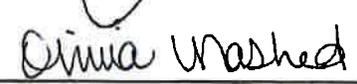
NOW, THEREFORE, the parties agree to amend the Agreement as set forth above. All other terms and conditions of the Agreement remain unchanged.

IN WITNESS WHEREOF, CITY and CONTRACTOR have executed this Amendment No. 1 on the date and year first above written.

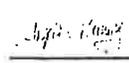
CITY OF LODI, a municipal corporation
hereinabove called "CITY"


James Lindsay
Acting City Manager

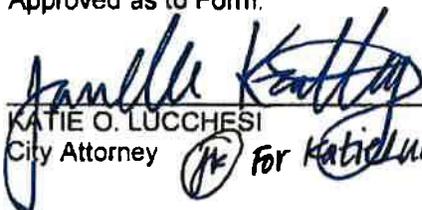
Attest:


OLIVIA NASHED
City Clerk

UNITED SITE SERVICES, INC., a California
Corporation, hereinabove called
"CONTRACTOR"


ANGELA FLEMING
Bid Lead- Contracts

Approved as to Form:


KATIE O. LUCCHESI
City Attorney  For 

AGREEMENT FOR PROFESSIONAL SERVICES

**ARTICLE 1
PARTIES AND PURPOSE**

Section 1.1 Parties

THIS AGREEMENT is entered into on November 6, 2024, by and between the CITY OF LODI, a municipal corporation (hereinafter "CITY"), and UNITED SITE SERVICES OF CALIFORNIA, INC., a California corporation (hereinafter "CONTRACTOR").

Section 1.2 Purpose

CITY selected the CONTRACTOR to provide the services required in accordance with attached Scope of Services, Exhibit A, attached and incorporated by this reference.

CITY wishes to enter into an agreement with CONTRACTOR for services to be performed as follows: to provide labor, materials, and rental equipment, such as portable toilet, hand wash stations, and other similar rental stations used for public hygiene and convenience at various park facilities and for City of Lodi sponsored public events (hereinafter "Project") as set forth in the Scope of Services attached here as Exhibit A. CONTRACTOR acknowledges that it is qualified to provide such services to CITY.

**ARTICLE 2
SCOPE OF SERVICES**

Section 2.1 Scope of Services

CONTRACTOR, for the benefit and at the direction of CITY, shall perform the Scope of Services as set forth in Exhibit A.

Section 2.2 Time for Commencement and Completion of Work

CONTRACTOR shall commence work pursuant to this Agreement, upon receipt of a written notice to proceed from CITY or on the date set forth in Section 2.6, whichever occurs first, and shall perform all services diligently and complete work under this Agreement based on a mutually agreed upon timeline or as otherwise designated in the Scope of Services.

CONTRACTOR shall submit to CITY such reports, diagrams, drawings and other work products as may be designated in the Scope of Services.

CONTRACTOR shall not be responsible for delays caused by the failure of CITY staff to provide required data or review documents within the appropriate time frames.

The review time by CITY and any other agencies involved in the project shall not be counted against CONTRACTOR's contract performance period. Also, any delays due to weather, vandalism, acts of God, etc., shall not be counted. CONTRACTOR shall remain in contact with reviewing agencies and make all efforts to review and return all comments.

Section 2.3 Meetings

CONTRACTOR shall attend meetings as may be set forth in the Scope of Services.

Section 2.4 Staffing

CONTRACTOR acknowledges that CITY has relied on CONTRACTOR's capabilities and on the qualifications of CONTRACTOR's principals and staff as identified in its proposal to CITY. The Scope of Services shall be performed by CONTRACTOR, unless agreed to otherwise by CITY in writing. CITY shall be notified by CONTRACTOR of any change of Project Manager and CITY is granted the right of approval of all original, additional and replacement personnel at CITY's sole discretion and shall be notified by CONTRACTOR of any changes of CONTRACTOR's project staff prior to any change.

CONTRACTOR represents it is prepared to and can perform all services within the Scope of Services (Exhibit A) and is prepared to and can perform all services specified therein. CONTRACTOR represents that it has, or will have at the time this Agreement is executed, all licenses, permits, qualifications, insurance and approvals of whatsoever nature are legally required for CONTRACTOR to practice its profession, and that CONTRACTOR shall, at its own cost and expense, keep in effect during the life of this Agreement all such licenses, permits, qualifications, insurance and approvals, and shall indemnify, defend and hold harmless CITY against any costs associated with such licenses, permits, qualifications, insurance and approvals which may be imposed against CITY under this Agreement.

Section 2.5 Subcontracts

Unless prior written approval of CITY is obtained, CONTRACTOR shall not enter into any subcontract with any other party for purposes of providing any work or services covered by this Agreement.

Section 2.6 Term

The term of this Agreement commences on JUNE 1, 2024 and terminates upon the completion of the Scope of Services or on AUGUST 31, 2025, whichever occurs first.

Section 2.7 Option to Extend Term of Agreement

At its option, City may extend the terms of this Agreement for an additional **one (1) year extension(s)**; provided, City gives Contractor no less than thirty (30) days written notice of its intent prior to expiration of the existing term. In the event City exercises any option under this paragraph, all other terms and conditions of this Agreement continue and remain in full force and effect.

The total duration of this Agreement, including the exercise of any option under this paragraph, shall not exceed two (2) year(s).

ARTICLE 3 **COMPENSATION**

Section 3.1 Compensation

CONTRACTOR's compensation for all work under this Agreement shall conform to the provisions of the Fee Proposal, attached hereto as Exhibit B and incorporated by this reference.

CONTRACTOR shall not undertake any work beyond the scope of this Agreement unless such additional work is approved in advance and in writing by CITY.

Section 3.2 Method of Payment

CONTRACTOR shall submit invoices for completed work on a monthly basis, or as otherwise agreed, providing, without limitation, details as to amount of hours, individual performing said work, hourly rate, and indicating to what aspect of the Scope of Services said work is attributable. CONTRACTOR's compensation for all work under this Agreement shall not exceed the amount of the Fee Proposal.

Section 3.3 Costs

The Fee Proposal shall include all reimbursable costs required for the performance of the Scope of Services. Payment of additional reimbursable costs considered to be over and above those inherent in the original Scope of Services shall be approved in advanced and in writing, by CITY.

Section 3.4 Auditing

CITY reserves the right to periodically audit all charges made by CONTRACTOR to CITY for services under this Agreement. Upon request, CONTRACTOR agrees to furnish CITY, or a designated representative, with necessary information and assistance needed to conduct such an audit.

CONTRACTOR agrees that CITY or its delegate will have the right to review, obtain and copy all records pertaining to performance of this Agreement. CONTRACTOR agrees to provide CITY or its delegate with any relevant information

requested and shall permit CITY or its delegate access to its premises, upon reasonable notice, during normal business hours for the purpose of interviewing employees and inspecting and copying such books, records, accounts, and other material that may be relevant to a matter under investigation for the purpose of determining compliance with this requirement. CONTRACTOR further agrees to maintain such records for a period of three (3) years after final payment under this Agreement.

ARTICLE 4 **MISCELLANEOUS PROVISIONS**

Section 4.1 Nondiscrimination

In performing services under this Agreement, CONTRACTOR shall not discriminate in the employment of its employees or in the engagement of any sub CONTRACTOR on the basis of race, color, religion, sex, sexual orientation, marital status, national origin, ancestry, age, or any other criteria prohibited by law.

Section 4.2 ADA Compliance

In performing services under this Agreement, CONTRACTOR shall comply with the Americans with Disabilities Act (ADA) of 1990, and all amendments thereto, as well as all applicable regulations and guidelines issued pursuant to the ADA.

Section 4.3 Indemnification and Responsibility for Damage

CONTRACTOR to the fullest extent permitted by law, shall indemnify and hold harmless CITY, its elected and appointed officials, directors, officers, employees and volunteers from and against any claims, damages, losses, and expenses (including reasonable attorney's fees and costs), arising out of performance of the services to be performed under this Agreement, provided that any such claim, damage, loss, or expense is caused by the negligent acts, errors or omissions of CONTRACTOR, any subcontractor employed directly by CONTRACTOR, anyone directly or indirectly employed by any of them, or anyone for whose acts they may be liable, except those injuries or damages arising out of the active negligence, sole negligence, or sole willful misconduct of the City of Lodi, its elected and appointed officials, directors, officers, employees and volunteers. CITY may, at its election, conduct the defense or participate in the defense of any claim related in any way to this indemnification. If CITY chooses at its own election to conduct its own defense, participate in its own defense, or obtain independent legal counsel in defense of any claim related to this indemnification, CONTRACTOR shall pay all of the costs related thereto, including without limitation reasonable attorney fees and costs. The defense and indemnification obligations

required by this Agreement are undertaken in addition to, and shall not in any way be limited by the insurance obligations set forth herein.

Section 4.4 No Personal Liability

Neither the City Council, nor any other officer or authorized assistant or agent or City employee shall be personally responsible for any liability arising under this Agreement.

Section 4.5 Responsibility of CITY

CITY shall not be held responsible for the care or protection of any material or parts of the work described in the Scope of Services prior to final acceptance by CITY, except as expressly provided herein.

Section 4.6 Insurance Requirements for CONTRACTOR

CONTRACTOR shall take out and maintain during the life of this Agreement, insurance coverage as set forth in Exhibit C attached hereto and incorporated by this reference.

Section 4.7 Successors and Assigns

CITY and CONTRACTOR each bind themselves, their partners, successors, assigns, and legal representatives to this Agreement without the written consent of the others. CONTRACTOR shall not assign or transfer any interest in this Agreement without the prior written consent of CITY. Consent to any such transfer shall be at the sole discretion of CITY.

Section 4.8 Notices

Any notice required to be given by the terms of this Agreement shall be in writing signed by an authorized representative of the sender and shall be deemed to have been given when the same is personally served or upon receipt by express or overnight delivery, postage prepaid, or three (3) days from the time of mailing if sent by first class or certified mail, postage prepaid, addressed to the respective parties as follows:

To CITY: City of Lodi
 221 West Pine Street
 P.O. Box 3006
 Lodi, CA 95241-1910
 Attn: Christina Jaromay

To CONTRACTOR: United Site Services of California, Inc.
 P.O. Box 53267
 Phoenix, AZ 85072-3267
 Attn: Sean McDowell

Section 4.9 Cooperation of CITY

CITY shall cooperate fully and in a timely manner in providing relevant information it has at its disposal relevant to the Scope of Services.

Section 4.10 CONTRACTOR is Not an Employee of CITY

CONTRACTOR agrees that in undertaking the duties to be performed under this Agreement, it shall act as an independent contractor for and on behalf of CITY and not an employee of CITY. CITY shall not direct the work and means for accomplishment of the services and work to be performed hereunder. CITY, however, retains the right to require that work performed by CONTRACTOR meet specific standards without regard to the manner and means of accomplishment thereof.

Section 4.11 Termination

CITY may terminate this Agreement, with or without cause, by giving CONTRACTOR at least ten (10) days written notice. Where phases are anticipated within the Scope of Services, at which an intermediate decision is required concerning whether to proceed further, CITY may terminate at the conclusion of any such phase. Upon termination, CONTRACTOR shall be entitled to payment as set forth in the attached Exhibit B to the extent that the work has been performed. Upon termination, CONTRACTOR shall immediately suspend all work on the Project and deliver any documents or work in progress to CITY. However, CITY shall assume no liability for costs, expenses or lost profits resulting from services not completed or for contracts entered into by CONTRACTOR with third parties in reliance upon this Agreement.

Section 4.12 Confidentiality

CONTRACTOR agrees to maintain confidentiality of all work and work products produced under this Agreement, except to the extent otherwise required by law or permitted in writing by CITY. CITY agrees to maintain confidentiality of any documents owned by CONTRACTOR and clearly marked by CONTRACTOR as "Confidential" or "Proprietary", except to the extent otherwise required by law or permitted in writing by CONTRACTOR. CONTRACTOR acknowledges that CITY is subject to the California Public Records Act.

Section 4.13 Applicable Law, Jurisdiction, Severability, and Attorney's Fees

This Agreement shall be governed by the laws of the State of California. Jurisdiction of litigation arising from this Agreement shall be venued with the San Joaquin County Superior Court. If any part of this Agreement is found to conflict with applicable laws, such part shall be inoperative, null, and void insofar as it is in conflict with said laws, but the remainder of this Agreement shall be in force and effect. In the event any dispute between the parties arises under or regarding this Agreement, the

prevailing party in any litigation of the dispute shall be entitled to reasonable attorney's fees from the party who does not prevail as determined by the San Joaquin County Superior Court.

Section 4.14 City Business License Requirement

CONTRACTOR acknowledges that Lodi Municipal Code Section 3.01.020 requires CONTRACTOR to have a city business license and CONTRACTOR agrees to secure such license and pay the appropriate fees prior to performing any work hereunder.

Section 4.15 Captions

The captions of the sections and subsections of this Agreement are for convenience only and shall not be deemed to be relevant in resolving any question or interpretation or intent hereunder.

Section 4.16 Integration and Modification

This Agreement represents the entire understanding of CITY and CONTRACTOR as to those matters contained herein. No prior oral or written understanding shall be of any force or effect with respect to those matters covered hereunder. This Agreement may not be modified or altered except in writing, signed by both parties.

Section 4.17 Contract Terms Prevail

All exhibits and this Agreement are intended to be construed as a single document. Should any inconsistency occur between the specific terms of this Agreement and the attached exhibits, the terms of this Agreement shall prevail.

Section 4.18 Severability

The invalidity in whole or in part of any provision of this Agreement shall not void or affect the validity of any other provision of this Agreement.

Section 4.19 Ownership of Documents

All documents, photographs, reports, analyses, audits, computer media, or other material documents or data, and working papers, whether or not in final form, which have been obtained or prepared under this Agreement, shall be deemed the property of CITY. Upon CITY's request, CONTRACTOR shall allow CITY to inspect all such documents during CONTRACTOR's regular business hours. Upon termination or completion of services under this Agreement, all information collected, work product and documents shall be delivered by CONTRACTOR to CITY within ten (10) calendar days.

CITY agrees to indemnify, defend and hold CONTRACTOR harmless from any

liability resulting from CITY's use of such documents for any purpose other than the purpose for which they were intended.

Section 4.20 Authority

The undersigned hereby represent and warrant that they are authorized by the parties to execute this Agreement.

Section 4.21 Federal Transit Funding Conditions

If the box at left is checked, the Federal Transit Funding conditions attached as Exhibit D apply to this Agreement. In the event of a conflict between the terms of this Agreement or any of its other exhibits, and the Federal Transit Funding Conditions, the Federal Transit Funding Conditions will control.

Section 4.22 Counterparts and Electronic Signatures

This Agreement and other documents to be delivered pursuant to this Agreement may be executed in one or more counterparts, each of which will be deemed to be an original copy and all of which, when taken together, will be deemed to constitute one and the same agreement or document, and will be effective when counterparts have been signed by each of the parties and delivered to the other parties. Each party agrees that the electronic signatures, whether digital or encrypted, of the parties included in this Agreement are intended to authenticate this writing and to have the same force and effect as manual signatures. Delivery of a copy of this Agreement or any other document contemplated hereby, bearing an original manual or electronic signature by facsimile transmission (including a facsimile delivered via the Internet), by electronic mail in "portable document format" (".pdf") or similar format intended to preserve the original graphic and pictorial appearance of a document, or through the use of electronic signature software will have the same effect as physical delivery of the paper document bearing an original signature.

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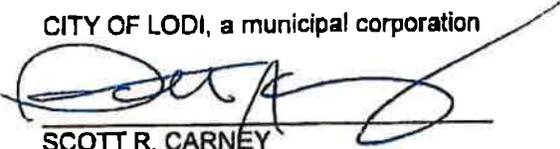
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IN WITNESS WHEREOF, CITY and CONTRACTOR have executed this Agreement as of the date first above written.

ATTEST:

CITY OF LODI, a municipal corporation

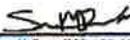

OLIVIA NASHED
City Clerk


SCOTT R. CARNEY
City Manager

APPROVED AS TO FORM:

UNITED SITE SERVICES OF CALIFORNIA,
INC., a California corporation

By: 
KATIE O. LUCCHESI
City Attorney 

By: 
Sean McDowell (Oct 29, 2024 15:43 EDT)
Name: SEAN MCDOWELL
Title: Director of Contracts

Attachments:

Exhibit A/B – Scope of Services & Fee Proposal

Exhibit C – Insurance Requirements

Exhibit – Federal Transit Funding Conditions (if applicable)

Funding Source: 20072202.72499
(Business Unit & Account No.)

Doc ID:

CA: Rev.07.2024-VS (CA Formatted)

Scope of Services:

Work to be performed shall be to provide labor, materials, and rental equipment, such as portable toilet, hand wash stations, and other similar rental stations used for public hygiene and convenience at various park facilities and for City of Lodi sponsored public events.

Rental of portable toilet and hand wash station: equipment shall be, in compliance with proposed maintenance, placed in a convenient accessible location on level ground; holding tank will be evacuated and interior debris removed; holding tank will be refilled with deodorizer, interior walls, toilet seat, urinal, exterior of holding tank; paper dispenser and floor will be sprayed with disinfectant, cleaned and dried when serviced; when ordered, hand sanitizer or hand wash station will be replenished and restocked; toilet paper dispenser will be restocked with two rolls; technician will inspect each unit for graffiti, minor damage or repairs and report them to parks division staff.



EXHIBIT B
NOT TO EXCEED \$66,826.21 1

Account #: ACT-00154239
 Quote #: Q-1035650
 Contract #:
 Expiration Date: 07-24-24

Quote
 Date: 06-24-24

Customer: CITY OF LODI

Document #
 1035650

Delivery Address:

1101 W TURNER RD
 LODI, CA 95242

Requested By:

TRACEY ROLETTO
 209-269-4880
 troletto@lodi.gov

USS Contact:

Mark Rudd
 Inside Sales Rep-Terr
 (775) 332-1834
 mark.rudd@unitedsiteservicesinc.com
 United Site Services of California, Inc.

Item	Unit	Unit Price	Qty	Charge Type	Total Charge	Tax
Restroom Bundle Configuration Estimated Delivery 07-01-24 Pickup 06-30-25						
Standard Restroom	EA	\$43.00	6	Recurring	\$258.00	Y
1 Service 3 Days per Week	EA	\$299.00	6	Recurring	\$1794.00	N
Restroom Bundle Configuration Estimated Delivery 07-01-24 Pickup 06-30-25						
1 Service 3 Days per Week	EA	\$399.00	6	Recurring	\$2394.00	N
ADA Restroom	EA	\$81.00	6	Recurring	\$486.00	Y
Hand Cleaning Bundle Configuration Estimated Delivery 07-01-24 Pickup 06-30-25						



QUOTE SUMMARY

Date: July 8, 2024

Quote:

COMPANY:

PHONE NO.:

SALES REP.:

United Site Service	ASAP Site Services	Honeybucket
Mark Rudd		Pat Donohue
1-800-TOILETS	NO RESPONSE	NO RESPONSE

QTY	UOM	DESCRIPTION	UNITED SITE SERVICE	ASAP SITE SERVICES	HONEYBUCKET
6	Ea	ADA restroom rental – Price to include delivery, setup and removal, service 3 times weekly at Lodi Lake for six months			
6	Ea	Standard restroom rental – Price to include delivery, setup and removal, service 3 times weekly at Lodi Lake for six months			
4	Ea	Sink wash station – price to include delivery, setup and removal, service 3 times weekly at Lodi lake for six months	\$7455.48		per month
1	Ea	ADA restroom rental – Price to include delivery, setup and removal, service once weekly at DeBenedetti park for twelve months			
1	Ea	Standard restroom rental – Price to include delivery, setup and removal, service once weekly at DeBenedetti park for twelve months			
1	Ea	Sink wash station – price to include delivery, setup and removal, service once weekly at DeBenedetti park for twelve months	\$1187.26		per month
1	Ea	Standard restroom rental – Price to include delivery, setup and removal, service once weekly at Vinewood park for twelve months			
1	Ea	ADA restroom rental – Price to include delivery, setup and removal, service once weekly at Vinewood park for twelve months	\$554.15		per month

REMARKS:	
SUBTOTAL:	
SALES TAX:	
FREIGHT:	
GRAND TOTAL:	\$65,656.80

SIGNATURE: _____

DATE: _____

July 8, 2024

Signature: 
Katie Lucchesi (Jan 22, 2026 10:39:42 PST)

Email: klucchesi@lodi.gov

Amendment to Increase Fees - United Site Services.vs

Final Audit Report

2026-01-22

Created:	2026-01-22
By:	Vanessa Serna (vserna@lodi.gov)
Status:	Signed
Transaction ID:	CBJCHBCAABAA-PgWEtH3NK90_uXxZkfLXz6F3JXnU7pK

"Amendment to Increase Fees - United Site Services.vs" History

-  Document created by Vanessa Serna (vserna@lodi.gov)
2026-01-22 - 5:56:58 PM GMT
-  Document emailed to Katie Lucchesi (klucchesi@lodi.gov) for signature
2026-01-22 - 5:57:34 PM GMT
-  Email viewed by Katie Lucchesi (klucchesi@lodi.gov)
2026-01-22 - 6:38:50 PM GMT
-  Document e-signed by Katie Lucchesi (klucchesi@lodi.gov)
Signature Date: 2026-01-22 - 6:39:42 PM GMT - Time Source: server
-  Agreement completed.
2026-01-22 - 6:39:42 PM GMT

RESOLUTION NO. 2026-_____

A RESOLUTION OF THE LODI CITY COUNCIL AUTHORIZING INTERIM CITY MANAGER TO EXECUTE AMENDMENT NO. 2 TO AGREEMENT WITH UNITED SITE SERVICES, INC. OF CALIFORNIA FOR PORTABLE RESTROOM SERVICES AT VARIOUS CITY PARKS BY \$10,000 FOR A TOTAL NOT TO EXCEED AMOUNT OF \$136,826

WHEREAS, various parks throughout Lodi host youth and adult athletic programs including city-run league play and the Boosters of Boys/Girls Sports (BOBS) practices and games. Some of the parks used for these programs do not have permanent restrooms; and

WHEREAS, due to the delay in construction of the restroom facilities at Lodi Lake, additional services are needed; and

WHEREAS, United Site Services, Inc. will continue to provide delivery, set-up, removal and weekly service of ADA restrooms, standard restrooms and hand wash stations for at Lodi Lake, DeBenedetti and Vinewood Park.

NOW, THEREFORE, BE IT RESOLVED that the Lodi City Council does hereby authorize the Interim City Manager to execute Amendment No. 2 with United Site Services, Inc. of California to add \$10,000 (account 20072202.72499) to the overall Agreement for a total not to exceed amount of \$136,826; and

BE IT FURTHER RESOLVED pursuant to Section 6.3q of the City Council Protocol Manual (Res. No. 2019-223), the City Attorney is hereby authorized to make minor revisions to the above-referenced document(s) that do not alter the compensation or term, and to make clerical corrections as necessary.

Dated: February 4, 2025

I hereby certify that Resolution No. 2026-_____ was passed and adopted by the City Council of the City of Lodi in a regular meeting held February 4, 2026, by the following vote:

- AYES: COUNCIL MEMBERS –
- NOES: COUNCIL MEMBERS –
- ABSENT: COUNCIL MEMBERS –
- ABSTAIN: COUNCIL MEMBERS –

OLIVIA NASHED
City Clerk

2026-_____



COUNCIL COMMUNICATION

AGENDA TITLE:

Adopt a Resolution Approving Updates to the City of Lodi Public Transportation Agency Safety Plan (PW)

MEETING DATE:

February 4, 2026

PREPARED BY:

Interim Public Works Director

RECOMMENDED ACTION:

Adopt a resolution approving the annual updates to the City of Lodi Public Transportation Agency Safety Plan (PTASP) and authorize the Interim Public Works Director to execute and certify the updated plan.

BACKGROUND INFORMATION:

The City of Lodi's PTASP is required to maintain eligibility for Federal Transit Administration (FTA) funding and was developed in accordance with FTA's final rule for PTASPs (49 CFR Part 673), as authorized under the Moving Ahead for Progress in the 21st Century (MAP-21) Act. The rule requires transit operators to implement a Safety Management System (SMS), a top-down, organization-wide approach to managing safety risks. SMS includes hazard identification and mitigation, ongoing performance monitoring, and safety promotion through staff training and communication.

The existing PTASP was adopted by City Council on June 17, 2020, and last updated on November 6, 2024. This update reflects operating data from July 2022 through June 2025 and includes revised Safety Performance Targets (SPTs) and measures, clarifications to safety event definitions per 2025 FTA guidance, updates to the organizational chart, and additional safety measures. New measures include de-escalation training and procedures for reporting and mitigating assaults on transit workers.

The updated PTASP establishes safety performance targets of zero fatalities, zero major events, and zero Transit Worker Assaults per 100,000 miles. Based on actual data from July 2022 through June 2025, the system recorded zero fatalities, one reportable injury (major event), one reportable collision (major event), zero pedestrian collisions, two non-physical Transit Worker assaults, and three Transit Worker Injuries. Average distances between service-affecting mechanical failures were 19,905 miles for fixed-route service and 81,284 miles for Dial-a-Ride/ADA Paratransit. These updates reflect a proactive, data-driven approach to safety and ensure compliance with all current FTA requirements.

Staff recommends that the Council approve the PTASP updates and authorize the Interim Public Works Director to execute and certify the plan, ensuring continued FTA funding eligibility and full compliance with 49 CFR Part 673.

STRATEGIC VISION:

7G. Public Safety: High levels of community involvement by public safety employees.

COUNCIL COMMUNICATION

FISCAL IMPACT:

An annually updated PTASP is required by FTA regulations and for continued FTA funding of transit services.

FUNDING AVAILABLE:

Not Applicable.



CITY OF LODI

**PUBLIC TRANSPORTATION AGENCY
SAFETY PLAN (PTASP)**

City of Lodi – Transit Division
Prepared by: PTASP Chief Safety Manager and
PTASP Accountable Executive



Public Works - Transit Division

Adopted:
June 2020

Revised:
December 2025

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1. TRANSIT AGENCY INFORMATION

Transit Agency	Name		Address	
	City of Lodi		221 West Pine Street, Lodi, CA 95240	
Accountable Executive	Name		Title	
	Sean Nathan		Public Works Interim Director	
Chief Safety Officer	Name		Title	
	Julia Tyack		Transportation Manager	
Mode(s) of Service Covered by This Plan:			List All FTA Funding Types (e.g., 5307, 5337, 5339):	
Fixed Route Bus: Motorbus (MB)			5307, 5339	
Non-Fixed Route Bus: Demand Response (DR)			5307, 5339	
Mode(s) of Service Provided by the CITY OF LODI (Directly operated or contracted service)				
Fixed Route: Motorbus (MB) – contracted service				
Non-Fixed Route: Demand Response (DR) – contracted service				
Does the agency provide transit services on behalf of another transit agency or entity?	Yes	No	Description of Arrangement(s)	
		X	N/A	
Transit Agency(ies) or Entity(ies) for Which Service Is Provided	Name		Address	
	N/A			
	N/A			

ACCOUNTABLE EXECUTIVE

City of Lodi’s Accountable Executive is the Public Works Director. The Public Works Director is the single, identifiable person who has ultimate responsibility for carrying out this Agency Safety Plan and the City of Lodi’s Transit Asset Management (TAM) Plan, and control or direction over the human and capital resources needed to develop and maintain both this Plan and the TAM Plan.

The Public Works Director is accountable for ensuring that the Agency’s Safety Management Systems (SMS) is effectively implemented throughout the Agency’s public transportation system. The Public Works Director is accountable for ensuring action is taken as necessary, to address substandard performance in the Agency’s SMS. The Public Works Director may delegate specific responsibilities, but the ultimate accountability for the Transit Agency’s safety performance cannot be delegated and always rests with the Public Works Director.

CHIEF SAFETY OFFICER

The Public Works Director designates the Transportation Manager as City of Lodi’s Chief Safety Officer who has the authority and responsibility for day-to-day implementation and operation of the Agency’s SMS. The Chief Safety Officer holds a direct line of reporting to the Accountable Executive, as shown in **Appendix A: Staff Safety Roles Organizational Chart**, and has a strong working relationship with the operations and asset management functions at City of Lodi.

2. PLAN DEVELOPMENT, APPROVAL, AND UPDATES

The City of Lodi developed the contents of this Public Transportation Agency Safety Plan (PTASP) to meet the requirements specified in 49 CFR Part 673. This Plan is based on the four (4) principles or pillars of the Safety Management System (SMS). SMS is defined as the formal, top-down, organization-wide, data-driven approach to managing safety risk and assuring the effectiveness of safety mitigations. It includes systematic policies, procedures, and practices for the management of safety risk. The four principles or pillars of SMS are: (1) Safety Management Policy; (2) Safety Risk Management; (3) Safety Assurance; and (4) Safety Promotion.

The Federal Transit Administration (FTA) will oversee compliance with the requirements of Part 673 through the existing Triennial Review Process.

SIGNATURE BY THE ACCOUNTABLE EXECUTIVE

The City of Lodi developed this plan. By signature below, the Accountable Executive confirms the development of this plan.

Sean Nathan, Accountable Executive

Date Signed

APPROVAL BY LODI CITY COUNCIL

The Lodi City Council approved the original Plan on **June 17, 2020**, as documented in **Resolution #2020-130** (see Appendix C: Documentation of City Council PTASP Approval).

Updates to the Plan were approved on **December 20, 2023 (Resolution #2023-285)** and on **November 6, 2024 (Resolution #2024-183)**, as documented in Appendix C.

CERTIFICATION OF COMPLIANCE

Pursuant to 49 CFR Parts 673.13(a) and 673.13(b), City of Lodi certifies that it has established this Agency Safety Plan, meeting the requirements of 49 CFR Part 673 by July 20, 2020.

FTA does not require this plan to be submitted to FTA. Instead, City of Lodi will certify that it has established this Safety Plan, which fulfills the requirements under Part 673. FTA annually amends and issues the list of Certifications and Assurances. City of Lodi will review such guidance for incorporation into the safety program as necessary.

PLAN REVIEW & UPDATES

City of Lodi updates this Safety Plan when information, processes or activities change within the Agency and/or when Part 673 undergoes significant changes, or annually, whichever comes sooner. As City of Lodi collects data through its Safety Risk Management and Safety Assurance

processes, shared with the California Department of Transportation, Caltrans, and the local Metropolitan Planning Organization, San Joaquin Council of Governments (SJCOG). SJCOG and Caltrans will evaluate City of Lodi's Safety Performance Targets (SPTs) to determine whether they need to be changed, as well.

This Plan will be jointly reviewed and updated annually following the July fiscal year end by the Chief Safety Officer and Safety Manager, with support from subject matter experts. The Accountable Executive will approve any changes, and may forward on to the Lodi City Manager or City Council to approve as determined appropriate or necessary.

This Plan may need to be reviewed and updated more frequently based on the following:

- We determine our approach to mitigating safety deficiencies is ineffective;
- We make significant changes to service delivery;
- We introduce new processes or procedures that may impact safety;
- We change or re-prioritize resources available to support SMS;
- We significantly change our organizational structure.

A Record of Revisions, documenting the history of changes made to the City of Lodi's PTASP, is provided in **Appendix D: Record of Revisions**. This document is included in the appendix to maintain consistent page numbering.

3. DEFINITIONS AND ACRONYMS

The following definitions may be used throughout this document, and correspond to the definitions provided in 49 CFR 673.5.

Accident - An event (as defined below) that involves any of the following:

1. A loss of life,
2. A report of a serious injury to a person,
3. A collision of public transportation vehicles,
4. A runaway train,
5. An evacuation for life safety reasons, or
6. Any derailment of a rail transit vehicle (any location, any time, any cause).

Accountable Executive - A single, identifiable individual who has ultimate responsibility for carrying out the Public Transportation Agency Safety Plan (as defined below) of a public transportation agency; responsibility for carrying out the agency's Transit Asset Management Plan (as defined below), and control or direction over the human and capital resources needed to develop and maintain both the agency's Public Transportation Agency Safety Plan, in accordance with 49 U.S.C. 5329(d), and the agency's Transit Asset Management Plan in accordance with 49 U.S.C. 5326.

Assault on Transit Worker - Any intentional act of physical aggression, threat, or harassment directed toward a transit employee while performing transit-related duties.

CDC - The Centers for Disease Control and Prevention, a national public health agency within the Department of Health and Human Services. The CDC is responsible for releasing public health recommendations to prevent the spread of infectious disease.

Chief Safety Officer - An adequately trained individual who has responsibility for safety and reports directly to a transit agency's chief executive officer, general manager, president, or equivalent officer. A Chief Safety Officer may not serve in other operational or maintenance capacities, unless the Chief Safety Officer is employed by a transit agency that is a small public transportation provider as defined in this part, or a public transportation provider that does not operate a rail fixed guideway public transportation system.

Collision Types – Categories of vehicle incidents, including: Vehicular Collision: involving one or more transit vehicles and other vehicles. Pedestrian Collision: Involving a transit vehicle and a pedestrian. Transit Vehicle Collision: involving two or more transit vehicles.

De-escalation Training - Training provided to employees on strategies and techniques to safely manage conflict, prevent assaults, and reduce risk to employees and passengers.

Equivalent Authority -An entity that carries out duties similar to that of a Board of Directors, for a recipient or subrecipient of FTA funds under 49 U.S.C. Chapter 53, including sufficient authority to review and approve a recipient or subrecipient's Public Transportation Agency Safety Plan.

Event - A general term encompassing accidents, incidents, and occurrences (each as defined herein)

FTA - The Federal Transit Administration, an operating administration within the United States Department of Transportation.

Hazard - Any real or potential condition that can cause injury, illness, or death; damage to or loss of the facilities, equipment, rolling stock, or infrastructure of a public transportation system; or damage to the environment (as defined below).

Hazard Log – A documented record maintained by the Chief Safety Officer to track identified hazards, risk mitigations, and follow-up actions.

Incident - An event that involves one of the following:

1. A personal injury that is not a serious injury,
2. One or more injuries requiring medical transport, or
3. Damage to facilities, equipment, rolling stock, or infrastructure that disrupts the operations of a transit agency.

Investigation- The process of determining the causal and contributing factors of an “accident”, “incident”, or “hazard” (each as defined here), for the purpose of preventing recurrence and mitigating risk.

Major Event – Any safety-related occurrence that meets the FTA criteria for reporting as a significant transit event, including accidents, fires, or other serious incidents affecting passengers, employees, or transit assets.

National Public Transportation Safety Plan - The plan to improve the safety of all public transportation systems that receive federal financial assistance under 49 U.S.C. Chapter 53.

Occurrence - An event without any personal injury in which any damage to facilities, equipment, rolling stock, or infrastructure does not disrupt the operations of a transit agency.

Operator of a Public Transportation System - A provider of public transportation as defined under 49 U.S.C. 5302(14).

Performance Measure - An expression based on a quantifiable indicator of performance or condition that is used to establish targets and to assess progress toward meeting the established targets.

Performance Target / Safety Performance Target (SPT) - A quantifiable level of performance or condition, expressed as a value for the measure, to be achieved within a time period required by the Federal Transit Administration (FTA).

Public Transportation Agency Safety Plan (PTASP) - The documented comprehensive agency safety plan for a transit agency that is required by 49 U.S.C. 5329 and Part 673.

Risk -The composite of predicted severity and likelihood of the potential effect of a hazard.

Risk Mitigation - A method or methods to eliminate or reduce the effects of hazards.

Safety Assurance - Processes within a transit agency's Safety Management System that functions to ensure the implementation and effectiveness of safety risk mitigation, and to ensure that the transit agency meets or exceeds its safety objectives through the collection, analysis, and assessment of information.

Safety Management Policy - A transit agency's documented commitment to safety, which defines the transit agency's safety objectives and the accountabilities and responsibilities of its employees in regard to safety.

Safety Management System (SMS) - The formal, top-down, organization-wide approach to managing safety risk and assuring the effectiveness of a transit agency's safety risk mitigation. SMS includes systematic procedures, practices, and policies for managing risks and hazards.

Safety Performance Target (SPT) - A Performance Target related to safety management activities.

Safety Promotion - A combination of training and communication of safety information to support SMS as applied to the transit agency's public transportation system.

Safety Risk Assessment (SRA) - The formal activity whereby a transit agency determines Safety Risk Management priorities by establishing the significance or value of its safety risks.

Safety Risk Management (SRM) - A process within a transit agency's Public Transportation Agency Safety Plan for identifying hazards and analyzing, assessing, and mitigating safety risk.

Serious Injury -Any injury which:

Public Transportation Agency Safety Plan

1. Requires hospitalization for more than 48 hours, commencing within 7 days from the date of the injury was received;
2. Results in a fracture of any bone (except simple fractures of fingers, toes, or noses);
3. Causes severe hemorrhages, nerve, muscle, or tendon damage;
4. Involves any internal organ; or
5. Involves second- or third-degree burns, or any burns affecting more than 5 percent of the body surface.

Small Public Transportation Provider – A recipient or subrecipient of Federal financial assistance under 49 U.S.C. 5307 that has one hundred (100) or fewer vehicles in peak revenue service and does not operate a rail fixed guideway public transportation system.

State - A State of the United States, the District of Columbia, Puerto Rico, the Northern Mariana Islands, Guam, American Samoa, and the Virgin Islands.

State of Good Repair (SGR) - The condition in which a capital asset is able to operate at a full level of performance.

Transit Agency - An operator of a public transportation system.

Transit Asset Management Plan - The strategic and systematic practice of procuring, operating, inspecting, maintaining, rehabilitating, and replacing transit capital assets to manage their performance, risks, and costs over their life cycles, for the purpose of providing safe, cost-effective, and reliable public transportation, as required by 49 U.S.C. 5326 and 49 CFR part 625.

COMMONLY USED ACRONYMS:

ADA	Americans with Disabilities Act of 1990
ASP	Agency Safety Plan (also referred to as a PTASP in Part 673)
CDC	Center for Disease Control and Prevention
CFR	Code of Federal Regulations
ESRP	Employee Safety Reporting Program
CSO	Chief Safety Officer
FTA	Federal Transit Administration
MAP-21	Moving Ahead for Progress in the 21st Century
MPO	Metropolitan Planning Organization
NTD	National Transit Database
Part 673	49 CFR Part 673 (Public Transportation Agency Safety Plan)
PTASP	Public Transportation Agency Safety Plan
SGR	State of Good Repair
SMS	Safety Management System
SOP	Standard Operating Procedure
SRM	Safety Risk Management
TAM	Transit Asset Management
U.S.C.	United States Code
VRM	Vehicle Revenue Miles

4. SAFETY PERFORMANCE MEASURES AND ANNUAL TARGETS

As part of this Safety Plan, the City of Lodi has established **Safety Performance Targets (SPTs)**, which will be **reviewed and updated annually**. These targets are based on the safety performance measures outlined in the **National Public Transportation Safety Plan**. The City of Lodi tracks the following **measures** for reporting and target-setting purposes: **major events, fatalities, injuries, assaults on transit workers, collisions (vehicular and pedestrian) and system reliability**.

The City of Lodi’s safety performance targets are based on data from the past **three fiscal years (July 2022 – June 2025)**.

Refer to **Appendix B: Safety Performance Measures – Totals and Rates per 100,000 VRM**. This table summarizes the City of Lodi’s **total occurrences and calculated rates per 100,000 Vehicle Revenue Miles (VRM)** for each safety performance measure during this period.

Safety Performance Measures are defined according to the *2025 National Transit Database (NTD) Safety and Security Policy Manual (released November 2025)*.

Safety performance measures used for this plan were sourced from the April 2024 release of the *National Public Transportation Safety Plan, Version 2*.

REPORTABLE FATALITIES

Death confirmed within 30 days of a safety event (including suicides). Fatalities that occur because of illnesses, drug overdoses, or other natural causes (including individuals who are found deceased) are not reportable.

The City of Lodi has had **zero** reportable fatalities in the past three years.

The target for the next year, 2026, is **zero** fatalities.

REPORTABLE INJURIES

***Injury:** means any harm to persons as a result of an event that requires immediate medical attention away from the scene. Each person transported away from the scene for medical attention is a reportable injury, even if the person does not appear to be injured. The injury is reportable even if they are not transported via ambulance; the reportable event is based on the immediate requirement for medical attention.*

Does not include harm resulting from a drug overdose, exposure to the elements, illness, natural causes, or occupational safety events occurring in administrative buildings. Illnesses that require transport away from the scene for medical attention is not reportable if the illness is unrelated to a safety event.

If an individual seeks medical care several hours after an event or in the days following an event, that does not constitute immediate medical transportation away from the scene. This criterion requires that the individual receive medical attention at a location other than the location at which the event occurred. This distinction serves to exclude minor first aid or other minor medical assistance received at the scene.

Persons who are transported away from the scene for the following reasons are not reportable:

- *Illness, natural causes, exposure to the elements, intoxication, drug overdose, or mental health evaluation unrelated to a specific reportable event*
- *Declarations or allegations of self-harm with no evident injury.*

Transit Worker Injuries: *Transit worker injuries include any injuries to employees, contractors, or volunteers performing work on behalf of the transit agency. This encompasses transit vehicle operators, maintenance and fleet personnel, facility staff, and other transit staff or contractors.*

*A reportable transit worker injury is one resulting from a safety or security event occurring on transit right-of-way or infrastructure, at a revenue facility, at a maintenance facility, during a transit-related maintenance activity, or involving a transit revenue vehicle, **and** meeting one or more NTD reporting thresholds. One of these thresholds includes **a single-injury event in which the worker is transported away from the scene for medical attention.***

Common “Other Safety Incident” categories — when the event is not a collision, derailment, or major security event — include slip, trip, and fall incidents (including contact with a non-moving vehicle); maintenance-worker injuries; boarding or alighting events; abrupt or evasive vehicle maneuvers; mobility-device securement issues; and incidents involving stairs, elevators, or escalators.

The City of Lodi had **three** injuries meeting this definition in the past three years.

Date	Description of Event
9/15/2022	A transit operator fell on the bus ramp while assisting a passenger off the bus. This qualifies as a transit worker injury because it occurred during transit-related activities involving a transit revenue vehicle , and the employee sought immediate medical attention away from the scene following the incident.
10/10/2023	Passenger requested ambulance due to pain; passenger stated the pain was from a recent surgery. Event did not meet the Reportable Injury criteria because injury was due to a passenger condition (surgery) & unrelated to a transit safety event.
1/20/2024	A transit operator tripped after exiting the bus in the transit station parking lot, a transit revenue facility. This event qualifies as a transit worker injury because it occurred during transit-related activities at a transit revenue facility and the employee sought immediate medical attention away from the scene following the incident.

4/22/2024	Passenger was lethargic on bus, fell, and requested ambulance; passenger stated they had low blood pressure. Event did not meet the Reportable Injury criteria because injury was due to a passenger condition (illness) & unrelated to a transit safety event.
9/7/2024	Passenger was found unconscious on the bus during transport and was transported to the hospital by ambulance. This does not meet the criteria for a reportable injury , as the loss of consciousness appears to be due to natural causes or intoxication unrelated to a reportable event.
1/30/2025	A transit employee fell while getting off the bus. This qualifies as a transit worker injury because it occurred during transit-related activities while exiting a transit revenue vehicle , and the employee sought immediate medical attention away from the scene following the incident.
3/18/2025	A passenger using a mobility scooter tipped over during transport, causing injuries to two passengers. One passenger was transported by ambulance to the hospital for medical evaluation, while the other was treated on-site and did not require transport. This incident qualifies as a reportable event because it resulted in passenger injuries that required immediate medical attention away from the scene .

The target for the next year, 2026, is **zero** injuries.

REPORTABLE MAJOR EVENTS

*A **Major Event** is any safety or security incident that meets **one or more** of these thresholds and must be documented in the agency’s Safety Performance Measures.*

***Fatalities:** Any incident resulting in a **death within 30 days** of the event. More information under reportable fatalities section.*

***Injuries:** An injury is any injury that occurs during transit-related activities and requires **immediate medical attention away from the scene**. **Not all injuries are considered major events**. An injury is classified as a **major event** only if it results in **hospitalization, serious harm, or significant operational impact** as defined by PTASP.*

***Evacuations for Life-Safety Reasons:** Any evacuation of passengers or employees due to an immediate safety hazard, including: fire or smoke, hazardous materials or fuel leaks, electrical hazards, weapons discharged, bomb threats or suspicious items, security threats, or off-property hazards affecting transit vehicles or facilities (e.g., nearby gas leak, fire). Self-evacuations are not automatically reportable unless another threshold (injury, fatality, property damage) is met.*

***Property Damage of \$25,000 or More:** Any event resulting in \$25,000 or more in combined damage to transit or non-transit property, vehicles, equipment, or costs to clear the scene.*

Collisions: A collision is considered a Major Event when it meets any of the following: Results in a fatality, injury transport, evacuation, or \$25,000+ property damage. Requires tow-away of a transit or non-transit vehicle. Involves a suicide or attempted suicide with contact to a transit vehicle causing injury or fatality. Involves an assault or homicide with contact to a transit vehicle causing injury or fatality. Involves transit equipment (revenue or non-revenue) and meets any of the above thresholds

Fires: Any fire requiring fire department response that also meets one or more Major Event thresholds (injury, evacuation, or \$25,000+ damage).

The City of Lodi has had **two** reportable major events.

Date	Description of Event
10/4/2022	Details for the 10/4/2022 collision, which met the property damage threshold, can be found in the Collision Rate section below.
3/18/2025	Details for the 3/18/2025 incident, which met the injury threshold, are provided in the Reportable Injuries section.

The target for the next year, 2026, is **zero** major events.

COLLISION RATES (NEW)

Collision Rate & Vehicular Collision Rate: A reportable non-rail collision is any collision that results in one or more of the following:

- An injury requiring immediate medical transport from the scene
- A fatality
- An evacuation for life-safety reasons
- Property damage of \$25,000 or more
- Towing of the transit or non-transit vehicle

The vehicular collision rate is calculated as the number of reportable collisions per 100,000 Vehicle Revenue Miles (VRM).

Pedestrian Collision Rate: Includes all reportable collisions involving a person, as defined by the National Transit Database (NTD), including:

- Pedestrians
- Bicyclists on non-motorized bicycles
- Skateboarders

This rate is also expressed per 100,000 VRM.

The City of Lodi had **one** collision meeting this criterion in the past three years.

Date	Description of Event
10/4/2022	Operator struck bus wash equipment at the Municipal Services Center, causing \$29,346.22 in damages. The accident was determined to be preventable. This collision qualifies as a reportable event because the property damage exceeded \$25,000.

The target for next year, 2026, is **zero** collisions.

ASSAULTS (NEW)

Physical Assaults - An assault in which the attack involves physical contact with the transit worker. This could include any physical contact with the victim from the attacker's body, a weapon, a projectile, or other item.

Non-Physical Assaults - An assault in which the attack involves no physical contact with the transit worker. This could include threats or intimidation that did not result in any physical contact with the transit worker.

The City of Lodi had **two** assaults meeting this criterion in the past three years.

Date	Description of Event
11/7/2023	Operator informed the passenger of the policy regarding carts and personal belongings and advised that he could not board with the number of items he was carrying. The passenger then verbally threatened the operator and struck the bus window with a shovel, causing it to shatter. This incident is classified as a non-physical assault .
12/12/2024	The operator advised the passengers of the food and drink policy and instructed them to deboard. The passengers then made verbal threats toward the driver, constituting a non-physical assault .

The target for next year, 2026, is **zero** assaults.

SYSTEM RELIABILITY

Major mechanical failure preventing a vehicle from completing or starting scheduled trip, defined by average distance between major mechanical failures.

Mode	July 2021 – June 2024			July 2022 – June 2025		
	VRM	Major Mechanical Failures	Avg Distance Between Failures	VRM	Major Mechanical Failures	Average Distance Between Failures
Fixed Route	726,029	61	11,902	776,297	39	19,905
Dial-A-Ride	156,676	8	19,585	162,568	2	81,284

The City of Lodi has an average of **19,905** vehicle revenue miles between major mechanical failures in fixed route.

The City of Lodi has an average of **81,284** vehicle revenue miles between major mechanical failures in Dial-A-Ride.

To calculate SPTs, the City of Lodi referred to system safety data, including:

- Accident investigation reports (with causal factor analysis)
- Internal safety audits (or reviews)
- Injury reports
- Safety event reports (including accidents, incidents, and occurrences)
- System monitoring (including monthly reports, and testing and inspection records)

LOCATION OF OCCURRENCE

Major events should meet the following location requirements:

- Occurs at a transit revenue facility, maintenance facility;
- Occurs on transit right-of-way or infrastructure (the underlying framework or structures that support a public transportation system);
- Occurs during a transit-related maintenance activity; or
- Involves a transit revenue vehicle.

Safety event location requirements do not include:

- Events that occur off transit property where affected persons, vehicles, or objects come to rest on transit property after the event;
- Occupational safety events occurring in administrative buildings;
- Deaths that are confirmed to be a result of illness, drug overdose or other natural causes, outside of a reportable event
- Other events (assault, robbery, non-transit vehicle collisions, etc.) occurring at bus stops or shelters that are not on transit-owned property-unless the event involves either a transit vehicle or a person boarding/alighting from a vehicle
 - Bus stops or shelters owned by municipalities or authorities that also operate transit systems are not considered “transit-owned” property for the purpose of this analysis (see the most current annual NTD Reporting Policy Manual for more detail distinguishing bus stops from facilities);
- Collisions that occur while transit personnel are travelling to or from a transit-related maintenance activity; and
- Collisions involving a supervisor car or other non-revenue transit service vehicle operating on public roads.

MINIMIZING EXPOSURE TO INFECTIOUS DISEASE

The City of Lodi recognizes that infectious diseases can pose a safety risk to employees and passengers and implements measures to minimize exposure in accordance with guidance from the **CDC, Cal/OSHA, and local public health authorities**. Current mitigation measures include sanitation stations at building entrances and employee areas, driver barriers installed on buses, remote meeting options to reduce unnecessary in-person interactions, and PPE availability for staff with masks available to passengers upon request. The agency continuously monitors public health guidance and evaluates new strategies as needed, integrating these activities into the City of Lodi’s

Safety Management System (SMS) to ensure ongoing risk assessment, mitigation, and continuous improvement.

DE-ESCALATION TRAINING (NEW)

The City of Lodi recognizes that interactions with passengers and the public can occasionally escalate into unsafe situations. To reduce risks and protect both employees and passengers, all front-line transit staff, including operators, maintenance staff, and other relevant personnel, receive **de-escalation training**.

Training includes strategies for **communication, conflict resolution, and handling difficult situations** in a safe and professional manner. Methods include instructor-led sessions, scenario-based exercises, and online modules. Employees complete initial training upon hire and participate in **refresher training annually** to maintain skills.

The agency monitors and tracks de-escalation training through its **Safety Management System (SMS)** to ensure compliance, assess effectiveness, and identify opportunities for continuous improvement.

SAFETY PERFORMANCE TARGET COORDINATION

FTA requires City of Lodi to coordinate with the State of California Department of Transportation (Caltrans) and the regional MPO, San Joaquin Council of Governments (SJCOG), in the selection of state and MPO safety performance targets, to the maximum extent practicable. Pursuant to 49 CFR Part 673.15(a), City of Lodi will make safety performance targets available to Caltrans and SJCOG to aid in the planning process upon certification of this plan. Additionally, City of Lodi will transmit performance data against the safety performance targets to Caltrans and SJCOG on an annual basis.

5. SAFETY MANAGEMENT SYSTEM (SMS)

SMS is a comprehensive, collaborative approach that brings management and labor together to build on the transit industry's existing safety foundation to control risk better, detect and correct safety problems earlier, share and analyze safety data more effectively, and measure safety performance more carefully. City of Lodi's SMS focuses on applying resources to risk and is based on ensuring that the City of Lodi has the organizational infrastructure to support decision-making at all levels regarding the assignment of resources. Some key parts of City of Lodi's SMS include:

- Defined roles and responsibilities;
- Strong executive safety leadership;
- Formal safety accountabilities and communication;
- Effective policies and procedures; and
- Active employee involvement

Furthermore, City of Lodi's SMS has four distinct components, which are discussed in subsequent sections to this Safety Plan:

- (1) Safety Management Policy
- (2) Safety Risk Management
- (3) Safety Assurance
- (4) Safety Promotion

5 – (1) SAFETY MANAGEMENT POLICY (SMP)

The first component of the City of Lodi's SMS is the Safety Management Policy, which is the foundation of the City of Lodi's safety management system. It clearly states the organization's safety objectives and sets forth the policies, procedures, and organizational structures necessary to accomplish the safety objectives. The Safety Management Policy clearly defines management and employee responsibilities for safety throughout the organization. It also ensures that management is actively engaged in the oversight of the system's safety performance by requiring regular review of the Safety Management Policy, budget and program by the designated Accountable Executive.

City of Lodi Safety Management Policy (SMP)

Safety is a core value at City of Lodi and managing safety is a core business function. City of Lodi will develop, implement, maintain, and continuously improve processes to ensure the safety of our customers, employees, and the public. City of Lodi's overall safety objective is to proactively manage safety hazards and their associated safety risk, with the intent to eliminate unacceptable safety risk in our transit operations.

City of Lodi will:

- Clearly, and continuously explain to all staff that everyone working within City of Lodi must take part and be responsible and accountable for the development and operation of the Safety Management System (SMS).
- Work continuously to minimize safety risks. Work to comply with and, wherever possible, exceed legislative and regulatory requirements and standards for passengers and employees. This includes following best-practice safety recommendations given by State or Federal agencies (e.g. California Department of Public Health and Centers for Disease Control and Prevention) to minimize the exposure or spread of infectious disease
- Work to ensure that all employees are provided appropriate safety information and training, are competent in safety matters, and assigned tasks commensurate with duties and skills.
- Reaffirm that responsibility for making our operations safer for everyone lies with all employees – from executive management to frontline employees. Each manager is responsible for implementing the SMS in their area of responsibility and will be held accountable to ensure that all reasonable steps are taken to perform activities established through the SMS.

City of Lodi established safety performance targets to help measure the overall effectiveness of our processes and ensure we meet our safety objectives. City of Lodi will keep employees informed about safety performance goals and objectives to ensure continuous safety improvement.

Safety Management Policy Communication

The Safety Management Policy is communicated throughout the Agency, to all employees, managers, and executives, as well as contractors, and to the Lodi City Council.

This is accomplished through various processes such as:

- Workshops/training sessions - Conducted for Senior Management, Directors, Managers, Supervisors. Once this Plan or any update to this Plan has been signed by the CEO/General Manager approved by the Board of Directors and certified by Caltrans it will become standard practice in perpetuity so that SMS becomes standard business practice. All Union representatives will be kept informed.
- New Hire Safety Orientation – All new employees regardless of their classifications will be trained about their roles and responsibilities pertaining to PTASP and the principles of SMS.
- Safety bulletins, email safety newsletter blasts to staff, toolbox/tailgate safety meetings and/or safety committee meetings

Employee Safety Reporting Program

City of Lodi implemented a process that allows employees [and contracted employees] to report safety conditions to senior management, protections for employees who report safety conditions to senior management. The purpose, description and protections for employees to report unsafe conditions and hazards are described in the Employee Safety Reporting Program as below:

Purpose:

- a) To establish a system for City of Lodi employees to identify unsafe conditions or hazards at work and report them to their department management without fear of reprisal. However, disciplinary action could result if the condition reported reveals the employee willfully participated in or conducted an illegal act, gross negligence or deliberate or willful disregard of regulations or procedures, including reporting to work under the influence of controlled substances, physical assault of a coworker or passenger, theft of agency property, unreported safety events, unreported collisions, and unreported passenger injuries or fatalities.
- b) To provide guidelines for facilitating the timely correction of unsafe conditions or hazards by City of Lodi management.

Description:

- a) This program provides a method for City of Lodi management to identify, evaluate, and correct or avoid unsafe conditions or hazards, procedural deficiencies, design

inadequacies, equipment failures, or near misses that adversely affect the safety of employees.

Examples of voluntary safety reports may include, but are not limited to:

- Safety hazards in the operating environment (for example, county or city road conditions),
- Health hazards in the operating environment, especially with regards to the spread of infectious diseases (for example, lack of adequate personal protection equipment),
- Policies and procedures that are not working as intended (for example, insufficient time to complete pre-trip inspection),
- Events that senior managers might not otherwise know about (for example, near misses), and
- Information about why a safety event occurred (for example, radio communication challenges).
 - a) The program also involves recommending corrective actions and resolutions of identified unsafe conditions or hazards and/or near miss.
 - b) All employees have the obligation to report immediately any unsafe conditions or hazards and near miss to their immediate supervisor /department manager and may do so without fear of reprisal.
 - c) Unsafe conditions or hazards may also be identified as a result of occupational injury or illness investigations and/or by accident investigation.
 - d) Other means by which hazards may be identified are inspections/audits or observations made by the supervisors/management staff as referenced in agency's Safety Inspection Program.
 - e) Findings will be published immediately following mitigation actions. If employee identification is available, direct feedback regarding mitigation will be provided.

Non-Punitive Reporting Policy

City of Lodi committed to the safest transit operating standards practicable. To achieve this, it is imperative that City of Lodi have uninhibited reporting of all safety events that may compromise safe operations. To this end, every employee is responsible for the communication of any information that may affect the integrity of transit safety. Such communication must be completely free of any form of reprisal.

City of Lodi will not take disciplinary action against any employee who discloses a safety event. This policy shall not apply to information received by City of Lodi from a source other than the employee, or that involves an illegal act, or a deliberate or willful disregard of rules, regulations, or agency policies or procedures.

City of Lodi's method of collection, recording, and disseminating information obtained from transit safety reports has been developed to protect, to the extent permissible by law, the identity of any employee who provides transit safety information.

SMP/S Authorities, Accountabilities, and Responsibilities

This Plan has assigned specific SMS authorities, accountabilities, and responsibilities to the designated Accountable Executive; Chief Safety Officer; Agency's Leadership/Executive Management; and Key Staff/Employees as described below:

Accountable Executive

City of Lodi's Accountable Executive is the Public Works Director. The Public Works Director is accountable for ensuring that the Agency's SMS is effectively implemented throughout the Agency's public transportation system. The Public Works Director is accountable for ensuring action is taken, as necessary, to address substandard performance in the Agency's SMS. The Public Works Director may delegate specific responsibilities, but the ultimate accountability for the City of Lodi's safety performance cannot be delegated and always rests with the Public Works Director. The Public Works Director is accountable for ensuring that the Agency's SMS is effectively implemented, and that action is taken, as necessary, to address substandard performance in the Agency's SMS. The Accountable Executive may delegate specific responsibilities, but not accountability for City of Lodi's safety performance.

The Public Works Director roles include, but are not limited to:

- Decision-making about resources (e.g. people and funds) to support asset management, SMS activities, and capital investments;
- Signing SMS implementation planning documents;
- Endorsing SMS implementation team membership; and
- Ensuring safety concerns are considered and addressed in the agency's ongoing budget planning process.
- Ensuring transparency in safety priorities: for the Board of Directors and for the employees.
- Establishing guidance on the level of safety risk acceptable to the agency.
- Assuring safety policy is appropriately communicated throughout the agency.
- Other duties as assigned/necessary.

Chief Safety Officer

The Chief Safety Officer has the authority and responsibility for day-to-day implementation and operation of the City of Lodi's SMS.

Chief Safety Officer's Roles include:

- Decision-making about resources (e.g., people and funds) to support asset management, SMS activities, and capital investments;

- Overseeing the safety risk management program by facilitating hazard identification, safety risk assessment, and the development and implementation of safety risk mitigations.
- Monitoring safety risk mitigation activities;
- Providing periodic reports on safety performance;
- Briefing the Accountable Executive and Lodi City Council on SMS implementation progress;
- Planning safety management training; and
- Developing and organizing annual audits/reviews of SMS processes and the Agency Safety Plan to ensure compliance with 49 CFR Part 673 requirements.
- Maintaining safety documentation.
- Other duties as assigned/necessary.

Key Staff and Frontline Employee Responsibilities

Key Staff for the City of Lodi's Safety Management System (SMS) includes the PTASP Safety Manager, Contract General Manager, Contract Safety & Training Manager, Fleet Superintendent, Facilities Supervisor, and frontline employees, such as transit vehicle operators, maintenance staff, and other personnel directly involved in transit operations.

Their responsibilities include:

- Implementing the SMS daily within their departments and throughout the organization.
- Communicating safety accountability from frontline employees up to the Accountable Executive.
- Ensuring employees follow working rules, safety procedures, and regulations relevant to their roles.
- Overseeing the safety reporting program, ensuring unsafe conditions and hazards are reported and addressed promptly.
- Providing and maintaining training, certification, and refresher programs, including de-escalation and job-specific safety training.
- Monitoring and promoting passenger, employee, and public safety in all operations.
- Responding to customer complaints and service expectations regarding safety, frequency, and reliability.
- Maintaining and replacing aging facilities, equipment, and infrastructure as needed to ensure safety.
- Collecting, analyzing, and maintaining safety performance data to identify trends, assess risk, and support safety performance targets.
- Participating in hazard identification, risk assessment, and mitigation processes to reduce safety risks.

- Establishing and maintaining clear lines of safety communication and accountability throughout the organization.
- Supporting the continuous improvement of the SMS through feedback, audits, and adherence to federal requirements (49 CFR Part 673).

5 – (2) SAFETY RISK MANAGEMENT (SRM)

The second component of the City of Lodi’s SMS is Safety Risk Management, which includes processes and procedures to provide an understanding of the Agency’s operations and vehicle maintenance to allow individuals to identify hazards associated with those activities.

City of Lodi has implemented a Safety Risk Management process for all elements of its transportation system. The Safety Risk Management process includes the following activities:

- Safety hazard identification
- Safety risk assessment, and
- Safety risk mitigation.

Safety Hazard Identification

Hazard identification is the first step in the Safety Risk Management process and a key component. It involves these fundamental safety-related activities: Identifying safety hazards and their consequences; assessing the risks associated with the consequences of the hazards; and developing mitigations to reduce the potential consequences of the identified hazards.

The following is City of Lodi’s methods and processes to identify hazards. The Agency considers, as a source for hazard identification, data and information provided by an oversight authority and the FTA. Hazards are identified through a variety of sources, including:

- Employee safety reporting,
- Review of vehicle camera footage,
- Review of monthly performance data and safety performance targets,
- Observations from supervisors,
- Maintenance reports,
- Comments from customers, passengers, and third parties,
- Safety committee, driver and all-staff meetings,
- Results of audits and inspections of vehicles and facilities,
- Results of training assessments
- Investigations into safety events, incidents and occurrences, and
- Information from FTA and oversight authorities.
- Public health information from public health agencies, such as the CDC.

When a hazard has been identified, whatever the source, it is reported to the City of Lodi Chief Safety Officer, who enters it into the Hazard Log. The Chief Safety Officer also may enter hazards into this log based on reviews of operations and maintenance activities and procedures.

The Chief Safety Officer will investigate hazards to collect information and determine if hazards need to be entered into the safety risk assessment process. In following up on identified hazards, the Chief Safety Officer may:

- Reach out to the reporting party, if available, to gather all known information about the reported hazard,
- Conduct a walkthrough of the affected area, assessing the possible hazardous condition, generating visual documentation (photographs and/or video), and taking any measurements deemed necessary,
- Conduct interviews with employees in the area to gather potentially relevant information on the reported hazard,
- Review any documentation associated with the hazard (records, reports, procedures, inspections, technical documents, etc.),
- Contact other departments that may have association with or technical knowledge relevant to the reported hazard,
- Review any past reported hazards of a similar nature, and
- Evaluate tasks and/or processes associated with the reported hazard.

City of Lodi's Chief Safety Officer will then prepare an agenda to discuss identified hazards and consequences with the Safety Committee during monthly meetings. This agenda may include additional background on the hazards and consequences, such as the results of trend analyses, vehicle camera footage, vendor documentation, reports and observations, or information supplied by FTA or other oversight authorities.

Any identified hazard that poses an immediate risk to transit operations, the health and safety of employees or the public, or equipment must immediately be brought to the attention of the Accountable Executive and placed through the Safety Risk Management process for safety risk assessment and mitigation. Otherwise, hazards will be prioritized for further Safety Risk Management activity.

Safety Risk Assessment

Safety risk assessment defines the level or degree of the safety risk by assessing the likelihood and severity of the consequences of hazards and prioritizes hazards based on the safety risk. The Chief Safety Officer, with assistance from key staff subject matter experts, is responsible for assessing identified hazards and ratings using the safety risk matrix below. Prioritizing safety risk provides the Accountable Executive with the information needed to make decisions about resource application.

The following matrix, adopted from the TSI Participation Guide – SMS Principles for Transit, facilitates the ranking of hazards based on their probability of occurrence and severity of their outcome.

Probability Levels			
Description	Level	Specific Individual Item	Fleet Inventory
Frequent	A	Likely to occur often in the life of an item.	Continuously experienced.
Probable	B	Will occur several times in the life of an item.	Will occur frequently.
Occasional	C	Likely to occur sometime in the life of an item.	Will occur several times.
Remote	D	Unlikely, but possible to occur in the life of an item.	Unlikely, but can reasonably be expected to occur.
Improbable	E	So unlikely, it can be assumed occurrence may not be experienced in the life of an item.	Unlikely to occur, but possible.
Eliminated	F	Incapable of occurrence. This level is used when potential hazards are identified and later eliminated.	Incapable of occurrence. This level is used when potential hazards are identified and later eliminated.

The measuring goes from A to F with A being frequent or likely to occur frequently and E being improbable or expected that this event will most likely never occur. The designation F is used when potential hazards are identified and later eliminated.

Severity Levels		
Description	Level	Mishap Result Criteria
Catastrophic	1	Could Result in one or more of the following: death, permanent total disability, irreversible significant environmental impact, or monetary loss equal to or exceeding \$10M
Critical	2	Could result in one or more of the following: permanent partial disability, injuries or occupational illness that may result in hospitalization of at least three personnel, reversible significant environmental impact, or monetary loss equal to or exceeding \$1M but less than \$10M
Marginal	3	Could result in one or more of the following: injuries or occupational illness resulting in one or more lost work day(s), reversible moderate environmental impact, or monetary loss equal to or exceeding \$100k but less than \$1M
Negligible	4	Could result in one or more of the following: injuries or occupational illness not resulting in lost work day, minimum environmental impact. Or monetary loss less than \$100k.

The Safety Risk Severity Table presents a typical safety risk. It includes four categories to denote the level of severity of the occurrence of a consequence, the meaning of each category, and the assignment of a value to each category using numbers. In this table, 1 is considered catastrophic meaning possible deaths and equipment destroyed and 4 is considered negligible or of little consequence with two levels in between.

Safety Risk Probability and Safety Risk Severity are combined into the Safety Risk Index Ranking to help prioritize safety risks according to the table below.

Safety Risk Assessment Matrix

Severity → Probability ↓	Catastrophic 1	Critical 2	Marginal 3	Negligible 4
A-Frequent	1A	2A	3A	4A
B- Probable	1B	2B	3B	4B
C-Occasional	1C	2C	3C	4C
D- Remote	1D	2D	3D	4D
E- Improbable	1E	2E	3E	4E
F- Eliminated				
Safety Risk Index Ranking				
1A, 1B, 1C, 2A, 2B	High	Unacceptable		
1D, 2C, 3A, 3B	Serious	Undesirable - With management decision required		
1E, 2D, 2E, 3C, 3D, 3E, 4A, 4B,	Medium	Acceptable - with review by management		
4C, 4D, 4E	Low	Acceptable - without review		

The Chief Safety Officer documents recommendations regarding hazard rating and mitigation options and reports this information to the Accountable Executive.

Safety Risk Mitigation

The Chief Safety Officer, assisted by Key Staff subject matter experts, reviews current safety risk mitigations and establish procedures to 1) eliminate; 2) mitigate; 3) accept specific risks. Prioritization of safety remediation measures is based on risk analysis and a course of action acceptable to City of Lodi management.

Safety risks ranked as **Unacceptable (High – Red)** must be mitigated. All mitigated risks, including those ranked as **Acceptable (Low – Green)**, undergo regular monitoring to ensure mitigation strategies remain effective.

Key strategies to minimize the types of risks that potentially exist include:

- Development and deployment of policies and procedures that address known hazards and risks,
- Discussion of other actions, strategies and procedures that might help safeguard against unknown/unforeseen risks,
- Training of drivers and other agency staff on all safety policies and procedures,
- Training of drivers and other agency staff on de-escalation techniques, conflict resolution, and methodologies for handling emergencies, with a focus on preventing assaults and reducing risk to employees and passengers; and
- Training of drivers and staff on proper and effective use of emergency equipment and communication technologies and protocol.
- Monitoring and follow-up of all reported assault incidents, including documentation in the hazard log and review of mitigation effectiveness.

Safety risk mitigations, including those addressing assaults, are tracked and updated in the Hazard Log by the Chief Safety Officer.

5 – (3) SAFETY ASSURANCE

The third component of the Agency’s SMS is Safety Assurance, which ensures the performance and effectiveness of safety risk controls established under safety risk management. Safety assurance also helps ensure that the organization meets or exceeds its safety objectives through the collection, analysis, and assessment of data regarding the organization's performance. Safety assurance includes inspection activities to support oversight and performance monitoring.

The City of Lodi monitors its operations and maintenance protocols and procedures, and any safety risk mitigations to ensure that it is implementing them as planned. Furthermore, the Agency investigates safety events and any reports of non-compliance with applicable regulations, standards, and legal authority. Finally, the Agency continually monitors information reported to it through any internal safety reporting programs, including the employee safety reporting program.

Some of the key elements of City of Lodi’s Safety Performance Monitoring and Measurement are shown below:

Safety Performance Monitoring and Measurement

As part of the Safety Assurance Process, City of Lodi:

- **Monitors the system for compliance with, and sufficiency of, the Agency’s procedures for operations and maintenance through:**
 - Safety audits,
 - Informal inspections,
 - Regular review of on-board camera footage to assess drivers and specific incidents,
 - Safety surveys,
 - Employee Safety Reporting Program (ESRP),
 - Investigation of safety occurrences,
 - Safety review prior to the launch or modification of any facet of service,
 - Daily data gathering and monitoring of data relating to the delivery of service,
 - Regular vehicle inspections and preventative maintenance, and
 - Continuous feedback loop between leadership and all levels of the agency.

- **Monitors its operations to identify any safety risk mitigations that may be ineffective, inappropriate, or were not implemented as intended through:**
 - Reviewing results from accident, incident, and occurrence investigations,
 - Monitoring employee safety reporting,
 - Reviewing results of internal safety audits and inspections, and

- Analyzing operational and safety data to identify emerging safety concerns.
- **Conducts investigations of safety events to identify causal factors:**
City of Lodi maintains documented procedures for conducting safety investigations of events (accidents, incidents, and occurrences, as defined by FTA) to find causal and contributing factors and review the existing mitigations in place at the time of the event. These procedures also reflect all traffic safety reporting and investigation requirements established by California Department of Motor Vehicles.

The Chief Safety Officer maintains all documentation of City of Lodi's investigation policies, processes, forms, checklists, activities, and results. After an incident, an investigation report is prepared and reviewed by the Chief Safety Officer, Safety Manager, and contract staff General Manager and Safety and Training manager to determine:

- If the accident was preventable or non-preventable
 - Personnel require discipline or retraining
 - The causal factor(s) indicate(s) that a safety hazard contributed to or was present during the event; and
 - If the accident appears to involve underlying organizational causal factors beyond just individual employee behavior.
- **Monitors information reported through any internal safety reporting programs:**
 - The Chief Safety Officer routinely reviews safety data captured in employee safety reports, safety meeting minutes, customer complaints, and other safety communication channels. When necessary, the Chief Safety Officer ensures that the issues and concerns are investigated or analyzed through the safety risk assessment process.
 - The Chief Safety Officer also reviews the results of internal and external reviews, including audits and assessments, with findings affecting safety performance, compliance with operations and maintenance procedures, or the effectiveness of safety risk mitigations. The Chief Safety Officer discusses relevant safety issues and concerns with the Accountable Executive and executive management and documents the results of these reviews in the Hazard Log.

In the event of a fatality, the City of Lodi complies with all FTA drug and alcohol requirements. In California, every driver involved in an accident that results in death, injury, or property damage over \$1000, effective January 1, 2017, must report the accident on a Report of Traffic Accident Occurring in California (SR 1) form to DMV. The report forms are available at www.dmv.ca.gov, by calling 1-800-777-0133, and at CHP and DMV

offices. Also, under California Vehicle Code §16002(b) the driver of a vehicle that is owned or operated by a publicly owned or operated transit system, or that is operated under contract with a publicly owned or operated transit system, and that is used to provide regularly scheduled transportation to the general public or for other official business of the system shall, within 10 days of the occurrence of the accident, report to the transit system any accident of a type otherwise required to be reported pursuant to subdivision (a) of Section 16000. The City of Lodi requires driver notification to the City of Lodi immediately and maintains records of any report filed pursuant to this paragraph.

5 – (4) SAFETY PROMOTION

The fourth component of the Agency’s SMS is Safety Promotion, which includes a combination of training and communication of safety information to employees to enhance the Agency’s safety performance. Safety Promotion sets the tone for the SMS and helps City of Lodi to establish and maintain a robust safety culture. Safety Promotion has two-components: (1) Safety Communication; and (2) Competencies and Training.

City of Lodi believes safety promotion is critical to the success of an SMS by ensuring that the entire organization fully understands and trusts its safety policies, procedures, and structure. Further, safety promotion involves establishing an organizational and workplace culture that recognizes safety as a core value, training employees in safety principles, and allowing open communications of safety issues.

Safety Communication & Safety Culture

Positive safety culture must be generated from the top. The actions, attitudes, and decisions at the policy-making level must demonstrate a genuine commitment to safety. Safety must be recognized as the responsibility of each employee, with the ultimate responsibility for safety resting with Executive Management. Employees must trust that they will have management support for decisions made in the interest of safety, while also recognizing that intentional breaches of safety will not be tolerated.

The primary goal of safety promotion at City of Lodi is to develop a positive safety culture that allows the SMS to succeed. A positive safety culture is defined as one which is:

A. An Informed Culture

- Employees understand the hazards and risks involved in their areas of operation
- Employees are provided with the necessary knowledge, training and resources
- Employees work continuously to identify and overcome threats to safety

B. A Just Culture

- Employees know and agree on what is acceptable and unacceptable behavior
- Human errors must be understood, but negligence and willful violations cannot be tolerated

C. A Reporting Culture

- Employees are encouraged to voice safety concerns and to share critical safety information without the threat of punitive action
- When safety concerns are reported, they are analyzed, and appropriate action is taken

D. A Learning Culture

- Learning is valued as a lifetime process beyond basic-skills training
- Employees are encouraged to develop and apply their own skills and knowledge to enhance safety
- Employees are updated on safety issues by management, and safety reports are fed back to staff so that everyone learns the pertinent lessons

City of Lodi communicates safety and safety performance information throughout the organization that, at a minimum, conveys information on hazards and safety risks relevant to employees' roles and responsibilities and informs employees of safety actions taken in response to reports submitted through an employee safety reporting program.

Ongoing safety communication is critical and City of Lodi ensures communication occurs up, down, and across all levels of the organization. Any lessons learned are communicated to all concerned. Management commitment to address safety concerns and hazards is communicated on a regular basis. Management encourages and motivates employees to communicate openly, authentically, and without concern for reprisal; ensures employees are aware of SMS principles and understand their safety-related roles and responsibilities; conveys safety critical information such as accident data, injuries, and reported safety concerns and hazards and their resolutions to employees. City of Lodi's tools to support safety communication include:

- Safety bulletins
- Safety notices
- Posters
- CDs or Thumb drives or online safety video access
- Newsletters
- Briefings or Toolbox talks
- Seminars and workshops
- New employee training and refresher training
- Intranet or social media
- Safety Committee Meetings

Safety promotion activities and processes include the following:

- Monthly Transit Operations Contractor Safety meetings and postings for drivers
- California Transit Indemnity Pool (CalTIP) field service days

Competencies & Training

Executive Management ensures that all employees attend the training provided to understand their specific roles and responsibilities for the implementation of SMS. City of Lodi provides SMS training in the following areas:

All Employees:

- Understanding of Safety Performance Targets
- Understanding of fundamental principles of SMS
- Understanding of Safety Reporting Program – Reporting unsafe conditions and hazards/near misses
- Understanding of their individual roles and responsibilities under SMS

Managers and Supervisors

- Understanding of Safety Risk Management
- Understanding of Safety Assurance
- Understanding of Safety Promotion
- Understanding of their individual roles and responsibilities for SMS

Executive Management:

- Understanding of management commitment to and support of all SMS activities.

All employees are required to acquire the competencies and knowledge for the consistent application of their skills as they relate to safety performance objectives. City of Lodi dedicates resources to conduct effective safety-related skill training. The scope of the safety training is appropriate to each employee's individual safety-related job responsibilities and their role in SMS. Components of City of Lodi's skill-related training include:

- Conducting training needs analyses to ensure that the right information is being taught to the right employees using the most efficient training methods.
- Communicating purpose, objectives, and outcome.
- Ensuring relevant content by directly linking training to the trainee's job experiences so trainees are more motivated to learn.
- Using active hands-on demonstrations and practice to demonstrate skills that are being taught and provide opportunities for trainees to practice skills.
- Providing regular feedback during hands-on practice and exercises.

- Reinforcing training concepts in the post-training work environment by giving employees opportunities to perform what they've learned.

City of Lodi's comprehensive safety training program applies to all City of Lodi employees and contract staff directly responsible for safety, including:

- Bus vehicle operators,
- Dispatchers,
- Maintenance technicians,
- Managers and supervisors,
- Agency Leadership and Executive Management,
- Chief Safety Officer, and
- Accountable Executive

City of Lodi dedicates resources to conduct a comprehensive safety training program, as well as training on SMS roles and responsibilities. The scope of the safety training, including annual refresher training, is appropriate to each employee's individual safety-related job responsibilities and their role in the SMS.

Basic training requirements for City of Lodi employees, including frequencies and refresher training, are documented in City of Lodi's Safety Training Matrix and the City of Lodi Employee Handbook. Operations safety-related skill training includes the following:

- New-hire bus vehicle operator classroom and hands-on skill training,
- Bus vehicle operator refresher training,
- Bus vehicle operator retraining (recertification or return to work),
- Classroom and on-the-job training for dispatchers,
- Classroom and on-the-job training for operations supervisors and managers, and
- Accident investigation training for operations supervisors and managers. Vehicle maintenance safety-related skill training includes the following:
 - Ongoing vehicle maintenance technician skill training,
 - Ongoing skill training for vehicle maintenance supervisors,
 - Accident investigation training for vehicle maintenance supervisors,
 - Ongoing hazardous material training for vehicle maintenance technicians and supervisors, and,
 - Training provided by vendors.
- City of Lodi's Accountable Executive and Agency Leadership and Executive Management team must complete FTA's SMS Awareness online training.
- City of Lodi conducts refresher training **quarterly** during employee safety meetings.

6. DOCUMENTATION

Pursuant to 49 CFR Part 673.31, City of Lodi maintains records related to this Safety Plan and Safety Management System (SMS) implementation for a minimum of three years. These documents include but are not limited to:

- The implementation of the SMS
- The programs, policies and procedures used to carry out this Agency Safety Plan
- The results from SMS processes and activities

City of Lodi will make these documents available to FTA Region 9, Caltrans, and other Federal and state agencies upon request.

7. APPENDICES

Appendix A: Staff Safety Roles Organizational Chart

Appendix B: Safety Performance Measures – Totals and Rates per 100,000 VRM

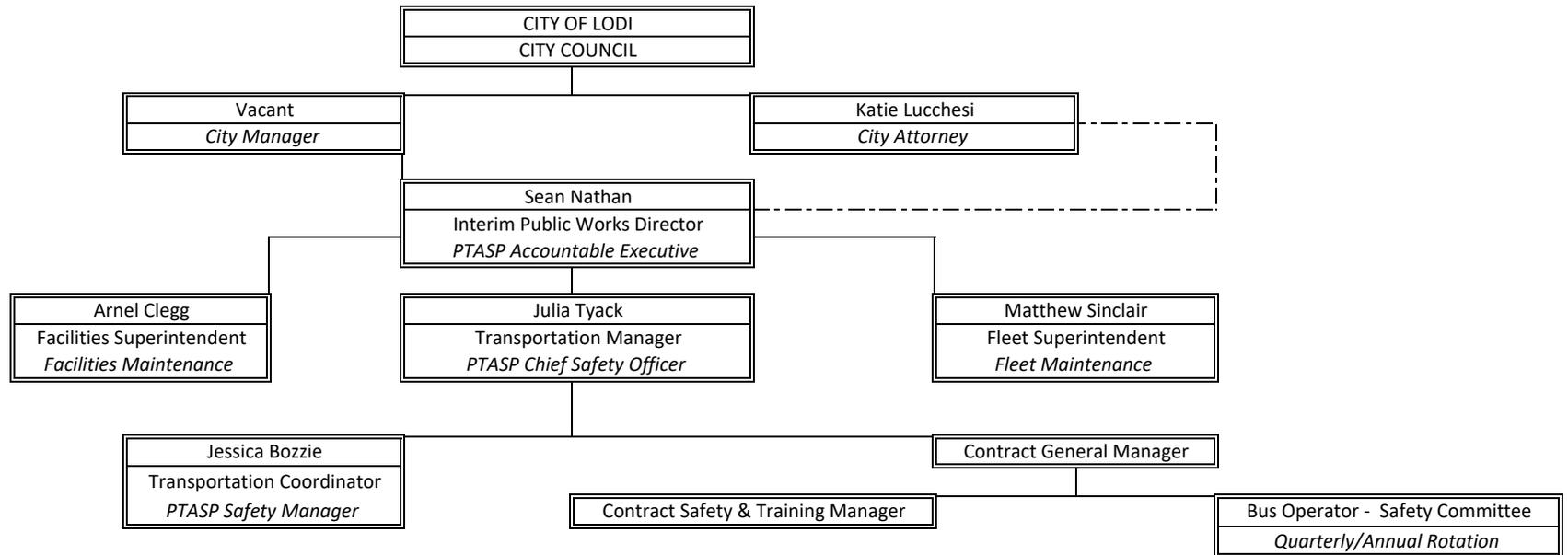
Appendix C: Documentation of City Council PTASP Approval

Appendix D: Record of Revisions

APPENDIX A

Appendix A – Safety Roles in Organizational Chart

**CITY OF LODI
PTASP PROGRAM**



Appendix B: Safety Performance Measures – Totals and Rates per 100,000 VRM

		July 2022 - June 2025																	
Mode of Transit Service	Vehicle Revenue Miles VRM	MAJOR EVENTS						FATALITIES			INJURIES				ASSAULTS		SYSTEM RELIABILITY		
		1a: Major Events	1b: Major Event Rate	1.1: Collision Rate (NEW)		1.1.1: Pedestrian Collision Rate (NEW)		1.1.1: Vehicular Collision Rate (NEW)	2a: Fatalities	2b: Fatality Rate	2.1: Transit Worker Fatality Rate (NEW)	3a: Injuries	3b: Injury Rate	3.1: Transit Worker Injury Rate (NEW)		4a: Assaults on Transit Workers (NEW)	4b: Rate of Assaults on Transit Workers (NEW)	5: System Reliability	
		Total # of Reportable Events	Rate per 100K VRM	Total # of Reportable Collisions	Rate per 100K VRM	Total# of Reportable Pedestrian Collisions	Rate per 100K VRM	Rate per 100k VRM (Same as 1.1: Collision Rate)	Total # of Reportable Fatalities	Rate per 100K VRM	Rate per 100k VRM	Total # of Reportable Injuries	Rate per 100K VRM	Total # of worker Injuries	Rate per 100K VRM	Total # of Reportable Assaults on Transit Workers	Rate per 100K VRM	Total # of Major mechanic failures	Avg. distance between major mechanical failures
Fixed Route Bus Mode (MB)	776,297	1.00	0.13	1.00	0.13	0.00	0.00	0.13	0.00	0.00	0.00	0.00	0.00	2.00	0.26	2.00	0.26	39.00	19,905.05
Demand Response/ADA Paratransit Mode (DR)	162,568	1.00	0.62	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1.00	0.62	1.00	0.62	0.00	0.00	2.00	81,284.00

Table Updated December 2025

Appendix C –
Documentation of City Council PTASP 2020 Approval

RESOLUTION NO. 2020-130

A RESOLUTION OF THE LODI CITY COUNCIL APPROVING
CITY OF LODI PUBLIC TRANSPORTATION AGENCY SAFETY
PLAN AND AUTHORIZING PUBLIC WORKS DIRECTOR TO
EXECUTE PUBLIC TRANSPORTATION AGENCY SAFETY PLAN

=====

WHEREAS, the City of Lodi's Public Transportation Agency Safety Plan (PTASP) is a requirement for Federal Transit Administration (FTA) funding and was developed in accordance with FTA's final rule for PTASPs, 49 CFR Part 637, as authorized by the Moving Ahead for Progress in the 21st Century Act (MAP-21); and

WHEREAS, the final rule requires transit operators develop and implement a PTASP based on the Safety Management System (SMS) approach; and

WHEREAS, SMS is the formal, top-down, organization-wide approach to managing safety risk and assuring the effectiveness of a transit agency's safety risk mitigation, including systematic procedures, practices, and policies and is meant to ensure a formalized, proactive, and data-driven approach to safety risk management; and

WHEREAS, the City's Public Works Director will be identified as Lodi's PTASP Accountable Executive, responsible for carrying out the Agency Safety Plan and ensuring effective implementation of the program throughout the City's transit system and the City's Transportation Manager will be identified as Lodi's PTASP Chief Safety Officer, responsible for day-to-day implementation and operation of the City of Lodi's SMS; and

WHEREAS, staff recommends approving City of Lodi Public Transportation Agency Safety Plan and authorizing Public Works Director to execute Public Transportation Agency Safety Plan.

NOW, THEREFORE, BE IT RESOLVED that the Lodi City Council does hereby approve City of Lodi Public Transportation Agency Safety Plan and authorizes the Public Works Director to execute Public Transportation Agency Safety Plan; and

BE IT FURTHER RESOLVED, pursuant to Section 6.3q of the City Council Protocol Manual (Res. No. 2019-223), the City Attorney is hereby authorized to make minor revisions to the above-referenced document(s) that do not alter the compensation or term, and to make clerical corrections as necessary.

Dated: June 17, 2020

=====

I hereby certify that Resolution No. 2020-130 was passed and adopted by the City Council of the City of Lodi in a regular meeting held June 17, 2020, by the following vote:

AYES: COUNCIL MEMBERS – Chandler, Mounce, Nakanishi, and Mayor Kuehne
NOES: COUNCIL MEMBERS – None
ABSENT: COUNCIL MEMBERS – None
ABSTAIN: COUNCIL MEMBERS – None


PAMELA M. FARRIS
Assistant City Clerk

Appendix C –
Documentation of City Council PTASP 2023 Approval

RESOLUTION NO. 2023-285

A RESOLUTION OF THE LODI CITY COUNCIL APPROVING
2023 CITY OF LODI PUBLIC TRANSPORTATION AGENCY
SAFETY PLAN UPDATE

=====

WHEREAS, the City of Lodi’s Public Transportation Agency Safety Plan (PTASP) is a requirement for Federal Transit Administration (FTA) funding and was developed in accordance with FTA’s final rule for PTASPs, 49 CFR Part 637, as authorized by the Moving Ahead for Progress in the 21st Century Act (MAP-21); and

WHEREAS, the Lodi City Council approved the City of Lodi Public Transportation Agency Safety Plan and authorized the Public Works Director to execute Public Transportation Agency Safety Plan (Resolution No. 2020-130); and

WHEREAS, to remain compliant with FTA’s PTASP program requirements, the City of Lodi is updating its plan to reflect new Safety Performance Targets and updates to SMS procedures; and

WHEREAS, staff recommends that the City Council approve the updated City of Lodi Public Transportation Agency Safety Plan.

NOW, THEREFORE, BE IT RESOLVED that the Lodi City Council does hereby approve the updated City of Lodi Public Transportation Agency Safety Plan and authorizes the Public Works Director to execute the Public Transportation Agency Safety Plan; and

BE IT FURTHER RESOLVED, pursuant to Section 6.3q of the City Council Protocol Manual (Res. No. 2019-223), the City Attorney is hereby authorized to make minor revisions to the above-referenced document(s) that do not alter the compensation or term, and to make clerical corrections as necessary.

DATED: December 20, 2023

=====

I hereby certify that Resolution No. 2023-285 was passed and adopted by the City Council of the City of Lodi in a regular meeting held December 20, 2023, by the following vote:

- AYES: COUNCIL MEMBERS – Bregman, Hothi, Nakanishi, Yopez, and Mayor Craig
- NOES: COUNCIL MEMBERS – None
- ABSENT: COUNCIL MEMBERS – None
- ABSTAIN: COUNCIL MEMBERS – None


OLIVIA NASHED
City Clerk

Appendix C -
Documentation of City Council PTASP 2024 Approval

RESOLUTION NO. 2024-183

A RESOLUTION OF THE LODI CITY COUNCIL APPROVING 2024 CITY OF
LODI PUBLIC TRANSPORTATION AGENCY SAFETY PLAN UPDATE

=====

WHEREAS, the City of Lodi's Public Transportation Agency Safety Plan (PTASP) is a requirement for Federal Transit Administration (FTA) funding and was developed in accordance with FTA's final rule for PTASPs, 49 CFR Part 637, as authorized by the Moving Ahead for Progress in the 21st Century Act (MAP-21); and

WHEREAS, the Lodi City Council approved the City of Lodi Public Transportation Agency Safety Plan and authorized the Public Works Director to execute Public Transportation Agency Safety Plan (Res. No. 2020-130); and

WHEREAS, to remain compliant with FTA's PTASP program requirements, the City of Lodi is updating its plan to reflect new Safety Performance Targets; and

WHEREAS, staff recommends that the City Council approve the updated City of Lodi Public Transportation Agency Safety Plan.

NOW, THEREFORE, BE IT RESOLVED that the Lodi City Council does hereby approve updated City of Lodi Public Transportation Agency Safety Plan and authorizes the Public Works Director to execute Public Transportation Agency Safety Plan.

Dated: November 6, 2024

=====

I hereby certify that Resolution No. 2024-183 was passed and adopted by the City Council of the City of Lodi in a regular meeting held November 6, 2024, by the following vote:

AYES: COUNCIL MEMBERS – Bregman, Hothi, Nakanishi, and Mayor Craig

NOES: COUNCIL MEMBERS – None

ABSENT: COUNCIL MEMBERS – Yopez

ABSTAIN: COUNCIL MEMBERS – None



OLIVIA NASHED
City Clerk

2024-183

APPENDIX D

RECORD OF REVISIONS

Revision Number and Updates <i>Complete history of successive versions of this plan</i>			
Revision No.	Section/Pages Affected	Details	Date Issued
1.	Pg. 5, 10 & 11; App. A	Revised plan review and update language; Revised 'major mechanical failure' SPTs; Revised organizational chart with new employees	9/20/2021
2.	Pg. 3, 10 & 11; App. A	Updated Chief Safety Officer due to staffing change; Revised Safety Performance Targets (SPTs); Revised organizational chart with new employees	8/8/2022
3.	Pg. 4-6, 8, 9-11, 13-14, 18, App. A, App. B, App. C	<ol style="list-style-type: none"> 1. Under section "3. DEFINITIONS AND ACRONYMS," added: "CDC – Center for Disease Control and Prevention" 2. Under section "4. Safety Performance Targets (SPTs)," added: <ul style="list-style-type: none"> • Key safety performance goal pertaining to the minimization of exposure to infectious disease. • Outlined several ongoing strategies that were implemented/developed via the PTASP Safety Management System, that contributes to minimizing exposure to infectious disease. • Updated Safety Performance Targets (SPTs) 3. Section "5 – (1) Safety Management Policy:" <ul style="list-style-type: none"> • Added compliance to best-practice safety recommendations of State or Federal Agencies, especially when considering exposure or spread of infectious disease. • When describing voluntary safety reports, added health hazards with regards to infectious disease. 4. Section "5 – (2) Safety Risk Management": <ul style="list-style-type: none"> • City added public health agencies (e.g. CDC) as a source of safety hazard information. 5. Organizational Chart: <ul style="list-style-type: none"> • Updated new City Manager, City Attorney, and Fleet Superintendent. Updated job titles. 	10/30/2023 & 12/20/2023 (Council Approval)
4.	Pg. 9-12	<ol style="list-style-type: none"> 1. Under Section 4. "Safety Performance Targets (SPTs):" <ul style="list-style-type: none"> • Updated reference to the 2024 NTD Safety & Security Policy Manual (previously 2023 edition). • Clarified exclusion criteria for reportable fatalities in Section 4, "Safety Performance Targets (SPTs)." • Clarified exclusion criteria for reportable injuries and added a table for near-threshold injuries during the analysis period. • Clarified and expanded criteria for reportable safety events, including exclusions. Added a table of safety event occurrences during analysis period. 	10/2/2024 & 11/6/2024 (COUNCIL APPROVAL)

APPENDIX D

		<ul style="list-style-type: none"> • Updated Safety Performance Targets (SPTs) with FY23-24 data. • Added subsection on Location of Occurrence, clarifying criteria for reportable events based on location. <p>2. Organizational Chart:</p> <ul style="list-style-type: none"> • Updated new City Manager and job titles. 	
5.	Pg. 3, 8-14, 19, Appen. A, Appen. B, Appen. C	<p>Appendices & Terminology</p> <ul style="list-style-type: none"> • Appendix A – Staff Safety Roles Organizational Chart: Updated to reflect current key personnel and job titles, including the City Manager, PTASP Accountable Executive, and PTASP Safety Manager, with corresponding updates throughout the document. • Appendix B – Safety Performance Measures: Added to encompass all data; table removed from body of document. • Appendix C – Added documentation of Plan approval from the November 2024 City Council resolution. • Terminology: Changed “safety event” to “major event” throughout the document. <p>Section 3 – Definitions & Acronyms</p> <ul style="list-style-type: none"> • Added definitions to address new measures and PTASP requirements. <p>Section 4 – Safety Performance Measures and Annual Targets</p> <ul style="list-style-type: none"> • New Measures: Added reporting, definitions, and targets for the following: <ul style="list-style-type: none"> ○ Collision Rate ○ Pedestrian Collision Rate ○ Vehicular Collision Rate ○ Transit Worker Fatality Rate ○ Transit Worker Injury Rate ○ Assaults on Transit Workers ○ Rate of Assaults on Transit Workers • Reportable Major Events: <ul style="list-style-type: none"> ○ Revised Definition: Updated the major events definition to include fires and other relevant incidents, simplifying the section for easier readability. ○ Cross-References: Linked two major event incident details to the corresponding Collision and Injury subsections for clarity. • Location of Occurrence: Removed “rail yard” from locations and added a subsection excluding bus stops or shelters from “transit-owned” property. • Minimizing Exposure to Infectious Disease: Revised to address overall prevention, rather than COVID-19-specific measures. • De-Escalation Training: Added a new section addressing training requirements for staff. <p>Section 5 – Safety Management System (SMS)</p> <ul style="list-style-type: none"> • Key Staff Section: Revised to explicitly include frontline employee roles and responsibilities. • Safety Risk Mitigation: Updated to include measures addressing assaults and de-escalation techniques. 	December 2025

Accountable Executive Signature

Date

RESOLUTION NO. 2026-_____

A RESOLUTION OF THE LODI CITY COUNCIL APPROVING 2025 CITY OF
LODI PUBLIC TRANSPORTATION AGENCY SAFETY PLAN UPDATE

=====

WHEREAS, the City of Lodi’s Public Transportation Agency Safety Plan (PTASP) is a requirement for Federal Transit Administration (FTA) funding and was developed in accordance with FTA’s final rule for PTASPs, 49 CFR Part 637, as authorized by the Moving Ahead for Progress in the 21st Century Act (MAP-21); and

WHEREAS, the Lodi City Council previously approved the City of Lodi Public Transportation Agency Safety Plan and authorized the Public Works Director to execute the plan (Res. No. 2020-130); and

WHEREAS, to remain compliant with FTA PTASP requirements, the City of Lodi has updated the Plan to incorporate new requirements, Safety Performance Measures and Targets, and updated operating data; and

WHEREAS, Staff recommends that the City Council approve the updated City of Lodi Public Transportation Agency Safety Plan.

NOW, THEREFORE, BE IT RESOLVED that the Lodi City Council does hereby approve the updated City of Lodi Public Transportation Agency Safety Plan and authorizes the Public Works Director to execute the updated Public Transportation Agency Safety Plan on behalf of the City; and

BE IT FURTHER RESOLVED, pursuant to Section 6.3q of the City Council Protocol Manual (adopted 11/6/19, Resolution No. 2019-223), the City Attorney is hereby authorized to make minor revisions to the above-referenced document(s) that do not alter the compensation or term, and to make clerical corrections as necessary.

Dated: February 4, 2026

=====

I hereby certify that Resolution No. 2026-_____ was passed and adopted by the City Council of the City of Lodi in a regular meeting held February 4, 2026, by the following votes:

AYES: COUNCIL MEMBERS –

NOES: COUNCIL MEMBERS –

ABSENT: COUNCIL MEMBERS –

ABSTAIN: COUNCIL MEMBERS –

OLIVIA NASHED
City Clerk

2026-_____



COUNCIL COMMUNICATION

AGENDA TITLE:

Approve Specifications and Authorize Advertisement for Bids for Rental and Cleaning of Uniforms for Certain Field and Warehouse Employees (PW)

MEETING DATE:

February 4, 2026

PREPARED BY:

Interim Public Works Director

RECOMMENDED ACTION:

Approve specifications and authorize advertisement for bids for rental and cleaning of uniforms for certain field and warehouse employees.

BACKGROUND INFORMATION:

A uniform service has been used for the rental and cleaning of uniforms for certain field and warehouse employees since 1992. The current contract was awarded in 2021 and all extensions included in the contract have been exhausted. The current contract expires on June 30, 2026.

The new contract will again include uniforms for Facilities Services, Fleet Services, Streets, Water/Wastewater, Parks division employees and for certain staff at the Surface Water Treatment Plant, White Slough Water Pollution Control Facility, and Community Center, as provided in the memorandums of understanding. Rags, towels, and floor mats used in the various shops and buildings will also be part of this contract.

The specifications are on file in the Public Works Department. The planned bid opening date is March 4, 2026.

STRATEGIC VISION:

3A. Fiscal Health: Promote City's transparency & fiscal fluency.

FISCAL IMPACT:

The uniform service contract is an annual budgeted expense.

FUNDING AVAILABLE:

Contract will be budgeted and paid out of the various department's operating accounts (10051000, 65055000, 30156001, 53053001, 53053003, 56052001, 56052005, 20072300, 20073001, 20072202, 20072203, 20071402).



COUNCIL COMMUNICATION

AGENDA TITLE:

Consider Adopting a Resolution Approving the Allocation of Public Benefit Funds of \$15,870 from District 1 Non-Profit Funds to Lodi Sister City Committee (Total \$15,870) (CLK)

MEETING DATE:

February 4, 2026

PREPARED BY:

Olivia Nashed, City Clerk

RECOMMENDED ACTION:

Consider adopting a resolution approving the allocation of public benefit funds of \$15,870 from District 1 Non-Profit Funds to Lodi Sister City Committee.

BACKGROUND INFORMATION:

On June 4, 2025, as part of the Fiscal Year ("FY") 2025-2026 annual budget, the City Council voted to add \$100,000 to the City Council budget. These funds are evenly distributed among the five Council Members, giving each member \$20,000 to support non-profits that benefit the Lodi community.

On July 2, 2025, the City Council adopted Resolution No. 2025-120, approving the Non-Profit Fund Policy as shown in Attachment 1("Policy"). The Policy outlines the process and guidelines for submitting Proposal Letters from non-profit organizations, review and recommendations of allocations and final approval by Council Members and the full City Council.

The Lodi Sister City Committee has submitted a Proposal Letter (Attachment 2), which has been reviewed by the City Clerk and found in compliance with the guidelines set within the Policy. Council Member Nakanishi has reviewed the merits and needs of the proposed projects or activities and desires to donate \$15,870 to Lodi Sister City Committee from the District 1 Non-Profit Funds.

LODI SISTER CITY COMMITTEE

The Lodi Sister City Committee ("Committee") was established in 1961. The Lodi Sister City Committee is a non-profit, all volunteer civic organization affiliated with Sister Cities International and the City of Lodi. A vital part of the Lodi community since 1961, the Committee spent more than 69 years building global friendships and fostering cross-cultural understanding, specifically with Lodi, California's sister cities - Kofu, Japan and Lodi, Italy.

Council Member Nakanishi requests that Council adopt a resolution approving the allocation of public benefit funds of \$15,870 from District 1 Non-Profit Funds to the Lodi Sister City Committee.

STRATEGIC VISION:

8B. Public Well-Being: Partner with other entities to provide outreach, education and activities to engage diverse cultures and communities.

COUNCIL COMMUNICATION

FISCAL IMPACT:

There is a fiscal impact of \$15,870 to the City Council Non-Profit Fund for District 1.

FUNDING AVAILABLE:

Council Non-Profit Fund District 1 - 10005001.72611

RESOLUTION NO. 2025-120

A RESOLUTION OF THE LODI CITY COUNCIL ADOPTING A POLICY FOR ALLOCATION OF FUNDS FROM THE COUNCIL NON-PROFIT FUND

WHEREAS, the City Council recognizes the significant contributions made by non-profit organizations, and expressed a desire to establish a Council discretionary fund to support non-profit projects benefitting the City of Lodi and its residents; and

WHEREAS, at the June 4, 2025, Regular Council meeting, as part of the Fiscal Year ("FY") 2025-2026 annual budget, the City Council voted to added \$100,000 to the City Council budget, to be distributed evenly across the five Council Districts (\$20,000 per District); and

WHEREAS, the intent of such funds is to establish a City Council Non-Profit Fund ("Non-Profit Fund"), that allows each City Councilmember to allocate their designated funds to qualifying non-profits that address unmet needs and benefit the Lodi community; and

WHEREAS, the City Council directed staff to draft a policy for Council consideration on the Non-Profit Fund and staff has prepared the attached proposed Council Non-Profit Fund Policy to establish guidelines for the use for these funds and to provide a uniform structure for the submission of requests and allocation of funding awards from the Council Non-Profit Fund.

NOW, THEREFORE, BE IT RESOLVED that the Lodi City Council does hereby approve and adopt the Council Non-Profit Fund Policy, attached heretofore as Exhibit A to this Resolution.

Dated: July 2, 2025

I hereby certify that Resolution No. 2025-120 was passed and adopted by the City Council of the City of Lodi in a regular meeting held July 2, 2025, by the following votes:

- AYES: COUNCIL MEMBERS – Craig-Hensley, Hothi, Nakanishi and Mayor Bregman
- NOES: COUNCIL MEMBERS – None
- ABSENT: COUNCIL MEMBERS – Yepez
- ABSTAIN: COUNCIL MEMBERS – None


 for OLIVIA NASHED
 City Clerk



City Council Non-Profit Fund Policy

Adopted July 2, 2025

Resolution 2025-120

I. PURPOSE

To provide a uniform structure for the submission of requests and allocation of the Council Non-Profit Fund (“Non-Profit Fund”) to local non-profits, and to establish guidelines for the for the authorized use of these funds.

II. POLICIES REGARDING NON-PROFIT FUNDS:

1. The City Manager, as part of the proposed budget each year, may allocate up to \$20,000 for each Council District into the Non-Profit Fund. In years the City budget is not structurally balanced, there may be a reduced amount or no allocation into the Non-Profit Fund for this purpose.
2. The City Clerk will maintain and track the uses of the Non-Profit Fund by each Council District.
3. Unspent dollars in the Non-Profit Fund will not be carried forward in the following fiscal year. The City Clerk shall provide a Non-Profit Fund balance report at the beginning of third quarter of each fiscal year, to provide an opportunity for Council Members to make recommendations for allocations before the end of the fiscal year.
4. A Councilmember, upon review of the merits and needs of the proposed projects or activities, will direct the City Clerk to prepare recommendations for the Council’s review and consideration regarding the use of the Non-Profit Fund. Allocations from the Non-Profit Fund must be approved by a simple majority vote of the Council.
5. Council approval of Non-Profit allocations should be based on the following:
 - a. Funding requests must align with the City Council Strategic Vision and requests should describe how they comply with the Council’s Goals and City policies.
 - b. Non-Profit Funds can be used as start-up funds for community programs or activities benefitting the community within the City of Lodi.
 - c. The recommended projects or activities will primarily result in public benefit within the City limits.
 - d. The recommended projects or activities can have a nexus to City operated or funded programs.
 - e. Funding for projects or activities is a one-time allocation and shall not be considered ongoing funding support.
 - f. Any organization receiving funding must agree to be audited or present progress reports to Council as required by the City.

- g. Funds cannot be allocated on a retroactive basis.
 - h. Organizations receiving these funds must attest that they will not be used for political, discriminatory, or any unlawful purposes.
6. Council Members may identify projects or activities proposed to be funded by the Non-Profit Fund, to be included as part of the upcoming budget. Once identified, the City Manager will include these projects and/or activities as part of the proposed budget to be considered by the City Council during final budget hearing. If approved, these projects and/or activities will not require a separate Council review and will be implemented by appropriate City staff. Projects not approved in the annual adopted budget will require a separate Council item and be approved by a simple majority vote of the City Council.

III. LEVINE ACT AND CAMPAIGN DISCLOSURE REQUIREMENTS

The Levine Act, California Government Code Section 84308, was enacted to prevent conflicts of interest by restricting public officials from participating in decisions involving entities from which they received campaign contributions. Under the Levine Act, as may be amended from time to time, if a public official has received contributions of more than \$500, from a party involved in a decision within the previous 12 months, they must disclose the contribution and recuse themselves from participating in the decision.

Pursuant to the Levine Act, Council Members who receive campaign contributions of \$500 or more from organizations, including an organization's board members and/or officers, who are requesting funding must comply with the Levine Act.

IV. ADMINISTRATION AND REPORTING

To address the need for a uniform process and ensure compliance with City of Lodi policies and procedures, the following requirements are set forth for the submission, processing, and award of grants from the Non-Profit Fund.

1. Non-profit organizations, that wish to apply for allocations from the Non-Profit Fund, must submit a letter ("Proposal Letter") to a City Council Member or City Clerk, providing the following details:
 - Contact name, phone, and email
 - Full legal name of organization
 - Complete address of the organization
 - Description of Organization
 - Mission Statement
 - Federal Tax Status: 501(c)(3) or other
 - List of current Board members and officers, if any

- Brief description of the project/program and how it relates to the City Council's Strategic Vision and one or more of Council's Goal
 - Funding amount requested and how it relates to overall project/program financial plan
 - Objectives for the requested funding
 - Performance indicators/Measurement of success
 - Communities that will benefit from use of the requested funds
 - Any additional information relevant to the request
2. Written justification must be provided for organizations that have received Non-Profit Funds in prior years.
- Proposal Letters must include the total Non-Profit Funds received in prior years and the reason for requesting additional funding.
 - For funding requests to organizations located outside the City's limits, Proposal Letters must include explanation of local benefit.
3. The City Clerk shall agendaize an item for Council review and approval, providing all relevant information for the City Council to review the submitted non-profit Proposal Letters and make a well-informed decision regarding the allocation request(s).
4. If approved by the City Council, the successful non-profit organizations shall submit quarterly status reports to the City Clerk for the life of the project.
- As part of each quarterly financial cycle, the City Clerk will report activity of these funds to the City Council summarizing all awarded Non-Profit Funds and available balances.

These recommendations aim to enhance procedural consistency, transparency, and compliance in the administration of award from the Non-Profit Fund.



LODI SISTER CITY COMMITTEE EST. 1961

KOFU, JAPAN LODI, ITALY



December 15, 2025

Ms. Olivia Nashed, City Clerk
Office of the City Clerk
P. O. Box 3006
Lodi, CA 95241-1910

Dear Ms. Nashed:

Attached is the Sister City Committee's Proposal Letter for funding request under the City Council Non-Profit Fund for the Lodi Lake Park Peace Garden Project for your review and recommendation for allocation to the City Council.

We are delighted to submit this document under the auspices of Council Member Dr. Alan Nakanishi who requested that we submit the Proposal Letter directly to you at his request. It is Councilman's Nakanishi's wish that the Sister City Committee submit this Proposal Letter.

The City Council Non-Profit Fund represents a wonderful opportunity for the Sister City Committee to achieve its goal of reconstructing the Japanese Garden at Lodi Lake Park for the benefit of the City of Lodi residents, park visitors, and the Parks, Recreation & Cultural Services Department.

Sincerely,


Bill Hinke, President
Lodi Sister City Committee





LODI SISTER CITY COMMITTEE EST. 1961

KOFU, JAPAN LODI, ITALY



PROPOSAL LETTER CITY OF LODI CITY COUNCIL NON -PROFIT FUND

Contact name, phone, and email:

Bill Hinkle, President, 209-986-7535, bhinkle41@gmail.com

Full legal name of organization:

Lodi Sister - City Committee, Inc.

Complete address of the organization:

Lodi Sister City Committee, Office of City Clerk, 221 W. Pine Street, P. O. Box 3006, Lodi, CA 95241-1910.

Description of Organization:

The Lodi Sister City Committee was established in 1961. Although a brief school scrapbook exchange took place with Lodi, Italy in 1958 on the occasion of the Italian city's 800th year, a more active relationship with Kofu, Japan began in 1964 when Lodi representatives went to Kofu for the City's 75th Anniversary.

Since then, gifts of Tokay grapevines to Kofu; of a miniature shrine and a granite marker and cherry trees for Lodi's Kofu Park; a student art exchange with Lodi Italy; and numerous visits and letters between both cities have marked over 60 years of sister city relationships between Lodi, Italy and Kofu, Japan. The Lodi Sister City Committee meets bimonthly at the Lodi Japanese Community Hall, 210E. Elm St.

The Lodi Sister City Committee is a non-profit, all volunteer civic organization affiliated with Sister Cities International and the City of Lodi. A vital part of the Lodi community since 1961, we've spent more than 60 years building global friendships and fostering cross-cultural understanding.



ZINFANDEL CAPITAL OF THE WORLD

We leverage San Joaquin County’s diversity and resources to cultivate partnerships with two international Sister Cities. We invite residents of Lodi and surrounding communities to join us in our mission to promote connections and celebrate differences through our programs. We focus primarily on exchange programs, cultural enrichment, service projects, and sustainability initiatives such as our Annual Crab Feed. We also coordinate official visits to and from our sister cities, and when our local leaders travel abroad to strengthen our global relationships.

A sister city is a broad-based, officially approved, long-term partnership between two communities in two countries. A sister city becomes official with a signing ceremony of the top-elected officials of the two local jurisdictions, following approval by the local city councils. Sister city partnerships have the potential to carry out the widest possible diversity of activities of any international program, including every type of municipal, business, professional, educational, and cultural exchange or project.

Mission Statement:

“The Lodi Sister City Committee was established in 1961 to promote the ideals of offering exciting opportunities for involvement in international relations through exchanges of persons, products, and ideas through cultural, educational, technical, professional, municipal, youth, and sports exchanges. Lodi’s Sister Cities are Kofu, Japan and Lodi, Italy.”

Federal Tax Status: 501 (c) (3) or other:

Lodi Sister City Committee, Inc is a non-political, tax exempt 501 (c) (3) organization promoting peace through people to people diplomacy as a charitable and educational organization exempt under section 501 (c) (3) of the Internal Revenue Code in a determination letter issued in February 1968. Its Federal Employer Identification Number (FEIN) is 94-6174007.

List of current Board members and officers, if any:

1. Officers:

President, Bill Hinkle; Vice President, Julie Myrah; Recording Secretary, Michiko Oye; Treasurer, Jeanne Stoller.

2. Board Members, Honorary Members, Supporting

Organization/Business Members:

Lynn & Susanne Benbrook; Dr. Pete Hetzner; Susan Ferrero; Hugh Metcalf; Dr. Ron & Michiko Oye; Bill Hinkle; Jeanne Stoller; Yoshiko Kim; Judy Mazza; Steve & Janet Manildi; Dr. Alan & Susan Nakanishi; Kenney Okumura; Michael & Helen Spencer; David Phillips, Michael David Winery, Supporting Organization/Business; Julie Myrah, Supporting Organization/Business; Visit Lodi California , Supporting Organization/Business; Kirk Smith, Velvet Grill & Creamery, Honorary Member/ Supporting Organization/Business; Vicki Fujii, Honorary Member; Mayor, City of Lodi, ex-officio, Honorary President/Member.

Brief description of the project/program and how it relates to the City Council's Strategic Vision and one or more of Council's Goal:

1. Project/Program Description:

The Lodi Sister City Committee's community project is to rebuild or "revitalize" the Japanese Garden located at Lodi Lake Park, 1101 West Turner Road, that was removed with the construction of a rock swale pond between Lodi Lake, and the Mokelumne River. The project site is adjacent to and between the north restroom building, and the large redwood tree located on the north side of Lodi Lake Park south of the parking lot across from the Ron Williamson Youth Area.

The Committee retained a Japanese Garden landscape architect to develop a comprehensive Japanese Garden Lodi Lake Park Master Plan. The Sister City Committee chose to name the garden "**The Lodi Peace Garden that bridges Kofu, Japan with Lodi, California.**"

The project plan includes a Japanese style bridge, a 245 foot long, 4 feet wide, 4 inch deep pathway leading from the redwood tree around next to the rock swale pond over the bridge across the park to the parking lot curb next to the fire hydrant. The Peace Garden Master Plan requires 108 trees and

plants to include (12) Japanese Maples and (3) Black Pine trees; 74 rocks to include moss rock, flagstone, stepping stones, grey smooth stones, and black rock in a variety of sizes and shapes; a large etched Stonehenge rock park sign ; 2 benches; and 3 Japanese stone garden lanterns. The park’s rock swale pond is incorporated into the plan with water certain times of the year.

2. How it relates to the City Council’s Strategic Vision and one or more of Council’s goal:

The Sister City Committee’s decision to construct the Lodi Lake Peace Garden project will serve to advance the Council’s achievement of its Strategic Vision within four (4) of its eight strategic priorities, and is directly aligned with the City Council’s Strategic Vision in the following (4) four strategic priorities and related milestones:

Strategic Priorities

Milestones

#2) Economic Development: (F) Repurpose and revitalize existing assets.

#5) Infrastructure: (B) Promote adaptive reuse of existing properties.

#6) Parks: (B) Expand, develop and maintain Lodi Lake to meet or exceed industry standards.

8)Public Well-Being: (A) Increase opportunities for physical, recreational, and cultural activities.

Since the placement of the Japanese style bridge at the project site in October 2021, it has been observed that citizens of Lodi, and visitors outside of Lodi, have repeatedly used the bridge for portrait photography often taken by professional photographers. Furthermore, the bridge has become a special visual attraction.

Together, the Peace Garden project will serve to revitalize and enhance the Park Department’s rock swale pond as well as Lodi Lake Park itself; thereby, restoring the original Japanese Garden constructed at the site, by Mr. Jiro Sasaki, a Sister City Committee founder, prior to the construction of the

rock swale pond. The site will be symbolic of a Japanese style garden known as a “Stroll Style” which is walked through and appreciated from many different vantage points. It will also represent a “Courtyard Style” to include the use of vertical rocks, dry landscape constructed streams, stepping stones, bridges, trees, stone lanterns and other functional elements.

The Japanese Garden site will be designed as a low maintenance project as much as possible for the Parks Department’s maintenance crews. The Committee’s funding request will facilitate its start-up funds needed to assure the project’s successful completion as a public benefit for the City of Lodi and its residents.

Funding amount requested and how it relates to overall project/program financial plan:

1.Funding Amount Requested:

Plants/Trees & Miscellaneous Garden Items: \$14,660
California Sales Tax @8.25 % 1,210
Grand Total Non-Profit Fund Request : \$15,870

2.How It Relates to overall Project/Program Financial Plan:

The following two categories of items: Plants/Trees and Miscellaneous Garden Items, represent the funds requested and how they relate to the overall project’s financial plan:

<u>PLANTS/TREES: TYPE</u>	<u>NUMBER</u>	<u>SIZE(gal)</u>	<u>PRICE</u>	<u>COST</u>
Prunus Subhirtella “pendull”	1	15	\$125	\$ 125
Pinus Thumbergii (black pine)	3	15	350	1,050
Cycas Revoluta Sago Palm	2	15	90	180
Acer Palmgtum Dissectum	2	5	90	180
Camella Sasanqua	7	5	38	266
Azalea	18	2	24	432
Pittosporum Tobira creamdemt	18	1	12	216
Pittosporum Tenulfolum diamond	19	2	40	760
Pinus Mugo Valley Cushion	2	2	25	50
Acer Palmatum “Bloodgood”	3	15	215	645

<u>PLANTS/TREES: TYPE</u>	<u>NUMBER</u>	<u>SIZE (gal)</u>	<u>PRICE</u>	<u>COST</u>
Juniperus Procumbens "Nana"	5	1	\$30	\$ 150
Hakonechloa Macra "Aureola"	6	1	13	78
Pryopteris Erythosor "autum fern"	9	1	15	135
Acer Palmelum "greenlaceleaf"	1	15	140	140
Iris Ensata "Japanese Iris"	5	1	not available	
Acer Palmatum "Viridis" lace leaf	1	5	180	180
Acer Palmatum-Seiryu" green	5	15	275	1,375
Juniperus Chinensis bonsai	1	5	33	33
Total: Plants & Trees:	108			\$5,995

<u>MISCELLANEOUS GARDEN ITEMS</u>	<u>COST</u>
(1) Lodi Peace Garden Stonehenge Etched Rock Park Sign	\$7,000
(2) Rustic Wood Textured Concrete Bench w/metal legs	490
(1) Japanese Granite Pagoda Lantern 25"x 10"	458
(1) Japanese Granite Pagoda Lantern 18"x 14"	357
(1) Japanese Concrete Pagoda Lantern 26" x 11"	360
Total Miscellaneous Garden Items: 6	\$8,665

The Plants/Trees category represents the most significant direct cost category for expenses not withstanding the Garden Rock Engraved Sign. We have been told that the rocks, pathway, and bender board will be donated items such that they are not included in this Proposal Letter. The Miscellaneous Garden items remain as critical direct cost expense items. The Council Non-Profit Fund Request For Funds is a critical feature for the overall construction of the project and for its ultimate success.

Objectives for the requested funding:

The Lodi Sister City Committee was encouraged to submit a funding request as a 501 (c) (3) non-profit organization for the City Council Non-Profit Funds to facilitate the achievement of the Sister City Committee's Lodi Lake Peace Garden project, as well as contributing to the Lodi Parks Department's Lodi Lake Park redevelopment program.

Project objectives are to utilize the funds for the initiation, development, and replacement of the original Japanese garden with a symbolic Peace Garden as well as to “enhance” and “revitalize” the park’s rock swale pond, and Lodi Lake Park for the benefit of the citizens of the city.

Performance indicators/Measurement of success:

1. Performance Indicators:

The Sister City Committee will provide progress and expenditure reports by program category to the City Clerk on the achievements selected in the proposal in addition to the required quarterly status reports to include the activity of the funds and available balances.

It is understood and agreed that the receipt of funds from the Non-Profit Fund will require the Committee to agree to be audited or present progress reports, and or quarterly status reports for the life of the project to the City Clerk, and will attest that funds will not be used for political, discriminatory, or any unlawful purposes.

2. Measurement of success:

The Sister City Committee currently retains the Lindstrom Accountancy Corporation, 2291 W. March Lane, Stockton, California for purposes of Federal and State of California Financial Reports. It would be the intent of the Committee to utilize the services of Lindstrom Accountancy Corporation where deemed necessary for full and accurate disclosure of financial and progress reports, and to assist with related measurements necessary for the project’s successful completion.

Communities that will benefit from use of the requested funds:

Sister City programs/projects are unique in that they inherently involve three main sectors in a community: local government, business, and a wide variety of citizen volunteers.

The Sister City Committee collaborated with Mr. Steve Virrey, Parks & Properties Superintendent, Department of Parks and Recreation, with the

installation of the Japanese style bridge in 2021; with assembly of a few of the original lava rocks; with the preservation of some of the original garden artifacts; and with the development of the Committee's Master Plan for the Peace Garden. The City Parks Department will benefit in terms of the Department's Strategic Vision - Park Priorities, and the selected milestones associated with the completion of this project.

Lodi Lake Park, perhaps the most heavily visited city park within the city's park system by Lodi's citizens, will significantly benefit from the development of the Peace Garden. Many of the park's visitors who now frequently visit the park, and outside visitors to the park, have already been attracted to the Japanese Style bridge.

Mayor Yuichi Higuchi of Kofu, Japan and city staff are very excited about the Japanese Peace Garden project, and are thrilled to learn that it is now well underway. They want the Committee to keep them updated on its future development.

On September 2, 2025, the Sister City Committee representatives presented the Master Plan for the Peace Garden at the Parks and Recreation Commission's Board Meeting. The commissioners gave the Committee their approval and full support for The Lodi Peace Garden project.

The Committee has received support for the project with assurance of assistance from Friends of Lodi Lake Interest Group, and Tree Lodi indicated they would be willing to assist the Committee with planting of the trees at the Lodi Lake Peace Garden. Tree Lodi has worked with the Sister City Committee in the past with the planting of cherry trees at Kofu Park.

The Lodi Youth Commission is in the process of setting priorities for spring service projects, and events in which there is some interest for lake cleanup and/or community garden projects. The Japanese Garden project was presented at the Commission's meeting as a future service project in 2026 for their member youths.

RESOLUTION NO. 2026-_____

A RESOLUTION OF THE LODI CITY COUNCIL APPROVING THE AWARD OF PUBLIC BENEFIT FUNDS OF \$15,870 FROM THE DISTRICT 1 NON-PROFIT FUND TO THE LODI SISTER CITY COMMITTEE (TOTAL \$15,870)

=====

WHEREAS, on June 4, 2025, as part of the Fiscal Year (“FY”) 2025-2026 annual budget, the City Council voted to add \$100,000 to the City Council budget. These funds are evenly distributed among the five Councilmembers, giving each member \$20,000 to support non-profits that benefit the Lodi community; and

WHEREAS, on July 2, 2025, the City Council adopted Resolution No. 2025-120, approving the Non-Profit Fund Policy included as Attachment 1 (“Policy”). The Policy outlines the process and guidelines for submitting Proposal Letters from non-profit organizations, review and recommendations of allocations by Councilmembers, and final approval by the full City Council; and

WHEREAS, the Lodi Sister City Committee submitted a Proposal Letter as shown in Attachment 2 (“Proposal”), which has been reviewed by the City Clerk and found in compliance within the Policy guidelines; and

WHEREAS, Council Member Nakanishi reviewed the merits and needs of the Lodi Sister City Committee’s proposed projects or activities in the Proposal and desires to allocate public benefit funds to the Lodi Sister City Committee from the District 1 Non-Profit Funds, in the amount of \$15,870.

NOW, THEREFORE, BE IT RESOLVED that the Lodi City Council does hereby:

1. Find that the mission and goals of Lodi Sister City Committee complies with the Policy, Council’s strategic vision, and that the activities described in the Proposal will provide public benefit for the City of Lodi and its residents.
2. Approve the total allocation of public benefit funds of \$15,870 from District 1 Non-Profit Funds to Lodi Sister City Committee, subject to compliance with the Policy.
3. Direct the Lodi Sister City Committee to provide quarterly reports to the City Clerk on the use of the non-profit funds received as described in the Proposal, and the City Clerk shall then also share a summary of this reported activity to the City Council quarterly to ensure procedural consistency, transparency, and compliance with the Non-Profit Fund Policy.

Dated: February 4, 2026

=====

I hereby certify that Resolution No. 2026-_____ was passed and adopted by the City Council of the City of Lodi in a regular meeting held February 4, 2026, by the following votes:

AYES: COUNCIL MEMBERS –

NOES: COUNCIL MEMBERS –

ABSENT: COUNCIL MEMBERS –

ABSTAIN: COUNCIL MEMBERS –

OLIVIA NASHED
City Clerk

2026-_____



COUNCIL COMMUNICATION

AGENDA TITLE:

Consider Adopting a Resolution Approving the Allocation of Public Benefit Funds of \$4,130 from District 1 Non-Profit Funds to Lodi Boys and Girls Club (Total \$4,130) (CLK)

MEETING DATE:

February 4, 2026

PREPARED BY:

Olivia Nashed, City Clerk

RECOMMENDED ACTION:

Consider adopting a resolution approving the allocation of public benefit funds of \$4,130 from District 1 Non-Profit Funds to Lodi Boys and Girls Club.

BACKGROUND INFORMATION:

On June 4, 2025, as part of the Fiscal Year (“FY”) 2025-2026 annual budget, the City Council voted to add \$100,000 to the City Council budget. These funds are evenly distributed among the five Council Members, giving each member \$20,000 to support non-profits that benefit the Lodi community.

On July 2, 2025, the City Council adopted Resolution No. 2025-120, approving the Non-Profit Fund Policy as shown in Attachment 1(“Policy”). The Policy outlines the process and guidelines for submitting Proposal Letters from non-profit organizations, review and recommendations of allocations and final approval by Council Members and the full City Council.

The Lodi Boys and Girls Club has submitted a Proposal Letter (Attachment 2), which has been reviewed by the City Clerk and found in compliance with the guidelines set within the Policy. Council Member Nakanishi has reviewed the merits and needs of the proposed projects or activities and desires to donate \$4,130 to Lodi Boys and Girls Club from the District 1 Non-Profit Funds.

LODI BOYS AND GIRLS CLUB

The Lodi Boys & Girls Club (“Club”) has been serving youth since 1963. The Club has a bold vision that success is within the reach of every child. They believe every boy and girl deserves: a safe place to learn and grow; ongoing relationships with caring adult professionals; life-enhancing programs; character-developing experiences; and hope for their future. The Lodi Boys & Girls Club is a member of the Boys & Girls Clubs of America, which has over 4000 affiliated Clubs. The national affiliation offers input and guidance about how to best serve members.

Council Member Nakanishi requests that Council adopt a resolution approving the allocation of public benefit funds of \$4,130 from District 1 Non-Profit Funds to Lodi Boys and Girls Club.

STRATEGIC VISION:

8B. Public Well-Being: Partner with other entities to provide outreach, education and activities to engage

COUNCIL COMMUNICATION

diverse cultures and communities.

8D. Public Well-Being: Focus on youth education and mentorship to foster positive life choices.

FISCAL IMPACT:

There is a fiscal impact of \$4,130 to the City Council Non-Profit Fund for District 1.

FUNDING AVAILABLE:

Council Non-Profit Fund District 1 - 10005001.72611

RESOLUTION NO. 2025-120

A RESOLUTION OF THE LODI CITY COUNCIL ADOPTING A POLICY FOR ALLOCATION OF FUNDS FROM THE COUNCIL NON-PROFIT FUND

WHEREAS, the City Council recognizes the significant contributions made by non-profit organizations, and expressed a desire to establish a Council discretionary fund to support non-profit projects benefitting the City of Lodi and its residents; and

WHEREAS, at the June 4, 2025, Regular Council meeting, as part of the Fiscal Year ("FY") 2025-2026 annual budget, the City Council voted to added \$100,000 to the City Council budget, to be distributed evenly across the five Council Districts (\$20,000 per District); and

WHEREAS, the intent of such funds is to establish a City Council Non-Profit Fund ("Non-Profit Fund"), that allows each City Councilmember to allocate their designated funds to qualifying non-profits that address unmet needs and benefit the Lodi community; and

WHEREAS, the City Council directed staff to draft a policy for Council consideration on the Non-Profit Fund and staff has prepared the attached proposed Council Non-Profit Fund Policy to establish guidelines for the use for these funds and to provide a uniform structure for the submission of requests and allocation of funding awards from the Council Non-Profit Fund.

NOW, THEREFORE, BE IT RESOLVED that the Lodi City Council does hereby approve and adopt the Council Non-Profit Fund Policy, attached heretofore as Exhibit A to this Resolution.

Dated: July 2, 2025

I hereby certify that Resolution No. 2025-120 was passed and adopted by the City Council of the City of Lodi in a regular meeting held July 2, 2025, by the following votes:

- AYES: COUNCIL MEMBERS – Craig-Hensley, Hothi, Nakanishi and Mayor Bregman
- NOES: COUNCIL MEMBERS – None
- ABSENT: COUNCIL MEMBERS – Yepez
- ABSTAIN: COUNCIL MEMBERS – None


for OLIVIA NASHED
City Clerk



City Council Non-Profit Fund Policy

Adopted July 2, 2025

Resolution 2025-120

I. PURPOSE

To provide a uniform structure for the submission of requests and allocation of the Council Non-Profit Fund (“Non-Profit Fund”) to local non-profits, and to establish guidelines for the for the authorized use of these funds.

II. POLICIES REGARDING NON-PROFIT FUNDS:

1. The City Manager, as part of the proposed budget each year, may allocate up to \$20,000 for each Council District into the Non-Profit Fund. In years the City budget is not structurally balanced, there may be a reduced amount or no allocation into the Non-Profit Fund for this purpose.
2. The City Clerk will maintain and track the uses of the Non-Profit Fund by each Council District.
3. Unspent dollars in the Non-Profit Fund will not be carried forward in the following fiscal year. The City Clerk shall provide a Non-Profit Fund balance report at the beginning of third quarter of each fiscal year, to provide an opportunity for Council Members to make recommendations for allocations before the end of the fiscal year.
4. A Councilmember, upon review of the merits and needs of the proposed projects or activities, will direct the City Clerk to prepare recommendations for the Council’s review and consideration regarding the use of the Non-Profit Fund. Allocations from the Non-Profit Fund must be approved by a simple majority vote of the Council.
5. Council approval of Non-Profit allocations should be based on the following:
 - a. Funding requests must align with the City Council Strategic Vision and requests should describe how they comply with the Council’s Goals and City policies.
 - b. Non-Profit Funds can be used as start-up funds for community programs or activities benefitting the community within the City of Lodi.
 - c. The recommended projects or activities will primarily result in public benefit within the City limits.
 - d. The recommended projects or activities can have a nexus to City operated or funded programs.
 - e. Funding for projects or activities is a one-time allocation and shall not be considered ongoing funding support.
 - f. Any organization receiving funding must agree to be audited or present progress reports to Council as required by the City.

- g. Funds cannot be allocated on a retroactive basis.
 - h. Organizations receiving these funds must attest that they will not be used for political, discriminatory, or any unlawful purposes.
6. Council Members may identify projects or activities proposed to be funded by the Non-Profit Fund, to be included as part of the upcoming budget. Once identified, the City Manager will include these projects and/or activities as part of the proposed budget to be considered by the City Council during final budget hearing. If approved, these projects and/or activities will not require a separate Council review and will be implemented by appropriate City staff. Projects not approved in the annual adopted budget will require a separate Council item and be approved by a simple majority vote of the City Council.

III. LEVINE ACT AND CAMPAIGN DISCLOSURE REQUIREMENTS

The Levine Act, California Government Code Section 84308, was enacted to prevent conflicts of interest by restricting public officials from participating in decisions involving entities from which they received campaign contributions. Under the Levine Act, as may be amended from time to time, if a public official has received contributions of more than \$500, from a party involved in a decision within the previous 12 months, they must disclose the contribution and recuse themselves from participating in the decision.

Pursuant to the Levine Act, Council Members who receive campaign contributions of \$500 or more from organizations, including an organization's board members and/or officers, who are requesting funding must comply with the Levine Act.

IV. ADMINISTRATION AND REPORTING

To address the need for a uniform process and ensure compliance with City of Lodi policies and procedures, the following requirements are set forth for the submission, processing, and award of grants from the Non-Profit Fund.

1. Non-profit organizations, that wish to apply for allocations from the Non-Profit Fund, must submit a letter ("Proposal Letter") to a City Council Member or City Clerk, providing the following details:
 - Contact name, phone, and email
 - Full legal name of organization
 - Complete address of the organization
 - Description of Organization
 - Mission Statement
 - Federal Tax Status: 501(c)(3) or other
 - List of current Board members and officers, if any

- Brief description of the project/program and how it relates to the City Council's Strategic Vision and one or more of Council's Goal
 - Funding amount requested and how it relates to overall project/program financial plan
 - Objectives for the requested funding
 - Performance indicators/Measurement of success
 - Communities that will benefit from use of the requested funds
 - Any additional information relevant to the request
2. Written justification must be provided for organizations that have received Non-Profit Funds in prior years.
- Proposal Letters must include the total Non-Profit Funds received in prior years and the reason for requesting additional funding.
 - For funding requests to organizations located outside the City's limits, Proposal Letters must include explanation of local benefit.
3. The City Clerk shall agendaize an item for Council review and approval, providing all relevant information for the City Council to review the submitted non-profit Proposal Letters and make a well-informed decision regarding the allocation request(s).
4. If approved by the City Council, the successful non-profit organizations shall submit quarterly status reports to the City Clerk for the life of the project.
- As part of each quarterly financial cycle, the City Clerk will report activity of these funds to the City Council summarizing all awarded Non-Profit Funds and available balances.

These recommendations aim to enhance procedural consistency, transparency, and compliance in the administration of award from the Non-Profit Fund.



**LODI
BOYS & GIRLS CLUB**

RECEIVED

AUG 25 2025

CITY CLERK

August 26, 2025

City Clerk
City of Lodi
221 West Pine Street
Lodi, CA 95240

To: City Clerk, Ramon Yopez, & City Council
Re: Nonprofit Funding Proposal
From: Roger Coover, Lodi Boys & Girls Club

OFFICERS

Cathy Metcalf
Chairperson
Suzanne Ledbetter
Vice Chair
Lupe Munoz
Treasurer
Danielle Spinella
Secretary

BOARD OF DIRECTORS

Blake Burnham
Karen Chandler
Rachel Crusenberry
Steve Ding
Claire Forsythe
Barron Goldberg
Kerry Heckman
Dr. Elizabeth Johnson
Cinthya Oseguera
Andrea Pemberton
Sherri Schenone
Eric Shaw

Adriana Tenbrink

LIFE MEMBERS

Fred Weybret
Mike Stokes

Executive Director

Roger Coover
ed@bgclodi.com

Lodi Boys & Girls Club
275 Poplar Street
Lodi, CA 95240
209-334-2697
www.bgclodi.com

Grant Request – General Operating Support

The mission of our Club is directly aligned with these council goals:

- *Partnering with public and private entities to provide outreach, education, and activities that engage diverse cultures and communities.*
- *Focusing on youth education and mentorship to foster positive life choices.*

For more than five years, our Club has experienced growing community support. However, this year we are facing a challenge. While foundations and businesses often provide funding for equipment or facility improvements, the heart of our work—our professional staff—remains underfunded. These staff members are the mentors, tutors, and role models who build trusted relationships with local youth. They are the people who are changing the lives of Lodi youth every day.

To sustain these essential roles, we depend on fundraising events and donations from families and local businesses. Earlier this year, our financial outlook was steady. Unfortunately, this summer’s fundraising campaign fell short by \$50,000 compared to previous years, resulting in a \$70,000 deficit between May and July. With economic uncertainty and rising costs impacting household giving, we are at risk of reducing the very services our community depends on most.

This is why we are requesting **\$10,000 in general operating support**. These funds will help sustain our ability to maintain professional staff and ensure every child who walks through our doors has access to safe, supportive, and enriching programs.

Over the past year, more than 470 local children have participated in our after-school and summer programs. From homework help, mentoring, STEM, art, healthy habits, and recreation to community service, our Club provides opportunities that build confidence, character, and skills for life.



**LODI
BOYS & GIRLS CLUB**

Ninety percent of the kids we serve qualify for reduced or free school meals. Our members come from a wide range of ethnic and economic backgrounds. Beyond youth development, our club provides peace of mind to working parents, knowing their children are in a safe, affordable, and nurturing environment when school is out.

Our programs have been proven to enhance our members' success in school and life, as evidenced by our annual anonymous surveys conducted locally and at clubs nationwide. By investing in our Club, you are investing in the future of Lodi. Together, we are providing a safe environment for kids to learn, grow, and reach their full potential.

Thank you for your consideration and for extending these new funding opportunities to local nonprofit organizations. We are ready to provide additional information you might need to assist your decision process.

Respectfully submitted,

Roger Coover
Executive Director
ED@bgclodi.com – 209-334-2697

Lodi Boys and Girls Club, Inc.
EIN# 94-1570121

Lodi Boys & Girls Club
275 Poplar Street
Lodi, CA 95240

Our mission: "To enable and inspire all young people, especially those who need us most, to reach their full potential as productive, caring, responsible citizens".

Internal Revenue Service

Date: February 6, 2007

LODI BOYS AND GIRLS CLUB INC
PO BOX 244
LODI CA 95241

Department of the Treasury
P. O. Box 2508
Cincinnati, OH 45201

Person to Contact:

Paul Perry 31-07423
Customer Service Representative

Toll Free Telephone Number:

877-829-5500

Federal Identification Number:

94-1570121

Dear Sir or Madam:

This is in response to your request of February 6, 2007, regarding your organization's tax-exempt status.

In January 1965 we issued a determination letter that recognized your organization as exempt from federal income tax. Our records indicate that your organization is currently exempt under section 501(c)(3) of the Internal Revenue Code.

Our records indicate that your organization is also classified as a public charity under sections 509(a)(1) and 170(b)(1)(A)(vi) of the Internal Revenue Code.

Our records indicate that contributions to your organization are deductible under section 170 of the Code, and that you are qualified to receive tax deductible bequests, devises, transfers or gifts under section 2055, 2106 or 2522 of the Internal Revenue Code.

If you have any questions, please call us at the telephone number shown in the heading of this letter.

Sincerely,



Michele M. Sullivan, Oper. Mgr.
Accounts Management Operations 1

RESOLUTION NO. 2026-_____

A RESOLUTION OF THE LODI CITY COUNCIL APPROVING THE AWARD OF PUBLIC BENEFIT FUNDS OF \$4,130 FROM THE DISTRICT 1 NON-PROFIT FUND TO THE LODI BOYS AND GIRLS CLUB (TOTAL \$4,130)

WHEREAS, on June 4, 2025, as part of the Fiscal Year (“FY”) 2025-2026 annual budget, the City Council voted to add \$100,000 to the City Council budget. These funds are evenly distributed among the five Councilmembers, giving each member \$20,000 to support non-profits that benefit the Lodi community; and

WHEREAS, on July 2, 2025, the City Council adopted Resolution No. 2025-120, approving the Non-Profit Fund Policy included as Attachment 1 (“Policy”). The Policy outlines the process and guidelines for submitting Proposal Letters from non-profit organizations, review and recommendations of allocations by Councilmembers, and final approval by the full City Council; and

WHEREAS, the Lodi Boys and Girls Club submitted a Proposal Letter as shown in Attachment 2 (“Proposal”), which has been reviewed by the City Clerk and found in compliance within the Policy guidelines; and

WHEREAS, Council Member Nakanishi reviewed the merits and needs of the Lodi Boys and Girls Club’s proposed projects or activities in the Proposal and desires to allocate public benefit funds to Lodi Boys and Girls Club from the District 1 Non-Profit Funds, in the amount of \$4,130.

NOW, THEREFORE, BE IT RESOLVED that the Lodi City Council does hereby:

1. Find that the mission and goals of Lodi Boys and Girls Club complies with the Policy, Council’s strategic vision, and that the activities described in the Proposal will provide public benefit for the City of Lodi and its residents.
2. Approve the total allocation of public benefit funds of \$4,130 from District 1 Non-Profit Funds to Lodi Boys and Girls Club, subject to compliance with the Policy.
3. Direct Lodi Boys and Girls Club to provide quarterly reports to the City Clerk on the use of the non-profit funds received as described in the Proposal, and the City Clerk shall then also share a summary of this reported activity to the City Council quarterly to ensure procedural consistency, transparency, and compliance with the Non-Profit Fund Policy.

Dated: February 4, 2026

I hereby certify that Resolution No. 2026-_____ was passed and adopted by the City Council of the City of Lodi in a regular meeting held February 4, 2026, by the following votes:

AYES: COUNCIL MEMBERS –

NOES: COUNCIL MEMBERS –

ABSENT: COUNCIL MEMBERS –

ABSTAIN: COUNCIL MEMBERS –

OLIVIA NASHED
City Clerk

2026-_____



COUNCIL COMMUNICATION

AGENDA TITLE:

Post for a Vacancy and an Expiring Term on the Lodi Improvement Committee (CLK)

MEETING DATE:

February 4, 2026

PREPARED BY:

Maria Ditmore, Deputy City Clerk

RECOMMENDED ACTION:

Post for a Vacancy and an Expiring Term on the Lodi Improvement Committee

BACKGROUND INFORMATION:

There is one vacancy on and one expiring term on the Lodi Improvement Committee. It is recommended that the City Council direct the City Clerk to post for these vacancies until filled.

Government Code Section 54970 et seq. requires that the City Clerk post for vacancies to allow citizens interested in serving to submit an application.

POSTINGS:

Lodi Improvement Committee

Vacancy	Term to expire March 2, 2028
Janavi Sharma	Term to expire March 1, 2026

STRATEGIC VISION:

Not applicable.

FISCAL IMPACT:

Not applicable.

FUNDING AVAILABLE:

Not applicable.



COUNCIL COMMUNICATION

AGENDA TITLE:

Set Public Hearing for February 18, 2026 to Consider Introduction of Ordinance Amending Lodi Municipal Code Chapter 13.20 "Electrical Service" Section 13.20.240 Schedule G1-General Service-Group 1 Commercial/Industrial and Section 13.20.250 Schedule G2-General Service-Group 2 Commercial/Industrial (EU)

MEETING DATE:

February 4, 2026

PREPARED BY:

Melissa Price, Assistant Electric Utility Director

RECOMMENDED ACTION:

Set Public Hearing for February 18, 2026 to consider introduction of ordinance amending Lodi Municipal Code Chapter 13.20 "Electrical Service" Section 13.20.240 Schedule G1-General service-Group 1 commercial/industrial and Section 13.20.250 Schedule G2-General service-Group 2 commercial/industrial.

BACKGROUND INFORMATION:

On October 15, 2025, City Council received a presentation from Lodi Electric Utility (LEU) staff regarding the Community Benefits Incentive Discount (CBID), a 30 percent discount applied to eligible non-profit entity's monthly electric charges.

City Council provided direction to LEU to revise applicable sections of the Lodi Municipal Code (LMC) as it relates to both the funding source and eligibility criteria associated with the CBID. This update was necessary as the CBID had not been reviewed since originally approved by the City Council in 1996.

In general, City Council requested that eligibility criteria be both clarified and broadened. Staff are proposing the following revised eligibility criteria and will present in more detail as part of the public hearing scheduled for February 18, 2026:

1. Removal of the requirement that eligible non-profits must have received Community Development Block Grant Funds within the past two years.
2. Proof of Internal Revenue Service recognized 501 (c)(3) status.
3. Certification that eligible non-profit entity serves low-income populations - defined as at or below 60 percent of median income - or populations residing in a Disadvantaged Community as defined by CalEnviroScreen or similar criteria determined by LEU.
4. Certification that eligible non-profit entity and its principals are not debarred, suspended, or otherwise excluded from participation in federal assistance programs, as verified through SAM.gov.
5. Proof that eligible non-profit entity is in good standing with the California Secretary of State.

Customers receiving the discount will be subject to an annual eligibility review.

In addition, LEU will no longer fund the discount from operations but rather Public Benefits Funding designated for low-income assistance programs.

COUNCIL COMMUNICATION

On October 27, 2025, LEU sent a letter to all customers currently receiving the CBID informing them of the proposed changes and providing them information on how they might provide comment as part of the public hearing process. None of these customers have contacted LEU as of the date of preparation of this agenda item.

STRATEGIC VISION:

3A. Fiscal Health: Promote City's transparency & fiscal fluency.

FISCAL IMPACT:

The total annual CBID is less than \$30,000 for 14 customer accounts. Expansion of the benefit will depend on the number of eligible non-profit entities who qualify under the new criteria.

FUNDING AVAILABLE:

LEU maintains sufficient fund balance in its Public Benefits Fund 504 to support low-income programs.



COUNCIL COMMUNICATION

AGENDA TITLE:

Receive Update from Lodi Senior Citizens Commission (PRCS)

MEETING DATE:

February 4, 2026

PREPARED BY:

Neel Singh, Recreation Manager

RECOMMENDED ACTION:

Receive update from Lodi Senior Citizens Commission.

BACKGROUND INFORMATION:

The Lodi Senior Citizens Commission (“Commission”) aims to strengthen its connection with the City Council and the community. To achieve this, the Commission will provide regular updates to the City Council, highlighting their community activities.

These updates will be provided by PowerPoint presentation, Attachment 1, by Commission members, covering the following areas:

1. **Vision:** Explanation of the Commission’s vision and its alignment with the City Council’s Strategic Vision.
2. **Goals:** Overview of the Commission’s goals and how they align with the objectives of the Master Plan for Aging.
3. **Accomplishments:** Summary of key achievements, including the Senior Café.
4. **Upcoming Events:** Information about upcoming senior events organized by the Commission.
5. **Partnerships:** Details on collaborations with local organizations, including University of the Pacific and the LOEL Center.

Additionally, there will be updates from LOEL Center on their latest programs and initiatives. This structured approach ensures that the City Council and the community are well-informed about the Commission’s efforts to support and engage Lodi’s senior citizens.

STRATEGIC VISION:

8B. Public Well-Being: Partner with other entities to provide outreach, education and activities to engage diverse cultures and communities.

FISCAL IMPACT:

Not applicable.

COUNCIL COMMUNICATION

FUNDING AVAILABLE:

Not applicable.



Lodi Senior Citizens Commission 2025 Goals Presentation

Commissioners:

J. Loney, T. Spring, T. Whitmire, J. Wilkinson, J. Woelfel,

L. Young



Senior Commission: Vision & Goals

Identify, discuss, introduce, and establish:

- **Programs**
- **Projects**
- **Resources**

to better meet the ongoing needs of our senior community.





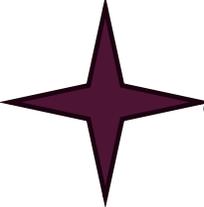
City Council Strategic Vision
2023/24 Workplan and Report

Lodi Senior Citizens Commission



Alignment

2025 Primary Accomplishment



a. Function of Lodi Senior Commission

I. We are advisors to the City Council about senior needs and concerns.

b. Goal of the Senior Café

I. Safe place to voice participant concerns, needs, and socialize with others.



c. Commission Action

“Listening & responding to the voices of the people!”

Develop action plan in response to Café participant questions and recommendations.



THE LODI SENIOR
COMMISSION PRESENTS

Senior Social Café
November 7th
9:00 - 10:00 a.m.

LOEL Senior Center
COME MEET YOUR COMMISSION!

Resource Information Guest Speaker

Social Time Light Snacks & Coffee

LOEL Senior Center
105 South Washington Street,
Lodi 95240

SENIOR CAFÉ FEBRUARY 2025

- **Number of Participants: 34**
- **Presentations:**
 - **Mayor Cameron Bregman**
 - **Elise Vigil, Deputy Director, Aging &**
 - **Community Services, SJC HSA**
- **Questions from participants:**
 - Have **index cards for participant use** if they did not wish to speak
 - How can the **City increase awareness of 211?**
 - What **phone number should the public use** to call regarding Walkability/
 - other issues
 - Can the **City's website** become **more interactive**,
 - such as: What are your questions? How can we help?
 - Have an **Alzheimer's presentation** and **information on City's website**



SENIOR CAFÉ MAY 2025

- **Number of Participants: 30**
- **Presentation:**
 - **Denise Davis, Alzheimer's Foundation, Alzheimer's Overview and Resources**
- **Feedback from February Café participant questions /recommendations:**
 - **Index cards provided** for non-verbal questions
 - **Call City of Lodi [209-333-6702](tel:209-333-6702) City Clerks Office** to report concerns/ questions including **Walkability Program issues**
 - **Call 211** for resource help/questions with **display on City website**
- **Past Commission Meeting Actions**
 - **Commissioners sent letter to City Manager** to address participant recommendations: **City website improvement, display of 209 333 6700 City number, 211 number, Senior Resource Trifold Guide, developing a Senior Resource page, & link to SJC HSA website**
- **Questions from participants:**
 - Can the public **ride bicycles on sidewalks?**
 - Can the City provide **more social activities for seniors** such as through the Chamber of Commerce or other City service centers?
 - Are there **leash laws for pets** and also how does one **report excessive barking dogs?**
 - **Answers provided that day by Commissioners!**

Dear Acting City Manager Lindsay,

I serve as the chairman of four Lodi Senior Citizens Commission. As approved at our June Commission meeting, we would like to send a letter to you regarding potential improvements on the City of Lodi website and customer services. The letter was unanimously supported by our Commissioners: Lauren Young, Sandra Legan, Dr. Jane Loney, Terri Whitlock, Terri Spring, Janalee Walker and Dr. Joseph Woelke.

These improvements have been suggested by attendees of our Senior Café held at Lodi Center every quarter. These improvements have been discussed and approved at our Commission meetings.

This January we held the first Senior Café. The goal of the Senior Café is to provide a safe place for seniors to voice concerns, needs, and socialize with others.

The following are the suggested improvements:

- appoint a City of Lodi customer service representative for answering and directing calls placed by residents to the 209-333-6700 phone number during work hours
- assure that this number is prominently displayed on the first page of the City website
- add a Senior Resource page to the website
- insert the Senior Commission Resource to-fold into the City Bill mailed annually. This to-fold was presented to the City Council in 2024 and is being distributed locally.

Please consider these proposed improvements.

Additionally, we would like to ask you to attend some of our Commission meetings at your earliest convenience and ask you to attend a Senior Café meeting. The Commission meets at Hercules Street Square on the first Thursday of each month at 8:00AM. The Senior Café is held at Lodi Center the first Friday in February, May, August, and November from 9:00-10:00AM. Your presentation could provide an overview of the City's focus on the needs of our senior population and directly answer their questions.

Thank you for considering our requests on behalf of our senior population.

If you have any questions, please contact me.

WALKABILITY PROGRAM

SENIOR CAFÉ AUGUST 2025

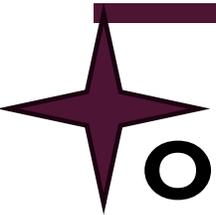
- **Number of Participants: 33**
- **Presentation:**
 - **Advanced Directives by Adventist Health Lodi Memorial Hospital**
- **Feedback Report from May Senior Café**
 - **Participant questions answered at May Café**
- **Past Commission Meeting Actions**
- **Commissioners continued addressing response from City on May action items and letter to City Manager**
 - ***Pending Response from City***



Senior Café November 2025

- **Number of Participants: 36**
- **Presentation:**
 - **Palliative Care by Hospice of San Joaquin**
- **Feedback Report from August Senior Café**
 - **Participant questions answered at August Café**
- **Past Commission Meeting Actions from September and November**
 - **City website redesign ideas**
 - **City will be redesigning website in 2026 to include Café and Commissioner recommendations**
- **Discussed possible Senior Café presentations by/on:**
 - **the new City Manager and Mayor**
 - **the Fire Chief on senior safety**
 - **navigating the new City Website**
 - **City Partners on “home alone” senior checks**
 - **use of cell phones**
 - **rising cost for wastewater**
 - **senior grief support groups**
- **February 2026 Presentation: Wills and Trusts**





Ongoing Aligned Accomplishments

Currently Identified in the
“Senior Resource Guide”

To be placed on City Website

**SENIOR COMMISSION OF LODI
SENIOR
RESOURCE GUIDE**

The Senior Commission has been dedicated to introducing programs and projects for the betterment of the local Seniors of Lodi. The Senior Commission has contributed in facilitating the Walkability Program, Red Alert Program, 2-1-1 San Joaquin Resource, and Senior Safety. Enclosed are helpful resources for the senior community.

CITY OF
Lodi
CALIFORNIA



WATER FITNESS

CLASSES

Join us at the **Hutchins Street Square Indoor Pool** for Water Fitness, you'll love this active and social experience while being healthy too!



CLASS SCHEDULE

Water Fitness

Monday-Friday 9am - 10 am
Wednesday/Friday 5:30pm -6:20pm

Open Fitness

Monday, Wednesday and Friday
10am - 11am

\$5/class



WALKABILITY PROGRAM

The Senior Commission and Lodi Public Works have collaborated to provide environmental safety improvements. This includes 12 “Senior Zone” areas with signage near senior facilities along with sidewalk repairs. The Walkability Program is an ongoing project for the Commission as they seek out additional areas for improvement.



BE AWARE, STAY SAFE

SENIOR SAFETY

Senior safety is a top priority! While at the grocery store, walking at a park, or strolling around the neighborhood, it's important seniors are aware of their surroundings and prepared in case of emergencies. The Senior Commission recommends purchasing safety whistles in cases when immediate assistance is needed. Manual and electronic safety whistles are available to purchase online.

Environmental Safety Lifelong Healthy Aging

- “Senior Zones”
- “Walkability Program”
- Senior Safety Awareness
- Water Fitness
- Safe Venue Socialization



RED ALERT PROGRAM



Through efforts from Adventist Health Lodi Memorial Hospital, the Red Alert Program was reintroduced to the Lodi community in partnership with the Senior Commission, Lodi Fire, and Lodi Police Department. The Red Alert program is a medical alert program that allows EMS personnel and first responders to access important medical and emergency contact information for participating members. We encourage our senior residents to stop by one of our distribution centers to pick-up a Red Alert Packet listed below. LOEL Center located at 105 S Washington St, Lodi CA 95240. Red Alert Packets are also provided at Hutchins Street Square, the Recreation Office, City Hall, the Fire Department Office and Police Department Office.

• Distribution Centers

- LOEL Center**
105 S Washington St, Lodi CA 95240
- Hutchins Street Square**
125 S. Hutchins Street, Lodi CA 95240
- PRCS Office**
230 West Elm Street, Lodi CA 95240
- City Hall**
221 West Pine Street, Lodi CA 95240
- Fire Department Office**
210 West Elm Street, Lodi CA 95240
- Police Department Office**
215 West Elm Street, Lodi CA 95240

Emergency Preparedness & Response Lifelong Healthy Aging Geriatric Care Expansion

- “Red Alert Program”
- Cooling Centers
- Lodi Police Department
“Project Lifesaver”
- Annual University of the Pacific Health Fairs



**COMMITTED TO HELPING
MEDICARE BENEFICIARIES
AND THE COMMUNITY**

**Medicare
HEALTH FAIRS
2025**

Summary of our screenings/services:

- ❖ Medicare Part D plan review- to help lower your out-of-pocket medication costs
- ❖ Medication review- to ensure that your medications are safe and effective
- ❖ Narcan nasal spray
- ❖ Vaccinations
- ❖ Additional no cost health screenings:
 - Anemia
 - Blood Pressure
 - Bone Density
 - Cholesterol
 - Diabetes
 - Falls Risk Assessment
 - Wellness Screenings

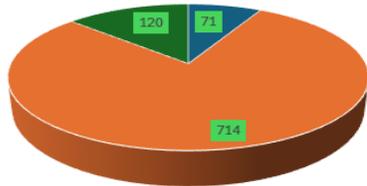


FOR MORE INFORMATION:
please visit
www.pacific.edu/pharmacy/medicare
or call (209) 910-DRUG (3784)



Thomas J. Long
School of Pharmacy

**Pacific Medicare Beneficiary Service
Numbers**



■ Vaccines ■ Health Screenings ■ Medical Supplies

**LOEL CENTER
ENGAGE &
CONNECT**

The LOEL Senior Center offers something for everyone, from social programs to a nutritious lunch program. LOEL is a community gathering site where seniors can participate in a variety of activities such as exercise, bingo, line dancing, making crafts, or simply playing a game of cards with their friends.



Contact

- 📍 105 S. Washington Street
- ☎ 209-369-1591
- 🌐 loelcenter.org

**Adventist Health Lodi
Memorial Adult Day
Services**

Adult day services resource center at Hutchins Street Square is an option of daily care for your loved one. Here their health will be monitored, enjoy socialization, exercise and have a meal in a safe environment with trained staff. These services offer respite and support for the caregivers. Pre-assessment and registration is required.

Contact

- 📍 125 S. Hutchins Street
- ☎ 209-369-4443
- 🌐 AdventistHealth.org/LodiMemorial
Lic# 390313117

Geriatric Care Expansion

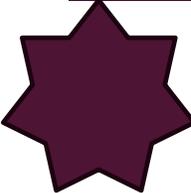
- **Adventist Health LMH Adult Day Care Services**
- **LOEL Center**
- **Annual University of the Pacific Medicare Health Fairs**
- **Alzheimer's Assoc. & Del Oro Caregiver Resource Center**



Review of the 2025 – 2026 California Master Plan for Aging Initiatives

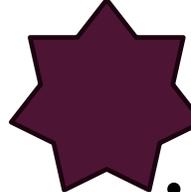


- **Commission current actions address the following Initiative Goals and Themes:**
 - **Goal 2: Health Reimagined**
 - **Theme 33: Advanced Directives** presented at **August Senior Café** meeting and **Palliative Care** presented at **November Senior Café**
 - **Theme 39: Alzheimer's Care program** presented at the **May Senior Café**
 - **Goal 5: Affordable Aging**
 - **Theme 78: Food Support** ongoing through existing **LOEL Center program**



Coming Soon

- **Public Works Department Transportation Team** update, revision, and distribution of transportation service enhancements catering to seniors.
- **Senior Café presentations on:**
 - **Wills and Trusts**
 - **Organ donation**
 - **New Medicare and MediCal (Medicaid) changes**
 - **Falls Prevention**
 - **New City Manager and new Mayor discussion on senior concerns and questions**
 - **Navigating the new City website.**



Returning

- **Senior Café**
- **Medicare Health Fairs** in October and November 2026 by the **University of the Pacific** at Hutchins Street Square and LOEL Center.



It's About Advocating for Our Seniors

**“Listening &
responding to the
voices of the people!”**

Plus Continuing and Building
Partnerships with Others to Benefit
Our Seniors!!





COUNCIL COMMUNICATION

AGENDA TITLE:

Receive Report and Adopt a Resolution Approving Fiscal Year 2025-26 Mid-Year Budget Adjustments; and Approving the Addition of One Police Officer, One Senior Billing Specialist, One Management Analyst - Confidential, and a Senior Plans Examiner; Deletion of One Customer Service Representative and One Health and Safety Specialist, and the Reclassification of a Deputy City Clerk to an Assistant City Clerk and Program Manager to a Recreation Manager; and Adopt Updates to the Budget and Fiscal Policy (IS - Budget)

MEETING DATE:

February 4, 2026

PREPARED BY:

Jennelle Baker, Budget Manager

RECOMMENDED ACTION:

Receive Report and Adopt a Resolution Approving Fiscal Year 2025-26 Mid-Year Budget adjustments; and approve the addition of one Police Officer, one Senior Billing Specialist, one Management Analyst - Confidential, and a Senior Plans Examiner; deletion of one Customer Service Representative and one Health and Safety Specialist, and the reclassification of a Deputy City Clerk to an Assistant City Clerk and Program Manager to a Recreation Manager; and adopt updates to the Budget and Fiscal Policy.

SUMMARY:

Each year, the City of Lodi prepares a Mid-Year Budget update recommending changes in appropriations to continue operations and projects during the year. The report below provides a summary of where we began the fiscal year with the adopted budget, discusses several revisions that were made and then provides detail about recommended changes. The recommended updates to the Fiscal Year 2025-26 Budget include updates to revenue estimates based on the best available information. There are several changes to expenditures that include new memorandum of understanding updates, internal investigation costs, expiration of the Assistance to Firefighters Grant, public safety overtime, and capital expenditures. Highlights include the addition of one Community Liaison Police Officer position in Police, one Recreation Manager in Parks, Recreation and Cultural Services (PRCS), and one Senior Plans Examiner in Community Development (CDD). The mid-year budget also includes the reclassification of the Deputy City Clerk to Assistant City Clerk in the City Clerk Division, the elimination of one Customer Service Representative and one Program Coordinator (PRCS) and addition of one Senior Billing Specialist in the Revenue Division.

BACKGROUND INFORMATION:

The City Council adopted the Fiscal Year 2025-26 Budget on June 4, 2025 (Resolution 2025-121). The Budget sets the priorities for funding services within the City of Lodi for the fiscal year. The General Fund adopted Budget was balanced at \$89,724,060, estimated revenue and expenses with a Citywide budget of \$294,153,030 estimated revenue and \$294,153,030 estimated expenses.

When the 2023-24 audit was finalized, the unrestricted fund balance as of June 30, 2024, was calculated at \$10.7 million. Of this amount, \$6.72 million is revenue from Peaker Plant rent recommended to be placed in a restricted fund. There is a remaining \$4 million, and although the City Treasurer has the authority to redirect

COUNCIL COMMUNICATION

these funds to the Pension Trust, it is recommended to approve the adoption of the updated Budget & Fiscal Policy, setting a new Pension Stabilization funding balance status at 70% and assigning fund balance to the memorandum of understanding cost increases. The fiscal year 2024-25 audit is expected to be complete and presented to Council in the coming weeks.

After the adoption of the budget, several revisions are made in accordance with the approved Budget and Fiscal Policies. These adjustments are for items that are in progress from the previous fiscal year and need to “roll forward” for work to continue or other adjustments, including Council-approved adjustments that occur during the fiscal year.

The current fiscal year 2025-26 General Fund revised revenue budget is \$94,990,231. This is due to three items. The first item is an increase of \$5.1 million, consisting of carryover of remaining American Rescue Plan Act (ARPA) Capital revenue. The ARPA funds are one-time funds approved on March 2, 2022, (Resolution 2022-63). Remaining funds can be appropriated per the Budget and Fiscal Policies to automatically carry forward until project completion. The second item is an additional \$64,000, representing an appropriation of a donation from the Lodi Fire Foundation (Resolution 2025-149 approved on September 3, 2025) for cardiac monitors, and finally a transfer in from Water and Wastewater in the amount of \$16,666.67 for the professional recruitment costs related to the Public Works Director's retirement

The original and revised fiscal year General Fund 2025-26 revenue budget is shown below:

Table 1

Revenue Category	2026 Adopted Budget	2026 Revised Budget	Delta
Interfund Credit	11,548,790	11,565,457	16,667
Taxes	56,797,890	56,797,890	-
Licenses & Permits Total	138,300	138,300	-
Fines/Forfeits & Penalties	1,234,100	1,234,100	-
From Use of Money/Investment	7,700,000	7,700,000	-
Miscellaneous Revenue	864,570	864,570	-
Intergovernmental	9,043,080	9,043,080	-
Charges for Services	2,397,330	2,461,330	64,000
ARPA	-	5,185,505	5,185,505
Grand Total	89,724,060	94,990,231	5,266,171

The current revised expense budget is \$95,349,328, an increase of approximately \$5.6 million. The revisions consist of:

- Carryover of remaining American Rescue Plan Act (ARPA) Capital expense in the amount of \$5,185,505. The ARPA funds are one-time funds approved on March 2, 2022 (Resolution 2022-63) and are allowed per the Budget and Fiscal Policies to automatically carry forward until project completion;
- Transfer out of \$32,000 from the City Manager’s Office to Human Resources for the City Manager professional recruitment services expense;
- Carryover of \$359,097 for the Assistance to Firefighters Grant award for paramedic training and overtime (Resolution 2023-02 approved on January 4, 2023);
- Appropriation of funds for a donation of \$64,000 from the Lodi Fire Foundation in accordance of Resolution 2025-149 approved on September 3, 2025;
- Transfer in of \$32,000 to Human Resources from the City Manager’s Office for the City Manager professional recruitment services expense, and the transfer of \$25,000 to Human Resources from

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Public Works for professional recruitment services expense;

- Transfer out of \$8,333 from Public Works to Human Resources for the Public Works Director's professional recruitment services expense.

The original and revised fiscal year 2025-26 expense budget is shown in Table 2 below:

Table 2

Department	2026 Original Budget	2026 Revised Budget	Delta
City Attorney	1,395,350	1,395,350	-
City Clerk	681,380	681,380	-
City Council	288,810	288,810	-
City Manager	2,178,600	2,146,600	(32,000)
Community Improvement	477,540	477,540	-
Fire	19,681,160	20,104,257	423,097
Internal Services	8,371,910	8,428,910	57,000
Library	126,480	126,480	-
Non-Departmental	17,256,350	17,256,350	-
Police	33,263,170	33,263,170	-
Public Works	4,869,840	4,861,507	(8,333)
Community Facilities District	1,133,470	1,133,470	-
ARPA	-	5,185,505	5,185,505
Grand	89,724,060	95,349,328	5,625,268

Mid-Year Budget

The mid-year budget is unique this year due to Memorandum of Understanding (MOU) negotiation delays that required salary and benefit best-guess assumptions during the FY 2025-26 planning. Now that most of the safety MOUs are finalized, and the other MOUs are currently in progress, budget staff recalculated these projections to align with the approved MOUs. Council will observe these updates in the mid-year expense review.

Mid-Year General Fund Revenues

General Fund revenues are currently estimated to come under the revised budget projection by \$188,530, primarily due to the latest projections from HdL, the City's sales tax consultant, indicating a decrease of \$1 million in sales tax revenue compared to the 2024 fourth quarter HdL projection originally used for budget adoption. Other decreases include the loss of the AFG grant revenue in the amount of \$492,370 due to the grant expiration on December 31, 2025, and lower than expected Fire inspection revenue. However, these losses are partially offset by a projected increase of \$1.3 million in interest income due to year-to-date actuals received higher than expected, and \$233,110 transfer in from General Fund Capital to offset legal services related to employment matters, personnel, and financial investigations expenses.

The revised budget estimated General Fund revenue at \$94,990,231. The mid-year revenue projection is \$94,801,702. Table 3 below shows General Fund revenue projections for the categories with mid-year adjustments compared to the revised budget.

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Table 3

Revenue Category	2026 Adopted Budget	2026 Revised Budget	Mid-Year Recommendation	Delta
Interfund Credit	11,548,790	11,565,457	11,798,567	233,110
Taxes	56,797,890	56,797,890	55,785,760	(1,012,130)
Licenses & Permits	138,300	138,300	138,300	-
Fines/Forfeits & Penalties	1,234,100	1,234,100	1,234,100	-
From Use of Money/Investment	7,700,000	7,700,000	9,000,000	1,300,000
Miscellaneous Revenue	864,570	864,570	864,570	-
Intergovernmental	9,043,080	9,043,080	8,439,360	(603,720)
Charges for Services	2,397,330	2,461,330	2,355,540	(105,790)
ARPA	-	5,185,505	5,185,505	0
Grand Total	89,724,060	94,990,231	94,801,702	(188,530)

Mid-Year General Fund Expenditures

The overall General Fund expenses are projected to be \$2.9 million higher than the current revised budget of \$95,349,328, for a total General Fund appropriation of \$98,299,717. The expenditure increases are due primarily to MOU salary and benefit changes. The table below shows the General Fund expenditure projections by department. The Mid-Year Recommended column incorporates the recommended adjustments.

Table 4

Department	2026 Adopted Budget	2026 Revised Budget	Mid-Year Recommended	Delta
City Attorney	1,395,350	1,395,350	1,517,560	122,210
City Clerk	681,380	681,380	654,650	(26,730)
City Council	288,810	288,810	358,810	70,000
City Manager	2,178,600	2,146,600	2,186,310	39,710
Community Improvement	477,540	477,540	491,400	13,860
Fire	19,681,160	20,104,257	20,172,690	68,433
Internal Services	8,371,910	8,428,910	8,881,975	453,065
Library	126,480	126,480	129,650	3,170
Non-Departmental	17,256,350	17,256,350	17,550,190	293,840
Police	33,263,170	33,263,170	34,834,980	1,571,810
Public Works	4,869,840	4,861,507	5,202,527	341,020
Community Facilities District	1,133,470	1,133,470	1,133,470	-
ARPA	-	5,185,505	5,185,505	0
Grand Total	89,724,060	95,349,328	98,299,717	2,950,389

To break out the salary and benefit changes Table 5 shows the changes from the original budget by department. \$2.4 million of the \$2.9 million is directly resulting in MOU negotiated changes and projected changes for unsigned MOUs. It also includes a Police overtime increase of \$250,000 and Fire part-time increase of \$28,770.

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Table 5

Department	2026 Adopted Budget	2026 Revised Budget	Mid-Year Recommended	Delta
City Attorney	1,088,720	1,088,720	1,210,930	122,210
City Clerk	462,250	462,250	489,380	27,130
City Council	136,810	136,810	136,810	-
City Manager	1,387,680	1,387,680	1,427,390	39,710
Community Improvement	387,750	387,750	401,610	13,860
Fire	16,536,420	16,874,826	16,950,550	75,724
Internal Services	5,461,550	5,461,550	5,763,115	301,565
Library	119,390	119,390	122,560	3,170
Police	28,377,050	28,377,050	29,948,860	1,571,810
Public Works	3,430,020	3,430,020	3,684,290	254,270
Grand Total	57,387,640	57,726,046	60,135,495	2,409,449

Additional expense updates outside of the salary and benefit projections are an increase in expense in Internal Services (Revenue) for overages in budgeted Bank Service charges that are incurred from credit card and online payment fees in the amount of \$130,000. Internal Services (Human Resources) also needs an additional \$21,500 appropriation for contracted services related to MOU negotiations. Non-departmental includes an appropriation in the amount of \$233,110 for legal services related to employment matters, personnel, and financial investigations expenses; a transfer in from General Fund Capital offsets this expense. Public Works is in need of an additional \$86,750 for unexpected repairs to facilities. The City Clerk's budget is lowering their expenses due to election costs coming in lower than expected. Fire also has slightly lower expense projections due to the following: loss of AFG grant (42,690) and increase in Fire Academy costs of \$35,400. Lastly an appropriation of \$70,000 in City Council for Legislative Advocacy. Expenses unrelated to MOU negotiations total \$540,939.

Table 6

Department	2026 Adopted Budget	2026 Revised Budget	Mid-Year Recommended	Delta
City Attorney	257,000	257,000	257,000	-
City Clerk	197,860	197,860	144,000	(53,860)
City Council	152,000	152,000	222,000	70,000
City Manager	744,870	712,870	712,870	-
Community Improvement	68,520	68,520	68,520	-
Fire	2,740,610	2,825,301	2,818,010	(7,291)
Internal Services	2,662,210	2,719,210	2,870,710	151,500
Non-Departmental	18,389,820	18,389,820	19,520,600	293,840
Police	4,077,860	4,077,860	4,077,860	-
Public Works	1,255,480	1,247,147	1,333,897	86,750
ARPA	-	5,185,505	5,185,505	-
Grand Total	30,546,230	35,833,092	37,210,972	540,939

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Mid-Year General Fund Capital

Council received a formal presentation at the August 6, 2025 Council meeting regarding the unassigned proceeds from the Waste Management contract and the one-time surplus General Fund Capital funds. The total funding available totaled \$1.6 million based on the available funds between the General Fund Capital, and Parks, Recreation, and Cultural Services, which is funded by the General Fund. At that meeting, the Council appropriated \$290,000 to the following projects in Table 7 (Resolution 2025-145):

Table 7

Capital Project	Appropriation
Citywide roadway paving assessment	200,000
Hale Park sign replacement - reflects updated cost estimate (209 E. Elm St.)	20,000
Maple Square landscape improvements (2 E. Lodi Ave.)	10,000
Additional trash pick-up for the downtown alleys	60,000

In addition, \$110,000 was appropriated at the November 19, 2025, Council meeting for work needed at Salas Park due to repairs as a result of vandalism. This left \$1.2 million for the plan of funding unexpected legal services related to employment matters, personnel, and financial investigations, and evaluating at mid-year what amount was available for additional projects. It is recommended to transfer \$233,110 back to the General Fund to offset these expenses, leaving approximately \$900,000 for new projects. Table 8 includes the list of recommended General Fund Capital Project changes for mid-year:

Table 8

Capital Project	Funding Source	Amount
Skatepark - New Planning Phase I & II	432 - Parks&Rec Capital	(595,000)
Kofu Skatepark Repairs	432 - Parks&Rec Capital	175,000
Beckman Park - Cricket Lighting & Field Improvements	432 - Parks&Rec Capital & 431-Capital Outlay/General Fund	900,000
Boiler Replacement (Police)	431-Capital Outlay/General Fund	40,000
Transfer Out - Unexpected legal services related to employment matters, personnel, and financial investigations	431-Capital Outlay/General Fund	233,110
Total		753,110

This will leave approximately \$100,000 in fund balance for unexpected overages that would come back to Council for approval or for the availability to program in Fiscal Year 2026-27. Attachment 2 includes all mid-year Capital Improvement Project (CIP) requests.

Electric Utility

The Electric Utility (EU) projects an overall expenditure increase of almost \$3.7 million, primarily related to power generation costs due to soft market prices and less plant revenue to offset fixed costs and new Capital expense (Table 9). These are offset slightly by a reduction in transmission charges based on energy consumption. The Capital request forms are attached.

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Table 9

Capital Project	Funding Source	Amount
EV Charging Infrastructure Master Plan	501 - EU Outlay Capital Reserve Fund	883,330
Substation Intrusive Maintenance Work	501 - EU Outlay Capital Reserve Fund	98,730
Total		982,060

Additional Mid-Year Adjustments Revenues

Enterprise and Special Funds are recommended to be adjusted according to the list below. Streets is expecting increases in revenue from Measure K and Federal funding, but a decrease of \$304,202 in development impact fees. Capital Outlay decreases are due to development impact fees coming in lower due to slowing activity. Electric Utility has various offsetting revenues in various areas with the most notable increases in revenue from Energy Cost Adjustments and decreases in revenue from customer accounts. Wastewater and Water are both experiencing an increase in revenue from customer accounts, and Employee Benefits is expecting offsetting revenue from the increases in Chiropractic and Life Insurance due to higher rates and increases in salary due to MOU updates. Please see the changes in revenue in Table 10.

Table 10

Department	2026 Approved Budget	2026 Revised Budget	Mid-Year Recommended	Delta
Library	1,701,690	1,702,690	1,702,690	-
PRCS	9,540,650	9,650,650	9,650,650	-
Special Revenue/Grants	441,150	441,150	441,150	-
Community Development	4,123,330	4,123,330	4,123,330	-
Streets	7,609,050	7,609,050	9,301,510	1,692,460
Community Improvement Grants	11,798,000	12,400,910	12,400,910	-
Capital Outlay	2,902,180	3,042,180	2,580,000	(462,180)
GF Bond Payments	1,641,600	1,641,600	1,641,600	-
Electric Utility	97,200,230	97,200,230	100,618,140	3,417,910
Wastewater	19,473,590	19,473,590	20,404,040	930,450
Water	15,638,060	15,638,060	16,568,730	930,670
Transit	8,890,430	8,890,430	8,890,430	-
Vehicle & Equipment Replacement	2,286,550	2,286,550	2,286,550	-
Fleet	-	-	-	-
Employee Benefits	13,738,680	13,738,680	13,847,880	109,200
Self-Insurance	7,409,980	7,409,980	7,409,980	-
Grand Total	204,395,170	205,249,080	211,867,590	6,618,510

Expenses

Enterprise and Special Funds are recommended to be adjusted according to the list below. Any changes not listed below are due to MOU negotiation projections with notable expense increases in EU listed above. Community Development recommends moving \$1.5 million for the Comprehensive General Plan from their operating budget to a Capital project. This move will keep the funds within CDD, but allow for the unused expense to roll year to year over the length of the project. Transit needs an additional \$5,000 due to

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unexpected repairs to buildings. Police request allocating funds from the Vehicle Replacement Fund to outfit the Animal Service Truck and an emergency response SUV. The Employee Benefits accounts for Chiropractic are increasing due to contract increases as well as Life Insurance costs, which also directly correlate with increases in employees' salaries. Workers' Compensation is requesting an increased allocation of expenses from the fund balance.

Table 11

Department	2026 Adopted Budget	2026 Revised Budget	Mid-Year Recommended	Delta
Library	1,896,860	1,897,860	1,934,750	36,890
PRCS	9,540,650	9,743,300	10,004,790	261,490
Special Revenue/Grants	440,210	629,881	629,882	-
Community Development	6,511,080	6,789,080	6,970,646	181,566
Streets	10,097,810	17,280,593	17,385,916	105,318
Community Improvement Grants	1,312,200	11,078,454	11,078,455	-
Capital Outlay	2,395,600	18,266,779	19,020,893	754,114
Electric Utility	97,841,350	100,740,533	104,418,213	3,677,680
Wastewater	21,585,880	34,362,179	34,820,950	458,771
Water	13,992,920	30,049,683	30,081,983	32,300
Transit	8,969,640	13,838,833	13,892,943	54,110
Vehicle & Equipment Replacement	2,825,940	3,484,212	3,534,212	50,000
Fleet	2,960,470	2,960,470	3,121,760	161,290
Employee Benefits	12,101,780	12,101,780	12,130,780	29,000
Self-Insurance	9,106,370	9,834,705	10,034,705	200,000
Grand Total	201,578,760	273,058,357	279,060,888	6,002,531

Personnel Adjustments

Staff is recommending the addition of four full-time positions, the deletion of two current-existing vacant positions, and the reclassification of two positions. In the Table 12 below is showing these recommendations.

Table 12

General Fund Positions	Action	Department	Annual Cost	Mid-Year Estimate
Police Officer (Community Liaison Officer)	Add	Police	208,500	34,750
Senior Billing Specialist	Add	Revenue	114,000	19,000
Customer Service Representative	Delete	Revenue	101,600	(17,000)
Assistant City Clerk	Reclass (Add)	City Clerk	87,120	4,875
Deputy City Clerk	Reclass (Delete)	City Clerk	79,200	-
Management Analyst (Confidential) - Risk	Add	Risk	88,900	-
Health and Safety Specialist	Delete	Risk	88,900	-
Non-General Fund Positions	Action	Department	Annual Cost	Mid-Year Estimate
Senior Plans Examiner	Add	CDD	164,500	2,500
Program Coordinator	Delete	PRCS	64,070	-
Recreation Manager	Add	PRCS	93,300	7,300

- Add one Police Officer Community Liaison Officer - This position will follow the department's core values of safety and security of the community and will be assigned as the second officer to the CLO (Community Liaison Officer) Program. This position will enable proactive policing downtown and in the same focused areas of the Downtown Ambassadors. The savings from the Ambassador program will fund this position, bringing internal, well-trained enforcement to this focused area.

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- Add one Senior Billing Specialist - Creating the Senior Billing Specialist position is a critical investment in the success of the Revenue Division. This role will provide leadership and support to the Billing team -overseeing staff, offering hands-on training, and resolving complex billing issues with expertise. Beyond billing, this position will also assist Customer Service during high-demand periods and act as a supervisor when needed, ensuring continuity and quick decision-making. Adding this position will enhance efficiency, improve staff confidence, and elevate the overall quality of service provided by the City. The official salary table for this position will be created by Human Resources and will come back to the Council for approval in the coming months.
- Deletion of one Customer Service Representative - Senior Billing Specialist will take the place of this position. There are currently two vacant positions due to turnover in the department.

Senior Billing Specialist (Add)				
76,892	80,737	84,774	89,013	93,463
Customer Service Representative (Delete)				
49,818	552,309	54,924	57,670	60,554

- Add Management Analyst - Confidential and delete Health and Safety Specialist - There is a current vacancy in Risk Management for a Health and Safety Specialist for some time and despite robust recruitment efforts, have not been successful in filling the vacancy. A Management Analyst - Confidential would allow for more balanced workload distribution across core risk functions, better align with work currently being performed and anticipated going forward, create internal promotional opportunities and support succession planning with the division and reduce the operational risk of keeping a critical position vacant for an extended period of time. The addition of a Management Analyst - Confidential position and deletion of a Health and Safety Specialist is a no-cost change.
- Reclass Deputy City Clerk to Assistant City Clerk - The incumbent has been performing higher-level duties for the past year and this action will add funding for this classification. Human Resources will determine if the candidate is qualified for the position before formally reclassifying. The updated salary table will be completed by Human Resources and brought to the Council for approval in the coming months.

Assistant City Clerk (Reclass - Approx. Salary)				
82,880	87,024	91,375	95,944	100,741

- Add one Senior Plans Examiner - CDD relies on contract services for building and fire code plan review. These services have progressively become more expensive and less dependable, preventing Community Development from being able to provide the quality of service the City of Lodi residents deserve. Creating a Senior Plans Examiner position will not only allow the department to retain a substantial amount of revenue by keeping plan review services in house but also produce better quality reviews in a timelier manner. This position would also be responsible for training and developing new plans examiners to promote growth and sustainability creating less reliance on contract services in the future. The updated salary table will be completed by Human Resources and brought to the Council for approval in the coming months.

Senior Plans Examiner (ADD - Approx. Salary)				
91,607	91,819	96,410	101,230	106,292

- Reclass Program Coordinator to Recreation Manager (PRCS) - The incumbent has been performing higher-level duties for the past year and this action will add the classification. The total increased cost associated with reclassifying the position from Program Coordinator (Step 4) to Recreation Manager

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(Step 0) is \$12,700 annually. The department anticipates that increased revenue generated at Lodi Lake-driven by significant growth in entrance fees, rentals, passes, and overall visitation-will support and fully absorb this additional cost. Long-term funding will continue to be supported through the Parks, Recreation & Cultural Services operating budget and sustained revenue growth at Lodi Lake.

Budget and Fiscal Policy

Staff has included a red-line copy of the Fiscal and Budget Policy for recommended adoption, Attachment 3. The proposed changes were reviewed by the Finance Committee on January 28 and they recommend to approve the adoption of the updated Budget & Fiscal Policy, setting a new Pension Stabilization funding balance status at 70% and assigning fund balance to the Memorandum of Understanding cost increases. The last few years (FY 2022-23, FY 2023-24 and FY 2024-25), the fund balance has not been invested in Public Agency Retirement Services (PARS), the City’s pension trust. Although the City Treasurer has the authority to redirect these funds to the pension trust, it is recommended to approve the adoption of the updated Budget & Fiscal Policy, setting a new Pension Stabilization funding balance status at 70% and restricting fund balance to the memorandum of understanding cost increases. The fiscal year 2024-25 audit is expected to be completed and presented to Council in the coming weeks, where the fund balance will be recommended for the same goal. Table 13 shows the City’s current funding level:

Table 13

6/30/24 PERS Actuarial			
	Market Value Assets	Liability	Funded Ratio
Safety	\$ 163,202,177	\$ 268,772,115	60.7%
Miscellaneous	\$ 179,966,863	\$ 255,976,314	70.3%
All Plans	\$ 343,169,040	\$ 524,748,429	65.4%
PARS Balance 12/31/25	\$ 31,112,416	N/A	5.9%
Total Pension Funding	\$ 374,281,456	\$ 524,748,429	71.3%

Exhibit A, attached to this report, specifies the line item budget adjustments needed for all of the above recommended mid-year adjustments.

STRATEGIC VISION:

3A. Fiscal Health: Promote City's transparency & fiscal fluency.

FISCAL IMPACT:

Revenue and expenditure budget adjustments per Exhibit A to address staff recommendations.

FUNDING AVAILABLE:

The mid-year General Fund changes include a revenue appropriation decrease recommendation of \$188,530 and an expense appropriation increase of \$2,950,398. Expenditure requests shown in the tables above for Electric Utility, Community Development, Equipment Replacement, and Vehicle Replacement will come from those relevant fund balances.

Exhibit A
 Mid-Year Adjustments
 Fiscal Year 2025-2026

Account Number	Account Description	Current Budget	Mid-Year Adjustment	Mid-Year Revised Budget
Mid-Year Amendments				
CITY CLERK				
Salary & Benefits Expense Adjustment				
10005000.71001	Regular Employee Salary	\$ 301,780.00	\$ 3,020.00	\$ 304,800.00
10005000.71012	Medical Insurance	\$ 51,840.00	\$ 6,220.00	\$ 58,060.00
10005000.71021	Service Contribution-PERS	\$ 14,060.00	\$ 17,430.00	\$ 31,490.00
10005000.71023	Deferred Comp	\$ 2,400.00	\$ 20.00	\$ 2,420.00
10005000.71025	Unemployment Insurance	\$ 660.00	\$ 440.00	\$ 1,100.00
Total Salary & Benefit Expense Adjustments		\$ 370,740.00	\$ 27,130.00	\$ 397,870.00
Operational Expense Adjustment				
10005000.72450	Misc. Professional Services	\$ 83,860.00	\$ (53,860.00)	\$ 30,000.00
Total Operational Expense Adjustments		\$ 83,860.00	\$ (53,860.00)	\$ 30,000.00
CITY COUNCIL				
Operational Expense Adjustment				
10005001.72498	Legislative Advocacy	\$ -	\$ 70,000.00	\$ 70,000.00
		\$ -	\$ 70,000.00	\$ 70,000.00
CITY MANAGER & EDD				
Salary & Benefits Expense Adjustment				
10010000.71012	Medical Insurance	\$ 84,220.00	\$ 6,370.00	\$ 90,590.00
10010000.71021	Service Contribution-PERS	\$ 39,430.00	\$ 32,970.00	\$ 72,400.00
10010000.71025	Unemployment Insurance	\$ 2,000.00	\$ 370.00	\$ 2,370.00
		\$ 125,650.00	\$ 39,710.00	\$ 165,360.00
CITY ATTORNEY				
Salary & Benefits Expense Adjustment				
10015000.71001	Regular Employee Salary	\$ 758,000.00	\$ 20,880.00	\$ 778,880.00
10015000.71012	Medical Insurance	\$ 80,510.00	\$ 2,000.00	\$ 82,510.00
10015000.71021	Service Contribution-PERS	\$ 32,530.00	\$ 48,610.00	\$ 81,140.00
10015000.71023	Deferred Comp	\$ 15,840.00	\$ 730.00	\$ 16,570.00
10015000.71024	LI & AD & D	\$ 740.00	\$ 2,440.00	\$ 3,180.00
10015000.71025	Unemployment Insurance	\$ 1,650.00	\$ 520.00	\$ 2,170.00
10015100.71001	Regular Employee Salary	\$ 366,870.00	\$ 8,830.00	\$ 375,700.00
10015100.71012	Medical Insurance	\$ 50,890.00	\$ 13,200.00	\$ 64,090.00
10015100.71021	Service Contribution-PERS	\$ 15,500.00	\$ 23,790.00	\$ 39,290.00
10015100.71024	LI & AD & D	\$ 1,370.00	\$ 1,030.00	\$ 2,400.00
10015100.71025	Unemployment Insurance	\$ 810.00	\$ 180.00	\$ 990.00
Total Salary & Benefit Expense Adjustments		\$ 1,324,710.00	\$ 122,210.00	\$ 1,446,920.00
INTERNAL SERVICES				
Employee Benefits Revenue Adjustment				
65500000.59903	Chiropractic	\$ 85,800.00	\$ 24,200.00	\$ 110,000.00
65500000.59904	Life Insurance	\$ 135,000.00	\$ 85,000.00	\$ 220,000.00
Total Revenue Adjustments		\$ 220,800.00	\$ 109,200.00	\$ 330,000.00
Employee Benefits Expense Adjustment				
65522000.74004	Chiropractic Insurance	\$ 86,000.00	\$ 24,000.00	\$ 110,000.00
65522000.74051	Life Insurance	\$ 135,000.00	\$ 5,000.00	\$ 140,000.00
		\$ 221,000.00	\$ 29,000.00	\$ 250,000.00
Salary & Benefits Expense Adjustment				
10020000.71001	Regular Employee Salary	\$ 66,940.00	\$ 31,000.00	\$ 97,940.00
10020000.71012	Medical Insurance	\$ 8,390.00	\$ 12,230.00	\$ 20,620.00
10020000.71021	Service Contributions - PERS	\$ 3,740.00	\$ 23,900.00	\$ 27,640.00
10020000.71023	Deferred Comp	\$ -	\$ 1,040.00	\$ 1,040.00

Exhibit A
Mid-Year Adjustments
Fiscal Year 2025-2026

Account Number	Account Description	Current Budget	Mid-Year Adjustment	Mid-Year Revised Budget
10020100.71001	Regular Employee Salary	\$ 334,900.00	\$ 2,975.00	\$ 337,875.00
10020100.71012	Medical Insurance	\$ 56,450.00	\$ 5,780.00	\$ 62,230.00
10020100.71021	Service Contributions - PERS	\$ 14,150.00	\$ 21,180.00	\$ 353,330.00
10020100.71023	Deferred Comp	\$ 10,050.00	\$ 90.00	\$ 10,140.00
10020100.71024	LI & AD & D	\$ 560.00	\$ 1,770.00	\$ 2,330.00
10020100.71025	Unemployment Insurance	\$ 730.00	\$ 170.00	\$ 900.00
10020202.71001	Regular Employee Salary	\$ 695,470.00	\$ 26,500.00	\$ 721,970.00
10020202.71009	Incentive Pay	\$ 3,600.00	\$ 1,800.00	\$ 5,400.00
10020202.71012	Medical Insurance	\$ 148,100.00	\$ 5,140.00	\$ 153,240.00
10020202.71021	Service Contributions - PERS	\$ 38,580.00	\$ 36,100.00	\$ 74,680.00
10020202.71023	Deferred Comp	\$ 16,710.00	\$ 690.00	\$ 17,400.00
10020202.71024	LI & AD & D	\$ 970.00	\$ 2,170.00	\$ 3,140.00
10020202.71025	Unemployment Insurance	\$ 1,530.00	\$ 370.00	\$ 1,900.00
10020203.71002	Overtime	\$ 25,870.00	\$ 9,130.00	\$ 35,000.00
10020203.71012	Medical Insurance	\$ 185,750.00	\$ 18,000.00	\$ 203,750.00
10020203.71021	Service Contributions - PERS	\$ 49,130.00	\$ 39,170.00	\$ 88,300.00
10020203.71024	LI & AD & D	\$ 1,950.00	\$ 810.00	\$ 2,760.00
10020203.71025	Unemployment Insurance	\$ 1,890.00	\$ 430.00	\$ 2,320.00
10020300.71001	Regular Employee Salary	\$ 530,800.00	\$ (82,020.00)	\$ 448,780.00
10020300.71012	Medical Insurance	\$ 89,770.00	\$ 9,780.00	\$ 99,550.00
10020300.71021	Service Contributions - PERS	\$ 20,050.00	\$ 26,940.00	\$ 46,990.00
10020300.71024	LI & AD & D	\$ 950.00	\$ 860.00	\$ 1,810.00
10020400.71012	Medical Insurance	\$ 123,020.00	\$ 14,000.00	\$ 137,020.00
10020400.71021	Service Contributions - PERS	\$ 6,020.00	\$ 90,440.00	\$ 96,460.00
10020400.71024	LI & AD & D	\$ 2,300.00	\$ 1,120.00	\$ 3,420.00
Total Salary & Benefits Expense Adjustments		\$ 2,438,370.00	\$ 301,565.00	\$ 3,057,935.00
Operational Expense Adjustment				
10020203.72312	Bank Services	\$ 80,000.00	\$ 130,000.00	\$ 210,000.00
10020302.72450	Misc. Professional Services	\$ 138,500.00	\$ 21,500.00	\$ 160,000.00
Total Operational Expense Adjustments		\$ 218,500.00	\$ 151,500.00	\$ 370,000.00
POLICE				
Salary & Benefits Expense Adjustment				
10030001.71012	Medical Insurance	\$ 83,270.00	\$ 73,160.00	\$ 156,430.00
10030001.71021	Service Contribution - PERS	\$ 46,570.00	\$ 11,990.00	\$ 58,560.00
10030001.71024	LI & AD & D	\$ 780.00	\$ 1,320.00	\$ 2,100.00
10030001.71025	Unemployment Insurance	\$ 1,260.00	\$ 340.00	\$ 1,600.00
10031002.71001	Regular Employee Salary	\$ 310,970.00	\$ 6,630.00	\$ 317,600.00
10031002.71002	Overtime	\$ 17,250.00	\$ 12,750.00	\$ 30,000.00
10031002.71012	Medical Insurance	\$ 61,090.00	\$ 11,110.00	\$ 72,200.00
10031002.71021	Service Contribution - PERS	\$ 18,680.00	\$ 14,340.00	\$ 33,020.00
10031002.71023	Deferred Comp	\$ 6,830.00	\$ 190.00	\$ 7,020.00
10031002.71024	LI & AD & D	\$ 540.00	\$ 740.00	\$ 1,280.00
10031004.71001	Regular Employee Salary	\$ 2,140,290.00	\$ 112,780.00	\$ 2,253,070.00
10031004.71002	Overtime	\$ 143,320.00	\$ 50,000.00	\$ 193,320.00
10031004.71006	Longevity Pay	\$ 22,500.00	\$ 6,300.00	\$ 28,800.00
10031004.71007	Uniform Allowance	\$ 21,010.00	\$ 3,320.00	\$ 24,330.00
10031004.71012	Medical Insurance	\$ 386,670.00	\$ 32,250.00	\$ 418,920.00
10031004.71021	Service Contribution - PERS	\$ 154,580.00	\$ 79,680.00	\$ 234,260.00
10031004.71023	Deferred Comp	\$ 48,400.00	\$ 1,290.00	\$ 49,690.00
10031004.71024	LI & AD & D	\$ 1,930.00	\$ 340.00	\$ 2,270.00
10031004.71025	Unemployment Insurance	\$ 5,471.00	\$ 959.00	\$ 6,430.00
10031102.71001	Regular Employee Salary	\$ 120,390.00	\$ 11,620.00	\$ 132,010.00
10031102.71012	Medical Insurance	\$ 24,070.00	\$ 4,380.00	\$ 28,450.00
10031002.71023	Deferred Comp	\$ 3,610.00	\$ 350.00	\$ 3,960.00

Exhibit A
Mid-Year Adjustments
Fiscal Year 2025-2026

Account Number	Account Description	Current Budget	Mid-Year Adjustment	Mid-Year Revised Budget
10031102.71024	LI & AD & D	\$ 110.00	\$ 100.00	\$ 210.00
10031102.71025	Unemployment Insurance	\$ 260.00	\$ 80.00	\$ 340.00
10032000.71002	Overtime	\$ 982,540.00	\$ 300,000.00	\$ 1,282,540.00
10032000.71006	Longevity Pay	\$ 45,000.00	\$ 61,600.00	\$ 106,600.00
10032000.71007	Uniform Allowance	\$ 17,100.00	\$ 800.00	\$ 17,900.00
10032000.71010	Admin Leave Pay	\$ 112,370.00	\$ 10,000.00	\$ 122,370.00
10032000.71012	Medical Insurance	\$ 907,630.00	\$ 127,640.00	\$ 1,035,270.00
10032000.71021	Service Contribution - PERS	\$ 895,610.00	\$ 48,790.00	\$ 944,400.00
10032000.71023	Deferred Comp	\$ 181,050.00	\$ 4,120.00	\$ 185,170.00
10032000.71024	LI & AD & D	\$ 4,390.00	\$ 2,740.00	\$ 7,130.00
10032000.71025	Unemployment Insurance	\$ 16,406.00	\$ 2,884.00	\$ 19,290.00
10332000.71001	Regular Employee Salary	\$ 2,281,340.00	\$ 502,420.00	\$ 2,783,760.00
10332000.71012	Medical Insurance	\$ 393,980.00	\$ 48,430.00	\$ 442,410.00
10332000.71021	Service Contribution - PERS	\$ 396,630.00	\$ 24,890.00	\$ 421,520.00
10332000.71024	LI & AD & D	\$ 2,170.00	\$ 710.00	\$ 2,880.00
10332000.71025	Unemployment Insurance	\$ 6,720.00	\$ 770.00	\$ 7,490.00
Total Salary & Benefit Expense Adjustments		\$ 9,862,787.00	\$ 1,571,813.00	\$ 11,434,600.00
Operational Expense Adjustment				
64399100.77040	Vehicle Replacement	\$ 1,164,877.00	\$ 30,000.00	\$ 1,194,877.00
		\$ 1,164,877.00	\$ 30,000.00	\$ 1,194,877.00
Operational Revenue Adjustment				
10030001.56424	Police Training - POST	\$ 55,000.00	\$ (25,000.00)	\$ 30,000.00
Total Operational Revenue Adjustments		\$ 55,000.00	\$ (25,000.00)	\$ 30,000.00
FIRE				
Salary & Benefits Expense Adjustment				
10040001.71002	Part-time Salary	\$ -	\$ 28,770.00	\$ 28,770.00
10040001.71006	Longevity Pay	\$ 3,000.00	\$ 7,300.00	\$ 10,300.00
10040001.71007	Uniform Allowance	\$ 950.00	\$ 950.00	\$ 1,900.00
10040001.71009	Incentive Pay	\$ 6,600.00	\$ 3,000.00	\$ 9,600.00
10040001.71012	Medical Insurance	\$ 99,030.00	\$ 15,540.00	\$ 114,570.00
10040001.71024	LI & AD & D	\$ 930.00	\$ 1,230.00	\$ 2,160.00
10040001.71025	Unemployment Insurance	\$ 1,620.00	\$ 310.00	\$ 1,930.00
10041000.71001	Regular Employee Salary	\$ 5,677,500.00	\$ 48,270.00	\$ 5,725,770.00
10041000.71002	Overtime	\$ 443,086.21	\$ (313,566.21)	\$ 129,520.00
10041000.71006	Longevity Pay	\$ 55,500.00	\$ 3,000.00	\$ 58,500.00
10041000.71007	Uniform Allowance	\$ 2,850.00	\$ 80.00	\$ 2,930.00
10041000.71012	Medical Insurance	\$ 816,100.00	\$ 85,660.00	\$ 901,760.00
10041000.71021	Service Contribution-PERS	\$ 895,660.00	\$ 29,790.00	\$ 925,450.00
10041000.71024	LI & AD & D	\$ 110.00	\$ 100.00	\$ 210.00
10041000.71025	Unemployment Insurance	\$ 12,490.00	\$ 2,590.00	\$ 15,080.00
10041100.71002	Overtime	\$ 172,500.00	\$ (149,400.00)	\$ 23,100.00
10341000.71001	Regular Employee Salary	\$ 628,890.00	\$ 121,110.00	\$ 750,000.00
10341000.71002	Overtime	\$ 1,820,210.00	\$ 72,240.00	\$ 1,892,450.00
10341000.71009	Incentive Pay	\$ 10,540.00	\$ 57,210.00	\$ 67,750.00
10341000.71012	Medical Insurance	\$ 109,180.00	\$ 40,130.00	\$ 149,310.00
10341000.71021	Service Contribution-PERS	\$ 113,850.00	\$ 9,400.00	\$ 123,250.00
10341000.71023	Deferred Comp	\$ 13,330.00	\$ 11,620.00	\$ 24,950.00
10341000.71025	Unemployment Insurance	\$ 1,380.00	\$ 380.00	\$ 1,760.00
Total Salary & Benefit Expense Adjustments		\$ 10,885,306.21	\$ 75,713.79	\$ 10,961,020.00
Operational Revenue Adjustment				
10040001.56004	Federal Grants	\$ 529,370.00	\$ (492,370.00)	\$ 37,000.00
10040001.56509	Weed Abatement	\$ 10,000.00	\$ (9,850.00)	\$ 150.00
10040001.57101	Site Planning	\$ 5,000.00	\$ (3,500.00)	\$ 1,500.00

Exhibit A
Mid-Year Adjustments
Fiscal Year 2025-2026

Account Number	Account Description	Current Budget	Mid-Year Adjustment	Mid-Year Revised Budget
10040001.57104	State Mandated Inspections	\$ 90,000.00	\$ (11,000.00)	\$ 79,000.00
10040001.57105	Misc. Charges & Fees	\$ 16,500.00	\$ (9,500.00)	\$ 7,000.00
10040001.57106	Operating Permits	\$ 40,000.00	\$ (40,000.00)	\$ -
10041100.57107	Strike Team Reimbursements	\$ 200,000.00	\$ (160,000.00)	\$ 40,000.00
Total Operational Revenue Adjustments		\$ 890,870.00	\$ (726,220.00)	\$ 164,650.00
Operational Expense Adjustment				
10041000.72358	Training and Education	\$ 100,190.57	\$ (20,691.00)	\$ 79,499.57
10341000.72306	Safety Equipment	\$ 34,600.00	\$ 35,400.00	\$ 70,000.00
10341000.72358	Training and Education	\$ 22,000.00	\$ (22,000.00)	\$ -
64102000.77030	Equipment Replacement	\$ 40,000.00	\$ 20,000.00	\$ 60,000.00
Total Operational Expense Adjustments		\$ 196,790.57	\$ 12,709.00	\$ 209,499.57
PUBLIC WORKS				
Salary & Benefits Expense Adjustment				
10050001.71009	Incentive Pay	\$ -	\$ 600.00	\$ 600.00
10050001.71012	Medical Insurance	\$ 66,650.00	\$ 10,500.00	\$ 77,150.00
10050001.71021	Service Contributions - PERS	\$ 22,150.00	\$ 21,650.00	\$ 43,800.00
10050001.71023	Deferred Comp	\$ 12,590.00	\$ 40.00	\$ 12,630.00
10050001.71024	LI & AD & D	\$ 1,590.00	\$ 230.00	\$ 1,820.00
10050001.71025	Unemployment Insurance	\$ 930.00	\$ 110.00	\$ 1,040.00
10050103.71001	Regular Employee Salary	\$ 102,370.00	\$ (16,460.00)	\$ 85,910.00
10050103.71012	Medical Insurance	\$ 8,310.00	\$ 8,090.00	\$ 16,400.00
10050103.71021	Service Contributions - PERS	\$ 7,520.00	\$ 1,650.00	\$ 9,170.00
10050103.71012	LI & AD & D	\$ 120.00	\$ 160.00	\$ 280.00
10050500.71001	Regular Employee Salary	\$ 1,968,270.00	\$ 60,440.00	\$ 2,028,710.00
10050500.71012	Medical Insurance	\$ 295,470.00	\$ 27,810.00	\$ 323,280.00
10050500.71021	Service Contributions - PERS	\$ 127,930.00	\$ 81,690.00	\$ 209,620.00
10050500.71023	Deferred Comp	\$ 54,760.00	\$ 3,950.00	\$ 58,710.00
10050500.71024	LI & AD & D	\$ 3,760.00	\$ 5,050.00	\$ 8,810.00
10050500.71025	Unemployment Insurance	\$ 4,330.00	\$ 1,400.00	\$ 5,730.00
10050500.71188	Personnel Transfer Recovery	\$ 830,000.00	\$ 5,000.00	\$ 835,000.00
10051000.71002	Overtime	\$ 15,080.00	\$ 4,920.00	\$ 20,000.00
10051000.71012	Medical Insurance	\$ 69,400.00	\$ 15,420.00	\$ 84,820.00
10051000.71021	Service Contributions - PERS	\$ 21,230.00	\$ 21,300.00	\$ 42,530.00
10051000.71023	Deferred Comp	\$ 7,760.00	\$ 190.00	\$ 7,950.00
10051000.71024	LI & AD & D	\$ 990.00	\$ 370.00	\$ 1,360.00
10051000.71025	Unemployment Insurance	\$ 920.00	\$ 160.00	\$ 1,080.00
30156001.71003	Part-Time Salary	\$ 76,050.00	\$ (29,250.00)	\$ 46,800.00
30156001.71009	Incentive Pay	\$ 36,600.00	\$ 3,000.00	\$ 39,600.00
30156001.71012	Medical Insurance	\$ 319,020.00	\$ 30,140.00	\$ 349,160.00
30156001.71021	Service Contributions - PERS	\$ 70,410.00	\$ 99,790.00	\$ 170,200.00
30156001.71023	Deferred Comp	\$ 34,410.00	\$ 1,440.00	\$ 35,850.00
30156001.71024	LI & AD & D	\$ 2,780.00	\$ 200.00	\$ 2,980.00
53053003.71008	Meal Allowance	\$ 2,000.00	\$ 2,200.00	\$ 4,200.00
53053003.71012	Medical Insurance	\$ 239,680.00	\$ 37,780.00	\$ 277,460.00
53053003.71021	Service Contributions - PERS	\$ 64,740.00	\$ 94,700.00	\$ 159,440.00
53053003.71023	Deferred Comp	\$ 29,150.00	\$ 2,570.00	\$ 31,720.00
53053003.71025	Unemployment Insurance	\$ 3,120.00	\$ 940.00	\$ 4,060.00
53053004.71025	Unemployment Insurance	\$ 100.00	\$ 110.00	\$ 210.00
53053005.71025	Unemployment Insurance	\$ 30.00	\$ 20.00	\$ 50.00
53053007.71012	Medical Insurance	\$ 830,170.00	\$ 100,070.00	\$ 930,240.00
53053007.71021	Service Contributions - PERS	\$ 222,610.00	\$ 218,810.00	\$ 441,420.00
53053007.71025	Unemployment Insurance	\$ 9,150.00	\$ 1,570.00	\$ 10,720.00
56052005.71021	Service Contributions - PERS	\$ 24,570.00	\$ 25,250.00	\$ 49,820.00
56052005.71023	Deferred Comp	\$ 14,110.00	\$ 340.00	\$ 14,450.00

Exhibit A
Mid-Year Adjustments
Fiscal Year 2025-2026

Account Number	Account Description	Current Budget	Mid-Year Adjustment	Mid-Year Revised Budget
56052005.71024	LI & AD & D	\$ 570.00	\$ 770.00	\$ 1,340.00
56052006.71012	Medical Insurance	\$ 24,070.00	\$ 2,890.00	\$ 26,960.00
56052006.71021	Service Contributions - PERS	\$ 2,610.00	\$ 2,870.00	\$ 5,480.00
56052006.71023	Deferred Comp	\$ 1,550.00	\$ 80.00	\$ 1,630.00
56052006.71025	Unemployment Insurance	\$ 110.00	\$ 100.00	\$ 210.00
60054101.71012	Medical Insurance	\$ 53,060.00	\$ 11,060.00	\$ 64,120.00
60054101.71015	Medicare Insurance	\$ 5,440.00	\$ 100.00	\$ 5,540.00
60054101.71021	Service Contributions - PERS	\$ 2,380.00	\$ 36,960.00	\$ 39,340.00
60054101.71024	LI & AD & D	\$ 570.00	\$ 880.00	\$ 1,450.00
60054101.71025	Unemployment Insurance	\$ 800.00	\$ 110.00	\$ 910.00
65055000.71008	Meal Allowance	\$ -	\$ 400.00	\$ 400.00
65055000.71009	Incentive Pay	\$ 4,800.00	\$ 4,800.00	\$ 9,600.00
65055000.71012	Medical Insurance	\$ 159,170.00	\$ 15,060.00	\$ 174,230.00
65055000.71015	Medicare Insurance	\$ 10,740.00	\$ 96,660.00	\$ 107,400.00
65055000.71021	Service Contributions - PERS	\$ 33,830.00	\$ 43,690.00	\$ 77,520.00
65055000.71024	LI & AD & D	\$ 1,240.00	\$ 410.00	\$ 1,650.00
65055000.71025	Unemployment Insurance	\$ 1,610.00	\$ 270.00	\$ 1,880.00
Total Salary & Benefit Expense Adjustments		\$ 5,903,380.00	\$ 1,061,060.00	\$ 6,964,440.00
Operational Revenue Adjustment				
10050500.57500	Engineering Fees	\$ 381,790.00	\$ 118,210.00	\$ 500,000.00
30300000.56037	Reimb-Measure K	\$ -	\$ 494,780.00	\$ 494,780.00
30700000.56402	Other Federal Grants	\$ -	\$ 1,501,700.00	\$ 1,501,700.00
31400000.57501	Development Impact Fees	\$ 804,020.00	\$ (304,020.00)	\$ 500,000.00
53000000.55024	Revenue-Other	\$ -	\$ 36,000.00	\$ 36,000.00
53000000.58891	Customer Accounts	\$ 18,166,040.00	\$ 775,870.00	\$ 18,941,910.00
53500000.57501	Development Impact Fees	\$ 31,420.00	\$ 118,580.00	\$ 150,000.00
56000000.58890	City Accounts	\$ 476,020.00	\$ 49,630.00	\$ 525,650.00
56000000.58891	Customer Accounts	\$ 13,836,700.00	\$ 722,160.00	\$ 14,558,860.00
56000000.58910	Water Tap Fees	\$ 40,000.00	\$ 10,000.00	\$ 50,000.00
56000000.59525	Water Meter Installation	\$ 75,000.00	\$ 225,000.00	\$ 300,000.00
56100000.59596	DBCP Settlements	\$ 360,000.00	\$ (19,610.00)	\$ 340,390.00
56200000.57506	Non-potable water	\$ 181,510.00	\$ (56,510.00)	\$ 125,000.00
Total Operational Revenue Adjustments		\$ 34,352,500.00	\$ 3,671,790.00	\$ 38,024,290.00
Operational Expense Adjustment				
10051000.72534	Repairs to Buildings	\$ 75,000.00	\$ 75,000.00	\$ 150,000.00
10051100.72499	Misc Contract Services	\$ -	\$ 11,750.00	\$ 11,750.00
60054105.72534	Repairs to Buildings	\$ 15,000.00	\$ 5,000.00	\$ 20,000.00
Total Operational Expense Adjustments		\$ 90,000.00	\$ 91,750.00	\$ 181,750.00
ELECTRIC UTILITY				
Salary & Benefits Expense Adjustment				
50060001.71012	Medical Insurance	\$ 208,560.00	\$ 26,990.00	\$ 235,550.00
50060001.71021	Service Contribution-PERS	\$ 98,170.00	\$ 69,620.00	\$ 167,790.00
50060001.71025	Unemployment Insurance	\$ 3,470.00	\$ 880.00	\$ 4,350.00
50061000.71012	Medical Insurance	\$ 76,660.00	\$ 4,940.00	\$ 81,600.00
50061000.71021	Service Contribution-PERS	\$ 64,530.00	\$ 16,460.00	\$ 80,990.00
50061000.71024	LI & AD & D	\$ 2,400.00	\$ 1,640.00	\$ 4,040.00
50061000.71025	Unemployment Insurance	\$ 1,760.00	\$ 500.00	\$ 2,260.00
50061500.71007	Uniform Allowance	\$ 600.00	\$ 900.00	\$ 1,500.00
50061500.71012	Medical Insurance	\$ 157,780.00	\$ 17,330.00	\$ 175,110.00
50061500.71021	Service Contribution-PERS	\$ 123,180.00	\$ 53,660.00	\$ 176,840.00
50061500.71024	LI & AD & D	\$ 2,380.00	\$ 5,430.00	\$ 7,810.00
50061500.71025	Unemployment Insurance	\$ 3,580.00	\$ 720.00	\$ 4,300.00
50061510.71007	Uniform Allowance	\$ 600.00	\$ 900.00	\$ 1,500.00

Exhibit A
Mid-Year Adjustments
Fiscal Year 2025-2026

Account Number	Account Description	Current Budget	Mid-Year Adjustment	Mid-Year Revised Budget
50061510.71012	Medical Insurance	\$ 56,930.00	\$ 5,620.00	\$ 62,550.00
50061510.71021	Service Contribution-PERS	\$ 28,970.00	\$ 7,410.00	\$ 36,380.00
50061510.71023	Deferred Comp	\$ 10,700.00	\$ 80.00	\$ 10,780.00
50061510.71024	LI & AD & D	\$ 1,240.00	\$ 1,600.00	\$ 2,840.00
50061510.71025	Unemployment Insurance	\$ 780.00	\$ 250.00	\$ 1,030.00
50062000.71012	Medical Insurance	\$ 75,900.00	\$ 9,110.00	\$ 85,010.00
50062000.71021	Service Contribution-PERS	\$ 15,410.00	\$ 16,710.00	\$ 32,120.00
50062000.71023	Deferred Comp	\$ 6,960.00	\$ 310.00	\$ 7,270.00
50062000.71025	Unemployment Insurance	\$ 660.00	\$ 340.00	\$ 1,000.00
50064100.71012	Medical Insurance	\$ 327,840.00	\$ 26,440.00	\$ 354,280.00
50064100.71021	Service Contribution-PERS	\$ 223,060.00	\$ 61,810.00	\$ 284,870.00
50064100.71024	LI & AD & D	\$ 5,920.00	\$ 3,250.00	\$ 9,170.00
50064200.71007	Uniform Allowance	\$ 1,120.00	\$ 1,880.00	\$ 3,000.00
50064200.71012	Medical Insurance	\$ 97,860.00	\$ 8,430.00	\$ 106,290.00
50064200.71021	Service Contribution-PERS	\$ 80,110.00	\$ 19,770.00	\$ 99,880.00
50064200.71024	LI & AD & D	\$ 2,790.00	\$ 730.00	\$ 3,520.00
50064400.71007	Uniform Allowance	\$ 400.00	\$ 50.00	\$ 450.00
50064400.71021	Service Contribution-PERS	\$ 27,280.00	\$ 6,720.00	\$ 34,000.00
50064400.71023	Deferred Comp	\$ 10,120.00	\$ 10.00	\$ 10,130.00
50064400.71024	LI & AD & D	\$ 1,120.00	\$ 900.00	\$ 2,020.00
50064500.71012	Medical Insurance	\$ 52,360.00	\$ 6,050.00	\$ 58,410.00
50064500.71021	Service Contribution-PERS	\$ 49,300.00	\$ 12,110.00	\$ 61,410.00
50064500.71024	LI & AD & D	\$ 1,620.00	\$ 1,390.00	\$ 3,010.00
50064500.71025	Unemployment Insurance	\$ 1,340.00	\$ 390.00	\$ 1,730.00
50199000.71024	LI & AD & D	\$ -	\$ 6,700.00	\$ 6,700.00
50199000.71025	Unemployment Insurance	\$ -	\$ 3,380.00	\$ 3,380.00
Total Salary & Benefit Expense Adjustments		\$ 1,823,460.00	\$ 401,410.00	\$ 2,224,870.00
Operational Expense Adjustment				
50060500.72901	Generation	\$ 30,117,170.00	\$ 2,808,130.00	\$ 32,925,300.00
50060500.72902	Transmission	\$ 15,373,900.00	\$ (1,106,060.00)	\$ 14,267,840.00
50060500.72903	Management Services	\$ 2,034,480.00	\$ (301,240.00)	\$ 1,733,240.00
50061500.72369	Software Licensing Cost	\$ 500,900.00	\$ (198,900.00)	\$ 302,000.00
50199000.77020	Capital	\$ 5,638,239.00	\$ 982,060.00	\$ 6,620,299.00
50362500.76220	Operating Transfer Out	\$ -	\$ 883,330.00	\$ 883,330.00
50862500.72901	Generation	\$ 6,483,550.00	\$ 208,950.00	\$ 6,692,500.00
Total Operational Expense Adjustments		\$ 60,148,239.00	\$ 3,276,270.00	\$ 63,424,509.00
Operational Revenue Adjustment				
50000000.54332	Investment Earnings	500,000	200,000	700,000
50000000.55103	Interfund Credit	269,000	93,740	362,740
50000000.58781	Large Industrial-G5	2,317,950	242,010	2,559,960
50000000.58800	Domestic-Residential-EA	30,331,790	(509,090)	29,822,700
50000000.58801	EA Energy cost Adjustment	5,558,470	776,380	6,334,850
50000000.58802	Res. Low Income Disc ED	1,046,120	364,530	1,410,650
50000000.58803	ED Energy Cost Adjustment	540,200	107,210	647,410
50000000.58804	Domestic Mobile Home Pks-EM	343,370	(25,140)	318,230
50000000.58805	EM Energy Cost Adjustment	89,820	11,720	101,540
50000000.58806	Small Commercial-G1	7,955,030	(132,510)	7,822,520
50000000.58807	G1 Energy Cost Adjustment	1,494,930	309,560	1,804,490
50000000.58808	Large Commercial-G2	17,411,260	(329,830)	17,081,430
50000000.58809	G2 Energy Cost Adjustment	3,949,240	813,550	4,762,790
50000000.58810	Small Industrial-G3	1,417,410	5,610	1,423,020
50000000.58811	G3 Energy Cost Adjustment	277,340	82,880	360,220
50000000.55812	Medium Industrial-G4	4,417,810	(854,220)	3,563,590
50000000.58813	G4 Energy Cost Adjustment	1,081,940	7,590	1,089,530

Exhibit A
 Mid-Year Adjustments
 Fiscal Year 2025-2026

Account Number	Account Description	Current Budget	Mid-Year Adjustment	Mid-Year Revised Budget
50000000.58815	G5 Energy Cost Adjustment	747,240	270,270	1,017,510
50000000.58816	Large Industrial Option	5,468,100	(248,150)	5,219,950
50000000.58817	I1 Energy Cost Adjustment	1,786,670	416,420	2,203,090
50000000.58822	City Accounts-ES	1,698,170	(13,050)	1,685,120
50000000.58823	ES energy Cost Adjustment	539,010	105,790	644,800
50100000.50001	Operating Transfer In	-	883,330	883,330
50300000.59543	LCFS Proceeds	120,000	883,330	1,003,330
50400000.58881	Public Benefits	2,063,600	(44,020)	2,019,580
		<u>91,424,470</u>	<u>3,417,910</u>	<u>94,842,380</u>

PRCS

Salary & Benefits Expense Adjustment

20070001.71002	Overtime	\$ -	\$ 1,440.00	\$ 1,440.00
20070001.71009	Incentive Pay	\$ 1,800.00	\$ 1,400.00	\$ 3,200.00
20070001.71012	Medical Insurance	\$ 49,950.00	\$ 4,000.00	\$ 53,950.00
20070001.71021	Service Contribution-PERS	\$ 27,350.00	\$ 25,010.00	\$ 52,360.00
20070001.71023	Deferred Comp	\$ 12,150.00	\$ 920.00	\$ 13,070.00
20070001.71024	LI & AD & D	\$ 850.00	\$ 1,930.00	\$ 2,780.00
20070001.71025	Unemployment Insurance	\$ 1,390.00	\$ 190.00	\$ 1,580.00
20071001.71001	Regular Employee Salary	\$ 60,920.00	\$ 460.00	\$ 61,380.00
20071001.71021	Service Contribution-PERS	\$ 3,090.00	\$ 3,090.00	\$ 6,180.00
20071001.71023	Deferred Comp	\$ 1,810.00	\$ 30.00	\$ 1,840.00
20071001.71032	Cell Stipend	\$ -	\$ 600.00	\$ 600.00
20071200.71021	Service Contribution-PERS	\$ 2,950.00	\$ 2,860.00	\$ 5,810.00
20071402.71001	Regular Employee Salary	\$ 77,020.00	\$ 5,470.00	\$ 82,490.00
20071402.71012	Medical Insurance	\$ 24,070.00	\$ 2,890.00	\$ 26,960.00
20071402.71021	Service Contribution-PERS	\$ 3,190.00	\$ 5,270.00	\$ 8,460.00
20071402.71023	Deferred Comp	\$ 2,310.00	\$ 160.00	\$ 2,470.00
20072100.71001	Regular Employee Salary	\$ 125,160.00	\$ 930.00	\$ 126,090.00
20072100.71021	Service Contribution-PERS	\$ 8,840.00	\$ 4,350.00	\$ 13,190.00
20072100.71023	Deferred Comp	\$ 3,720.00	\$ 60.00	\$ 3,780.00
20072202.71001	Regular Employee Salary	\$ 968,960.00	\$ 37,250.00	\$ 1,006,210.00
20072202.71007	Uniform Allowance	\$ 4,730.00	\$ 170.00	\$ 4,900.00
20072202.71012	Medical Insurance	\$ 251,670.00	\$ 45,700.00	\$ 297,370.00
20072202.71021	Service Contribution-PERS	\$ 40,040.00	\$ 63,620.00	\$ 103,660.00
20072202.71023	Deferred Comp	\$ 17,430.00	\$ 960.00	\$ 18,390.00
20072202.72203	Cellular Phone Charges	\$ 13,000.00	\$ 4,000.00	\$ 17,000.00
20072300.71001	Regular Employee Salary	\$ 79,480.00	\$ 2,600.00	\$ 82,080.00
20072300.71012	Medical Insurance	\$ 9,260.00	\$ 1,110.00	\$ 10,370.00
20072300.71021	Service Contribution-PERS	\$ 3,250.00	\$ 5,050.00	\$ 8,300.00
20072300.71023	Deferred Comp	\$ 2,380.00	\$ 80.00	\$ 2,460.00
20072300.71025	Unemployment Insurance	\$ 170.00	\$ 60.00	\$ 230.00
20073001.71021	Service Contribution-PERS	\$ 22,070.00	\$ 5,450.00	\$ 27,520.00
20073001.71025	Unemployment Insurance	\$ 690.00	\$ 160.00	\$ 850.00
20073402.71001	Regular Employee Salary	\$ 64,710.00	\$ 490.00	\$ 65,200.00
20073402.71002	Overtime	\$ -	\$ 6,740.00	\$ 6,740.00
20073402.71012	Medical Insurance	\$ 9,260.00	\$ 1,110.00	\$ 10,370.00
20073402.71021	Service Contribution-PERS	\$ 3,280.00	\$ 3,290.00	\$ 6,570.00
20073402.71023	Deferred Comp	\$ 1,940.00	\$ 20.00	\$ 1,960.00
20073402.71032	Cell Stipend	\$ -	\$ 600.00	\$ 600.00
20073500.71032	Cell Stipend	\$ -	\$ 600.00	\$ 600.00
20073600.71001	Regular Employee Salary	\$ 64,720.00	\$ 480.00	\$ 65,200.00
20073600.71012	Medical Insurance	\$ 9,260.00	\$ 11,940.00	\$ 21,200.00
20073600.71012	Medicare Insurance	\$ 930.00	\$ 130.00	\$ 1,060.00
20073600.71021	Service Contribution-PERS	\$ 3,280.00	\$ 8,820.00	\$ 12,100.00
	Total Salary & Benefit Expense Adjustments	<u>\$ 1,977,080.00</u>	<u>\$ 261,490.00</u>	<u>\$ 2,238,570.00</u>

Exhibit A
Mid-Year Adjustments
Fiscal Year 2025-2026

Account Number	Account Description	Current Budget	Mid-Year Adjustment	Mid-Year Revised Budget
COMMUNITY DEVELOPMENT				
Salary & Benefits Expense Adjustment				
10088000.71021	Service Contribution - PERS	\$ 12,530.00	\$ 13,790.00	\$ 26,320.00
10088000.71025	Unemployment Insurance	\$ 530.00	\$ 70.00	\$ 600.00
27080000.71001	Regular Employee Salary	\$ 716,650.00	\$ 2,070.00	\$ 718,720.00
27080000.71012	Medical Insurance	\$ 117,540.00	\$ 7,870.00	\$ 125,410.00
27080000.71021	Service Contribution - PERS	\$ 39,740.00	\$ 34,370.00	\$ 74,110.00
27080000.71025	Unemployment Insurance	\$ 1,580.00	\$ 426.00	\$ 2,006.00
27081000.71001	Regular Employee Salary	\$ 802,270.00	\$ 21,760.00	\$ 824,030.00
27081000.71012	Medical Insurance	\$ 142,410.00	\$ 1,670.00	\$ 144,080.00
27081000.71021	Service Contribution - PERS	\$ 46,810.00	\$ 37,670.00	\$ 84,480.00
27081000.71024	LI & AD & D	\$ 1,130.00	\$ 1,010.00	\$ 2,140.00
27082000.71001	Regular Employee Salary	\$ 351,900.00	\$ (9,870.00)	\$ 342,030.00
27082000.71012	Medical Insurance	\$ 72,200.00	\$ 2,000.00	\$ 74,200.00
27082000.71021	Service Contribution - PERS	\$ 21,690.00	\$ 14,070.00	\$ 35,760.00
27082000.71024	LI & AD & D	\$ 600.00	\$ 1,270.00	\$ 1,870.00
Total Salary & Benefit Expense Adjustments		\$ 2,327,580.00	\$ 128,176.00	\$ 2,455,756.00
Operational Expense Adjustment				
27080000.76220	Operating Transfer Out	\$ 759,100.00	\$ 1,500,000.00	\$ 2,259,100.00
27082000.72450	Misc. Professional Services	\$ 1,700,000.00	\$ (1,500,000.00)	\$ 200,000.00
27085999.77020	Capital Projects	\$ -	\$ 1,500,000.00	\$ 1,500,000.00
		\$ 2,459,100.00	\$ 1,500,000.00	\$ 3,959,100.00
Operational Expense Adjustment				
27085000.50001	Operating Transfer In	\$ -	\$ 1,500,000.00	\$ 1,500,000.00
		\$ -	\$ 1,500,000.00	\$ 1,500,000.00
LIBRARY				
Salary & Benefits Expense Adjustment				
10390000.71021	Service Contribution-PERS	\$ 5,570.00	\$ 2,540.00	\$ 8,110.00
10390000.71024	LI & AD & D	\$ 120.00	\$ 590.00	\$ 710.00
10390000.71025	Unemployment Insurance	\$ 170.00	\$ 40.00	\$ 210.00
12090000.71021	Service Contribution-PERS	\$ 28,730.00	\$ 35,760.00	\$ 64,490.00
12090000.71024	LI & AD & D	\$ 1,430.00	\$ 760.00	\$ 2,190.00
Total Salary & Benefit Expense Adjustments		\$ 36,020.00	\$ 39,690.00	\$ 75,710.00
NON-DEPARTMENTAL				
Operational Expense Adjustment				
10095000.72213	Water	\$ 476,210.00	\$ 53,730.00	\$ 529,940.00
10095000.72214	Sewer	\$ 476,210.00	\$ 53,730.00	\$ 529,940.00
10095000.72450	Misc Professional Services	\$ 587,560.00	\$ 233,110.00	\$ 820,670.00
10095000.72499	Misc Contract Services	\$ 21,000.00	\$ (21,000.00)	\$ -
Total Operational Expense Adjustments		\$ 1,560,980.00	\$ 319,570.00	\$ 1,880,550.00
Operational Revenue Adjustment				
10095000.5000	Interfund Credit	\$ 11,565,457.00	\$ 233,110.00	\$ 11,798,567.00
10095000.5103	Sales & Use Tax	\$ 17,150,910.00	\$ (1,012,130.00)	\$ 16,138,780.00
10095000.5433	Investment Earnings	\$ 1,700,000.00	\$ 1,300,000.00	\$ 3,000,000.00
10095000.5650	State Mandates SB90	\$ 126,500.00	\$ (76,500.00)	\$ 50,000.00
		\$ 30,542,867.00	\$ 444,480.00	\$ 30,987,347.00
SELF-INSURANCE				
Self-Insurance Expense Adjustment				
66525100.74031	ISF Workers comp	\$ 2,000,000.00	\$ 200,000.00	\$ 2,200,000.00
		\$ 2,000,000.00	\$ 200,000.00	\$ 2,200,000.00
CAPITAL OUTLAY				
43500000.57501	Development Impact Fees	\$ 214,310.00	\$ (39,310.00)	\$ 175,000.00
43600000.57501	Development Impact Fees	\$ 140,940.00	\$ (15,940.00)	\$ 125,000.00

Exhibit A
 Mid-Year Adjustments
 Fiscal Year 2025-2026

Account Number	Account Description	Current Budget	Mid-Year Adjustment	Mid-Year Revised Budget
43700000.57501	Development Impact Fees	\$ 1,257,350.00	\$ (357,350.00)	\$ 900,000.00
43800000.57501	Development Impact Fees	\$ 239,580.00	\$ (49,580.00)	\$ 190,000.00
		\$ 1,852,180.00	\$ (462,180.00)	\$ 1,390,000.00

Capital Improvement Program - Maintenance

FY 2025-2026

Maintenance Project Title: Boiler Replacements		Munis Project Code:			CiP List Proj #				
Section I: Description		District Nos:	3	Project Length	Priority				
Boiler replacements at Library, Police Station and Carnegie Forum									
Justification/factor driving project									
Boilers are aged, beyond repair and parts are no longer available									
Additional Information									
Section II		Estimated Project Costs							
Expenditure	Prior Years	FY 24/25 Estimate	FY 25/26 Budget	FY 26/27	FY 27/28	FY 28/29	FY 29/30	Future Yrs	Total
Contracts	\$ -		\$ 145,000					N/A	\$ 145,000
Contracts-(Mid Year Additional request)	\$ -		40,000					N/A	\$ 40,000
	\$ -							N/A	\$ -
	\$ -							N/A	\$ -
Total Capital Costs	\$ -	\$ -	\$ 185,000	\$ -	\$ -	\$ -	\$ -	N/A	\$ 185,000
Section III		Funding Sources/Methods of Financing							
Funding Source(s)	Prior Years	FY 24/25 Estimate	FY 25/26 Budget	FY 26/27	FY 27/28	FY 28/29	FY 29/30	Future Yrs	Total
431 - Capital Outlay/General Fund	\$ -		\$ 185,000					N/A	\$ 185,000
	\$ -							N/A	\$ -
	\$ -							N/A	\$ -
	\$ -							N/A	\$ -
Total Project Financing	\$ -	\$ -	\$ 185,000	\$ -	\$ -	\$ -	\$ -	N/A	\$ 185,000

Capital Improvement Plan

FY 2025-2026

Project Title: General Plan		Munis Project Code:		CIP List Proj #New					
Section I: Description			District Nos:	Project Length	Priority	Normal			
Moving \$1.5M for the Gernal Plan to Captial Project at Mid-Year.									
Justification/factor driving project									
The General Plan serves as a blueprint for the future, prescribing policy goals and objectives to shape and guide the physical development of the City. Typically, a General Plan is designed to address the issues facing the City for the next 20 years. As we approach the 20-year milestone for the General Plan, we are making it a Capital Project.									
Additional Information									
27085000.77020- Capital Projects Operating Transfer In								27085000.50001-	
Section II: Estimated Project Costs									
Expenditure	Prior Years	FY 24/25 Estimate	FY 25/26 Budget	FY 26/27	FY 27/28	FY 28/29	FY 29/30	Future Yrs	Total
Contracts	\$ -		\$ 1,500,000	\$ -					\$ 1,500,000
	\$ -								\$ -
	\$ -								\$ -
	\$ -								\$ -
	\$ -								\$ -
Total Capital Costs	\$ -	\$ -	\$ 1,500,000	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 1,500,000
Section III: Funding Sources/Methods of Financing									
Funding Source(s)	Prior Years	FY 24/25 Estimate	FY 25/26 Budget	FY 25/26	FY 26/27	FY 27/28	FY 29/30	Future Yrs	Total
270 - Community Development	\$ -		\$ 1,500,000						\$ 1,500,000
	\$ -								\$ -
	\$ -								\$ -
	\$ -								\$ -
Total Project Financing	\$ -	\$ -	\$ 1,500,000	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 1,500,000

Capital Improvement Program - Maintenance

FY 2024-2025

Maintenance Project Title: Substation Intrusive Maintenance Work				Munis Project Code: EUCP-23001				#245	
Section I:Description			District Nos: Citywide	Project Length	Ongoing	Priority	Normal		
Substation maintenance including but not limited to: substation power transformer testing; DGA oil testing for power transformers and load tap changers (LTCs) and materials/equipment not covered or tracked as part of a specific project. Also provides for LTC testing in year five (5) of the cycle and other miscellaneous substation maintenance and improvement projects to address access, safety and security.									
Justification/factor driving project									
Provides more accurate tracking and record keeping for annual reports and maintenance records. Will provide critical information on transformer condition and lifespan for future replacement planning. Provides for a five (5) year cycle of LTC inspections and addresses miscellaneous facility improvements.									
Additional Information									
Provides a schedule for complete testing of two (2) substation power transformers per year for four (4) years and a year of reprieve. Year five (5) of the cycle can be utilized for LTC inspections. Improves substation facility safety and security by adding concrete walkways, switch grounding pads, security cameras, lighting, and replacing old fixtures inside control room and perimeter lighting. Additional annual items, specific to substations include annual SF6 gas leak detection, annual SF6 gas testing and training, online DGA oil and gas analysis and further understanding to determine equipment health as well as SF6 gas removal, handling and disposal if necessary. \$98,730 ADDED FOR FY 26 MIDYEAR TO ACCOUNT FOR UNEXPECTED WORK AT INDUSTRIAL SUB AND ADDITIONAL \$20K FOR UNANTICIPATED THROUGH JUNE 30, 2026.									
Section II		Estimated Project Costs							
Expenditure	Prior Years	FY 23/24 Estimate	FY 24/25 Budget	FY 25/26	FY 26/27	FY 27/28	FY 28/29	Future Yrs	Total
Internal Staff	\$ 154,683	\$ 40,000	\$ 140,000	\$ 194,365	\$ 100,000	\$ 100,000	\$ 100,000		\$ 829,048
Miscellaneous	\$ 147,586	\$ 40,000	\$ 125,000	\$ 189,365	\$ 100,000	\$ 100,000	\$ 100,000		\$ 801,951
Contracts	\$ -		\$ 37,500	\$ 75,000	\$ 75,000	\$ 75,000	\$ 75,000		\$ 337,500
Total Capital Costs	\$ 302,270	\$ 80,000	\$ 302,500	\$ 458,730	\$ 275,000	\$ 275,000	\$ 275,000	\$ -	\$ 1,968,500
Section III		Funding Sources/Methods of Financing							
Funding Source(s)	Prior Years	FY 23/24 Estimate	FY 24/25 Budget	FY 25/26	FY 26/27	FY 27/28	FY 28/29	Future Yrs	Total
501 - EU Outlay Capital Reserve Fund	\$ 302,270	\$ 80,000	\$ 302,500	\$ 458,730	\$ 275,000	\$ 275,000	\$ 275,000		\$ 1,968,500
Total Project Financing	\$ 302,270	\$ 80,000	\$ 302,500	\$ 458,730	\$ 275,000	\$ 275,000	\$ 275,000	\$ -	\$ 1,968,500

Capital Improvement Plan

FY 2024-2025

Project Title:	Skatepark - New Planning Phase I & II	Munis Project Code:	PKCP-24004	#295					
Section I: Description	District Nos:	3	Project Length	Priority					
Phase I - Planning									
Justification/factor driving project									
Additional Information									
FY 24 Council Action 7/19/23; Reso 2023-154; \$175,000 for design, \$570,000 for construction (contingent upon securing additional funding) 12/6/23 12/6/2023: Requesting to reallocate \$220,000 from this project to fund the Lodi Lake Southside Improvements PKCP-22008 deficit leaving \$175,000 for design and \$350,000 for construction remaining for FY 23/24. 3/18/24: No funding moved to cover southside improvements. 12/12/2025: Midyear FY25 request. Due to Council's desire to unfund this project and fund Cricket, staff are requesting to reallocate \$175K for repairs to the existing skate park at Kofu Park and reallocate \$570K to Cricket project. An additional \$25K (SJC grant) shall also be added to the Cricket project.									
Section II: Estimated Proje									
Expenditure	Prior Years	FY 23/24 Estimate	FY 24/25 Budget	FY 25/26	FY 26/27	FY 27/28	FY 28/29	Future Yrs	Total
Contracts		\$ 745,000		\$ (745,000)					\$ -
Total Capital Costs	\$ -	\$ 745,000	\$ -	\$ (745,000)	\$ -	\$ -	\$ -	\$ -	\$ -
Section III: Funding Source									
Funding Source(s)	Prior Years	FY 23/24 Estimate	FY 24/25 Budget	FY 25/26	FY 26/27	FY 27/28	FY 28/29	Future Yrs	Total
432 - Parks&Rec Capital		\$ 745,000		\$ (745,000)					\$ -
Total Project Financing	\$ -	\$ 745,000	\$ -	\$ (745,000)	\$ -	\$ -	\$ -	\$ -	\$ -

Capital Improvement Plan

FY 2024-2025

Project Title:	Kofu Skatepark Repairs	Munis Project Code:	PKCP-24004	#295					
Section I: Description	District Nos:	3	Project Length	Priority					
<p>These repair improvements would include removal and replacement of up to (60) 4x8 sheets of HDPE underlayment, (60) sheets of 4x8 Ramp Armor skate surface material, along with welding repairs to the existing galvanized ramp frames.</p>									
Justification/factor driving project									
<p>The existing skatepark components are approximately 25 years old and have received only limited maintenance and repairs due to ongoing budget constraints. The ramp components were installed within the Kofu Park retention basin which collects storm water annually and creates conditions that are not ideal for this type of skate material.</p>									
Additional Information									
<p>FY 24 Council Action 7/19/23; Reso 2023-154; \$175,000 for design, \$570,000 for construction (contingent upon securing additional funding) 12/12/2025: Mid-Year FY25 due to Council's desire to reallocate the construction funding to Beckman Cricket Project; staff are requesting to move \$175,000 to Kofu Skate Repairs (this project) and \$595,000 to Beckman Cricket Lighting Project.</p>									
Section II: Estimated Proje									
Expenditure	Prior Years	FY 23/24 Estimate	FY 24/25 Budget	FY 25/26	FY 26/27	FY 27/28	FY 28/29	Future Yrs	Total
Contracts				\$ 175,000					\$ 175,000
Total Capital Costs	\$ -	\$ -	\$ -	\$ 175,000	\$ -	\$ -	\$ -	\$ -	\$ 175,000
Section III: Funding Source									
Funding Source(s)	Prior Years	FY 23/24 Estimate	FY 24/25 Budget	FY 25/26	FY 26/27	FY 27/28	FY 28/29	Future Yrs	Total
432 - Parks&Rec Capital				\$ 175,000					\$ 175,000
Total Project Financing	\$ -	\$ -	\$ -	\$ 175,000	\$ -	\$ -	\$ -	\$ -	\$ 175,000

Capital Improvement Plan

FY 2025-2026

Project Title:	Beckman Park - Cricket Lighting & Field Impr	Munis Project Code:				CIP List Proj #			
Section I: Description	District Nos:	5	Project Length		Priority	Normal			
<p>The Cricket community is requesting a dedicated storage area and maintenance equipment for use during games/tournaments. Lighting improvements would include (5) 70' galvanized poles, switchgear distribution cabinet, Musco Control-Link operation and underground electrical service. Overall proposed improvements is estimated to cost: \$900,000.</p>									
Justification/factor driving project									
<p>Cricket funding of 600K was reallocated to Salas Park Lighting Phase 2 Improvements, and the cricket community understands that lighting is not feasible at this time for Beckman Park, so the noted improvements above would assist their program for their field needs.</p>									
Additional Information									
<p>FY 24 Council Action 7/19/23; Resolution 2023-154; \$175 for skatepark design; \$570,000 for skatepark construction (contingent upon securing additional funding) 12/12/2025: Council desires to unfund the new skate park project and reallocate to Cricket. Mid-Year FY25 Request to move \$595,000 for skatepark construction to Beckman Cricket Lighting Project which includes \$25K from SJC Grant; Note, \$595K will not be enough to fund this project. Requesting an additional \$305K from any surplus capital funding, if available.</p>									
Section II: Estimated Project									
Expenditure	Prior Years	FY 23/24 Estimate	FY 24/25 Budget	FY 25/26	FY 26/27	FY 27/28	FY 28/29	Future Yrs	Total
Contracts	\$ -			\$ 880,000					\$ 880,000
Internal Staff	\$ -			\$ 20,000					\$ 20,000
	\$ -								\$ -
	\$ -								\$ -
	\$ -								\$ -
Total Capital Costs	\$ -	\$ -		\$ 900,000	\$ -	\$ -	\$ -	\$ -	\$ 900,000
Section III: Funding Source									
Funding Source(s)	Prior Years	FY 23/24 Estimate	FY 24/25 Budget	FY 25/26	FY 26/27	FY 27/28	FY 28/29	Future Yrs	Total
432 - Parks&Rec Capital	\$ -			\$ 570,000					\$ 570,000
432 - Parks&Rec Capital	\$ -			\$ 25,000					\$ 25,000
432 - Parks&Rec Capital	\$ -			\$ 305,000					\$ 305,000
	\$ -								\$ -
Total Project Financing	\$ -	\$ -	\$ -	\$ 900,000	\$ -	\$ -	\$ -	\$ -	\$ 900,000

Capital Improvement Plan

FY 2025-2026

Project Title:		EV Charging Infrastructure Master Plan			Munis Project Code:		NEW		CIP List Proj #	
Section I: Description		District Nos:	Citywide		Project Length	01/01/26-TBD		Priority	Normal	
<p>City of Lodi EV Charging Infrastructure Master Plan outlines the projected need for EV charging stations across the City to support both passenger and medium- and heavy-duty vehicles through 2030 and 2035. By 2030, it is estimated the City will require approximately 93 public EV charging stations across 23 sites. Of these sites, 16 are designated for light-duty vehicles and 8 are designated for medium- and heavy-duty vehicles, with one site planned to serve both vehicle types. Current plans are focused on implementation of light-duty chargers for city-owned sites. The City will soon be contracting with a selected vendor, following direction from Council on a shared public/private investment and competitive solicitation process, for implementation of the initial phase(s) of the project.</p>										
Justification/factor driving project										
<p>While federal funding and policies has slowed transportation electrification efforts, California continues to focus on and prioritize electrification activities and funding. Lodi Electric remains committed to ensuring a balance between sufficient capacity to support development as well as infrastructure to support citywide transportation electrification efforts. The California Air Resources Board recently provided Lodi Electric with over \$800,000 in Low Carbon Fuel Standard funds to implement transportation electrification projects such as this.</p>										
Additional Information										
<p>Future phases of the project will be implemented and budgeted for based on available funding. Fiscal Year 25/26 includes LCFS funds to be transferred to LEU's capital account for expenditure. Approximately \$600,000 is the estimated cost of Lodi Electric's contribution share of DCFC hardware with the remaining costs associated with supporting infrastructure and system upgrades to be completed by LEU staff.</p>										
Section II: Estimated Project Costs										
Expenditure	Prior Years	FY 24/25 Estimate	FY 25/26 Budget	FY 26/27	FY 27/28	FY 28/29	FY 29/30	Future Yrs	Total	
Internal Staff	\$ -		\$ 100,000						\$ 100,000	
Miscellaneous	\$ -		\$ 173,100						\$ 173,100	
Contracts	\$ -		\$ 610,230						\$ 610,230	
	\$ -								\$ -	
	\$ -								\$ -	
Total Capital Costs	\$ -	\$ -	\$ 883,330	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 883,330	
Section III: Funding Sources/Methods of Financing										
Funding Source(s)	Prior Years	FY 24/25 Estimate	FY 25/26 Budget	FY 26/27	FY 27/28	FY 28/29	FY 29/30	Future Yrs	Total	
501 - EU Outlay Capital Reserve Fund	\$ -		\$ 883,330						\$ 883,330	
	\$ -								\$ -	
	\$ -								\$ -	
	\$ -								\$ -	
Total Project Financing	\$ -	\$ -	\$ 883,330	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 883,330	

City of Lodi

Budget and Fiscal Policies



Adopted by the Lodi City Council
February 4, 2026
Resolution 2026-XXX

City of Lodi Budget and Fiscal Policies

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1. Purpose

The City's primary financial objective is to maintain the fiscal stability of the organization. The purpose of this policy is to establish guidelines for budget development, administration, and management as well as outline the City's fiscal policies in regard to cost recovery of various programs, target reserve levels in all funds and funding mechanisms for various programs.

2. Budget Development

The budget will reflect the goals and priorities of the Council each year and make the best use of available funding within those goals and priorities. While goals and priorities may change from year to year, some basic tenets will apply to all budgets. Those tenets are reflected below.

- A. The General Fund budget will be balanced each year, without the use of reserves. Current year revenues will support current year expenditures.
- B. One-time revenue will be used to fund one-time expenditures or be placed in reserves. One-time revenue will not be used to fund on-going operations.
- C. Annual budgetary savings will be used to fund one-time expenditures or be placed in reserves.
- D. Funding for the Vehicle Replacement Fund shall be based upon annual depreciation schedules for vehicles and amounts will be reflected in departmental budgets.
- E. Funding for the Other Post-Employment Benefits (OPEB) Fund shall be no less than the Actuarial Required Contribution shown in the actuarial report and charged to each fund based upon ratio of current full-time positions. All reserves in the Benefits Fund category in excess of 25% of estimated annual costs for benefits in this fund shall be budgeted for investment in the City's OPEB trust fund.
- F. Funding for CalPERS pension costs are as follows. Current year Normal Cost will be budgeted in each fund based on the estimated cost for employees in that fund. Current year Unfunded Accrued Liability (UAL) payments will be budgeted within each fund based on each fund's share of employees within each class (Safety or Miscellaneous). For purposes of allocating UAL, employees funded by Measure L will be allocated to the General Fund. The City will budget for the monthly payment of the UAL but will make the annual UAL payment to

recognize the approximately 3.6% savings offered by CalPERS on this option. The ~~Deputy~~ City Manager will then use the UAL savings to make Additional Discretionary Payments (ADP) to CalPERS to further reduce the City's UAL.

- G. Funding for the Information Technology (IT) Replacement Fund shall be based upon the replacement cycle for equipment contained in the fund.
- H. Budgetary allotments for OPEB, Pension Stabilization and IT Replacement shall be reflected in the Non-Departmental Organization Unit for all General Fund units.
 - a. Special Revenue, Enterprise and Internal Service funds will reflect budgetary allotments for these items within their respective funds.
- I. Fixed Assets
 - a. Capital purchases of \$10,000 or more, with a three-year or longer useful life, will be capitalized.
 - b. Infrastructure additions or new construction of \$10,000 or more will be capitalized.
 - c. Vehicle purchases of any amount will be capitalized and useful lives will be determined based upon the Government Finance Officers Association Best Practices guidelines.
 - d. Straight-line depreciation will be used for all depreciable assets.
- J. Library
 - a. The Library is primarily funded through a transfer from the General Fund. Council will set the level of funding each year based upon available General Fund revenue.
- K. Parks, Recreation and Cultural Services (PRCS)
 - a. Recreation and Community Center Programs
 - i. The goal is to recover, on average, 40% of program costs from participants. Individual programs may be fully self-supporting while other programs may have a nominal cost recovery ratio.
 - b. General Fund Transfer

- i. The General Fund Transfer shall be determined by Council each year. The intent of the General Fund Transfer is to cover the costs associated with Parks Maintenance, PRCS administration, Debt Service and Hutchins Street Square Maintenance.

L. Community Development

- a. The Community Development Department should primarily be self-supporting through fee revenue.
- b. A General Fund Transfer, determined by Council each year, will be designed to support the value of the general information function that the department provides and support at least one-half of the costs associated with a Youth Outreach function designed to divert youth involvement in gang activities.

M. Enterprise Funds

- a. Enterprise funds will set fees and rates at levels that meet operating, debt service, capital and reserve needs.

N. Internal Service Funds

- a. Internal Service funds will set rates and charges at levels that will ensure full recovery of costs each year.

3. Budget Administration and Adjustment

The City Council is ultimately responsible to the public for the delivery and conduct of City services and facilities. Accordingly, the Council appropriates funds to ensure the delivery of services at the levels and in the priority established by Council. The legal level of budgetary control is at the fund level.

A. City Manager

The City Manager, as the chief administrative officer, provides staff with general direction in the development and formulation of the City Manager's budget recommendations to Council. This includes: evaluating and assessing current and anticipated issues facing the City; determining the demand for services and facilities; identifying the concerns of the citizenry; assessing the current and projected financial condition of the City; and determining the final staffing recommendations.

B. ~~Administrative Deputy City Manager/Internal~~ Services Director

The ~~Administrative Deputy City Manager/Internal~~ Services Director, as the chief financial officer, is responsible for budget development and day-to-day administration of adopted budgets. This includes: developing and issuing the budget instructions and calendar; advising the City Manager on budget policies and issues, including the recommended level of funding for each department within the General Fund; reviewing budget requests to ensure they are complete and accurate; preparing the preliminary budget recommendations for review by the City Manager; and publishing the approved budget, Capital Improvement Plan, and Budget in Brief documents.

C. Department Directors

Department directors are responsible for preparing their operating and capital budget requests in accordance with the City's budget instructions and managing their respective departments within their approved budget allotments.

D. Failure to Adopt a Budget

If the City fails to adopt the budget by July 1, the City Council may elect one of the following courses of action until passage of a budget and appropriation of funds: (1) Provide the City Manager with Continuing Resolution Authority to allow continued services at expenditure levels not greater than those in the prior year budget; or (2) Require staff to obtain prior approval for any expenditure (payment) of City funds.

E. Public Record

The budget document will be available on-line at the City's website (www.lodi.gov). Hard copies will be available for public review at the Lodi Public Library, City Hall and the Carnegie Forum.

F. Budget Adjustments

- a. City Council approval is required for any increase in total appropriations within any individual fund. All budget adjustments that increase one fund's total appropriations, including net zero budget adjustments, must have City Council approval.
- b. The City Manager ~~and Deputy City Manager~~ has the authority to adjust appropriations within a fund, so long as total appropriations within the fund do not increase. This includes adjustments between departments within a fund.

- c. Department directors have the authority to adjust appropriations within their department, so long as total appropriations within the department within the fund do not increase.

4. Appropriation Limit

The Council will annually adopt a resolution establishing its appropriation limit calculated in accordance with Article XIII B of the Constitution of the State of California, Section 7900 of the State of California Government Code, and any other voter-approved amendments or State legislation that affect the City's appropriation limit.

5. Components of Fund Balance

- A. Governmental Accounting Standards Board Statement Number 54 – Fund Balance Reporting and Governmental Fund Type Definitions outlines the requirements to report fund balance for governmental funds in specific classifications which create a hierarchy primarily based upon the extent to which a City is bound to constraints on the specific purposes for which the funds can be spent. Fund Balance consists of the following five categories:
 - i. Non-spendable fund balance: amounts that cannot be spent because they are either (a) not in a spendable form (e.g., inventories or pre-paid) or (b) legally or contractually required to be maintained intact (e.g., endowment).
 - ii. Restricted fund balance: amounts that can only be spent for the specific purposes stipulated by external resource providers either constitutionally or through enabling legislation (e.g., grants, gas tax, impact fees).
 - iii. Committed fund balance: amounts that can be used for the specific purposes determined by formal action of the government's highest level of decision-making authority. Committed fund balance can be changed only by the government taking the same formal action that initially created the commitment. (e.g., Council approved catastrophic or economic reserves).
 - iv. Assigned fund balance: amounts that are intended to be used by the government for specific purposes. Intent can be established by either the governing body or delegated to a City official.
 - v. Unassigned fund balance: the remaining amount of fund balance after all other fund balance classifications are accounted for and can be either positive or negative. Positive unassigned fund balance is available for any purpose.

6. Fund Balance Policies

A. Committing Fund Balance

- i. The City Council is the City's highest level of decision making authority and the formal action that is required to be taken to establish, modify, or rescind a fund balance commitment is a resolution or ordinance approved by the City Council at a City Council meeting. For reporting purposes, the resolution or ordinance approving, modifying or rescinding a fund balance commitment must be approved prior to the last day of the fiscal year for which the commitment is to be reported. The amount of the commitment may be determined in a subsequent period.

B. Assigning Fund Balance

- i. The City Council retains the authority to assign fund balance.

C. Hierarchy of Fund Balance Use

- i. When multiple categories of fund balance are available for expenditure, the City will spend the most restrictive funds first before moving down to the next category with available funds in the following order:
 1. Restricted
 2. Committed
 3. Assigned
 4. Unassigned.

7. General Fund Reserves

Maintaining reserves in the General Fund is critical to the successful and stable short- and long-term operations of the City. Adequate reserves in the General Fund ensure that the City is able to respond to emergencies and continue providing services to the citizens of Lodi. Adequate reserves also ensure that the City will have sufficient funds available to meet its operating, capital and debt service obligations.

A. Catastrophic Reserve

- i. A Catastrophic Reserve is established within the General Fund. This reserve is established to maintain the ability of the City to meet operational expenses during times of declared emergency or major catastrophe.

1. It is recognized that during a time of emergency, the City will need to expend more resources than normal operations dictate to meet the community's need. In addition to an increased level of expenditure, the tax base of the City may be impaired after a major catastrophic event.
- ii. The amount of the Catastrophic Reserve shall be a minimum of 8% of annual General Fund revenues, including Operating Transfers.
- iii. The Catastrophic Reserve shall be exclusive of all other reserve amounts.
- iv. Council may draw on the Catastrophic Reserve only upon declaration of an emergency pursuant to the Lodi Municipal Code.
- v. If the Catastrophic Reserve falls below 8% of annual General Fund revenue, including Operating Transfers, the City Manager shall prepare a plan within three months of Council approval of the [Annual Comprehensive Annual Comprehensive](#) Financial Report ([ACCAFR](#)) to restore the reserve balance to the 8% level within 12 months.
- vi. The Catastrophic Reserve is not intended for normal unanticipated expenditures and shall be funded before all other committed General Fund reserves.

B. Economic Reserve

- i. An Economic Reserve is established within the General Fund. This reserve is established to maintain the City's economic viability and to meet seasonal cash flow needs.
 1. It is recognized that economic cycles can cause significant fluctuations in the revenue streams of the City and the recovery from down cycles can be prolonged and affect service levels to the community dramatically. The Economic Reserve is intended to assist the City in maintaining service levels while revenues recover from a down economic cycle.
- ii. The amount of the Economic Reserve shall be a minimum of 8% of annual General Fund revenues, including Operating Transfers.
- iii. The Economic Reserve shall be exclusive of all other reserve amounts.
- iv. Council may draw on the Economic Reserve only upon adoption of a resolution of the City Council.

- v. If the Economic Reserve falls below 8% of annual General Fund revenue, including Operating Transfers, the City Manager shall prepare a plan within three months of Council approval of the ~~Comprehensive~~ Annual Comprehensive Financial Report (ACCAFR) to restore the reserve balance to the 8% level within 12 months.
 - vi. The Economic Reserve is not intended to be used to encourage development through the expansion of infrastructure to undeveloped areas of the City and shall be funded once the General Fund Catastrophic Reserve is fully funded.
- C. Should there be a lower fund balance presented in the proposed Budget, the City Manager shall first recommend use of Pension Stabilization Funds to offset Unfunded Accrued Liability (UAL) costs in the Fiscal year. The Administrative Services Director~~Deputy City Manager~~ shall first pay all UAL costs with current year resources and shall only draw on the PSF in the final month of the Fiscal Year if in his/her opinion it is still estimated a draw is needed to meet the 16% total fund balance requirement.

8. Measure L Fund Reserves

As a general-purpose revenue, maintaining healthy reserves in the Measure L fund is critical for the same reasons as in the General Fund. Adequate reserves ensure that the City will continue to be able to provide Lodi citizens the services funded by Measure L in the long term. The Measure L Fund shall maintain the same 8% Catastrophic and 8% Economic Reserves as outlined under Section 7 A. and Section 7 B. above. Measure L Funds shall not be subject to the City's Pension Stabilization Policy. By allocating UAL in the method described in Section 1 F. above, the General Fund will cover any UAL costs attributable to the employees funded by Measure L.

~~As a new revenue stream beginning April 1, 2019, Measure L will take time to build up a reserve to comply with this policy. Initially, the fund balance will be built to the full 16% combined fund balance over a three-year timeframe beginning with the FY 2019/20 budget and ending with FY 2021/22. Budgets from FY 2019/20 through FY 2021/22 shall include approximately 5.33% of revenue as a deliberate set aside to fund these reserve categories.~~

9. Special Revenue Fund Reserves

Maintaining reserves in the City's Special Revenue Funds is also critical to the successful and stable short- and long-term operations of the City. Adequate reserves in the Special Revenue Funds, where appropriate, ensure that the City is able to carry out the purpose of

the special revenue fund and ensure compliance with underlying laws and contractual provisions associated with the funds. Additionally, bond rating agencies often evaluate a City's General Fund financial resilience by looking at reserves that may be drawn from Special Revenue funds to help support General Fund activities.

A. Library

- i. Since the Library is primarily funded by a General Fund transfer, there is no need to duplicate reserves associated with the transfer amount within the Library Fund.
- ii. Reserves within the Library Fund should be maintained at a minimum level of 16% of annual Non-General Fund Transfer revenue.

B. Parks, Recreation and Cultural Services (PRCS)

- i. Since a significant portion of PRCS revenue comes from a General Fund transfer, there is no need to duplicate reserves associated with the transfer amount within the PRCS fund.
- ii. Reserves within the PRCS Fund should be maintained at a minimum level of 16% of annual Non-General Fund Transfer revenue.

C. Community Development

- i. The Community Development Fund is primarily self-supporting from fee revenue associated with development activities. The activities and financing of this fund are subject to wide fluctuations based upon the state of the development economy. Many of the fees assessed are collected ahead of services being provided. In the event of an economic downturn, the fund will have collected fees for services that have not yet been provided. As such, it is prudent to carry a large reserve to recognize that the reserve represents services that have not yet been provided.
- ii. Reserves within the Community Development Fund should be maintained at a minimum level of 50% of annual operating expenses, including transfers.

D. Vehicle Replacement

- i. It is the City Council's goal to maintain reserves in the Vehicle Replacement equal to the accumulated depreciation of the vehicles in the fund.

1. The City Manager's proposed budget will recommend fully funding vehicle replacement funds equal to the annual straight-line depreciation of all vehicles in the fund.
2. Should Council elect not to fund the straight-line annual depreciation in the budget, the Administrative Services Director ~~Deputy City Manager~~ will report on the short fall in the fund within the budget document.
3. It is recognized that a shortfall currently exists and fully funding only one year of straight-line depreciation will result in a continued under-funding of vehicle replacements until the current vehicle stock is replaced.

E. Information Technology Replacement

- i. It is the City Council's goal to maintain reserves in the Information Technology Replacement fund equal to the accumulated depreciation of the equipment in the fund.
 1. The City Manager's proposed budget will recommend fully funding the Information Technology Replacement fund equal to the annual straight-line depreciation of all equipment in the fund.
 2. Should Council elect not to fund the straight-line annual depreciation in the budget, the Administrative Services Director ~~Deputy City Manager~~ will report on the shortfall in the fund within the budget document.
 3. It is recognized that a shortfall currently exists and fully funding only one year of straight-line depreciation will result in a continued under funding of Information Technology Equipment replacements until the current equipment stock is replaced.

F. Other Special Revenue Funds

- i. All reserve balances in the following fund categories are restricted by the terms of the individual funds within the fund category:
 1. Streets
 2. Transportation Development Act
 3. Community Development Block Grant

4. Debt Service
5. Public Safety Special Revenue
6. General Fund Capital Outlay
7. Parks Capital Outlay
8. Vehicle and Equipment Replacement

10. Enterprise Fund Reserves

Maintaining reserves in the City's Enterprise Funds is also critical to the successful and stable short- and long-term operations of the City. Adequate reserves in the Enterprise Funds ensures that the City is able to carry out the purpose of the fund and ensures compliance with underlying laws and contractual provisions associated with the funds. Among other metrics, bond rating agencies review compliance with reserve policies in determining credit ratings.

A. Electric Utility

- i. The City Council separately adopts a reserve policy for the Electric Utility and reviews the components of the policy every three years. As part of the annual budget process, Council is apprised of the level of reserves desired under that policy.

B. Water Utility

- i. The City Council has adopted a financial model for the Water Enterprise that incorporates a reserve target of 25% of Operating Expenses.
- ii. Additionally, all funds collected in relation to PCE/TCE rates or settlements are restricted to use solely for the mitigation and remediation of those pollutants.

C. Wastewater Utility

- i. The City Council has adopted a financial model for the Wastewater Enterprise that incorporates a reserve target of 25% of Operating Expenses.

D. Transit

- i. All reserve funds in the Transit Enterprise are restricted as to use solely for transit purposes.

11. Internal Service Fund Reserves

Maintaining reserves in the City's Internal Service Funds demonstrates fiscal accountability and financial prudence. Adequate reserves in the Internal Service Funds ensure that the City has set aside sufficient funds to meet the future obligations it has committed to provide to its employees. Additionally, bond rating agencies review these funds and look favorably upon entities that are funding the long-term liabilities represented in the City's Internal Service Funds.

A. Benefits Fund

- i. Reserves equal to 25% of the estimated annual cost of all benefits paid for by this fund.
- ii. The ~~Deputy City Manager~~/Treasurer will invest all reserves in the fund, as reported in the prior fiscal year's Annual Comprehensive Financial Report (ACCAFR), in excess of 25% of the estimated annual cost of all benefits paid in a current fiscal year upon completion of the prior fiscal year's ACCAFR.

B. General Liability Insurance and Worker's Compensation Funds

- i. Reserves, at a minimum, equal to the 90% confidence level shown in the annual actuarial report, should be held locally and invested along with the City's pooled cash portfolio.
- ii. Funding at the 90% confidence level will be recommended in each annual budget.
- iii. The Administrative Services Director~~Deputy City Manager~~ will review the status of the funds as of December 31 each year. If it is estimated that the full budget transfer is not needed to maintain the 90% confidence level in that year, he/she may reduce the budgeted transfer for that Fiscal Year for each fund prorated to each fund's budgeted contribution.

C. Fleet Maintenance Fund

- i. Reserves equal to a minimum of 16% of Operating Expenses shall be held in the Fleet Maintenance Fund.

12. Capital Improvement Plan

The City is committed to ensuring that all of its assets are operated, maintained and replaced in a manner that is the most prudent method of maintaining the public stewardship of those assets. To that end, the City will prepare and update annually a Capital Improvement Plan (CIP) that encompasses those assets and looks out over a five-year lifespan. The first year of the five-year plan will be the current budget year. The Internal Services Department will be responsible for gathering the data for inclusion in the plan.

A. CIP Projects

- i. Construction projects that are expected to cost \$25,000 or more should be included in the CIP. Projects will be a combination of projects that repair, replace or enhance existing facilities and infrastructure and projects that expand or add to the City's existing fixed assets. Vehicles and equipment (rolling stock) are not to be included in the CIP.

B. CIP Appropriations

- i. Approval of the CIP estimates beyond the current year budget do not constitute appropriation of the funds necessary or designation of the funds necessary to complete the project. Unspent current year budget allocations will automatically carryforward until project completion with the exception of unencumbered budgets in annual maintenance programs within the CIP. Upon completion of a project, unspent budget is returned to the fund until appropriated by future City Council action. Employee labor costs do not carry forward.

C. Level of Budget Control

- i. Budget control for CIP projects will be at both the general ledger account level and the CIP project level. Budget allocated to one CIP project cannot be moved to another project within the CIP or to a non-CIP use without Council approval. Department Directors may transfer budget between line items within a project and fund as long as the total expenditure for the project or for the amount of the funding source specific to that project does not increase.

D. Elements of the CIP

- i. Each project listed in the CIP will address the following items:
 - project description
 - project timeline

- anticipated funding sources
- estimated expenditures
- revenues and expenditures will be reflected by fiscal year over the five-year timespan of the CIP
- estimated annual ongoing operating and maintenance costs

13. Encumbrance Accounting

Encumbrances represent commitments to contracts not yet performed and orders not yet filled. They are used to control expenditure commitments for the year and to enhance cash management. Encumbrances do not represent expenditures for a period, only a commitment to expend resources. As a contract is completed, the budgetary encumbrance control accounts are liquidated or reduced and the actual expenditure is recorded.

A. Lapsing Appropriations

- i. All unencumbered funds lapse at the end of the Fiscal Year with the exception of Capital Projects funds. Funds encumbered on contracts will roll into the next year. The Administrative Services Director~~Deputy City Manager~~ shall review all contracts to determine what encumbered funds shall lapse due to contract completion.
- ii. Capital Projects – appropriated funds in the current fiscal year do not lapse until project completion or abandonment, whether encumbered or unencumbered.

14. Pension Stabilization Policy

This section replaces the policy adopted by Resolution 20~~26~~¹⁷-~~XXX~~²¹⁹ and amends language and form for consistency with this policy. The policy is also updated and amended to factor in UAL funding for UAL costs attributable to positions funded by Measure L.

A. Pension Stabilization Funding

- i. The Treasurer is authorized to invest all fund balance in excess of 16% in the General Fund (Pension Stabilization Resources, or PSR), based on the City's Annual Comprehensive ~~Annual~~ Financial Report (ACCAFR) from the previous year in the City's Internal Revenue Code Section 115 Trust account with Public Agency Retirement Solutions (PARS); and with Council consent use PARS trust funds to make:
 - a. ADP to the Safety Plan of the City of Lodi held by CalPERS; or

- b. ADP to the Miscellaneous Plan of the City of Lodi held by CalPERS;

until such time that the combined Market Value of Assets at the two CalPERS Plans plus the Market Value of Assets in the PARS fund exceed ~~7080~~% of the combined “Entry Age Normal Accrued Liability” for both Safety and Miscellaneous or its most proximate equivalent as calculated by CalPERS in the annual Actuarial Reports.

B. Allocation of Pension Stabilization Reserve Funding

- i. PSR investments made under this policy shall be accounted for by source fund and be made from all source funds in equal proportions to the actual allocation of CalPERS combined normal cost plus UAL cost within the Fiscal Year of the most recently approved CAFR.
 - 1. The Measure L Fund shall not contribute to the Pension Stabilization Fund.
- ii. The base fund for determining the amount of proportional PSR for other funds shall be the City’s General Fund (Fund 100).
 - 1. If PSR for a particular fund is not adequate to cover the proportional requirement for that fund, the Treasurer shall prepare a report and recommendations to City Council to seek direction on PSR for that Fiscal Year.
- iii. Nothing in this policy shall allow the Treasurer to make PSR investments of any fund to have a projected year end fund balance below thresholds established in Section 7, 8, 9, 10, or 11 of this policy.
 - 1. If proportional PSR investments would cause the projected year end fund balance of any fund to fall below thresholds established in the Fiscal Policies, the Treasurer shall prepare a report and recommendations to City Council within the scope of this policy.

C. Budget Adjustments

- i. The City Manager is authorized to make any necessary budget adjustments to execute this policy in each Fiscal Year based on the calculated PSR.

D. Pension Stabilization Reporting & Distributions

- i. The Treasurer shall prepare and present the funded statuses of the City’s combined pension plans in the Annual Budget and the Mid-Year Budget report. If the value of Assets in the PARS fund exceed 70% of the combined liability, the City Manager may include a recommendation for disbursements from the PARS fund to offset qualified pension expenses as part of the Annual or Mid-Year Budget reports. No disbursements will be made without City Council approval.

15. Review and Update

These policies will be in place for the 202~~31~~/~~242~~, ~~and~~ 202~~42~~/~~253~~, and 2025/26 fiscal years beginning with the FY 202~~31~~/~~242~~ budget. These policies will be reviewed and updated every two years in odd numbered years in conjunction with the approval of the annual budget. The next review cycle will be in conjunction with the FY 202~~62~~/~~274~~ budget.

RESOLUTION NO. 2026 - _____

A RESOLUTION OF THE LODI CITY COUNCIL AMENDING THE CITY OF LODI FISCAL YEAR 2025-26 BUDGET; AND APPROVING THE ADDITION OF ONE POLICE OFFICER, ONE SENIOR BILLING SPECIALIST, ONE MANAGEMENT ANALYST - CONFIDENTIAL, AND A SENIOR PLANS EXAMINER; DELETION OF ONE CUSTOMER SERVICE REPRESENTATIVE AND ONE HEALTH AND SAFETY SPECIALIST, AND THE RECLASSIFICATION OF A DEPUTY CITY CLERK TO AN ASSISTANT CITY CLERK AND PROGRAM COORDINATOR TO A RECREATION MANAGER; AND ADOPT UPDATES TO THE BUDGET AND FISCAL POLICY

=====

WHEREAS, the City Council adopted the Fiscal Year 2025/26 Budget on June 4, 2025; and

WHEREAS, the 2025/26 Financial Plan and Budget was prepared in accordance with the City Council's goals, budget assumptions, and policies; and

WHEREAS, the budget Resolution requires a mid-year update at its regularly-scheduled meeting on February 4, 2026 and

WHEREAS, revisions to the budget are necessary to address circumstances unknown at the time of the budget adoption.

NOW, THEREFORE BE IT RESOLVED that the City Council of the City of Lodi approves:

- 1) Addition of one Police Officer
- 2) Addition of one Senior Billing Specialist
- 3) Addition of one Management Analyst – Confidential (Risk)
- 4) Addition of one Senior Building Planner
- 5) Deletion of one Customer Service Representative
- 6) Deletion of one Health and Safety Specialist
- 7) Reclassification of a Program Coordinator to a Recreation Manager
- 8) Reclassification of a Deputy City Clerk to an Assistant City Clerk
- 9) Adopt updates to the Budget and Fiscal Policy
- 10) Approve all budget amendments to Fiscal Year 2025/26 Budget as outlined on Exhibit A

Dated: February 4, 2026

=====

I hereby certify that Resolution No. 2026-_____ was passed and adopted by the City Council of the City of Lodi in a regular meeting held February 4, 2026 by the following vote:

AYES: COUNCIL MEMBERS –

NOES: COUNCIL MEMBERS –

ABSENT: COUNCIL MEMBERS –

ABSTAIN: COUNCIL MEMBERS –

OLIVIA NASHED
City Clerk

2026-



COUNCIL COMMUNICATION

AGENDA TITLE:

Adopt a Resolution Awarding Operation of the Lodi Access Center and Emergency Shelter to the Council-Selected Operator, of Outreach Ministries International, Inc., Based on Ranking and Recommendation Provided by the Evaluation Committee, and Authorizing City Staff to Negotiate an Agreement and Return to City Council for Final Contract Approval (CD)

MEETING DATE:

January 27, 2026

PREPARED BY:

Jennifer Rhyne, Neighborhood Services Manager

RECOMMENDED ACTION:

Adopt a resolution awarding operation of the Lodi Access Center and Emergency Shelter to the Council-Selected operator, of Outreach Ministries International, Inc., based on ranking and recommendation provided by the evaluation committee, and authorizing Staff to negotiate an agreement and return to City Council for final contract approval.

BACKGROUND INFORMATION:

The City of Lodi issued a Request for Proposals (RFP) to identify a qualified nonprofit organization to operate the Lodi Access Center and Emergency Shelter, a 24/7 low-barrier facility intended to provide immediate access to shelter, navigation services, and connections to housing and supportive resources. On October 1, 2025, City Council approved the draft RFP and authorized its release. The RFP emphasized operational readiness, staffing capacity, fiscal responsibility, community engagement, and the ability to deliver comprehensive services in coordination with local and regional partners.

REQUEST FOR PROPOSAL PROCESS:

The RFP process followed the timeline below:

- **October 1, 2025** - Draft RFP approved by City Council and release authorized
- **October 2, 2025** - RFP released
- **October 22, 2025** - Virtual pre-proposal meeting
- **November 3, 2025** - Proposals due
- **November 4 - 17, 2025** - Eligibility determination
- **December 2, 2025** - Evaluation Committee meeting to review and score eligible proposals
- **December 10, 2025** - Evaluation Committee interviews of top three proposers and final recommendation based on combined scoring

PROPOSALS RECEIVED AND ELIGIBILITY REVIEW:

A total of five (5) proposals were received by the proposal deadline. However, one proposal was determined to be non-responsive because it was incomplete, missing required information necessary for evaluation. Written notification of the rejected proposal was immediately provided to the organization in accordance with the RFP

COUNCIL COMMUNICATION

requirements.

The remaining four (4) complete and responsive proposals were evaluated (listed in order of receipt):

- First Step Communities
- Five Keys
- Outreach Ministries International (OMI)
- The Salvation Army, Lodi Corps (TSA)

All four proposals were determined to be thorough, well-prepared, and responsive to the RFP requirements.

Budget and Capacity Summary				
Proposer	Year-1 Total Cost to City	Cost Per Bed Per Night	Number of Full-Time Staff	Number of Part-Time Staff
The Salvation Army	\$1,680,783.00	\$ 76.75	14	11
Outreach Ministries Int'l	\$1,823,884.65	\$ 83.28	20	20
First Step Communities	\$2,198,070.00	\$100.37	21	10
Five Keys	\$2,439,948.75	\$111.41	23	12
Note: 1. Full-Time Staff are staff that will be on-site 40+ hours a week on average. Part-Time have oversight remotely or onsite less than 40 hours a week. 2. Table is organized in budget order				

EVALUATION COMMITTEE:

Proposals Evaluation:

To ensure a fair and transparent review, proposals were evaluated by an independent evaluation committee composed of representatives from regional partners, public safety, homelessness advisory bodies, and local government:

- Virginia Carney, City of Tracy
- Lana Lozano, City of Stockton
- JP Doucette, Chamber of Commerce / Access Center Advisory Committee
- Janelle Frederiksen, San Joaquin County Behavioral Health
- Sergeant Ryan Holz, Lodi Police Department
- Lisa Hill, Chair, Lodi Committee on Homelessness
- Russ Hayward, Founding Member, Lodi Committee on Homelessness / Former Access Center Advisory Committee Member

Committee members independently reviewed and scored proposals using the approved evaluation criteria and participated in consensus discussions. Evaluation took a full day and was held on December 2, 2025, in person. Proposals were evaluated in the order received but organized in rank order in the table below.

COUNCIL COMMUNICATION

Proposal Scoring			
Organization	Total	Percentage of total score	Rank
Outreach Ministries	609	87%	1
Five Keys	587	84%	2
The Salvation Army	559	80%	3
First Step Communities	550	79%	4

Total Points Available: 700 (100 per evaluation committee member)

Interviews:

Based on written proposal scoring, the top three ranked proposers were advanced to the interview phase and First Step Communities was not advanced. Interviews were conducted on December 10, 2025, in random order selected by non-participating City Staff to ensure fairness.

Interview Scoring		
Organization	Total	Rank
Five Keys	186	1
Outreach Ministries	184	2
The Salvation Army	154	3

Total Points Available: 240 (40 per evaluation committee member - total of 8 questions)

**Note: One evaluation committee member missed the interviews due to illness, so will not be included in interview scoring, but did evaluate proposals received and help determine top 3 to be interviewed.*

Ranking:

Final rankings and Evaluation Committee recommendation were determined by combining written proposal scores and interview scores.

Combined Scores		
Organization	Total	Rank
Outreach Ministries	793	1
Five Keys	773	2
The Salvation Army	713	3

EVALUATION OBSERVATIONS:

The evaluation process identified several distinguishing factors among the proposals:

- **First Step Communities** ranked fourth based on written proposal scoring and was not advanced to the interview phase in accordance with the RFP process. While the proposal was thorough and demonstrated relevant experience, it did not score as highly as the other proposers under the evaluation criteria and therefore was not among the top-ranked candidates invited to interview.
- **The Salvation Army, Lodi Corps** demonstrated strong organizational experience and submitted the lowest proposed cost per bed per night. However, the proposal ranked lower overall based on evaluation criteria related to staffing capacity, including lower proposed staffing levels and fewer on-site supervisors and managers. The Evaluation Committee identified these factors as concerns given the 24/7 operational and supervisory requirements of the Access Center.

COUNCIL COMMUNICATION

- **Five Keys** presented a comprehensive and well-developed proposal and received the highest interview score among the interviewed proposers. The Evaluation Committee noted the organization's experience operating similar facilities and overall program design as strengths. However, concerns were identified regarding the establishment of strong local relationships with Lodi-based service providers and clients, as well as the anticipated ramp-up period required to initiate operations in a new community.
- **Outreach Ministries International** demonstrated strong local experience and operational continuity as the current operator of the temporary Access Center. While their interview score was slightly lower than Five Keys, the Evaluation Committee identified their established local relationships and familiarity with operations as significant strengths. Concerns were noted regarding succession planning and leadership depth given the organization's smaller size; however, these items were identified as appropriate to address through contract negotiations and a potential concern with any organization selected. Based on the combined proposal and interview scoring, Outreach Ministries International ranked first overall which determined them as the recommendation by the Evaluation Committee.

NEXT STEPS:

If City Council adopts the resolution, City staff will proceed with negotiations with selected operator. Negotiations will focus on finalizing operational details, performance measures, reporting requirements, staffing plans, and provisions related to organizational capacity, planning, and finalize services levels and budget terms.

Staff will return to City Council at a future meeting with the negotiated agreement for final review and approval prior to execution.

STRATEGIC VISION:

4C. Housing: Continued progress towards Regional Housing Needs Assessment goals.

FISCAL IMPACT:

There is no immediate fiscal impact associated with this action. Fiscal impacts related to operation of the Lodi Access Center and Emergency Shelter will be presented to City Council as part of the proposed agreement at a future date.

FUNDING AVAILABLE:

Current operations are supported with State, Local, Fiscal Recovery Funds (SLFRF aka ARPA), Homeless Housing, Assistance, and Prevention (HHAP) Grant, and the Permanent Local Housing Allocation (PLHA) Grant. Based on contract negotiations, current resources, and in progress applications/potential grant opportunities, Staff anticipate sufficient support for the first year of permanent operations. Should there not be sufficient grant funding to enter into the first year of the agreement, Staff will evaluate options and bring to City Council for consideration.



REQUEST FOR PROPOSAL

FOR

ACCESS CENTER AND EMERGENCY SHELTER
OPERATIONAL MANAGEMENT SERVICES

City of Lodi
Community Development Department
Neighborhood Services Division

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COVER LETTER



October 30, 2025

City of Lodi
Community Development Department
Attn: Jennifer Rhyne, Neighborhood Services Manager

To RFP Evaluation Team,

First Step Housing, dba First Step Communities (FSC) is excited to respond to your Request for Proposal for the Access Center and Emergency Shelter Operational Management Services. We have reviewed your RFP and are enthusiastically supportive of your facility design and planned services.

We have tried in our response to answer all your questions and provide details about our experience, qualifications, and approach to providing these critical services to the vulnerable individuals in our homeless community. In our experience the design of bringing sheltering and healthcare together is critical to a successful program that can change lives through achieving successful outcomes for the clients. Our data, which we can share, overwhelmingly supports this.

There are numerous operational alternatives options for us to discuss as the planning stages of a program like this come together. Together we can discuss joint decision-making, including budget options, bringing you and your selected service provider closer together to launch a successful program. Additionally, we would like to talk with you in detail about our extensive collaboration process with other nonprofit and healthcare organizations, as well as our approach to fundraising, public and private, to support a robust operational plan. FSC has helped our current funders start at least six new and exciting programs, ensuring that the funders operational objectives are met or exceeded.

First Step Communities would like to thank you for the opportunity to respond to this RFP and is anxious to qualify for an interview where we can expand upon our proposal and answer all your questions.

I can be reached at swatters@firststepcommunities.org or by phone at (916)769-8877.

Sincerely

A handwritten signature in blue ink that reads "Stephen Watters".

Stephen Watters, Chief Executive Officer

a bridge out of homelessness

www.firststepcommunities.org

PROPOSAL NARRATIVE

IV. PROPOSER INFORMATION

1. Name of Entity or Organization:

First Step Housing DBA First Step Communities

2. Physical Address:

1455 Response Rd, Suite 190, Sacramento, CA 95815

3. Mailing Address (if different than above):

4. Executive Director/CEO

- Name: Stephen Watters
- Title: Chief Executive Officer
- Email: swatters@firststepcommunities.org
- Phone Number: 916-769-8877

5. Contact Person (if different than above)

- Name: Joseph Pacheco
- Title: Executive Director
- Email: jpacheco@firststepcommunities.org
- Phone Number: 916-225-4474

6. Number of years organization has been in business:

10.5

7. Number of years organization has operated as a 501 (c) (3):

10.5

8. Federal Tax ID Number:

35-2537631

9. Has this organization operated under another name? (X) Yes () No

- If yes, list all previous names:

First Step Housing

10. Are you registered with sam.gov? (X) Yes () No

- If yes, please provide UEI number

HDD3WBL2SAW1

11. Number of year's organization has conducted the program for which services are being requested:

10

12. Provide 3 References to speak to your organizations work and successes with homelessness services

1. Emily Halcon, Director Sacramento County Department of Homeless Services and Housing, halcone@saccounty.gov, 916-874-2764.
2. A. Jonathan Porteus, PhD, Chief Executive Officer, WellSpace Health, jporteur@wellspacehealth.org, 916-313-8413.
3. Eric Guerra, Councilmember, City of Sacramento, EGuerra@cityofsacramento.org, 916-808-7006.
4. Vincene Jones, Community Outreach, Stockton Blvd Partnership (PBID), staff@stocktonblvdpartnership.org, 916-801-1827.
5. Holly Calderone, BS, MSW, Mental Health Counselor, Sacramento County, calderoneh@saccounty.gov, 916-203-4888.
6. Erin Burton, Senior Deputy Probation Officer, Sacramento Probation Department, Sacramento County, BurtonE@saccounty.gov, 916-875-1297.

13. Describe your organization's history and experience in providing services to individuals experiencing homelessness:

For over ten years, First Step Communities has been a trusted provider of homeless services in Sacramento, partnering with the City and County of Sacramento, the Sacramento Continuum of Care, and the Sacramento Housing and Redevelopment Agency. Our mission is rooted in dignity, safety, and connection; offering pathways out of homelessness through trauma-informed care and responsive programming.

We operate four full-service, congregate low-barrier shelters with navigation centers and wraparound services serving individuals with diverse needs, including those experiencing chronic homelessness, mental health challenges, and substance use disorders. All First Step shelters are low barrier, meaning there are minimal prerequisites for referral entry. Each shelter is designed to foster stability and healing, with culturally competent staff. In addition, our weather respite center provides life-saving shelter during extreme conditions, ensuring that vulnerable community members are protected during extreme weather.

FSC only operates low-barrier shelters and service programs. Our mission is to welcome people with the problems, behaviors and barriers that result in people walking away, or being rejected and ejected from other homeless service programs. Our trauma-informed staff training and operational methods ensure clients are treated with dignity and respect, with a goal of keeping clients in the shelter long enough to gain trust and make meaningful progress toward housing goals.

Our shelter staff receive extensive training in verbal de-escalation, behavioral health symptom recognition, and substance use disorder symptom recognition, and are compensated well above industry standards to attract and retain highly skilled, compassionate professionals. FSC believes that fair and competitive wages are essential to maintaining a stable, motivated workforce capable of delivering consistent, high-quality care. Through this investment in people, and through our trauma-informed policies, we ensure that exiting a client is always the last resort, only considered after every possible intervention has been exhausted.

All four of our existing shelters have collaborative, on-site partnerships with Sacramento County Behavioral Health, whose teams conduct weekly assessments and treatment referrals. Three of our shelters have additional partnerships with healthcare non-profits to bring on-site medical and behavioral healthcare to our shelter clients. Our data show a strong correlation between healthcare services connection and greatly improved client outcomes.

FSC only operates low-barrier shelters and service programs. The FSC team prides ourselves in welcoming people with the problems, behaviors and barriers that result in people walking away, or being rejected from other homeless service programs.

Throughout our decade of service, First Step Communities has demonstrated agility, accountability, and deep community engagement. We've adapted to evolving needs, whether responding to public health emergencies, expanding shelter capacity, or redesigning spaces to

promote dignity and calm. Our staff are trained in trauma-informed practices and cultural responsiveness, ensuring that every guest is met with respect and empathy.

We are proud of our role in Sacramento's homeless response system and remain committed to continuous improvement. Whether through data-informed decision-making, collaborative partnerships, or direct service delivery, First Step Communities continues to be a stabilizing force for individuals experiencing homelessness and a reliable partner for public agencies seeking compassionate, effective solutions.

14. Describe the organization's current approach to outreach and service delivery, particularly for unsheltered individuals or highly vulnerable populations:

First Step Communities employs a trauma-informed, person-centered approach to outreach and service delivery, designed to meet individuals where they are; physically, emotionally, and culturally. Our navigation program is a cornerstone of this work, actively engaging unsheltered individuals across Sacramento through street-based outreach, coordinated entry referrals, and direct service connections.

Our shelter and outreach teams are trained in harm reduction, motivational interviewing, and cultural responsiveness, with a deep understanding of the barriers faced by people experiencing chronic homelessness, behavioral health challenges, substance use, and systemic marginalization. We prioritize relationship-building and trust, recognizing that engagement is often the first step toward stabilization.

Key elements of our approach include:

- **Low-Barrier Access:** We reduce entry requirements and documentation burdens to ensure services are accessible to those who may be excluded from traditional systems. Within our ranks at FSC, our rallying cry is "If not us, then who?"
- **Client Centered, Client Guided:** We emphasize dignity, safety, and choice at every stage, with the goal of fostering stability and long-term housing outcomes.
- **Healthcare Connections:** Case Management staff facilitate Medi-Cal enrollments, primary healthcare and behavioral healthcare connections. We welcome collaborative healthcare partners to provide on-site care within our shelter walls.
- **Continuum of Care Integration:** As an active partner in Sacramento's Continuum of Care, we align our shelter efforts and partnerships to leverage resources of complimentary service providers, ensuring that individuals are prepared for, and are prioritized appropriately, for permanent housing solutions.
- **Case Management is Key:** Throughout our company, client case management services are centrally managed by our Sr. Director of Client Services. This ensures the continuity and quality of care at all First Step Communities' shelters. Our skilled case management team uses trauma informed, evidence-based practices to motivate clients toward self-sufficiency and housing.

Our shelter teams will develop social activities designed to foster interpersonal connection. Social research clearly demonstrates that social connections to other people significantly reduce substance use urges. Additionally, our team will facilitate day habilitation programming designed to prepare clients for employment, renting an apartment, and/or contemplation of seeking help for medical issues.

Our approach at the Lodi Access Center will duplicate our successful operational strategies from our existing shelter programs. FSC will quickly achieve full integration into the San Joaquin CoC, establish referral and collaboration protocols with County healthcare and behavioral healthcare. Our shelters and outreach programs operate in tandem, allowing for seamless transitions from street to shelter and beyond.

Our goal with the Lodi Access Center day use facility will be to maximize public use of the space. Our service plan includes staff to ensure sanitation and manage the facility. The day use center will have a dedicated navigator who will perform assessments, shelter referral, housing navigation assistance and other service connections for people who may need assistance. Additionally, FSC will foster collaboration with any and all complementary service providers to bring their services directly to the clients of the day center. The Lodi Access Center day use facility is similar to several supplemental programs, Neighborhood Sanitation and warming/cooling center, that we operate at the North A Street Shelter Campus.

V. PROPOSAL NARRATIVE

1. Service Summary

Provide a summary of the proposed services to be delivered, including a high-level description of work to be performed and the key outcomes your organization expects to achieve.

First Step Communities (FSC) proposes to operate the City of Lodi Access Center and Emergency Shelter as a 24/7, low-barrier facility providing comprehensive, trauma-informed care to individuals experiencing homelessness. The Access Center will offer 60 fixed beds for overnight shelter, with future capacity to flex up to 208 beds as community needs evolve. The program will serve as a central access point for stabilization, health and behavioral health care, and housing navigation, ensuring that each participant has a clear and supported path toward permanent housing and self-sufficiency.

Under FSC's management, the Access Center will operate with a Housing First philosophy, meaning that clients will not be required to meet preconditions such as sobriety or service participation to receive shelter and care. The Center will accommodate people, pets, and possessions, removing nearly all key barriers to entry and encouraging engagement from individuals who may otherwise remain unsheltered.

Daily operations will include wraparound services such as 24/7 supervision, safety, and guest support with comprehensive intake, assessment, and individualized case management. Services will include behavioral health screening, crisis intervention, and linkage to treatment, along with job readiness, Ready to Rent, and Anger Management training to promote long-

term stability and independence. Medical and sobering services will be provided onsite by San Joaquin County Behavioral Health Services and San Joaquin Health. FSC will also coordinate with community-based organizations for housing, employment, and benefits assistance, as well as meals, hygiene, and basic needs support through a commercial kitchen, dining hall, and laundry facilities.

FSC's multidisciplinary team will include Program Managers, Case Managers, Peer Support Specialists, and Shelter Monitors, all trained in trauma-informed care, de-escalation, harm reduction, and cultural competency. Staff will work collaboratively with the County's onsite behavioral health and medical teams to ensure coordinated care and warm handoffs for clients requiring specialized support.

FSC will use the Homeless Management Information System (HMIS) and participate in the San Joaquin County Coordinated Entry System (CES) to ensure seamless referrals to rapid rehousing, permanent supportive housing, and other regional housing programs. Through these systems, client progress will be tracked, and outcomes will be monitored for accuracy and compliance with HUD and CoC standards.

The key outcomes expected from the program include:

- Safe emergency shelter and stabilization for at least 60 individuals nightly.
- Integrated access to behavioral health and medical services for all participants.
- Goal of 40% of all clients leaving for permanent housing solutions.
- Reduced unsheltered homelessness within the City of Lodi.
- Enhanced collaboration among County health departments, nonprofits, and housing providers.
- Continuous improvement driven by data analysis correlating services provided and outcomes.

Through its proven operational model, experienced leadership, and deep partnerships with local agencies, FSC will deliver a comprehensive, compassionate, and data-driven program that not only provides immediate shelter but also addresses the root causes of homelessness, supporting long-term stability, recovery, and housing success for every individual served.

2. Organizational Experience

Describe your organization's experience with programs or services similar to those described in the RFP. If the scope of work is new to your organization, describe the relevant expertise, partnerships, or resources that will support successful implementation.

First Step Communities (FSC) has over a decade of proven experience operating 24/7 low-barrier shelters and access centers that mirror the City of Lodi's proposal. Since 2015, FSC has designed, launched, and operated multiple full-service shelters and transitional programs in partnership with local governments, behavioral health agencies, and healthcare providers. We currently operate four fully occupied shelters with 400+ guests nightly.

Not only do we operate shelters, we achieve much higher rates of client success within each shelter. In 2024, First Step shelters served 19% of all Sacramento shelter residents. By contrast, FSC was responsible for 25% of all shelter residents who achieved permanent housing. Our clients achieve these levels of success despite our shelters accepting clients with the highest need challenges.

FSC's low-barrier shelter model accommodates people, pets, and possessions, reflecting the same inclusive design proposed for the Lodi Access Center. This approach increases client engagement and long-term housing stability by removing traditional entry barriers and allowing individuals to access services without preconditions. Each FSC-operated site offers wraparound services that support stabilization and self-sufficiency, including individualized case management, behavioral health navigation, employment readiness, life skills training, and rapid rehousing support.

FSC's operational expertise includes managing 24/7 facilities with up to 400 clients per day, maintaining high standards of safety, cleanliness, and trauma-informed care. Our staff receive ongoing training in de-escalation, harm reduction, motivational interviewing, and Housing First principles. All programs operate under well-developed policies and procedures that ensure consistent service delivery, compliance with municipal and county regulations, and effective coordination with public and private partners.

FSC's success is demonstrated through measurable outcomes: across sites, between 40-60% of program participants transition to stable housing or other positive exits, and client retention exceeds regional averages. These outcomes are achieved through FSC's strong collaborations with Sacramento County Behavioral Health, Elica Health Centers, Willow Clinic (UC Davis School of Medicine), Women's Empowerment of Sacramento, and Life Practice Counseling. They bring integrated medical, mental health, and substance use disorder services directly onsite; an experience directly aligned with the Access Center's model of co-located behavioral health and medical care.

While the Lodi Access Center represents an expansion into San Joaquin County, the scope of work is not new to FSC. FSC's leadership and operations team have extensive experience managing large-scale, multi-agency shelter systems in coordination with local jurisdictions and County Behavioral Health departments. FSC's CEO, Stephen Watters, and Executive Director, Joseph Pacheco, have 60 combined years of leadership experience and a record of building sustainable, high-performing service models that align with community priorities and funding agency expectations. In addition to these key personnel, FSC is supported by long-tenured staff across all departments, each with clearly defined roles and responsibilities.

To ensure successful implementation, FSC will build upon its existing operational frameworks, staffing models, and proven program infrastructure while working closely with San Joaquin County Behavioral Health Services and San Joaquin Health. This partnership-based model

has been the foundation of FSC's success and will ensure the City of Lodi's Access Center achieves its goals.

3. Collaborative Partnerships

Describe current and past collaborations with other nonprofits, government agencies, faith-based organizations, and community stakeholders relevant to homelessness, housing, health, or supportive services.

First Step Communities (FSC) has built an extensive network of partnerships because collaboration is central to FSC's operating model, which is reflected in the daily work with local governments, County Behavioral Health departments, FQHC's, community-based organizations, and faith partners. These collaborations ensure that individuals receive comprehensive support addressing housing, health, behavioral health, employment, and community reintegration needs. FSC has extensive experience managing government funding.

FSC's strongest partnerships are with the City and County of Sacramento, where FSC operates several 24/7 shelter campuses, including the Roseville Road Campus, North A Street Shelter, Stockton Blvd Safe Stay, and The Grove Emergency Bridge Housing. Through contracts with Sacramento County's Department of Human Assistance and Department of Behavioral Health, FSC provides emergency shelter, transitional housing, and supportive services for adults and transition-age youth (TAY). Each site is fully integrated with County referral systems, ensuring coordination with behavioral health teams, outreach navigators, and rapid rehousing providers.

FSC works closely with County Behavioral Health, Health Centers, Wellness Without Walls, and Willow Clinic to deliver onsite and mobile healthcare services. These partnerships ensure residents have access to primary care, behavioral health treatment, and medication management. Through collaboration with Elica, FSC connects clients to FQHC-based primary care, while Wellness Without Walls and Willow Clinic provide mobile medical services that reach unsheltered individuals in encampments and transitional settings. A developing collaboration with WellSpace Health is expanding FSC's ability to integrate behavioral health, primary care, and recuperative services across shelter campuses. This partnership bridges FSC clients to permanent medical homes and strengthens access to ongoing care after shelter exit.

FSC also partners with Life Practice Counseling Group, Community HealthWorks, and Women's Empowerment of Sacramento to connect clients to mental health counseling, health insurance enrollment, and workforce readiness services. On the housing and employment front, FSC collaborates with the Sacramento Housing and Redevelopment Agency (SHRA), Sacramento Employment and Training Agency (SETA), and Sacramento Steps Forward, aligning shelter operations with the Continuum of Care and Coordinated Entry System to ensure clients are prioritized for housing vouchers, Permanent Supportive Housing, and employment programs that promote long-term stability.

At the regional level, FSC is an active partner in collaborative initiatives with UC Davis Health, Community HealthWorks, and WellSpace Health, exploring innovative service models that integrate housing stabilization, primary care, and behavioral health under one continuum. These partnerships have been critical in FSC's ability to respond quickly to community crises, including pandemic response, extreme weather sheltering, and the rapid activation of temporary emergency sites.

Faith-based partnerships are also central to FSC's community engagement model. Organizations such as Sacramento ACT and local interfaith coalitions provide volunteer support, hygiene supplies, and meal programs.

As FSC prepares to operate the City of Lodi Access Center, it is well-positioned to replicate these partnership-driven models. In collaboration with San Joaquin County Behavioral Health Services and San Joaquin Health, FSC will integrate medical, behavioral health, and respite care services, demonstrating ongoing commitment to ensure that homelessness is rare, brief, and that every person served is treated with safety, dignity, and compassion.

4. Operational Methodology

Provide an overview of your approach to operating the City's Access Center and Emergency Shelter, including how you plan to scale services to meet evolving needs.

First Step Communities (FSC) will operate the 60-bed City of Lodi Access Center and Emergency Shelter using a low-barrier, trauma-informed, and harm-reduction methodology designed to meet the immediate needs of Lodi's most vulnerable unhoused adults. Our approach emphasizes safety, dignity, and pathways to permanent housing, ensuring that every individual who enters the program receives compassionate, individualized support toward long-term stability.

The 60-bed shelter will provide interim housing with minimal entry requirements, ensuring accessibility for individuals who may be excluded from traditional programs due to behavioral health challenges, lack of identification, or pet ownership. FSC's shelter model includes 24/7 staffing to maintain safety and build trust, with trained staff available to assist residents at all hours. Each participant will be connected to on-site case management to support housing navigation, benefits enrollment, and personal goal setting. Working closely with San Joaquin County Behavioral Health Services and San Joaquin Health, FSC will facilitate referrals and care coordination for both physical and behavioral health needs. The shelter will also offer pet-friendly accommodations, recognizing the essential bond between many unhoused individuals and their companion animals. Operating within a Housing First framework, FSC's shelters focus on stabilizing individuals before transitioning them to permanent housing. All staff are trained in de-escalation, cultural responsiveness, and trauma-informed care, creating a supportive and respectful environment where clients can begin to rebuild their lives.

The day-use access center will complement the shelter by offering walk-in services to unsheltered individuals who may not yet be ready or eligible for overnight stays. This

component will provide basic amenities such as showers, restrooms, laundry facilities, and charging stations, as well as direct access to outreach staff who assist with shelter assessments, referrals, and service coordination. The center will also support Coordinated Entry assessments and navigation for housing, employment, and health care. Through community partnerships, FSC will bring rotating services on-site; including legal aid, substance use counseling, probation support, and peer mentorship, creating an integrated service hub for the Lodi community. This access center will act as a gateway to deeper engagement, allowing individuals to build rapport with staff and progressively access more intensive supports.

FSC's operational philosophy is rooted in five guiding principles:

- Low-barrier access – Reducing entry requirements to ensure services reach those most in need.
- Harm reduction – Meeting individuals where they are without requiring sobriety or rigid compliance.
- Collaborative care – Leveraging partnerships with medical, behavioral health, and housing providers.
- Data-informed practice – Using HMIS data and client feedback to evaluate, refine, and improve outcomes.
- Cultural humility – Ensuring equitable, inclusive services for BIPOC, LGBTQ+, and other marginalized groups.

By combining shelter and day services within one coordinated system, FSC will create a continuum of care that meets individuals at every stage of readiness, offering both immediate relief and sustainable pathways out of homelessness.

5. Tasks and Implementation

Specify the key tasks and activities your organization will undertake to accomplish the program's goals. Explain how and when these activities will be implemented and monitored for Success.

To accomplish the program's goals of providing safe, low-barrier shelter and pathways to permanent housing, First Step Communities (FSC) will implement a structured set of tasks and activities across operations, services, staffing, and evaluation. The organization's proven operational model combines 24/7 facility management, individualized case planning, and collaborative partnerships to ensure that all services are effective, accountable, and outcomes-driven.

FSC will maintain continuous 24/7 shelter operations to ensure safety, cleanliness, and client engagement. Each guest will have access to individual sleeping units, restrooms, showers, laundry facilities, and daily meals. Staff will enforce trauma-informed safety protocols and established crisis response procedures to maintain a calm, supportive environment. The shelter will operate under a low-barrier model that accommodates individuals with behavioral

health challenges, pets, and limited documentation, ensuring accessibility for those most in need.

Upon entry, staff will conduct daily intakes and assessments using standardized tools to evaluate housing readiness, health needs, and service eligibility. Priority access will be provided to vulnerable populations, including medically fragile individuals, transitional age youth, and those with behavioral health needs. Within 72 hours of intake, each participant will be assigned a Case Manager who will develop an individualized service plan focused on housing, employment, benefits enrollment, and healthcare access. Case managers will facilitate referrals to external providers for mental health, substance use treatment, and legal assistance as needed.

FSC will coordinate with a network of community partners to provide on-site and off-site support. Partner agencies such as Elica Health Centers and Life Practice Counseling Group will offer rotating services on-site, while coordination with city and county housing programs will ensure smooth transitions into permanent housing. FSC will participate fully as a member of the Continuum of Care (CoC) and actively utilize the Coordinated Entry System (CES) to align housing placements and service coordination.

To ensure high-quality service delivery, FSC will provide ongoing staff training and supervision. Team members will receive instruction in trauma-informed care, harm reduction, motivational interviewing, and de-escalation. Weekly team meetings and individual supervision sessions will reinforce program fidelity and address operational challenges as they arise.

All program activities will be tracked through the Homeless Management Information System (HMIS) to monitor client progress and outcomes. Internal audits, data reviews, and client feedback tools will measure service effectiveness, compliance, and satisfaction.

Implementation will begin with site setup, staff onboarding, and community outreach in weeks 1–2, followed by client intake and initial housing navigation in weeks 3–4. By months 2–3, on-site partnerships will expand, and individualized service plans will be refined. FSC leadership will conduct weekly management meetings, monthly data reviews, and quarterly performance evaluations to monitor progress.

Program success will be measured through key indicators including shelter utilization, client retention, completed service plans, income growth, healthcare connections, housing placements, satisfaction surveys, and compliance with all city and county benchmarks. Through these structured activities and continuous evaluation, FSC ensures that every action supports stabilization, dignity, and lasting housing solutions.

6. Shelter Operations Capability

Demonstrate your organization’s capacity to develop, implement, and manage an emergency shelter. Include a brief summary of your organizational infrastructure, staffing, and internal Systems.

First Step Communities (FSC) has a decade-long record of successfully developing, implementing, and managing low-barrier, 24/7 emergency shelters and transitional housing programs across the Sacramento region. Since 2015, FSC has provided safe shelter, wraparound case management, housing navigation, and stabilization services to thousands of individuals experiencing homelessness each year. With the launch of four large-scale, multi-partner facilities, FSC now serves up to 400 individuals daily, demonstrating consistent fiscal accountability, operational excellence, and strong contract compliance with city and county agencies. FSC is ready to begin and sustain all operations put forth in this City of Lodi RFP and is prepared to execute our detailed operational implementation plan.

FSC's proven track record includes the start-up and continuous operation of:

- Roseville Road Campus – A tiny home shelter with a capacity of up to 145 individuals, including pets.
- North A Street Shelter – A low-barrier congregate shelter serving 80 individuals, plus a public access Sanitation Program offering restrooms and phone charging.
- Stockton Blvd Safe Stay – A tiny-cabin shelter providing a safe space for up to 175 individuals and accommodating pets.
- The Grove Emergency Bridge Housing – A tiny-cabin community for Transitional Age Youth (TAY) ages 18–24, with a capacity of 50 individuals.

The organization's leadership structure ensures clear accountability and operational excellence. FSC is led by Chief Executive Officer Stephen Watters and Executive Director Joseph Pacheco, who have successfully overseen the organization's growth from a small startup to a regional leader in homelessness services. The Chief Operating Officer, Benjamin Worrall, MSW, oversees all site logistics, staffing, training and safety systems; the Program Management Team ensures program fidelity and staff supervision; and the Finance and Administration Department manages budgets, payroll, procurement, and compliance with city, county, and state contracts.

FSC's leadership team's extensive experience brings and stability and strength to all operations. Partnering closely is the Sr. Director of Client Services who oversees case management across all sites and brings over 27 years of experience in behavioral health as a licensed psychiatric technician. The Director of Human Resources, Jason Coleman PHR, leads FSC's HR department and has modernized our standardized policies and prepared the organizational for growth through 2026. Additional key leadership includes Program Directors at our other shelters, as well as a Chief Financial Officer, IT Specialist, Public Information Specialist, and Operations Data Specialist who support agency-wide functions.

FSC employs a multidisciplinary staffing model that includes Program Managers, Case Managers, Shelter Monitors, Peer Support Specialists, and Administrative staff, all of which provide a more than adequate staffing structure. All employees are trained in trauma-informed care, harm reduction, motivational interviewing, de-escalation, and Housing First principles.

FSC's internal systems form a robust backbone for accountability and data-driven decision-making. The agency uses Homeless Management Information System (HMIS) for client tracking and reporting, QuickBooks for financial management, and cloud-based tools for documentation and communication. Policies and procedures are detailed in a comprehensive Operations Manual, and internal audits, data reviews, and leadership meetings occur weekly to ensure quality, compliance, and continuous improvement.

7. Admission and Program Participation Procedures

Provide detailed policies and procedures related to the intake and sheltering process, Including:

- **Client rules and guidelines**
- **Identification requirements**
- **Screening and assessment protocols**
- **Bed reservation and allocation system**
- **New client orientation process**
- **Policies for day-use clients and services**
- **Returning client procedures**
- **Exit and re-admission criteria for disqualification**

First Step Communities (FSC) maintains clear, consistent policies and procedures to ensure that all shelter and access center operations are safe, equitable, and accessible to individuals experiencing homelessness. Each FSC site has publicly posted client rules and guidelines that outline expectations for behavior, safety, and community respect. While rules are modified to meet the unique needs of each facility, they are all grounded in FSC's trauma-informed, harm-reduction, and Housing First philosophy.

FSC maintains an ultra-low barrier entry process designed to reduce obstacles for participation. Sobriety is not required for admission or continued stay. While possession or use of drugs and alcohol on site is prohibited, FSC uses a harm reduction approach, working with clients to manage recovery goals and make referrals to appropriate treatment or detox programs as needed. This approach emphasizes engagement and compassion rather than punishment, helping individuals stabilize and access long-term care.

The shelter will accommodate clients with pets, allowing one pet per client, up to a maximum of 15 dogs on site. FSC's pet policy ensures the safety of both clients and animals, including requirements for leashing, vaccinations, and designated relief areas. Staff assist clients in managing pet care responsibilities and accessing veterinary resources as available.

Identification is not required for initial entry into the program. FSC recognizes that lack of identification is a common barrier to accessing services. Case managers will work with clients to obtain essential documents such as state identification, birth certificates, and Social Security cards, facilitating eligibility for employment, benefits, and housing programs.

During the intake and assessment process, FSC staff utilize standardized Continuum of Care (CoC) assessment tools within the Homeless Management Information System (HMIS) to determine client needs and service eligibility. Each client will develop an Individual Service Plan (ISP) that identifies housing, employment, and health-related goals.

All new participants will receive a one-on-one orientation to the shelter or day-use center. Staff practice “radical hospitality,” focusing on building trust and engagement from the moment clients enter the facility. This personalized approach helps reduce anxiety, clarify expectations, and create a foundation for success.

The day-use access center will operate with a low-to-no barrier policy, providing access to basic amenities such as restrooms, showers, laundry, and charging stations. Day-use guests will receive information about available resources, housing referrals, and opportunities to transition into shelter or case management services.

Returning clients are welcome, provided they meet re-entry criteria and have resolved any prior safety or behavioral concerns. HMIS exit notes are reviewed before re-admission to ensure continuity of care. Exit and re-admission policies are applied consistently and focus on maintaining safety, fairness, and client dignity. Clients who are temporarily disqualified may return following a case review and evidence of progress toward resolving the issue that led to discharge.

FSC has both structured yet compassionate policies which ensures that every participant is treated with dignity and offered a clear, supportive path toward housing and stability. All policies mentioned herein are provided in the attached Organization Policy and Procedure Manual.

8. Connection to Services and Housing

Explain how your organization will coordinate and refer clients to supportive services and housing programs. Describe partnerships or systems used to facilitate these connections.

First Step Communities (FSC) operates on the principle that stable housing is achieved through coordinated, individualized support addressing both immediate needs and long-term barriers. Our referral and coordination model is grounded in partnerships with county agencies, healthcare providers, and housing system partners to ensure that each client moves through a seamless continuum of care, from crisis response to permanent housing and self-sufficiency.

At the City of Lodi Access Center, FSC will implement an integrated, client-centered case management system modeled after our successful programs in Sacramento County. Each participant will be assigned a Case Manager who conducts a comprehensive intake and assessment to identify housing, behavioral health, and supportive service needs. FSC uses a Housing First and trauma-informed framework, ensuring that clients are stabilized before progressing toward individualized service plans.

FSC's leadership team will coordinate closely with San Joaquin County Behavioral Health Services and San Joaquin Health, both of which will provide onsite services at the Access Center, including medical care, sobering services, isolation beds, and behavioral health respite care. This co-located model allows for real-time referrals and warm handoffs, minimizing barriers to engagement and ensuring that clients receive timely interventions for mental health, substance use, or physical health needs.

FSC will utilize and participate in the San Joaquin County Continuum of Care (CoC) and Coordinated Entry System (CES) to facilitate housing referrals. Case Managers will enter client data into the Homeless Management Information System (HMIS) to track progress, eligibility, and service linkages. Through CES, clients will be connected to rapid rehousing programs, permanent supportive housing, and transitional housing opportunities based on their individual vulnerability assessments. FSC's data and referral practices align with HUD and CoC standards, ensuring transparency, accountability, and measurable outcomes.

The FSC Sr. Director of Client Services, Lodi Access Center Program Director and the local Case Management team will leverage partnerships with local housing authorities, landlords, nonprofits, and service providers to streamline access to additional supports, including employment readiness, benefits enrollment, and life skills development. FSC provides essential wraparound services that address health, income, and education barriers that often prevent clients from sustaining stable income and housing.

Additionally, FSC integrates peer support specialists and housing navigators into daily operations. These team members have lived experience with homelessness and play a critical role in engaging clients, building trust, and ensuring follow-through with referrals. Regular case conferencing among staff and partners ensures that each client's plan remains current and coordinated across systems.

FSC's case management procedures will include quick, productive integration into the CoC housing referral process. Our coordination approach emphasizes warm handoffs, shared accountability, and continuous communication among partners. This ensures that clients are never left to navigate complex systems alone. By combining experienced staff, strong interagency partnerships, and participation in countywide data systems, FSC will ensure that every individual served at the Lodi Access Center has a clear and supported pathway toward housing stability, improved health, and long-term recovery.

9. Housing-Focused Goals

Describe your strategy for minimizing length of stay and assisting clients in obtaining permanent housing.

First Step Communities (FSC) operates all programs with a housing-first, housing-focused approach that prioritizes rapid stabilization, short shelter stays, and seamless transitions to permanent housing. At the City of Lodi Access Center, FSC will implement a structured,

individualized case management model that guides each participant through a clear pathway from crisis to housing stability.

Upon entry, every client will receive a comprehensive intake and housing assessment within the first 72 hours. Using tools aligned with the San Joaquin County Coordinated Entry System (CES), case managers will identify each client's housing barriers, such as income gaps, behavioral health needs, or lack of identification, and develop a personalized Housing Action Plan. These plans outline achievable short-term steps (such as document readiness, benefit applications, or treatment engagement) and long-term goals leading to permanent housing.

To minimize length of stay, FSC emphasizes rapid engagement and proactive housing navigation. Case managers will maintain small caseloads to ensure consistent contact and accountability. Weekly progress reviews will track milestones toward housing readiness, and staff will conduct regular case conferencing to coordinate support from partner agencies. By maintaining close communication with San Joaquin County Behavioral Health Services, San Joaquin Health, and local housing providers, FSC ensures that referrals, warm handoffs, and housing placements occur without unnecessary delays.

FSC's dedicated Housing Navigators and Peer Support Specialists play a critical role in sustaining client motivation and progress. Peers, many of whom have lived experience with homelessness, help clients navigate the complex housing process, attend appointments, and overcome barriers that might otherwise stall their success. FSC will also collaborate with local landlords, housing authorities, and rapid rehousing providers to increase access to available units, negotiate lease terms, and provide ongoing tenancy support.

The Access Center's wraparound model integrates behavioral health care, medical services, and employment readiness onsite. This co-located service approach reduces the time clients spend seeking external appointments and ensures that stabilization and treatment occur in tandem with housing efforts. FSC has seen measurable results using this model at its other facilities, where, depending on the specific site, 40-60% of participants achieve permanent housing or other positive exits, and average shelter stays have declined as service coordination has improved.

FSC's strategy for minimizing shelter stay duration is simple but effective: engage early, address barriers holistically, and connect clients swiftly to the next appropriate housing step. Through coordinated care, real-time data tracking in HMIS, and ongoing collaboration with community partners, FSC ensures that each individual's time in shelter serves as a bridge, not a destination, on the path to permanent housing and long-term stability.

10. HMIS Participation

Detail your organization's past or current use of HMIS and outline your plan to ensure compliance with all data entry and reporting requirements.

First Step Communities (FSC) considers itself a Homeless Management Information System (HMIS) super-user agency. HMIS is used to its fullest potential at all FSC programs to document services, outcomes, and referrals. Our organization strongly believes that accurate and robust data collection is essential to successful client outcomes, as well as program and staff performance analysis. FSC is not only compliant with HMIS data entry and reporting, we are regional leaders in HMIS data analysis. Our Executive Director, Joseph Pacheco, a Sacramento CoC Board Member, is the current Co-Chair of the CoC HMIS and Data Committee.

Accurate HMIS data collection is critical in FSC's regular review and evaluation of client progress, staff productivity, and accountability, and it serves as the foundation for data-informed decision-making. Program Managers and the Operations Team review data weekly to identify trends, measure outcomes, and ensure compliance with contract and HUD standards. FSC's dedicated Data Analyst provides monthly and ad hoc reports that correlate service delivery with client outcomes, allowing leadership to adjust procedures, enhance efficiency, and continuously improve program quality.

All FSC program staff are fully trained in HMIS data entry, privacy, and security protocols, ensuring accurate and timely documentation of client intakes, case notes, client service delivery, resource referrals, and program exits. Designated supervisory staff perform weekly data quality checks and monthly compliance reviews to verify completeness and accuracy before reporting. FSC also uses HMIS data to inform staff performance monitoring, funding reports, and program improvement efforts.

For the City of Lodi Access Center, FSC will fully comply with the San Joaquin Continuum of Care's HMIS policies and procedures, including participation in the Coordinated Entry System (CES). The organization will ensure that all case management staff receive county-specific HMIS training and that data is entered within required timelines. FSC will maintain strict adherence to client confidentiality, security protocols, and data integrity standards, ensuring complete compliance with all local, state, and federal reporting requirements.

11. Coordinated Entry Participation

Describe how your organization engages with the local coordinated entry system to assess client needs and match them with available services.

First Step Communities (FSC) is an active participant in the local Coordinated Entry System (CES), the region's standardized process for assessing, prioritizing, and matching individuals experiencing homelessness with available housing and supportive services. FSC views CES participation as essential to ensuring equitable access to resources and maximizing the impact of the homeless response system.

In Sacramento County, FSC has long partnered with Sacramento Steps Forward, the lead CES agency, to conduct client assessments, submit referrals, and ensure that clients are

prioritized appropriately based on vulnerability and need. FSC case managers are trained and certified in CES procedures, including the use of the Crisis Assessment (CA) and Housing Conversation Tool (HCT). We ensure each and every eligible shelter client receives the appropriate Coordinated Entry Referrals, and we work with each client to become document ready for all housing opportunities. This experience directly translates to the organization's ability to operate within the San Joaquin County CES, where FSC will fully align with local CES protocols and referral pathways.

At the City of Lodi Access Center, all clients entering the program will receive an initial intake and assessment by FSC staff trained in CES procedures. Case managers will coordinate directly with San Joaquin County Behavioral Health Services, San Joaquin Health, and local housing partners to identify the most suitable interventions, whether rapid rehousing, transitional housing, permanent supportive housing, or behavioral health stabilization.

FSC will ensure that all client data and assessments are entered into the Homeless Management Information System (HMIS) in real time to maintain accuracy and transparency. The organization also participates in case conferencing and multidisciplinary team meetings with CES partners to review client progress and ensure warm handoffs between systems.

Through proactive engagement, consistent data sharing, and collaborative service planning, FSC ensures that every client's journey through CES leads toward stability, recovery, and long-term housing success.

12. Accessibility and Inclusion

Describe how the proposed program will ensure accessibility for individuals with physical, mental, or developmental disabilities and those with other special needs.

First Step Communities (FSC) is deeply committed to ensuring that all programs are fully accessible and inclusive for individuals with physical, mental, or developmental disabilities, as well as those with other special needs. Accessibility and equity are core principles embedded in FSC's Housing First and low-barrier service model, which prioritizes safety, dignity, and individualized support for every participant.

The City of Lodi Access Center will be operated in full compliance with the Americans with Disabilities Act (ADA) and related state and local accessibility requirements. Facility design and daily operations will ensure barrier-free access to all sleeping areas, restrooms, showers, dining facilities, and common spaces. FSC will work closely with the City and its partners to ensure that all physical spaces, including entrances, pathways, and service areas, are accessible to individuals using mobility devices such as wheelchairs, walkers, or service animals.

FSC staff are trained to recognize and respond to the unique needs of clients with physical or cognitive disabilities. Case managers will conduct individualized assessments to identify

accessibility needs and coordinate appropriate accommodations, such as adaptive equipment, transportation assistance, or modified service delivery methods. For clients with behavioral health or developmental challenges, FSC will collaborate with San Joaquin County Behavioral Health Services to provide tailored case management, behavioral support, and linkage to specialized community-based resources.

In addition, FSC maintains a trauma-informed care environment that emphasizes empathy, choice, and empowerment. Staff receive ongoing training in mental health first aid, crisis de-escalation, and harm reduction, ensuring that individuals with behavioral or emotional needs are supported with compassion and professionalism.

By integrating accessibility considerations into every layer of operations, FCS will ensure that the Access Center remains a welcoming, equitable, and fully inclusive space for all individuals seeking safety, stability, and housing.

13. Outreach to Unsheltered Individuals

Share your plan to proactively reach out to Lodi's unsheltered population and encourage their voluntary transition to the Access Center.

First Step Communities (FSC) will implement a proactive and coordinated outreach strategy designed to engage Lodi's unsheltered population and support their voluntary transition into the Access Center. Building on FSC's extensive experience conducting outreach across Sacramento's encampments, riverfront areas, and business corridors, the organization's approach emphasizes trust building, consistency, and low-barrier engagement. FSC's goal is to ensure that every unsheltered individual in Lodi is aware of the Access Center's services and feels welcomed to participate on their own terms.

FSC's outreach team will include trained Outreach Specialists, Peer Support Specialists, and Case Managers who have direct experience working with unsheltered individuals. Many of these team members have lived experience with homelessness, which allows them to build credibility and rapport with individuals who may have experienced stigma or distrust toward service systems. Using a trauma-informed and harm-reduction approach, outreach staff will meet people where they are, both physically and emotionally, to offer compassionate and consistent support rather than enforcement-based intervention.

Outreach activities will include daily visits to areas where unsheltered individuals are known to reside, including encampments, parks, and public spaces. Staff will distribute information about Access Center services, provide essential items such as water, hygiene kits, and clothing, and assist individuals in accessing transportation to the facility. For those hesitant to enter shelter, staff will maintain ongoing contact, offering day-use access as a gradual introduction to services. This approach allows individuals to experience the safety and hospitality of the Access Center without immediate pressure to commit to overnight shelter.

FSC will work closely with City of Lodi staff, San Joaquin County Behavioral Health Services, and San Joaquin Health to coordinate outreach and ensure continuity of care. Outreach staff will participate in local Homeless Outreach and Engagement meetings and share real-time information through the Homeless Management Information System (HMIS) to avoid duplication of effort and improve coordination among providers. Collaboration with law enforcement, public works, and community-based organizations will ensure a unified outreach response grounded in compassion and voluntary participation.

In addition, FSC will maintain a mobile outreach presence during key hours of the day and evening to accommodate varying schedules and reach individuals who may avoid traditional service hours. The team will carry tablets and Wi-Fi hotspots to conduct on-site intakes and Coordinated Entry assessments, allowing individuals to begin the shelter admission process immediately upon engagement.

Success will be measured by the number of unsheltered individuals contacted, the number who accept day-use or shelter services, and the number who subsequently transition into housing navigation or permanent housing programs.

Through consistent outreach, peer engagement, and collaborative partnerships, FSC will ensure that the Access Center becomes a trusted and accessible hub for Lodi's unsheltered residents and a safe first step on the path to stability and long-term housing.

14. Community Engagement and Good Neighbor Plan

Provide a detailed "Good Neighbor Plan" that includes:

- **Communication with residents, businesses, and community groups**
- **Public education and outreach**
- **Security and property management**
- **Responsiveness to neighborhood concerns**
- **Strategies to minimize community impact**

First Step Communities (FSC) is committed to being a responsible and responsive neighbor in every community where it operates. First Step's "Good Neighbor Policy" is designed to promote open communication, uphold safety, maintain clean and welcoming surroundings, and ensure that the Access Center operates as a positive presence within the City of Lodi.

We educate our guests and neighbors on the good neighbor policy and our staff address violations in a trauma informed, constructive way while maintaining excellent communication with neighboring businesses and residents.

Communication with Residents, Businesses, and Community Groups: FSC maintains open lines of communication with nearby residents, businesses, and community organizations. Prior to opening, FSC leadership will meet with neighborhood associations, local business owners, and civic groups to establish relationships based on transparency and respect. The FSC Program Director will serve as the Community Liaison and primary contact for neighborhood

concerns, attending community meetings as needed. Contact information will be clearly posted at the facility and shared with local stakeholders.

Public Education and Outreach: FSC will engage in ongoing public education to increase understanding of homelessness and the purpose of the Access Center. Community presentations, informational materials, and guided tours (when appropriate) will help residents and business owners better understand program operations and the support services provided. FSC's leadership and communications team will participate in community forums and provide updates through newsletters or digital communications.

Security and Property Management: Safety and cleanliness are core to FSC operations. All sites are staffed 24 hours a day, seven days a week, with trained personnel who conduct regular patrols of the facility and surrounding area. FSC will work closely with the City of Lodi Police Department and local code enforcement to address safety or nuisance concerns promptly. The shelter will maintain clear perimeters and adequate lighting and will not permit camping or loitering on or around the premises. Daily maintenance crews will ensure that the facility and nearby sidewalks remain clean, secure, and free of debris.

FSC does not employ security guards. Instead, staff receive communication and de-escalation training to resolve conflict effectively and maintain calm and decorum. Staff are also trained to call emergency services when the situation warrants.

Responsiveness to Neighborhood Concerns: FSC will address community concerns immediately and respectfully. When complaints arise, staff will respond within 24 hours, investigate the issue, and communicate follow-up actions to the reporting party. The Community Liaison and Program Manager will maintain a log of all concerns, actions taken, and resolutions to ensure accountability and transparency.

Strategies to Minimize Community Impact: FSC's client rules and shelter procedures include curfews, quiet hours, and guidelines that discourage loitering and overnight absence from the shelter. Staff will reinforce these expectations and offer case management resources to ensure peace and prosperity for our neighbors.

Through consistent communication, transparency, and accountability, FSC will ensure that the Access Center operates as a well-managed, safe, and community-integrated resource that benefits both participants and the broader Lodi community. FSC's Good Neighbor Policy is attached.

15. Security Policies and Procedures

Describe your proposed security plan, including policies related to:

- Secured entry/exit points
- On-site security personnel
- Loitering deterrence
- Conflict de-escalation

- **Client property storage**
- **Handling of weapons or contraband**
- **Coordination with law enforcement**
- **Overflow bed management**

First Step Communities implements a layered security plan that protects clients, staff, and neighbors while preserving a welcoming, trauma-informed environment. The facility will use a single main entrance for clients and visitors during standard hours and a controlled night entrance after curfew. All other exterior doors will be alarmed and monitored through access control and camera systems covering entries, common areas, and exterior perimeters. Staff will maintain a visitor log, verify identities when appropriate, and escort all vendors and service partners while on site.

On-site security personnel and trained shelter monitors will provide 24-hour coverage. Their role is safety, hospitality, and problem solving, not enforcement. Security will conduct routine perimeter walks, monitor camera feeds, and support staff with incident prevention and response. Loitering deterrence will include posted expectations, regular engagement by staff, clean and well-lit surroundings, and clear boundaries around the property. Clients will be encouraged to use the day-use center or program spaces rather than congregate at entrances or sidewalks.

All staff receive training in conflict recognition, verbal de-escalation, motivational interviewing, and crisis response. Supervisors will be available at all times for consultation and coaching during incidents. When necessary, staff will employ a graduated response that begins with engagement and redirection, proceeds to brief safety separations or room changes, and only as a last resort involves law enforcement. All incidents will be documented in the incident log and, when applicable, recorded in HMIS case notes.

Client property will be stored in assigned lockers or secure bins, with overflow items kept in a locked storage room. Clients will have access to their property during designated hours. Intake includes a property review, voluntary bag check with consent, and explanation of prohibited items. Weapons and contraband are not permitted. An amnesty procedure allows clients to surrender prohibited items without penalty at check-in. If a weapon or illegal substance is discovered, staff will secure the area, follow chain-of-custody protocols, and notify law enforcement when required by policy or law. For suspected overdose or medical emergencies, staff will activate 911, administer naloxone if indicated, and follow emergency medical response procedures.

Coordination with law enforcement will focus on safety and problem solving. The Program Manager will maintain regular communication with the Lodi Police Department and Code Enforcement, share non-confidential trend information, and participate in neighborhood coordination meetings. For critical incidents, staff will initiate immediate notification to the City's designated contacts and complete follow-up reports.

Overflow bed management will follow a written protocol triggered by severe weather events, public health directives, or system surges. The protocol clarifies temporary capacity, priority populations, staffing adjustments, and safety ratios. FSC will coordinate with the City, County Partners, and the local Continuum of Care to ensure equitable access, document any variances from standard occupancy, and return to baseline capacity when the surge ends.

This balanced approach combines controlled access, skilled staff, clear expectations, and collaborative partnerships to maintain a safe, calm, and dignified setting for all. All policies listed above are provided in the attached Organization Policy and Procedure Manual.

16. Health and Safety Policies

Describe your proposed policies related to client health and safety, including:

- **Prescription medication handling**
- **Use of over-the-counter medications**
- **Infection control protocols**
- **HIPAA compliance and client confidentiality**

First Step Communities will maintain health and safety policies that protect clients and staff while supporting client autonomy and privacy. Policies are implemented through written procedures, staff training, and routine quality reviews that align with state and local guidance as well as partner protocols established with San Joaquin Health and San Joaquin County Behavioral Health Services.

Medications remain the property and responsibility of the client. Upon request, clients may store prescriptions in a locked, supervised medication room with individually labeled bins and a temperature-controlled cabinet/refrigerator. Staff facilitate client self-administration by verifying identity and retrieving the client's labeled medication. Staff do not dispense or administer prescription medications. Expired or abandoned medications are logged and disposed of according to local regulations.

The shelter maintains fully stocked first aid supplies, and all facilities are supplied with an Automated Electronic Defibrillator (AED). Staff are trained in first aid, CPR and the use of AED's.

For facility sanitation, FSC uses a layered approach that includes daily cleaning schedules for high touch surfaces, routine deep cleaning, readily available hand hygiene stations, personal protective equipment, and sharps containers in restrooms and medical areas. Clients with symptoms of communicable illness are provided masks and rapid testing when available, and are referred to onsite clinic services for evaluation. Isolation and cohort procedures are activated when clinically indicated or directed by public health, using designated rooms or partner provided isolation beds.

Food service follows established California safe handling standards. All staff with food handling responsibilities are required to pass the state Food Handlers' Certification. Staff

receive annual training on bloodborne pathogens, respiratory hygiene, and environmental cleaning practices, and supervisors monitor compliance through documented rounds.

Although we do not allow possession or use of alcohol and drugs on site, it is a reality that some clients struggle. To fight the real-life possibility of overdose, FSC trains all shelter staff on the storage and use of Naloxone (Narcan), a life-saving drug used to reverse opioid overdose. When supplies are available, all FSC staff carry Naloxone on their person during their shift. FSC is also certified by the CA Department of Health Care Services to receive free Naloxone distribution.

First Step holds dearly the privacy and confidentiality of all client records. Access to electronic records is role based and secured by unique credentials, multi-factor authentication, and audit logging. Paper records are stored in locked cabinets within restricted-access offices. Releases of Information are obtained before sharing data with partners, except where required by law for safety or mandated reporting. Staff are trained at hire and annually on privacy, minimum necessary standards, de-identification, and breach response. Private rooms are used for intakes, case management, and telehealth to prevent incidental disclosure. Reportable breaches trigger immediate containment, leadership notification, documentation, and corrective action.

These policies create a safe, respectful environment that supports client wellness, enables effective coordination with healthcare partners, and ensures compliance with privacy and public health standards. All policies listed above are provided in the attached Organization Policy and Procedure Manual.

17. Facility Maintenance Plan

Explain how your organization will maintain a clean, safe, and sanitary facility environment on a daily basis.

First Step Communities (FSC) will maintain the City of Lodi Access Center as a clean, safe, and sanitary facility through a structured Facility Maintenance Plan that integrates daily housekeeping, preventive maintenance, and health and safety oversight. FSC has successfully implemented similar systems at all existing shelter sites and will bring the same operational discipline and accountability to this program.

A dedicated Facilities Lead will oversee all maintenance and custodial operations. The plan establishes daily, weekly, and monthly cleaning schedules that cover sleeping quarters, restrooms, showers, kitchens, laundry rooms, offices, and outdoor areas. Cleaning staff will follow written checklists for each area, using EPA-approved disinfectants and proper protective equipment. High-touch surfaces such as doorknobs, handrails, and counters will be sanitized multiple times daily. Restrooms and showers will be cleaned at least three times per day and replenished with soap, paper products, and sanitizer.

Food preparation areas will comply with local health and safety codes. The kitchen team will maintain temperature logs, label and date food items, and separate raw and cooked foods to prevent contamination. Laundry machines will be sanitized regularly, and bedding will be washed after each guest's departure.

Preventive maintenance tasks will be performed according to a maintenance calendar developed in coordination with licensed contractors. This includes quarterly HVAC filter replacements, monthly pest control inspections, fire safety checks, and annual inspections of plumbing, electrical, and mechanical systems. Exterior lighting, fencing, and walkways will be inspected regularly to ensure safety and visibility.

Supplies will be managed through a par-level inventory system to ensure continuous availability of disinfectants, cleaning supplies, PPE, and hygiene items. All chemical storage areas will meet OSHA standards and maintain accessible Safety Data Sheets (SDS). Staff receive training in chemical handling, bloodborne pathogen control, and proper cleaning techniques.

The Facilities Lead and Program Manager will conduct morning and evening walkthroughs to identify and address hazards immediately. Issues requiring repair will be entered into a digital work order system to ensure prompt completion and documentation. Weekly leadership reviews will monitor progress and identify recurring maintenance trends.

Client participation is encouraged through resident feedback and volunteer cleaning rotations that promote pride and shared responsibility for the environment. Any client concerns related to cleanliness or facility safety will be reviewed and resolved within 24 hours.

Through consistent scheduling, strong oversight, and collaboration between custodial, maintenance, and program staff, FSC will maintain a clean, organized, and sanitary facility that upholds dignity and safety for every guest and reflects positively on the surrounding Lodi community.

18. Transportation Plan

Describe your proposed transportation-related policies and procedures, including:

- **Client transportation to/from the Access Center facility**
- **Transportation of new clients and their belongings**
- **Response to emergency transport needs initiated by Police or City staff**
- **Receiving donations and deliveries**

First Step Communities (FSC) will implement a comprehensive Transportation Plan to ensure clients, staff, and community partners can safely and efficiently access the City of Lodi Access Center. Transportation procedures will prioritize client safety, accessibility, and coordination with City and County partners while supporting daily operations, emergency response, and logistical needs such as donations and deliveries.

FSC will work closely with the City of Lodi, San Joaquin County Behavioral Health Services, and San Joaquin Health to coordinate transportation for clients accessing shelter or services. Public transit routes serving the Access Center will be clearly posted and reviewed with each client during intake. FSC staff will distribute transit schedules, assist clients in obtaining bus passes, and provide orientation on local routes. For clients with mobility challenges or urgent health needs, FSC will arrange rides through paratransit, County-operated transport, or partner agencies as appropriate.

For new admissions, FSC staff will provide transportation assistance from designated pick-up locations such as hospitals, outreach sites, or law enforcement referrals. FSC vehicles will be used to transport clients and their personal belongings directly to the facility. Clients with larger quantities of belongings will be accommodated with storage bins or short-term arrangements through local storage vendors. Staff will maintain a supportive and respectful approach during transitions to ensure the move is comfortable and preserves client dignity.

FSC maintains strong working relationships with local law enforcement and emergency responders. When police or City staff identify an individual in need of immediate shelter, FSC will coordinate transportation directly to the Access Center using either FSC-operated vehicles or approved city transport services. For individuals requiring medical care or crisis stabilization prior to entry, staff will facilitate transport to San Joaquin Health's medical clinic or Behavioral Health Respite located on campus. FSC staff will be available 24 hours a day to receive emergency referrals, ensuring no lapse in service.

The Access Center will have a designated receiving area for all deliveries and donations, located near the main administrative entrance. FSC staff will coordinate with vendors, food providers, and community donors to schedule deliveries during standard operating hours. All donations will be inventoried, inspected for safety, and stored in appropriate locations. Food and perishable items will be handled under proper storage and temperature control protocols.

All staff involved in transportation activities will receive training on client confidentiality, emergency procedures, and defensive driving. Vehicles will be inspected weekly, logged for maintenance, and kept in compliance with safety and insurance standards. Through careful planning, coordinated partnerships, and strong operational oversight, FSC's Transportation Plan will ensure that all clients can safely access the Access Center and its services while maintaining efficient, organized, and responsive operations for the City of Lodi.

19. Nondiscrimination and Equity Policies

Detail your organization's policies for:

- **Compliance with all applicable federal and state civil rights laws**
- **Adherence to the Americans with Disabilities Act (ADA)**
- **Prevention of sexual harassment**
- **Policy on identifying alternative resources for individuals not eligible for onsite services (registered sex offenders, disqualified due to behaviors, etc.)**

First Step Communities (FSC) is committed to providing equitable, inclusive, and nondiscriminatory services to every individual who seeks assistance. All programs comply with federal, state, and local civil rights laws including Title VI and Title VII of the Civil Rights Act of 1964, the Fair Housing Act, Section 504 of the Rehabilitation Act, the Age Discrimination Act, the Americans with Disabilities Act (ADA), and the Equal Employment Opportunity Act. FSC maintains written nondiscrimination and equity policies that are reviewed annually and incorporated into staff orientation, training, and performance expectations.

FSC prohibits discrimination in all programs and activities on the basis of race, color, national origin, religion, gender, gender identity or expression, sexual orientation, disability, age, ancestry, marital status, or any other protected classification. Equal access to services is ensured through inclusive outreach, language accessibility, and culturally responsive engagement. Notices of nondiscrimination are displayed at all facilities, and clients and staff are informed of grievance procedures that allow concerns to be reported confidentially without fear of retaliation. Complaints are reviewed promptly by management and, when necessary, escalated to the Executive Director or governing Board for resolution.

FSC ensures that all facilities, programs, and activities are accessible to individuals with physical, mental, or developmental disabilities. The Access Center will meet ADA facility design standards, including accessible restrooms, ramps, entrances, and sleeping areas. Reasonable accommodations, auxiliary aids, and program modifications are provided upon request. Staff receive training on disability awareness, effective communication, and accommodation procedures. Clients with mobility or sensory impairments are prioritized for ADA-compliant spaces, and FSC partners with County Behavioral Health and Health agencies to ensure connection to supportive services and adaptive equipment as needed.

FSC enforces a zero-tolerance policy regarding sexual harassment, intimidation, or exploitation among staff, volunteers, and clients. Employees receive training at hire and annually thereafter on recognizing, preventing, and reporting harassment or inappropriate conduct. Clients are informed of their rights during orientation and provided several ways to report concerns confidentially, including direct contact with management or an anonymous reporting method. All reports are investigated promptly, corrective actions are taken as needed, and documentation is maintained in accordance with policy.

While FSC operates low-barrier programs designed to serve nearly all individuals in need, certain circumstances may prevent an individual's admission, such as registered sex offenders restricted by proximity laws or individuals temporarily disqualified due to violent or unsafe behavior. In such cases, FSC staff work with City personnel, County partners, and Continuum of Care providers to connect individuals to appropriate alternative shelter, outreach, or supportive services.

Through these policies, FSC ensures that every client is treated with dignity, fairness, and respect while maintaining a safe, inclusive, and compliant environment for all participants and staff. The policy manual attached covers all of the above policies and reflects FSC's

commitment to serving every individual whenever possible; however, when on-site services cannot safely or legally be provided, FSC is developing a clear policy to ensure appropriate alternative placements and continued support.

20. Pet and Service Animal Accommodation

Describe your proposed policies for allowing and managing pets and service animals on-site.

First Step Communities (FSC) recognizes that pets and service animals are often a vital source of companionship, stability, and emotional support for individuals experiencing homelessness. FSC's policy ensures that clients are not forced to separate from their animals in order to access shelter or services. The Access Center will accommodate pets and service animals in a manner that maintains safety, cleanliness, and compliance with federal, state, and local regulations, including the Americans with Disabilities Act (ADA) and Fair Housing guidelines.

The facility will allow one pet per client, with a total capacity of up to fifteen dogs at any given time. During intake, all animals will be registered, and owners will review and sign a pet agreement outlining care responsibilities, vaccination requirements, and behavior expectations. FSC staff will assist clients with completing forms, reviewing policies, and accessing local veterinary resources. Clients must keep pets leashed or crated when outside sleeping areas and under their direct control at all times. A designated outdoor area will be maintained for pet relief and exercise, equipped with waste disposal stations to ensure cleanliness.

Clients are responsible for their animal's daily care, feeding, and hygiene. FSC staff will partner with local animal welfare organizations and veterinary clinics to help clients access vaccines, spay/neuter services, and emergency care when possible. Basic pet supplies such as food, leashes, and crates will be available on site for clients who need them. If issues arise related to safety or sanitation, staff will address concerns through coaching, corrective plans, and referrals to community resources before considering alternative arrangements

Service animals will be accommodated in accordance with ADA requirements. FSC will not request documentation or certification beyond what is legally allowed and will accept a client's verbal statement identifying an animal as a trained service animal. Service animals are exempt from pet limits and fees. Staff will receive training on how to appropriately interact with service animals and how to handle situations where animals may become agitated or disruptive.

Cleanliness and health standards will be upheld through daily sanitation of animal areas, routine pest control, and regular inspections by facility staff. Pet waste will be removed promptly, and all shared spaces will be disinfected regularly to maintain a healthy environment.

If a pet or service animal poses a direct threat to others or cannot safely remain at the shelter, FSC will work with the owner and local partners to arrange short-term boarding or alternative accommodations. By combining compassion with accountability, FSC's pet and service animal

policy ensures a welcoming, safe, and inclusive environment where both clients and their animals can thrive. FSC's pet policy is attached for your review.

21. Grievance and Complaint Procedures

Outline your policies for receiving, reviewing, and resolving client grievances and complaints. Include your whistleblower policy.

First Step Communities (FSC) maintains a transparent and accessible grievance and complaint process designed to ensure that all clients, staff, and stakeholders are treated with dignity, respect, and fairness. The purpose of this process is to provide a safe and confidential means for clients to express concerns, report problems, or appeal decisions without fear of retaliation. All grievances and complaints are taken seriously, reviewed promptly, and resolved in a manner that is consistent, equitable, and well-documented.

Clients are informed of their rights and the grievance process during orientation and through posted notices throughout the facility. Grievances may be submitted verbally or in writing to any staff member, supervisor, or directly to the Program Manager. For clients with literacy or language barriers, staff will assist in documenting the concern while maintaining confidentiality. Anonymous complaints are also accepted and reviewed with the same level of attention.

Once a grievance is received, the Program Manager or designated supervisor will acknowledge the complaint within 24 hours and initiate a review. Most issues are resolved within five business days through mediation, clarification, or corrective action. If the concern cannot be resolved at the program level, it is escalated to the Executive Director or designee for a secondary review. The Executive Director will provide a written response outlining findings and any corrective steps taken. Records of all grievances, investigations, and resolutions are maintained in a confidential log for quality assurance and compliance monitoring.

Clients retain the right to appeal final determinations by submitting a written appeal to the FSC Board of Directors or a third-party mediator identified by the City of Lodi. FSC encourages open dialogue and prioritizes resolution through collaboration and transparency.

FSC also maintains a formal Whistleblower Policy that applies to all employees, contractors, and volunteers. This policy encourages staff to report, in good faith, any suspected violations of law, unethical behavior, safety concerns, financial misconduct, or violations of organizational policy. Reports may be made directly to the Executive Director, Human Resources Director, or the Board Chair, verbally or in writing. FSC prohibits retaliation or adverse action against anyone who files a complaint or participates in an investigation. All whistleblower reports are investigated promptly and confidentially, and corrective measures are implemented when warranted.

In addition, FSC's Human Resources Department conducts regular staff training on grievance and whistleblower procedures to ensure that all personnel understand their obligations to

maintain transparency, fairness, and accountability. It is through these policies, FSC ensures that clients and staff alike have meaningful avenues to voice concerns, resolve conflicts, and maintain trust in the fairness and integrity of organizational operations. FSC's grievance policy is attached for your review.

22. Incident Reporting and Documentation Policy

Outline your system for reporting, documenting, and following up on client and staff incidents (e.g., injuries, altercations, overdoses, critical behavioral health events).

First Step Communities (FSC) maintains a comprehensive Incident Reporting and Documentation Policy to ensure all client and staff incidents are handled with transparency, consistency, and accountability. The policy establishes clear procedures for identifying, reporting, documenting, and following up on incidents such as injuries, altercations, overdoses, medical emergencies, and behavioral health crises. FSC's system prioritizes safety, timely response, and continuous quality improvement across all programs.

All staff are trained during onboarding and annually thereafter on how to recognize and report incidents according to FSC protocol. Any staff member who witnesses, responds to, or becomes aware of an incident must immediately notify the shift supervisor or Program Manager. The supervisor ensures that emergency medical, law enforcement, or behavioral health response is activated as needed to protect client and staff safety. When a life-threatening event such as an overdose or medical emergency occurs, staff initiate 911 procedures, provide first aid or naloxone administration if trained, and remain with the individual until emergency responders arrive.

An Incident Report Form is completed by the staff involved within 24 hours of the event. The report includes the date, time, location, individuals involved, nature of the incident, immediate actions taken, witnesses, and follow-up measures. Supervisors review the report for completeness and accuracy, and then forward it to the Program Manager for investigation. The Program Manager conducts a review that may include interviews, review of security footage, and examination of logs or case notes. Once verified, the incident is logged into FSC's secure internal database, which is restricted to authorized personnel and maintained in compliance with privacy and confidentiality standards.

Incidents are categorized by severity and type to determine appropriate follow-up. Minor incidents, such as verbal disputes or minor injuries, may be resolved at the program level through mediation or staff coaching. Major or critical incidents, including physical altercations, overdoses, or serious injuries, are immediately reported to the Chief Operating Officer and Executive Director for review and further action. In cases involving clients receiving county-funded services, reports are shared with the appropriate City or County oversight agency in accordance with contractual and regulatory requirements.

FSC also ensures that all clients involved in an incident receive follow-up care. Case Managers meet with clients to review the event, provide referrals to behavioral health or

medical services, and update Individual Service Plans as needed. Staff debriefings are held after significant incidents to review the response, identify lessons learned, and recommend preventive strategies.

Weekly and monthly reviews of incident trends are conducted by leadership to identify patterns, improve safety protocols, and inform staff training. Through consistent documentation, timely reporting, and a culture of accountability, FSC maintains a safe and responsive environment for both clients and staff at the Access Center. FSC's Incident Reporting and Documentation policy is in the attached Organization Policy and Procedure Manual.

23. Emergency Preparedness and Response Plan

Describe your protocols for handling facility emergencies including:

- **Medical emergencies**
- **Fire evacuation procedures**
- **Staff training on emergency drills**

First Step Communities (FSC) maintains a comprehensive Emergency Preparedness and Response Plan to ensure the safety of clients, staff, and visitors during any facility emergency. The plan establishes clear procedures for responding to medical incidents, fires, natural disasters, and other critical events. It is reviewed annually and updated in coordination with local emergency services, the City of Lodi, and San Joaquin County partners to remain consistent with current best practices and safety standards.

Medical Emergencies

All staff are trained in basic first aid, CPR, and the administration of naloxone for suspected overdoses. When a medical emergency occurs, staff immediately call 911 and remain with the individual until emergency responders arrive. Staff are instructed to provide assistance only within their scope of training and to ensure the safety of others in the area. Emergency contact information for each client is maintained in secure files and accessible during emergencies. Once the situation is stabilized, the incident is documented using FSC's standard incident report form, and the Program Manager ensures appropriate follow-up care and communication with the client's case manager or behavioral health provider.

Fire Evacuation Procedures

FSC's fire safety plan is designed in coordination with the City of Lodi Fire Department and complies with all local fire codes. Clearly marked exit routes, emergency lighting, and illuminated exit signs are maintained throughout the facility. Fire extinguishers are located in accessible areas and inspected monthly. In the event of a fire alarm, staff immediately guide clients to designated assembly points outside the building. Floor wardens and shelter monitors are assigned specific roles during evacuation, including accounting for clients, assisting individuals with mobility challenges, and checking restrooms and common areas to ensure full evacuation. Once all occupants are safely outside, the Program Manager or designee contacts emergency services, secures the site, and prohibits re-entry until cleared by fire personnel.

Staff Training and Emergency Drills

Emergency preparedness is integrated into FSC's orientation for all new employees and reinforced through ongoing training. Staff receive instruction on fire safety, medical emergencies, severe weather procedures, and active threat response. Evacuation maps, emergency numbers, and key procedures are posted in common areas for staff and client reference. The Program Manager conducts fire and evacuation drills at least twice per year, with one unannounced drill to test readiness. Results of each drill are documented, reviewed by leadership, and used to improve procedures.

In addition, FSC maintains an emergency supply kit including first aid materials, flashlights, batteries, bottled water, and non-perishable food items. By combining structured training, regular drills, and clear coordination with local emergency responders, FSC ensures the Access Center remains a safe and prepared environment for all who live and work there. FSC's Emergency and Preparedness Plan is in the attached Organization Policy and Procedure Manual.

24. Staff Training and Development

Detail required staff training (e.g., trauma-informed care, de-escalation, cultural competency, CPR/First Aid, confidentiality). Include any ongoing professional development or certification Requirements.

First Step Communities (FSC) places a strong emphasis on staff training and professional development to ensure that all employees provide high-quality, compassionate, and trauma-informed services. The organization's training framework is designed to equip staff with the knowledge, skills, and confidence to serve diverse populations safely and effectively. All training requirements are documented, tracked through FSC's Human Resources platform, and reviewed annually to ensure compliance and continuous improvement.

All new employees participate in a structured orientation program during their first week of employment. Orientation includes an overview of FSC's mission, policies, client rights, confidentiality, safety procedures, and ethical standards. New hires also receive training in trauma-informed care, emphasizing empathy, emotional safety, and empowerment for individuals with lived experiences of trauma.

Staff complete de-escalation and crisis intervention training, which focuses on identifying early warning signs of distress, using calming communication techniques, and resolving conflicts peacefully. All frontline employees are trained in harm reduction principles and Housing First practices, ensuring that services remain low-barrier, client-centered, and respectful of individual autonomy. Cultural competency is a cornerstone of FSC's service delivery model. Employees receive cultural humility and implicit bias training to strengthen awareness and understanding of the experiences of people from different racial, ethnic, cultural, and LGBTQ+ backgrounds. This training supports equitable treatment of clients and promotes an inclusive organizational culture.

All staff are required to maintain current CPR and First Aid certification, with training provided or reimbursed by FSC. Designated staff also complete Naloxone (Narcan) training to respond safely to opioid overdoses. Additional emergency preparedness sessions cover fire safety, evacuation procedures, and emergency communication protocols.

Confidentiality training is mandatory for all employees and covers compliance with the Health Insurance Portability and Accountability Act (HIPAA), the Violence Against Women Act (VAWA), and applicable state privacy laws. Employees learn how to handle sensitive information, maintain client trust, and uphold professional boundaries.

Supervisors and case management staff participate in specialized training in motivational interviewing, strength-based case management, and documentation standards for HMIS and client records. FSC partners with local behavioral health agencies and the Continuum of Care (CoC) to provide ongoing workshops and professional certifications relevant to homelessness services, crisis response, and case management best practices.

FSC also supports ongoing professional growth through monthly in-service training, quarterly staff development meetings, and access to external continuing education opportunities. Supervisors conduct regular performance reviews that include individualized training plans to strengthen employee skills and career advancement. By combining initial onboarding, mandatory certifications, and continuous professional development, FSC ensures that all staff are well-prepared to provide trauma-informed, culturally responsive, and high-quality care that promotes safety, dignity, and long-term stability for every client served at the Access Center.

25. Internal Monitoring and Quality Assurance

Explain how your organization monitors service delivery quality, ensures compliance with regulations and funder requirements, and uses data to drive performance improvement.

First Step Communities (FSC) maintains a rigorous internal monitoring and quality assurance system to ensure that all programs deliver high-quality, compliant, and outcome-driven services. This system integrates daily oversight, formal audits, performance measurement, and data analysis to maintain accountability and support continuous improvement across all levels of operation.

Service delivery quality begins with strong supervision and clearly defined accountability and performance standards. Each program site is overseen by a Program Manager who monitors daily operations, staff performance, and client satisfaction. Shift Supervisors conduct regular case reviews, observe staff-client interactions, and provide ongoing coaching to ensure that trauma-informed, harm reduction, and Housing First practices are consistently applied. Weekly team meetings are used to review client progress, discuss challenges, and reinforce quality expectations.

FSC's Operations Management Team performs regular internal audits to ensure adherence to organizational policies, regulatory requirements, and contract performance standards. These reviews include verification of client files, staff training records, facility safety logs, and fiscal documentation. Any findings are documented in a corrective action plan, which includes timelines and responsible parties for resolution. Follow-up monitoring confirms that corrective steps are completed and effective.

For the Case Management team, HMIS activity reports quantify CM/Client activity levels, and identify clients with a lack of CM engagement. These reports ensure all clients are receiving one-on-one support and they identify clients at risk of falling through the cracks. Case Management Supervisor performs regular Data collection and performance measurement are central to FSC's quality improvement strategy. All client data are entered into the Homeless Management Information System (HMIS), which tracks demographics, services, resource connections, and housing outcomes in real time. HMIS data are reviewed weekly by program staff and monthly by leadership to evaluate performance against key indicators such as occupancy rates, engagement levels, exits to permanent housing, and returns to homelessness.

FSC also employs a staff member dedicated to statistical analysis of organizational performance, who holds a master's degree in data analytics. This staff member provides monthly and ad hoc reports that help leadership interpret service trends and evaluate program impact. His analyses have already demonstrated correlations between operational practices and client outcomes, enabling FSC to make informed adjustments to procedures that enhance efficiency and improve long-term housing results. His findings are presented in management meetings and integrated into quarterly program reviews to guide data-informed decision making.

To ensure compliance with funder and regulatory requirements, FSC maintains a centralized Contracts and Grants Division responsible for tracking deliverables, performance benchmarks, and reporting deadlines. This team collaborates closely with program leadership and the finance department to ensure alignment between service outcomes and fiscal accountability. For financial tracking and reporting, FSC undergoes annual independent audits and single audits (as applicable) to confirm adherence to grantor and federal financial and regulatory standards.

Client feedback is another key component of FSC's quality assurance process. Anonymous surveys, suggestion boxes, and focus groups provide valuable insights into service accessibility, safety, and staff responsiveness. All sites have a prominently posted client concern form that is completed online. Online responses to the client concern form bypass local staff and supervisors to ensure our top management receive direct, unfiltered feedback from the clients we serve, effectively building an extra layer of accountability to the clients in our shelters. This feedback is reviewed by leadership and incorporated into improvement plans. Through systematic oversight, expert data analysis, and a culture of continuous

learning, FSC ensures that every program remains accountable, compliant, and focused on improving outcomes for the individuals and communities it serves.

26. Confidentiality, Client Records, and Data Security

Describe your policies and practices for maintaining and safeguarding client records, ensuring HIPAA and HMIS compliance, managing data sharing with partners, and responding to potential breaches.

First Step Communities (FSC) maintains strict policies and procedures to protect the confidentiality, privacy, and security of all client records. These policies are designed to comply fully with the Health Insurance Portability and Accountability Act (HIPAA), federal and state confidentiality regulations, and Homeless Management Information System (HMIS) data-sharing standards. FSC views client confidentiality as essential to building trust and ensuring that every participant feels safe engaging in services.

All client records, whether paper or electronic, are stored securely and accessible only to authorized personnel. Electronic records are housed in encrypted databases with password protection and multi-factor authentication. Staff access levels are role-specific, meaning employees can view only the information necessary to perform their duties. Paper records are maintained in locked filing cabinets within restricted-access offices. All client documents and electronic files are retained, archived, or destroyed according to FSC's Records Retention Policy and applicable funder requirements.

FSC's data security protocols include the use of firewalls, antivirus protection, and encrypted email for transmitting sensitive information. The organization conducts regular IT audits and security updates to ensure compliance with federal and state privacy regulations. Any laptops or mobile devices used for outreach or case management are password-protected and configured with remote-wipe capability to protect client data in the event of loss or theft.

All staff receive mandatory confidentiality and privacy training at hire and annually thereafter. Training covers HIPAA regulations, HMIS confidentiality, informed consent, data-sharing protocols, and best practices for protecting personally identifiable information (PII). Staff are prohibited from discussing client information outside of professional settings or sharing identifying information without a signed Release of Information (ROI) from the client, except when required by law for safety or mandated reporting.

FSC participates in the regional Homeless Management Information System (HMIS) managed by the local Continuum of Care (CoC). Data entered into HMIS are subject to the system's privacy notice and consent procedures. Information sharing among partner agencies occurs only within the limits of the client's signed consent form, ensuring that data exchanges support coordinated care while respecting client privacy.

In the event of a potential data breach, FSC follows a clearly defined response protocol. The breach is reported immediately to the Program Manager, Chief Operating Officer, and IT

Specialist, who initiate an investigation to identify the scope and cause. If a breach is confirmed, FSC takes immediate steps to contain the incident, notify affected parties and regulatory authorities as required by law, and implement corrective actions to prevent recurrence. All breaches and responses are documented, reviewed by leadership, and incorporated into future staff training. FSC ensures the confidentiality, integrity, and security of client data while maintaining compliance with all regulatory and ethical standards that govern homeless services and healthcare coordination.

27. City and County Partner Coordination

Describe how your organization will maintain communication and coordination with City staff and County Partners to support the successful operations of the Access Center.

First Step Communities (FSC) recognizes that strong communication and coordination with the City of Lodi and County Partners, particularly San Joaquin County Behavioral Health Services and San Joaquin Health, are essential to the successful operation of the Access Center. FSC has extensive experience managing multi-agency collaborations in 24/7 shelter environments and will apply the same structured communication systems and accountability practices that have proven effective across its Sacramento shelter network.

To ensure seamless coordination, FSC will designate an Program Director as the primary point of contact for both City and County staff. This individual will oversee daily operations, facilitate service coordination, and maintain open communication with all partners. The Program Director will provide monthly written reports summarizing key metrics such as occupancy, referrals, incidents, and service outcomes, while also flagging emerging needs or barriers. These reports will be shared with designated City staff and County representatives to maintain transparency and alignment.

FSC will facilitate standing coordination meetings, held biweekly or monthly, with City representatives, County Behavioral Health staff, and on-site service partners. These meetings will be used to review operational updates, service integration efforts, and performance outcomes, as well as to identify opportunities for continuous improvement. Additionally, FSC will engage in multidisciplinary case conferencing with County Behavioral Health and Health Department staff to ensure real-time coordination of client care and smooth transitions between systems.

Operational communication will be supported by clear protocols for 24-hour incident notification, ensuring that the City staff are informed immediately of any critical events impacting health, safety, or facility operations. With the goal of open, timely communications; FSC's internal incident reporting system may be configured to automatically send critical incident reports to city contract management staff in real time. FSC's leadership team, including Executive Director, will always be accessible for escalations and strategic discussions, maintaining a strong working relationship with City administrators and County department leads.

FSC's culture emphasizes collaboration, transparency, and responsiveness. Through structured reporting, ongoing case coordination, and regular joint meetings, FSC will ensure that all partners remain aligned on the shared mission of providing safe, compassionate, and effective services for individuals experiencing homelessness in Lodi. This collaborative framework, rooted in open communication and shared accountability, will ensure the Access Center operates efficiently, adapts to evolving needs, and achieves the City's long-term goals of stabilization, recovery, and housing success for all participants.

28. Data Collection and Reporting

Explain the methods used to collect and track demographic and service data, including the software system(s) used for reporting.

First Step Communities (FSC) employs a comprehensive and standardized data collection and reporting system to ensure accurate tracking of client demographics, service utilization, and program outcomes across all shelter and housing programs. Data collection is integrated into daily operations and guided by federal, state, and local requirements to ensure accountability, transparency, and data integrity.

Client data are collected at intake through structured assessments completed by trained case management staff. These assessments capture demographic information, household composition, income and employment status, health and behavioral health needs, and housing history. Additional data are collected throughout a client's participation in the program, including services received, progress toward goals, and housing outcomes. FSC emphasizes data accuracy and consistency by providing ongoing staff training on intake procedures, data entry standards, and confidentiality requirements.

FSC uses the Clarity Homeless Management Information System (HMIS) as the primary platform for data entry and reporting. This is the same branded database we use with the Sacramento CoC. HMIS allows for real-time data collection and ensures compliance with U.S. Department of Housing and Urban Development (HUD) standards. Each staff member with HMIS access is assigned a unique, secure user ID with role-based permissions, ensuring that information is only accessible to authorized personnel. Data entered into HMIS are reviewed weekly by program managers for accuracy and completeness before submission to the local Continuum of Care (CoC).

In addition to HMIS, FSC utilizes a suite of cloud-based tools for internal monitoring and analysis. These include case management logs, Excel-based tracking systems for program-specific indicators, and an internal database for operational metrics such as occupancy, length of stay, and service engagement. FSC's data infrastructure integrates HMIS reports with financial and operational data to support contract compliance and organizational performance tracking.

FSC's Operations Specialist, who holds a master's degree in Research Psychology, provides monthly and ad hoc statistical reports for all FSC programs. Our team is skilled at building customized HMIS reports to track key data trends. FSC analyzes trends in client outcomes,

demographics, and service utilization, helping leadership evaluate the effectiveness of operational and procedural strategies. These ongoing analyses have led to meaningful adjustments in program design, staffing deployment, and service delivery methods that have improved client outcomes and system efficiency.

All reports for funders, including the City of Lodi, San Joaquin County, and the Continuum of Care, are generated using HMIS and verified by FSC's Operations and Compliance Team prior to submission. FSC produces regular performance dashboards summarizing key outcomes such as housing placements, health service linkages, and client engagement rates.

By combining federally compliant reporting systems with advanced internal analytics, FSC ensures that all demographic, service, and outcome data are collected accurately, reported timely, and used strategically to strengthen programs and improve results for individuals experiencing homelessness.

29. CalAIM Medical Respite Experience

If applicable, describe your organization's experience providing Medical Respite services under CalAIM, either directly or through a subcontractor relationship. In your response, please Include:

- **A summary of your Medical Respite program(s), including scope of services and target populations**

First Step Communities (FSC) is interested in developing experience collaborating on Medical Respite initiatives serving individuals experiencing homelessness who are medically fragile and require short-term recovery support following hospitalization. FSC has completed preparations to provide CalAIM Community Supports (CS) and Enhanced Care Management (ECM) and is authorized to deliver CalAIM services with all Sacramento Managed Care Plans (MCPs). FSC has partnered with a CalAIM technical assistance provider to expand into Medical Respite care. While FSC does not currently bill directly under CalAIM, it provides services that are equivalent to medical respite through partnerships with local healthcare providers, managed care plans, and hospital systems operating under CalAIM reimbursement structures. FSC is prepared to extend this level of service to San Joaquin County if awarded this contract, positioning the organization to integrate and coordinate Medical Respite services at the City of Lodi Access Center.

FSC currently operates 20 Behavioral Health Bridge Housing beds at one of its shelters, fully integrating shelter services and behavioral health treatment supports on site. Through partnerships, FSC serves adults discharged from hospitals who are homeless or unstably housed and require medical oversight that cannot safely occur in a traditional shelter. FSC collaborates with WellSpace Health, Elica Health Centers, and San Joaquin County Behavioral Health and Public Health divisions to provide integrated recuperative care, including wound care coordination, medication management, chronic disease stabilization, and linkage to follow-up primary and behavioral health appointments.

FSC's role typically includes site operations, case management, and housing navigation, while clinical care is provided by partner healthcare agencies through direct service contracts or subcontracted nurse teams. This integrated model allows clients to recover in a stable, supportive environment while addressing both medical and social determinants of health.

Across comparable programs, FSC and its partners serve approximately 150 to 200 medically fragile clients annually, with an average length of stay of about 180 days, depending on condition and discharge readiness. Coordination protocols are well established: referring hospitals and MCP care managers complete a standardized referral packet, followed by a joint intake conducted by FSC and clinical partners. Weekly case conferencing with MCP representatives, discharge planners, and FSC staff ensures continuity of care and timely transition to permanent or interim housing.

FSC tracks and reports outcomes such as discharge destinations, healthcare connection, stabilization, and hospital readmission rates. Metrics are reviewed monthly with MCPs and clinical partners to ensure alignment with Department of Health Care Services (DHCS) standards for quality and reporting. FSC's fiscal and data teams are familiar with CalAIM documentation and billing processes through partner-led contracts and technical assistance sessions on DHCS Community Supports.

This experience informs FSC's readiness to support or co-manage Medical Respite services at the Access Center in partnership with San Joaquin Health and San Joaquin County Behavioral Health Services. FSC remains open to operating Medical Respite services as part of the Access Center's continuum of care, recognizing their essential role in recovery, housing stability, and reducing hospital readmissions, and would look forward to discussing this further during a future interview.

BUDGET

Wage and Benefit by Site Type forecast (24X7 Site Coverage)	Mo. Cost	Annual
Subtotal FSC Employee Wages	\$112,405.34	\$1,348,864.05
FSC Benefits	\$33,721.60	\$404,659.21
Total FSC Wages and Benefits/Taxes	\$146,126.94	\$1,753,523.26
Insurance	\$1,600.00	\$19,200.00
Consultants - Stipends	\$730.00	\$8,760.00
Food - VOA Delivered	\$9,875.00	\$118,500.00
Program Supplies & Laundry Support	\$2,855.50	\$34,240.00
Facilities - Trash, Pest Control, Storage Rental	\$1,810.00	\$21,720.00
Phones & Internet	\$300.00	\$3,600.00
Transportation (Mileage Reimbursement, Client Reunification)	\$1,725.00	\$20,700.00
Administrative Expense	\$18,152.47	\$217,826.76
TOTALS	\$183,175	\$2,198,070

BUDGET NARRATIVE



Lodi Access Center Budget Narrative

The following budget narrative relates directly to the categories in the Proposed RFP Budget. First Step Communities' staffing and budget model is designed to provide

Staffing – Personnel Expenses:

1. Executive Director – (.10 FTE) Directs the strategic operational activity of FSC sites including insurance, procurement, collaborative agreements, community outreach and administration of budget, expenditures, and accounting/audits. Works tactically, hands on with *COO* and *Program Director* to ensure the shelter operations meet strategic expectations. Ultimate responsibility for program success and improved client outcomes.
2. Chief Operating Officer – (.15 FTE) Responsible for developing and executing FSC's operational strategic plan. This includes setting goals, defining priorities, and ensuring client services are aligned with the mission objectives of the project funder. Ensures sufficient funds and personnel are available to support the shelter's day-to-day delivery of essential services to the clients living in the shelter. Monitors performance metrics and implements service improvements, programming changes, policies, and procedures to enhance the effectiveness and efficiency of shelter services. Mediates all client grievance hearings, participates in community meetings with client base and hires, trains, and stands in for Program Director. Responsible for program success and successful client outcomes.
3. Campus Program Director – (1.0 FTE) Responsible for hands-on program management, directing the activities of all Supervisors and Client Support Associates (CSAs), provides daily operations oversight. Spends time on the shelter floor in direct contact with employees and clients. Provides leadership for community meetings and training with all clients, conducts client reviews and hearings on client issues, reports to the *COO*.



Coordinates the provision of case management services under the Sr. *Director of Client Support Services*.

4. HR Director – (0.15 FTE) Responsible for directing the hiring, onboarding, and training in a way that creates an employee environment focused on successful client outcomes rather than workplace problems. For example, onboarding and immediate training managed by the HR Director includes training segments designed to educate inexperienced staff on establishing *professional boundaries and ethics* methodology designed to support client success. Additionally, trauma-based care, sexual harassment training and other key required trainings are the responsibility of the HR Director upon hiring.
5. Sr. Director of Client Services (Client Support)– (0.15 FTE) Directs the program development and activity of all case management staff through a “leading by example” process of working with clients in crisis. Works side by side with case managers for clients with complex needs and/or significant maladaptive behaviors. Participates in sessions with case manager and clients facilitating treatment plans, modeling trauma informed care and mentoring both client case manager. Responsible as emergency de-escalation first responder for client crises. This is a vital position in the ongoing effort to provide client safety and increased engagement.
6. Operations Specialist – (0.15 FTE) Performs group facilitation efforts with the clients in a casual setting targeted at improving social interaction, daily enrichment and gathering data on their needs. Regular direct contact to help understand the client-experience and adjust programs to accomplish meeting their needs through a variety of group efforts. Help staff learn to work with trauma through classes in trauma awareness, de-escalation, and mental health awareness. Involve case managers in group sessions to help improve client program delivery and outcomes. Help clients establish trust and



relationships to lead to increased engagement and better outcomes. Facilitate collaboration with the Willow Clinic for free medical clinic services on site. Build relationships between the Willow Clinic staff and clients. Responsible for other duties supporting operations as assigned.

7. Shift Supervisor – (1.0 FTE) Responsible for shift direction of CSA and client activities. Ensures safety and program operation on a daily, shift basis. Performs shelter monitoring, cleaning, and client support as required and assigned daily.
8. Client Support Associate – (11.4 FTE) Report to *Shelter Supervisor* and Program Director. Responsible for mentoring client's expectations, monitoring site, client and site security, maintenance, and front desk operations. Responsible for operation of Day Center Lobby, and shelter dorm areas of the project.
9. Case Management Lead – (1.0 FTE) Directs the daily activity of case manager staff, ensures documentation and program compliance. Monitors client engagement and other metrics to ensure case management objectives are met. Report to the Sr. *Director of Client Services*. Responsible for full personal caseload.
10. Case Manager – (2.0 FTE) Report to the *Case Management Lead* and is responsible for a normal caseload of shelter clients, managing relationships and developing client-centered individual plans for each client using strength-based techniques. Must follow SOP for safekeeping and protecting client data. Serves as the primary housing navigator to their assigned clients.
11. Client Support Associate – Day Center Lobby Support – (1.4 FTE) – This staff is responsible for the client services needs in the day center lobby. Hours of the day center lobby are TBD, but are planned for 8 hours per day, seven days a week. Greeting guests, explaining rules, managing resources in the day center, including restroom access.



12. Navigator Access Day Center – (1.0 FTE) – This staff is the primary client engagement and resource navigator for guests of the Day Center program. Conducts crisis assessments and shelter referrals, advocates for services and shelter bed placement.
13. Volunteers – Access Day Center – (FTE TBD, Dependent on Volunteers) – A volunteer workforce will be developed to provide programming, social activities, and general interpersonal engagement within the Day Center. Volunteers will process donations, organize clothes closets, tidy public areas, and greet guests as they enter the shelter.
14. Outreach Navigation CSA – (1.0 FTE) – This staff, in conjunction with other shelter staff, is primarily responsible for engagement with clients camping or living on the streets within the area of the Lodi Access Center. This staff will engage with neighboring residents, businesses to ensure neighbor experience is free from disturbance from people living in the shelter or the space surrounding the facility. Crisis Assessments, shelter referrals, and resource connection will be provided to anyone needing navigation assistance in the immediate area of the shelter.
15. Executive Chef/Kitchen Mgr – (1.0 FTE) – Manages, through subordinate staff, client volunteers, and public volunteers, the procurement and preparation of food and supplies necessary to provide 3 meals per day, 7 days a week. Responsible for maintaining kitchen in safe, sanitary conditions, and designing a nutritious menu for all clients at the shelter.
16. Cooks/Kitchen Workers – (2.1 FTE) – These staff ensure consistent staffing to prepare all meals, 365 days per year. Kitchen Workers will coordinate duties with day volunteers, and ensure tasks are being completed.
17. Kitchen Volunteers – (FTE TBD) – Volunteers will be sought to assist with daily kitchen and meal preparation tasks. FSC will seek church, community and restaurant staff



volunteers to provide meals for our clients to potentially reduce the cost of food preparation on site.

18. Shelter Client Community Cleanup Volunteers – (FTE TBD) – Clients will be recruited to join our Outreach Navigation staff on neighborhood cleanup efforts on a weekly and daily basis. FSC’s client volunteer programs allow shelter guests to be of service to each other, or the community. Six weeks of service as a Community Volunteer provides a client with official permission to list First Step Communities as a Volunteer Job on their resume.
19. In Kind Donations (TBD) – Through community engagement and social media connections, FSC shelters regularly receive in-kind donations of clothing, hygiene products, furniture, and guest supportive goods. Donation recruitment is constant and focused on real-time needs at our shelters.
20. Community Partnerships – FSC has verbal agreement from the Stockton Emergency Food Bank to collaborate if awarded a contract to operate the Lodi Access Center. This collaboration would potentially save multiple tens of thousands of dollars in food costs currently included in our proposed food budget.
21. CalAIM – FSC is a fully authorized CalAIM Community Supports (CS) and Enhanced Care Management (ECM) provider in Sacramento County. We have contracts with all five managed care plans in Sacramento. We are currently connected to a Technical Assistance resource to begin a transition into Medical Respite services and integrating these services into our operation models.

POLICIES



Organization Policy and Procedure Manual

(last updated March 2025)

Purpose

This manual has been created to provide guidelines for policies and procedures at First Step Communities. This manual is to be a living, breathing document that changes over time and will include updates as they are approved by the Chief Operating Officer.

Suggestions?

If you have any suggestions on policies or procedures or ways to make your workplace better, please reach out to your Director or to the Chief Operating Officer. We want your experience as an employee at First Step Communities to be enriching and for the guidelines that are in place to make sense and be fair.

Note: 'Clients' and Program 'Participants' are used interchangeably throughout this document.

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Organization and Program Overview

Organization Overview

First Step Communities (FSC) is a non-profit organization that works to provide housing solutions for people experiencing homelessness, primarily in Sacramento County. Our primary focus is to provide interim housing and services to the most vulnerable, and to work towards permanent housing solutions and the end to homelessness for our clients. FSC collaborates with a number of governmental agencies, private citizens and companies, and other non-profit organizations in order to accomplish this goal. FSC values its employees and clients and seeks to create a safe and healthy environment for everyone involved at all of our program sites.

Non-Discrimination Policy

It is the policy of First Step Communities and its partner agencies to give every person access to a safe and secure shelter, ensuring fair and equal access to housing, regardless of their age, race, color, national or ethnic origin, ancestry, religion or religious creed, disability or handicap, sex or gender, gender identity and/or expression, sexual orientation, military or veteran status, genetic information, or any other characteristic protected under applicable federal, state or local laws.

Discrimination and retaliation are prohibited and will not be tolerated. Any instances of discrimination should be reported to a program supervisor; each situation will be addressed, as appropriate, and in accordance with organizational policies. Any questions regarding First Step Communities' stance on discrimination or the disciplinary action associated with actively discriminating against another person can be directed to the respective Program Director.

Anti-Discrimination and Fair Housing Policy for Homeless Shelter Staff (Updated 03/2025)

Purpose of this Section: To ensure that all staff members understand and adhere to federal and state laws prohibiting discrimination and promoting fair housing practices in our homeless shelter and case management services. Additionally, to provide a welcoming, safe space for all clients.

Policy Statement: It is the policy of all First Step Communities programs, in accordance with federal, state, and local laws, to prohibit all forms of harassment and discrimination of or by clients, employees, visitors, and volunteers, including harassment and discrimination based on actual or perceived gender identity and expression, or based on an individual's association with a person or group with one of more of these actual or perceived characteristics. Retaliation against an individual who files a complaint of harassment or discrimination against First Step Communities employees, visitors, volunteers, clients, or anyone who participates in an investigation of such a complaint, is strictly prohibited.

Our organization is committed to providing equal access to housing and services for all individuals, regardless of their race, color, national origin, religion, sex (including gender identity and sexual orientation), familial status, disability, or other protected characteristics. Discrimination and harassment are strictly prohibited.

Applicable Laws:

- **Fair Housing Act:** Prohibits discrimination in housing based on race, color, national origin, religion, sex (including gender identity and sexual orientation), familial status, and disability.
- **Title VI of the Civil Rights Act of 1964:** Prohibits discrimination on the basis of race, color, or national origin in programs and activities receiving federal financial assistance.
- **Section 504 of the Rehabilitation Act of 1973:** Prohibits discrimination based on disability in any program or activity receiving federal financial assistance².
- **Americans with Disabilities Act (ADA):** Prohibits discrimination against individuals with disabilities in all areas of public life.
- **HUD's Equal Access Rule:** Ensures equal access to HUD programs regardless of sexual orientation, gender identity, or marital status.

Procedures:

Non-Discrimination: All staff must treat program participants with dignity and respect, ensuring that no one is denied access to services based on protected characteristics. Training: Staff will receive regular training on fair housing laws, civil rights requirements, and best practices for non-discrimination.

Accessibility: Ensure that facilities and services are accessible to individuals with disabilities and those with limited English proficiency. Provide reasonable accommodation as needed.

Reporting and Monitoring: All staff share the responsibility to follow anti-discrimination policies and take corrective actions as necessary. Staff should take direct action to correct any suspected issues of discrimination against clients.

Each site has a mechanism for staff and clients to report issues to management. Staff should guide clients to the Client Concern Form and immediately report suspected issues to their direct supervisor.

Confidentiality

At no time should staff members discuss client information in the presence of other clients. Our ability to maintain trust with clients is dependent on keeping client information confidential.

All written client information and all client files are to remain confidential; any use of client information must be for approved purposes only.

Clients & Client Experience Policies

Good Neighbor Policy

First Step Communities strives to have a positive presence within the communities in which we operate, believing that these relationships are vital in working towards and solving homelessness as a unified community.

1. Inherent Rights: this policy document is predicated on the assumption of certain basic rights. Clients, surrounding residents, businesses, agencies, property owners, and staff have a right to:
 - Be treated with respect.
 - Personal safety.
 - Safe and quiet enjoyment of their cabin, sleeping space, business, home, and public spaces; and,
 - Receive services to meet their basic needs.
2. Access to the Shelter:
 - Only individuals who have been referred and approved will have access to the shelter. There will be no lining up or queuing outside/on the premises.

- The property will have controlled access.
 - Clients' belongings may be searched before they are allowed entry.
 - Clients will not be allowed entry, and/or will be asked to leave if they present a danger to themselves or others.
3. Description of Services:
- On-site services designed to help transition clients to permanent housing will be available Monday through Friday.
 - Case workers and community service providers will be available weekdays to meet with clients to assist with their housing search and/or assist them to apply for benefits or employment.
4. Communication and Coordination with the Neighborhood:
- First Step Communities is committed to meeting with the neighbors, business owners, and surrounding community to discuss any concerns.
 - FSC Managers and Staff will attend community meetings when invited to better understand any community concerns.
5. Safety and Security:
- Clients, business owners, and the general public have a reasonable expectation of safety at all times. Anyone feeling that their safety is compromised is urged to call 911.
 - Anyone threatening the safety of the staff or clients, or the public may be asked to leave. Law enforcement will be called, if necessary.
 - Crime Prevention Through Environmental Design (CPTED) will be utilized to identify and remedy areas that are dark or secluded or otherwise places of vulnerability.
 - First Step Communities will work closely with local law enforcement assigned to the jurisdiction of the shelter.
6. Trash Remediation:
- Clients will not litter or negatively impact the neighborhood.
 - On-site staff will ensure that the area immediately around the shelter, tent, or cabin community is kept clean and attractive.
 - First Step Communities will contract with the local waste management agency ensuring adequate and appropriate remediation of all garbage.
7. Sidewalk Etiquette:
- Loitering is prohibited.
 - Noise will be kept under control.
 - Carts and belongings will not be left outside the property. Anything left unattended will be disposed of.
 - Every effort will be made to ensure that clients are friendly and respectful.
 - No visitors are permitted on the premises (i.e. family, friends).
 - Distribution of food and clothing on the street will be discouraged.

Program Admission & Intake Processes

Admission and Referral Procedure

Admission to First Step Communities' programs differs from site to site, due to site-specific funding streams and contract requirements. Generally, new clients are referred via the Coordinated Access system (211) or other funding partner referral procedure. Prospective participants will be referred to the First Step Communities Shelter facilities depending on contract requirements for each shelter site.

For all First Step Communities shelter environments, beds are provided to prospective participants only after a thorough assessment of client needs and referral. Walk-ups are not allowed, and our sites do not maintain waiting lists of prospective clients.

Intake Process

Once it has been determined that a participant will be given a bed at the respective program site, the intake process will be conducted to ensure that the participant is provided with the necessary resources and is made aware of all program rules and regulations, rights and responsibilities. During the intake process, the participant will work with designated intake staff and will be given the opportunity to ask any questions or raise any concerns regarding their participation in the program.

During the intake process, the following will occur:

- Tour of the facility, specifically where the restrooms, towels, meals, etc. are located;
- Staff will explain how and where to obtain help and assistance that may be needed to adjust to the new living environment; and,
- The participant will be given copies of the client rights and responsibilities intake form or will be directed to where they are posted publicly at the program site.

Staff play a significant role in the intake process of each client. The intake process provides staff with an opportunity to introduce participants to the organization and share any information that may be helpful. This process can give clients the best first impression of the program and is the first opportunity to build trust and ensure safety.

Coordinated Access and HMIS Data Collection

All First Step Communities shelters will abide by the Coc Coordinated Access procedures including HMIS data inputs and data tracking procedures. If the shelter does not participate in Coordinated Access, the shelter will abide by funding source contract requirements for the sites, respectively.

All incoming clients will conduct a shelter enrollment assessment and data collection through HMIS. Through HMIS, and within 24 business hours of arrival, each incoming client will be enrolled into the respective HMIS shelter program. This ensures accurate and current data throughout the HMIS system and eliminates duplication of effort with other homeless service providers.

COVID-19 Screening Procedure

To prevent the outbreak of COVID-19, all shelters will follow local Public Health recommendations for homeless shelters. All incoming clients are tested for COVID-19 utilizing an over-the-counter COVID-19 test.

Local Public Health guidelines will be monitored and followed when clients test positive at intake.

Denial of Admission

Denial of admission to an FSC program is at the discretion of First Step Communities and its authorized staff, but must be based on one of the following reasons:

- Household does not meet the basic eligibility criteria for shelter admission (e.g. gender, age, homeless status, domestic violence victim, etc.). Shelters with beds designated by funding sources as having additional restrictions (e.g. VA beds that require advance approval by the VA) may deny entry to those not meeting funder requirements;
- A restraining order that prohibits admission to the facility;
- Documented violence or threatening behavior;
- Conduct from prior stay at the shelter that puts the health and safety of staff or participants at risk (e.g. violence, weapons violations, disclosing confidential location of shelter, and egregious damage to property). If a household is denied entrance based on a prior stay, the household must be informed of the reason,

conditions for lifting the restriction and right to appeal, including whom to contact regarding an appeal and information about the appeal process; or,

- The household requires care and supervision to manage the activities of daily living (feeding, toileting, selecting proper attire, grooming, maintaining continence, putting on clothes, bathing, walking, and transferring) without the appropriate supports available on-site.

The appropriate Case Manager will discuss any denial of admission directly with the client to ensure that they understand the reason for denial and their right to an appeals process, if applicable. Any questions regarding program admissions denials can be directed to the Case Management Supervisor or the Program Director.

Program Expectations and Policies

Participant Rights & Responsibilities and Shelter Rules

Please refer to the appendix for each respective site for a copy of the participant rights and responsibilities, and shelter rules.

Hours of Operation

All FSC program sites are open 24 hours a day, 365 days a year. The shelters are staffed at all times and participants are welcome to be in the buildings and to access their personal possessions 24 hours/day, as long as they are adhering to the program rules and are compliant with all instructions from staff members. The program site hours are posted publicly and are not currently subject to change.

Participant Emergency Information

All program participants are required to provide emergency contact information upon intake. Emergency contact information is provided to the individual's Case Manager during the initial intake meeting and is kept on file to ensure that a contact can be reached should an emergency occur.

If a participant cannot provide any emergency contact information, the Case Manager will make note on the intake form; individual decisions will be made at the discretion of the Program Supervisor or other supervisory staff member should an emergency event occur.

Curfew

Each program has a set curfew that participants are required to follow. Specific curfew guidelines are included in the site-specific appendices. Any questions regarding curfew regulations can be directed to the respective Program Director.

Weapons Prohibition Policy

Weapons of any kind are not allowed on site at any program site. A further classification of weapons includes the following: guns, bb guns, knives, pepper spray, baseball bats, large sticks, or any other device that could be reasonably construed or misconstrued as a weapon. Participants are required to check in any weapons to the staff during the intake process. Weapons will be logged and stored in a safe, secured area. Participants are allowed to have weapons back upon program exit or in accordance with site-specific policy.

Firearms of any kind are not allowed on company premises, including in the parking lots.

Drug & Alcohol Use/Possession Policy

Alcohol, marijuana, and other drugs (AOD) are strictly prohibited inside all FSC shelter facilities. During the intake process, all participants are advised that drugs and alcohol are not allowed inside of the shelter and are asked to signify their understanding by signing the Participant Rights and Responsibilities prior to beginning their stay.

The use and possession of AOD cannot be used as grounds for disqualification from the respective program, unless stated. However, AOD found during bag searches and shelter inspections will be confiscated and discreetly disposed of by staff.

Confiscation and disposal of any AOD must be conducted with another staff as witness.

All instances of AOD possession, use on site, confiscation and destruction will be documented by staff in an incident report.

Program decisions regarding violations of this policy are at the discretion of the Program Director, with input from shelter staff and Case Management. If a program participant is found to continually use drugs on site, the incident will result in a discussion with the Program Director and Case Manager. The incident will be properly documented and appropriate follow-up will be conducted. All client disciplinary action is at the discretion

of the shelter Program Director, in accordance with the FSC “Program Termination and Scheduled Exit” procedures (separate document).

Smoking

Smoking is allowed at program sites, but only within the designated areas. Shelter participants will be asked to move or otherwise stop smoking should they smoke in non-smoking areas.

Staff are required to attempt to stop clients from smoking in prohibited areas. Smoking is strictly prohibited in the following areas of the shelter:

- Inside buildings
- Inside sleeping areas (cabin, dorms, tent)
- Dining areas

Staff who encounter clients smoking (any substance) in prohibited areas should make attempts to stop the activity. Staff should log an incident report for all these incidents.

Search of Participant Possessions

For the safety of all clients and staff, bag and pocket searches will be conducted at the following times:

- Upon intake of all new clients
- For all clients entering all site entry points

Bag searches will include searches of all clothing, inside bags, and unsealed containers located inside bags.

Dorm, storage and sleeping area inspections will occur on a schedule, as determined by the Program Director.

All searches are to be conducted with respect for the property of the participant. The participant can be present for the search and will be informed of any items that are being removed from their possession. Searches must be brought to the attention of the site supervisor and properly documented, as merited by the individual situation.

Service Animals

Regulations regarding service animals differ from site to site, depending on whether any animals are permitted at the respective site. Service animal regulations can be found in

the site-specific appendices. Any questions about service animals or client animals, in general, can be directed to the respective Program Director.

Client Concern & Grievance Procedures

First Step Communities aims to ensure that clients with a grievance relating to their participation in an FSC program have a means to help resolve grievances as quickly and fairly as possible. The client grievance process is the following:

1. Informal Discussions:
 - a. If a client has a grievance about a disciplinary issue or FSC process, they should discuss it informally with a shelter staff member - preferably a Supervisor or Director. We hope that most concerns will be quickly resolved this way.
2. Step 1 - Statement of Grievance:
 - a. If the client feels that the matter has not been resolved through informal discussions, they should put a grievance in writing for FSC management staff review. This can be online (via the posted link & QR code) or by submitting a paper form.
3. Step 2 - The Grievance Meeting:
 - a. Within 5 working days, FSC management staff will respond to the statement, inviting the client to attend a meeting where the alleged grievance can be discussed. This meeting is scheduled to take place as soon as possible and normally 5 working days' notice of this meeting is provided to the client.
 - b. Clients should make all reasonable attempts to attend the meeting, but if for any unforeseen reason the client, or the management, cannot attend, the meeting is automatically rescheduled.
 - c. After the meeting, management hearing the grievance must write to the client informing them of any decision or action and offering them the right of appeal. This letter is normally sent within 5 working days of the grievance meeting and should include the details on how to appeal.
4. Step 3 - Appeal:
 - a. If the matter is not resolved to the client's satisfaction, the client may set out their grounds of appeal in writing within 10 working days of receipt of the decision letter.
 - b. Within 5 working days of receiving an appeal letter, the employee should receive a written invitation to attend an appeal meeting. An FSC Program Director not involved in the original meeting will attend the appeal meeting.

- c. After the appeal meeting, the presiding FSC Director must inform the client of their decision within 3 working days of the meeting. The Appeal Director's decision is final.

Any participant filing a grievance is to be treated fairly and with respect while continuing to participate in the respective program. The management staff will do its best to resolve all concerns/grievances as quickly as possible.

QR Codes for the grievance forms are posted at every site; paper forms are also available upon request.

Abuse Reporting Policy

First Step Communities is dedicated to maintaining a secure and supportive environment for all individuals within our facilities. We are committed to preventing and addressing any form of abuse or mistreatment. This policy outlines the procedures for reporting, investigating, and addressing incidents of abuse to ensure the safety and well-being of our community members.

Definitions:

Abuse: Any act or failure to act resulting in harm, potential harm, or threat of harm to an individual within our community, encompassing physical, emotional, verbal, sexual abuse, neglect, or exploitation.

Reporter: Any individual who witnesses or has information about an incident of abuse within First Step Communities.

Reporting Procedures:

Immediate Response:

- In emergencies or situations of immediate danger, individuals should contact emergency services by dialing "911".
- Staff witnessing abuse should promptly intervene to ensure the safety of those involved.

Internal Reporting:

- Any person who becomes aware of or suspects abuse within First Step Communities must report the incident promptly to a designated staff member, supervisor, or manager.
- Reports can be made verbally or in writing, with detailed information such as names, dates, times, and a description of the incident.

Confidentiality:

Reports of abuse will be treated confidentially, shared only with those directly involved in the investigation and appropriate authorities.

Non-Retaliation:

First Step Communities strictly prohibits retaliation against individuals making good-faith reports of abuse. Retaliatory behavior will result in disciplinary action.

Investigation Procedures:

Appointment of Investigator: Upon receiving a report, First Step Communities will appoint a qualified and impartial investigator to conduct a thorough inquiry.

Documentation: The investigator will document relevant information, including statements from the reporter, alleged victim, and any witnesses, along with any physical evidence.

Interviews: The investigator will conduct interviews with all parties involved, ensuring sensitivity and empathy during the process.

Reporting to Authorities: If criminal activity is revealed, First Step Communities will promptly report the incident to the appropriate law enforcement agencies.

Disciplinary Action: Based on investigation findings, First Step Communities will take appropriate disciplinary action, such as retraining, suspension, termination, or legal measures, as deemed necessary.

Training and Prevention: First Step Communities is committed to ongoing training for staff and volunteers to prevent abuse and foster a culture of safety and respect.

Review and Revision: This policy will be regularly reviewed and revised to ensure effectiveness and compliance with relevant laws and regulations.

Program Services

Client Services

First Step Communities is proud to offer programs that are designed to best serve our clients and care for their needs. We endeavor to provide the following as a component of our client services:

- An environment in which the clients feel safe and can build trust
- Physical and emotional safety
- Safe, sanitary conditions that are trauma-informed
- De-escalation techniques for proper resolution of any incidents that occur
- Desire to prevent program exits in order to best serve clients along the continuum of care

Client services may differ by program site; specific information is included in the appendix for each program site.

Storage of Participant Belongings (including storage after discharge)

Program participants will be provided with limited storage for their belongings during their stay at the program site, depending upon the storage capacities of the site.

It is recommended that all personal medications be stored in one's respective storage locker/tent/cabin; any medications requiring refrigeration will be stored securely in the program refrigerator. More information about medication storage can be found in the Medication Storage Policy.

Upon discharge or graduation, participant belongings will be stored on site at the program site for up to seven days. Following seven days after discharge, any items left behind will be discarded. Any questions regarding storage concerns can be directed to the Program Director.

Mail Policy & Procedure

Participants are welcome to receive mail while residing in a First Step Communities shelter. Any mail received will be processed and sorted by shelter staff and prepared for delivery for participants on a **daily** basis.

All mail should be addressed to the following:

Client's Name
1400 North A Street, # (insert bed/tent/cabin number)
Sacramento, CA 95811

Participants are asked to provide a forwarding address upon discharge from the respective shelter program. Client mail will be returned to the sender if not claimed by the recipient.

Medication Storage

Participants are welcome to bring with them and store any personal medications in their assigned locker, tent, or cabin. First Step Communities and the staff of each program site assume no responsibility for participants' personal medications and do not distribute nor administer medication.

Participants who are prescribed medication that requires refrigeration are required to report their need for refrigeration upon intake. Proper storage conditions will be provided in accordance with the requirements for safe storage of each respective medication.

Any questions regarding the medication storage policy can be directed to the program site staff or respective Program Director.

Use of Medication

During the intake process, participants are asked to provide information regarding their personal use of medication. Such information is to be used only for the purposes of properly providing care for a participant in the event of a medical emergency and/or to understand the participant's needs for medication storage, if applicable (i.e. refrigeration of insulin products).

The First Step Communities staff members and those of other partnering agencies are not authorized to treat or diagnose any medical conditions beyond the use of basic first aid supplies and CPR, as covered by staff training requirements. Medication will not be distributed nor managed by the staff of First Step Communities, unless required by a participant's specific medical condition and previously approved by their respective Case Manager.

Staff should not be providing clients with medications of any kind.

Telephone Access

Telephone access differs by program site; information can be found in the respective site appendix.

Transportation

Transportation assistance will be provided to clients and shelter participants in accordance with First Step Communities policy. Participants or clients requiring transportation for the purpose of attending a meeting or appointment related to their health or individual plan to obtain permanent housing will be provided with adequate transportation, as deemed necessary by their respective Case Manager.

Methods of transportation include the use of bus passes, taxis, and rideshare options (such as Uber or Lyft).

All transportation decisions must be made by the Program Director or Client Services Director in collaboration with the Case Management Supervisor and will be clearly communicated to the client or participant, as applicable. Transportation is to be used for legitimate purposes, which will be discussed with the client or participant in advance.

Staff must have the appropriate authorization from management in order to drive during work hours or on behalf of First Step Communities at any time. Any employee driving on behalf of the organization must have a valid and current Driver's License and personal automobile insurance.

Religious Activities

Religious activities are not provided nor are required at any program site. All participants are welcome to pursue religious activities of their own accord. Any questions about religious activities on site can be directed to the respective site supervisor.

Accessibility and Americans with Disabilities Act

First Step Communities is committed to providing an accessible environment for all individuals, including those with disabilities. We strive to eliminate barriers and ensure

that our services are available to everyone, regardless of their physical or mental abilities.

Accessibility Standards:

1. Physical Accessibility:

- Ensure that all entrances, exits, and pathways are accessible to individuals using wheelchairs or other mobility devices.
- Provide accessible restrooms, showers, and sleeping areas.
- Maintain clear and unobstructed pathways throughout the shelter.
- Install ramps, handrails, and other necessary modifications to improve accessibility.

2. Program Accessibility:

- Offer programs and services in accessible formats (e.g., large print, Braille, audio).
- Provide reasonable accommodations for individuals with disabilities to participate in all shelter activities.
- Train staff and volunteers on disability awareness and how to assist individuals with disabilities.

3. Communication Accessibility:

- Ensure that all communication materials (e.g., brochures, signs, websites) are accessible to individuals with disabilities.
- Provide interpreters or other communication aids for individuals who are deaf or hard of hearing.
- Use plain language and clear communication to ensure that information is easily understood by all clients.

Responsibilities:

- **Staff and Volunteers:** All staff and volunteers are responsible for adhering to this policy and providing assistance to individuals with disabilities as needed.
- **Management:** Management is responsible for ensuring that the shelter complies with ADA regulations and for addressing any accessibility issues that arise.
- **Director and Case Management Staff will ensure proper placement of clients whose physical or mental health needs exceed the capacity of the shelter.** Disabled individuals will not be exited to homelessness unless good-faith offers of placement have been arranged and refused by the client.
- **Clients:** Clients are encouraged to communicate their accessibility needs to staff so that appropriate accommodations can be made.

Complaints and Grievances: Clients and visitors who believe that they have been discriminated against based on their disability can file a complaint with [Your Shelter

Name]. Complaints will be investigated promptly and resolved in accordance with ADA guidelines.

Review and Updates: This policy will be reviewed annually and updated as necessary to ensure continued compliance with ADA regulations and to address any new accessibility needs.

Food Service and Meals

Meals

Meals will be offered to program participants in accordance with the schedule posted at each individual site. Any questions regarding meals can be directed to the Program Director.

Additional meal information is included in the site-specific appendices.

Sanitary Facilities

FSC strives to maintain sanitary conditions throughout all of its facilities. Clean facilities are important to providing a dignified living space for all clients. It is the responsibility of all staff, as assigned, to ensure that sanitation duties are conducted on a regular schedule.

All staff who handle food must have a Food Handler's certification valid in the State of California.

Food Allergies

All food allergies are to be reported by each participant during the intake process. Case Management staff is prepared to ask questions regarding medical history and special considerations, including food and medication allergies, within the privacy of the intake process. Food allergies will be accommodated individually and alternate options will be discussed with the respective involved parties, as applicable and available.

It cannot be guaranteed that alternate meal options will be the same as the meal being served for all participants; however, accommodations will be made and safe food will be provided for all participants with allergies to the food being generally served during that meal time.

Donated Food

FSC welcomes food donations from partnering organizations. The donations of prepared and cooked food are encouraged to occur outside of the program grounds.

Program Termination and Scheduled Exits

Any instance of termination from the program will be rendered only after a thorough review of the situation(s) leading to termination and after serious consideration of the best interest of the client and the health and safety of other clients and staff members. Program Ground Rule violations shall be taken seriously and may be considered grounds for termination, depending on the severity and nature of the action taken by the client in question.

The purpose of this policy is to outline the circumstances and procedures for voluntary and involuntary exits of clients from FSC Programs.

FSC's goal is to reduce unnecessary exits when other actions might resolve the issue. The need for careful discretion is critical to ensure our clients' personal needs and safety are considered. For these reasons, all program termination decisions are made at the discretion of the respective Program Director.

Note: this policy is provided as a general framework and should be adapted to the specific circumstances, legal requirements, and policies of FSC's respective homeless service programs.

Voluntary Client Exit Procedure

Purpose

- The purpose of this policy is to establish guidelines and procedures for clients leaving the homeless shelter. It aims to ensure a smooth transition for clients, promote their successful reintegration into society, and maintain the shelter's capacity to serve those in need.

Voluntary Exit

- Clients have the right to voluntarily exit the shelter at any time without facing any negative consequences or barriers to future assistance. Clients are encouraged to communicate their intent to exit the shelter to the staff or designated personnel, whenever possible, to facilitate appropriate support and resource referrals.

Exit Planning and Support

- Shelter staff will collaborate with clients to develop individualized exit plans based on their needs, goals, and available resources. Exit plans may include securing permanent housing, obtaining employment, accessing healthcare services, applying for benefits, and connecting with community support programs. Shelter staff will provide information, guidance, and referrals to relevant agencies, organizations, and programs that can assist clients in their transition.

Documentation and Resources

- Prior to exit, clients will be provided with essential documents, such as identification papers, medical records, and relevant referrals, to help facilitate their transition. Clients will receive information about available community resources, including housing programs, employment services, educational opportunities, healthcare providers, and other supportive programs.

Re-Entry Policy

- Former clients who have voluntarily exited the shelter but find themselves homeless again in the future will be eligible for re-entry, subject to available space and adherence to the shelter's admission processes. Clients seeking re-entry will be required to undergo a new intake process, including assessments, interviews, and documentation verification, to ensure that the shelter can effectively meet their needs.

Confidentiality and Privacy

- All client information, including exit plans, personal details, and progress reports, will be treated with strict confidentiality and privacy in accordance with applicable laws and regulations. Client written consent will be obtained before sharing any personal information with external agencies or organizations involved in the exit planning or follow-up process.

Involuntary Client Termination/Exits

Involuntary exits may be necessary to maintain a safe and supportive environment for all residents, protect the rights and well-being of clients and staff, and ensure the effective utilization of shelter resources.

Grounds for Involuntary Exit may include:

1. Violation of Shelter Rules: clients may be subject to involuntary exit if they repeatedly or seriously violate the shelter's code of conduct or rules, including but not limited to violence, harassment, theft, destruction of property, or egregious behavior that severely disrupts the operation of the shelter.
2. Endangering Others: if a client poses a significant threat to the safety, well-being, or mental health of other clients, staff, or themselves, an involuntary exit may be necessary.
3. Exploitation or Criminal Activity: clients engaged in illegal activities within the shelter premises, exploitation of other clients or staff, or any behavior that violates local laws and regulations may be subject to involuntary exit.

Grievances and Appeals

- Each client discharged on an involuntary basis must be given the opportunity to appeal the decision via First Step Communities' established grievance and complaint protocol. The forms are readily available so that clients do not need to request an appeal - they just need to submit the form requesting an appeal. All appeals will be taken into consideration as described in the "Grievance Procedure" section.

Exit Assistance

- Involuntarily exiting clients will be provided with appropriate referrals and resources to assist them in their transition out of the shelter. This may include referrals to alternative shelters, housing programs, social services agencies, healthcare providers, or other relevant organizations. Shelter staff will offer support and guidance to help clients navigate the available resources and access the assistance they may require.

Re-Entry Policy

- Involuntarily exited clients may have the opportunity to apply for re-entry after a designated period, subject to a reassessment of their circumstances and the availability of shelter space. Re-entry eligibility will be communicated in HMIS exit notes for other agencies' review. Re-entry decisions will be based on factors such as demonstrated behavior change, compliance with shelter rules, and willingness to actively engage in supportive services.

Confidentiality and Privacy

- The confidentiality and privacy of clients involved in an involuntary exit will be respected and protected to the fullest extent allowed by law and shelter policies.

Policy Review

- This policy will be regularly reviewed to ensure its effectiveness, adherence to applicable laws and regulations, and alignment with best practices in homeless shelter management.

Mandatory Discharge Reasons

Mandatory participant discharges are to be taken seriously and may only take place if one of the following behaviors or actions occurs while on the premises of a program site:

- Possession of a weapon inside the facility;
- Assault or other violent behavior (actual physical violence, words are not violence);
- Restraining order precludes continued residence.
- Participant behavior endangers health or safety of participants or staff;
- Presence of infectious disease (i.e. Tuberculosis, COVID-19, norovirus) that significantly increases the risk of harm to other participants; reasonable attempts to obtain medical treatment will be made before individuals are discharged due to infectious disease; and/or,
- Individual requires care and supervision to manage their activities of daily living (feeding, toileting, selecting proper attire, grooming, maintaining continence, putting on clothes, bathing, walking, and transferring) beyond the reasonable supports available on-site. Individuals discharged due to care and supervision needs **will not** be discharged to the streets.

Discharge may also occur voluntarily or when one of the following has been met:

- Participant achieves their goals and is ready to discontinue service;
- Participant no longer wants to stay at the program site and receive services;
- Participant does not occupy their bed at the program site for five (5) consecutive nights (participants are made aware of this policy prior to signing the Participant Rights and Responsibilities and understand that their bed may be given to another prospective participant if too much time elapses);
- Participant refuses to adhere to the policies and procedures of the program; or,
- Participant has needs that exceed the capacity, resources, or expertise of the program and its staff (please see above). In cases in which a participant needs care that exceeds the capacity of the program, appropriate referrals will be made and the participant's Case Manager will ensure that an alternate temporary or permanent placement is arranged as quickly as possible.

In the event of voluntary or involuntary discharges, program staff are to follow an orderly and respectful process for the benefit of all participants.

Facilities

Overview

Facility information differs by site and specific policies and procedures relating to each program site can be found in the appendices. In general, all facilities are to be maintained and kept clean and functional at all times.

Cleaning

All First Step Communities facilities are to be kept clean and orderly. Cleaning must be conducted on a daily basis and common areas kept usable and safe for all clients and staff. Specific cleaning policies, as they differ by site, are included in the appendices.

Pest Control

Pest control procedure differs by program site. Each site is to be kept free of bugs, insects, and rodents. Any pest control problem that occurs is to be addressed immediately and the proper protocol followed for ensuring that the site remains safe and usable for all clients and staff. Specific pest control information, as it differs by program, can be found in the appendices.

Parking

The parking regulations differ by program site and are included in the site-specific appendices. Generally, clients are not allowed to park a car at a program site unless the car is registered in the client's name. Staff are to park in designated locations and must respect the rules of the local neighborhood, city, etc.

Staff: Program Responsibilities & Policies

General Staff Information

Staff

All staff members are expected to comply with all First Step Communities employment policies as outlined in the organization's Employee Handbook. While working with employees and staff members of partner organizations, staff are expected to work collaboratively and to create a supportive environment for all staff members, clients and participants at all sites.

Should an incident occur involving a staff member, the staff member's direct supervisor is to be contacted and is to provide support to resolve the situation. If further intervention or support is needed, the Supervisor will contact the Program Director. Any complaints or concerns about staff members can be expressed via the Grievance Procedure.

Management Structure & Concerns

The following is the management structure for daily operations at First Step Communities:

Staff → Site Supervisor → Program Director → Chief Operating Officer → Executive Director

If you have any question about a task, your role, or an issue that needs to be resolved on your site, you should first contact your direct supervisor. If you feel that your supervisor is not resolving the issue or cannot answer your question, you can contact the Program Director. Any issues or questions still unresolved will be brought to the attention of the Chief Operating Officer.

Common things that should go to your supervisor:

- If you have a conflict with another staff member
- Work schedule
- Any timecard issues (UAttend hours or questions, missed punches, etc.)
- Issues with a work task

Contacting Human Resources

Most questions that you may have need to be directed to your supervisor. If you have questions about any of the following, you may directly contact Human Resources:

- Sexual Harassment (by supervisor)

- Any act of harassment
- Hostile work environment
- Whistle blower - stealing, misappropriation of funds
- Benefits questions (including online access)
 - Taking a leave
 - Healthcare
 - Dental
 - Vision
- 401(k) Retirement Plan
- Verification of employment or income
- Copies of past pay stubs
- Intuit payroll system

Training

Training is essential to ensuring that staff members are best informed and equipped for serving individuals experiencing homelessness. The following list is inclusive of required training topics that must be administered to all First Step Communities staff:

- Confidentiality protocols
- Sexual Harassment
- Crisis Prevention and/or verbal de-escalation
- Mandatory reporting requirements related to elder and dependent adult abuse
- Universal precautions/infectious disease prevention
- Proper food handling and storage, if required by law (please note that the State of California requires that all individuals handling food be certified and granted a Food Handler Card)
- Anti-discrimination/reasonable accommodation training
- Customer Service and Professionalism
- Effective Communication
- Shelter policies and procedures
- Emergency evacuation procedures and fire safety
- HMIS Privacy and Security Certification
- Ethics/Boundaries
- First Aid and CPR
- Mental Health
- Sensitivity
- Trauma-Informed Care
- Domestic Violence recognition and referral
- Overdose detection and response, including Narcan use

- Harm reduction approach to substance use disorders
- Diversity awareness/Cultural Competence
- Heat Safety, as applicable

All training will be facilitated by management staff and will be announced ahead of their scheduled times. Staff members will be required to attend training sessions, unless a previous arrangement or accommodation has been made with the staff member's supervisor. Each staff member will receive verification of completion upon the successful completion of each training session. Training completion verification will be documented in each staff member's personnel file and will be maintained for the purpose of re-certification. All staff members will be paid for the time spent in training activities.

The timing and location of training will be at the discretion of First Step Communities, in accordance with the availability of staff members and training facilitators. Training materials will be made available to staff members, and training facilitators will be asked to answer any questions posed by staff. Re-certifications and maintenance of routine training topics will be monitored by management staff; any changes or individual discrepancies will be discussed with the appropriate staff member(s).

First Step Communities maintains the right to train staff members in the manner in which they will best be served and prepared to provide services to all shelter participants. Should any concerns be raised about training or individual staff needs, they are to be directed to the respective Program Director. Other training opportunities may be provided at the discretion of the management staff.

Program Responsibilities and Tasks

Staff on Duty

First Step Communities programs are staffed 24/7, 365 days a year. Staff members will be appropriately trained, in accordance with FSC guidelines, and will be accessible to participants at all times.

Staff members are expected to fulfill the requirements of their individual job descriptions, and treat all shelter participants with respect at all times. Should an incident occur that requires additional support, the staff member is to alert their immediate supervisor. If the supervisor is unable to resolve the situation, either the Program Director or Chief Operating Officer will be consulted.

Client Support Associate (CSA) Tasks

Client Support Associates will be assigned cleaning, facility maintenance, and program support tasks at each respective site. Specific tasks are included in the site appendices.

Incident Reports

Incident reports are to be filed whenever an incident occurs on site. Examples of such incidents include, but are not limited to, the following:

- Clear, obvious intoxication
- Violence
- Emergencies
- Possession of alcohol/drugs
- Smoking
- Lighting of fire inside dorm/cabin/tent

The staff member who identifies the incident is responsible for completing an incident report. Once incident reports are submitted, they will be reviewed by the Program Director and appropriate follow-up will occur.

Fire Extinguisher/Fire Safety

Fire extinguishers are maintained on every site and are subject to all fire codes, where applicable. The fire exit plan is posted at every site and is to be followed during all evacuation trainings, procedures and emergencies.

Universal Precautions and Biohazardous Materials

Universal precautions are to be maintained at all times. Staff members and participants are to avoid contact with bodily fluids, including saliva, blood, urine and fecal matter. In the event that an incident occurs and cleaning must take place, staff members are to use caution and protect themselves by wearing proper protective gear (gloves, face shield, gown, as applicable).

Biohazardous (infectious, biomedical) materials are to be disposed of appropriately. For the purposes of First Step Communities, biohazardous waste is to be considered any potentially harmful waste that is disposed of within the confines of the program sites. All employees handling biohazardous material are required to be approved by the supervisor or Program Director; trainings will be offered, as appropriate and available.

Used needles (sharps) may be disposed of in one of several designated containers located throughout the program sites. Sharps are to be properly disposed of in accordance with the instructions listed on the receptacle. Once a sharps disposal container becomes full, it will be properly emptied. Any questions regarding biohazardous waste or disposal should be directed to the respective Program Director.

Infectious Disease Protocol

First Step Communities is committed to ensuring that every program site remains free of infectious diseases and to keeping its participants, staff members, volunteers and visitors healthy.

Should an infectious disease be identified within the confines of a program site or amongst its participants, the Program Director must be notified immediately. Measures will be taken to contain the disease and prevent its spread amongst the population accessing the shelter and its services. Any participant requiring medical attention for the diagnosis or treatment of an infectious disease or other condition will be connected with the appropriate medical care.

Infectious diseases that cannot be contained (such as head lice, scabies or tuberculosis) or that pose a significant risk to the health and safety of other shelter participants, staff members, or others, may be determined to require immediate medical attention and/or dismissal from the program. Dismissal considerations will be determined by the Program Director.

First Aid & Emergency Response Information

Emergency Response Plan

Each site maintains an emergency response plan, which is to be followed in the case of any emergencies. Emergency numbers are posted near public telephones, as applicable. In the event that a staff member is unaware of how to handle an emergency situation, they are advised to call 911 and alert their supervisor immediately.

Generally, the following are to be conducted:

1. The staff members are to ensure the safety of all clients and staff on site.
2. If additional care is needed, the staff member is to call 911 immediately.

3. Once an emergency situation has been resolved, the staff member is to complete an incident report.

First Aid Supplies

First aid supplies are available at every program site. Specific locations of first aid supplies are included in each respective program appendix.

Medical and Psychiatric Emergencies

In the event of a medical or psychiatric emergency, staff are to call 911 immediately and prepare for the arrival of Emergency Medical Services and/or local Law Enforcement Officers. At no time are staff to diagnose or treat participants for any medical or psychiatric conditions. When necessary, staff must intervene in extreme emergencies (i.e. CPR must be administered, a tourniquet must be placed to stop bleeding, etc.). During an emergency or perceived emergency, the Supervisor or Director, if available, is to manage the situation and provide direction to other staff members and program participants.

Client Suicidal Thoughts or Actions

In the event that a client is exhibiting suicidal ideation, the staff member is to do the following:

1. Ask the client if they have a plan to die by suicide (i.e. do they think they will harm themselves tonight if left alone?).
2. If any staff member suspects that the client will harm themselves if left alone, call 911, or direct a co-worker to call 911. Do not allow the client to return to their tent or cabin without any supervision. Stay with the client until first responders arrive.
3. As soon as possible, call or have someone else call the Program Director. If the Program Director is unavailable, call the Chief Operating Officer.
4. Once the situation has been properly addressed, the staff member must complete an incident report.

Narcan Use Policy

This policy outlines the guidelines and procedures for the use of Narcan (Naloxone) at our program sites. Narcan is a medication that can reverse the effects of an opioid overdose and save lives. Given the prevalence of substance use disorders among the

homeless population, it is crucial to have appropriate protocols in place to respond effectively to potential opioid overdoses.

- Training and Education:
 - All staff members shall receive comprehensive training on recognizing the signs of an opioid overdose, administering Narcan, and providing appropriate follow-up care.
 - Training sessions should be conducted regularly to ensure staff members are up-to-date with the latest information and techniques related to Narcan administration and overdose response.
- Availability of Narcan:
 - Each program site will maintain a sufficient supply of Narcan available on-site, stored in a secure and easily accessible location.
 - When supplies allow, all staff should carry Narcan/Naloxone on their person while on shift.
 - The program site should maintain a record of the expiration dates of the Narcan supply and ensure timely replacements as needed.
- Recognizing and Responding to Overdoses:
 - Staff members will be trained to identify the signs of an opioid overdose, such as unresponsiveness, slow or shallow breathing, and pinpoint pupils.
 - If an overdose is suspected, staff members should immediately call emergency medical services (EMS) and administer Narcan as per the training provided.
 - If multiple staff members are available, one should administer Narcan while another staff member contacts EMS for further assistance.
- Documentation and Reporting:
 - Any incident involving the administration of Narcan should be documented promptly and accurately, including the date, time, individuals involved, and any follow-up actions taken.
 - Incident reports should be shared with the program site's management, healthcare professionals, and any relevant authorities as required by local regulations.
- Follow-Up Care:
 - After administering Narcan, staff members should stay with the individual and closely monitor their vital signs until EMS arrives.
 - Once EMS has arrived, they will assume responsibility for the individual's care and transportation to a medical facility, if necessary.
- Confidentiality and Non-Discrimination:

- The privacy and confidentiality of individuals who receive Narcan should be strictly maintained, in accordance with applicable privacy laws and regulations.
- No individual should face discrimination or be denied program services based on their past or current substance use.
- Collaboration with Healthcare Providers and Community Organizations:
 - Program sites should establish partnerships with local healthcare providers, including substance use treatment programs, to ensure a coordinated response to opioid overdoses.
 - Collaboration with community organizations and local authorities can help identify individuals at risk, provide support services, and develop strategies for overdose prevention.
- Ongoing Evaluation and Improvement:
 - The program site should regularly evaluate the effectiveness of this policy and make necessary adjustments based on feedback from staff members, residents, healthcare providers, and other stakeholders.
 - The policy should be updated to reflect any changes in best practices, local regulations, or emerging research related to Narcan administration and opioid overdose response.

This policy is a general guideline and should be adapted to meet the specific needs and legal requirements of each program site and its jurisdiction.

Client Death

In the case of the death of a client, staff must do the following:

1. Call 911 immediately.
2. Call Director after calling 911.

Counseling resources are available for employees through the Employee Assistance Program (EAP). Employees are also encouraged to talk with their supervisors/site director. Program Directors will work with local authorities to obtain chaplain services or behavioral health assistance for clients and staff.

Recordkeeping

A file will be created for each shelter or program participant; all files are to be kept on-site within the First Step Communities Case Management office. All files and personal

information are to be triple-locked and will only be accessed by an approved user or the client/participant's respective Case Manager.

All files are to be considered confidential. No information from a file shall be shared or distributed within the shelter or outside of the campus community. Staff are not to remove files from their designated spaces or to leave client files in cars, etc.



Client Concern & Grievance Procedures

Updated 03/17/2025

1. Purpose of the Procedure/Introduction

First Step Communities' aim is to ensure that clients with a grievance relating to their participation in a First Step Communities program can use a procedure to help to resolve grievances as quickly and fairly as possible.

2. Informal Discussions

If a client has a grievance about a disciplinary issue or FSC process, they should discuss it informally with a shelter staff member – preferably a Supervisor or Director. We hope that most concerns will be quickly resolved this way.

3. Stage 1 – Statement of Grievance

If the client feels that the matter has not been resolved through informal discussions, they should put a grievance in writing for FSC management staff review. This can be online (see posted link & QR code) or by submitting a paper form.

4. Stage 2 – The Grievance Meeting

Within 5 working days, FSC management staff will respond to the statement, inviting the client to attend a meeting where the alleged grievance can be discussed. This meeting is scheduled to take place as soon as possible and normally 5 working days' notice of this meeting that is provided to the client.

Clients should make all reasonable attempts to attend the meeting, but if for any unforeseen reason the client, or the management, cannot attend, the meeting is automatically rescheduled.

After the meeting, management hearing the grievance must write to the client informing them of any decision or action and offering them the right of appeal. This letter is normally sent within 5 working days of the grievance meeting and should include the details on how to appeal.

5. Step 3 – Appeal

If the matter is not resolved to the client's satisfaction, the client may set out their grounds of appeal in writing within 10 working days of receipt of the decision letter.

Within 5 working days of receiving an appeal letter, the employee should receive a written invitation to attend an appeal meeting. An FSC Program Director not involved in the original meeting will attend the appeal meeting.

After the appeal meeting, the presiding FSC Director must inform the client of their decision within 3 working days of the meeting. The Appeal Director's decision is final.

North A Participant Concern/Grievance Form

Are you having an issue here at FSC that you can't resolve? Scan this code with any cell phone QR reader and complete the online form. Your report goes directly to management.

No phone? Ask staff for a paper form.



<https://forms.gle/WaLxgMcE1HBRYJKv5>



Grove Participant Concern/Grievance Form

Are you having an issue here at FSC that you can't resolve? Scan this code with any cell phone QR reader and complete the online form. Your report goes directly to management.

No phone? Ask staff for a paper form.



<https://forms.gle/xZ7Pgt22shxuqzaeA>

Roseville Road Participant Concern/Grievance Form

Are you having an issue here at FSC that you can't resolve? Scan this code with any cell phone QR reader and complete the online form. Your report goes directly to management.

No phone? Ask staff for a paper form.



<https://forms.gle/PUkBibiojJVQ4dvm7>

Weather Respite Participant Concern/Grievance Form

Are you having an issue here at FSC that you can't resolve? Scan this code with any cell phone QR reader and complete the online form. Your report goes directly to management.

No phone? Ask staff for a paper form.



<https://forms.gle/xNse9Fkj7vxw8LW28>



Stockton Blvd. Safe Stay Participant Concern/Grievance Form

Are you having an issue here at FSC that you can't resolve? Scan this code with any cell phone QR reader and complete the online form. Your report goes directly to management.

No phone? Ask staff for a paper form.



<https://forms.gle/Q6T2bY573wC95KMf7>



Good Neighbor Policy

First Step Communities strives to have a positive presence within the communities we operate; believing that these relationships are vital in working towards and solving homelessness as a unified community.

1. **Inherent Rights:** this policy document is predicated on the assumption of certain basic rights. Clients, surrounding residents, businesses, agencies, property owners, and staff have a right to:
 - a. Be treated with respect.
 - b. Personal safety.
 - c. Safe and quiet enjoyment of their cabin, sleeping space, business, home, and public spaces; and,
 - d. Receive services to meet their basic needs.
2. **Access to the Shelter**
 - a. Only individuals who have been referred and approved will have access to the shelter. There will be no lining up or queuing outside/on the premises.
 - b. The property will have controlled access.
 - c. Clients' belongings may be searched before they are allowed entry.
 - d. Clients will not be allowed entry, and/or will be asked to leave, if they present a danger to themselves or others.
3. **Description of Services**
 - a. On-site services designed to help transition clients to permanent housing will be available Monday through Friday.
 - b. Case workers and community service providers will be available weekdays to meet with clients to assist with their housing search and/or assist them to apply for benefits or employment.
4. **Communication and Coordination with the Neighborhood**
 - a. First Step Communities is committed to meeting with the neighbors, business owners, and surrounding community to discuss any concerns.
 - b. FSC Managers and Staff will attend community meetings when invited to better understand any community concerns.
5. **Safety and Security**
 - a. Clients, business owners and the general public have a reasonable expectation of safety at all times. Anyone feeling that their safety is compromised is urged to call 911.
 - b. Anyone threatening the safety of the staff or clients, or the public may be asked to leave. Law enforcement will be called, if necessary.
 - c. Crime Prevention Through Environmental Design (CPTED) will be utilized to identify and remedy areas that are dark or secluded or otherwise places of vulnerability.



- d. First Step Communities will work closely with local law enforcement assigned to the jurisdiction of the shelter.

6. Trash Remediation

- a. Clients will not litter or negatively impact the neighborhood.
- b. On-site staff will ensure that the area immediately around the cabin community is kept clean and attractive.
- c. First Step Communities will contract with the local waste management agency ensuring adequate and appropriate remediation of all garbage.

7. Sidewalk Etiquette

- a. Loitering is prohibited.
- b. Noise will be kept under control.
- c. Carts and belongings will not be left outside the property. Anything left unattended will be disposed of.
- d. Every effort will be made to ensure that clients are friendly and respectful.
- e. No visitors are permitted on the premises (i.e. family, friends)
- f. Distribution of food and clothing on the street will be discouraged.

Program participants who do not follow the Good Neighbor Policy may be subject to a review of their continued eligibility to participate in the program. First Step will work collaboratively with participants to address any violations. However, egregious or repeated violations may result in disciplinary action, up to and including termination from the program.

and mutually rewarding. However, your employment with FSC carries with it an obligation to maintain confidentiality, even after you leave our employ.

If you are questioned by someone outside the organization or your program and you are concerned about the appropriateness of giving them certain information, you are not required to answer. Instead, as politely as possible, refer the request to your supervisor.

It is also important to remember that you may not disclose or use proprietary or confidential information except as your job requires. You may not keep or retain any originals or copies of reports, notes, proposals, client lists or other confidential and proprietary documents, equipment, supplies, or property belonging to the organization. Any and all copies or originals of reports, notes, proposals, client lists or other confidential and proprietary documents must be turned over to the organization within twenty-four (24) hours of termination of employment.

You are not permitted to remove or make copies of any FSC records, reports or documents without prior management approval. Do not post confidential or proprietary information about FSC, clients, employees, or affiliates on any social media. Disclosure of confidential information could lead to termination, as well as other possible legal action.

Nothing in this policy prevents you from discussing or disclosing information about unlawful acts in the workplace, such as harassment or discrimination or any other conduct that you have reason to believe is unlawful.

Whistleblower Policy

A whistleblower as defined by this policy is an employee of FSC who reports an activity that he/she considers to be illegal or dishonest to one or more of the parties specified in this Policy. The whistleblower is not responsible for investigating the activity or for determining fault or corrective measures; appropriate management officials are charged with these responsibilities.

Examples of illegal or dishonest activities are violations of federal, state or local laws; billing for services not performed or for goods not delivered; and other fraudulent financial reporting.

If an employee has knowledge of or a concern of illegal or dishonest fraudulent activity, the employee is to contact his/her immediate supervisor. The employee must exercise sound judgment to avoid baseless allegations. An employee who intentionally files a false report of wrongdoing will be subject to discipline up to and including termination.

Whistleblower protections are provided in two critical areas -- confidentiality and against retaliation. Insofar as possible, the confidentiality of the whistleblower will be maintained. However, identity may have to be disclosed to conduct a thorough investigation, to comply with the law and to provide accused individuals their legal rights of defense. FSC will not retaliate against a whistleblower. This includes, but is not limited to, protection from retaliation in the form of an adverse employment action such as termination, compensation decreases, or poor work assignments and threats of physical harm. Any whistleblower who believes he/she is being retaliated against must contact Human Resources immediately. The right of a whistleblower for protection against retaliation does not include immunity for any personal wrongdoing that is alleged and investigated.

All reports of illegal and dishonest activities will be promptly submitted to the Executive Director who is responsible for investigating and coordinating corrective action, or to the Board of Directors if the allegations involve the Executive Director.

Employees with any questions regarding this policy should contact Human Resources.

Conflict of Interest

As an employee of FSC, you must avoid actual or potential conflicts of interest with the organization. This policy provides examples of prohibited conflicts of interest. If you are found to have a conflict of interest with the organization, you may be subject to discipline, including termination. You should contact your supervisor with any questions about this policy. Prohibited activities include, but are not limited to:

1. Being an Executive Director, employee, consultant or vendor to any business that competes, directly or indirectly, with the organization.
2. Having a direct or indirect financial relationship with a competitor, client, or supplier; however, no conflict will exist in the case of Executive Directorship of less than 1 percent of a publicly traded corporation.
3. Engaging in any other employment or personal activity during work hours, or using the organization's name, logo, equipment or property, including stationery, office supplies, computers, telephones, fax machines, postage, and office machines, for personal purposes.
4. Soliciting or entering into any business or financial transaction with another employee whom the soliciting employee supervises, either directly or indirectly, such as hiring the employee to perform personal services or soliciting the employee to enter into an investment.

Solicitation

You are not permitted to solicit or distribute literature during working time. Working time includes both your working time and the working time of the employee to whom the solicitation or distribution is directed. Similarly, distribution of written solicitation material in working areas is prohibited at all times. If you wish to distribute fundraising items such as cookies, candy, and coupon books for sale, you may place them without solicitation in your workstation or FSC break rooms, only with the Chief Operating Officer's approval.

Media Contact

Only people designated by the Executive Director of the organization may comment on organization policy or events on behalf of the organization. If you are contacted by a news organization, please direct all media inquiries to your supervisor.

Personal Relationships in the Workplace



Program Termination & Scheduled Exits

Any instance of termination from the program will be rendered only after a thorough review of the situation(s) leading to termination and after serious consideration of the best interest of the client and the health and safety of other clients and staff members. Program Ground Rule violations shall be taken seriously and may be considered grounds for termination, depending on the severity and nature of the action taken by the client in question.

The purpose of this policy is to outline the circumstances and procedures for voluntary and involuntary exits of clients from FSC Programs.

FSC's goal is to reduce unnecessary exits when other action might resolve the issue. The need for careful discretion is critical to ensure our clients' personal needs and safety are considered. For these reasons, all program termination decisions are made at the discretion of the respective Program Director.

Voluntary Client Exit Procedure

Purpose: The purpose of this policy is to establish guidelines and procedures for clients leaving the homeless shelter. It aims to ensure a smooth transition for clients, promote their successful reintegration into society, and maintain the shelter's capacity to serve those in need.

Voluntary Exit: Clients have the right to voluntarily exit the shelter at any time without facing any negative consequences or barriers to future assistance. Clients are encouraged to communicate their intent to exit the shelter to the staff or designated personnel, whenever possible, to facilitate appropriate support and resource referrals.

Exit Planning and Support: Shelter staff will collaborate with clients to develop individualized exit plans based on their needs, goals, and available resources. Exit plans may include securing permanent housing, obtaining employment, accessing healthcare services, applying for benefits, and connecting with community support programs. Shelter staff will provide information, guidance, and referrals to relevant agencies, organizations, and programs that can assist clients in their transition.

Documentation and Resources: Prior to exit, clients will be provided with essential documents, such as identification papers, medical records, and relevant referrals, to help facilitate their transition. Clients will receive information about available community resources, including housing programs, employment services, educational opportunities, healthcare providers, and other supportive programs.

Re-Entry Policy: Former clients who have voluntarily exited the shelter but find themselves homeless again in the future will be eligible for re-entry, subject to available space and adherence to the shelter's admission processes. Clients seeking re-entry will be required to



undergo a new intake process, including assessments, interviews, and documentation verification, to ensure that the shelter can effectively meet their needs.

Confidentiality and Privacy: All client information, including exit plans, personal details, and progress reports, will be treated with strict confidentiality and privacy in accordance with applicable laws and regulations. Client written consent will be obtained before sharing any personal information with external agencies or organizations involved in the exit planning or follow-up process.

Involuntary Client Termination/Exits

Involuntary exits may be necessary to maintain a safe and supportive environment for all residents, protect the rights and well-being of clients and staff, and ensure the effective utilization of shelter resources.

Grounds for Involuntary Exit may include:

1. Violation of Shelter Rules: Clients may be subject to involuntary exit if they repeatedly or seriously violate the shelter's code of conduct or rules, including but not limited to violence, harassment, substance abuse, theft, destruction of property, or refusal to comply with staff instructions.
2. Endangering Others: If a client poses a significant threat to the safety, well-being, or mental health of other clients, staff, or themselves, an involuntary exit may be necessary.
3. Exploitation or Criminal Activity: Clients engaged in illegal activities within the shelter premises, exploitation of other clients or staff, or any behavior that violates local laws and regulations may be subject to involuntary exit.
4. Non-Participation: Clients who consistently fail to actively participate in shelter programs, engage in case management activities, repeatedly decline viable housing options, or fail to make progress towards their individual goals may be considered for involuntary exit. Non-Participation includes repeated, unauthorized absences from the program.

Grievances and Appeals: Each client discharged on an involuntary basis must be given the opportunity to appeal the decision via First Step Communities' established grievance and complaint protocol. The forms are readily available so that clients do not need to request an appeal—they just need to submit the form requesting an appeal. All appeals will be taken into consideration as described in the “Grievance Procedure” section.

Exit Assistance: Involuntarily exiting clients will be provided with appropriate referrals and resources to assist them in their transition out of the shelter. This may include referrals to alternative shelters, housing programs, social services agencies, healthcare providers, or other relevant organizations. Shelter staff will offer support and guidance to help clients navigate the available resources and access the assistance they may require.



Re-Entry Policy: Involuntarily exited clients may have the opportunity to apply for re-entry after a designated period, subject to a reassessment of their circumstances and the availability of shelter space. Re-entry eligibility will be communicated in HMIS exit notes for other agencies' review. Re-entry decisions will be based on factors such as demonstrated behavior change, compliance with shelter rules, and willingness to actively engage in supportive services.

Confidentiality and Privacy: The privacy and confidentiality of clients involved in an involuntary exit will be respected and protected to the fullest extent allowed by law and shelter policies.

Policy Review: This policy will be regularly reviewed to ensure its effectiveness, adherence to applicable laws and regulations, and alignment with best practices in homeless shelter management.

Note: This policy is provided as a general framework and should be adapted to the specific circumstances, legal requirements, and policies of FSC's respective homeless service programs.



Roseville Road Campus Participant's Pet Policy

1. Roseville Rd Campus participants are only allowed to possess 1 pre-approved dog. **No new pets will be allowed to be acquired during your stay.**
2. Participant's pet must be on a leash and be within your control at all times. **Participant's pet cannot be left unattended unless prior approval from their assigned case manager, Graveyard Site Lead, Site Supervisors, or Site Director has been obtained. *If the participant's pet is left unattended without approval, management reserves the right to call animal control services to pick up the participant's pet.**
3. Participant's pet must be up to date on vaccinations. If the participant's pet is not vaccinated, you must obtain any and all required vaccines within 30 days. Please see your assigned case manager for resources.
4. Participant's are responsible for cleaning up after their pet and ensuring food and water is available at all times. If the participant's need pet food, please see staff if there are some donations available.
5. Participants are responsible to make sure to pick up after their animals. Any pet feces found on campus must be picked up immediately. **Failure to do so will result in disciplinary actions.**
6. **First Step Communities will not tolerate any physical or verbal abuse of animals.** If abuse is witnessed or suspected, animal control may be notified to investigate and may result in a discharge from the campus.
7. If at any time a participant's pet becomes aggressive and/or attacks a staff member, participant, or another pet on-site may result in informing animal control to investigate and removing the participant's pet from the Roseville Rd Campus permanently.
8. Participant's are responsible for holding on to their pet for every welfare check during your stay.

I have read and understood the participant's pet policy. I understand that failure to follow the pet policy may result in removing my pet from the campus program. **I understand that if I leave my pet unattended without notifying management for more than 12 hours, First Step Communities' management team will believe that I have abandoned my pet and they will call animal control services.**

By signing below, I agree to follow the Pet Policy.

Print Name

Date

Signature

Date



REPLY TO RFP

FOR

ACCESS CENTER AND EMERGENCY SHELTER
OPERATIONAL MANAGEMENT SERVICES

DELIVER TO:

City of Lodi
Community Development Department
Neighborhood Services Division
221 W. Pine Street, Lodi, California 95240
Ph: 209-269-4519
NeighborhoodServices@lodi.gov

November 3, 2025

FIVE KEYS SCHOOLS AND PROGRAMS HOUSING DIVISION

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IV. PROPOSER INFORMATION

1. Name of Entity or Organization: **Five Keys Schools and Programs**
2. Physical Address: **320 13th Street, 2nd Fl, Oakland, CA 94612**
3. Mailing Address (if different than above):
4. Executive Director/CEO
 - Name: **Steve Good**
 - Title: **President /CEO**
 - Email: **SteveG@fivekeys.org**
 - Phone Number: **(415) 734-3310**
5. Contact Person (if different than above)
 - Name:
 - Title:
 - Email:
 - Phone Number:
6. Number of years organization has been in business: **22.4 years**
7. Number of years organization has operated as a 501 (c) (3): **21.6 years**
8. Federal Tax ID Number: **81-0622701**
9. Has this organization operated under another name? Yes () No
 - List all previous names: **The San Francisco Sheriff's Department Five Keys Charter School**
10. Are you registered with sam.gov? Yes () No
 - If yes, please provide UEI number **MQ6YNKQJLK85**
11. Number of year's organization has conducted the program for which services are being requested:
Housing facilities operations and services: 8 years
Care coordination and housing referral services: ~20 years

12. 3 References to speak to your organization's work and successes with homelessness services:

Christopher Kramer
Program Manager of Shelter and Navigation Centers
San Francisco Department of Homelessness and Supportive Housing (HSH)
christopher.kramer@sfgov.org
(415) 699-2555

Cathy Perdue
Adult Shelter System Program Manager
San Francisco Department of Homelessness and Supportive Housing (HSH)
Cathy.Perdue@sfgov.org
(628) 652-7725

Natalie Peterson
Assistant to the City Manager, City of Vallejo
Natalie.Peterson@cityofvallejo.net
(707) 649-3415

13. Describe your organization's history and experience in providing services to individuals experiencing homelessness:

Five Keys has provided services for unhoused individuals since our inception in 2003 as a school for adults in San Francisco jails. From the start, we saw how students faced complex barriers that got in the way of their education. Our mission broadened as we sought to help our students counter the effects of poverty, homelessness, incarceration, social inequity, and trauma. In 2008, we expanded into community sites by co-locating at neighborhood centers and social service agencies accessible to returning students. Our work soon evolved into serving all adults who sought employment and lacked requisite high school credentials. Our programs expanded to include job readiness, workplace skills, and sector-specific ESL (e.g. English for construction workers). Our schools now operate in 18 jails and at 90 community sites across California. We offer dual enrollment to accelerate completion of high school while students earn college credits at the same time. Our programs also include transitional employment for formerly incarcerated individuals and veterans, offered across 4 counties, including in San Joaquin (Stockton).

In 2018, San Francisco's Department of Homelessness and Supportive Housing (HSH) asked Five Keys to launch the Bayshore Navigation Center, an early example of "harm-reduction" shelters. A year later, Five Keys launched Embarcadero SAFE Navigation Center. Shortly after that, we were asked to rapidly expand to house thousands of vulnerable individuals during the pandemic. Five Keys participated in the City's conversion of unused hotels into quarantine, respite, and shelter-in-place housing. When these sites were later converted into full-time shelters and permanent supportive housing, Five Keys continued to innovate to meet new priorities, becoming adept at renovations and property development.

With these expansions in services, we recognized the opportunity to scale our hiring of individuals who have lived-experience with homelessness, incarceration, and recovery, as they are uniquely qualified to build trust and credibly engage with unhoused populations. Today, we have more than 500 housing employees serving ~5,000 unhoused adults and transitional-age youth with compassionate customer service in San Francisco, Alameda, Solano, and Los Angeles.

We welcome invitations from neighboring counties to expand our housing services, as many of our most dedicated and experienced employees commute long distances and are happy to serve others, closer to home. Our centralized administration and deep bench of experienced leaders allows us to scale quickly according to local needs, while maintaining fidelity to trauma-informed customer service.

As we grow geographically and programmatically, Five Keys readily adapts to location-specific changes in policies and practices. Flexibility is one of our defining characteristics, exemplified by two decades of collaborating with dozens of distinctly different cross-sector partners. For instance, with new mayoral leadership in San Francisco, there is a shift taking place to prioritize recovery care over the harm-reduction model that has been the City's mainstay approach. Five Keys' staff are flexible in adapting to such changes by hiring specialists and deploying new trainings, while reinforcing the core values of our trauma-informed, customer-service model.

You can learn more about Five Keys' housing services at <https://www.fivekeyshousing.org/>

14. Describe the organization's current approach to outreach and service delivery, particularly for unsheltered individuals or highly vulnerable populations:

Five Keys' approach to outreach emphasizes dignity, trust, and community connection. Our housing ambassadors keep sidewalks clean near our shelters, while inviting local residents and businesses to stay connected. We provide a hotline for neighbors to alert us of anyone setting up a tent, seen in distress, or causing damage or harm. Our staff take immediate and appropriate action to offer assistance, and when necessary, reach out to City partners, such as Sanitation and law enforcement.

The Mayor's Office recently expanded our team of ambassadors to broaden our presence and opportunities for engagement on the street. This model allows us to build trust and encourage low-barrier use of shelter services, such as offering access to food and phone use for those who may be hesitant to enter traditional shelters. We recognize the impact of this model as illustrated by Lodi's neighborhood cleanup map and low-barrier day-use services at the Access Center.

Five Keys operates a variety of other "outreach-intensive" programs for homeless populations: Since 2019, we have overseen Pit Stops and Mobile Showers to provide

hygiene services in Los Angeles. In the past year, we logged 1,046,316 visits at 19 sites with toilets and 20,790 showers at 15 sites where we set up trailers. We filled 20,546 garbage bags, picked up 1,755 used needles for hazardous waste; and distributed 31,139 hygiene kits. Community ambassadors improve safety and wellness for unhoused residents and distribute resource cards with information for further assistance.

Five Keys recruits, trains, and promotes staff who are credible messengers for vulnerable, unhoused people because of their relatable lived experiences. Our ambassadors have a remarkable ability to build rapport through sustained outreach, empathy, and real-world understanding of people who choose to stay outside in harsh conditions, rather than enter into shelters. In Lodi, we will offer resource cards and no-pressure invitations to come to the Access Center for day-use services, as a step toward building trust in fuller services.

Trust in Five Keys' ambassadors on the street grows quickly. We have gained a reputation for being helpful in a crisis, as our workers save lives, interrupt crimes, and help trafficked teens find safe haven. Our staff are trained as rapid responders and carry Narcan on their badges at all times, and have reversed more than 2,000 overdoses— not only for housing guests but also for people on the streets near our sites and even during workers' commutes.

Reciprocal referrals have long been defining features of Five Keys' outreach efforts. The presence of wraparound supports and employment resources all under one roof in Lodi Access Center is inspiring to us, as it removes the physical and emotional toll of navigating between fragmented systems and invites healing, engagement, and community connection—all in one place.

IV. PROPOSAL NARRATIVE

1. Service Summary

Provide a summary of the proposed services to be delivered, including a high-level description of work to be performed and the key outcomes your organization expects to achieve.

Five Keys will partner with the City of Lodi, San Joaquin County, and local CES, along with hospitals, workforce agencies, behavioral health and substance use providers, domestic violence and legal services, and other partners to deliver holistic care for people experiencing homelessness. We will offer low-barrier shelter in a clean, safe, and dignified environment; care coordination, and housing navigation for referrals and day-use walk-ins.

Our trauma-informed and culturally responsive model promotes safety, dignity, and self-agency. Each guest is paired with a care coordinator to co-develop an individualized plan for overcoming barriers and reaching goals toward stable housing. Small caseloads of 1:25 allow for intensive support by care coordinators who assist with benefits enrollment, obtaining vital documents, and making connections to health care and specialized services. Five Keys also offers on-site life skills, job training, financial literacy, and digital skills workshops to strengthen self-sufficiency.

Referrals and service engagements will be tracked in a secure database to support outcome measurement and accountability. We will track guest demographics and measures such as the number of individuals engaged through outreach; those accepting shelter placement, average stay, and types of services provided at 30, 60, and 90 days; behavioral health or substance use treatment; encampment engagement coordinated with City partners; and transitions to permanent or stable family reunification housing. Follow-ups will identify individuals needing further services to reduce returns to homelessness.

Five Keys seeks to create a compassionate service environment that advances the City's goals of reducing unsheltered homelessness and improving overall community wellbeing. A sampling of outcomes to be tracked include:

Site Operations:

- ≥ 90% occupancy and bed turnovers within 2 4-hours of exit;
- 3 meals daily for up to 60 individuals plus day-use participants;
- 24/7 Shelter Services for 60 guests and a flex bed capacity up to 208 beds;

Care Coordination:

- 95% of guests receive individualized housing-focused service plans within 7 days;
- 85% of guests become document-ready to support placements in housing;
- 85% will be connected to at least one external service or benefit;
- At least 75% of guests exit to stable housing or family reunification;
- 80% of guests will report qualitative or quantitative progress toward their Individual Service Plan (ISP) goals;
- 70% will engage in at least one on-site activity, such as job readiness, digital literacy, or life skills workshops;

Guest Satisfaction:

- ≥ 80% of those offered quarterly satisfaction surveys will complete it;
- 75% of survey respondents will indicate Strongly Agree or Agree regarding satisfaction with services;
- Grievances are tracked, resolved and audited for continuous improvement;

Outreach:

- 70% of those engaged through outreach will be connected to Behavioral Health or Substance Use Services;

Self Sufficiency:

- 100% will be offered job readiness, job training, job search and/or educational services;
- 75% will engage in these services and 10% will obtain employment;

Data Quality:

- 100% of HMIS entry/exit data submitted within 3 days;
- ≤5% null values in HMIS;
- 100% of guests exited to known destinations;
- ≥80% satisfaction surveys are completed 2x/year.

2. Organizational Experience

Describe your organization's experience with programs or services similar to those described in the RFP. If the scope of work is new to your organization, describe the relevant expertise, partnerships, or resources that will support successful implementation.

Five Keys brings two decades of experience working with highly vulnerable and marginalized populations, many of whom require assistance with housing. We began operating low-barrier, trauma-informed, housing-first shelters in 2018, with the launch of the Bayshore Navigation Center at the behest of the City and County of San Francisco. This was one of the first housing sites in the region to allow pets, partners, and personal belongings. Since then, Five Keys has expanded to operate multiple navigation centers, interim housing sites, and permanent supportive housing programs across 4 counties in northern and southern California. We now serve more than 5,000 unhoused, high-needs, and medically fragile individuals each year, with more than 500 highly trained staff providing 24/7 care, on-demand intakes, and intensive care coordination. Five Keys has leveraged the need for on-site staffing into an opportunity to provide much needed employment in the communities we serve. Our hiring model has become a win-win for uplifting communities where there are persistent and systemic barriers to employment and insufficient affordable housing.

Five Keys integrates supportive services and property management operations into a seamless model that unifies our staff across all roles and creates a consistent, coherent, person-centered guest experience. Our Housing Ambassadors build trust with guests by proactively encouraging participation in supportive services and they are able to share guests' concerns with appropriate colleagues. Ambassadors are trained to recognize behavioral health and de-escalation needs, while our care coordinators manage benefits enrollment, health access, transportation arrangements, and housing navigation support.

To address the multi-dimensional needs of unhoused guests, we leverage a broad network of community partnerships, including behavioral health, recovery, reentry, workforce, and medical providers. In each region, we engage deeply with local systems such as Coordinated Entry, public safety, hospitals, public health departments, and community colleges, tailoring programs to reflect local protocols, resources, and priorities.

Five Keys also leverages our broad scope of programming to expand our services for housing guests, where desired and feasible:

Education: We provide remote access to accredited high school completion;

Workforce: We staff-up housing programs and offer transitional employment for justice-impacted residents through CalCrew programs (including in Stockton);

Digital Equity: Our onsite technology ensures housing guests are supported in navigating benefits systems, applying for jobs, and staying connected to care.

Five Keys successfully launches shelters in places where we are new to the community by engaging respectfully with local partners and investing our time in relationship-building with City and County agencies. Our flexible, solutions-oriented posture, combined with robust administrative infrastructure and expertise has earned us a reputation for delivering thoughtful site-specific implementations, transparent operations, and sincere community responsiveness. We are confident that this experience positions us to support successful implementation and operations of housing services at the Lodi Access Center.

3. Collaborative Partnerships

Describe current and past collaborations with other nonprofits, government agencies, faith-based organizations, and community stakeholders relevant to homelessness, housing, health, or supportive services.

Five Keys collaborates with dozens of agencies and service providers—each with unique missions, culture, and institutional priorities. We cultivate effectively and respectfully to deliver holistic wrap-around support, barrier removal services, trauma-informed care, substance use treatment, medical services, and culturally aligned programming for individuals who are at a crossroads in their lives.

Each time Five Keys begins a program where we are not already established, we prioritize getting to know local providers, local cultures, local perspectives, and local interests. Even when we are already situated in a region, we do not presume to know what is important to new partners. Whenever appropriate, we establish formal and/or informal reciprocal referral agreements.

To strengthen our service capacity in Lodi, Five Keys will draw on our established programs and partnerships in nearby Stockton. We regularly partner with housing services networks, health and social services agencies, the DMV, workforce centers, CBOs, and Sheriffs' and probation departments. Sustaining trusting partnerships is core to Five Keys' model that depends on diverse perspectives and capabilities to deliver holistic support. For instance, referrals to substance use treatment programs and residential therapy are often critical to guests' efforts to make progress toward stability. We build trust over time, through warm handoffs to referred services and by our consistent follow through.

Our partnerships are wide-reaching in San Joaquin County. We are contracted by the Probation Department to deliver "Keys to Change," a Cognitive Behavioral Intervention (CBI) program for justice-involved participants. We operate Back 2 Work Transitional Employment in partnership with CalTrans and CDCR to provide reentry populations and drug-impacted community members paid employment along with training and job placement assistance. We work closely with the City of Stockton's Office of Violence Prevention, WorkNet, and Ready 2 Work to offer employment resources and job referrals tailored to individuals' needs.

Wraparound support is furthered through partnerships with agencies such as Friends Outside, El Concilio, Mary Magdalene Community Services, Catholic Charities, Community Partnership for Families, and United Way of San Joaquin County. Referrals for mental health, case management, and parenting support include Telecare, Parents by Choice/Becoming Main Street, and San Joaquin County Pride Center. We also partner with Prevail Women and Children's Services for domestic violence support and with Three Seeds to provide life skills and empowerment workshops.

Five Keys is committed to forming new relationships in the city of Lodi and honoring the work of existing providers, many who like Five Keys have been mission-driven for decades. We will collaborate with local partners to ensure services are integrated, complementary, and responsive to the specific needs of the Lodi Access Center and surrounding community.

4. Operational Methodology

Provide an overview of your approach to operating the City's Access Center and Emergency Shelter, including how you plan to scale services to meet evolving needs.

Five Keys' operational methodology balances centralized administrative infrastructure, site-specific flexibility, and consistent and comprehensive staff training. Our approach enables efficient scaling while keeping our focus on customer service as the foundation for all of our housing programs. With 15 housing sites across four counties, we have developed a model that can be tailored to Lodi's evolving needs, while ensuring fidelity to best practices in trauma-informed care, harm reduction, and client-centered engagement.

Five Keys' centralized operations ensure consistent attention to core values, compliance, and quality controls. Our knowledgeable leadership oversees contract fidelity, policy development, and staff training. Site-specific directors and supervisors focus on place-based day-to-day operations with flexibility to respond to each community's specific needs, challenges, and priorities.

We are able to stand up new facilities quickly—often in under 30 days—by drawing on standardized systems and templated protocols that can be modified to fit local expectations. We have consistent systems for intake and exit processing aligned to CES procedures, reporting, and communications, with nuanced differences for each site location. When launching at a pre-existing site, we are sensitive to the interests of incumbent employees and welcome applications from prior staff who are interested in adopting Five Keys' approaches and culture. We appreciate the experience and continuity in relationships with guests that incumbent staff bring to the site. We have also promoted prior staff who show talent and readiness for more responsibility. To create a positive experience for shelter guests, Five Keys onboards and trains previous and new employees at the same time to foster collegial bonds and a shared intent in providing consistent high-quality customer service.

Our Ambassadors are the heart of operations. They are cross-trained in site security, de-escalation, harm reduction, hospitality, and guest services—allowing for operational agility without sacrificing coverage or care. Ambassadors work both in and around the site, conducting outreach to neighbors and engaging with people in need who are on the street. Ambassadors offer staffing flexibility to ensure full coverage when there may be a spike in need because of emergency situations or severe weather conditions.

Five Keys creates safe, clean, and welcoming environments that affirm each guest's dignity, autonomy, and potential. We intentionally use non-stigmatizing language by referring to clients as "guests" and calling our case managers "care coordinators" to reflect our values and cultivate a sense of belonging and self-determination. Staff are trained to anticipate needs, reduce barriers, offer choices, and promote wellness, while reinforcing a sense of personal agency and community.

Five Keys' model is built to adapt. We scale services based on occupancy, seasonal demand, policy changes, and local directives, while maintaining a high standard of care. New services or activities can also be integrated quickly, involving local and regional partners, making Five Keys a stable and responsive long-term partner.

5. Tasks and Implementation

Specify the key tasks and activities your organization will undertake to accomplish the program's goals. Explain how and when these activities will be implemented and monitored for success.

Prior to launch, Five Keys will conduct a site walk-through and finalize an Implementation Plan in collaboration with City of Lodi representatives. The Plan includes scheduling staff training, onboarding personnel, confirming procurement of supplies, and conducting community outreach to ensure a smooth opening and alignment with the City's priorities.

The Lodi Access Center will operate 24/7 and welcome guests with a trauma-informed, low-barrier approach. Full intake and orientation are completed within 24 hours of guests' arrival. We manage two versions: Comprehensive intakes are typically conducted Monday–Friday, 8:00AM–4:30PM and a streamlined version (focused on essential-data and getting the guest settled) are used during other hours, followed by a full intake and orientation during the next shift. Intakes include informed consent, explanation of expectations and grievance procedures, and an introduction to site amenities. Onsite services include meals, hygiene supplies, showers, laundry, pet accommodations, structured enrichment activities, and job readiness programs. Intakes are supplemented or modified as needed to address language access, cognitive limitations, or disability, ensuring each guest is fully informed of their voluntary participation.

Each guest is assigned a care coordinator to support individualized case planning and service engagement. Within 72 hours of entry, the care coordinator conducts a one-on-one to develop an Individual Service Plan (ISP) tailored to the guest's unique needs and goals. Medical and behavioral health referrals are initiated within the first week. ISPs typically include housing readiness strategies, benefits advocacy, and barrier removal activities. Care coordination check-ins occur at least weekly to monitor progress and adjust supports. ISP plans also guide referrals to wraparound services such as behavioral health care, primary and urgent medical services, public benefits enrollment, legal assistance, and employment resources. Five Keys will reach out to Lodi-based service providers, faith-based groups, City leaders, and neighborhood associations and integrate our program into the local care ecosystem. Guests will be provided access to transportation for medical, housing, and administrative appointments.

Housing navigation is a priority: Five Keys will engage local partners and landlords in Lodi to establish referral pathways and placement options. Care Coordinators will work with each guest to develop plans for sustainable, permanent housing.

Walk-in guests also have access to meals, laundry facilities, device charging, and use of phones and computers. Our Care Coordination team is available to assist day-use guests with housing applications, right-to-work documentation, transportation needs, and referrals to local resources. For individuals who are not yet ready to commit to overnight stays, low-barrier daytime services create opportunities for trust-building and a bridge toward more stability.

Data is meticulously recorded in HMIS and Salesforce. Intakes, discharges, and bed turnover are logged daily and reported promptly to CES to maximize bed utilization. Program leadership conducts weekly reviews of data that informs adjustments in services. Ongoing monitoring of outcomes supports continuous improvement.

6. Shelter Operations Capability

Demonstrate your organization's capacity to develop, implement, and manage an emergency shelter. Include a brief summary of your organizational infrastructure, staffing, and internal systems.

Five Keys has a proven record of developing and managing housing programs for individuals with complex, co-occurring needs. Our ability to launch programs quickly is rooted in our scalable infrastructure, rigorous staff training, and refined systems—all guided by our commitment to dignity, safety, and service.

Five Keys currently operates 15 housing sites across San Francisco, Alameda, Solano, and Los Angeles, including Navigation Centers, Tiny Homes, PSH, and Shelters, as well as Rapid Rehousing programs. These are supported by systems for finance, HR, IT, compliance, and quality assurance. Our annual budget (across all divisions, including housing, education, reentry, employment, and workforce development) exceeds \$120 million, accounting for 1,100+ employees serving more than 15,000 individuals at 100+ program sites in 15 counties. We maintain a clean financial record with no outstanding debt, outside of real estate with all loans in good standing. A third-party accounting firm, EdTec, ensures full compliance with OMB Uniform Guidance and procurement standards.

Five Keys has extensive experience launching and stabilizing housing operations under tight timelines. During the pandemic, we opened 10 sites within 15 months, including a 400-room hotel and large congregate shelters in repurposed facilities. Recently, we successfully opened new programs in Vallejo and Los Angeles, demonstrating readiness to operationalize shelters within weeks of site approval. Lodi's Access Center model is exciting to us in how it exemplifies "low-barrier" by bringing together complementary services, and allows for day services to foster engagement and trust-building with individuals not yet ready to accept night-stays. Our team is experienced in flex-bed management, adapting capacity and staffing to meet fluctuating needs, while maintaining safety and compliance.

Care Coordinators integrate wraparound supports, housing navigation, behavioral health and medical referrals, employment readiness, education, and transportation assistance through collaborations with dozens of agency partners, and community-based organizations. For Lodi, we will partner with San Joaquin County Behavioral Health Services and local healthcare providers. Five Keys welcomes guests with their pets, possessions, and partners, offering secure storage areas and pet-friendly spaces that meet health and safety standards.

Our staff complete a thorough two-week orientation and ongoing annual trainings. Each shelter is staffed with a site director, shift supervisors, care coordinators, ambassadors, and janitorial personnel. Ambassadors are cross-trained in a multitude of operational roles and all staff participate in quarterly emergency drills. We prioritize local hiring and value lived experience, with more than 90% of our supervisors and managers promoted from within. All sites maintain a trauma-informed, secure environment with controlled entry, surveillance, and clear behavioral expectations. Incidents are managed according to established protocols, balancing safety with compassion. Five Keys maintains robust data and reporting systems, providing monthly outcome reports on housing placements, job attainment, and service linkages. Continuous quality assurance, performance dashboards, and regular audits ensure transparency and accountability. We use Salesforce Nonprofit Cloud, compatible with HMIS, to manage case tracking, performance metrics, and contract compliance.

7. Admission and Program Participation Procedures

Provide detailed policies and procedures related to the intake and sheltering process, including:

- Client rules and guidelines
- Identification requirements
- Screening and assessment protocols
- Bed reservation and allocation system
- New client orientation process
- Policies for day-use clients and services
- Returning client procedures
- Exit and re-admission criteria for disqualification

Samples of Five Keys' policies and procedures are attached as ***Exhibits, starting on page 41.**

Program Rules: All guests are expected to follow our “Community Guidelines” that ensure a safe and inclusive environment. Expectations around conduct are reviewed during orientation and posted. We enforce zero tolerance for violence, threats, harassment, or discrimination. Weapons must be checked and stored securely by staff. Guests are responsible for maintaining clean, clutter-free personal spaces. Theft or ongoing disruptive behavior may result in discharge, subject to the grievance/appeal process. ***See Exhibit #7.**

Identification: Guests are not required to show government-issued IDs to access services. For clients without ID, care coordinators assist with barrier removal and recovery of essential documentation needed to secure sustainable housing.

Screening/Assessment: After referral or walk-in, a screening is conducted to determine current housing status, immediate health and safety needs, and eligibility for shelter or day-use services. Additional assessments are conducted by care coordinators to inform individualized support plans and prioritized connections to barrier removal services.

Reservation System: Five Keys maintains real-time tracking of bed assignments in our Salesforce platform. Vacancy reports are shared promptly via HMIS to expedite turnovers. Beds may be reassigned if a guest is absent for more than 48–72 hours without an approved reason. Walk-up clients will be triaged according to Lodi's approved criteria and ensured equitable access through coordination with city-designated staff. ***See Exhibit #6.**

Client Orientation: All guests receive orientation on community rules, safety procedures, available services, and grievance processes. Guests review and sign a Release of Information and Participation Guidelines. All materials are provided in plain language and accessible formats; staff are trained to read and explain policies for guests with limited literacy, and if under the influence, repeat policy reviews the next day. A guided tour is provided of key areas to increase comfort and sense of welcome. ***See Exhibit #8.**

Day-Use Policies: Day-use guests are recognized as potentially being eligible for night-stays and are made to feel welcome to encourage continued engagement. Restrooms, showers, laundry use, meal access, phone and computer use, care coordination, and service referrals are available for day-use during posted hours. Behavior and safety rules replicate those for overnight guests. Staff collect basic demographic information and screen for immediate needs, offering warm handoffs to care coordinators or on-site partners. Guests who exhibit unsafe behavior may be restricted from accessing services, after due process. ***See Exhibit #5.**

Returning Clients: Former guests seeking to return may be re-admitted based on current availability and prior program history. If discharged due to behavioral or safety concerns, a case review is conducted prior to re-entry. Approved returning guests complete a new intake, sign updated forms, and re-review site rules and procedures.

Disqualification: Guests may be exited if they pose an immediate safety threat, engage in violence, severe harassment, or property destruction; or repeatedly violate site rules after documented attempts to resolve the issue. Whenever possible, guests are offered support to transition to alternative services. Re-admission requests are reviewed on a case-by-case basis.

8. **Connection to Services and Housing**

Explain how your organization will coordinate and refer clients to supportive services and housing programs. Describe partnerships or systems used to facilitate these connections.

Five Keys' approach connects guests to referred services through real-time coordination and warm handoffs. Relationship-building with partners promotes mutual commitments across systems. We don't treat referrals as transactions, but as transitions designed to help guests overcome barriers to sustained housing.

System Navigation and Warm Handoffs: Our care coordinators support guests with goal-setting, care planning, and proactive system navigation. Referrals are tracked and our staff remain in touch with both the guest and external service provider. We emphasize warm handoffs when possible: providing transportation and coordinating with providers to ensure the guest is received in a dignified and trauma-informed way. For guests who have faced barriers, our trauma-informed engagement sees every new connection as an opportunity to rebuild trust.

Interconnected Data Systems: Five Keys uses a customized Salesforce platform as our internal tracking system that supports data entry into HMIS. We track intakes and exits, log referral outcomes, track benefit acquisition (Medi-Cal, CalFresh, GA, SSI/SSDI), and monitor housing readiness. Weekly review meetings help staff identify stalled referrals, adjust service plans, and close feedback loops with partner agencies. This dual-system enables flexible, scalable service coordination without sacrificing data integrity. It also allows us to spot systemic gaps in services and work with the City or County to propose targeted improvements.

Connecting People: Five Keys humanizes engagement by referring to clients as "guests" and encouraging community connection. We offer activities such as workshops, holiday meals, health fairs, and fun activities that blur the lines between recipients of our services and area residents—offering all the chance to feel a sense of belonging. Similarly, our relationships with partner organizations are based not only on MOUs but on real-time collaborative communications that troubleshoot challenges together. And, within the shelter, Five Keys' ambassadors are trusted and relatable to guests. They conduct daily wellness checks that build on this trust to surface immediate needs. Their consistent presence encourages guests to remain engaged with their service plans.

Adapting to Close Gaps: Five Keys' care coordinators continuously expand our network of community partners to be able to adapt service plans to each guest's needs. In Lodi, we will engage Lodi-based providers and draw from our Stockton-based partnerships to fill service gaps (e.g., more detox options, greater LGBTQIA+ affirming care, expanded hours, etc.) to

ensure that no guest is lost between systems. Five Keys' client-centered model is based on the premise that connection provides continuity; and continuity is what enables people to experience genuine transformation.

9. Housing-Focused Goals

Describe your strategy for minimizing length of stay and assisting clients in obtaining permanent housing.

Five Keys approach is to focus on housing from intake through the last phase of a guest's stay. We aim to help guests stabilize quickly, resolving barriers to sustainable housing as efficiently as possible.

Upon entry, each guest completes a housing-focused assessment and is assigned a Care Coordinator who meets 1:1 to co-create an Individual Service Plan (ISP) within 72 hours. These plans identify key barriers, such as the need for identification, income documentation, treatment of health issues, or unresolved legal matters. With a clear path toward housing, weekly 1:1 check-ins are used to make progress, monitor results, and ensure momentum is maintained.

Wraparound services—including behavioral health referrals, benefits enrollment, employment support, and life skills coaching—are provided directly or via referrals to partners to address the drivers of housing instability. Guests are supported in gathering documentation such as Social Security cards, state IDs, income verification, and proof of homelessness status. Transportation to housing appointments, interviews, and move-ins is coordinated to reduce logistical barriers. Integrated supports accelerate guests' readiness for stable housing and contribute to smooth transitions.

Care coordinators act as housing navigator liaisons to local landlords, public housing authorities, and permanent supportive housing (PSH) providers. They help guests complete housing applications, prepare for interviews, and overcome common screening obstacles. Five Keys will leverage staff to cultivate relationships with Lodi-based housing providers and landlords in order to establish referral pathways to available inventory. We will participate in local case conferencing systems where applicable and monitor guest data to align anticipated housing availability with internal forecasts of each guest's level of readiness to sustain housing.

All progress and unresolved barriers are tracked in Salesforce and HMIS, with weekly reviews by program leadership to adjust strategies to fortify a housing-focused orientation throughout each guest's stay at the Access Center.

10. HMIS Participation

Detail your organization's past or current use of HMIS and outline your plan to ensure compliance with all data entry and reporting requirements.

Five Keys is an experienced user of Homeless Management Information Systems (HMIS) across San Francisco, Alameda, Los Angeles, and Vallejo. We exceed program goals in each county, tracking different requirements, assessment questions, goals, and HMIS portal access protocols. While operating in Lodi would be our first experience within San Joaquin County's HMIS, Five Keys' data team is committed to aligning our data protocols and staff training to meet the compliance standards of SJCoC. We are fully prepared to comply with all local requirements and will work closely with the system administrator to ensure seamless integration. Five Keys provides thorough onboarding so relevant staff are well-trained in requisite data systems and we provide ongoing training to continually upgrade these skills. Our internal tracking through Salesforce is aligned with each county's HMIS standards to ensure consistency between internal and external systems.

Five Keys enters guest data into HMIS systems within 24 hours of intake and logs exits within one business day—often sooner, to maximize bed turnovers. We maintain accurate records of services, outcomes, and referrals, with our entries consistently reflecting less than 4% null values across all required data fields. We have well-developed internal protocols for reviewing data, conducting internal audits, and submitting timely, complete responses to funders' compliance inquiries. Supervisors conduct weekly meetings to ensure that all staff are up to date with data entry, billing, and reporting responsibilities.

We are committed to protecting client confidentiality and follow rigorous standards around Release of Information (ROI) and data security. Guests are informed of how their data is used, stored, and shared, and no data is entered without their consent, unless legally required.

Five Keys is also prepared to participate in real-time case conferencing and data-sharing via the SJCoC system, which supports timely and accurate referrals based on eligibility and acuity. Our housing staff are trained in using CES' and HMIS tools and we will establish partnerships with the local CoC and regional access point agencies in Lodi to ensure smooth integration and service delivery.

As part of our ongoing commitment to collaborative care, we are open to participating in local HMIS-related workgroups or data quality initiatives led by the CoC to support systemwide improvements and transparency, as we do in Los Angeles. We see this type of participation as critical not just for compliance, but for helping more unhoused individuals access the housing resources they need more quickly and equitably.

11. Coordinated Entry Participation

Describe how your organization engages with the local coordinated entry system to assess client needs and match them with available services.

Five Keys has deep experience working within Coordinated Entry Systems (CES) in each of our housing service areas. We work in alignment with the local Continuum of Care (CoC) and adhere to CES policies to ensure that clients' needs are assessed fairly and equitably, and that referrals to housing services are coordinated through shared systems and protocols.

Our team is fully trained in using CES tools for locally mandated assessments, depending on the jurisdiction. Tools such as the VI-SPDAT help us evaluate acuity, determine client eligibility, and match individuals to the most appropriate and available services. In San Francisco, for instance, we regularly coordinate with CES to bring assessors on-site to meet with high-acuity guests who are unable to travel to a formal access point. In Los Angeles, Vallejo, and Alameda, our intake staff are trained to conduct CES assessments directly and enter clients into the system. We coordinate closely with local HMIS administrators to ensure assessments are entered accurately and consistently, to each region's local standards.

Five Keys is experienced in conducting full and partial intakes on site, depending on the hour of entry. During non-business hours, we expedite entry and finish a full intake at the earliest opportunity. Five Keys maintains strong relationships with CES lead agencies and referral partners so that guests are properly queued for the most appropriate services and housing placements.

In Lodi, we will coordinate directly with San Joaquin County's CES system through 2-1-1 San Joaquin; and build referral and data-sharing relationships with designated local access points and other CES-participating agencies in the region. Our staff will ensure all new intakes are assessed and enrolled into CES, and we will collaborate with regional partners to keep real-time bed availability and guests' status updated.

We are committed to supporting the regional CoC's vision of equitable, coordinated access to housing and services. By integrating our housing-focused care coordination into CES workflows and supporting shared system goals, we help to ensure guests of the Access Center move efficiently through the system toward stable housing.

12. Accessibility and Inclusion

Describe how the proposed program will ensure accessibility for individuals with physical, mental, or developmental disabilities and those with other special needs.

Five Keys' person-centered, trauma-informed approach ensures that every guest—regardless of physical ability, mental health status, language proficiency, cognitive capacity, or other access challenges—can fully engage in and benefit from our program. Five Keys is committed to reducing barriers, promoting equity, and creating an inclusive, welcoming environment for all.

We operate in full compliance with the Americans with Disabilities Act (ADA), the Fair Housing Act, and all applicable state and federal civil rights laws. Accessibility is fundamental to our core philosophy. We make sure that accessibility features such as ramps, restrooms, and common areas remain ADA-compliant. We proactively address barriers that may not be visible, including sensory sensitivities, trauma histories, and behavioral health needs. Staff receive training in implicit bias, LGBTQ+ inclusion, and anti-discrimination practices.

Our staff training includes working with individuals with disabilities, people experiencing mental health challenges, and people from historically marginalized communities. Intake and service delivery are adapted to individuals' needs. For example, we offer quiet spaces and modified intake for guests with cognitive impairments or in crisis. We use plain language and alternative communication tools for those with low literacy or developmental disabilities, and we provide interpretation services and translated materials to ensure that language is never a barrier.

ISPs account for mobility, behavioral health, or other adaptations to advance each individual's progress toward housing stability in a way that feels manageable and empowering. Service animals are accommodated under ADA guidelines and policies for companion pets recognize the importance of animals to guests' emotional wellbeing.

Transportation is available for guests who need help getting to key appointments, whether for medical care, behavioral health services, court appearances, benefits enrollment, or housing navigation. Our team coordinates logistics as part of our commitment to ensuring access to wraparound supports.

Five Keys prioritizes respectful and affirming engagement so every guest can feel safe, seen, and respected. In short, we meet people where they are. Whether a guest is navigating physical disability, behavioral health challenges, trauma, or systemic barriers, our goal is to remove obstacles so every person has a clear path forward to housing.

13. Outreach to Unsheltered Individuals

Share your plan to proactively reach out to Lodi's unsheltered population and encourage their voluntary transition to the Access Center.

Five Keys will lead a coordinated, compassionate outreach strategy to engage Lodi's unsheltered residents and support their voluntary transition into the Access Center. Our approach centers on relationship-building, dignity, and immediate connection to services that reduce harm and promote stability. Staff with lived experience play a pivotal role in successful outreach engagement.

Street-Level Engagement: Trained outreach staff will conduct regular visits to encampments, sidewalks, vehicles, and other locations where unsheltered individuals are known to reside. These teams will provide clear information about the services offered at the Access Center, emphasizing that participation is voluntary and low-barrier. Outreach will be conducted in coordination with local partners.

Warm Handoffs and Mobile Intakes: Outreach workers will offer same-day transportation to the Access Center and provide warm handoffs to care coordinators and shelter staff. For individuals not ready to enter immediately, we will offer resource kits (e.g., hygiene supplies, water, food) and continue follow-up contact to build trust over time. Mobile intakes and pre-registration will be available in the field to reduce delays once a guest is ready.

Trauma-Informed Approach: All engagement will be trauma-informed and culturally responsive. Staff are trained to approach individuals respectfully, avoid coercion, and identify signs of medical or behavioral health needs that may require urgent attention. Outreach is designed to meet people where they are—physically and emotionally—and support them in taking the next steps toward shelter and housing.

Local Collaboration: Outreach will be conducted in coordination with local partners, including San Joaquin County behavioral health teams. We will align efforts with the City of Lodi, San Joaquin County's Coordinated Entry System, and local service networks to avoid duplication, coordinate access points, and ensure streamlined referrals. Through consistent presence, transparent communication, and effective follow-up, Five Keys will serve as a trusted on-ramp to stabilization for those living unsheltered in Lodi.

14. Community Engagement and Good Neighbor Plan

Provide a detailed "Good Neighbor Plan" that includes:

- Communication with residents, businesses, and community groups
- Public education and outreach
- Security and property management
- Responsiveness to neighborhood concerns
- Strategies to minimize community impact

Five Keys is committed to being a respectful, responsive, and engaged neighbor. Our attached Good Neighbor Plan (***See Exhibit #11**) reflects Five Keys' long-standing values around dignity, safety, transparency, and collaboration with community stakeholders. San Francisco HSH adopted our version of the plan for use by all of its site operators.

Communication: Five Keys' designated site representative will attend neighborhood meetings, community events, and City-led briefings. We will maintain an open line of communication with area residents and business owners through a 24/7 dedicated hotline—answered by an on-site supervisor with authority to respond promptly to questions, concerns, or emergencies. This 24/7 hotline ensures any neighborhood issue is acknowledged and addressed in real time. Five Keys also welcomes opportunities to offer site tours and listening sessions to promote familiarity with our services and staff.

Public Outreach: Five Keys will work with the City to ensure the public is aware of the services available at the Access Center. We will share how we increase cleanliness and safety in the neighborhood, while increasing understanding and reducing stigma. Our staff actively build rapport with neighbors and support efforts that humanize our guests, elevate the lived experience of staff, and foster shared responsibility for community wellness.

Security: Ambassadors provide visible, non-punitive oversight of the facility's perimeter, helping to prevent loitering, ensuring guest safety, and promoting a welcoming environment. Ambassadors conduct regular cleanups, sidewalk checks, and coordinate with city sanitation or pest control services as needed. We maintain clear entry and exit areas and monitor flows to avoid disruption. Driveways and public walkways will remain accessible at all times. Quiet hours are enforced each evening through morning, and we promptly address any excessive noise or behavior concerns.

Responsiveness: Community members are provided a hotline that is monitored 24/7. Concerns are tracked and documented and elevated to site leadership when necessary. Follow-ups with community members are handled with urgency and transparency. We also provide opportunities for guests, staff, and community partners to come together to share suggestions that help us refine operations to uphold community values.

Minimizing Impact: Five Keys' staff consistently monitor outdoor areas to ensure public spaces remain clean and unblocked. The co-location model of the Access Center supports convenient hand-offs and efficient service delivery, reducing the amount of service-related traffic to and from the site. Guests are engaged in on-site activities to reduce the time spent idle or offsite. Guests with pets are required to comply with our pet policy to prevent disturbances.

Five Keys has gained a positive reputation, where neighbors who initially expressed objections or skepticism have experienced the positive impacts of our work and become our most enthusiastic supporters of our shelter sites.

15. Security Policies and Procedures

Describe your proposed security plan, including policies related to:

- Secured entry/exit points
- On-site security personnel
- Loitering deterrence
- Conflict de-escalation
- Client property storage
- Handling of weapons or contraband
- Coordination with law enforcement
- Overflow bed management

Five Keys will implement a trauma-informed security plan for the Lodi Access Center.

Entry/Exit Points: Ambassadors will check in guests, verify identities, and screen for prohibited items. The Access Center's entrance will be staffed 24/7 by Five Keys' ambassadors when not otherwise covered by the Center's overall security staff.

Security: Each shift will include Five Keys' ambassadors trained in trauma-informed care, de-escalation, and nonviolent crisis intervention. Ambassadors combine traditional safety duties with a supportive and communicative presence as they conduct rounds, monitor security cameras, and maintain a visible but non-threatening presence in common areas such as the dining hall, multipurpose room, and exterior courtyards.

Loitering Deterrence: To prevent disruption near the facility, loitering will not be permitted in front of or around the site. Ambassadors will conduct frequent exterior patrols and redirect lingering individuals toward appropriate services. Five Keys' Good Neighbor Policy promotes a coordinated response, keeping sidewalks and entrances clear and ensuring guest flow does not disrupt neighbors or co-located services.

Conflict De-escalation: All Five Keys' housing staff are trained in de-escalation, trauma-informed engagement, and Narcan administration. Incidents of conflict are addressed immediately, using nonviolent intervention strategies. Staff document all incidents and follow Five Keys' incident reporting protocol. Law enforcement is contacted only when safety cannot be maintained through internal intervention.

Property Storage: Guests will be provided individual lockers in the dorm area. Overflow storage will be available for larger items (e.g. suitcases or mobility equipment) in a designated area monitored by staff. Property left behind after discharge will be held for 14 days, then discarded in accordance with posted policy.

Contraband: Weapons, alcohol, and illicit drugs are strictly prohibited. Guests' belongings are subject to visual screening and hot-box sanitization. Prohibited items are confiscated, documented, and stored securely or discarded, per protocol. Guests found with contraband after admission may face progressive discipline or exit from the program, depending on the violation.

Coordination with Law Enforcement: Five Keys maintains strong relationships with local police and emergency services. While the goal is to manage security internally whenever possible, local law enforcement will be contacted in accordance with escalation protocols when safety threats arise. Supervisors maintain a direct line of communication with law enforcement liaisons for routine updates and urgent coordination.

Overflow Management: When the Access Center reaches capacity, staff will notify the CES to activate overflow protocols. Five Keys will attempt to place guests at alternative shelters or safe overnight locations. No guest will be turned away without being offered a next-step option, and all overflow activity will be logged and reported to the City.

This comprehensive security plan balances structure and empathy to ensure the Lodi Access Center is safe, calm, and accessible to those seeking shelter and support, while being respectful of the needs and concerns of the surrounding community.

16. Health and Safety Policies

Describe your proposed policies related to client health and safety, including:

- Prescription medication handling
- Use of over-the-counter medications
- Infection control protocols
- HIPAA compliance and client confidentiality

Five Keys' health policies are rooted in trauma-informed care, harm reduction principles, and public health best practices. Although we currently opt to not provide medical or recuperative services on-site, we will coordinate timely referrals to ensure guests have access to care. While we focus on delivering core housing services for the City, we remain open to expanding the scope of on-site work to leverage CalAIM reimbursements in the future.

Controlled Substances: Possession of illegal drugs, alcohol, or unprescribed controlled substances is prohibited on site. Guests are oriented to these rules at intake, and violations are addressed through progressive discipline, which includes safety interventions and potential discharge.

Prescriptions: Guests may retain their prescribed medications. For those who require support, our staff can safely store medications to ensure they are not misused, but we will not administer or monitor dosages. For concerns regarding medication adherence or side effects, guests will be referred to local health providers.

Over-the-Counter: Guests may retain OTC medications such as pain relievers or allergy medications, provided they do not pose safety risks. Items with higher misuse potential (e.g. sleep aids, cough suppressants) may be stored by staff, upon review. Guests are supported with referrals to healthcare providers to address concerns or questions.

Access to Medical Care: Our staff will support guests in accessing medical, dental, and behavioral health services through coordination with local providers, including, but not limited to Adventist Health, Community Medical Centers, and San Joaquin County Behavioral Health. Care Coordinators will assist guests with transportation planning, appointment scheduling, and benefits enrollment. In the event of a medical emergency, staff will contact 911 and remain with the guest until EMTs arrive.

First Aid / Emergency Response: Fully stocked first aid kits are kept in staff areas and checked monthly. Designated staff are trained in basic first aid, CPR, and administration of Naloxone (Narcan) for opioid overdoses. Emergency protocols such as medical response, shelter-in-place, and evacuation are posted and included in staff training.

Disease Prevention: Five Keys follows CDC and California DPH guidelines. Staff and guests are educated about hygiene and respiratory etiquette. Staff regularly clean and disinfect high-touch surfaces and shared spaces. We provide hand sanitizer, masks, and cleaning supplies. If a guest presents symptoms of a communicable disease, we coordinate with public health officials and quarter off space for temporary isolation and medical referral.

HIPAA: All health-related guest information is handled in compliance with HIPAA. Records are secured in locked files or encrypted digital platforms and are accessible only to authorized personnel. Information is never shared without written consent, unless required by law.

COVID-19: While no longer subject to emergency declarations, we remain vigilant and responsive to public health guidance. Our team will follow recommendations from County Public Health and may implement temporary safety measures to minimize transmission risk, if outbreaks or exposures occur.

Five Keys' health policies ensure that guests at the Lodi Access Center are protected, supported, and connected to appropriate medical and behavioral health services.

17. Facility Maintenance Plan

Explain how your organization will maintain a clean, safe, and sanitary facility environment on a daily basis.

Five Keys will maintain a clean, safe, and sanitary environment at the Lodi Access Center through a multi-layered approach that includes ambassadors, janitorial staff, and maintenance technicians, as well as all frontline staff who elevate community pride to create a welcoming space for all.

We have budgeted 2 janitorial staff who clean communal areas, bathrooms, kitchens, offices, and sleeping dorm spaces with regularly scheduled rounds, multiple times per day, with an extra focus on restrooms and high-touch surfaces. The kitchen is shut down for cleaning twice daily.

Ambassadors continually monitor the dorm area 7-days-a-week to encourage guests to keep their areas free of clutter, stacked items, or dangling cords. Ambassadors look for damage to furnishings and graffiti on surfaces that need to be mitigated promptly. No food is permitted in the dorm area to prevent infestations of pests. All belongings and donated goods are treated in a hot box before coming into the building, to avoid bug beds.

Property Repairs: Five Keys ensure facilities are clean, safe, and ADA compliant. Staff will conduct routine inspections and alert the City if systems need servicing. More complex repairs will be addressed swiftly by coordinating with the City and their licensed contractors. When repairs are underway, Five Keys will post signage and take measures to minimize disruption to guests.

Unit Turnover and Safety Checks: As guests exit, ambassadors inspect the bed area, addressing any unsafe or unsanitary conditions. The Site Manager and City's Maintenance Technician will be alerted of conditions outside the norm. Our rapid turnover protocol prioritizes immediate readiness of bed spaces to reduce vacancy time and ensure swift access for new referrals.

Ambassador Engagement: Our staffing model reflects the specific needs for each site, based on the layout and hours of services. Ambassadors serve as trusted stewards of the site, keeping an eye out for disruptions, damage, or safety issues, while tidying areas and restocking frequently needed supplies to ensure a consistently welcoming environment.

18. Transportation Plan

Describe your proposed transportation-related policies and procedures, including:

- Client transportation to/from the Access Center facility
- Transportation of new clients and their belongings
- Response to emergency transport needs initiated by Police or City staff
- Receiving donations and deliveries

Five Keys coordinates transportation to respond to guests' needs, while minimizing disruption in the neighborhood.

Client Transportation: Transportation of guests will use a mix of bus passes, rideshare vouchers (Lyft/Uber), and local cab services. Staff will assess transportation needs as part of the intake process and help guests navigate to and from key services, including medical appointments, housing interviews, public benefits offices, and job readiness activities. ADA-accessible options will be available for individuals with disabilities or mobility challenges. Transportation assistance will also be provided for planned discharges or transitions to the shelter, housing, or treatment programs.

New Clients' Belongings: For guests referred by outreach teams, law enforcement, hospital discharges, or other systems, Five Keys' staff will ensure guests arrive safely with their personal belongings. Ambassadors assist in receiving guests' items with a hot-box and storing items in the dorm or in overflow storage.

Emergency Transport: In the event that Lodi Police, outreach staff, or city partners identify an unsheltered individual as needing immediate placement, Five Keys will respond quickly to assess capacity and coordinate logistics for arrival. A supervisor-level contact will be available 24/7 to support prioritization efforts. For medical emergencies, 911 protocols will be followed.

Donations and Deliveries: Deliveries will be scheduled during designated hours to minimize disruption of neighbors. Five Keys' team based in Stockton will pick up deliveries of donations, which will be hot-box, sanitized and logged into an inventory system that considers shelf life, usage frequency, and hygiene.

All staff and drivers involved in guest transport or delivery logistics will be trained in safety protocols, and all vehicles will be appropriately insured, maintained, and ADA-compliant where required.

19. Nondiscrimination and Equity Policies

Detail your organization's policies for:

- Compliance with all applicable federal and state civil rights laws
- Adherence to the Americans with Disabilities Act (ADA)
- Prevention of sexual harassment
- Policy on identifying alternative resources for individuals not eligible for onsite services (registered sex offenders, disqualified due to behaviors, etc.)

Applicable laws: Five Keys maintains strict adherence to all applicable federal, state, and local civil rights laws, including Title VI and VII of the Civil Rights Act, the Fair Employment and Housing Act, and related nondiscrimination statutes. Our policies explicitly prohibit discrimination, harassment, or retaliation based on race, ethnicity, religion, sex, gender identity or expression, sexual orientation, disability, age, national origin, citizenship status, language, or any other protected characteristic. Our policies are reinforced during onboarding, training, and posted notices.

Americans with Disabilities Act (ADA): All of Five Keys' housing facilities meet ADA accessibility standards, with accommodations in restrooms, sleeping areas, showers, pathways, etc. We are aware that guests may not exhibit physical, sensory, cognitive, or mental health disabilities but still need assistance. We provide multi-sensory and large-print signage and reasonable accommodations on request. Emergency and safety plans specify ADA assistance responses. Our staff proactively accommodate needs with care and dignity.

Sexual Harassment: We enforce a zero-tolerance prevention policy. All employees, contractors, and volunteers receive mandatory onboarding and ongoing annual training in trauma-informed practices, sexual harassment prevention, and mandated reporting requirements. Complaints are investigated confidentially and promptly, and corrective action, including removal from site, is taken to ensure guest and staff safety.

Disqualified Individuals: Five Keys understands that certain individuals may be ineligible for placement at Lodi's Interim Housing Center due to legal restrictions (e.g., active restraining orders) or repeated behaviors that endanger community safety. We work with service providers to identify safe, lawful alternatives for individuals not eligible for onsite housing. Our team has experience coordinating referrals to address complex behavioral health needs, high-acuity conditions, or legal supervision requirements. Exclusions will be documented in Salesforce and communicated to the CES system to ensure that all guests receive requisite attention and alternative care.

20. Pet and Service Animal Accommodation

Describe your proposed policies for allowing and managing pets and service animals on-site.

Five Keys complies with ADA Title II and III requirements for service animals. Guests with trained service dogs are permitted entry regardless of housing status or documentation. Staff are trained to ask only legally permissible questions and avoid requesting medical proof of disability. Service animals are allowed in all areas open to the public and must remain under their handler's control at all times. For non-service animals, we understand the emotional and psychological support pets provide. We maintain a pet-inclusive approach when facilities and local policies support this, including: allowance of up to two pets per guest household (e.g. dogs, cats, rabbits); documentation about the pet (photos, behavioral checklist); expectations for control, supervision, vaccination, hygiene, and waste management; and collaboration with local service organizations to support access to food, crates, veterinary care, and licensing.

In Lodi, we will assess the appropriateness of pet sheltering in collaboration with City partners and adjust policies accordingly to ensure the safety and wellbeing of all guests and staff. Our goal is to reduce barriers to shelter access while maintaining a safe communal environment.

21. Grievance and Complaint Procedures

Outline your policies for receiving, reviewing, and resolving client grievances and complaints. Include your whistleblower policy.

Five Keys is committed to maintaining a safe, respectful, and transparent environment for all guests and staff. Our Guest Grievance Policy outlines a trauma-informed, confidential, and accessible process that empowers guests to express concerns, resolve issues, and contribute to the continual improvement of our services and shelter environment.

Procedures include:

Clear Communication: Grievance procedures are reviewed with each guest during intake and posted visibly throughout the facility. Policies are available in English and Spanish, and hard copies are kept at the front desk. Staff assist guests in filing a grievance, if support is needed.

Filing Process: Guests may submit grievances verbally or in writing. A supervisor will respond within two days to meet with the guest, listen to the concern, and work toward resolution. If unresolved, a formal written response or action plan will be provided within five business days.

Escalation: If the concern is not resolved at the supervisor level, the grievance is escalated to the Site Director, who will convene a meeting or investigation to resolve the issue. A final response is issued within five 5 business days of that review.

Confidentiality: All grievances are handled confidentially and shared only on a need-to-know basis. Five Keys strictly prohibits retaliation, and any retaliatory actions are subject to immediate disciplinary action.

Facilitated Resolution: When appropriate, facilitated meetings between guests and staff are arranged to address grievances in a supportive and constructive environment. These often help realign expectations and promote collaborative solutions.

Whistleblower Protection: Five Keys upholds a comprehensive Whistleblower Policy that enables staff, guests, and community members to safely report unethical, illegal, or unsafe behavior—including fraud, abuse, or policy violations—without fear of retaliation. Reports can be made anonymously. All complaints are investigated thoroughly and promptly; Whistleblowers are protected by internal policy and applicable law; Retaliation is prohibited and grounds for disciplinary action up to and including termination.

Continuous Improvement: Grievance data are reviewed regularly by program leadership to identify systemic issues, improve services, and inform staff training and accountability. This approach aligns with our broader values of dignity, accountability, and equity—ensuring that every guest concern is heard and addressed in a timely and respectful manner..

Policy procedures are attached as ***See Exhibit #9**

22. Incident Reporting and Documentation Policy

Outline your system for reporting, documenting, and following up on client and staff incidents (e.g., injuries, altercations, overdoses, critical behavioral health events).

Five Keys has a standardized incident reporting system to ensure the safety, accountability, and well-being of all guests, staff, and partners. Our procedures emphasize the importance of timely and efficient communication and documentation to adhere to local and state regulatory requirements.

Reporting: Incidents involving injury, altercations, overdoses, behavioral health crises, or threats to safety are reported immediately to a supervisor or site lead. Staff are trained to recognize incidents that require urgent escalation (medical emergencies, violence, or weapons possession) versus those that require internal documentation and follow-up (guest grievances, non-urgent behavioral issues). Incidents may be identified directly by staff, guest disclosure, by on-site partner providers, or via security system alerts (including cameras and Ambassador monitoring). *See **Exhibit #10**.

When emergencies occur, staff follow Five Keys' escalation protocol:

Level 1: Non-urgent concerns handled by frontline staff with supervisory review.

Level 2: Moderate incidents requiring site-level response and incident report.

Level 3: Critical incidents requiring immediate intervention, external response (e.g., EMS, law enforcement), and real-time notification to regional leadership via Five Keys' Emergency Communication Tree.

Law enforcement or emergency services are contacted when there is risk to life or serious injury, in accordance with pre-established site-specific protocol.

Documentation: Every incident is documented in Five Keys' centralized system within 24 hours of occurrence. Reports include: Date, time, and location; Individuals involved; Type and severity of incident; Immediate response actions taken; Names of staff witnesses or responders; and Follow-up actions or required next steps.

Reports are reviewed by the Site Director and elevated to regional leadership when appropriate. Patterns or repeated concerns are flagged for case conferencing and performance review. Five Keys uses Salesforce and HMIS to track participant-level outcomes and may log incident data if tied to services or guest care plans. All documentation complies with HIPAA standards and access is restricted to authorized personnel.

Follow-Up and Resolution: Within 72 hours of a documented incident, the Site Director or designee ensures that any required medical or mental health follow-up has been provided or referred; staff involved are debriefed and have on-site access to support, as needed; safety plans are updated for affected guests; and policy violations are addressed.

Significant or repeated incidents are reviewed in monthly risk management meetings and the lessons learned inform staff training, safety protocol updates, and system improvements. We check in on our staff to ensure sufficient and readily accessible support is available for whomever has been directly or indirectly impacted by trauma or triggering incidents.

Training and Accountability: All staff (including Ambassadors, Care Coordinators, and janitorial teams) receive incident reporting training during onboarding and annual refreshers. Training includes: de-escalation techniques; confidential documentation; when and how to involve police, fire, or medical responders; use of Narcan and trauma response; and mandated reporting guidelines for elder/dependent abuse or child endangerment. Practice exercises and drills are used to increase staff preparedness and promote calm and thoughtful responses. More information is found in ***See Exhibit #4.**

23. Emergency Preparedness and Response Plan

Describe your protocols for handling facility emergencies including:

- Medical emergencies
- Fire evacuation procedures
- Staff training on emergency drills

Five Keys will customize a comprehensive Emergency Preparedness and Response Plan to ensure the safety of guests, staff, and partners at the Lodi Access Center. Our protocols are adapted to fit the Lodi site context and staffing model.

Medical Emergencies: Staff are trained in CPR, first aid, and Naloxone (Narcan) administration. In the event of a medical emergency: Immediate care is administered by trained staff; 911 is called as needed following emergency protocol; The supervisor ensures the individual is stable and manages the area for guest and staff safety; and an incident report is filed within 24 hours and reviewed by leadership. Supervisors maintain updated emergency contacts and health-related protocols onsite, ensuring staff can respond quickly and effectively. Emergency kits, including AEDs and trauma supplies, are stocked and inspected regularly.

Fire Evacuation Procedures: Fire safety procedures include: Clearly marked emergency exits and evacuation routes throughout the building; Posted evacuation maps in common areas; Regular inspection of fire extinguishers and smoke alarms; Designated gathering zones outside the facility for roll call; Special attention given to guests in need of individual support; Supervisor-led drills conducted at least twice annually. Staff follow posted evacuation checklists and perform real-time guidance of guests to exits. Emergency lighting and accessible egress for mobility-impaired guests are part of the facility design.

Staff Training and Emergency Drills: All staff, including Ambassadors, Shift Supervisors, and Care Coordinators, receive training on: Emergency protocols during onboarding and through annual refreshers; De-escalation, trauma-informed care, and emergency mental health interventions; Specific roles and responsibilities in fire, medical, and behavioral emergencies; and Communication chains, including when to notify the City of Lodi or emergency services. Emergency drills are conducted semi-annually to test readiness. After-action reviews are conducted to assess response time, coordination, and adherence to protocols. Beyond training, Five Keys staff—most of whom have had traumatic lived experiences in their past—are known for their calm and clarity during emergencies. Five Keys' ambassador model ensures trained professionals are always on-site to respond immediately and maintain order. Emergency response roles are embedded into shift protocols, and supervisors are equipped to lead under pressure. These procedures ensure the Lodi Access Center operates as a safe, calm, and resilient facility—ready to respond effectively to any crisis.

24. Staff Training and Development

Detail required staff training (e.g., trauma-informed care, de-escalation, cultural competency, CPR/First Aid, confidentiality). Include any ongoing professional development or certification requirements.

Five Keys' list of trainings for housing staff is attached as ***See Exhibit #4**, including:

Behavioral Health / Harm Reduction Training:

- Motivational Interviewing: All staff are trained in this evidence-based approach to encourage guest engagement and goal-setting. Advanced sessions are required for care coordinators.
- Trauma-Informed Care (101 & 102): All staff receive foundational and advanced training on trauma responses, reducing re-traumatization, and creating healing-centered environments.
- Harm Reduction / Overdose Response: Trainings include overdose education, Narcan administration, and how to support guests who are using substances without judgment; and biohazard and sharps disposal.
- Mental Health & Substance Use 101: Care Coordinators attend training on mental health disorders, co-occurring conditions, and how to navigate behavioral health systems.
- Mental Health First Aid: For all team members to recognize and respond to crises effectively and compassionately.

Crisis Intervention

- De-escalation Techniques: Required annually for all staff, this training covers communication strategies, boundary setting, and conflict resolution in congregate and drop-in settings.
- Crisis Response/Safety Protocols: Shelter teams rehearse emergency procedures regularly and are trained in situational awareness, emergency medical interventions, and fire-watch patrols.

Compliance Training

- Professional Standards: Annual training includes workplace ethics, shelter conduct, dress code, and customer service expectations.
- Policies & Procedures: All staff are trained on Five Keys' protocols, including emergency response, grievance procedures, pet/service animal policies, visitor protocols, and Good Neighbor commitments.
- OSHA, Safe Food Handling, Infection Control: Janitorial and Ambassador staff complete OSHA 10 and hygiene trainings. Staff responsible for food service receive training in safe handling, while all staff receive instruction in sanitation protocols, disease transmission, and emergency health procedures.
- HMIS: Care coordinators and supervisors learn HMIS data entry for intakes, service notes, document uploads, and exits, in compliance with HUD and local CoC requirements.

Cultural Responsiveness/Equity

- Cultural & Gender Awareness: Trainings address anti-oppression, implicit bias, LGBTQ+ inclusion, and sensitivity to specific needs of transgender guests, non-English speakers, and individuals with disabilities.
- ADA Accommodations: Supervisors and directors are trained to identify when accommodations are needed and how to implement them in compliance.
- Denials of Service: Directors and shift leads receive training on how service limitations or discharges can occur while protecting guest rights.

Staff Retention

- Restorative Justice Circles: All staff are invited to biweekly sessions led by senior leadership to process stress, resolve conflict, and build team cohesion.
- "Good Soil" Leadership Training: Voluntary 6-month cohort for emerging leaders on communication, emotional intelligence, and team building
- Self-Care: Staff access wellness challenges, grief counseling, and on-demand trauma support to prevent burnout and promote retention in high-stress roles.

Targeted Training

- Case Management: Care Coordinator managers are trained in a 3-tiered system (Case Management 1, 2, and Care Coordination 3) based on tenure.
- Activities Coordination: Enrichment programs support group facilitation, peer support, and responding to diverse guest interests and identities.
- Janitorial and Maintenance: Site-specific protocols on sanitation, hazard disposal, and universal precautions to maintain ADA-compliant, safe environments.

25. Internal Monitoring and Quality Assurance

Explain how your organization monitors service delivery quality, ensures compliance with regulations and funder requirements, and uses data to drive performance improvement.

Five Keys has a dedicated Quality Assurance Director to monitor our compliance with contractual requirements across all housing programs and operations. We invest in staff training and professional development; data system upgrades, and feedback instruments to continually learn from stakeholders across our housing ecosystem. We have high expectations of staff regarding data integrity, fidelity to program standards, and transparency in communications. We cultivate safety and trust so that staff share their direct experiences with confidence that Five Keys values their insights so we can continually learn, improve, and achieve better outcomes in all aspects of services, staffing, data, and site operations.

Our internal data platform (Salesforce) allows us to track every aspect of engagement, outreach, intakes and exits, guest service plans, partner referrals, barrier removal, and resulting outcomes. We are able to disaggregate client data to analyze our efforts and guide future resource allocation, policy adjustments, and program improvements.

Daily Oversight: Each site has a designated Site Director, Shift Supervisors, and Ambassadors who conduct daily walkthroughs, monitor services, and ensure all safety, cleanliness, and behavioral standards are upheld. Supervisors hold daily shift debriefs and confirm completion of core tasks (bed logs, meal distributions, supply checks, etc.). Incident reports and unusual occurrences are logged and reviewed by management within 24 hours. Data related to intakes, exits, outreach, engagement, and referrals is entered into HMIS and Salesforce within 24 hours, and reviewed weekly by leadership.

Weekly Reviews and Service Audits: Data is regularly analyzed to identify successes and areas for improvement. Ambassadors, Care Coordinators, and Supervisors work together at weekly meetings to focus on care coordination, barriers to housing, and guest progress.

Quarterly Compliance Checks: The Quality Assurance Director looks at targeted vs actual outcomes: alignment with contractual service levels; data entry (timeliness, accuracy, completeness); incident management; health and safety protocols; staff training; and facilities maintenance standards. Walkthrough checklists and file audits are shared with supervisors and tracked to resolution. Coaching and retraining are provided as needed.

Improvement Loops: Feedback is collected through guest surveys (twice yearly); anonymous comment cards; and through scheduled and impromptu check-ins. Guest feedback is gathered about quality of services, sense of safety, and facility amenities. What we learn informs training priorities that reinforce our guest-centered approach.

Metrics and Reporting: Leadership analyzes key performance indicators (KPIs) including: Bed utilization and turnover; Average length of stay; Transition to housing; Service engagement rates; Critical incidents' resolution timelines; and more. Reports are shared with appropriate partners and stakeholders. We also conduct after-action reviews and debriefings after serious incidents to determine if staff need support, and to share learnings and refine protocols across all sites.

Ongoing Training: Policies and Procedures are formally reviewed and updated by leadership annually and throughout the year. Staff complete initial onboarding, update trainings, and regular guidance on compliance with data security protocols. Trainings are tracked in Paycom and reminders are made during supervisory reviews and audits. This structured, multilayered approach ensures that Five Keys maintains compliance, transparency, and data security across all levels of the organization.

26. Confidentiality, Client Records, and Data Security

Describe your policies and practices for maintaining and safeguarding client records, ensuring HIPAA and HMIS compliance, managing data sharing with partners, and responding to potential breaches.

Five Keys places the highest priority on protecting confidentiality and safeguarding all personal, medical, and identifying information in full compliance with HIPAA, HMIS, and local, state, and federal regulations. Our policies and protocols are reviewed and updated regularly to align with the most current best practices and we ensure that all staff are trained accordingly.

Client Record Management: All guest data is recorded in secure systems that protect against unauthorized access or disclosure. Depending on the program area, data is entered into HMIS (Homeless Management Information System), per HUD and San Joaquin County requirements; and Salesforce, Five Keys' internal CRM for cross-site case coordination and outcomes tracking. Physical paperwork is stored in locked cabinets in restricted-access areas. Digital records are protected with multi-level access controls, and only authorized staff may view or edit sensitive data. Access levels are assigned based on role and function, and all logins are time-stamped and audit-tracked.

HIPAA and HMIS Compliance: Staff receive annual training on HIPAA and HMIS data entry protocols, consent requirements, and how to handle sensitive disclosures (e.g., HIV status, behavioral health needs). Attendance at trainings is logged and refresher sessions are scheduled whenever there are updates to regulatory policy. Information about medical, mental health, or substance use is not disclosed without explicit written authorization unless legally mandated. Guests are informed of their rights to view, amend, or revoke consent for their records at any time.

Data Sharing: When collaborating with partner agencies, Five Keys ensures that only the minimum necessary information is shared, in alignment with guest consent agreements. Signed ROI forms are obtained during intakes to document these limited permissions. Cross-agency communication involving personal data is handled through encrypted email, secure portals, or in-person conversation with proper release of information in place.

Data Breaches: Five Keys maintains a Data Breach Protocol that includes: Immediate notification of Five Keys' Privacy Officer and Executive Leadership; Investigation and containment of the breach (e.g., disabling user access, recovering lost files); Notification of affected individuals in accordance with HIPAA and state data breach laws; Corrective action plans and additional staff training to prevent recurrence; and Incident logging and root cause analysis to report to oversight bodies as required. All suspected or confirmed breaches are documented and follow-up actions are reviewed during monthly quality assurance meetings.

Health Information Compliance: Policies related to the collection and handling of health-related information are aligned with CDC, CDPH, and San Joaquin County Public Health guidance and protocols. Regional COVID-19 protocols (optional masking, symptom screening, isolation procedures) are reviewed and adapted as necessary.

Transparency and Accountability: Five Keys' commitment to data security is part of our broader accountability to clients, funders, and the community. We conduct internal audits, participate in funder-led monitoring visits, and uphold clear grievance processes so guests may voice concerns without retaliation. By embedding confidentiality and security into every layer of operations from intake to exits, Five Keys ensures that guests feel safe, respected, and in control of their personal information at all times.

27. City and County Partner Coordination

Describe how your organization will maintain communication and coordination with City staff and County Partners to support the successful operations of the Access Center.

Five Keys is committed to working in full partnership with the City of Lodi, San Joaquin County agencies, and community stakeholders to ensure the Access Center meets the City's objectives and operates as a collaborative, coordinated, and accountable resource for residents experiencing homelessness.

We will designate a Site Director responsible for direct coordination with the City's Homeless Services Manager and other designated staff. This role will serve as the primary point of contact for operational updates, problem-solving, and real-time response to emergent needs.

To ensure alignment and transparency, we will schedule regular standing meetings (biweekly or monthly) with City and County staff to review program performance, address barriers, and co-develop solutions.

Five Keys' collaborative philosophy is rooted in our experience developing relationships with a wide variety of agencies across 15 counties in California. We understand that local priorities vary and that ongoing communication, transparency, and flexibility are critical to maintaining a successful partnership. We will bring this institutional knowledge and respectful, responsive posture to our work in Lodi. To support broader system coordination: We will attend interagency coordination meetings, regional case conferencing, and partner briefings led by the City, County, or Continuum of Care (CoC); We will ensure data sharing and reporting to the City and County is timely, accurate, and aligned with contractual and policy requirements; and our team will be available for urgent coordination needs, such as law enforcement-assisted referrals and encampment resolutions. Extreme weather. covid/ responsive, will collaborate with city's leadership to be a good partner in the event of unexpected, extreme weather, special circumstances.

In all interactions, we will engage City and County stakeholders with respectful partnership and uphold high standards for responsiveness. We recognize the high visibility of this program and are committed to upholding the City's trust through excellence in service delivery and interagency collaboration.

28. Data Collection and Reporting

Explain the methods used to collect and track demographic and service data, including the software system(s) used for reporting.

Five Keys uses a secure, policy-driven approach to client data collection and reporting, combining real-time tracking with rigorous compliance. For the Lodi Access Center, we will utilize Salesforce Nonprofit Cloud for internal service delivery and care coordination management, and will coordinate with the San Joaquin Continuum of Care's designated HMIS platform to ensure alignment with local, state, and federal requirements.

Systems and Information: Salesforce serves as an encrypted, cloud-based repository for client data including: Demographics (age, race, gender, veteran status, etc.); Housing status and barriers; Education, income, and employment benchmarks; Case notes, assessments, and individualized service plans; and Consent forms, grievances, and critical incident documentation. In parallel, all required data elements will be entered into the CoC's HMIS in accordance with HUD standards. This dual-system approach enables program staff to manage client engagement holistically while ensuring funder reporting is consistent and timely.

Data Integrity and Monitoring: We maintain a layered quality control process: Frontline staff enter and update data in real-time; Care Coordinators and Supervisors conduct weekly data reviews; and Program Directors oversee monthly audits. Our central data team performs cross-platform validation, ensuring consistency between Salesforce and HMIS records. Automated workflows and dashboards in Salesforce alert staff to key milestones (e.g., re-assessments, case plan updates, exit interviews), helping ensure service continuity and data completeness.

Confidentiality and Security: All data is stored in SOC 2 Type II–certified platforms with strict access controls. Medical and mental health records are safeguarded in accordance with HIPAA, and all entries involving protected health information (PHI) are only accessible to authorized personnel. Staff are trained to: Access only data required for their role; Log out when leaving devices unattended; Use encrypted Five Keys-managed equipment; and Report any suspected breaches immediately. Sensitive data is transmitted using encrypted tools (e.g., Virtru) and not stored on personal devices. Our Data and Acceptable Use Policy governs employee access and sets consequences for misuse.

External Reporting and Partner Coordination: All external data sharing, including with the City of Lodi, San Joaquin County, and Coordinated Entry, is conducted with client consent, in alignment with CoC data sharing agreements. Reports are exported securely and customized to funder specifications. Any physical records are stored in locked cabinets or securely shredded when no longer required.

Continuous Improvement: Data is used to drive program refinement: Biannual guest satisfaction surveys inform service and facility adjustments; Disaggregated data reveals any gaps in access; and HR systems track staff training on data security.

Five Keys' commitment to data transparency, client confidentiality, and cross-agency coordination ensures that Five Keys will be compliant as well as responsive to evolving needs of the Lodi Access Center.

29. CalAIM Medical Respite Experience

If applicable, describe your organization's experience providing Medical Respite services under CalAIM, either directly or through a subcontractor relationship. In your response, please include:

- A summary of your Medical Respite program(s), including scope of services and target populations
- Whether services were provided directly or through a subcontractor
- The number of clients served annually and typical length of stay
- Coordination protocols with managed care plans (MCPs), hospitals, or referring entities
- Outcomes tracked and reported (e.g., discharge destinations, health stabilization, hospital readmission rates)
- Billing and reimbursement experience under CalAIM, including familiarity with Department of Health Care Services (DHCS) standards and reporting requirements
- How this experience would inform your organization's ability to implement Medical Respite services at the Access Center, if selected
- If your organization is not interested in operating any Medical Respite services as potential cost offset, please clearly state that in your response

At this time, Five Keys is not seeking to operate Medical Respite services or pursue bed reimbursement under CalAIM. Our focus for this application is on Lodi's core Access Center operations, outreach, and supportive services. That said, we recognize the sustainability potential of the CalAIM reimbursements and should Five Keys be selected as the operator in Lodi, we would continue to deepen partnerships with medical providers; advance CalAIM training for our staff; and strengthen our billing infrastructure for CalAIM-aligned Medical Respite services in the future.

VI. PROPOSED BUDGET

An excel version of the budget is provided in the attached thumb drive of the complete proposal.

BUDGET ASSUMPTIONS & EXPLANATIONS:

Five Keys based our proposed budget on the following assumptions:

We will be prepared to have the Lodi Access Center Emergency Housing site ramped up to full capacity **within the first two weeks of operation.**

In the event that the ramp up takes longer, due to the volume of referrals to the site, we have adjusted the budget to reflect that possibility.

Accounted for in the budget are separate line items for incumbent shift supervisors and housing ambassadors (highly experienced with years of service and therefore at higher salaries, compared to salaries of new hires from the local job market pool.)

Expense Clarifications (during ramp up period)	Details	Period
Care Coordinators	2.0 FTE	First 6 months
Janitors	1.4 FTE	First 6 months
Food	for 45 guests	First 3 months
Transportation	for 45 guests	First 3 months

Economies of Scale

As the Lodi Access Center increases occupancy, the budget benefits from significant economies of scale. Many operational expenses, such as security, on-site supervision, staff training, oversight, technology infrastructure and facility overhead remain relatively fixed, regardless of the number of guests served. As occupancy increases, these fixed costs are distributed across a greater number of beds, resulting in a substantially reduced per-bed cost.

For example, at an initial capacity of **60 beds**, the per-bed annual cost is approximately **\$40,597**. However, as additional **flex beds** are added, these shared costs are spread more efficiently, reducing the per-bed annual rate to **\$9,791** per additional bed at full capacity, based on the 5-year average cost. This scaling effect allows the City of Lodi to realize meaningful cost savings while maintaining consistent service quality and staffing coverage.

Cost Savings and Funding Offsets

Five Keys brings meaningful cost-efficiency through our regional infrastructure, integrated services, and leveraged partnerships, deploying a variety of cost-saving strategies. With housing programs statewide, we are able to scale operations without building a separate administrative structure. Our centralized HR, finance, data, compliance, and training allows for faster implementation.

We regularly secure contributions such as hygiene supplies, food, pet care items, and technology through our network of community partners and corporate outreach. As local opportunities emerge in Lodi, we will work with partners and volunteers to identify and procure supplemental supplies and quantify the value in our outcomes tracking metrics.

Our Stockton programs offer transitional employment opportunities for justice-involved individuals, job readiness resources, digital literacy, and life skills workshops. These assets may be extended to Lodi Access Center guests at no additional cost, depending on the City's priorities and individuals' needs. Our Stockton-based staff will also be leveraged to assist with donation pickups and deliveries to Lodi.

In addition, Five Keys frequently leverages our existing services in education, workforce development, reentry support, and behavioral health. For example, we can offer adult high school diplomas and GED completion remotely, as well as remote access to job readiness and career training certificate programs, supported by access at an on-site technology station.

While we leverage Five Keys' programs, we take care to not supplant local activities provided by service providers in Lodi.

FIVE KEYS 5-year budget proposed for LODI Access Center and Emergency Shelter Budget 11.03.25

Five Keys Schools and Programs p.2													
Office Supplies, Postage, and Administrative Expenses	Operating	General Admin Fee	\$ 7,500.00	1.00	\$ 1,875.00	\$ 5,625.00	\$ 7,725.00	\$ 7,956.75	\$ 8,195.45	\$ 8,441.32	\$ 39,818.52	Estimated cost of \$900-950/month	1:10 Ratio
Landscape Maintenance	In-Kind Donations	Zero Admin Fee	\$ 3,600.00	1.00	\$ 900.00	\$ 2,700.00	\$ 3,708.00	\$ 3,819.24	\$ 3,933.82	\$ 4,051.83	\$ 19,112.89		Fixed
Insurance	Operating	General Admin Fee	\$ 5,185.00	1.00	\$ 1,296.25	\$ 3,888.75	\$ 5,340.55	\$ 5,500.77	\$ 5,665.79	\$ 5,835.76	\$ 27,527.87	Required property, liability and additional coverage needed for site.	Fixed
Employee Training and Development	Operating	General Admin Fee	\$ 6,450.00	1.00	\$ 1,612.50	\$ 4,837.50	\$ 6,643.50	\$ 6,842.81	\$ 7,048.09	\$ 7,259.53	\$ 34,243.93	Based on annual expenditure data from comparable sites. Reflects typical costs for similar services. Training incl CPR/first-aid, Narcan, de-escalation techniques, etc.)	1:20 Ratio
Technology and Equipment	Operating	General Admin Fee	\$ 10,500.00	1.00	\$ 5,925.00	\$ 7,875.00	\$ 10,815.00	\$ 11,139.45	\$ 11,473.63	\$ 11,817.84	\$ 59,045.93	Est. \$1,100/mo: WiFi(\$600), Cable(\$300), Phone(\$200) Laptops,software, copiers, etc	Fixed
Janitorial and Laundry Supplies	Operating	General Admin Fee	\$ 8,400.00	1.00	\$ 2,100.00	\$ 6,300.00	\$ 8,652.00	\$ 8,911.56	\$ 9,178.91	\$ 9,454.27	\$ 44,596.74	Based on annual expenditure data from comparable sites. Reflects typical costs for similar services: Estimated at \$700/month	1:10 Ratio
Staff Supplies	Operating	General Admin Fee	\$ 8,325.00	1.00	\$ 2,081.25	\$ 6,243.75	\$ 8,574.75	\$ 8,831.99	\$ 9,096.95	\$ 9,369.86	\$ 44,198.56	Essential staff supplies (radios, uniforms, badges, PPE, flashlights, etc.)	1:20 Ratio
Neighborhood Clean-Up and Good Neighbor Engagement Supplies	Operating	General Admin Fee	\$ 12,000.00	1.00	\$ 3,000.00	\$ 9,000.00	\$ 12,360.00	\$ 12,730.80	\$ 13,112.72	\$ 13,506.11	\$ 63,709.63	Bags, tools, safety gear for engagement staff	Fixed
Outreach Expenses	Operating	General Admin Fee	\$ 7,200.00	1.00	\$ 1,800.00	\$ 5,400.00	\$ 7,416.00	\$ 7,638.48	\$ 7,867.63	\$ 8,103.66	\$ 38,225.78	Bus passes, hygiene kits, gloves, resource materials	Fixed
Food and Meal Expenses	Operating	General Admin Fee	\$ 6,205.00	60.00	\$ 69,806.25 [5]	\$ 279,225.00	\$ 383,469.00	\$ 394,973.07	\$ 406,822.26	\$ 419,026.93	\$ 1,953,322.51	3 meals per day for guests (on-site commercial kitchen). Estimated at \$7/meal	1:1 Ratio
Guest Supplies	Operating	General Admin Fee	\$ 42,450.00	1.00	\$ 10,612.50	\$ 31,837.50	\$ 43,723.50	\$ 45,035.21	\$ 46,386.26	\$ 47,777.85	\$ 225,372.82	Based on annual expense data from comparable sites. Reflects typical costs. Covers supplies for guests (hygiene, clothing, activities, etc.) Est. \$7125/mo	1:10 Ratio
Laundry Machine Repair &Service	Operating	General Admin Fee	\$ 3,600.00	1.00	\$ 900.00	\$ 2,700.00	\$ 3,708.00	\$ 3,819.24	\$ 3,933.82	\$ 4,051.83	\$ 19,112.89	Laundry equipment rental and/or service Estimated at \$1000/month	1:10 Ratio
Transportation Costs	Operating	General Admin Fee	\$ 600.00	60.00	\$ 6,750.00 [6]	\$ 27,000.00	\$ 37,080.00	\$ 38,192.40	\$ 39,338.17	\$ 40,518.32	\$ 188,878.89	Estimated at \$50/month per guest	1:1 Ratio
Cost Savings													
In-kind donations (e.g., food)	In-Kind Donations	Zero Admin Fee	\$24,000.00	1.00	\$ 6,000.00	\$ 18,000.00	\$ 18,000.00	\$ 18,000.00	\$ 18,000.00	\$ 18,000.00	\$ 96,000.00	food donations, snacks, meals, food bank	Fixed
In-kind donations (e.g., guest supplies, equipment)	In-Kind Donations	Zero Admin Fee	\$108,000.00	1.00	\$ 27,000.00	\$ 81,000.00	\$ 108,000.00	\$ 108,000.00	\$ 108,000.00	\$ 108,000.00	\$ 540,000.00	hygiene, cosmetics, clothes,	
Volunteer labor (estimates FTE, even if no cost is incurred)	In-Kind Donations	Zero Admin Fee	\$52,000.00	2.00	\$ 26,000.00	\$ 78,000.00	\$ 104,000.00	\$ 104,000.00	\$ 104,000.00	\$ 104,000.00	\$ 520,000.00	groups, activities, landscaping, book club, N/A, AA meetings	Fixed
Community partnerships	In-Kind Donations	Zero Admin Fee	\$50,000.00	1.00	\$ 12,500.00	\$ 37,500.00	\$ 50,000.00	\$ 50,000.00	\$ 50,000.00	\$ 50,000.00	\$ 250,000.00	workforce & job readiness training, transportation, re-entry support, tattoo removal, transitional employment	Fixed
					Year 1 Amount Start-up Phase (Personnel & Operating)	Year 1 Amount 60 bed occupancy (Personnel & Operating)	Year 2 (Personnel & Operating)	Year 3 (Personnel & Operating)	Year 4 (Personnel & Operating)	Year 5 (Personnel & Operating)	Total (Personnel & Operating)		
Subtotals					\$ 624,155.81	\$ 1,783,538.34	\$ 2,568,648.20	\$ 2,637,319.86	\$ 2,708,054.15	\$ 2,780,904.28	\$ 13,102,620.64		<= Does not include overhead (row 17)
General Admin Fee (15% Indirect)					\$ 82,898.37	\$ 235,355.75	\$ 342,744.00	\$ 342,846.54	\$ 353,133.50	\$ 363,728.32	\$ 1,720,706.48		
Totals					Year 1 Total >>	\$ 2,725,948	\$ 2,911,392	\$ 2,980,166	\$ 3,061,188	\$ 3,144,633	\$ 14,823,327		

Thank you for considering Five Keys' application to operate emergency housing services on behalf of the City of Lodi and its residents.



INTEGRATED SUPPORTIVE SERVICES and PROPERTY MANAGEMENT OPERATIONS

Location	Program Type	Units/Beds	Site-Specific Roles		County
Vallejo Navigation Center 1937 Broadway St Vallejo, CA 94589	NAVIGATION CENTER Sprung building. Outdoor community area, dog area, gym area	125 Congregate	Assistant Director: Que M 4.2 Shift Supervisors 3 Care Coordinators 1 Intake Coordinator	1 Activity Coordinator 0.25 Maintenance Crew 4.2 Janitors 18 Ambassadors	Solano
Embarcadero SAFE Navigation Center 555 Beale Street San Francisco, CA 94105	NAVIGATION CENTER Sprung building. Outdoor community area, dog area, gym area	200 Congregate	2 Assistant Dir: Demian J; Roozbeh I 4.2 Shift Supervisors 8 Care Coordinators 1 Intake Coordinator	1 Activity Coordinator 33 Ambassadors 5 Janitors	San Francisco
Bayshore Navigation Center 125 Bayshore Blvd. San Francisco, CA 94124	NAVIGATION CENTER Sprung building. Outdoor community area, dog area, gym area	128 Congregate	2 Assistant Dir: Sierra K; Samyra M 4.2 Shift Supervisors 5 Care Coordinators 1 Intake Coordinator	1 Activity Coordinator 21 Ambassadors 5 Janitors	San Francisco
Central Waterfront Navigation Center 600 25th Street San Francisco, CA 94121	NAVIGATION CENTER Sprung building. Outdoor community area, dog area, gym area	65 Congregate no doubles	1 Assistant Director: Torbio D 4.2 Shift Supervisors 3 Intake & Care Coord.	15 Ambassadors 2 Janitors	San Francisco
Baldwin Hotel 74 6th Street San Francisco, CA 94103	NAVIGATION CENTER SAFE Navigation Center shelter NON-congregate	200 Individual Rooms Non-Congregate	Assistant Dir: Cyrus A; Dawn M Property Manager: Roy A 4.2 Shift Supervisors 5 Care Coordinators 1 Intake Coordinator	1 Activity Coordinator 2 Maintenance Crew 36 Ambassadors 6 Janitors	San Francisco
Arroyo Seco Tiny Home Village 401 Arroyo Seco Pkwy, Los Angeles, CA 90042	TRANSITIONAL HOUSING 115 TINY HOMES	123 beds	Assistant Director: Eric S 4.2 Shift Supervisors 1 Care Coord. Supervisor 4 Care Coordinators	1 Maintenance 18 Ambassadors	Los Angeles
Mission Cabins 1979 Mission Street San Francisco, CA 94103	TINY HOMES SHELTER local neighborhood 90% Spanish-Speaking	63 Individual Rooms 8 double beds	Assistant Director: Inez G 4.2 Shift Supervisors 2 Care Coordinators/Intake	18 Ambassadors 2 Janitors	San Francisco
Next Door Shelter 1001 Polk Street San Francisco, CA 94109	INTERIM SHELTER plus: EXTREME WEATHER SHELTER 4 floors + kitchen, library	334 Congregate no doubles	Asst. Director: Samantha E 8.4 Shift Supervisors 9 Care Coordinators 2 Intake Coordinators	1 Activity Coordinator 70 Ambassadors 10 Janitors	San Francisco
Adante Hotel 610 Geary Street San Francisco, CA 94102	INTERIM NCS SHELTER NCS=Noncongregate	89 Individual Rooms or doubles	Assistant Director: Hun S Property Manager: Osbaldo S 4.2 Shift Supervisors 1 Care Coordinator 1 Intake Coordinator	32 Ambassadors 2 Janitors	San Francisco

Location	Program Type	Units/Beds	Site-Specific Roles		County
Ellis St 685 Ellis Street San Francisco, CA 94109	INTERIM NCS SHELTER Unaffiliated Individuals share as roommates.	72 double rooms 150 total beds	Assistant Director: Eldridge C Property Manager: Robert W 4.2 Shift Supervisors 4 Care Coordinators	1 Intake Coordinator 1 Maintenance Crew 48 Ambassadors 2 Janitors	San Francisco
Eddie's Place 170 Hegenberger Loop Oakland, CA 94621	MEDICAL RESPITE SHELTER We provide operations support, incl. security and Ambassador work	76 Individual Rooms (up to 90 days)	Director: Brandi T 4.2 Shift Supervisors 8 Ambassadors	Partnering with CARDEA HEALTH for medical care (Five Keys - subcontractor)	Alameda
Home Free, Treasure Island 1431 Halibut Court San Francisco, CA 94130	INTERIM REENTRY HOUSING Adult Reentry DV survivors	10 5 shared apartments for stays up to 1 year	Program Director: Tammy C Assistant Director: Gilda S 1 Care Coordinator	4 Ambassadors 1 Reentry Coach	San Francisco
OakDays 8350 Edes Avenue Oakland, CA 94621	PERMANENT SUPPORTIVE HOUSING (PSH) Medically fragile tenants.	140 >> 70 Individual Rooms or doubles	Property Manager: Natalie L 1 Care Coordinator 3 Housing Navigators 2 Janitors	Partnering with CARDEA HEALTH for medical care 0.75 Maintenance Crew 24 Ambassadors	Alameda
42 Otis 42 Otis Street San Francisco, CA 94103	PERMANENT SUPPORTIVE HOUSING (PSH) 100% Transitional Age Youth	24 Individual or double rooms	Property Manager: Donald S. 1 Care Coordinators 1 Peer Coordinator	1 Maintenance Crew 10 Ambassadors 1 Janitor	San Francisco
Artmar Hotel 433 Ellis Street San Francisco, CA 94102	PERMANENT SUPPORTIVE HOUSING (PSH) 90% Transitional Age Youth	60 Individual Rooms	Property Manager: Eduardo G 2 Care Coordinators	1 Maintenance Crew 8 Ambassadors 1 Janitor	San Francisco
Gotham /Vantaggio Suites 835 Turk Street San Francisco, CA 94102	PERMANENT SUPPORTIVE HOUSING (PSH) Adult High-needs populations	114 >> 108 Individual Rooms or doubles	Property Manager: Donald S 4 Care Coordinators	1 Maintenance Crew 11 Ambassadors 1 Janitor	San Francisco
San Francisco Homelessness and Supportive Housing (HSH) Rapid Rehousing Community Support San Francisco, CA	SCATTERED SITE HOUSING	154 served last year	Program Manager Housing Stability: Bianca F Rehousing Acquisition Manager: Rakie H Rehousing Coordinator Assistant Director of TAY Rapid Rehousing 5 Tay Supportive Services Care Manager 5 Supportive Services Care Manager		San Francisco
Emergency Stabilization Units Department of Public Health San Francisco, CA	EMERGENCY STABILIZATION UNITS (ESUS) Short-term post hospital jail in SRO's	188 served last year	Assistant Director of Care Coordination: Dana P Licensed Clinical Social Worker 5 Care Coordinators 1 Clinical Care Supervisor		San Francisco
Health Care Services Agency Housing Community Supports (HCSA) Alameda, CA	Housing Community Supports Tenancy Sustaining Services & Housing Navigation & Housing Deposits	66 served last year	Assistant Director of Care Coordination: Dana P 4 Housing Navigators		Alameda



Housing Division Org Chart

August 2025

Five Keys Board of Directors

Steve Good, **President/CEO**

Elyse Graham
COO, Exec. VP Housing Division

Brandi Marshall
Director of Housing Services

Kimberly Duong
Deputy Director of Housing Services

Alysha Galindo
Director of Housing Operations

Pending
Director of Compliance & Quality Assurance

Pending
Training and Community Engagement Manager

Jamil Wilson
Director of Guest and Staff Support

Rita Alfred
Restorative Justice Strategist
Staff Wellness Crisis Response Facilitator

Dana Pine
Assistant Director of Care Coordination

Nicholas Himan, Jassy Mopera, Craig Neely;
Rocky Nguyen; Jacob Valenzuela
5 Supervisors of Care Coordination

43 Care Coordinators (Case Managers)

4 Housing Navigators
Housing Community Supports

Emergency Shelter Units
1 Clinical Care Supervisor
5 Care Coordinators

14 Site Directors and Assistant Site Directors:
Brandi T, Cyrus A, Dawn M, Demian J, Eldridge C, Eric S, Hun S,
Inez G, Roozbeth I, Sally E, Samantha E, Samyra M, Sierra K, Torbio D
5 Property Managers: Donald S, Eduardo G, Natalie L, Oswaldo S, Robert W, Roy A

60 Shift Supervisors
93% of Directors, Assistant Directors, and Shift Supervisors have been promoted from within.

11 Intake Coordinators – 5 Activity Coordinators – 35 Janitorial Crew – 7 Maintenance

374 Housing Ambassadors
Cross-trained as Site Security, Fire Monitors, Neighbor Relations, Harm-Reduction Wellness checks;
Housekeeping (turn-overs); Pet Controls; Food Distribution, and All-Around Customer Service Liaisons

Antonette West, **CFO**
Anthony Wong
Assistant Director of Finance
Patricia Richard
Billing / Fiscal Compliance

Gabriela Farias
Director of Technology

Lisa Haynes
VP of Training & Development

Mary Vigil, **Chief HR Officer**
Fausto Perez
Assistant Director of HR
Dureana Murphy
HR Business Partner

Dorick Scarpelli
VP of Programs & Partnerships

Alex Guzman-Ramos
Director of Rehousing Programs
Scattered Site Housing

26 Case Managers for Adults and TAY

Tammy Cooper-Garvin,
Program Director, Home Free

Assistant Director, **Gilda Serano**

Case Manager	4	Reentry Coach
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Proposed Staffing Org Chart LODI ACCESS CENTER November 2025



- Antonette West, CFO
- Mary Vigil, Chief HR Officer
- Lisa Haynes, VP of Training & Development
- Gabriela Farias, Director of Technology

Dana Pine
Director of Care Coordination

3 FTE LODI Care Coordinators
(Housing Focused Case Managers)

4.2 FTE
LODI Janitorial

12.6 FTE LODI Housing Ambassadors
Site Security, Fire Monitors, Harm-Reduction Wellness checks; Housekeeping (turn-overs); Pet Controls; Food Distribution, & Customer Service Liaisons

2.8 FTE LODI Community Ambassadors
Perimeter checks, community engagement, emergency response; Goodwill stewards with local residents and businesses per the Good Neighbor Policy.

These are the same staffing group, performing different functions at different times. FTE are listed separately for tracking purpo

FIVE KEYS STAFFING PLAN FOR LODI ACCESS CENTER AND EMERGENCY SHELTER OPERATIONAL MANAGEMENT SERVICES

Position / Role	FTE	Primary Responsibilities
Housing Division Director Brandi Marshall	0.3 FTE	Oversees all housing operations: sites, services, compliance, and accountability. Provides direction on policies, procedures, contract outcomes, fidelity and budget compliance.
Deputy Director of Housing Services Kimberly Duong	0.03 FTE	Oversees all housing operations, including sites, services, compliance, and accountability. Provides direction on policies, procedures, contract outcomes and budget compliance.
Director of Housing Operations Alysha Galindo	0.03 FTE	Responsible for writing policies, administrative documentation support, and intellectual property. Ensures data compliance and assists in tracking, compliance, and reporting.
Director of Staff and Guest Support Jamil Wilson	0.03 FTE	Trains new hires and provides guest support. Conducts grievance processes, investigations, and client responses. Ensures guests receive dignified treatment and excellent customer service. Supervises the Activities Coordinator and resolves guest complaints.
Director of Compliance and Quality Assurance Samantha Evans	0.03 FTE	Ensures that all housing site operations align with contractual and internal policies through consistent on-site monitoring and intervention. Leads quality improvement initiatives by addressing operational challenges, implementing corrective actions, and using data (grievances and DOS) to reduce service disruptions and enhance program delivery.
Training and Community Engagement Manager TBD	0.03 FTE	Ensures staff are equipped to deliver high-quality, client-centered, and trauma-informed services through on-site coaching and hands-on support. Oversees all staff training, tracking compliance, and systems to ensure full participation. Fosters strong community relationships and engagement efforts incorporating feedback from clients and stakeholders
Director Care Coordinators Dana Pine	0.03 FTE	Accountable for smooth operations and effective coordination with our city partners
Site Director Brandi Taliano	0.50 FTE	Responsible for on-site program services, client satisfaction, and staff training/supervision. Liaison to housing leadership; oversees day-to-day operations.
Care Coordinators TBD	3.0 FTE	Build rapport with guests through intakes, assessments, and strengths-based interviews. Assist guests in co-creating care plans and setting SMART goals for stable housing. Help guests acquire necessary documents and apply for benefits (SSI/SSDI, Medi-Cal, CalFresh, General Assistance, unemployment). Provide referrals to healthcare, recovery programs, education, job training, and employment opportunities. Promote wellness activities and prepare guests for successful transitions to stable housing.

Position / Role	FTE	Primary Responsibilities
Shift Supervisors	4.2 FTE	Manages shift scheduling, emergency procedures, guest issues, and de-escalation strategies. Ensures overnight intakes are conducted efficiently. Oversees shift activities, staffing, safety, emergency response, and client satisfaction. Trains staff and maintains accountability.
Housing Ambassadors and Community Ambassadors <i>Housing Ambassadors and Community Ambassadors are the same people, performing different functions at different times. The FTE are listed separately for tracking and budgetary purposes.</i>	12.6 FTE ----- 2.8 FTE	Housing Ambassadors are cross-trained in roles for: 24/7 front desk staffing, security, perimeter monitoring, and fire-watch patrols. They conduct entry wandering, search for weapons/substances and respond to emergencies with first aid or Narcan administration. Ambassadors clean, repair, and prepare beds for newly arriving guests. They coordinate meal distributions, conduct wellness checks, and assist with hygiene supplies, pet care, and personal storage. As Community Ambassadors , they serve as a visible, positive presence, promoting goodwill with local residents and businesses surrounding the shelter. They perform routine beautification and litter removal and act as community stewards, conducting outreach and assisting as frontline responders in case of emergencies. Their stewardship model prioritizes the Good Neighbor Policy.
Janitorial Staff	2.8 FTE	Cleans facilities, empties trash, clears grounds, and ensure hygiene and sanitation in guest/staff spaces including frequent sanitizing of “high-touch” spaces to prevent spread of germs.

FIVE KEYS HOUSING STAFF TRAINING AND FREQUENCY

TRAINING	REQUIRED FOR	FREQUENCY
HMIS Training on intakes, document uploading, services, case notes and reports	Case managers, supervisors, assistant directors, program managers, directors	Onboarding; Annually; As needed
Case Management and Systems Navigation 1	Case managers entry level	Onboarding; Annually; As needed
Case Management and Systems Navigation 2	Case managers with 6 or more months of experience	Onboarding; Annually; As needed
Care Coordination and System Navigation 3	Case managers and their supervisors	Annual
Problem solving	Case managers	Onboarding; Annual
Boundaries and ethics	All staff	Annual
De-escalation	All Staff	Annual
Harm reduction	All Staff	Annual
Trauma informed care 101 & 102	All Staff	Annual
Motivational interviewing	All Staff	Annual
Quality standards	All Staff	Annual
Mandated reporter training	All Staff	Annual
Overdose education and Naloxone distribution	All Staff	Annual
Five Keys' New Hire Orientation/Onboarding <ul style="list-style-type: none"> ● Preventing Discrimination and Harassment: Employee training (1 hour online) ● Inclusive, Harassment-Free Environment (3 hour in-person training with HR) ● HR Paycom training and benefits 	All staff	At hire; Annually; As needed by individuals
Professional Standards <ul style="list-style-type: none"> ● Workplace ethics, Self-Accountability, Professionalism, Shelter Standards of Conduct; Confidentiality ● Dress Code and Public Image ● Fraternalization; Setting Safe and Healthy Boundaries ● Customer Service Training 	All staff	Annual
Policies and procedures <ul style="list-style-type: none"> ● Emergency Procedures ● Grievance Policy ● Good Neighbor Policy ● Service Animal/Pet Policy ● Visitor Policy 	All staff	Annual
Cultural and Gender Awareness <ul style="list-style-type: none"> ● Anti-oppression, implicit bias, sexual orientation /gender identity training; LGBTQ+ inclusivity and awareness of transgender guests' needs ● Supporting diverse populations, incl non-English speakers, individuals with disabilities, those affected by housing instability, substance use, or incarceration 	All Staff	Annual
Americans with Disabilities Act and Reasonable Accommodations	All supervisors; site directors	Annual

Denials of Service	All supervisors; site directors	Annual
Motivational Interviewing	All care coordinators and supervisors	Annual
Document Acquisition	Case Management	Annual
Resource and Referral	Case Management	Annual
Aerosol Transmissible Disease	All Staff	Annual
Exposure to Blood Borne Pathogens	All Staff	Annual
CPR and First Aid	All staff	Available annually; Certification valid 2 yrs
Opioid Overdose Recognition Prevention and Response	All staff	Available annually; Certification valid 2 yrs
Biohazard sharps disposal and drug user sensitivity	All staff	Annual
OSHA 10	Janitorial and supervisors	Annual
Hygiene protocols, disease transmission, and emergency health procedures	All staff	Annual
Safe Food Handling	All ambassadors, supervisors	Annual
Safety; crisis intervention; de-escalation; conflict resolution	All staff	Annual
Mental Health First Aid	All Staff	Annual
Behavioral health and medical service integration; Mental Health Cultural Competency	All Staff	Annual
Mental Health & Substance Abuse 101	All Care Coordinators and supervisors	Annual
Adult Congregate Shelter Manual	All congregate shelter staff	Annual
Trauma, Toxic Stress and Self Care	Case managers, licensed clinicians	At onboarding; during monthly meetings
Professional Development for Leaders		
Emotional intelligence and fostering inclusive environments; Standards of Care (i.e. motivational interviewing, trauma-informed care, effective communication).	Ambassadors, Case Managers; and supervisors	Onboarding; Reviews each shift; monthly meetings w/clinical supervisor for CM
Good Soil: 6-mo Leadership and Development Training (2-5 hours of coaching monthly, w additional homework) <ul style="list-style-type: none"> • Management & leadership skills for first-time supervisors & managers • Effective communication • Emotional intelligence and change management • Leadership, team-building, and coaching skills; • Addressing internal biases; fostering inclusive environments • Be the Manager Your Employees Want to Follow 	Voluntary and open to all staff.	New cohorts offered quarterly



Day-Use and Services Policy

Purpose

The purpose of this policy is to define the procedures and standards for access, conduct, and service delivery for guests utilizing the Access Center. This area provides daytime access to essential services and community resources such as restrooms, computers, groups, and classes. The policy ensures that all Access Center operations are managed safely, equitably, and in alignment with Five Keys' trauma-informed and low-barrier philosophy. It also establishes a clear separation between Access Center spaces and shelter living areas to protect the privacy and security of overnight guests while fostering engagement and connection among community members seeking stability and support.

Guiding Principles

- Access Center services are open to all unsheltered or at-risk community members seeking daytime support.
- All guests and staff must adhere to security screening and conduct expectations.
- Every guest is treated with professionalism, compassion, and respect.
- The Access Center area operates independently from the shelter to ensure privacy and safety for overnight guests.
- Services focus on connection, stability, and pathways to long-term housing and wellness.

Access Center and Entry Process

- Access Center guests may access the facility during posted hours of operation (8:00 a.m.–5:00 p.m., Monday–Sunday).
- All guests must check in at the main entrance and pass through security screening before entering.
- Ambassadors will:
 - Conduct visual bag checks and metal detector screening.
 - Prohibit weapons, drugs, alcohol, or hazardous materials.
 - Secure any prohibited items for return upon exit when appropriate.
- Guests receive an Access Center Guest Badge identifying them as authorized visitors for that day.
- Re-entry on the same day may be permitted at staff discretion, subject to capacity limits.
- Access to shelter living areas, sleeping quarters, or staff-only offices is strictly prohibited for Access Center guests.

Available Access Center Services

- Guests may utilize services and amenities, including:
 - Restrooms and handwashing stations
 - Computers and phone charging stations
 - Case management or resource navigation appointments
 - Group activities, classes, and workshops
 - Support groups and community programming
 - Educational, employment, and life skills sessions
 - Referrals for medical, behavioral health, and housing support
- Availability of services may vary by day and program schedule.

Guest Conduct and Expectations

- Guests are expected to:
 - Treat staff, volunteers, and peers with respect at all times.
 - Follow staff directions and posted rules of conduct.
 - Maintain personal belongings within designated areas.
 - Refrain from disruptive behavior, substance use, or verbal abuse.
- Violations of conduct policy may result in temporary or permanent suspension from Access Center services, subject to supervisor review.

Staff Responsibilities

- **Ambassadors:** Manage screening, entry, and enforcement of safety protocols.
- **Front Desk/Reception Staff:** Register guests, issue badges, and monitor occupancy.
- **Care Coordinators:** Deliver classes, case management, and supportive services.
- **Janitorial/Maintenance Staff:** Maintain the cleanliness and readiness of shared spaces.
- **Site Director or Supervisor:** Oversee program operations, coordinate with community partners, and approve any service suspensions.

Documentation and Data Tracking

- Guest check-ins and services utilized are recorded daily in the program database or sign-in logs.
- Incidents, injuries, or security interventions are documented immediately in an Incident Report Form and submitted to the Site Director.
- Monthly summaries of guest visits and service participation are compiled for internal reporting and quality improvement.



Bed Reservation and Allocation System

Purpose

This policy outlines the standardized process by which Five Keys manages bed reservations, allocations, and holds within its shelter facilities. The purpose is to ensure that access to shelter is fair, transparent, efficient, and person-centered, while maintaining safety and maximizing occupancy.

Guiding Principles

1. All individuals are provided equal opportunity for shelter placement regardless of income, background, or circumstance, consistent with applicable law and agency standards.
2. No one is denied entry based on sobriety, employment, or prior housing status.
3. All bed allocation decisions are documented, logged, and reviewed by supervisory staff.
4. Assignments consider individual safety, health, and compatibility factors to support a stable environment.
5. Beds are tracked and managed in real time to maintain full utilization and readiness for emergency needs.

Definitions

- Active Bed: A bed currently in use by a guest.
- Reserved Bed: A bed held temporarily for a returning guest or for an approved referral.
- Vacant Bed: A bed available for assignment.
- Emergency Hold: A temporary reservation of a bed (up to 24 hours) for a guest with an approved, documented reason for absence.

Procedures

Intake and Assignment

- Beds are assigned on a first-available basis, unless otherwise directed by clinical, safety, or programmatic criteria.
- Intake staff record all admissions, discharges, and holds in the designated shelter management database.
- Each guest receives a bed assignment that links to their record.

Daily Reservation Process

- Guests must confirm the continuation of stay each day.
- Guests who fail to check in or communicate with staff are marked for potential release.
- Beds marked for release become available to the next eligible guest on the waiting list after supervisory review.

Temporary Holds

- Staff may hold a bed for a guest for up to 24 hours due to hospitalization, or crisis.
- Holds exceeding 24 hours require Site Director approval.

Allocation Priorities

Vacancies are filled according to the following priority framework:

1. Referrals from partner agencies with verified eligibility.
2. Guests with the highest safety or medical need.
3. Individuals with active case management plans.

Data Management

- All bed activity (assignments, holds, exits) is logged daily in the management system.
- Staff conduct a daily reconciliation of the physical bed count versus database records.
- Monthly audits ensure data accuracy and compliance with agency reporting standards.

Transfers and Special Circumstances

- Transfers between program areas or facilities must be processed and approved by intake and/or supervisory staff.
- Guests may request a transfer for medical, safety, or personal reasons; staff evaluate feasibility based on available space and operational needs.

Responsibilities

Role	Responsibilities
Intake Staff / Care Coordinators	Conduct intake, assign beds, record data, and manage daily check-ins.
Shift Supervisor	Review holds, approve daily releases, and ensure proper documentation.
Site Director	Approve exceptions, review allocation reports, and monitor compliance.
Data Coordinator	Maintain system integrity and reporting accuracy.



Site: _____
Bed/Room/Cabin #: _____

FIVE KEYS PARTICIPANT AGREEMENT

Welcome!

Temporary Shelters do not provide permanent housing, and guests staying at these sites do not have tenancy rights. Nonetheless, all guests are entitled to fair, respectful, and equitable treatment.

The following program guidelines apply to all guests staying at Temporary Shelter Program sites. Please read each guideline carefully and place your **initials** next to each one to indicate you have read and understand it.

COMMUNITY GUIDELINES

- Treat everyone with respect, civility, and dignity.
- Participate in Wellness Checks, housing services, and daily health screenings.
- No visitors, except for those providing essential services.
- Respect quiet hours between **10:00 PM – 7:00 AM**.
- Keep animals under direct control at all times.
- Smoke only in designated areas.
- Clean up after animals in designated areas.
- Respect property and keep it in good condition.
- Work on individualized goals to achieve permanent housing.

Guest Initials: _____



Site: _____
Bed/Room/Cabin #: _____

PROGRAM GUIDELINES

Working on Housing Goals

- Meet with assigned Care Coordinator weekly (or more as needed).
- Develop an individual housing plan and follow it.
- Provide necessary documentation to support your housing goal.

Guest Initials: _____

Mental Health Supports

- Participate in on-site mental health supports if offered.

Guest Initials: _____

Respectful Interactions

- Behave respectfully; no harassment, abusive language, or lewd behavior.

Guest Initials: _____

Health Screenings

- Guests may be screened for COVID-19 symptoms if there is an active case on-site.

Guest Initials: _____



Site: _____
Bed/Room/Cabin #: _____

Visitors

- No visitors, unless providing essential services with staff coordination.
- No overnight visitors or visiting other guests' bed areas.

Guest Initials: _____

Removal of Property

- If you exit voluntarily or through termination, your belongings will be inventoried and stored for **30 days**. Unclaimed property may be disposed of after this time.

Guest Initials: _____

Leaving the Site

- Absence for **three or more consecutive days** without reasonable contact may be treated as a voluntary exit (self-exit). The bed may be reassigned; belongings stored for 30 days.

Guest Initials: _____

Masks

- Guests are encouraged to wear a mask. Guests who are COVID-19 positive must wear a mask when not eating, drinking, showering, or in bed.

Guest Initials: _____



Site: _____
Bed/Room/Cabin #: _____

Safety Equipment

- Do not tamper with or remove smoke or carbon monoxide detectors. Do not hang items on sprinklers.

Guest Initials: _____

Violent Behavior

- Violence or threats of violence are not permitted and may result in immediate removal and possible prosecution.

Guest Initials: _____

Weapons

- No weapons are allowed on site. Firearms must be turned in to be sent to the Police. Other weapons must be stored safely with the staff.

Guest Initials: _____

Fire Damage and Arson

- Activities that could start fires are prohibited. Violations may lead to immediate removal.

Guest Initials: _____



Site: _____
Bed/Room/Cabin #: _____

Pest Control

- Participate in pest inspections and treatments as directed.

Guest Initials: _____

Animals

- Keep animals leashed or in a container in common areas and under your direct control.
- Feed and water animals in designated areas. Clean up waste properly.
- Animals must not be aggressive or loud.
- If your animal bites or attacks, it must be removed from the site.
- Guests are encouraged to maintain current rabies vaccinations for their animals and may work with staff to obtain needed vaccinations.

Guest Initials: _____

Smoking

- Smoking is not allowed in dorms or common areas. Smoke only at least 15 feet from entrances/exits.

Guest Initials: _____

Quiet Hours

- Quiet hours are **10:00 PM – 7:00 AM**. Guests are encouraged to stay in their rooms.

Guest Initials: _____



Site: _____
Bed/Room/Cabin #: _____

Egresses

- Maintain your space safely, keeping clear pathways to exits.

Guest Initials: _____

Wellness Checks

- Participate in daily wellness checks and allow staff to observe your space.

Guest Initials: _____

Emergency Safety Checks

- Staff may enter your space if they believe there is an immediate risk.

Guest Initials: _____

Bed Inspections

- Participate in weekly bed inspections for health and sanitation.

Guest Initials: _____

Meals

- No food allowed in dorms. Eat in designated dining or outdoor areas.

Guest Initials: _____



Site: _____
Bed/Room/Cabin #: _____

Mail

- Mail may be delivered while enrolled. Mail will be held for 30 days after exit.

Guest Initials: _____

TERMINATION & EXIT POLICY

Immediate Termination of Service

Site staff may execute an **Immediate Termination of Service** for any serious rule violation posing a direct threat to health or safety, including but not limited to:

- Sexual assault
- Physical violence or threats of violence
- Severe threatening behavior that cannot be mitigated
- Any conduct creating an immediate risk of harm

Belongings will be stored for at least **30 days**. Guests understand that these situations may result in **immediate removal**.

Guest Initials: _____

Termination with 30-Day Written Notice

For non-emergency violations, guests may receive a **30-day written notice** for termination for reasons including, but not limited to:

- Repeated or serious breaches of agreement/rules
- Illegal activity on-site
- Securing permanent housing or reunification
- Moving outside Los Angeles County
- Enrolling in another interim housing program
- Exceeding time limits
- Refusing to cooperate with housing plans
- Program or site closure



Site: _____
Bed/Room/Cabin #: _____

Guests have the right to reasonable accommodation, to appeal termination through the grievance process, and to have belongings stored for 30 days.

Guest Initials: _____

ACKNOWLEDGEMENT

By signing below, you acknowledge that you have received the program guidelines, understand the rules that can lead to termination or denial of service, and agree to comply with them.

Guest Name (Printed): _____

Guest Signature: _____

Date: _____

Authorized Site Staff Name (Printed): _____

Authorized Site Staff Signature: _____

Date: _____

New Guest Orientation

(Internal Process Document)



Purpose

- Establishes a standardized, trauma-informed process for welcoming and orienting new guests.
- Ensures every guest understands their rights, responsibilities, services available, and community expectations.
- Promotes safety, respect, and consistent program delivery across all Five Keys sites.

Guiding Principles

- All guests receive the same orientation regardless of background or literacy level.
- Emphasizes safety, choice, trust, and empowerment.
- Expectations and support are clearly communicated.
- Guests are encouraged to participate actively in their own success.
- Orientation procedures are uniform across all programs.

Orientation Timing

- Orientation is completed within 24 hours of admission or at first check-in.

Orientation Process

- Staff greet the new guest, explain program purpose, and introduce key staff.
- Verify ID, intake forms, and signed Guest Agreement, Consent for Services, and Grievance acknowledgment. Copies are provided to the guest.
- Show sleeping areas, restrooms, laundry, dining, and exits. Review safety features (fire alarms, first-aid, security) and posted schedules.
- Explain behavioral guidelines, substance-use policy, visitor policy, personal storage, quiet hours, hygiene, and entry/exit procedures.
- Review guest rights (safety, confidentiality, non-discrimination) and explain grievance process, response timelines, and escalation paths.
- Introduce the assigned Case Manager within 48 hours. Schedule the initial goal-setting meeting and review available supports (medical, behavioral health, employment, benefits).
- Guest signs the Orientation Completion Form confirming receipt and understanding; form is filed in the guest record.

Staff Responsibilities

- Intake Staff: Conduct welcome tour, verify documentation, and complete initial orientation steps.
- Care Coordinators: Conduct care plan
- Site Director: Oversee compliance, ensure training, and update materials as needed.

Documentation

- Orientation Checklist completed by staff.
- Orientation Completion Form signed by the guest.
- Copies of required policies and acknowledgments are retained in the guest's case file and database.



Five Keys Grievance Policy (process document)

The purpose of the Grievance Procedure is to ensure that guests have a clear process to follow when they feel that they have been treated unfairly by Five Keys staff or policies.

This can also be a great opportunity for us to get feedback from guests on how we are doing with our services. At times, it is a useful tool for having a conversation with guests about not only our responsibilities and actions, but also their responsibilities and actions as guests.

For the procedure to be effective please follow these guidelines:

- Plenty of copies of the Grievance Procedure should be available at the front desk. English and Spanish copies of the grievance procedure are available in the front desk binder.
- The procedure must be posted at every building in a visible location. Copies of the procedure should be kept at the front desk to hand out upon request.
- The procedure must also be given to every guest to sign when they sign their intake paperwork. Please take the time to explain the procedure, and sign and date the form.

During the process, all information should be kept confidential. Should the Supervisor be unable to resolve a grievance directly with the guest, all information should be forwarded to the Site Director responsible for the site. Once the Director receives the information, the Supervisor will be contacted for information and the process will continue as described below.

Please keep the grievance as confidential as possible. Guests who file grievances should not be discussed with other site staff unless the other staff members are directly involved. If a support services staff member is assisting the guests with a grievance, be sure to confirm with the guests if they want you to discuss the matter with the services staff.

Guests must never suffer any retaliation from staff or denial of services for requesting or filing a grievance. Evidence of retaliation against a guest for submitting a grievance may result in immediate termination from Five Keys employment. It is our job to ensure that all guests are provided with excellent customer service, and that guests are confident that they can have their concerns heard and addressed. Even if a guest's claims are not valid, it is our responsibility to ensure that the process is conducted with respect and compassion for the guest.



Five Keys Grievance Procedure

Five Keys is committed to providing excellent customer service and fairness to our guests. If you think we have failed in our efforts to do so, or that we have policies and procedures that are unfair, we want to hear from you! If you think you have been treated unfairly your issue will be carefully considered by Five Keys management and that we will try to come to a satisfactory resolution for everyone.

Below are the steps you need to take if you have a grievance. This process only applies to grievances involving the policies and employees of Five Keys; if you have a grievance with one of the other agencies at your location you must follow their procedure.

FIRST: What is a grievance? Basically, it is a complaint about our service. A grievance is officially defined as a condition of occupancy or application of policy that you as the guest believe is unjust or inequitable.

SECOND: What do I do if I have one? As the guest, you should take the following steps:

1. Discuss the grievance or problem first with the Supervisor on duty. There is a grievance form available at the front desk that you can complete. Or you can make an appointment with a Supervisor to provide your grievance verbally.

Within 2 days the Supervisor on duty will contact you to set up a meeting to attempt to resolve this issue, and may propose next steps, if necessary. If the issue can't be resolved at the meeting, the Supervisor will provide you with a written determination based on Five Keys Policies and Procedures or respond with a plan of action within 5 working days of the final meeting.

2. If you cannot resolve your grievance with the Supervisor or are not satisfied with the determination made by the Supervisor, you may request a meeting with the Site Director. To request a meeting, call your site phone for an appointment. The Site Director will attempt to contact you within 5 working days in order to make an appointment at the earliest, mutually agreeable opportunity to discuss the issue(s). At this meeting, the Director will attempt to resolve this issue, and may propose next steps, if necessary. This may include meeting with other staff or other steps. If your issue isn't resolved at the meeting, the Director will provide you with a written determination based on Five Keys Policies and Procedures or respond with a plan of action within 5 working days of the final meeting.



Five Keys Overdose Policy

Policy and Purpose:

At Five Keys Schools and Programs, it is our goal to ensure that our guests and tenants who are using drugs, whether prescription or otherwise, are provided with information, resources, and support to live safely and without judgment. We believe that housing is a human right regardless of behavioral challenges, substance use, financial resources, or socioeconomic challenges. Drugs and alcohol are commonly used by our guests and tenants. We offer a non-judgmental approach that attempts to meet Individuals “where they are at” with their substance use. Our role is to offer and connect community members who are using substances toward services that could assist them. We want to empower community members to make the decisions that are best for them around substance use. We strive to treat our guests with a high level of respect, compassion and confidentiality; in the hopes they will get connected to resources while staying in one of our facilities. Our number one priority is their safety and well-being, so we can equip them with the tools they need to have their homelessness be brief and one-time.

Harm Reduction:

Five Keys supports and embraces harm reduction at all of our sites. We aim to meet our guests where they are. Upon intake at any of our facilities, guests will have the opportunity to meet with an intake coordinator in a private and confidential space. During intake, they will have the opportunity to disclose any type of substance use without judgment. They will then meet with a care coordinator who can offer them resources such as drug treatment, drug maintenance, or harm reduction resources and services. If the guest is not interested in any of these services, we will continue to support them and be ready to provide them with resources if they so desire.

These resources are readily available for our guests. We have printouts available on the following link: <https://sf.gov/information/overdose-prevention-resources> as well as working in collaboration with the Harm Reduction Coalition and The DOPE Project to provide up-to-date resources and tools such as Fentanyl Test strips.

Implementing Harm Reduction - Policies and Procedures

At any Five Keys Sites, guests and tenants will be met with a harm reduction approach while keeping in alignment with HSH rules regarding drug use. We use harm reduction principles to drive our procedures, such as:

- Staff will not ask guests/tenants to be abstinent, only ensure that they are not using in certain areas, particularly communal spaces.

- Staff should help guests/tenants recognize that some ways of using substances are safer than others and support them in employing these.
- Staff should recognize that the realities of poverty, class, racism, social isolation, past trauma, sex based discrimination, and other social factors that affect community members' vulnerability to and capacity for effectively dealing with substance use.
- If guests have noted they want more wellness checks or if a Five Keys supervisor or director sees a need for more wellness checks, we will do so at our own discretion. We use a roster system to track guests who request additional wellness checks or who may be considered at "high risk" for overdose or medical complications.
- Providing wellness checks on guests in single room occupancies 2 times during the day shift and swing shift, and then 1 wellness check overnight in a respectful manner by knocking softly on the guests' door and asking for a response so we know everyone is well.
- In congregate shelters, our ambassadors walk through the dorms multiple times during shifts. Staff also perform bathroom checks every 15 minutes. If guests are using the ADA restroom, we will also perform frequent wellness checks.
- Narcan is provided at all sites, and staff attach Narcan to their lanyard so they are always prepared in the event of an emergency.
- We provide harm reduction supplies at our locations.

Implementing Harm Reduction - Staff Role:

Staff will support guests/tenants with their harm reduction plans. Examples of this include:

- Supporting a guest/tenant who has decided to reduce the amount of substances they consume in a day.
- Listening to and honoring a guest/tenant's story about how they became dependent on substances.
- Helping a guest/tenant move through the shame often associated with addiction so that they can make conscious choices about their use
- Giving a guest/tenant information on how to use more safely and prevent disease and Overdoses
- Staff will not ask a guest/tenant to leave the shelter for drug use or for having paraphernalia in the shelter. When addressing a guest/tenant who is using substances in communal areas, staff should offer alternative solutions to use safely in other areas.

Housing First Principles:

Five Keys Schools and Programs fully supports Housing First Principles such as

- Housing is the foundation for life improvement, and “Housing First” principles enable access to permanent housing without prerequisites or conditions beyond those of a typical renter.
- We do not require individuals experiencing homelessness to address certain challenges before providing them with housing, as we can expect would be the case with a typical renter in the private market.
- Allows for and supports robust treatment for behavioral health challenges, including substance use

At all of our locations, we will have up-to-date information regarding harm reduction information, such as where to access supplies, get Narcan, maintenance meds, and more. These fliers will be hung in various locations around the sites, such as near the entrance, bulletin boards, dining room, bathrooms, and case management offices.

Overdose Reversal:

All of our staff are highly trained in Overdose Reversal; training is provided upon orientation through The DOPE Project trainers. All Five Keys Staff also attend the yearly DPH overdose training.

If a guest on site is to experience an overdose, below is how our staff will respond.

- Staff will first try to wake them by calling their name. If there is no response, staff will try to stimulate them by doing a sternum rub or a pinch to the back of the arm.
- If this still does not generate a reply, staff are trained to give the person a “verbal Narcan”.
 - Example: “John, if you do not reply, I am going to administer Narcan”. If there is still no response, staff will call 911 immediately.
- Staff will administer 1 Narcan every 2 minutes
- Staff can perform mouth-to-mouth on the guest while waiting for paramedics
- All staff carry at least 2, sometimes more, Narcan with them at all times. Our sites are stocked with nasal Narcan

Compliance:

Five Keys Schools and Programs commits to documenting all overdoses that happen in our sites with a CIR submitted to HSH promptly.



Five Keys Good Neighbor Policy

At Five Keys, we are dedicated to fostering harmonious and respectful communities within our housing programs. Our Good Neighbor Policy outlines the principles and expectations we uphold to ensure a positive living environment for all residents.

1. Five Keys shall work with neighbors, City/County Partners, Police Departments, Fire Departments, Department of Public Works (DPW), Department of Public Health (DPH), and other relevant city agencies to ensure that neighborhood concerns about the facility are heard and addressed.
2. Five Keys shall assign a director, manager, or representative to participate in and attend appropriate neighborhood and community meetings.
3. Five Keys shall also develop and maintain a proactive communication plan that includes community meetings, newsletters, and updates to nearby businesses and residents.
4. Five Keys shall provide a phone number to all interested neighbors that will be answered at all times by a supervisor or other responsible person who has the authority to respond to complaints and issues at the Site as they arise.
5. Five Keys shall minimize the impact on the neighborhood of the Site; guests entering, exiting, or waiting for services. The Site will do this by limiting referrals, not allowing walk-ins, and having 24/7 access to the Site for registered guests.
6. Five Keys shall actively discourage and address excessive noise from program participants and others who may be just outside the program Site.
7. Five Keys shall actively discourage loitering in the area immediately surrounding the program. Coordinate with other service providers and City agencies, as necessary, to address this issue.
8. Five Keys shall, in conjunction with City agencies, inform neighborhood businesses and residents of the services available at the Site and how individuals are referred.
9. Five Keys shall include a public education and outreach component that explains the program's purpose, services, and success stories.
10. Five Keys shall implement management practices necessary to ensure that staff and participants maintain the safety and cleanliness of the area immediately surrounding the facility and do not block the driveways of neighboring residents or businesses.
11. Five Keys shall clarify escalation protocols for complaints, including how we will be tracked, documented, and resolved within a defined timeframe.
12. A feedback and transparency process shall be maintained so that neighbors and stakeholders can see how issues have been addressed and resolved.
13. Five Keys shall take all reasonable measures to ensure the sidewalks adjacent to the facility are not blocked.
14. Five Keys values diversity and respects the backgrounds, cultures, and perspectives of all. Discrimination, harassment, or any form of intimidation will not be tolerated.
15. Five Keys promotes a peaceful atmosphere, and we have designated quiet hours during which guests are expected to minimize noise levels. Quiet hours typically begin in the evening and extend until the morning.
16. Guests with pets are required to adhere to our pet policy, which typically includes leash laws, cleaning up after pets, and ensuring that pets do not disturb other guests or neighbors.

Stephen Good

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Steveg@fivekeys.org

www.linkedin.com/pub/steve-good/4b/12/b33/

Management / Administrative Experience

2008 – Present **President and CEO, Five Keys Schools and Programs, (501(c)3**

Headquarters: 70 Oak Grove Street, San Francisco, CA 94107

Strategically lead Five Keys Schools and Programs from its early years as the first-ever charter high school in a county jail into a leading-edge non-profit that reengages “at-risk” and “in-risk” transitional-age youth and adults in 12 California counties through housing, education, workforce development, and reentry case management.

Developed a flexible model that welcomes partners from public and private entities to combine resources to address challenges people face while seeking to better their lives for their families and their communities.

Grew Five Keys from 13 staff members serving 175 students daily in San Francisco jails to a non-profit with holistic programs that employ more than 900 staff and reach 25,000 adults and transitional youth each year in 24 jails and at 80+ community sites in underserved neighborhoods across California.

Oversee programs in 12 counties: San Francisco, Alameda, Los Angeles, San Bernardino, Sonoma, Marin, Santa Clara, San Mateo, Solano, San Joaquin, Riverside, San Diego.

Housing

Established housing services division overseeing up to 1,246 guests at 9 shelters in San Francisco, with comprehensive case management and navigation services, in San Francisco and Alameda counties; and housing navigation for Transitional Aged Youth through SF Mayor’s Rising Up program.

Developed Five Keys Home Free, reentry transitional housing for long-incarcerated women survivors of violence; opened in 2020 with six 2-bedroom apartments on Treasure Island, with support from SF Mayor London Breed, State Treasurer Fiona Ma; funded in part by \$1 million in in-kind and cash donations.

Education

Oversee Five Keys Charter School, Adult School, Independence High School; chartered through SFUSD; including CTE programs; high school, GED, college counseling, ESL and remedial education programs at more than 23 jails and 80+ community sites serving 2,000+ students daily, pre-pandemic. Serving Transitional Aged Youth (17+) and adults.

Workforce Development

Developed workforce programs including transitional employment for formerly incarcerated and homeless individuals, digital literacy programs, workforce-oriented remedial education through WIOA Title II, and two jail-based career centers.

Reentry

Developed reentry programs, including in-custody case management for adults and Transitional Aged Youth, including cognitive behavioral programming, life skills education and community connections upon release in San Francisco and Los Angeles.

- 2018 – Present **Member: State Advisory Task Force on Alternative Schools, CDE**
Established to advise the California Department of Education on Alternative Assessment Measures for DASS Schools
- 2012 – Present **Member: Community Corrections Partnership (CCP), City and County of San Francisco**
Established through SB 678: California Community Corrections Incentive Act, the CCP (headed by the Chief of Probation) advises each county on the use of evidence-based practices in sentencing and probation
- 2015 – 2019 **Commissioner, Chairperson, Southeast Community Facilities Commission, City and County of San Francisco**
Appointed by former/late Mayor Ed Lee
1800 Oakdale Ave, San Francisco, CA 94124
- 2001 – 2007 **Principal / Director of Non-Profit Corporation / Creative Arts Charter School, (K-8, Public School / 501(c)3 Non-Profit Corporation), SFUSD**
1601 Turk Street, San Francisco, CA 94115
- 1999 – 2001 **Executive Director, Officer of Corporation, Merryhill Schools Inc., NEDI Inc.**
(7 Schools: Subsidiaries of Nobel Learning Communities Inc.)
1500 Yosemite Drive, Milpitas, CA 95353
- 1997 – 1999 **Principal, Merryhill School (K-8)**
4580 Bennett View Drive, Santa Rosa, CA 95404

Teaching Experience (1992 – 1997)

- 8th Grade US History / Literature; Rainbow Bridge Middle School, Milpitas, CA
- Economics, US History, Government; San Mateo Adult School, San Mateo, CA
- GED Program; Youth Chance High School, San Francisco, CA
- US History; San Mateo High School, San Mateo, CA

Education

Sonoma State University, Rohnert Park, CA; Master of Arts Degree: Education, School Administration
San Jose State University, San Jose, CA; Bachelor of Arts Degree: Psychology; Minor: Business Admin.

ELYSE GRAHAM

70 Oak Grove Street, SF CA 94107 415-410-8530 elyseg@fivekeys.org

PROFESSIONAL EXPERIENCE

2008 – Present Five Keys Schools and Programs San Francisco, CA

Chief Operating Officer 3/2013 - Present

- Oversee housing services division, including 9 housing programs with transitional, permanent, and reentry housing and approximately 500 employees
- Oversee development of new housing projects, including site design and plans, contractual negotiations, hiring and training, budgeting, fulfillment of contractual obligations and relationships with vendors and city and county partners
- Responsible for over \$36 Million housing budget, audit and reporting
- Implement grant funded programs and report on outcomes
- Provide leadership to academic and housing staff
- Cultivate strategic partnerships with program directors and partners
- Direct program evaluations and design strategies
- Design and lead professional development program and activities
- Set challenging cross-functional goals that support the organizational goals and strategies
- Assist President & CEO in planning and executing annual budget
- Design and implement operational plan goals and objectives for the schools and housing
- Support WASC accreditation and implementation of school-wide Learner Outcomes
- Provide monthly reports to the President & CEO
- Oversee adherence to the collective bargaining agreement
- Develop and maintain strong relationships with partner agencies that includes recruitment, goals, enrollment, program management, and furthering Five Keys' initiatives
- Provide oversight to staff related to all policies and procedures

Director of Operations 2008 – 3/2013

- Provide academic leadership to teaching and operational staff
- Mentor teachers on proper procedures for implementing and teaching approved curricula
- Develop best practices for teachers to maintain consistent teaching standards throughout school
- Monitor classroom teaching, student achievement, and goal attainments
- Develop operational functions and procedures essential for increasing productivity
- Directed areas with multiple functions together with division and department managers
- Collaborate with Directors, teachers, and partner organizations to develop, monitor, and implement curriculum in alignment with the Common Core Standards
- Ensure the successful coordination of TABE and CAHSEE administration and data collection
- Ensure efficient and effective student services processes
- Facilitate graduation planning and implementation
- Assist with the development and implementation of annual professional development goals
- Ensure all student progress is documented, including improving course assessments, attendance, grades, behavior and graduation
- Develop new partnerships, services, outreach, and recruitment activities that enhance the mission of employing the formerly incarcerated by locating businesses
- Assist in development and monitoring of classes for performance by providing clear and direct verbal and electronic feedback to teachers in a timely manner

2007- 5/2012 Acupuncture and Integrative Medicine College Berkeley, CA

Assistant Professor

- Teach public health class for Masters Degree acupuncture students. Focus is on the integration of Chinese Medicine into the arena of Community Health, disease prevention, at risk populations and health education

2006 - 2008 San Francisco Sheriff's Department San Francisco, CA

Program Coordinator

- Plan, organize and coordinate programs in the county jails; supervise and monitor the inmate/post release prisoners attendance and progress in the various programs
- Evaluate and address inmate's needs, requests and concerns regarding educational and counseling programs in the jails; provide referrals and coordinate services to assist prisoners in community reintegration
- Promote and maintain liaisons with custody staff, public and private agencies and individuals supporting the different programs; networking with community organizations and City departments
- Coordinate and ensure the movement of mandated, probations and other appropriate inmates into programs

ELYSE GRAHAM

70 Oak Grove Street, SF CA 94107 415-410-8530 elyseg@fivekeys.org

- Act as liaison between SFSD and Adult Probation and Dept. of Child Support Services to facilitate increased collaboration to better meet the needs of SFSD prisoners

2003 - 2006 American College of Traditional Chinese Medicine San Francisco, CA

Adjunct Faculty

- Teach acupuncture students in the areas of public health, chemical dependency and trauma for clients in criminal justice and substance abuse treatment setting. Ensure that students are prepared to provide culturally competent clinical services to diverse populations in various public health settings

2005 - 2006 Walden House for In Custody SISTER Program San Francisco, CA

SISTER Program Manager

- Responsible for daily operations and planning, directing and implement all aspects of the SISTER program
- Trains and directly supervises staff and integrates community providers into the program
- Responsible for client retention, successful completion and placement into treatment post release
- Ensure accurate records and compliance with Walden House guidelines and the SFSD contract
- Develop and maintain relationships and communication with custody, program staff and community agencies

2004 - 2005 Community Works, SISTER Program San Francisco, CA

SISTER Violence Prevention Counselor

- Teach violence prevention and anger management classes to those in custody
- Provide education regarding the cycles of violence, domestic violence, sexual assault and physical violence
- Facilitate support group to addresses violent behavior in women with serious violence charges

2002 - 2006 Community Works, RSVP Program San Francisco, CA

Resolve to Stop the Violence Project - Survivor Impact Group Facilitator

- Facilitate violence prevention groups with male perpetrators of violence
- Provide education about how race, class, gender and sexual orientation are intertwined in the cycles of violence

1997- 2005 Acupuncture & Recovery Treatment Services San Francisco, CA

Executive Director and Lead Acupuncturist

- Recruit and retain qualified, dedicated and diverse staff and ensure staff provided high quality, culturally competent clinical services to a diverse population
- Responsible for all contract management, fiscal and reporting accountability to all funders
- Provide acupuncture within the criminal justice system and post release at community based facilities

1994-2004 Immune Enhancement Project San Francisco, CA

Executive Director 1998-2004

- Developed innovative client centered community acupuncture program for those living with HIV/AIDS
- Responsible for \$500K annual budget, audit and reporting to government and foundation funders

Program Director 1994-1997

- Conducted intakes/assessments, evaluated eligibility and ensured compliance with best practice standards
- Ensured high quality, client centered care for those with and life threatening diseases and expanded access to treatment for an additional 200 low income clients

EDUCATION

1997 - 2006 University of Berkeley Extension Berkeley, CA

- Alcohol and Drug Abuse Studies Certificate Program

1991 - 1997 American College of Traditional Chinese Medicine San Francisco, CA

- Masters of Science in Traditional Chinese Medicine Licensed Acupuncturist State of California # 6808

1980 - 1991 San Francisco State University San Francisco, CA

- Bachelors Degree Special Study - 'Holistic Health with an Emphasis on African Americans and Women'

Brandi Marshall

Experience

12/2020 - Present

Five Keys Schools and Programs, San Francisco CA - **Director of Housing Services**

As Co-Director of Housing Services I oversee several housing sites by using strategic leadership to meet compliance, budgeting, and staffing needs.

- Monitor the operations, maintenance and record keeping of all properties to ensure compliance with city and county requirements.
- Ensure full compliance with program and development contracts and regulatory agreements, and ensure effective asset management.
- Provides site performance reports and develops corrective action plans for under-performing programs.
- Develops management plans, monitors monthly financial performance, and establishes capital improvement budgets for all properties.

10/2014 - 03/2016

Symmetry Elevating Solutions, Fresno CA- **Accountant**

Created accounting functions in a new location for a 22-million-dollar company. Also responsible for all warehouse duties including inventory and shipping.

- Responsible for all accounting functions including: A/R, A/P, invoicing, daily deposits, weekly reporting, and month end closing
- Created an organizational warehouse system to track all inventory easily. Was responsible for packaging and shipping all products timely and cost efficiently.
- Helped create a custom CRM system. Including adding fields and correcting code. Was responsible for working with India, getting quotes and getting each project completed.

10/2012 - 02/2014

St. Mary's Court Housing Development, Washington DC - **Director of Housing Operations**

All non-profit accounting and bookkeeping functions, Supervised Accounts Receivable and Human Resources department.

- Overseen Accounts Payable functions, including direct supervision of A/R specialist, oversee general ledger activities, including preparation and review of accounts reconciliations, assist in preparation of financial analysis, and maintain fixed assets.
- Human Resource duties such as hiring, onboarding, training, administer pension and health insurance plans, and payroll.

10/2005 - 08/2011

Courtyard by Marriott, Fresno CA - **AGM/Controller/Director of Human Resources**

Duties included budgeting, revenue management, journal entries, reporting, A/P, A/R, recruiting, policies, procedures, training, etc.

- Managed all day-to-day hotel operations including front desk, engineering, housekeeping, F&B.
- Performed Revenue Management duties including forecasting, flow reports, budget, and reporting.
- Performed all Human Resources duties including implementing policies, surveys, corrective actions, terminations, recruiting, training, all payroll functions, and monthly reporting to corporate office.

Education

Fresno Pacific University, Fresno- B.A., Management and Organizational Development

U.S. Army - MOS67T- B.A., Blackhawk Crew Chief (served in Iraq War)

Computer Knowledge

Advanced Excel, Advanced QuickBooks, Sage, Microsoft Office, Oracle, Famous, MAS90, Yardi, ADP PeopleSoft, Paychex, Millennium, Apple Computers, PC Computers, ICAMS, Microsoft 365, CRM, Clarity One System, RTZ.

KIM-UYEN DUONG

PROFESSIONAL EXPERIENCE

Director of Care Coordination , Five Keys Schools and Programs; Feb. 2023 - present

Leading Five Keys' team of Care Coordinators/Housing Navigators. Develop staff competencies, especially for those who are still in training or who are early-career practitioners. Foster a collaborative environment, ensuring a team-based approach to caring for those we serve. Work with our Program Directors to identify, create and implement policies, procedures, and training.

Program Coordinator, Bayview Hunters Point Foundation; June 2021- March 2023

- Oversee a team of case managers that provide field-based services to homeless individuals who are enrolled in the Rapid Rehousing and Flex Program
- Design, implement and produce reports and workflow systems to better optimize program operations
- Attend case conferences with case managers, behavioral health, and other community providers as needed
- Prepare and provides weekly updates on Rapid Rehousing and Flex housing placements and performance to the Director of Housing
- Engage in cross-functional collaboration with HSH and community partners on planning and implementing housing-related services for Rapid Rehousing and Flex program
- Ensure case managers are completing required ONE System data entry in alignment with HSH's continuous data quality improvement process
- Develop, review and revise, as necessary, all administrative policies and procedures in keeping with Appendix A

Case Manager Lead, Bayview Hunters Point Foundation; 2020-2021

- Oversee team of 6-8 Care Coordinators.
- Coached and trained Care Coordinators with an emphasis on HMIS, case management context and development
- Collaborated with site CBO and Five Keys staff on casto ensure quality service delivery and guests needs were met
- Supported staff in responding appropriately to crisis situations that arise with guests

- Developed and maintained communication and positive relationships with external organizations, institutes, and community partners
- Responsible for maintaining case notes on each client; accurate and regular input data into HMIS, maintain guest information in accordance with HSH's standards.
- Prepare and support guests in securing housing, benefits and other resources as needed
Maintain all required compliance & consistency with organizational policies & procedures in accordance with Five Keys and HSH.

Lead Guide Manager, Bonobos; 2018-2020

- Oversee and provided leadership to staff by daily coaching
- Implement and modeled customer service standards by ensuring unbeatable excellence that are aligned with customer needs, expectations, and company goals
- Developed client experience strategies and plan instore initiatives to drive product engagement, customer experience, brand loyalty, conversion and sales
- Managed and planned execution and implementation of in-store visual merchandising by creating displays for guide shop
- Provided support with the implementation of business solutions by building relationships and partnerships with key stakeholders

Senior Admin, Wells Fargo Bank; 2004-2011

- Provided support to the Head of Direct Payments and other senior level management.
Performed daily tasks including composing confidential correspondence, handling sensitive inquiries, coordinating meetings and preparing agendas

Education: Diablo Valley College; A.S. Business Administration 2005

Languages: Fluent in Vietnamese

Professional Summary

Experienced and compassionate Care Coordinator with a strong background in guest engagement, case management, and interdisciplinary collaboration. Proven ability to conduct comprehensive assessments, develop care plans, and ensure program compliance. Committed to improving service delivery through effective communication, accurate documentation, and ongoing quality assurance.

Core Competencies

- Multidisciplinary Team Collaboration
 - Program Oversight & Compliance
 - Goal Setting & Strategic Planning
 - Documentation & Data Management
 - Quality Assurance & Policy Adherence
 - Client Engagement & Advocacy
 - Scheduling & Case Management
 - HMIS & Apricot Database Proficiency
 - Launched new sites in various counties to ensure highest quality of guest care
 - Integrating policies and procedures into client service workflow
-

Professional Experience

Assistant Director of Care Coordination

Five Keys Schools and Programs, Oakland, CA **August 2024 – Present**

- Provide oversight for the Care Coordination team throughout the state at all sites
- Responsible for ensuring guest services, documentation and placement into permanent housing
- Oversee of all data tracking and accuracy in the HMIS and other systems
- Provides leadership to the entire care coordination and intake teams at all site
- Responsible to liaison with the City / County representatives, funders, other stakeholders

Care Management Supervisor

Five Keys, San Francisco & Alameda County, CA **July 2023 – August 2025**

- Led continuous improvement of resident care through updated policies and procedures.
- Provided leadership and training to Care Coordinators and ensured policy implementation.
- Maintained compliance with HMIS and Apricot databases for accurate data tracking.
- Completed detailed assessments and collaborated on individualized care plans.
- Fostered a supportive and trauma-informed care environment for all clients.

Care Coordinator

Five Keys, San Francisco, CA **June 2022 – July 2023**

- Conducted comprehensive guest assessments aligned with regulatory guidelines
- Supported complex cases by coordinating with external community services
- Strengthened community relations through events and resident engagement.
- Contributed to policy updates and continuous care quality improvement
- Responsible for documenting guest outcomes in HMIS and Apricot databases.
- Completed detailed assessments and collaborated on individualized care plans.

- Fostered a supportive and trauma-informed care environment for all clients.

Ambassador

Five Keys, San Francisco, CA **January 2022 – May 2022**

- Created a welcoming environment and assisted in daily operations
- Engaged with guests to build rapport and ensure service satisfaction.
- Supported service recovery processes through compassionate communication.

Personal Vehicle Driver

UPS, San Ramon, CA **November 2020 – December 2020**

- Sorted and delivered packages using personal vehicles while meeting delivery timelines.
- Maintained efficiency and accuracy in route completion.

Location Manager: SMG @ Moscone Center, San Francisco, CA **March 2002 – Present**

- Managed food service concessions, inventory ordering, and daily operations.
- Supervised staff and ensured exceptional customer service during high-volume events.

Utility Worker: SMG @ Moscone Center **March 2002 – Present**

- Assembled and stocked mobile food concessions.
- Delivered perishable and non-perishable inventory across site locations.

Food Service Worker / Cashier: SMG @ Moscone Center **March 2002 – Present**

- Processed customer transactions using the Micros register system.
- Ensured cash handling accuracy and maintained customer satisfaction.

Education

High School Diploma: *Independence High School, San Francisco, CA* **June 2000**

Additional Trainings

- Goodsoil Leadership Pathway - 6 month certification (Management & leadership skills, communication, change management, team building, coaching)
- Goodsoil: Sprouting Leaders 6 month certification (Advance leadership, non-violent communication, emotional intelligence, decision making tools, leadership styles, month long capstone project)
- Case Management Standards of Care (i.e. motivational interviewing, trauma-informed care, effective communication).
- Emotional intelligence and fostering inclusive environments
- Behavioral health and medical service integration
- Mental Health Cultural CompetencyMental Health & Substance Abuse 101
- HMIS Training on intakes, document uploading, services, case notes and reports
- Case Management and Systems Navigation 1, 2, 3
- Americans with Disabilities Act and Reasonable Accommodations
- Denials of Service

Brandi Taliano

Oakland, CA | talianobrandi@gmail.com | 510.518.8698

Professional Summary

Dedicated and compassionate professional with extensive experience in direct service, shelter operations, and systems navigation for individuals experiencing homelessness and incarceration. Proven leadership in managing emergency shelter sites, collaborating with cross-sector partners, and advocating for systemic change. Committed to trauma-informed care, restorative justice, and community empowerment.

Professional Experience**Five Keys Schools and Programs, San Francisco, CA****Site Director: *OakDays (formerly Days Hotel), Oakland, CA November 2021 – Present***

Oversee day-to-day operations of a Shelter-in-Place (SIP) site serving medically fragile and vulnerable individuals experiencing homelessness. Lead all programmatic, administrative, fiscal, and compliance functions while ensuring trauma-informed, equity-centered service delivery. Develop and sustain cross-sector partnerships with public health, behavioral health, and housing agencies to coordinate wraparound care. Implement and refine Housing Navigator protocols to align with Five Keys' mission and city/county guidelines. Supervise staff performance, oversee data and reporting systems, and ensure site adheres to local, state, and federal regulatory standards. Oversee the transition from an interim housing shelter to PSH under a HomeKey grant.

Assistant Site Director: *August 2020 – November 2021*

Provided operational leadership at a high-volume shelter site under Five Keys' housing division. Supervised daily functions including facilities maintenance, staff scheduling, and payroll management. Collaborated with partner agencies and internal leadership to ensure consistent application of harm reduction practices, resident safety, and housing stabilization efforts. Attended city and provider coordination meetings to align services with Oakland's homelessness response system.

Supervisor – Shelter-in-Place Hotel Site 10, San Francisco, CA: *March 2020 – July 2020*

Led Ambassador team supporting unhoused individuals placed in SIP hotels as part of the City's COVID-19 emergency response. Fostered a safe, welcoming environment rooted in respect and harm reduction. Supported day-to-day client needs, de-escalated conflicts, and liaised with case management and medical staff to ensure timely service delivery. Promoted trauma-informed engagement and modeled compassionate care under complex circumstances.

Ambassador – Embarcadero Navigation Center, San Francisco, CA: *January 2020 – March 2020*

Supported shelter guests at a low-barrier navigation center offering intensive case management and pathways to permanent housing. Provided frontline support, reinforced site safety, and built trust with residents through consistent, respectful engagement. Helped create a positive, responsive environment in alignment with Five Keys' trauma-informed, client-centered approach.

Beyond Violence / Chowchilla, CA

Healing Trauma Facilitator: 2018 – 2019

- Facilitated curriculum-based sessions focused on trauma healing and violence prevention for justice-involved individuals.

Program Clerk / Chowchilla, CA 2012 – 2018 and 1997 – 2009

- Provided clerical support to facility administrators and program officers.
- Recognized for professionalism, accuracy, and positive workplace demeanor.
- Supported command staff and program offices; handled correspondence and admin duties.
- Earned multiple commendations for work ethic and reliability.

Women's Advisory Council Vice Chairperson / Chowchilla, CA 2009 – 2011

- Acted as liaison between incarcerated women and facility leadership.
- Advocated for improved services and led initiatives to enhance facility conditions.

Education

Blackstone Career Institute, Allentown, PA | 2018–2019

- Paralegal Certificate

Coastline Community College, Fountain Valley, CA | 2006–2007, 2012–2016

- Social and Family Behavior AA
- Business AA
- American Studies AA
- Sociology AA
- Business Certificate AA

Associate of Arts Degrees (Honors) Feather River College, Quincy, CA | 2008–2010

- Behavioral Science and General Studies Associate in Arts Degree in Behavioral Science and General Studies, Honores

Additional Coursework

- Goodsoil Leadership Pathway 2024 - 6 month certification
Management and leadership skills, communication, change management, team building, coaching
- Sign Language 2010-2012
- Women in Prison 2007

Advocacy & Volunteer Work

- **Cardea Health** - Board Member at large
- **California Coalition for Women Prisoners (CCWP)** – Advocate
- **Restorative Justice & Youth Outreach** – Beyond Incarceration Program
Advocate for **sexually exploited and unhoused women**
- Active participant in **community-based public safety and housing reform**

Personal Statement

I bring lived experience and a deep commitment to my work with justice-impacted and unhoused populations. Through years of advocacy, facilitation, and leadership, I have developed a trauma-informed, equity-driven approach to service and systems change. I live and love what I do, and I remain committed to working for a more just, humane, and accountable system for all.

SAMANTHA EVANS

San Francisco, CA 94102 ♦ 408-876-0746 ♦ evanssamantha730@gmail.com

SUMMARY

Proven ability to lead teams, ensure regulatory compliance, and implement quality assurance measures that improve service delivery and operational efficiency. Seeking to advance into the role of Director of Compliance and QA, where I can leverage my expertise in program oversight, policy implementation, and performance evaluation to support organizational excellence and uphold the highest standards of care.

SKILLS

- Computer proficient in Microsoft Office and G Suite.
- Supervision and training staff
- Ability to assess and increase productivity in operations
- Quality Management Systems
- Strong management skills
- Works well in a fast paced environment
- Policy & Procedure Development
- Leadership: Ability to motivate, encourage and instruct others
- Flexibility: Able to work well under pressure and fast paced environments
- Ability to use time and resources effectively and efficiently
- Able to plan and account for all assigned tasks

WORK EXPERIENCE

[Fivekeys](#)- San Francisco, Ca

2024 to Present

Assistant Director

- Managed the largest site at Five Keys
- Executed all training logs
- Conducted one on one meetings with Ambassadors/Supervisors
- Paycom proficiency
- Enforced policy and procedures for all staff
- Trained and mentored new employees on operations
- Established team priorities, maintained schedules, and monitored performance.

[Fivekeys](#)- San Francisco, Ca

2022 to 2024

Supervisor

- De-escalation of potential client conflicts
- Inspecting the facilities to maintain security and program compliant
- Helping orient all participants to program rules and responsibilities of the Navigation Center
- Ensure compliance with the rules and regulations in a fair and equitable manner for all participants

[Checkr](#) - San Francisco, Ca

2021 to June 2024

Client Support Representative

- Help customers with questions and educate Checkr clients about the product and process best practices via email, phone, chat and other channels in a professional, empathetic manner
- Escalate complex issues to appropriate internal and external parties
- Provide feedback about how we can, as a team and company provide an industry leading customer experience

Avellino Labs – Menlo Park , CA

2021 to 2023

Lab Accessioner

- Support the clinical lab with sample intake
- Receive, unpack, login, organize, label, and distribute incoming clinical specimens
- Enter and verify data into lab database
- Prepare samples for testing
- Support administrative functions of the lab as required
- QC vials to ensure all samples meet requirements
- Follow all safety procedures, policies, and procedures

California Marketing Group – Dublin , CA

2015 to 2021

Quality Assurance Supervisor

- In charge of training for 200-Person Call Center
- Measured Call Center Productivity Metrics
- Maintain a formal quality assessment program in accordance with Program Statement
- Lead continuous evaluation and investigation of repetitive negative behaviors
- Implement Performance Improvement Plans to meet Quality standards
- Audit recorded calls to ensure agent compliance to customer expectations
- Maintain a comprehensive document control program
- Acted as center's subject matter expert in all issues related to Quality

EDUCATION

American Society of Quality - Dublin, CA 2020

Certificate: Quality Improvement Associate

Department of Labor - Dublin, CA 2017

5400 Hour Apprenticeship : Customer Service Representative

Heald College - Salinas, CA 2012

Courses in Applied Science : Medical Assistance

Sierra Nevada High School - Nevada City, CA 2009

High School Diploma

References Available Upon Request



Five Keys' holistic services model is rooted in collaborative partnerships. We created the Community Action Partnership Alliance (CAP Alliance) in 2015 and launched the Stockton chapter in San Joaquin County in 2021.

The Stockton Chapter of CAP Alliance is dedicated to helping formerly incarcerated individuals build stronger foundations for successful reintegration into society. The chapter offers a comprehensive range of support services, including job readiness programs, housing assistance, mentorship, and life skills training. Members work closely with local businesses, nonprofits, and community leaders to ensure that each individual has access to the resources they need for long-term stability and personal growth. Focused on reducing recidivism, the Stockton Chapter empowers returning citizens to rebuild their lives, contribute to their communities, and secure a brighter future. Together, we are creating pathways to success and fostering a more inclusive, supportive environment in Stockton.

While Five Keys provides a steady administrative backbone, local CAP chapters are intentionally not branded as projects of Five Keys so that they are self-guided by local members. The San Joaquin chapter has more than 50 members representing agencies, nonprofits, faith-based organizations, and businesses that work together to improve local reentry outcomes. The CAP Alliance frequently meets by Zoom and at our Stockton training center at 611 W. Fremont Street where we host meetings, job readiness trainings, and referral fairs for program participants. The site has a tech hub with computer workstations for online classes, work on resumes, and job seeking and housing searches, with on-site staff support.

This meeting space is also used for mock job interviews; CalJobs account signups; basic technology classes, and community-building. We host presentations from Friends Outside, El Concilio Social Services (such as how to restore a revoked Driver's License); Orientation to San Joaquin County WorkNet/EDD (to access job training and placement support); Union delegates providing workshops on trades laborer pathways; Sessions about the importance of CPR and OSHA certifications; Chase Bank financial literacy programs; and Community College orientations to the Phoenix Program for justice-impacted students.

Eduardo Crabbe - Chair of CAP Stockton & Peace Keeper with OVP
Eduardo.Crabbe@stocktonca.gov

Maria Almanza - Cochair of CAP Stockton & Program Manager with El Concilio California
malm@elconcilio.org



Dear City Council Members and City Staff,

We would like to begin by expressing our sincere gratitude for the opportunity to have operated the Temporary Lodi Access Center over the past year. It has been an honor to serve our community through this initiative, and we are deeply appreciative of the trust the City of Lodi has placed in us.

Over the past twelve months, the Lodi Access Center has proven to be an essential resource for individuals experiencing homelessness in our city. Through consistent engagement, compassion, and collaboration, we have helped **174 individuals transition into housing or rehabilitation programs**. Additionally, **51 guests have successfully gained employment** through our support services, case management, and partnerships with local employers. These outcomes represent an estimated **\$6 million in savings for the City of Lodi** through reduced emergency services, law enforcement calls, encampment cleanups, and decreased strain on the hospital system.

These results reflect not only our commitment but also the effectiveness of our relationship-based approach. Our dedicated team continues to meet people where they are—physically, emotionally, and spiritually—helping them take the next step toward stability and hope. Many of those we serve have lived on the streets for years, often losing faith in the possibility of change. Yet, through consistent care, trust, and accountability, we have witnessed remarkable transformation.

Our team remains deeply committed to the City of Lodi’s vision of a compassionate and coordinated response to homelessness. We have built strong working relationships with local law enforcement, social service providers, and community partners, ensuring that the Access Center operates safely, efficiently, and in alignment with city goals.

Since 2009, **Outreach Ministries International**, doing business as **Gravity Church**, has been engaged in this mission—pioneering outreach efforts in Lawrence Park, building bridges between local churches, businesses, and civic agencies, and walking alongside those society often overlooks. The past year has reaffirmed what we have always believed: when the community works together, transformation is possible.

As we look toward the future, we respectfully ask for the opportunity to continue operating the Lodi Access Center, expanding our capacity to serve, and strengthening our city’s coordinated care system. We are confident that, together, we can build upon this solid foundation to reach even more individuals in need.

Please find attached letters of recommendation from **United Way of San Joaquin County**, **St. Mary’s Community Services**, and **Lodi Community Foundation**, as well as our detailed **Lodi Access Center Statistics and Savings Report**.

Thank you for your time, partnership, and continued commitment to the people of Lodi.

Sincerely,

Jason McEachron

CEO - Outreach Ministries International

Pastor Gravity Church

DOING GOOD FOR 100 YEARS

1926 UNITED WAY OF SAN JOAQUIN COUNTY 2026

October 29, 2025

To Whom It May Concern,

United Way of San Joaquin County is pleased to express its strong support for the life changing work being conducted at the Lodi Access Center, operated in partnership with Outreach Ministries International (OMI). The Center has proven to be a vital community resource—uniting service agencies, faith-based organizations, and local leaders to address homelessness, housing instability, and related health and social challenges with compassion, dignity, and measurable results.

Through its leadership and proven ability at the Lodi Access Center, OMI has demonstrated an unwavering commitment to the well-being of the Lodi community. Their dedicated outreach and case management efforts have effectively connected unsheltered individuals to critical services, reduced reliance on emergency systems, and strengthened coordination among local providers. The impact of this work had saved the City of Lodi over \$5M in resources that would have otherwise been expended by the city. OMI's work at the Lodi Access Center is a model of partnerships between public and private entities and collaborative efforts towards a common goal.

United Way of San Joaquin County recognizes that measurable success OMI has achieved over the past year and the business acumen with which it operates. We are confident that the organization's proven results, community trust, and collaborative approach position it as a strong and deserving candidate for future grant and partnership opportunities.

Our thanks for your consideration of OMI for this and future grants in helping reduce homelessness in Lodi and surrounding cities in San Joaquin County.

Sincerely,



Kristen Birtwhistle
President/CEO
United Way of San Joaquin County



October 31, 2025

Ms. Jennifer Rhyne
Neighborhood Services Manager

City of Lodi
221 W. Pine Street
Lodi, CA 95240

RE: Letter of Recommendation for Outreach Ministries International – Lodi Access Center Operator Application

Dear Ms. Rhyne,

On behalf of St. Mary's Community Services, I am pleased to recommend Outreach Ministries International for selection as the operator of the permanent Lodi Access Center.

St. Mary's Community Services exists to create pathways out of homelessness and poverty by offering essential daily services and supportive programs provided with dignity. Through our partnership with Outreach Ministries International, we have established an effective continuum of care that addresses critical service gaps between Stockton and Lodi, ensuring individuals experiencing homelessness receive comprehensive support across our region.

Outreach Ministries International has consistently demonstrated its capacity to help individuals experiencing homelessness achieve self-sufficiency. Their client-centered approach has earned the trust and respect of both services providers and the people they serve. This strong foundation enables our organizations to collaborate effectively on current initiatives while strategically planning for expanded services that meet evolving community needs.

The continuation of services at the Lodi Access Center under Outreach Ministries International's leadership is essential for our community. Their proven track record, deep understanding of local needs, and commitment to collaborative service delivery make them an ideal partner to operate this vital resource.

We strongly support Outreach Ministries International's application and are confident they will continue to provide exceptional services to individuals experiencing homelessness in Lodi. Should you request an additional information, please do not hesitate to contact me at (209) 290-2823 or kfiser@smcares.org.

In partnership,

A handwritten signature in blue ink that reads "Krista M. Fiser".

Krista M. Fiser, MA
Chief Executive Officer

November 3, 2025

Creating lasting legacies that build a stronger Lodi community.

Chairperson

John K. Ledbetter

Vice Chairperson

Trenton Diehl

Treasurer

Drew Stroud

Secretary

Daniel Castillo

Board Members

Christine Franklin

Corie Stewart Trujillo

JP Doucette

Matthew Soeth

Megan Galarneau

Obaid Khan

Sabrina Schneweis-Coe

Shelby Young

Whitney Kesterson

Emeritus

MaryAnn Maggio

Chief Executive Officer

Louis Ponick

Re: Support for the Lodi Access Center (Lodi, CA)

To Whom It May Concern,

The Lodi Community Foundation is pleased to express its support for the Lodi Access Center and the essential services it provides to our community. The Center plays a critical role in addressing homelessness in Lodi by offering coordinated access to resources, support, and care for individuals and families in need.

The work being done at the Lodi Access Center continues to have a positive and measurable impact on our community. Outreach Ministries International, as the Center's current operator, has stepped forward to take on the significant responsibility of managing the Center. Their dedication and effectiveness have ensured that the Lodi Access Center continues to meet the growing needs of our community.

Maintaining a long-term, stable, and capable operator is vital to ensuring the continued success and sustainability of the Access Center. A consistent, experienced organization is key to delivering high-quality services and maximizing the positive outcomes already being achieved.

The Lodi Community Foundation recognizes the importance of the Access Center's mission and supports Outreach Ministries International's bid to serve as the operator of the permanent Access Center.

Thank you for your consideration and for your ongoing commitment to advancing the work of charitable organizations serving the greater Lodi area.

Sincerely,



Louis Ponick
Chief Executive Officer
LODI COMMUNITY FOUNDATION
Phone: 209.400.7192



Impact by the Numbers

1-year Operational Summary

Program Engagement

- 59 clients have entered rehabilitation program
- 39 clients have remained in or successfully completed the program

Housing Transitions

- 115 clients have transitioned into housing
- 97 clients remain successfully housed
 - *(Includes 10 clients who transitioned to a long-term, more accommodating shelter)*

Employment Outcomes

- 51 clients have gained employment
- 33 clients remain employed

Client Totals

- A total of 174 transitions (to either programs or housing)
*10 clients transitioned twice → **164 unique individuals transitioned***

Estimated Cost Savings to the City of Lodi

Calculation Step	Formula	Amount
Estimated annual cost per unsheltered person	$\$60,000 \times 164$	\$9,840,000
Subtract Lodi Access Center annual budget	$\$9,840,000 - \$1,500,000$	\$8,340,000
Apply success rate (78.1%)	$\$8,340,000 \times 0.781$	\$6,513,540

Estimated Cost Savings (12 months): **\$6,513,540**

@ \$56,800 per person = \$6,103,671

References: www.pacificcbpr.org/wp-content/uploads/2023/04/San-Joaquin_2022_Cost-of-Homelessness-Report.pdf

**According to the 2022 San Joaquin County Cost of Homelessness Survey Summary Report prepared by University of the Pacific, the cost of homelessness in San Joaquin County in 2021 was estimated between \$131.8 million and \$160.2 million. The survey report also estimated that the average cost per individual homeless person was between \$56,800 and \$69,100.*

***The average cost per individual equals \$62,950. The above calculation rounds the cost down to \$60,000 per individual.*

****This total cost does not include the additional number of clients currently residing at the Lodi Access Center. The average bed count for overnight stays for the month of July was 37.*



REQUEST FOR PROPOSAL

FOR

ACCESS CENTER AND EMERGENCY SHELTER OPERATIONAL MANAGEMENT SERVICES

City of Lodi
Community Development Department
Neighborhood Services Division
221 W. Pine Street, Lodi, California 95240
Ph: 209-269-4519
NeighborhoodServices@lodi.gov

IV. PROPOSER INFORMATION

1. **Name of Entity or Organization:** Outreach Ministries International
2. **Address:** 935 S. Central Ave, Lodi, CA 95240
3. **Mailing Address (if different than above):** 715 S Central Ave, Lodi, Ca 95240
4. **Executive Director/CEO (Name, title, email, phone number):** Jason McEachron, CEO, jason@gravitychurch.com, 209-327-0669
5. **Contact Person (if different than above):**
6. **Number of years organization has been in business:** 42 Years
7. **Number of years organization has operated as a 501 (c) (3):** 42 Years
8. **Federal Tax ID Number:** 94-2876623
9. **Has this organization operated under another name? (X) Yes () No**
 - a. **If yes, list all previous names:**
 - o Gravity Church
 - o Agape Love
 - o Second Step Living
 - o His Place Food Bank
 - o Bridges and Breadcrumbs

10. Are you registered with sam.gov? (X) Yes () No

If yes, please provide UEI number: **LD6WQWAKRKV1**

If no, please register for UEI number at <https://sam.gov/entity-registration>

11. Number of year's organization has conducted the program for which services are being requested: 17 Years

12. Provide 3 References to speak to your organization's work and successes with homelessness services:

1. St. Mary's Community Services - Krista Fiser (Chief Executive Officer)
Email: kfiser@smcares.org
Phone: (209) 290-2823
2. United Way - Kristen Birthwhistle (President & CEO)
Email: kbirtwhistle@unitedwaysjc.org
Phone: (209) 642-0725
3. Lodi Community Foundation - Louis Ponick (CEO)
Email: lponick@lodicf.org
Phone: (209) 400-7192
4. CVLIHC/HMIS - Jon Mendelson (Executive Director)
Email: jmendelson@cvlihc.org
Phone: (209) 472-7200 ext. 104
5. Community Partnership - Lynsey Nuss (Interim Executive Director)
Email: LNuss@cpfsj.org
Phone: (209) 269-8262
6. Lodi Committee on Homelessness - John Ledbetter (Former LCOH Chairperson)
Email: john@vinofarms.net
Phone: (209) 481-7606

13. Describe your organization’s history and experience in providing services to individuals experiencing homelessness:

In 1982, Outreach Ministries International (OMI) began outreach services in Stockton, Ca. Our initial location was located on Pacific Avenue and we opened a free coffee shop drop-in center named ‘The Youth Connection’. We operated free weekly music concerts, food and outreach events to connect people with services. Though the homeless community looked different then, they were still in need of resources and life direction. In 2005, we began weekly homeless outreach in Lawrence Park in Lodi which included hot meals, clothing and other resources. We have continued those outreach endeavors in various functions ever since. Many of the original people we engaged from Lawrence Park are now living productive lives off of the streets. Starting in 2024 we were awarded the operations for the Lodi Temporary Access Center and will continue the operations until the permanent access center operations are implemented.

14. Describe the organization’s current approach to outreach and service delivery, particularly for unsheltered individuals or highly vulnerable populations:

In addition to the daily outreach efforts conducted through the staff at Lodi Access Center, we offer (7) different delivery methods for our services..

Second Step Living Homes: Transitional housing placement for clients that have successfully completed treatment

Agape Love: Weekly homeless outreach events providing hot meals, clothing, hygiene care (showers, haircuts), and connection with mental health resources and weekly outreach via teams going to encampments.

His Place Food Bank: Weekly food box distribution.

Gravity Church: Weekly classes and support groups (Recovery Meeting, Mental Health Meeting, Bible Studies, etc.) every day of the week.

Bridges and Breadcrumbs: Homeless outreach and life coaching with a focus on employment, housing, and referrals to community services.

CalTrans Weekly Meeting: Check-in meetings with CalTrans, CHP, local police departments, and various other outreach providers; scheduled cleanups, areas of concern, and strategizing are discussed

Bi-weekly County Outreach: Outreach workers from BHS, Prevail, Lodi PD, Community Medical Center, and the OMI Lodi Access Center perform a joint outreach in Lodi

V. PROPOSAL NARRATIVE

Proposers must provide responses to each of the items listed below. Responses should be clear, concise, and limited to 500 words or less per question, unless otherwise specified.

Where applicable, Proposers are encouraged to reference or attach sample policies, procedures, or other supporting documents that substantiate their responses. Attachments are not subject to the 500- word limit and may exceed that restriction as needed to provide adequate context or documentation.

Failure to respond to all required items may result in the proposal being deemed non-responsive.

1. Service Summary

Provide a summary of the proposed services to be delivered, including a high-level description of work to be performed and the key outcomes your organization expects to achieve.

The Low-Barrier Lodi Access Center (LAC) provides a comprehensive and compassionate range of services designed to support individuals experiencing homelessness or housing instability. The program is structured around three core phases—Flow In, Flow Within, and Flow Out—each addressing a critical point in a client’s journey from crisis to stability. The LAC model emphasizes dignity, accessibility, and long-term outcomes that strengthen both individuals and the greater Lodi community.

Flow In (Client-Focused)

Outreach Ministries International (OMI) conducts trauma-informed, person-centered outreach to engage individuals with empathy and respect. Outreach workers meet people where they are, providing information about the Access Center, connecting clients to resources, and helping them set achievable goals. Building trust through consistent, non-judgmental engagement is the first step toward long-term solutions and breaking the cycle of homelessness.

Expected Outcomes:

- At least 20 referrals to the LAC per month
- At least 5 referrals per month to other shelters, programs, or housing

Flow Within (Client-Focused)

The LAC offers a safe, low-barrier shelter where clients can access immediate necessities and supportive services that promote stability and well-being.

- Showers: Daily access to clean, private facilities
- Meals: Three nutritious meals daily plus snacks on request
- Case Management: (Provides personalized support to navigate resources, set goals & overcome barriers)
- Transportation: Help with transit to appointments, employment, and essential services
- Benefits Access: Guidance for SSI, SDI, Disability, or Veterans benefits
- Resource Navigation: Referrals to health, legal, family, and behavioral services
- Workforce Development: Training, job readiness, and employment placement support

Expected Outcome: Operate at or near full capacity, providing consistent safety and stability for individuals in crisis.

Flow Out (Client-Focused)

This phase focuses on long-term success and community reintegration.

- Recovery Programs: Connection to substance abuse treatment and ongoing recovery support
- Housing Navigation: Assistance finding, securing, and maintaining stable housing, including budgeting, credit repair, and utility setup
- Workforce Development Partnerships: Continued support for employment retention and career advancement

Expected Outcomes:

- 20+ clients transitioned per month into rehabilitation or housing programs
- 8–10 employment gains per month with expanded resources and partnerships

Community-Focused Components

The Access Center also delivers meaningful benefits to the broader Lodi community through outreach, education, and collaboration.

Community Outreach:

OMI partners with local hospitals and emergency services to reduce non-emergency calls, easing the strain on public systems and saving taxpayer dollars. Outreach workers also respond directly to calls from citizens and business owners, ensuring that individuals in need receive timely support and community concerns are resolved.

Community Engagement:

Public tours, presentations, and volunteer opportunities invite residents to experience the Center's impact firsthand. These efforts foster understanding, reduce stigma, and inspire ongoing community support and involvement.

Partnerships:

Collaborations with local businesses and organizations expand workforce opportunities while strengthening civic engagement. OMI is also developing a pressure washing and street cleaning service, which would provide employment for clients and contribute to a cleaner, more welcoming community. Strong partnerships with faith-based organizations and Second Step Living further extend housing options and holistic support.

2. Organizational Experience

Describe your organization's experience with programs or services similar to those described in the RFP. If the scope of work is new to your organization, describe the relevant expertise, partnerships, or resources that will support successful implementation.

Our experience in providing services comes from years of extensive and intentional outreach to the homeless community. We have learned the unique challenges that they face and have provided resources to them primarily by providing weekly outreach, food boxes, hot meals, clothing and referrals. We have members that have worked and/or are still working in other temporary and transitional housing programs. Our team has extensive experience with the "trenches of homelessness" because many have been homeless and hopeless themselves. Those members have developed relationships and trust with Lodi's homeless population. With connections to a vast variety of resources including recovery meetings, drug rehabilitation facilities, ADA compliant shelters, transitional living, side-job employers, career-offering employers, private practice services, referrals to county services, the OMI team is able to cater to every aspect of a person experiencing homelessness. OMI is a team of business owners, homeless advocates, licensed and certified substance abuse counselors, pastors, chaplains, sponsors, and mental health and addiction treatment professionals.

Our most notable accomplishment of experience has been over the last year while operating the 46-bed temporary Lodi Access Center. In that time, OMI has successfully transitioned **174 clients into housing or supportive programs** and helped **51 clients gain employment**—an average of 14 individuals per month. Economically, these outcomes represent an estimated **\$6 million in savings** for the City of Lodi through reduced emergency, law enforcement, encampments cleanups, and hospital system strain. We are experts at working in the trenches of homeless advocacy, outreach and transitioning into new lifestyle opportunities. Employment, rehabilitation, and stable housing are the 3 primary areas that we focus on.

3. Collaborative Partnerships

Describe current and past collaborations with other nonprofits, government agencies, faith-based organizations, and community stakeholders relevant to homelessness, housing, health, or supportive services.

Collaborative Partnerships

At the heart of Outreach Ministries International (OMI) there is a deeply collaborative philosophy that understands that *meaningful progress in addressing homelessness, housing instability, and health challenges requires the sustained engagement of a diverse network of partners*. Through this community-centered approach, we have expanded our reach and impact, ensuring that clients benefit from a continuum of care tailored to their unique needs.

Shelter Partners

Over the past year, OMI has strengthened relationships with key shelters to enhance coordinated care and improve outcomes. Together, we share a belief that homelessness is a community issue best addressed through collaboration. The Salvation Army Hope Harbor is both a neighbor and a partner, working alongside us through collaborative case management and shared resources. Saint Mary's Dining Room provides medical respite beds, Homeless Court services, and comprehensive shelter care, while Gospel Center Rescue Mission offers additional bed space and recovery services. The Tracy Shelter accommodates older, disabled clients, and Prevail supports families and teens escaping domestic violence with safe shelter and trauma-informed care.

Housing Partners

Stable housing is foundational to long-term success, and OMI's partnerships with local landlords, nonprofit housing developers, and transitional housing providers ensure that clients have access to diverse housing options. Key collaborators include Central Valley Housing/Coordinated Entry System, San Joaquin Housing Authority, and Visionary Home Builders, which facilitate access to low-income housing. Second Step Housing's landlord-partnership model supports both housing supply and the local economy, while Lodi House provides transitional housing for single mothers. Valley Sober Living and Lilly Pad offer supportive sober living environments, and Sunny Day Communities provides affordable options for low-income seniors.

Rehabilitation Partners

OMI does not operate its own rehabilitation program, instead we match clients with the programs best suited to their individual goals and needs. Our network includes San Joaquin County Recovery House, New Directions, Adult & Teen Challenge in Turlock, the Salvation Army, Gospel Center Rescue Mission (Stockton and Modesto), Jordan's Crossing in Oroville, and Redwood Family Center in Modesto. This individualized placement approach honors client choice and maximizes the potential for long-term recovery.

Community and Agency Partners

OMI collaborates with many agencies to provide wraparound services. United Way of San Joaquin County supports OMI's pursuit of Medi-Cal ECM and CS services, overseeing billing and assisting with grant development. Grace and Mercy Charitable Foundation provides weekday lunches, while the Community Partnership for Families offers immigration, healthcare/benefits coverage, and employment assistance. San Joaquin County Behavioral Health and Whole Person Care provide on-site evaluations and case management for at-risk clients, and OMI's partnership with the Social Security Administration has streamlined benefit access. Local churches—Gravity Church, First Baptist Church of Lodi, Faith Community Lodi, and many more—contribute facilities, volunteers, and spiritual support, while the Child Abuse Prevention Council provides family counseling and advocacy.

Every Monday, Gravity Church hosts a collaborative outreach consisting of Agape Love, Take a Chance with Christ Clothing Ministries, Showered With Love, and Community Medical Center. While food, showers, healthcare, and clothing are provided, trust is being gained and the bridge to the LAC is being built.

4. Operational Methodology

Provide an overview of your approach to operating the City's Access Center and Emergency Shelter, including how you plan to scale services to meet evolving needs.

Program Operations and Service Plan

To provide a safe and inclusive environment, the Lodi Access Center (LAC) will maintain a low-barrier intake process, ensuring eligibility regardless of sobriety, mental health status, pet ownership, partnerships, possessions, or income level. This approach allows clients to gain stability while addressing health and behavioral challenges and focusing on long-term recovery and the ultimate goal — **long-term viable housing**.

Security and Intake:

Before admission, clients are screened through meganslaw.ca.gov and nsopw.gov to ensure community safety. Although overnight family units are not available, parents and children are welcome to receive daytime services. Clients must be ambulatory and have a connection to Lodi. During intake, each individual signs an agreement to follow the LAC's rules and policies. No drug or breathalyzer test is required; however, clients must demonstrate **coherency, stability, and compliance** to enter.

Each client receives an **HMIS identification card** for entry, exit, meal distribution, and access to services. Upon arrival, clients are searched for drugs, alcohol, paraphernalia, and weapons to maintain safety. Staff are trained in OMI policies, procedures, Emergency & Fire Preparedness, Active Shooter Response, Workplace Violence Prevention, Conflict Resolution, and all hold certifications in **CPR/First Aid, Narcan administration, and Mental Health First Aid** to ensure compassionate and capable care.

Services:

OMI case managers provide hands-on support to help individuals apply for **SSI, SDI, Disability, VA benefits**, and other assistance programs. Collaborations with county departments and community agencies streamline applications and reduce wait times. Regular information sessions help clients overcome barriers to enrollment.

LAC services focus on:

- Coordinated referrals and connections to community resources.
- Employment readiness and workforce development opportunities.
- Education and training on budgeting, health, and daily stability.
- Support for recovery and successful transitions into permanent housing.

HMIS and Reporting:

Clients are enrolled in one or more **HMIS program categories**:

- Outreach
- Day Services

- Shelter Services
- Housing Sustainability and Tenancy

Within each program, services such as meals, showers, transportation, and employment progress are tracked. A full-time HMIS Specialist maintains data integrity, logs services, updates records, and prepares reports. HMIS enables OMI to **measure outcomes, demonstrate success, and meet grant reporting requirements.**

Evolving Needs:

To meet changing community needs, OMI will remain adaptable:

- **Outreach:** Additional staff will be trained to provide outreach when needed.
- **Capacity:** If the need exceeds 60 beds, flex space will be utilized and additional staff hired, with per-bed cost adjustments.
- **Reporting:** If funders require additional documentation, multiple staff will receive HMIS training for expanded reporting.
- **Housing:** Through its Second Step Living model, OMI partners with local landlords to add bed space as needed and maintains relationships with transitional housing providers outside San Joaquin County to ensure timely placement.
- **Recuperative Care:** OMI partners with a Health Plan of San Joaquin County provider certified to offer recuperative care. Pending more discussion and city approval, OMI would consider utilizing the “flex space” for a recuperative care option.

Through this comprehensive, low-barrier, and data-driven model, OMI will continue to provide a **safe, compassionate, and effective pathway from homelessness to stability and long-term housing.**

5. Tasks and Implementation

Specify the key tasks and activities your organization will undertake to accomplish the program’s goals. Explain how and when these activities will be implemented and monitored for success.

Overview:

The foundation of our services is to provide **safe shelter, showers, and nutritious meals** in a welcoming environment where every individual is treated with dignity and compassion. Our goal is to support individuals as they transition into long-term, viable housing through personalized case management and established community resource connections.

Our case management model is designed to meet the diverse needs of everyone who walks through the doors of the Lodi Access Center (LAC). Central to this model is our “**Tree to Success**” system — a structured, step-by-step process that guides individuals along various pathways, all leading toward the same **ultimate goal: long-term, viable housing.** Each pathway is broken down into clear, manageable steps that connect clients to a range of supportive resources.

Our **Outreach Team** plays a vital role in building trust within the unsheltered community. Through consistent engagement and relationship-building, they guide individuals toward the LAC and other essential services.

Once enrolled in the Lodi Access Center (LAC), participants are encouraged to engage in **Workforce Development** and **Housing Navigation** programs designed to promote long-term independence. Through the Workforce Development Program, clients commit to actively participating in their recovery from substance use (if applicable), contributing through volunteer service at the Center, and embracing a posture of learning and accountability. The goal extends beyond securing employment, it is to support clients in **achieving and sustaining long-term employment**.

Because the path to permanent housing can vary depending on availability and individual circumstances, clients are encouraged to enroll in these programs early to shorten their stay and accelerate progress toward stability. Together, these initiatives strengthen partnerships, close service gaps, and empower individuals to move **beyond temporary shelter toward lasting independence and self-sufficiency**.

Over the past year, an average of **14 clients per month** have successfully transitioned into rehabilitation programs or housing. This consistent progress has inspired others within the unsheltered community, strengthening the LAC's growing reputation as a place of "**achievable success**." As this message continues to spread, trust deepens, participation increases, and more individuals take meaningful steps toward stability and self-sufficiency.

*See attached Tree to Success - *Exhibit V_5.1*

*See attached Workforce Development Program - *Exhibit V_5.2*

6. Shelter Operations Capability

Demonstrate your organization's capacity to develop, implement, and manage an emergency shelter. Include a brief summary of your organizational infrastructure, staffing, and internal systems.

Each OMI employee has received training and certification in: Emergency & Fire Preparedness, Active Shooter Response, Workplace Violence Prevention, Conflict Resolution, CPR/First Aid, Narcan administration, and Mental Health First Aid

We have a qualified team to implement and oversee a comprehensive plan. Our Outreach Advisory Committee consists of several uniquely qualified individuals that provide the experience and expertise needed to navigate this project. We have experience collectively in areas of public grant administration, budgeting, team building and mobilization, providing mental health services, and building relationships with the homeless community. This team includes the following key members:

Jason McEachron: Chief Executive Officer OMI, CEO McEachron Homes, Pastor Gravity Church
Johnny Coughran: Director Temp Lodi Access Center, Project Manager J-C Engineering, Chaplain
Marvin Bryant: Case Manager at Lodi Access Center, Certified Biblical Counselor(ABC), Associate Pastor Vintage Church, Board Member of Love Lodi
Dennis Buettner, SJ County Behavioral Health Homeless Outreach Worker for 23 years (retired and working part time at the LAC)
Schaunna McEachron, Senior Workers Compensation Claims Examiner, Administration and HR
Kathryn Siddle, San Joaquin County Social Worker (retired), Homeless Advocate, Grant Writer
Frankie Negron, Visionary Home Builders - Grant Writer

7. Admission and Program Participation Procedures

Provide detailed policies and procedures related to the intake and sheltering process, including:

- **Client rules and guidelines, Identification requirements**
- **Screening and assessment protocols**
- **Bed reservation and allocation system**
- **New client orientation process**
- **Policies for day-use clients and services**
- **Returning client procedures**
- **Exit and re-admission criteria for disqualification**

*See attached Client Rules & Guidelines - *Exhibit V_7.0*

- **Client rules and guidelines, identification requirements**

Upon check-in the client will be given a written list of the shelter rules and guidelines. These rules will include respectful behavior and no drugs, alcohol, paraphernalia or weapons. Each client will be looked up in the HMIS database to see if they have received services prior. If there is no identification available, an intake interview will be completed with all new clients. Service providers within the community will also be able to make referrals.

- **Screening and assessment protocols**

Individuals must meet three (3) qualifications in order to become a client:

- (1) All clients will be screened using NSOPW.com and meganslaw.com to verify they are not a registered sex offender.
- (2) All clients must be ambulatory (able to care for themselves).
- (3) All clients must have a connection to Lodi or be referred by a legitimate agency.

Additionally, new and current clients will be visually screened each time at the security check point for coherency and ability to be compliant.

- **Bed reservation system**

Upon check-in, each client will be added to the daily roster of overnight guests and assigned a bed and bedding. Bed assignments are reserved for clients who maintain consistent attendance. If a client misses two consecutive nights without prior notice, their bed will be released for reassignment and all personal belongings will be removed and returned to the client in accordance with OMI property handling procedures. This policy ensures fair access to shelter accommodations and efficient use of available space.

- **New client orientation**

All new clients will receive a facility tour upon intake to familiarize them with shelter operations, amenities, and safety procedures. During orientation, clients will be provided with a written list of participant rights and responsibilities, which staff will review to ensure understanding. Safety, sanitation, and behavioral expectations will be clearly explained to promote a secure, respectful, and well-maintained environment for all participants.

- **Day use clients**

The facility gate will be open daily from 9:00 a.m. to 6:00 p.m. for day-use clients to access essential services, including meals, showers, charging stations, and other supportive resources. Life skills

training and case management services will be available to all day-use clients as part of OMI's commitment to promoting self-sufficiency and long-term stability. Staff will make every effort to engage day-use participants in ongoing case management and enrollment into the overnight shelter program, with the ultimate goal of supporting each individual's transition into stable, permanent housing.

- **Returning clients**

Returning clients will be checked in and assessed for any changes in their admission status. If the client previously left on bad terms or was suspended/disqualified for any reason, an interview process for readmission may take place.

- **Exit and re-admission**

If a client leaves the center and seeks readmission, preference will be given to individuals who have not received services in the past. A thirty (30) day waiting period between exit and re-admission will be enforced for clients that have violated policy. Depending on the case, some violations may lead to complete disqualification. Even in this case, OMI staff will attempt to refer that individual to other available community resources.

8. Connection to Services and Housing

Explain how your organization will coordinate and refer clients to supportive services and housing programs. Describe partnerships or systems used to facilitate these connections.

Our organization will coordinate and refer clients to supportive services and housing programs through a structured, collaborative approach. Upon intake, each client's needs will be assessed. The case management team will offer to develop an individualized service plan. We maintain active partnerships with local agencies such as SJHA and the Haggerty Partnership, as well as housing providers like the Main St 40-unit project, Central Valley Housing, and Visionary Home Builders. These partnerships enable us to quickly connect clients with resources tailored to their needs, including job readiness programs, health care, mental health services, and housing opportunities. Referrals are facilitated through a combination of direct communication, and regular case conferencing among partner organizations. Our staff coordinate with service providers to ensure smooth transitions and follow-up support for clients. The coordination of efforts, ensuring that all referrals are timely, client-centered, and tracked for effectiveness. By leveraging these established systems and relationships, we are able to efficiently link clients to the supportive services and housing programs essential for their long-term stability and reduce recidivism.

SJHA

Central Valley Housing - 211

Visionary Home Builders

2nd Step Living Homes placement

Sunny Days Communities

Valley Sober Living

Lilly Pad and Lotus Rising

Main St 40-unit apartment building

Haggerty Construction Partnership on 12-Unit apartment complex

9. Housing-Focused Goals

Describe your strategy for minimizing length of stay and assisting clients in obtaining permanent housing.

At the Lodi Access Center (LAC), clients see their peers securing employment and moving into stable housing—this firsthand evidence is one of the most powerful motivators and helps reduce the length of stay for new clients. Clients who opt into OMI’s case management are guided through the “Tree to Success,” where their individual path is clearly outlined and broken into achievable next steps.

To promote accountability and progress, clients are allowed a maximum of six months at the LAC. Service extensions may be granted based on demonstrated effort and circumstances related to securing housing. Please see the attached *Exhibit V_9.0* for further explanation.

*See attached Tree to Success - *Exhibit V_5.1*

*See attached LAC Client Enrollment Duration Policy - *Exhibit V_9.0*

10. HMIS Participation

Detail your organization’s past or current use of HMIS and outline your plan to ensure compliance with all data entry and reporting requirements.

OMI currently maintains five authorized HMIS operators who regularly update client data and program statistics to ensure accurate reporting and accountability. If awarded operations of the permanent center, OMI will expand this capacity to include one full-time HMIS Specialist and seven approved users, further strengthening our data accuracy and compliance with all HMIS standards.

OMI will continue to operate its core HMIS programs — **Outreach, Day Services, Shelter Services, and Housing Sustainability and Tenancy** — all of which are fully integrated into the HMIS platform for consistent data tracking and coordination.

- **Outreach:** Outreach workers utilize HMIS to create client referrals, record case management notes, and document exit destinations upon transition. This process ensures that all interactions are tracked and services are coordinated seamlessly across providers.
- **Operations:** Operations staff use HMIS for client intake and service logging. Before admitting an individual into the facility, staff review each client’s history within the system to identify any potential red flags or safety concerns. Once admitted, all services received — including shelter, meals, transports, etc. — are accurately recorded in HMIS.
- **Case Management:** Case managers use HMIS to maintain case notes, record referrals, track program participation, and document exit destinations. This comprehensive use of HMIS allows for real-time monitoring of client progress, facilitates coordination among service providers, and supports data-driven decision-making.
- **Reporting:** HMIS reports will be provided monthly to the City of Lodi and to any grant provider upon request. Internally, reports are also used to evaluate performance, monitor trends, and communicate program outcomes. These reports are critical in measuring and demonstrating success and will be managed diligently and responsibly.
- **Housing Sustainability and Tenancy:** HMIS will continue to play a vital role in tracking client success after individuals transition out of the shelter. The system allows staff to identify whether clients maintain stable housing or return to homelessness, enabling timely

intervention and continued support when needed. Through consistent and transparent data management practices, OMI ensures that every service interaction contributes to a measurable understanding of client outcomes and overall program impact.

11. Coordinated Entry Participation

Describe how your organization engages with the local coordinated entry system to assess client needs and match them with available services.

Our organization actively participates in the local coordinated entry system (211) to ensure that each client's needs are matched with the most appropriate available services. During case management assessments, we conduct comprehensive interviews designed to identify housing status, service needs, current income, and individual vulnerabilities. These assessments are then submitted to the coordinated entry system which is a critical step in securing achievable long-term housing.

12. Accessibility and Inclusion

Describe how the proposed program will ensure accessibility for individuals with physical, mental, or developmental disabilities and those with other special needs.

The proposed low-barrier Access Center is committed to ensuring accessibility and inclusion for all individuals, including those with physical, mental, or developmental disabilities, as well as those with other special needs. Our facility will be ADA-compliant, featuring wheelchair ramps, accessible restrooms, and barrier-free entryways to accommodate individuals with mobility challenges. In addition, our staff will receive specialized training to recognize and respond appropriately to the diverse needs of clients, including those with mental health conditions or developmental disabilities. Program policies will emphasize flexibility and individualized support, allowing for reasonable accommodations such as modified intake procedures, assistance with daily living activities, and tailored case management. We will collaborate with local service providers specializing in disability support to ensure clients have access to necessary assistive devices, therapies, and advocacy services. By fostering an inclusive environment and maintaining strong partnerships with specialized agencies, the shelter will actively promote equitable access to services, ensuring that all clients—regardless of ability or special need—can receive the support and resources required for their safety, well-being, and long-term stability.

If a client needs a higher level of care than what the shelter operator or county services can offer, a referral will be made to Adult Protective Services, Valley Mountain Regional Center, or similar. This situation can arise and we want to make sure that a client is getting the proper care.

13. Outreach to Unsheltered Individuals

Share your plan to proactively reach out to Lodi's unsheltered population and encourage their voluntary transition to the Access Center.

Method:

OMI's approach to Lodi's unsheltered population is rooted in love, compassion, and healing. We believe every individual deserves dignity, respect, and the opportunity to rebuild their life. Our

outreach team meets people where they are—on the streets, in encampments, or in public spaces—offering compassionate conversation, consistent presence, and genuine care.

While there are instances where enforcement becomes necessary for public safety, these efforts are carried out in close collaboration with the Lodi Police Department and always with a focus on care and connection. OMI emphasizes trust-building and relationship development as the cornerstone of our approach. This commitment to patience and empathy fosters voluntary engagement with the Lodi Access Center (LAC), often leading to smoother transitions and more sustainable outcomes. Each interaction is guided by the belief that change happens best when individuals are supported with dignity, choice, and understanding.

Our team takes time to listen to each person’s story, validate their experiences, and identify their most pressing needs — whether that includes food, water, clothing, medical attention, or simply someone safe to talk to. This trauma-informed, person-centered approach ensures that outreach is not transactional, but relational. Through this process, we help individuals view the Access Center not merely as a shelter, but as a place of healing, opportunity, and restoration. Many of these relationships take time to develop. OMI has been operating in this

Collaboration is central to our outreach efforts. OMI works closely with local faith communities, healthcare providers, and social service partners to provide comprehensive, wrap-around supports that extend beyond immediate shelter needs. These partnerships enhance service coordination and strengthen our collective ability to move individuals from crisis toward stability.

Locations and Outreach Coordination

- **Daily Encampment Outreach:** OMI will visit encampments routinely and responsively to phone calls. Additionally, OMI partners with San Joaquin County and other agencies every other Wednesday to conduct coordinated outreach at local encampments, connecting unsheltered individuals to essential resources and services.
- **Weekly Outreach at Gravity Church:** Every Monday, Gravity Church hosts a homeless outreach event that provides meals (*Agape Love*), messages of encouragement, showers (*Showered with Love*), clothing, and on-site medical care provided by Community Medical Center.
- **Weekly CalTrans Coordination Meetings:** Every Wednesday, OMI attends meetings with CalTrans to discuss scheduled cleanups, identify areas of concern, and collaborate on strategies that balance safety, compassion, and community well-being.
- **Monthly Lodi Committee on Homelessness (LCOH) Meetings:** many local providers, volunteers, and concerned citizens come together to share, educate, and strategize towards solution
- **Quarterly COC Shelter Committee Meetings:** Countywide collaboration between participating shelters; we discuss areas of need and share ideas and successes
- **Quarterly Hospital Council Stanislaus and San Joaquin Counties Hospital & Shelter Partners Meeting:** Similar to the COC shelter meetings but on a larger, two county scale

14. Community Engagement and Good Neighbor Plan

Provide a detailed "Good Neighbor Plan" that includes:

The purpose of our Good Neighbor Plan is to outline our commitment to cultivating positive relationships with residents, businesses, and community groups as we operate the Access Center. Our goals are to communicate transparently, educate and engage the public, maintain safety and property standards, respond promptly to community concerns, and minimize any potential impact on the surrounding neighborhood. This plan reflects our dedication to being a responsible, collaborative, and valued member of the community.

■ **Communication with residents, businesses, and community groups**

We have established open and consistent communication channels to keep our Advisory Committee informed and involved. This committee includes business, community, and non-profit professionals who in turn take the information gained out to the community. In addition, our Advisory Committee listens and learns from the community opinions, ideas and concerns to relay back to LAC leadership.

■ **Public education and outreach**

Our outreach initiatives will include our Director giving presentations to organizations, businesses and churches designed to educate the community about the shelter's mission, services, and impact. We will distribute resource materials at these events. Tours will be provided upon request and special events will be showcased on social media. These efforts aim to dispel misconceptions, encourage collaboration, and promote a supportive environment for all.

■ **Security and property management**

To maintain a safe and welcoming environment, we will implement on-site security protocols, including professional staff presence, surveillance systems, and clear visitor policies. Facility maintenance will be prioritized to ensure cleanliness, repair, and aesthetic standards are consistently met. OMI reinforces the Lodi Access Center's commitment to being a good neighbor and maintaining positive relationships with the surrounding community. Clients are reminded that respect for local residents and businesses is essential, and violations of the Good Neighbor Policy result in suspension of services—whether incidents occur on or off site. OMI works closely with the Ambassadors and Lodi Police Department to promote safety. For non-emergency or potentially disruptive situations, staff first contact the Ambassadors, who successfully resolve about 50% of incidents without police involvement, allowing LPD to focus on higher-priority emergencies. In urgent situations, OMI staff follow established emergency protocols and call 911 immediately.

■ **Responsiveness to neighborhood concerns**

Community members are encouraged to voice concerns. All complaints will be documented, investigated, and resolved according to a transparent resolution process, with regular reporting on outcomes shared at LCOH and Advisory meetings. We are committed to timely, respectful, and effective responses to all neighborhood feedback.

■ **Strategies to minimize community impact**

We will proactively address potential impacts through targeted strategies: traffic

management plans will coordinate client arrivals and departures to reduce congestion; litter control measures will include regular cleanups and accessible waste disposal; noise reduction protocols will limit disruptive activities during evening hours. Ongoing evaluation, including community surveys and impact assessments, will guide adjustments and improvements to minimize disruption and support neighborhood well-being. Through open dialogue, proactive outreach, and responsive operations, we strive to create a positive environment for both our clients and our neighbors, ensuring the shelter remains a valued and responsible presence in the area.

15. Security Policies and Procedures

Describe your proposed security plan, including policies related to:

■ **Secured entry/exit points**

All shelter access will occur through a single main entrance, monitored during all operational hours. Guests must check in with staff or security at the front desk before entry. Emergency exits will remain clearly marked, alarmed, and used only in emergency situations. Fencing, lighting, and security cameras will be maintained to ensure a safe perimeter. This controlled entry process helps prevent unauthorized access and ensures accurate head counts for safety and compliance

■ **On-site security personnel**

Staff security personnel will be stationed on-site during operating and overnight hours. Their duties include monitoring the premises, assisting with check-in, responding to disturbances, and ensuring adherence to shelter rules. All security staff will receive training in trauma-informed care, de-escalation, and cultural sensitivity to ensure interactions are respectful and supportive. Security will coordinate closely with shelter staff to promote a calm, welcoming environment.

■ **Loitering deterrence**

To maintain a positive relationship with the surrounding community, loitering around the facility or adjacent properties will be discouraged. Lodi Ambassadors will be contacted to help deter loitering as well as staff and outreach team members will engage anyone lingering outside the premises and offer appropriate services or direct them to intake areas. Clear signage and friendly reminders will help maintain order without confrontation. The Outreach Team will work in the surrounding community to connect unsheltered individuals with available shelter beds, case management, and support services. Outreach staff help reduce loitering, promote safety, and build trust between the shelter and the neighborhood. They also play a critical role in overflow management and community coordination

■ **Conflict de-escalation**

All conflict de-escalation efforts at Outreach Ministries International (OMI) are directed and overseen by the Director and Director of Operations, who serve as the primary authorities in all incidents involving safety, client behavior, or staff intervention. OMI's approach emphasizes trauma-informed care, professionalism, and dignity in every interaction. All staff, including case managers, shift leads, security, and volunteers, are trained in nonviolent crisis intervention and conflict-resolution practices. Staff are responsible for recognizing early signs of agitation or distress and are expected to use calm, respectful, and non-confrontational communication to defuse situations. Verbal de-escalation must always be attempted before any physical or administrative intervention. If a situation begins to escalate or safety becomes a concern, staff must immediately notify the Shift Lead or Case Manager, who will then contact the Director or Director of Operations for guidance and authorization before taking further action. These leaders assess the situation, determine the appropriate level of response, and

provide real-time decision-making and oversight to support staff and client safety. All major actions, including relocation, separation, or involvement of external agencies such as law enforcement, must be approved or directed by the Director or Director of Operations to ensure compliance with OMI policies, trauma-informed principles, and all legal requirements. When appropriate, individuals involved in conflict may be asked to take a brief time-out from the facility to restore calm or may be referred to external services for additional support. Staff are required to complete an incident report following any significant conflict, ensuring accurate documentation for review and follow-up. The Director and Director of Operations conduct a post-incident debrief within twenty-four hours of any major occurrence to review staff reports, evaluate the response, and identify opportunities for improvement. They also provide emotional and supervisory support to involved staff and ensure corrective actions are documented in OMI's internal reporting system. All staff participate in annual conflict-resolution and crisis-response training. The Director of Operations ensures training materials remain current with best practices, while the Director reviews incident trends and implements necessary updates to strengthen safety, consistency, and staff competency across the organization.

■ **Client property storage**

Each overnight guest will be provided a personal storage locker located next to their assigned bed. This locker is intended for essential personal items only, and belongings exceeding the designated space will not be permitted in the shelter. Maintaining orderly storage helps ensure a safe, clean, and respectful environment for all guests. Clients who are not overnight guests may store their belongings in the secured lockers located in the entry courtyard. These lockers will be clearly labeled and managed by staff to ensure proper organization and accountability. Items that are not classified as drugs, alcohol, contraband, or weapons but are still considered unsafe or prohibited will be logged, secured, and handled in accordance with organizational policy. Providing structured, secure storage reduces theft, conflict, and clutter while giving clients peace of mind that their belongings are safe. All staff are responsible for ensuring proper use of the storage system and for maintaining a consistent, respectful approach when addressing property-related concerns.

■ **Handling of weapons or contraband**

Upon check-in, clients will be asked whether they possess any prohibited items, including drug paraphernalia, mind-altering substances, weapons, alcohol, or any materials that violate posted shelter rules. Clients who refuse to forfeit prohibited items will not be permitted entry into the facility. Weapons, drugs, alcohol, and other contraband are strictly prohibited anywhere on shelter property. Clear signage will be posted throughout the facility to communicate this policy to all guests, staff, and visitors. If prohibited items are discovered, staff will follow established safety procedures to secure or dispose of them properly and will contact law enforcement if necessary. All interactions involving the discovery or surrender of contraband will be handled with professionalism and respect. Staff are expected to maintain a trauma-informed approach at all times, ensuring that guests are treated with dignity while upholding the safety and integrity of the shelter environment. The Director or Director of Operations will be notified immediately of any serious incident involving weapons or illegal substances and will oversee documentation, reporting, and any required coordination with law enforcement or community partners.

■ **Coordination with law enforcement**

Law enforcement plays a vital role in maintaining safety and supporting community stability around OMI operations. The shelter maintains a positive and professional working relationship with local police departments and community response teams while continuing to operate independently in day-to-day activities. OMI works in close coordination with law enforcement to ensure that all interactions are handled with professionalism, respect, and adherence to legal and ethical standards. Officers may be

called upon to assist in situations involving threats to safety, criminal activity, or noncompliance that cannot be resolved through staff-led de-escalation efforts. The Director and Assistant Director serve as the primary liaisons with law enforcement, ensuring consistent communication, accountability, and clear protocols. Regular meetings with law enforcement partners will help strengthen collaboration, review safety procedures, and promote a shared commitment to maintaining a secure and respectful environment for clients, staff, and the surrounding community.

- **Overflow bed management**

When capacity is reached, staff will implement an overflow management plan to ensure no vulnerable individual is left without support. Priority will be given to families, women, elderly, and medically fragile guests. Outreach teams will coordinate with partner shelters, churches, and community programs to find alternative placements. When possible, guests will remain in a safe waiting area until additional beds or transportation become available.

If overflow is consistent for any period of time, OMI will communicate with and ask for approval from the City to utilize the Flex Space.

*See attached OMI Employee Handbook - *Exhibit V_15.0*

16. Health and Safety Policies

Describe your proposed policies related to client health and safety, including:

- **Prescription medication handling**

OMI follows strict protocols to ensure the safe handling, storage, and distribution of client medications. Medications are either picked up by staff or delivered directly to OMI from authorized pharmacies or healthcare providers. Upon arrival, all medications are verified, logged, and securely stored in a locked safe. When clients are present, medications are provided directly to them. If a client is not currently at the Center at the time of delivery, their medication is safely stored in the secure safe until their return. Staff document all medication handling activities, including the date of receipt, client name, and medication type, to maintain accountability and accurate records. Medications that remain unclaimed after 60 days are considered abandoned. These medications are disposed of safely and responsibly in coordination with a licensed pharmacy, following all applicable federal, state, and local regulations for medication disposal. This process ensures that all medications are handled with the highest level of care and confidentiality, prioritizing client safety, compliance, and trust in accordance with best practices for homeless service and healthcare coordination programs.

With regard to administering medication, OMI is not a medical provider and therefore all clients are responsible for self-administering their own medication.

- **Use of over-the-counter medications**

OMI does not handle, store, or regulate over-the-counter (OTC) medications. Clients are responsible for purchasing, managing, and safely storing their own OTC medications such as pain relievers, cold medicine, vitamins, and other non-prescription items. Staff may provide general information on community resources or local pharmacies where OTC medications can be obtained but will not distribute, dispense, or store these items on behalf of clients. This policy is designed to respect client autonomy while maintaining compliance with health and safety standards and avoiding liability related to medication administration or misuse. Clients are encouraged to use OTC medications responsibly and to seek medical guidance when unsure about proper use, possible side effects, or interactions with prescription medications.

■ **Infection control protocols**

OMI is committed to maintaining a safe and healthy environment for all clients, staff, and volunteers. To prevent the spread of illness, we follow standard infection control practices based on public health recommendations and community care standards. Individuals who exhibit signs of illness—such as fever, coughing, sneezing, or other flu-like symptoms—are required to wear a mask while on-site to reduce the risk of transmission to others. Staff will provide masks and other necessary protective items as needed. Clients who are ill are encouraged to seek medical evaluation and follow-up care from our medical partner organizations, who can assess symptoms and provide guidance on the next best steps for treatment and recovery. Staff members are trained to practice and promote proper hygiene, including regular handwashing, sanitizing shared spaces, and maintaining cleanliness in common areas. These infection control measures are designed to uphold a healthy environment, protect vulnerable individuals, and ensure that services can continue safely and effectively.

■ **HIPAA compliance and client confidentiality**

OMI is committed to protecting the privacy and confidentiality of all client information in full compliance with the Health Insurance Portability and Accountability Act (HIPAA) and related state and federal privacy regulations. All staff, volunteers, and partnering agencies are required to handle client information responsibly and ethically to ensure trust and safety in the delivery of services. Client records—both physical and electronic—are secured and accessible only to authorized personnel who require the information to perform their job duties. Information shared between staff, partner agencies, or medical providers is limited strictly to what is necessary for coordinating care and service delivery. Conversations involving client information must take place in private settings, and identifying details should never be disclosed in public or casual discussions. Written consent is required before sharing any client information with outside agencies or individuals, except when disclosure is legally mandated (such as threats of harm or suspected abuse). All staff receive training on confidentiality, data security, and HIPAA regulations as part of onboarding and continuing education to ensure compliance and to safeguard client rights at every level of service. Maintaining confidentiality is essential to the mission of the Lodi Access Center—to provide compassionate, ethical, and professional support to every individual we serve.

17. Facility Maintenance Plan

Explain how your organization will maintain a clean, safe, and sanitary facility environment on a daily basis.

To maintain a safe, clean, and healthy environment, the Lodi Access Center enforces the following daily hygiene and facility maintenance protocols:

Staff Responsibilities

- **Day Shift** staff oversee daily operations, general cleanliness, and work collaboratively to manage and resolve challenges as they emerge.
- **Swing and Night Shifts** are responsible for ensuring the daily deep cleaning and sanitization of all facility areas to maintain a safe and hygienic environment

Client Expectations and Personal Areas

- Each client is assigned a designated storage space near their bed. Personal belongings must not exceed this assigned area.
- Bedding areas must remain clean, organized, and well-maintained throughout the day.
- Overnight clients are required to shower daily, and all clothing and bedding must be

cleaned weekly.

- Day clients who present hygiene concerns may be asked to shower or may have restricted access to services, including shelter entry, at staff discretion.

Infection and Pest Prevention

- All clothing, bedding, and personal belongings must be placed in the designated “burn box” treatment prior to entering the shelter to prevent bed bugs and other infestations.
- Hand sanitizer stations are available throughout the facility, and clients are encouraged to frequently wash and sanitize their hands.
- Staff sanitize furniture, fixtures, and high-touch areas multiple times daily.
- Showers are sanitized before each use.

Client Participation

As part of case management and preparation for employment, clients are encouraged to participate in daily cleaning tasks and contribute to the upkeep of the facility.

18. Transportation Plan

Describe your proposed transportation-related policies and procedures, including:

■ Client transportation to/from the Access Center facility

OMI provides either bus passes or transportation coordination services to assist clients in safely accessing the facility and essential community resources. However, clients are responsible for signing up for transportation needs as early as possible to allow adequate time for scheduling and coordination. Clients must clearly communicate their time frames, pick-up locations, and return plans to ensure that transportation arrangements can be made efficiently and without delay. OMI staff will coordinate transportation to the best of their abilities, based on available resources, driver schedules, and service demand. While OMI strives to accommodate all reasonable transportation requests, availability cannot always be guaranteed. Clients are encouraged to plan ahead and maintain open communication with staff to support smooth coordination and minimize disruptions. This approach helps OMI ensure fairness, safety, and reliability in transportation services while promoting client responsibility and proactive participation in their own care.

■ Transportation of new clients and their belongings

OMI is committed to ensuring the safe and respectful transportation of new clients and their personal belongings to the Access Center. To maintain a clean, healthy, and secure environment for all clients and staff, all belongings are subject to search prior to transport or upon arrival at the facility. Clients are permitted to bring essential items only, such as clothing, hygiene products, necessary medications, and important personal documents. Belongings must meet basic hygiene and safety standards, as determined by staff discretion, to prevent the introduction of pests, hazardous materials, or unsanitary conditions into the facility or vehicle. Items deemed unsafe, unsanitary, or excessive in volume may not be transported or stored at OMI. Staff will work with clients to identify which items can be safely brought to the Center.

■ Response to emergency transport needs initiated by Police or City staff

OMI collaborates closely with local law enforcement, city personnel, and emergency services to ensure the safety and well-being of individuals in crisis. While OMI supports coordination efforts when emergency transport needs arise, it is important to note that OMI staff are not emergency responders and do not provide emergency medical or

crisis transport services. In situations requiring immediate medical attention, behavioral health intervention, or public safety response, OMI relies on emergency services such as law enforcement, fire departments, or emergency medical technicians (EMTs) to assess and manage the situation appropriately. When police or city staff initiate an emergency transport involving an individual connected to OMI, our team will cooperate fully by sharing relevant information, facilitating communication, and ensuring continuity of care once the individual is stabilized or released. OMI's role is supportive and collaborative—focused on maintaining client safety, assisting with follow-up care, and coordinating resources once the emergency response has been completed.

■ **Receiving donations and deliveries**

OMI greatly values the generosity of community members, organizations, and partners who contribute donations in support of our mission. To ensure that all donations are received, stored, and distributed appropriately, OMI staff will communicate, collaborate, and determine how, when, and if donations will be accepted, whether items are being delivered to the facility or scheduled for pickup by OMI staff. All donation offers are reviewed based on current program needs, available storage space, and the suitability or condition of the items. OMI reserves the right to decline donations that cannot be safely stored, do not align with client needs, or would create logistical or sanitation challenges. All donations are subject to OMI's decontamination protocols to ensure cleanliness, safety, and health compliance prior to storage or distribution. Professional deliveries (such as mail, packages, and courier services) will be received and signed for by OMI management or designated employees to maintain accountability and chain of custody. Deliveries and donations will be coordinated directly by OMI staff to ensure safety, accountability, and minimal disruption to daily operations. Staff are responsible for documenting received items and ensuring they are distributed fairly and efficiently to benefit clients and support program activities.

19. Nondiscrimination and Equity Policies

Detail your organization's policies for:

- **Compliance with all applicable federal and state civil rights laws**
- **Adherence to the Americans with Disabilities Act (ADA)**
- **Prevention of sexual harassment**
- **Policy on identifying alternative resources for individuals not eligible for onsite services (registered sex offenders, disqualified due to behaviors, etc.)**

OMI is committed to complying with all applicable state and federal labor and civil rights laws. Our organization prioritizes the well-being of our employees and strives to maintain a fair and equitable workplace. We will adhere to all regulations regarding employment practices, wages, hours, and working conditions. We are committed to fostering a diverse and inclusive workplace. Our organization does not discriminate on the basis of race, color, national origin, age, disability, religion, or sex, including pregnancy, sexual orientation, and gender identity. We value the unique contributions of every individual and strive to create an environment where all employees feel respected and empowered.

Compliance with the Americans with Disabilities Act

OMI is dedicated to ensuring compliance with the Americans with Disabilities Act (ADA). We strive to provide an accessible and inclusive environment for all employees and visitors. This includes making reasonable accommodations for individuals with disabilities and promoting equal opportunities in all aspects of our operations.

Sexual harassment

OMI is committed to maintaining a workplace that is free from sexual harassment and any form of discrimination. We do not tolerate inappropriate behavior of any kind, and we encourage all employees to report any incidents of sexual harassment. All staff will complete sexual harassment training.

Policy regarding sex offenders-Disqualification of Services

OMI maintains a firm commitment to safety, accountability, and ethical service delivery while ensuring fair and transparent access to support for all eligible clients. During the intake process, all clients are screened for eligibility and compliance with OMI's safety standards. Individuals identified as registered sex offenders will not be eligible for services. This determination is made through verification with the National Sex Offender Public Website (NSOPW.com) prior to admission to ensure the safety of all clients, staff, and the surrounding community. Client conduct within the shelter is governed by clearly defined policies designed to promote respect, safety, and a stable living environment. Violations of shelter rules, including possession of contraband, aggressive behavior, or repeated noncompliance, will be addressed in accordance with OMI's established disciplinary procedures. Depending on the severity of the infraction, the client may receive a verbal warning, temporary suspension, or full disqualification from services at the discretion of the Shelter Director or Director of Operations. These decisions are made following incident review, documentation, and, when appropriate, consultation with supervisory staff. OMI prioritizes trauma-informed and equitable responses when addressing policy violations. Whenever possible, clients will be offered opportunities to discuss concerns, receive mediation, or connect to alternative resources before a suspension or discharge occurs. All actions taken are guided by OMI's commitment to maintaining a safe environment while upholding the dignity and rights of all participants.

20. Pet and Service Animal Accommodation

Describe your proposed policies for allowing and managing pets and service animals on-site.

Upon check-in, we will assess the client's possession of any pets. One pet will be allowed per client and the animals must be assessed for any history of aggressiveness. No animals with aggressive history will be allowed. It will be the owner's responsibility to care for and clean up after their pet. OMI will provide pet food for up to six pets/month.

21. Grievance and Complaint Procedures

Outline your policies for receiving, reviewing, and resolving client grievances and complaints. Include your whistleblower policy.

Any grievances should be taken to the shift manager, director, and/or co-director to discuss the details of the occurrence. Staff will assess each situation to take the correct course of action to work towards a resolution. If the situation validates itself, a report will be made and filed. OMI encourages employees to report any illegal or unethical behavior without fear of retaliation. All complaints made in good faith will be taken seriously and investigated. Employees can report concerns related to fraud, misconduct, or violations of laws and regulations to HR. All reports will be treated with absolute confidentiality. OMI will ensure that the identity of the whistleblower is protected. The grievance policy will be posted at the lobby front desk and will consist of contact information for the director, the executive director, and city staff so that every level of grievance may be reported appropriately.

22. Incident Reporting and Documentation Policy

Outline your system for reporting, documenting, and following up on client and staff incidents (e.g., injuries, altercations, overdoses, critical behavioral health events).

To ensure safety, accountability, and professionalism, all incidents involving clients or staff are documented and addressed through a clear and consistent process.

Client Incidents

Client write-ups are first completed by hand as notes and then scanned into their digital file. If a client begins to show a pattern of misconduct or repeated rule violations, they will receive a warning and an opportunity to correct their behavior. Should the behavior continue—or if a serious violation occurs—consequences may include suspension of services or, in severe cases, disqualification from the program.

Staff Incidents

Staff write-ups are submitted directly to Human Resources. The corrective process typically begins with a verbal warning. If the issue persists, formal corrective action is implemented. Continued noncompliance may result in termination. In the event of serious misconduct, staff may be terminated immediately without prior warning or progressive discipline.

City Notification

For severe incidents—such as overdose, assault, or major injury—the City will be notified promptly to ensure appropriate response and documentation.

23. Emergency Preparedness and Response Plan

Describe your protocols for handling facility emergencies including:

- Medical emergencies
- Fire evacuation procedures
- Staff training on emergency drills

OMI has developed policies for medical emergencies and fire evacuation. This includes clearly marked signage installed in the tent. Upon award of the permanent Access Center, OMI will create similar evacuation policies used in case of fire or emergency. Staff will be trained to respond to medical and fire emergencies. Current staff has been trained in the following: *CPR / FIRST AID, Conflict Resolution, Mental Health First Aid, Public Health Services' Injury Prevention Program - Opioid Safety and Proper Administration of Naloxone, Workplace Violence Prevention, Emergency Evacuation Procedure, Emergency & Fire Preparedness, Active Shooter Response*

*See attached Emergency & Fire Preparedness - *Exhibit V_23.0*

24. Staff Training and Development

Detail required staff training (e.g., trauma-informed care, de-escalation, cultural competency, CPR/First Aid, confidentiality). Include any ongoing professional development or certification requirements.

OMI's HR department utilizes professional development software to monitor training progress, identify emerging needs, and assign refresher courses or certifications as required by law or contractual

obligations. The OMI Director reviews training content annually to ensure alignment with current research, local regulations, and evolving community needs. Through this blended approach of technology, professional instruction, and hands-on practice, OMI ensures staff remain current, competent, and confident in their ability to serve clients and uphold the organization's standards of care. All staff has been trained in the following areas: *CPR / FIRST AID, Conflict Resolution, Mental Health First Aid, Public Health Services' Injury Prevention Program - Opioid Safety and Proper Administration of Naloxone, Workplace Violence Prevention, Emergency Evacuation Procedure, Emergency & Fire Preparedness, Active Shooter Response.*

25. Internal Monitoring and Quality Assurance

Explain how your organization monitors service delivery quality, ensures compliance with regulations and funder requirements, and uses data to drive performance improvement.

OMI ensures high-quality service delivery and compliance through a structured system of internal monitoring and continuous improvement. Regular program evaluations are conducted to assess service effectiveness, adherence to funder requirements, and compliance with local, state, and federal regulations. Staff complete routine documentation reviews, client file audits, and direct service observations to verify that all procedures meet established standards of care and ethical practice. Feedback from clients, staff, and community partners is collected through surveys, meetings, and case reviews to identify strengths and areas for improvement. All data is compiled and analyzed to monitor program outcomes, client progress, and operational efficiency. This information is used to inform decision-making, guide staff training, and drive performance improvement initiatives. OMI is committed to transparency, accountability, and maintaining the highest standards in all aspects of service delivery.

26. Confidentiality, Client Records, and Data Security

Describe your policies and practices for maintaining and safeguarding client records, ensuring HIPAA and HMIS compliance, managing data sharing with partners, and responding to potential breaches.

All staff will complete annual HIPAA training. Administrative, physical and technical safeguards will be established to limit access to Protected Health Information (PHI) ensuring that only the minimum necessary amount of information is shared between staff and agencies to provide services. Clients will be provided with a Notice of Privacy Practices (NPP) upon admission into the program and participation in the HMIS system explaining their rights.

27. City and County Partner Coordination

Describe how your organization will maintain communication and coordination with City staff and County Partners to support the successful operations of the Access Center.

OMI maintains a comprehensive internal monitoring and quality assurance system to ensure all programs operate in full compliance with local, state, and federal regulations, as well as funder requirements and contractual obligations. Bi-weekly meetings are scheduled with city staff to discuss items of concern, billing, progress, etc.. This level of accountability prepares OMI to be organized and ready for county or grant audits at any given time. Service delivery quality is monitored through routine audits, case file reviews, staff supervision, and direct observation. Incident reports, client feedback, and performance data are collected and reviewed regularly to identify trends, strengths, and areas for improvement. Leadership oversees the implementation of corrective actions when needed and ensures that staff receive follow-up training or coaching to maintain high standards of

care. OMI utilizes secure data management systems to track client progress, service outcomes, and compliance metrics. This data is analyzed to drive informed decision-making, improve efficiency, and enhance program effectiveness. Monthly reports are generated to evaluate performance goals, ensure accountability, and maintain transparency with funders and stakeholders. Through this structured approach, OMI ensures that all services are delivered ethically, efficiently, and in alignment with best practices, ultimately strengthening outcomes for clients and the community.

28. Data Collection and Reporting

Explain the methods used to collect and track demographic and service data, including the software system(s) used for reporting.

OMI utilizes professional data management and reporting systems to collect, track, and analyze demographic and service-related information. All client intakes, service interactions, and outcomes are entered into a secure case management database that complies with federal and state confidentiality standards, including HIPAA. The system allows for real-time data entry, progress tracking, and report generation, ensuring accuracy and consistency across all programs. Demographic data such as age, gender, ethnicity, and income level are collected during intake, along with service data related to housing, case management, and referrals. Staff are trained to input data accurately and verify information regularly to maintain data integrity. Reports are generated monthly and quarterly to monitor performance outcomes, identify trends, and ensure compliance with funder requirements. Data is also used to inform program development, measure impact, and support ongoing quality improvement efforts. Through this structured and technology-supported approach, OMI ensures transparency, accountability, and data-driven decision-making in all service areas.

29. CalAIM Medical Respite Experience

If applicable, describe your organization's experience providing Medical Respite services under CalAIM, either directly or through a subcontractor relationship. In your response, please include:

- A summary of your Medical Respite program(s), including scope of services and target populations
- Whether services were provided directly or through a subcontractor
- The number of clients served annually and typical length of stay
- Coordination protocols with managed care plans (MCPs), hospitals, or referring entities
- Outcomes tracked and reported (e.g., discharge destinations, health stabilization, hospital readmission rates) Billing and reimbursement experience under CalAIM, including familiarity with Department of Health Care Services (DHCS) standards and reporting requirements
- How this experience would inform your organization's ability to implement Medical Respite services at the Access Center, if selected
- **If your organization is not interested in operating any Medical Respite services as potential cost offset, please clearly state that in your response**

OMI is not currently a Medical CalAIM provider; however, we maintain an active partnership with a Health Plan of San Joaquin–approved provider that operates other recuperative care programs. Regarding the Lodi Access Center, this provider has expressed interest in supporting recuperative care services at the site. While no formal commitment has been made, they indicated that several operational details, logistics, and program requirements would need to be clarified and finalized before moving forward. OMI remains open and willing to pursue this opportunity in collaboration with the provider.

VI. BUDGET

All proposals must include a detailed line-item operating budget that accounts for all anticipated Scope of Work expenses associated with managing and operating the Access Center and Emergency Shelter. The budget should be realistic, cost-effective, and scalable and reflect the tiered bed capacity model outlined in the RFP.

Cost Savings and Funding Offsets

Proposers are strongly encouraged to identify and account for cost-saving strategies and alternative funding sources that may reduce reliance on City funding. These may include, but are not limited to:

- **In-kind donations (e.g., food, supplies, equipment)**

OMI receives consistent in-kind support from community members, local businesses, and partner organizations that share its mission of service. These donations include food, hygiene products, clothing, bedding, cleaning supplies, and equipment essential to daily operations and client care. In-kind contributions play a critical role in sustaining program activities, reducing operating costs, and ensuring that resources are available to meet the immediate needs of individuals and families served by OMI. All donations are reviewed for quality, safety, and relevance to current program needs before distribution. OMI staff coordinate the receipt, documentation, and allocation of items to ensure accountability and fair distribution among clients. This process not only strengthens operational efficiency but also reflects the generosity and collaboration of the broader community. Through these in-kind partnerships, OMI continues to enhance service delivery while fostering community engagement and shared responsibility for improving the well-being of vulnerable populations.

- **Volunteer labor (please estimate FTE equivalents, even if no cost is incurred)**

Based on ongoing participation trends, clients are estimated to volunteer approximately 1,531 times per year, averaging about 1 hour per instance, resulting in an estimated total of 1,531 volunteer hours annually. Using the standard calculation where 1 Full-Time Equivalent (FTE) per 40 hours, this results in approximately 38.28 FTEs of volunteer service each year. Moving forward, the goal is to increase volunteer engagement to reach an estimated 45 FTEs annually, reflecting the organization's continued commitment to expanding community involvement and client participation. While no direct labor costs are incurred, this level of volunteer contribution represents a significant investment of time and service that enhances program operations, strengthens sustainability, and demonstrates strong community partnership.

- **Philanthropic support**

OMI benefits from strong philanthropic support through the ongoing generosity of community members, faith-based organizations, and local partners who share our mission of service. This support is expressed through both monetary and in-kind contributions, including food, clothing, hygiene supplies, and essential program materials. These contributions strengthen program sustainability, reduce operational costs, and allow OMI to allocate more resources directly toward client care and program development. OMI will continue cultivating philanthropic partnerships through community outreach, donor engagement, and transparent communication about program outcomes. This approach ensures that every contribution, whether financial or in-kind, creates measurable impact, supports long-term stability, and reflects the collective responsibility of the community in addressing homelessness and social inequities.

- **Private or public grants**

OMI actively pursues both public and private grant opportunities to support its programs, services, and long-term sustainability. The organization has dedicated grant writers on staff who are skilled in researching, developing, and managing funding proposals that align with OMI's mission and community impact goals. Their expertise ensures that all submissions meet funder requirements, comply with reporting standards, and accurately reflect measurable outcomes and performance indicators. Through a combination of government contracts, foundation grants, and corporate partnerships, OMI maintains a diverse funding portfolio that strengthens financial stability and reduces reliance on any single funding source. The organization's internal grant writing capacity allows for timely response to new opportunities and effective management of existing awards, including fiscal oversight, data tracking, and compliance with all contractual obligations. OMI's commitment to transparency, accountability, and measurable impact continues to position the organization as a trusted recipient of both public and private funding designed to improve outcomes for individuals and families in need.

- **Community partnerships**

OMI excels in building and maintaining strong community partnerships that enhance service delivery and create meaningful impact. The organization has developed a reputation for effective collaboration with city and county agencies, faith-based groups, healthcare providers, educational institutions, and nonprofit organizations. These partnerships ensure coordinated care, reduce duplication of services, and strengthen the overall continuum of support available to individuals and families in need. OMI's approach to partnership is rooted in open communication, mutual respect, and shared accountability. By leveraging collective resources and expertise, OMI is able to provide comprehensive, client-centered solutions that address the complex needs of the populations it serves. The organization's consistent engagement in community coalitions, task forces, and advisory boards demonstrates its leadership and reliability as a partner.

- **CalAIM Medical Respite reimbursement (if proposing to operate Medical Respite beds – not required)**

N/A to OMI's current services

- **Other funding offsets or reimbursements available through state, federal, or nonprofit program**

OMI is actively pursuing multiple funding offsets and reimbursement opportunities available through state, federal, and nonprofit programs to strengthen program sustainability and expand services. The organization consistently researches and applies for funding streams aligned with its mission, including opportunities available through CalAIM, HUD, and state community development initiatives. OMI's in-house grant writers are experienced in identifying eligible programs and leveraging available resources to maximize community impact. Collaboration is central to OMI's funding strategy. The organization works closely with other nonprofits, healthcare providers, and local agencies to share data, align reporting structures, and maximize cost efficiency. These cooperative efforts ensure that available funds are utilized strategically to enhance service capacity while avoiding duplication. By maintaining an active presence in regional funding networks and continually seeking partnerships, OMI demonstrates strong fiscal responsibility and innovation in developing sustainable funding models that support long-term community outcomes.

Lodi Access Center

OMI Employees

- 18 Full-time Employees**
- 19 Part-time Employees**
- 3 Subcontractors**
- 3 Administrative & HR Support**

***Full-time Staff will be eligible for Health Benefits**

Full-time (w/ Benefits)

- 1 Director
- 1 Co-director
- 1 HMIS/Reports
- 1 Lobby Operator
- 1 Cook
- 1 Prep Cook
- 1 Laundry/Showers
- 1 Janitor/Landscape
- 3 Security
- 1 Driver
- 1 Outreach Coordinator
- 1 Workforce Dev. Coordinator
- 2 Shelter Monitors
- 2 Lobby Operators

18 Full-time Employees

Part-time

- 3 Shelter Monitors
- 3 Lobby Operators
- 1 Cook
- 3 Prep Cook
- 1 Laundry/Showers
- 1 Janitor/Landscape
- 5 Security
- 1 Driver
- 1 Street Cleanup

19 Part-time Employees

Subcontractors

- 2 Case Managers
- 1 Outreach

3 Subcontractors

Lodi Access Center Proposed Budget

60 Beds; 5-Years

Personnel Cost - Year 1 (60 Beds)		Year 2	Year 3	Year 4	Year 5
	Total	Cost	Cost	Cost	Cost
Wages/Salaries	\$ 1,183,224.00	\$ 1,242,385.20	\$ 1,304,504.46	\$ 1,369,729.68	\$ 1,438,216.17
Benefits (market predicts 30% increase ea year)	\$ 265,252.40	\$ 344,828.12	\$ 448,276.56	\$ 582,759.52	\$ 757,587.38
OMI Administrative Costs	\$ 115,000.00	\$ 120,750.00	\$ 126,787.50	\$ 133,126.88	\$ 139,783.22
Employer Payroll Tax	\$ 130,746.25	\$ 137,283.56	\$ 144,147.74	\$ 151,355.13	\$ 158,922.89
Total Other Personnel Costs	\$ 1,694,222.65	\$ 1,845,246.88	\$ 2,023,716.26	\$ 2,236,971.21	\$ 2,494,509.65

Operating Cost - Year 1 (60 Beds)		Year 2	Year 3	Year 4	Year 5
Item	Cost	Cost	Cost	Cost	Cost
Food and Meal Expenses	\$ 145,000.00	\$ 152,250.00	\$ 159,862.50	\$ 167,855.63	\$ 176,248.41
Janitorial and Laundry Supplies	\$ 12,000.00	\$ 12,600.00	\$ 13,230.00	\$ 13,891.50	\$ 14,586.08
Landscape Maintenance	\$ 2,500.00	\$ 2,625.00	\$ 2,756.25	\$ 2,894.06	\$ 3,038.77
Transportation (Fuel, Maintenance, & Repairs)	\$ 12,000.00	\$ 12,600.00	\$ 13,230.00	\$ 13,891.50	\$ 14,586.08
Office Supplies and Admin Expenses	\$ 8,500.00	\$ 8,925.00	\$ 9,371.25	\$ 9,839.81	\$ 10,331.80
Technology and Equipment	\$ 7,000.00	\$ 7,350.00	\$ 7,717.50	\$ 8,103.38	\$ 8,508.54
Outreach Expenses	\$ 5,000.00	\$ 5,250.00	\$ 5,512.50	\$ 5,788.13	\$ 6,077.53
Neighborhood Clean up and Good Neighbor Engagement	\$ 9,000.00	\$ 9,450.00	\$ 9,922.50	\$ 10,418.63	\$ 10,939.56
Insurance (Liability, W.C., Vehicle)	\$ 67,962.00	\$ 71,360.10	\$ 74,928.11	\$ 78,674.51	\$ 82,608.24
Employee Training and Development (Fees and Wages)	\$ 6,700.00	\$ 7,035.00	\$ 7,386.75	\$ 7,756.09	\$ 8,143.89
Vehicle - Truck	\$ 25,000.00	\$ -	\$ -	\$ -	\$ -
Cleaning Equipment	\$ 10,000.00	\$ 7,500.00	\$ 7,875.00	\$ 8,268.75	\$ 8,682.19
Hygiene, Bedding, and Clothing	\$ 12,000.00	\$ 12,600.00	\$ 13,230.00	\$ 13,891.50	\$ 14,586.08
Safety Equipment	\$ 750.00	\$ 787.50	\$ 826.88	\$ 868.22	\$ 911.63
HMIS Cards, Scanning Equipment, and Fees	\$ 7,250.00	\$ 4,612.50	\$ 4,843.13	\$ 5,085.28	\$ 5,339.55
OMI Apparel & Promotion	\$ 3,500.00	\$ 3,675.00	\$ 3,858.75	\$ 4,051.69	\$ 4,254.27
Replacements for mattresses, furnishings	\$ 5,000.00	\$ 5,250.00	\$ 5,512.50	\$ 5,788.13	\$ 6,077.53
Storage Shed	\$ 2,000.00	\$ -	\$ -	\$ -	\$ -
Bunk Bed Stairs	\$ 20,000.00	\$ -	\$ -	\$ -	\$ -
Client Storage	\$ 7,500.00	\$ -	\$ -	\$ -	\$ -
ECM Billing Fee (8%)	\$ 12,000.00	\$ 12,600.00	\$ 13,230.00	\$ 13,891.50	\$ 14,586.08
Additional Office Space/Storage	\$ 15,000.00	\$ -	\$ -	\$ -	\$ -
Payroll fee	\$ 3,600.00	\$ 3,780.00	\$ 3,969.00	\$ 4,167.45	\$ 4,375.82
Veterinary Care	\$ 1,000.00	\$ 1,050.00	\$ 1,102.50	\$ 1,157.63	\$ 1,215.51
Total Operating Costs	\$ 400,262.00	\$ 341,300.10	\$ 358,365.11	\$ 376,283.36	\$ 395,097.53

Lodi Access Center Proposed Budget

60 Beds; 5-Years

Deductions - Year 1 (60 Beds)		Year 2	Year 3	Year 4	Year 5
Item	Cost	Cost	Cost	Cost	Cost
Monetary Donations/Fundraisers	\$ 55,000.00	\$ 63,250.00	\$ 72,737.50	\$ 83,648.13	\$ 96,195.34
In-kind Donations (Hygiene, Clothing, etc.)	\$ 20,000.00	\$ 22,000.00	\$ 24,200.00	\$ 26,620.00	\$ 29,282.00
In-kind Donations (Food)	\$ 30,000.00	\$ 33,000.00	\$ 36,300.00	\$ 39,930.00	\$ 43,923.00
Workforce Partnerships	\$ 15,600.00	\$ 17,160.00	\$ 18,876.00	\$ 20,763.60	\$ 22,839.96
Medi-Cal ECM/CS Reimbursement	\$ 150,000.00	\$ 150,000.00	\$ 150,000.00	\$ 150,000.00	\$ 150,000.00
TOTAL DEDUCTIONS	\$ 270,600.00	\$ 285,410.00	\$ 302,113.50	\$ 320,961.73	\$ 342,240.30

60 Overnight Clients	Year 1	Year 2	Year 3	Year 4	Year 5
Total Cost (Operating/Personnel/Deductions)	\$ 1,823,884.65	\$ 1,901,136.98	\$ 2,079,967.86	\$ 2,292,292.85	\$ 2,547,366.88

Cost per Bed per Year	Cost Per Overnight Client Per Day				
Quantity of Overnight Clients	Year 1	Year 2	Year 3	Year 4	Year 5
60 Clients	\$83	\$87	\$95	\$105	\$116
60-80 Clients - Flex Space (Unit rates for each bed over 60 and less than 80)	\$70	\$76	\$83	\$91	\$99
208 Clients (Unit rates for each bed over 80 and less than 208)	\$70	\$76	\$83	\$91	\$99

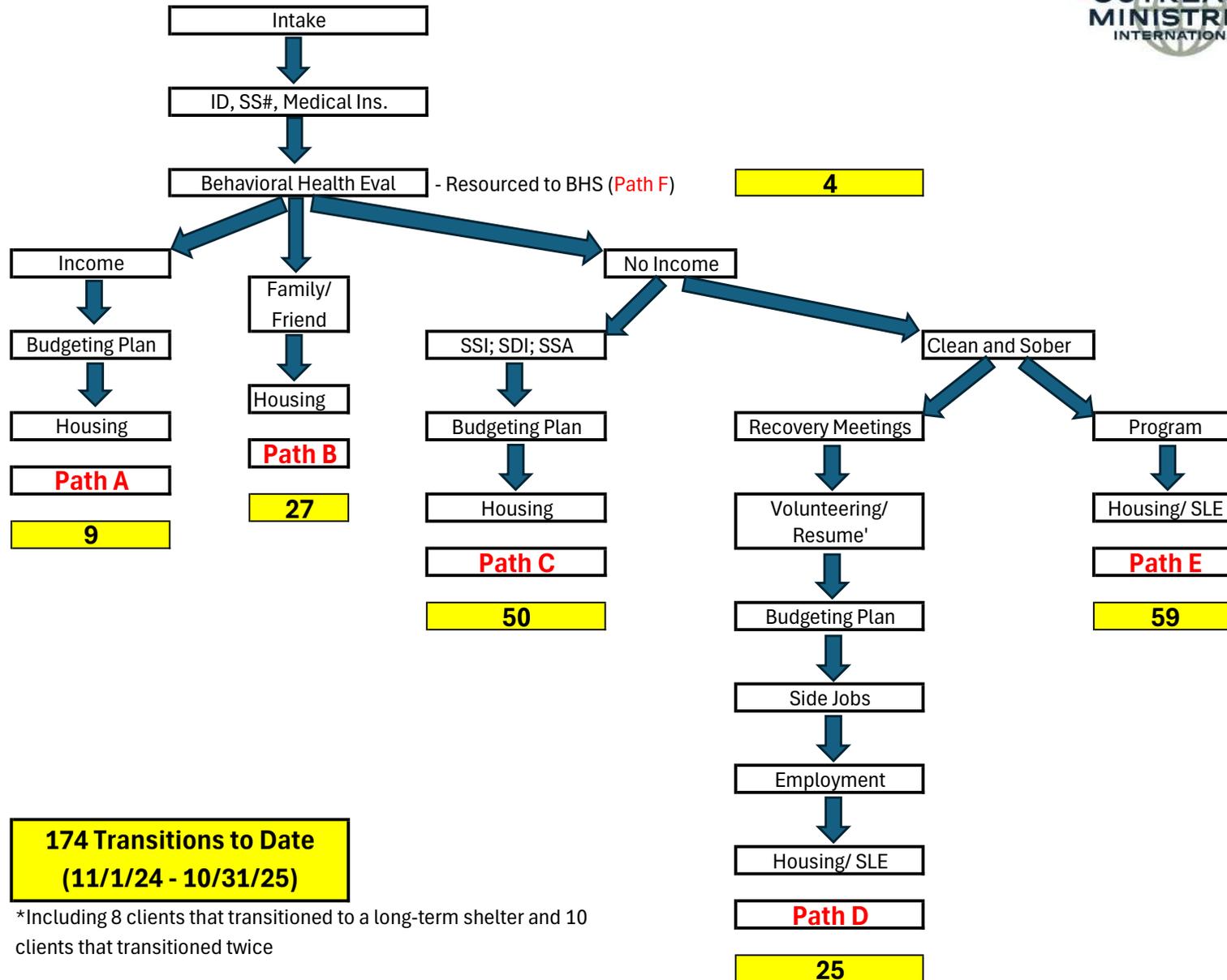
Lodi Access Center Proposed Budget

60 Beds; 5-Years

Start Up Costs (Based on 60 people)(below items to come out of operating costs; not in addition to)	
Item	Cost
<i>Food and Meal Expenses</i>	\$ 14,000.00
<i>Janitorial and Laundry Supplies</i>	\$ 1,500.00
<i>Landscape Maintenance</i>	\$ 800.00
<i>Transportation (Fuel, Maintenance, & Repairs)</i>	\$ 1,000.00
<i>Office Supplies and Admin Expenses</i>	\$ 2,500.00
<i>Technology and Equipment</i>	\$ 6,000.00
<i>Outreach Expenses</i>	\$ 750.00
<i>Neighborhood Clean up and Good Neighbor Engagement</i>	\$ 1,000.00
<i>Insurance (Liability, W.C., Vehicle)</i>	\$ 5,000.00
<i>Employee Training and Development (Fees and Wages)</i>	\$ 6,700.00
Vehicle - Truck	\$ 25,000.00
Cleaning Equipment	\$ 8,500.00
Hygiene, Bedding, and Clothing	\$ 3,000.00
Safety Equipment	\$ 500.00
HMIS Cards, Scanning Equipment, and Fees	\$ 7,250.00
OMI Apparel & Promotion	\$ 2,500.00
Replacements for mattresses, furnishings	\$ -
Storage Shed	\$ 2,000.00
Bunk Bed Stairs	\$ 20,000.00
Client Storage	\$ 7,500.00
ECM Billing Fee (8%)	\$ 1,000.00
Additonal office space/storage	\$ 15,000.00
Payroll fee	\$ 300.00
Veterinary Care	\$ 1,000.00
TOTAL START UP COSTS	\$ 132,800.00



The TREE to SUCCESS



**174 Transitions to Date
(11/1/24 - 10/31/25)**

*Including 8 clients that transitioned to a long-term shelter and 10 clients that transitioned twice

Outreach Ministries Workforce Development Partnership

Connecting Shelter Clients to Employment Opportunities

I. Program Purpose

- Support individuals transitioning from homelessness into the workforce.
- Provide employers with motivated, job-ready candidates.
- Build strong partnerships with businesses that value second-chance hiring and community impact.

II. Client Vetting & Preparation

Before referral to employment, each client is evaluated on:

1. **Substance-Free Readiness** – Screening for drugs/alcohol; connection to recovery support if needed.
2. **Teachability** – Demonstrated willingness to learn and accept coaching.
3. **Volunteer Engagement** – Participation in shelter volunteer roles (food service, cleaning, organizing) to build reliability.
4. **Work Skills Assessment** – Identification of transferable skills and prior experience.
5. **Attitude & Professionalism** – Respect, teamwork, punctuality, and conflict resolution.
6. **Recovery Engagement (if applicable)** – Connection to voluntary recovery, mental health, or vocational rehabilitation services as needed.

III. Client Development Services

- **Job Readiness Training:** Resume building, interviewing, workplace expectations.
- **Soft Skills Coaching:** Communication, teamwork, time management, reliability.

IV. Employer Partnership Opportunities

- **Direct Hiring:** Connect with pre-vetted, job-ready candidates.
- **Work Experience/Apprenticeships:** Provide on-the-job training opportunities.
- **Transitional Employment:** Short-term, subsidized roles to build work history.
- **Industry Training Collaboration:** Co-develop training tailored to your workforce needs.

V. Employer Support & Benefits

- **Ongoing Case Management:** Clients receive continued coaching and problem-solving support.
- **Retention Check-Ins:** Follow-up at 30/60/90 days to ensure success.
- **Community Impact:** Strengthen workforce diversity and support local stability.
- **Tax Incentives:** Eligibility for programs such as the Work Opportunity Tax Credit (WOTC).

VI. Next Steps for Partnership

- Identify job openings or skill needs within your company.
- Meet with shelter workforce development staff to design a hiring plan.
- Pilot placement with ongoing communication and support.
- Scale partnership for long-term hiring pipelines.
- Meet with shelter workforce development staff to co-design a hiring and training plan.
- Pilot placements with clear communication and feedback loops.
- Scale partnership to support a sustainable, inclusive hiring pipeline.



Outreach Ministries Workforce Development Partnership

Client Participation Agreement

Connecting Shelter Clients to Employment Opportunities

This voluntary Client Participation Agreement (“Agreement”) is made between Omi operators of the Lodi Access Center (“Shelter”) and _____ (“Client”) for participation in the voluntary Workforce Development Partnership Program (“Program”).

I. Purpose

The purpose of this Agreement is to outline mutual expectations and responsibilities for clients who choose to participate in the Program, which connects shelter residents to employment and training opportunities.

This agreement is separate from the Client’s shelter residency agreement, and participation or non-participation in the Program will not affect the Client’s eligibility to stay at the Lodi Access Center. The Program aligns with Housing First and Low-barrier shelter principles, ensuring equitable access and voluntary participation.

II. Voluntary Program Participation Requirements

By signing this Agreement, the Client agrees to participate in the following voluntary workforce development activities, as they are relevant to their personal development goals:

Recovery Engagement

- a. Attend regular alcohol and/or drug recovery meetings as recommended by case management.
- b. Actively engage in personal recovery goals.
2. Substance-Free Commitment
 - a. Submit to alcohol and drug testing as a condition of participation in the Program.
 - b. Understand that a positive test does not affect the right to remain at the Lodi Access Center but may pause or suspend participation in the Program until readiness can be re-established.
3. Job Readiness & Development
 - a. Participate in training, coaching, and workforce preparation activities, including resume building, interview skills, and soft-skills workshops.
 - b. Accept feedback and demonstrate teachability and professionalism.
4. Volunteer Engagement
 - a. Contribute to shelter volunteer activities (e.g., food service, cleaning, organizing) to demonstrate reliability and build work history.



III. Program Support from Lodi Access Center

- Case management, coaching, and job-readiness support.
- Access to recovery support groups and referrals for additional services.
- Employer connections and workforce development opportunities.
- Ongoing follow-up and problem-solving assistance throughout employment.

IV. Acknowledgment

- Participation in this Program is entirely voluntary.
- Declining or discontinuing participation will not affect the Client's right to shelter services.
- Program participation may be paused or ended if mutually agreed goals are not currently aligned, but shelter residency remains unaffected.

Clients may request reasonable accommodation at any time to support their participation.

V. Mutual Agreement

By signing below, both parties acknowledge and agree to the terms outlined in this Agreement.

Client Name: _____

Client Signature: _____ Date: _____

OMI Representative Name: _____

OMI Representative Signature: _____ Date: _____

LODI ACCESS CENTER

Client Rules And Guidelines

EXHIBIT V_7.0

- Weapons of any kind are prohibited
- No fighting.
- No bringing in any drugs.
- No bringing in any alcohol.
- All first-time clients must complete an intake packet to receive services.
- You must register at the front desk daily to receive services.
- You are required to shower each day to stay that night.
- There are no in and out privileges after 6:00pm.
- Between the hours of 6:00pm and 8:30am clients are not allowed to go into any vehicles on the property unless you are leaving the property.
- No stealing.
- Tampering or damaging the property or equipment will result in an automatic disqualification.
- Must respect staff, volunteers, and all clients.
- Each station has supplemental rules that must be followed.
- Only 1 animal is allowed per family (Upon approval)
- You cannot acquire an animal after becoming a client.

I understand that if I violate any of these rules or guidelines, I may be subject to disqualification from the Lodi Access Center. Depending on the circumstance, this disqualification can be for a period of time or indefinitely.

Client Name: _____

Client Signature: _____ **Date:** _____

LODI ACCESS CENTER

Client Rules And Guidelines

- Weapons of any kind are prohibited
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I understand that if I violate any of these rules or guidelines, I may be subject to disqualification from the Lodi Access Center. Depending on the circumstance, this disqualification can be for a period of time or indefinitely.

CLIENT COPY



LODI ACCESS CENTER CLIENT EMERGENCY CONTACT INFORMATION

CLIENT NAME: _____ DATE: _____

EMERGENCY CONTACT INFORMATION:

PRIMARY CONTACT NAME: _____

RELATIONSHIP TO CLIENT: _____

MAIN PHONE NUMBER: _____ ALTERNATE: _____

EMAIL ADDRESS: _____

CITY & STATE RESIDES IN: _____

SECONDARY CONTACT NAME: _____

RELATIONSHIP TO CLIENT: _____

MAIN PHONE NUMBER: _____ ALTERNATE: _____

EMAIL ADDRESS: _____

CITY & STATE RESIDES IN: _____

In the event of an emergency when I am unable to communicate for myself or when I request assistance, I, _____, give Outreach Ministries International (OMI) staff permission to contact the above named individual(s) to correspond on my behalf. I understand that it may be necessary for OMI to share confidential information with my emergency contact, such as my name, location, and physical state of wellness, and I agree with this information being shared.

*****Please note that OMI will not share anything outside of vital confidential information relevant to the emergency.***

CLIENT SIGNATURE



Lodi Access Center Release of Liability and Assumption of Risk Agreement Operated by OMI dba Bridges and Breadcrumbs

Introduction and Purpose

By signing this document, you acknowledge that you have voluntarily chosen to use the services provided at the Lodi Access Center operated by Outreach Ministries International (OMI) dba Bridges and Breadcrumbs. This release form informs you of the risks associated with using the shelter and releases OMI from liability for certain types of incidents that may arise.

Description of Services and Assumption of Risk

The Lodi Access Center is a low-barrier shelter, which means it allows access to individuals with diverse personal circumstances, including but not limited to substance use challenges and mental health conditions. While we strive to maintain a safe and supportive environment, you acknowledge and assume all risks associated with communal living at the shelter. These risks may include, but are not limited to, exposure to illness, injury, disputes with other clients, and personal property loss or damage.

Waiver of Liability

In consideration of being allowed to use the facilities and services of the Lodi Access Center, you hereby release and discharge OMI dba Bridges and Breadcrumbs, its employees, agents, and volunteers from any liability, claim, or action that you or your legal representatives may have arising from any injury, illness, or damage to you or your personal property. This waiver extends to claims arising from OMI's ordinary negligence but does not include gross negligence or intentional misconduct by OMI staff.

Acknowledgment of Personal Responsibility

By signing this release, you acknowledge and agree:

- **Responsibility for Personal Belongings:** You are responsible for any personal belongings you bring to the shelter. OMI is not liable for the loss, theft, or damage of personal items.
- **Compliance with Shelter Rules:** You agree to follow the Lodi Access Center's rules and guidelines. Disregard for these rules may result in restrictions or termination of your access to the shelter.

- **Conduct Toward Others:** You commit to respecting other clients, staff, and volunteers and understand that aggressive or disruptive behavior may lead to limitations on your shelter access.

Confidentiality and Consent to Release Information

Your information is handled with confidentiality. However, in cases of emergency, medical, or behavioral incidents, you consent to allow Lodi Access Center staff to communicate necessary information to local health or emergency services to ensure your safety and the safety of others.

Agreement and Acknowledgment

By signing below, you confirm that you have read, understood, and agree to the terms of this Release of Liability and Assumption of Risk Agreement.

Client Acknowledgment and Signature

Client's Printed Name

Date

Client Signature

Witness Printed Name (OMI Representative)

Date

Witness Signature



Consent for Release of Information

To: _____ (Agency Name)

Name of individual: _____

I authorize the above-named agency to collect information or records, including but not limited to protected personal information, about me through the Homeless Management Information System of the San Joaquin Continuum of Care.

Data collected can be used according to the SJCoC HMIS Policies and Procedures and the SJCoC HMIS Privacy Policy and Data Sharing Policy. By signing this Release of Information, I certify that I understand my rights in relation to the collection, protection, and sharing of data through the HMIS.

By signing, I acknowledge that I am the individual to whom the information/record applies or that person's parent (if a minor) or legal guardian and legally authorized to obtain these records. I acknowledge that any knowingly false representation made to obtain information from the above-named agency can lead to punishment by fine, imprisonment or both.

Client/legal guardian signature: _____ Date: _____

CLIENT COPY



HOMELESS MANAGEMENT INFORMATION SYSTEM PRIVACY POSTING

San Joaquin Continuum of Care

****PLEASE READ CAREFULLY****

We collect personal information directly from you for reasons that are discussed in our privacy policy. We may be required to collect some personal information by law or by organizations that give us money to operate this program. Other personal information that we collect is important to run our programs, to improve services for homeless persons, to provide more resources for homeless persons, and to better understand the needs of homeless persons. We only collect information that we consider to be appropriate.

Information is only shared in limited circumstances in order to meet these goals, and to provide you with better services or resources that we believe may help you.

If you have any questions or would like to see our privacy policy, our staff will provide you with a copy.

CLIENT COPY

San Joaquin Continuum of Care Homeless Management Information System

SJCoC HMIS PRIVACY POLICY AND DATA SHARING POLICY

SJCoC HMIS PRIVACY POLICY AND DATA SHARING POLICY

This Notice describes the Privacy Policy of the San Joaquin Continuum of Care (SJCoC) Homeless Management Information System (HMIS). The SJCoC has executed a Memorandum of Understanding with Central Valley Low Income Housing Corp. (CVLIHC) to act as the HMIS Lead Agency, administering the HMIS on behalf of SJCoC, is governed by the SJCoC Board of Directors

Each CHO (or Participating Agency) is required to adopt this privacy policy related to the use of the SJCoC HMIS. This requirement includes agencies defined as Victim Service Providers and who are required to use a comparable data base. This Privacy Policy is included as a separate document in Appendix I, and should be made available to clients upon request.

Not all SJCoC stakeholders have direct access to HMIS; direct access is provided only to CHOs that are direct providers of services under the structure of these policies and procedures; funding sources that contract/subcontract with other agencies/individuals who are tasked by the contract to provide those direct services are not considered “direct providers.” Throughout the SJCoC, there are certain agencies, usually the service provider agencies that are directly interacting with homeless clients, that actively use and contribute to the HMIS. Any agency with access to the HMIS is required to sign an **Agency Partnership Agreement**. All HMIS Lead Agency personnel (including employees, volunteers, affiliates, contractors and associates), and all participating agencies and their personnel, are required to comply with this notice. All personnel in the SJCoC with access to HMIS must receive and acknowledge receipt of a copy of this Notice, agree in writing to comply with it, and receive training on this Privacy Policy before being given access to HMIS.

This Privacy Policy applies to all Personally Identifiable Information that is collected and maintained in the SJCoC HMIS, including electronic and hard copies derived from the HMIS.

Personally Identifying Information, also known as Protected Personal Information (PPI), is defined by the 2004 HUD Data and Technical Standards as: *“Any information maintained by or for a Covered Homeless Organization about a living homeless client or homeless individual that: (1) Identifies, either directly or indirectly, a specific individual; (2) can be manipulated by a reasonably foreseeable method to identify a specific individual; or (3) can be linked with other available information to identify a specific individual.”*

The SJCoC HMIS will use only de-identified, aggregate data for homeless policy and planning decisions, in preparing federal, state, or local applications for homelessness funding, to demonstrate the need for and effectiveness of programs, and to obtain a system-wide view of program utilization in the state.

Appendix I: Revised 06-08-23

The HMIS Lead Agency will endeavor in good faith to answer requests by Public Agencies by producing reports generated from the HMIS to provide information regarding homelessness within the SJCoC. Resulting reports will utilize only de-identified, aggregate data. The HMIS Lead Agency will, to a reasonable extent, also endeavor in good faith to answer requests by SJCoC stakeholders with reports generated from the HMIS to provide information regarding homelessness within the SJCoC. Resulting reports will utilize only de-identified, aggregate data. The HMIS Lead Agency is not mandated to provide reports to Public Agencies or SJCoC stakeholders, and the HMIS Lead Agency is the sole arbiter regarding the reasonableness of requests from Public Agencies and SJCoC stakeholders and whether to respond to those requests.

Direct sharing of data contained in the HMIS is not allowed, except under the express direction of the SJCoC Board of Directors following the strict process established by the SJCoC under the Data-Sharing Agreement (Appendix H).

Protection of PII is of extreme importance to the SJCoC. This document explains to clients and Participating Agencies the circumstances under which PII may be shared without express consent. The Privacy Posting (Appendix E) describes generally the conditions under which client data may be shared, including PII, and shall be posted publicly by each Participating Agency.

Federal law may require participating agencies to have their own agency-specific privacy policies. Information entered and accessed by the Collaborative Applicant may therefore also be covered by additional, agency-specific privacy policies. Participating agencies may be more restrictive in their privacy policies, but may not be less restrictive than this Privacy Policy. In accordance with federal law, all participating agencies are required to post a sign at their intake desks, offices, or website, if applicable, explaining the reasons information is requested.

The SJCoC and the HMIS Lead Agency reserve the right to amend this Privacy Policy at any time. It is possible that an amendment may affect PII that we obtained before the effective date of the amendment. All amendments apply retroactively. We will maintain a record of the changes made in amendments and post new versions of this Privacy Policy on the website located at: <http://www.sanjoaquinoc.org/>

SJCoC has adopted an approach to client consent for use and disclosure of information consistent with regulations set forth by HUD in Federal Register/ Vol. 69, No. 146 / Friday, July 30, 2004 / Notices and with the Coordinated Entry Management and Data Guide (published October 2018) at <https://files.hudexchange.info/resources/documents/coordinated-entry-management-and-data-guide.pdf>

- “Use” means, with respect to PII, the sharing, employment, application, utilization, examination, or analysis of such information internally within the HMIS participating agency that maintains such information or within the HMIS Lead.
- “Disclosure” means, with respect to PII, the release, sharing, transfer, provision of access to, or divulging of information to an organization outside the HMIS participating agency holding the information or outside the HMIS Lead Agency. Disclosure of any information to any entity that has not signed a Data Sharing MOU and is not required by law can only occur with written client consent

Only information that is needed for 1) coordination of services and case management, 2) administration, 3) billing, and 4) analytics are collected.

- **Coordination of services and case management:** Agencies may use or disclose client information for case management purposes to provide or coordinate services for you and your family to help you end your homelessness. Participating Agencies may use or disclose your information to locate suitable services or housing, to conduct referrals and assessments, to determine program eligibility, and to otherwise collaborate to address your specific needs and circumstances.. Unless a client requests that his/her record remain hidden, client PII/PPI will only be shared with an HMIS CHO/Participating Agency that has executed a Data Sharing MOU. The HMIS Lead Agency may share client information on an HMIS-wide basis (or on a subset thereof) if the HMIS Lead Agency determines the sharing of data is to provide enhanced services, including case management, health care, and/or housing, and if the agency/organization receiving the client information has completed the process described in the Data Sharing Agreement (Appendix H) and is determined to have met the requirements therein. The HMIS Lead Agency may share client information on an HMIS-wide basis to meet mandatory reporting requirements of the federal and state governments, including but not limited to Longitudinal Systems Analysis, System-wide Performance, Housing Inventory Count, Point in Time Count, and others as determined by the HMIS Lead Agency.
- **Administrative Uses:** Agencies may use client information to carry out administrative functions internally including but not limited to legal, audit, personnel, oversight, and management functions.
- **Billing Use:** Agencies may use client information for functions related to payment or reimbursement for services if required by the funder/billing agency.
- To carry out maintenance and operation of the SJCoC HMIS;
- To create reports for the SJCoC that include your data but only in a manner in which your identity is not disclosed
- **Research Use:** Agencies may use client information for internal analysis including but not limited to evaluating program effectiveness, creating an unduplicated database on clients served within the system, understanding local and regional needs and trends in homelessness, and assessing an agency’s progress towards achieving goals and objectives. PII that could be used to identify a client should never be included in these reports. The release of aggregate HMIS data to an entity that is not a CHO/Participating Agency must be approved by the SJCoC Data and HMIS Committee and SJCoC Board of Directors.
- **Required by Law:** Agencies may disclose client personal information that meets the minimum standard necessary for the immediate purpose to comply with legal requirements. Agencies may only disclose client information to law enforcement entities in response to appropriate legal requests including subpoena or court order. Agencies may disclose client PII to an agency authorized by law to receive reports of abuse, endangerment, neglect, or domestic violence if this agency believes the clients are the victim of such treatment provided any of the following apply:
 - 1) the disclosure is required by law, such as “mandated reporting”
 - 2) the agency believes the disclosure is necessary to prevent serious harm, or to lessen a serious or imminent threat to the health and safety of an individual or public and the

information is given to law enforcement or other person reasonably able to prevent or reduce that threat.

Each CHO must develop and implement a written plan to dispose of or, in the alternative, to remove identifiers from, PII that is not in current use seven years after the PII was created or last changed (unless a statutory, regulatory, contractual, or other requirement mandates longer retention).

Client Rights

- Clients have the right to get services even if they choose **NOT** to participate in the SJCoC HMIS; this right is limited by the nature of the project; some projects are required by law or regulation to collect certain data to establish and document program eligibility.
- Clients have the right to ask who has seen their information.
- Clients have the right to see or receive a copy of their information and to change it if it is not correct. Requests to view or receive a copy of their information shall be in writing and clients must provide proof of identity; the request and proof of identity shall be maintained in the client file (electronic or hard copy). To change information, clients must show documentation verifying the correct information.

If clients do not want their information shared with a specific agency or do not wish to share their information any longer (, it is their responsibility to let their case manager or intake worker know, who must then take the proper action to honor that request and to document that client's request appropriately.

If a client has any questions about the use of their personal information or are concerned about client privacy or safety, they should share their questions or concerns with agency management. If a client feels that the security or integrity of their information has been violated by an end-user or the CHO itself, clients should file a complaint with the Agency, following their procedures that are in place. Clients may also file a complaint with the HMIS Lead Agency; all CHOs/Participating Agencies are required to provide a client with a **Grievance Filing Form** (Appendix F) at their request and submit the completed form to the HMIS Lead Agency; in instances where the HMIS Lead Agency is the subject of a grievance, it will be submitted to the SJCoC Data and HMIS Committee for review and action. The HMIS Lead Agency, in conjunction with the SJCoC Data and HMIS Committee, will investigate each grievance and submit suggested actions to the CHO/Participating Agency within 30 days. Clients that submit a grievance filing form will not be retaliated against for filing a complaint. Clients may also ask for a copy and/or an explanation of the privacy policy.



Homeless Management Information System Enrollment Form (Program: _____)

(Separate Enrollment Form must be completed for all household members as part of Program Enrollment;
Head of Household must complete all fields; Children in Household only need shaded/highlighted fields.)

Client name: _____ **Date of Enrollment:** _____

Social Security Number: _____ **Date of Birth:** _____

Phone number/email address: _____

CES Referral: Yes No **Other referring agency (if any):** _____

Case manager from other agency (if any): _____ **Case manager phone/email:** _____

Location of Client at enrollment: Stockton Lathrop Lodi Manteca Tracy
 Unincorporated County Other: _____

Client is: Head of Household Unaccompanied Adult (Single Adult) Other Adult in household
 Child in household Unaccompanied Youth (Youth without any other household members)

Head of Household (if different from "Client Name"): _____

Gender: Woman/Girl Man/Boy Culturally specific identity Transgender NonBinary
 Questioning Different Identity Client doesn't know Client prefers not to answer
 Data not collected

Race (check all that apply):
 White Black or African American Asian
 American Indian or Alaskan Native Native Hawaiian or Pacific Islander Data not collected
 Client doesn't know Client prefers not to answer

Ethnicity: Hispanic/Latinx Non-Hispanic/Latinx Client doesn't know
 Client prefers not to answer Data not collected

Marital Status: Married Not Married but Living with Partner Divorced Separated
 Widowed Never Married Unknown Data Not Collected

Sexual Orientation: Straight/Heterosexual Gay/Lesbian Bisexual Questioning
 Client doesn't know Client refuses Data not collected

Client's Preferred Language: _____

Veteran status: Yes No Client doesn't know Client refused

Branch of military: Army Air Force Navy Marines
 Other Client doesn't know Client refused

Current living situation / Type of Residence (where was household last night?):

- | | |
|--|--|
| <input type="checkbox"/> Emergency shelter | <input type="checkbox"/> Place not meant for human habitation |
| <input type="checkbox"/> Transitional housing for homeless | <input type="checkbox"/> Hotel/motel paid by HSA or charity |
| <input type="checkbox"/> Permanent housing for formerly homeless | <input type="checkbox"/> Hotel/motel paid by household |
| <input type="checkbox"/> Psychological hospital/facility | <input type="checkbox"/> Rental by client with ongoing housing subsidy |
| <input type="checkbox"/> Substance abuse treatment facility or Detox center | <input type="checkbox"/> Rental by client with no ongoing subsidy |
| <input type="checkbox"/> Residential project/halfway house w/ no homeless criteria | <input type="checkbox"/> Owned by client with ongoing housing subsidy |
| <input type="checkbox"/> Hospital or other medical residential facility | <input type="checkbox"/> Owned by client with no ongoing subsidy |
| <input type="checkbox"/> Staying with family members | <input type="checkbox"/> Jail/prison/juvenile detention facility |
| <input type="checkbox"/> Staying with friends | <input type="checkbox"/> Long-term care facility |
| <input type="checkbox"/> Foster care or foster group home | <input type="checkbox"/> Other (_____) |
| <input type="checkbox"/> Client doesn't know | <input type="checkbox"/> Client prefers not to answer |
| | <input type="checkbox"/> Data not collected |

Current living situation / Length of stay in prior living situation indicated above:

- | | | |
|---|--|--|
| <input type="checkbox"/> 1 week or less | <input type="checkbox"/> 1 week to 1 month | <input type="checkbox"/> 1 month to 3 months |
| <input type="checkbox"/> 3 months to 1 year | <input type="checkbox"/> more than 1 year | <input type="checkbox"/> Client doesn't know |
| | | <input type="checkbox"/> Client refused |

Approximate date this homeless episode started: _____

Number of times been on the streets or in Emergency Shelter during the past three years: _____

Verification provided: Yes No

Total number of months on streets or in ES during the past three years: _____

Verification provided: Yes No

Last permanent address: _____

Is Client currently being evicted:

- Yes No Client doesn't know Client refused Data Not Collected

Has Client been evicted in past 3 years:

- Yes No Client doesn't know Client refused Data Not Collected

Number of evictions in past 3 years: _____

Has Client been discharged from an institution (jail, hospital, etc.) in past 6 months:

- Yes No Client doesn't know Client refused Data Not Collected

Disabling condition:

- Yes No Client doesn't know Client refused

Verification provided: Yes No

Physical Disability:

- Yes No Client doesn't know Client refused Data not collected

If yes, is it long term? Yes No Client doesn't know Client refused Data not collected

Developmental Disability:

- Yes No Client doesn't know Client refused Data not collected

If yes, is it long term? Yes No Client doesn't know Client refused Data not collected

Chronic Health Condition:

- Yes No Client doesn't know Client refused Data not collected

If yes, is it long term? Yes No Client doesn't know Client refused Data not collected

HIV-AIDS diagnosis:

- Yes No Client doesn't know Client refused Data not collected

Mental Health Problem:

- Yes No Client doesn't know Client refused Data not collected

If yes, is it long term? Yes No Client doesn't know Client refused Data not collected

Substance Use Disorder: Alcohol Use Drug Use Both Alcohol and Drug Use No
 Client refused Data not collected

If yes, is it long term? Yes No Client doesn't know Client refused Data not collected

Victim of Domestic Violence: Yes No Client doesn't know Client refused Data not collected

Are you currently fleeing?: Yes No Client doesn't know Client refused Data not collected

Last occurrence: within past 3 months 3 to 6 months ago 6 to 12 months ago
 more than 1 year ago Client doesn't know Client refused

Cash income (in most recent 30 days): *for any income, list amount monthly*

_____ Earned income	_____ Unemployment insurance
_____ Workers compensation	_____ Private disability
_____ Veteran's service related disability	_____ SSDI
_____ SSI	_____ Social Security retirement
_____ Veteran's non-service disability pension	_____ Employment pension
_____ TANF	_____ General Assistance
_____ Spousal support	_____ Child support
_____ Other (explain: _____)	

_____ **Total cash monthly income**

Non-cash benefits (in most recent 30 days): *for any benefits, list amount monthly*

_____ SNAP / Food stamps
 _____ WIC
 _____ TANF child care
 _____ TANF transportation
 _____ Other TANF
 _____ Other (explain: _____)

Health Insurance

Yes No Medi-Cal

If Yes: Is Health Insurance through Health Net :
 Yes No Client doesn't know Client refused Data not collected

If Yes: Is Health Insurance through Health Plan of San Joaquin:
 Yes No Client doesn't know Client refused Data not collected

If Yes: What is your Managed Health Plan Number: _____

Yes No Medicare

Yes No State Children's Health Insurance Plan

Yes No VA Medical Services

Yes No Employer provided health insurance

Yes No Health insurance through COBRA

Yes No Private pay health insurance

Yes No State Health Insurance for Adults

Yes No Indian Health Services Program Other: _____

Does Client have a Payee or Conservator:

Yes No Client doesn't know Client refused Data not collected

Client perceives life has value and worth:

Strongly Disagree Somewhat Disagree Neither Disagree nor Agree Somewhat Agree Strongly Agree
 Client doesn't know Client refused Data not collected

Client perceives they have support from others who will listen to problems:

Strongly Disagree Somewhat Disagree Neither Disagree nor Agree Somewhat Agree Strongly Agree
 Client doesn't know Client refused Data not collected

Client perceives they have a tendency to bounce back after tough times:

Strongly Disagree Somewhat Disagree Neither Disagree nor Agree Somewhat Agree Strongly Agree
 Client doesn't know Client refused Data not collected

Client frequency of feeling nervous, tense, worried, frustrated, or afraid:

Not at all Once a month Several times a month Several times a week At least every day
 Client doesn't know Client refused Data not collected

General health status:

Excellent Very good Good Fair Poor Client doesn't know Client refused Data not collected

LODI ACCESS CENTER CLIENT ENROLLMENT DURATION POLICY

This policy establishes clear guidelines for the maximum duration of client enrollment and the conditions for re-enrollment at Lodi Access Center (LAC) Emergency Shelter operated by Outreach Ministries International's (OMI). The policy aligns with California Health and Safety Code and Housing and Urban Development (HUD) best practices for emergency shelter management. This policy ensures compliance with state definitions and promotes equitable, consistent access to shelter services for all clients.

California Health and Safety Code § 50801 defines Emergency Shelter as "housing with minimal supportive services for homeless persons, limited to occupancy of six months or less."

HUD guidelines states an "Emergency Shelter is any facility, the primary purpose of which is to provide temporary or transitional shelter for the homeless in general or for specific populations of the homeless."

A 45-day waiting period before re-enrollment is adopted by OMI as an internal best practice to prevent cyclical, non-progressive use of services and to ensure equitable access for all eligible individuals.

Enrollment and Re-Enrollment

- Enrollment in services at the Lodi Access Center Emergency Shelter is limited to a **maximum of six (6) consecutive months (180 days) per client.**
- After reaching the 6-month enrollment limit, clients must exit the program.
- Clients who have exited after reaching the 6-month maximum are not eligible to re-enroll for a minimum period of forty-five (45) days following their exit date.
- Re-enrollment after the 45-day period is subject to availability and standard intake procedures.
- Exceptions or extensions beyond the 6-month limit are not permitted except as required by law or at the discretion of the Lodi Access Center Director in extraordinary circumstances (i.e., a viable long term housing plan).

Procedures

- Staff will monitor client enrollment dates and notify clients as they approach the 6-month limit.
- 30 days prior to reaching the term limit, clients will receive written notice of their required exit date and the earliest date they may reapply for services.

Policy Scope and Implementation

This policy is effective immediately and applies to all current and future shelter guests. The Lodi Access Center operates as a low-barrier emergency shelter, in alignment with California and federal guidelines.

Clients are not required to engage in case management or supportive services as a condition of shelter entry or continued stay during their allowable enrollment period of up to 180 days. Voluntary services are offered to support client stability and housing goals, but participation is not mandatory.

The time-limited nature of overnight shelter stays — capped at six (6) consecutive months — is in place solely to promote equitable access and is not tied to service participation or progress benchmarks.

However, in extraordinary circumstances where a client is actively engaged in a viable housing or program plan, limited extensions beyond the 180-day maximum may be considered at the discretion of the Shelter Director. In such cases, extensions may be contingent upon ongoing participation in supportive services directly related to housing placement or stabilization.

I have read and understand the Client Enrollment Duration Policy and agree to comply with the policy.

CLIENT SIGNATURE

DATE



ANTI-DISCRIMINATION AND HARRASSMENT POLICY

Outreach Ministries International (OMI) is committed to providing a workplace that is free from all forms of discrimination and harassment. We believe that all employees have the right to work in an environment that promotes equal opportunities and prohibits discriminatory practices, including harassment.

Policy

Discrimination and harassment based on race, color, religion, sex, national origin, age, disability, veteran status, sexual orientation, gender identity or expression, or any other characteristic protected by federal, state, or local law will not be tolerated. This policy applies to all employment practices, including recruitment, selection, promotion, transfer, merit increase, salary, training and development, demotion, and separation.

Harassment is defined as behavior, which is not welcome, is personally offensive, debilitates morale, and therefore, interferes with work effectiveness. Harassment can occur as a result of a verbal or physical act or expression.

Complaint Procedure

Any employee who feels harassed or discriminated against should report the incident immediately to his or her supervisor, or directly to the Human Resources Department if the supervisor is the subject of the complaint.

Every reported complaint of harassment or discrimination will be investigated promptly and impartially, with every effort made to maintain confidentiality. The complainant and the accused will be informed of the results of the investigation.

If it is determined from the investigation that harassment or discrimination occurred, the offender will be subject to appropriate disciplinary action, up to and including termination.

Retaliation

Retaliation against an individual for reporting harassment or discrimination or for participating in an investigation of a claim of harassment or discrimination is a serious violation of this policy and, like harassment or discrimination itself, will be subject to disciplinary action, up to and including termination.

Training

OMI will conduct periodic training sessions to ensure that all employees understand their rights and responsibilities under this policy and the foundation's commitment to maintaining a workplace free from discrimination and harassment.

At Outreach Ministries International, we strive to create a work environment in which all individuals are treated with respect and dignity. Everyone has the right to work in a professional atmosphere that promotes equal employment opportunities and prohibits unlawful discriminatory practices, including harassment.

Please note that this policy does not constitute a contract of employment or alter the at-will nature of any employee's employment in any way.

I have read and understand the above policy and agree to abide by its guidelines

Employee Signature

Date



ATTENDANCE POLICY

Punctuality and regular attendance is very important to the operation of Outreach Ministries International's business, and is the responsibility of each employee. Tardiness and absences cause a slow-down in operations and create an added burden for fellow employees. Good attendance is something that is expected from all employees. As such, employees are expected to report to work at their scheduled start time and be prepared to begin their workday. Employees are also expected to remain at work for their entire workday. Late arrivals, early departures or other absences from scheduled hours are disruptive and should be avoided as much as possible.

This policy does not apply to absences covered by statutory leave. These exceptions are described in separate policies.

Absence

"Absence" is defined as when an employee is unavailable for work as assigned/scheduled and such time off was not scheduled/approved in advance as required by the Company's notification procedure. There are typically three types of absences:

- **Excused absence.** Occurs when an employee provides management with sufficient notice in advance of the absence; the absence request has been approved in advance by the employee's supervisor; and the employee has sufficient accrued paid time off (PTO) to cover the absence. Sufficient notice is at least forty-eight (48) hours prior to the absence taking place. Excused absences also include pre-approved vacation, personal holidays, bereavement leave and jury duty.
- **Unplanned absence.** Occurs when an employee has properly notified their supervisor that they will be absent from work due to an illness or an emergency. Employees must notify their supervisor no later than one (1) hour prior to the employee's scheduled start time on the same day the absence is occurring. Each employee is responsible for contacting their supervisor if they are going to be absent from work.
- **Unexcused absence.** Occurs when an employee fails to report to work or properly notify their supervisor of the absence ("No call, no show") or when an employee has exhausted all of their sick leave. Absences that occur frequently or demonstrate a pattern of absenteeism may be deemed unexcused and subject to corrective action. An unexcused absence counts as one (1) occurrence for the purposes of discipline under this policy. No more than three (3) unexcused absences will be allowed in a twelve (12) month period.

Employees with three (3) or more consecutive days of excused absence due to illness or injury may be asked to provide a doctor's note prior to returning to work, unless this violates state or local law. Furthermore, employees who have exhausted their sick leave may be asked to provide a doctor's note for the day(s) they were absent. Providing Outreach Ministries International with

a doctor's note does not automatically deem an absence excused. Management will review overall patterns of attendance and make determinations accordingly.

Absences and tardiness reported by text message and email are not acceptable.

Tardiness

An employee is deemed to be tardy when they:

- Fail to report for work at the assigned/scheduled work time.
- Arrive to work past their scheduled start time.
- Leave work prior to the end of assigned/scheduled work time without prior supervisory approval.
- Take an extended meal or break period without approval.

If an employee cannot report to work as scheduled, they must notify their supervisor no later than their regular starting time. This notification does not excuse the tardiness but simply notifies the supervisor that a schedule change may be necessary.

Employees who must leave work before the end of their scheduled shift must also notify their supervisor immediately.

We realize traffic or weather conditions may cause an employee to be late occasionally. However, employees are expected to plan for traffic and weather problems and to allow for extra time to commute to work. If the employee will be late, they must let their supervisor know of their late arrival as soon as practical. Notification does not change the fact that this will still be considered an unexcused tardy. Excessive absences, tardiness, or early departures will lead to discipline, up to and including discharge. Absences or tardiness are excessive if they occur frequently or if they demonstrate a pattern.

Corrective Action

Excessive absenteeism is defined as two (2) or more occurrences of unplanned absences or late arrivals in a thirty (30) day period and may result in corrective action. Three (3) occurrences of unexcused absences in a twelve (12) month period are considered grounds for termination.

Job Abandonment

Any employee who fails to report to work for a period of three (3) days (no call/no show) or more without properly notifying their supervisor will be considered to have abandoned their job and voluntarily terminated their employment with Peer Recovery Services.

I have read and understand the above policy and agree to abide by its guidelines

Employee Signature

Date



CONFIDENTIALITY POLICY

Employees may not disclose confidential information to anyone outside the Company without appropriate authorization.

Confidential information may include client names and information, client whereabouts, whether or not a client is receiving services, employee information, internal reports, financials, policies, or other internal business-related communications.

Confidential information may only be disclosed or discussed with those who need the information. Conversations of a confidential nature should not be held within earshot of the public or clients.

When any inquiry is made regarding an employee, former employee, or client, the inquiry should be forwarded to a Director or Human Resources **without comment from the employee**. If an inquiry is made about a client, employee, or any other confidential information, employees are to direct the individual to speak to the Director or Human Resources.

This policy is intended to impress upon employees the need for discretion at all times and is not intended to inhibit normal business communications. In addition, nothing in this policy is intended to infringe upon employee rights under Section 7 of the National Labor Relations Act.

I have read and understand the above policy and agree to abide by its guidelines

Employee Signature

Date



CORRECTIVE ACTION POLICY

At Outreach Ministries International (OMI), we value the contribution of every employee. In order to provide the highest level of services to our members, we expect all employees to meet performance expectations and to conduct themselves in accordance with our standards of conduct as well as other applicable policies and procedures. Employees who fail to meet performance expectations or engage in unacceptable conduct shall be subject to corrective action.

OMI does not adhere to any formal system of discipline but considers various factors such as the gravity of the violation, the number of times a rule has been violated, the type of rules violated and the employee's overall performance when deciding how or when to issue corrective action.

Corrective action is considered as part of an employee's total performance. Therefore, continued infractions whether in one category or distinct and multiple categories, the employee's performance is viewed with all the infractions in mind. Where there are multiple infractions within an immediate time frame, all the infractions will be outlined into one single corrective action document.

The following progressive disciplinary process may be utilized to improve performance and address employee conduct issues:

- First offense – Verbal (documented)
- Second offense – First written reprimand
- Third offense – Final written reprimand
- Fourth offense – Termination

While the use of progressive disciplinary steps is recommended, it is not required, and OMI reserves the right to take any corrective action it deems appropriate based on the facts and circumstances of each case.

Corrective actions will remain in an employee's personnel file but will expire after twelve (12) months and no longer be considered when evaluating overall performance with the exception of egregious or willful misconduct that resulted in a corrective action.

This policy is not intended to, should not be construed to, and does not create a term of employment. Further, it does not limit or modify OMI's right to terminate your employment or to alter the terms and conditions of your employment, at any time and for any reason, with or without cause. OMI may, of course, terminate employment without following the progressive discipline steps outlined above whenever it determines that such action is warranted. Severe misconduct does not require progressive discipline and is grounds for immediate termination. Examples of severe misconduct are found in OMI's Workplace Conduct Policy.

All employees are expected to meet our standards of performance, professionalism, and conduct, and to follow our work rules. Any improper conduct or violation of work rules may warrant disciplinary action, up to and including termination.

I have read and understand the above policy and agree to abide by its guidelines.

Employee Signature

Date



Drug and Alcohol Use Policy

Outreach Ministries International (OMI) is committed to providing a safe, productive, and healthy work environment for all employees. This Drug and Alcohol Use Policy outlines OMI's position on the use of these substances in the workplace or when conducting OMI business.

Policy

- 1. Alcohol Use:** The consumption of alcohol during working hours, including meal and break periods, is strictly prohibited.
- 2. Illegal Drug Use:** The use, possession, sale, or distribution of illegal drugs in the workplace or while conducting OMI business is strictly prohibited. This also includes the misuse of prescription drugs.
- 3. Prescription Drugs:** If an employee is taking a prescribed medication that may affect their ability to safely perform their job, they should notify their supervisor or the Human Resources department.
- 4. Impairment:** Employees are prohibited from working while under the influence of alcohol, illegal drugs, or any substances that impair their ability to perform their job safely and effectively.

Testing

If reasonable suspicion exists to believe that an employee is under the influence of drugs or alcohol during working hours, OMI reserves the right to require a drug or alcohol test. OMI may also require drug testing as part of a post-accident investigation.

Treatment and Counseling

OMI encourages employees struggling with substance abuse to seek professional assistance. We are supportive of those who voluntarily seek help, and will work to accommodate employees undergoing treatment, as long as this does not create undue hardship for the organization.

Consequences of Violations

Violations of this Drug and Alcohol Use Policy may result in disciplinary action, up to and including termination of employment. Legal activities related to drug use may also be reported to law enforcement.

At Outreach Ministries International, we care about the well-being of our employees. If you have questions about this Drug and Alcohol Use Policy or need assistance with a substance abuse issue, please contact the Human Resources department.

Please note that this policy does not constitute a contract of employment or alter the at-will nature of any employee's employment in any way.

I have read and understand the above policy and agree to abide by its guidelines

Employee Signature

Date



DUAL RELATIONSHIP POLICY

Integrity, safety, and professionalism are very important to the operation of Outreach Ministries International's (OMI) business at the Lodi Access Center. This policy establishes clear guidelines for managing dual relationships between staff, volunteers, and clients in order to ensure an equitable approach to every client.

Definition

A *dual relationship* occurs when a staff member or volunteer has another significant relationship with a client outside of their professional role with OMI and/or at the Lodi Access Center. This includes, but is not limited to, business, social, familial, or romantic relationships.

Policy Guidelines

Prohibition of Dual Relationships

Staff and volunteers must not enter into dual relationships with clients that could impair professional judgment, create conflicts of interest, or risk the appearance of impropriety. This includes, but is not limited to:

- Romantic or sexual relationships with current clients.
- Business or financial dealings with clients (e.g., lending/borrowing money, buying/selling goods or services).

Pre-existing Relationships

If a staff member or volunteer has a close personal friendship or family relationship with a client that predates their employment or volunteer service with OMI at the Lodi Access Center, this is still considered a dual relationship.

- These pre-existing relationships must be disclosed to the Director or Assistant Director of Operations upon hire or as soon as they are recognized.
- The Director will assess the situation and, if necessary, adjust duties to avoid conflicts of interest or boundary issues.

Disclosure and Management

If a staff member or volunteer becomes aware of a potential or actual dual relationship, whether pre-existing or new, they must immediately disclose it to the Director or Assistant Director of Operations. The Director will determine the appropriate course of action, which may include limiting the employee's involvement with the client.

Boundaries

Staff and volunteers are expected to maintain clear and professional boundaries at all times. Personal contact information should not be shared with clients unless required for official center business and approved by a supervisor. Whenever necessary, OMI would prefer clients use the Lodi Access Center phone number to correspond with staff.

It is understood by OMI that certain interactions with clients will require the sharing of personal contact information. Acceptable interactions for sharing contact information should be discussed with the Director prior to sharing. OMI considers interactions which include Recovery Support, Mentoring, Transportation to/from community events and specific resources, and Community Service and Ministry to be acceptable reasons for sharing personal contact information. If a staff member shares personal contact information with a client, staff are expected to notify the Director of such exchange.

Gifts and Favors

Staff and volunteers must not accept personal gifts, favors, or services from clients, nor offer them to clients, as this may compromise professional boundaries.

Reporting Concerns

Any concerns or violations of this policy must be reported to the Director or Assistant Director. Violations may result in corrective action, up to and including termination, as outlined in OMI's corrective action and workplace conduct policies.

Enforcement

Failure to adhere to this policy may result in disciplinary action, including suspension or termination consistent with the OMI's corrective action procedures.

Questions regarding this policy should be submitted to Human Resources.

I have read and understand the above policy and agree to abide by its guidelines

Employee Signature

Date



EMPLOYEE DRESS CODE POLICY

The Lodi Access Center strives to create a safe, welcoming, and professional environment for both clients and staff. Our dress code policy is designed to promote a positive image of the center while allowing staff to dress comfortably and practically for the tasks at hand.

Dress Code Guidelines:

1. General Attire
 - Staff should wear clean, well-maintained clothing that is professional yet practical for the nature of their work.
 - Acceptable attire includes jeans or khakis, casual slacks, and appropriate-length shorts or skirts (knee-length or longer).
 - Tops should include polo shirts, blouses, or collared shirts. T-shirts without graphics or logos are also acceptable.
 - Clothing should be free of offensive language, images, or large brand logos. Lodi Access Center or organization-branded apparel is encouraged.
2. Footwear
 - Closed-toe shoes are required to ensure safety, especially when handling equipment or assisting with tasks involving transportation and movement of supplies.
 - Comfortable, non-slip shoes are encouraged, as staff are often required to walk or stand for extended periods.
 - Sandals, flip-flops, and open-toed shoes are not permitted.
3. Outerwear and Accessories
 - Jackets, sweaters, and other outerwear are permitted, especially during cooler weather, but should follow the same guidelines regarding logos and images.
 - For staff working outdoors or engaging in outreach activities, hats and other protective outerwear are allowed for sun protection.
 - Accessories should be minimal and practical, avoiding items that may pose a safety risk.
4. Hygiene and Presentation
 - Staff are expected to maintain personal hygiene to ensure a pleasant and respectful environment for clients and coworkers.
 - Hair should be clean and neatly presented. Long hair should be secured if working around food, equipment, or in other active roles.
 - Scented products should be minimal to respect clients and staff who may have sensitivities to fragrance.
5. Safety Gear
 - Staff in roles that involve outdoor clean-up or security should wear any required safety gear, such as gloves, reflective vests, or protective eyewear, provided by the center.

6. Exceptions and Accommodations

- Reasonable accommodations to this dress code will be made for religious, cultural, or medical reasons.
- Staff who have questions about the dress code or require accommodation should speak with their supervisor.

Policy Enforcement: If attire does not meet these guidelines, staff may be asked to adjust their clothing to comply with the dress code. Repeated violations may require further discussion with the supervisor.

I have read and understand the above policy and agree to abide by its guidelines

Employee Signature

Date



HUMAN WASTE REMOVAL POLICY

Dealing with human waste on your property requires strict hygiene protocols to ensure the safety of your staff. Here's a general approach to training and procedures for handling this situation:

Key Steps for Handling Human Waste:

Personal Protective Equipment (PPE):

Staff involved in cleaning should wear appropriate **PPE**, including:

Disposable gloves (preferably nitrile or latex)

Face masks (to avoid inhaling particles)

Eye protection (goggles)

Disposable or washable aprons and/or coveralls

Ensure staff is trained on how to properly put on and take off PPE to avoid contamination.

Cleaning Supplies:

Use **disinfectants that are EPA-approved** for cleaning up biohazards, specifically those effective against fecal bacteria and viruses (e.g., bleach solution diluted at 1:10 or other biohazard-specific cleaning products).

Provide **absorbent material** for any liquid waste and tools like scrapers or shovels to handle solid waste without direct contact.

Cleaning and Disinfection Process:

1. **Step 1: Remove the Waste:** Use disposable tools or designated equipment to pick up solid waste. For liquid waste, apply absorbent material first.
2. **Step 2: Disinfect the Area:** After the waste is removed, thoroughly disinfect the area with an appropriate cleaning agent, following product instructions for kill time.
3. **Step 3: Proper Disposal:** Dispose of waste, PPE, and cleaning materials in double-bagged, sealed trash bags. Follow local regulations for disposal of biohazardous waste if necessary.

Handwashing and Hygiene:

After cleaning, staff should **immediately wash hands** with soap and water for at least 20 seconds, even if gloves were worn.

Provide alcohol-based hand sanitizer (60% alcohol) for use if soap and water are unavailable immediately but always encourage proper handwashing.

I have read and understand the above policy and agree to abide by its guidelines

Employee Signature

Date



INTERNET AND EMAIL USE POLICY

Outreach Ministries International (OMI) recognizes that internet and email systems are essential tools for business communication and productivity. This Internet and Email Use Policy provides guidelines for the appropriate use of these tools to ensure their use aligns with OMI's values and professionalism.

Policy

1. **Acceptable Use:** Internet and email systems are primarily for business use.
2. **Inappropriate Use:** The internet and email must not be used for transmitting offensive, discriminatory, or harassing content. The illegal download of copyrighted materials, the viewing of inappropriate or explicit content, and any activity that could harm OMI's systems, such as downloading malware or using unsecured networks, is strictly prohibited.
3. **Confidential Information:** Never share confidential or proprietary information without appropriate authorization. This includes client data, employee information, or any other information that could harm the Foundation if disclosed.

Email Etiquette

1. **Professionalism:** Emails should be composed in a professional manner. Use proper grammar and spelling and avoid using slang or overly casual language.
2. **Clear Subject Lines:** Use clear and concise subject lines to help recipients understand the purpose of the email.
3. **Attachments:** Be cautious when sending attachments. Ensure the recipient is expecting the attachment and that it's a necessary part of your communication.

Monitoring

OMI reserves the right to monitor and access any information sent or received through its internet and email systems to ensure compliance with this policy. Employees should have no expectation of privacy when using OMI's internet and email systems.

Consequences of Violations

Violations of this Internet and Email Use Policy may result in disciplinary action, up to and including termination of employment.

Policy Review and Updates

This policy will be reviewed periodically and may be updated at any time. Employees are responsible for understanding and complying with this policy as well as any updates that may be made.

At Outreach Ministries International, we count on our employees to use internet and email responsibly and professionally. If you have any questions about this Internet and Email Use Policy, please contact the Human Resources department.

Please note that this policy does not constitute a contract of employment or alter the at-will nature of any employee's employment in any way.

I have read and understand the above policy and agree to abide by its guidelines

Employee Signature

Date



INTRODUCTORY PERIOD POLICY

The purpose of this policy is to notify employees of Outreach Ministries International's (OMI) introductory period and the "at-will" employment relationship between OMI and its employees.

Policy

New employees, whether part-time or full-time, have an introductory employment status for ninety (90) working days. During this period, you will have an opportunity to learn about your new position and see whether you are satisfied with your employment at OMI, and we will use the introductory period to see if you are able to perform the job duties required by the position.

Employment may be terminated without notice at any time during this period. Completion of this introductory period is also not a guarantee of continued employment. During the entire course of your employment, you are an "at-will" employee, so either you or OMI may terminate your employment with or without cause, and with or without notice, as long as it is consistent with any and all applicable laws.

The introductory period may be extended at the discretion of OMI, as it deems appropriate.

I have read and understand the above policy and agree to abide by its guidelines.

Employee Signature

Date

California Workers: You have the right to Paid Sick Leave

Starting January 1, 2024: 40 hours or 5 days per year

You qualify for paid sick leave from your employer if you worked:



At least 30 days with the same employer in the current year.



90 days with the same employer.



Full-time, part-time or as a temporary worker.

You can use paid sick leave:



For treatment, diagnosis or preventative care for yourself or a family member or a designated person.



By notifying your employer as soon as possible when you need to take paid sick leave. A note from the doctor is not required.



For at least 40 hours or 5 days per year, whichever is more. Employers can provide additional paid sick leave, but not less than 40 hours or 5 days per year.

Earning Paid Sick Leave: Employers can provide workers at least 1 hour of paid sick leave for every 30 hours worked, or they can provide all 5 days or 40 hours at the start of each year or 12 month period.

! Cities or regions in California may require employers to provide additional sick leave.

What is 40 hours or 5 days?

The employer must allow workers to use 40 hours or 5 days, whichever is more.

Example 1: An employee normally works 10-hour days. They have the right to 5 days, or 50 hours, of paid sick leave.

Example 2: An employee normally works 6-hour days. They have the right to 40 hours of paid sick leave.

If you were not paid for the sick leave you took, you can file a wage claim.



Keep track of your hours and pay stubs



Document communication with employer



Contact the Labor Commissioner's Office near you

It is illegal for your employer to fire you, reduce your hours or otherwise retaliate against you for asking to use paid sick leave. All workers qualify for paid sick leave, regardless of immigration status. For questions on paid sick leave, retaliation protections, filing a wage claim or retaliation complaint, call the Labor Commissioner's Office 833-LCO-INFO (833-526-4636).

For more information, visit www.dir.ca.gov/PaidSickLeave





PAID SICK LEAVE POLICY AND ACKNOWLEDGEMENT

At Outreach Ministries International (OMI), we understand that employees may need to take time off from work due to personal illness, injury, or to care for a sick family member. In accordance with California law, we have established the following Sick Leave Policy to ensure our employees have the time they need to rest and recover without worrying about loss of income.

Eligibility and Accrual

All employees who work in California for 30 or more days within a year from the commencement of their employment are entitled to paid sick leave. Paid Sick leave begins to accrue on the first day of employment. Employees will accrue paid sick leave at a rate of 40 hours or 5 days per year of employment. Unused Paid Sick Leave may not be carried over to the next year.

Usage

Employees may begin using accrued paid sick days on the 90th day of employment. After the 90th day of employment, employees may use sick leave as it is accrued.

Paid sick leave can be used for the employee's own health care needs or for the health care needs of a family member including child, parent, spouse, registered domestic partner, grandparent, grandchild, and sibling.

Notice and Certification

If the need for paid sick leave is foreseeable, the employee should provide reasonable advance notice. If the need for paid sick leave is unforeseeable, the employee shall provide notice of the need for leave as soon as practicable.

OMI may require employees to provide reasonable documentation (like a note from a healthcare provider) for sick leaves of three days or more.

Payment

Employees will be compensated at their regular rate of pay during their sick leave.

No Retaliation

OMI will not retaliate against employees for requesting or using accrued sick leave.

I have read and understand the above policy and agree to abide by its guidelines

Employee Signature

Date



PAYDAY POLICY

At Outreach Ministries International (OMI), we value the hard work and dedication of our employees. In recognition of your efforts, we have established the following Payday Policy to ensure a clear and consistent understanding of our pay procedures.

Paydays

Employees will be paid on a bi-monthly basis. Paydays are scheduled for the 5th and 20th of each month. If these dates fall on a weekend or holiday, the payday will be the last business day prior to the regularly scheduled payday.

Pay Periods

Each paycheck will include earnings for all work performed through the end of the previous payroll period. Our pay periods are as follows:

1. The first pay period of the month covers the 1st through the 15th. Pay for this period will be issued on the 20th of the same month.
2. The second pay period of the month covers the 16th through the last day of the month. Pay for this period will be issued on the 5th of the following month.

Payroll Deductions

Standard payroll deductions include federal and state taxes, and Social Security and Medicare contributions. Any additional deductions, such as contributions to a retirement plan or health insurance premiums, will be itemized on your pay stub.

Direct Deposit

OMI offers direct deposit for all employees. If you choose to participate, your net pay will be deposited directly into your bank account on payday. To enroll in direct deposit, please complete a Payroll Direct Deposit Form and return it to the Human Resources department.

Pay Stubs

Employees will receive a pay stub each payday. This pay stub will show gross pay, deductions, and net pay for the current pay period and the year-to-date totals. Pay stubs will be available through Quickbooks Workforce. Each employee will be given an invitation to access documentation from Workforce.

Final Pay

Upon termination of employment, an employee's final paycheck will include pay for all hours worked up until the end of the employee's final workday, including unused accrued vacation pay, if applicable. Final paychecks will be issued in accordance with California law.

Please direct any questions or concerns regarding payroll to the Human Resources department. We strive to ensure all employees are paid accurately and promptly for the work they perform on behalf of Outreach Ministries International.

Please note that this policy does not constitute a contract of employment or alter the at-will nature of any employee's employment in any way.

I have read and understand the above policy and agree to abide by its guidelines

Employee Signature

Date



USE OF PERSONAL CELL PHONE AND/OR DEVICE POLICY

Outreach Ministries International (OMI) has established this policy to manage personal cell phone and/or device use by employees during work hours, ensuring productivity and professionalism while maintaining privacy and confidentiality in line with California Housing and Urban Development (HUD) regulations. This policy applies to all employees during work hours, particularly in areas accessible to or occupied by clients.

Employees are to use the designated Lodi Access Center Cell Phone when making **ALL** work-related phone calls. ***Employees are not permitted to call other employees who are not on the clock working for work-related phone calls.*** All work-related phone calls, questions, and needs are to be directed first to Assistant Director Zac Edalgo and then Director Johnny Coughran.

Restricted Use During Work Hours: Personal cell phone use is prohibited during work hours except during breaks or for emergency calls, which should be taken away from work areas to ensure privacy and minimize disruptions.

OMI understands that employees may be unable to leave their station of designated work and may encounter longer lengths of time when no clients are present and work duties are completed. During this time, employees may ask permission from their supervisor to use their personal cell phone only while clients are not present and operations will not be disrupted.

Designated Areas and Times: Use personal cell phones in designated areas such as the break room or outside office premises during breaks.

Silent Mode Requirement: Cell phones must be set on silent or vibrate mode during work hours to avoid disturbances.

Emergency Usage: In emergencies requiring a personal call, employees should inform their supervisor, move to a private area away from client activity, and ensure coverage for their duties during the call.

HUD Compliance: Avoid phone or video chats with personal contacts within earshot or line of sight of clients. Such interactions could inadvertently expose protected client information or images, violating HUD regulations.

Compliance and Enforcement: Non-compliance with this policy can result in disciplinary actions. Supervisors are responsible for enforcement and may grant exceptions under specific conditions.

I have read and understand the above policy and agree to abide by its guidelines

Employee Signature

Date

SEXUAL HARASSMENT

FACT SHEET

DFEH



Sexual harassment is a form of discrimination based on sex/gender (including pregnancy, childbirth, or related medical conditions), gender identity, gender expression, or sexual orientation. Individuals of any gender can be the target of sexual harassment. Unlawful sexual harassment does not have to be motivated by sexual desire. Sexual harassment may involve harassment of a person of the same gender as the harasser, regardless of either person's sexual orientation or gender identity.

THERE ARE TWO TYPES OF SEXUAL HARASSMENT

1. **“Quid pro quo”** (Latin for “this for that”) sexual harassment is when someone conditions a job, promotion, or other work benefit on your submission to sexual advances or other conduct based on sex.
2. **“Hostile work environment”** sexual harassment occurs when unwelcome comments or conduct based on sex unreasonably interferes with your work performance or creates an intimidating, hostile, or offensive work environment. You may experience sexual harassment even if the offensive conduct was not aimed directly at you.

The harassment must be severe or pervasive to be unlawful. A single act of harassment may be sufficiently severe to be unlawful.

SEXUAL HARASSMENT INCLUDES MANY FORMS OF OFFENSIVE BEHAVIORS

BEHAVIORS THAT MAY BE SEXUAL HARASSMENT:

1. Unwanted sexual advances
2. Offering employment benefits in exchange for sexual favors
3. Leering; gestures; or displaying sexually suggestive objects, pictures, cartoons, or posters
4. Derogatory comments, epithets, slurs, or jokes
5. Graphic comments, sexually degrading words, or suggestive or obscene messages or invitations
6. Physical touching or assault, as well as impeding or blocking movements

Actual or threatened retaliation for rejecting advances or complaining about harassment is also unlawful.

Employees or job applicants who believe that they have been sexually harassed or retaliated against may file a complaint of discrimination with DFEH within three years of the last act of harassment or retaliation.

DFEH serves as a neutral fact-finder and attempts to help the parties voluntarily resolve disputes. If DFEH finds sufficient evidence to establish that discrimination occurred and settlement efforts fail, the Department may file a civil complaint in state or federal court to address the causes of the discrimination and on behalf of the complaining party. DFEH may seek court orders changing the employer's policies and practices, punitive damages, and attorney's fees and costs if it prevails in litigation. Employees can also pursue the matter through a private lawsuit in civil court after a complaint has been filed with DFEH and a Right-to-Sue Notice has been issued.

EMPLOYER RESPONSIBILITY & LIABILITY

All employers, regardless of the number of employees, are covered by the harassment provisions of California law. Employers are liable for harassment by their supervisors or agents. All harassers, including both supervisory and non-supervisory personnel, may be held personally liable for harassment or for aiding and abetting harassment. The law requires employers to take reasonable steps to prevent harassment. If an employer fails to take such steps, that employer can be held liable for the harassment. In addition, an employer may be liable for the harassment by a non-employee (for example, a client or customer) of an employee, applicant, or person providing services for the employer. An employer will only be liable for this form of harassment if it knew or should have known of the harassment, and failed to take immediate and appropriate corrective action.

Employers have an affirmative duty to take reasonable steps to prevent and promptly correct discriminatory and harassing conduct, and to create a workplace free of harassment.

A program to eliminate sexual harassment from the workplace is not only required by law, but it is the most practical way for an employer to avoid or limit liability if harassment occurs.

SEXUAL HARASSMENT

FACT SHEET



CIVIL REMEDIES

- Damages for emotional distress from each employer or person in violation of the law
- Hiring or reinstatement
- Back pay or promotion
- Changes in the policies or practices of the employer

ALL EMPLOYERS MUST TAKE THE FOLLOWING ACTIONS TO PREVENT HARASSMENT AND CORRECT IT WHEN IT OCCURS:

1. Distribute copies of this brochure or an alternative writing that complies with Government Code 12950. This pamphlet may be duplicated in any quantity.
2. Post a copy of the Department's employment poster entitled "California Law Prohibits Workplace Discrimination and Harassment."
3. Develop a harassment, discrimination, and retaliation prevention policy in accordance with 2 CCR 11023. The policy must:
 - Be in writing.
 - List all protected groups under the FEHA.
 - Indicate that the law prohibits coworkers and third parties, as well as supervisors and managers with whom the employee comes into contact, from engaging in prohibited harassment.
 - Create a complaint process that ensures confidentiality to the extent possible; a timely response; an impartial and timely investigation by qualified personnel; documentation and tracking for reasonable progress; appropriate options for remedial actions and resolutions; and timely closures.
 - Provide a complaint mechanism that does not require an employee to complain directly to their immediate supervisor. That complaint mechanism must include, but is not limited to including: provisions for direct communication, either orally or in writing, with a designated company representative; and/or a complaint hotline; and/or access to an ombudsperson; and/or identification of DFEH and the United States Equal Employment Opportunity Commission as additional avenues for employees to lodge complaints.
 - Instruct supervisors to report any complaints of misconduct to a designated company representative, such as a human resources manager, so that the company can try to resolve the claim internally. Employers with 50 or more employees are required to

include this as a topic in mandated sexual harassment prevention training (see 2 CCR 11024).

- Indicate that when the employer receives allegations of misconduct, it will conduct a fair, timely, and thorough investigation that provides all parties appropriate due process and reaches reasonable conclusions based on the evidence collected.
 - Make clear that employees shall not be retaliated against as a result of making a complaint or participating in an investigation.
4. Distribute its harassment, discrimination, and retaliation prevention policy by doing one or more of the following:
 - Printing the policy and providing a copy to employees with an acknowledgement form for employees to sign and return.
 - Sending the policy via email with an acknowledgment return form.
 - Posting the current version of the policy on a company intranet with a tracking system to ensure all employees have read and acknowledged receipt of the policy.
 - Discussing policies upon hire and/or during a new hire orientation session.
 - Using any other method that ensures employees received and understand the policy.
 5. If the employer's workforce at any facility or establishment contains ten percent or more of persons who speak a language other than English as their spoken language, that employer shall translate the harassment, discrimination, and retaliation policy into every language spoken by at least ten percent of the workforce.
 6. In addition, employers who do business in California and employ 5 or more part-time or full-time employees must provide at least one hour of training regarding the prevention of sexual harassment, including harassment based on gender identity, gender expression, and sexual orientation, to each non-supervisory employee; and two hours of such training to each supervisory employee. Training must be provided within six months of assumption of employment. Employees must be trained during calendar year 2019, and, after January 1, 2020, training must be provided again every two years. Please see Gov. Code 12950.1 and 2 CCR 11024 for further information.

TO FILE A COMPLAINT

Department of Fair Employment and Housing

dfeh.ca.gov

Toll Free: 800.884.1684

TTY: 800.700.2320

DFEH-185-ENG / April 2020



DE 185 Sexual Harassment Fact Sheet Acknowledgement

When possible, Outreach Ministries International (OMI) encourages individuals who believe they are being subjected to inappropriate conduct to promptly advise the offender that their behavior is unwelcome and request that it be discontinued. Often this action alone resolves the issue. OMI, however, recognizes that an individual may prefer to pursue the matter through the complaint process.

If you believe that you may have been unlawfully harassed, please submit a complaint to Human Resources as soon as possible after the incident. Your complaint should include details of the incident or incidents, names of the individuals involved, and the names of any witnesses. Supervisors will refer all harassment complaints to Human Resources. OMI will immediately undertake an effective, thorough and objective investigation of the harassment allegations.

If OMI determines that unlawful harassment has occurred, disciplinary action up to and including dismissal will be taken in accordance with the circumstances involved. A representative of OMI will advise all parties concerned of the result of the investigation pursuant to the law. OMI will not retaliate against you or any witnesses for filing a complaint and will not tolerate or permit retaliation by management, employees, coworkers or third parties.

You should also be aware that the Federal Equal Housing Employment Opportunity Commission (EEOC) and the California Department of Fair Employment and Housing (DFEH) investigate and prosecute complaints of prohibited harassment in employment. If you feel you have been subjected to harassment, you may contact the DFEH at <https://www.dfeh.ca.gov/>.

I hereby acknowledge that I have read and understand the information provided by the DE 185 Sexual Harassment Fact Sheet and agree to comply with all actions necessary to prevent harassment.

Signature

Date

Human Resources email: admin@lodiaccesscenter.com



POLICY ON RECORDING CLIENTS

Purpose

To ensure compliance with California's two-party consent law and to protect the privacy and trust of clients, this policy outlines the prohibition of recording conversations with clients without proper authorization.

Outreach Ministries International (OMI) is committed to upholding the privacy rights of clients and staff while adhering to all applicable laws. In accordance with California Penal Code Section 632, employees are prohibited from recording of any conversations with clients, whether in person, over the phone, or through other communication methods, without the explicit consent of all parties involved.

This policy applies to all employees, volunteers, contractors, and any individuals acting on behalf of Outreach Ministries International at the Lodi Access Center.

Guidelines

1. No Unauthorized Recording

Employees, volunteers, or any individuals may not use any device or software to record audio, video, or other forms of communication with clients without obtaining explicit written or verbal consent from all parties.

2. Client Consent

If recording is deemed necessary for a specific reason (e.g., training, quality assurance, or documentation), employees must first consult with their supervisor and explain the purpose of the recording. Written consent forms or a recorded verbal consent (with confirmation documented) must be obtained prior to initiating the recording.

3. Confidentiality Emphasis

Employees are encouraged to take notes during interactions with clients to document key details. Written documentation must be kept confidential and comply with the OMI's data protection and confidentiality policies.

4. Legal Exceptions

Any recording must comply with legal exceptions under California law. Employees must consult the Access Center Director before pursuing any exception.

Disciplinary Action

Unauthorized recording of client conversations is considered a serious violation of this policy. Violations may result in disciplinary action, up to and including termination of employment.

Acknowledgment

All employees are required to sign below an acknowledgment confirming their understanding and compliance of this policy.

By adopting this policy, Outreach Ministries International seeks to maintain trust and transparency while protecting the rights and dignity of all individuals involved.

I have read and understand the above policy and agree to abide by its guidelines

Employee Signature

Date



REST AND MEAL BREAK POLICY

This will serve as Outreach Ministries International's (OMI) policy regarding rest breaks and meal periods for employees. It is the policy of OMI to comply with state and federal laws regarding meals and breaks, and OMI recognizes the importance of such breaks.

Rest Breaks

All non-exempt ("hourly") employees are entitled to periodic, uninterrupted duty-free rest breaks during their workday, and to be paid for all such rest breaks. Although you are not required to record your rest break on your timesheet, you are required to notify your supervisor when taking your break.

OMI provides all non-exempt employees one (1) ten (10) minute rest break for every four (4) hours worked or any major portion thereof as follows:

Duration of Shift in Hours

0 to < 3.5 = A non-exempt employee who does not work more than three and a half (3.5) hours in a workday is not entitled to a rest break. However, a rest break may be granted as schedule permits and at OMI's discretion.

> 3.5 to < 6 = A non-exempt employee who works more than three and a half (3.5) hours in a workday, but not more than six (6) hours in a workday, is entitled to take one (1) ten (10) minute rest break.

> 6.0 to < 10.0 = A non-exempt employee who works more than six (6) hours in a workday, but not more than ten (10) hours in a workday, is entitled to take two (2) ten (10) minute rest breaks.

> 10.0 to < 14.0 = A non-exempt employee who works more than ten (10) hours in a workday, but not more than fourteen (14) hours in a workday, is entitled to take three (3) ten (10) minute rest breaks.

>14.0 = A non-exempt employee who works in excess of fourteen (14) hours in a workday, will continue to be entitled to additional ten (10) minute rest breaks for every four (4) hours worked, or major fraction thereof.

It is important that you do not perform any work during your rest breaks. To ensure proper shift coverage, it is critical that you work with your supervisor when scheduling all rest breaks.

Supervisors will note the time when non-exempt employees call in their break and the duration to ensure accuracy and that they are properly getting their rest break. Non-exempt employees will not need to note their rest break on their timesheets.



Meal Periods

OMI provides all non-exempt employees who work more than five (5) hours in a workday with an uninterrupted, duty-free meal period of at least thirty (30) minutes. This meal period is to begin no later than the end of the fifth (5th) hour of work. **Meal Periods are not to exceed thirty (30) minutes.** At the end of the thirty (30) minute meal period, employees are to clock in and resume the scheduled shift.

OMI also provides a second uninterrupted, duty-free meal period of at least thirty (30) minutes when an employee works more than ten (10) hours in a workday. This second meal period is to begin no later than the end of the tenth (10th) hour of work.

Non-exempt employees are entitled to meal periods as follows:

Duration of Shift in Hours

0 to < 5.0 = A non-exempt employee who does not work more than five (5) hours in a workday is not entitled to a meal period. However, a meal period may be granted as schedule permits and at OMI's discretion.

> 5.0 to < 10.0 = A non-exempt employee who works more than five (5) hours in a workday, but not more than ten (10) hours in a workday, is entitled to an uninterrupted, duty-free meal period of at least thirty (30) minutes before the end of the fifth (5th) hour of work.

> 10.0 = A non-exempt employee who works more than ten (10) hours in a workday is entitled to a second uninterrupted, duty-free meal period of at least thirty (30) minutes, before the end of the tenth (10th) hour of work.

It is OMI's policy to relieve all non-exempt employees of their duties during their meal period. As such, schedules and work assignments are created to include duty-free meal periods. All employees are expected to take such designated meal periods, must clock out/in for all meal breaks, and must not perform any work. **As such, all non-exempt employees are required to record their meal period on their timesheet when they clocked out and clocked in from their meal period as they would for the beginning and end of their shift.** All meal breaks must be accurately captured on employees' timesheets.

Further, employees are not allowed to work "off-the clock." Consequently, non-exempt employees should not perform any work after clocking out for their meal period and should not perform any work before clocking in from their meal period. If an employee is instructed to work "off-the-clock" or provide false information on their timesheet, please report it to any supervisor immediately. Anyone who violates this policy, including supervisors, will be subject to disciplinary action. Falsifying your actual time worked is grounds for separation.



Responsibilities

OMI does its best to create schedules to ensure employees have sufficient time to take all required rest and meal periods and to complete their work during their scheduled shift. Meal and rest periods cannot be combined and taken simultaneously. Employees may not use the meal or rest period to arrive at work late or leave work early.

Non-exempt employees are expected to take their meal periods and rest breaks in accordance with this Policy and applicable state and federal guidelines. Management is expected to make meal periods and rest breaks available to employees in accordance with this Policy. Supervisors can schedule meal periods and rest breaks for their employees, taking into account operational requirements and needs.

Any employee, supervisor, or manager who fails to observe meal period and rest break policies will be subject to discipline, up to and including termination of employment. Violations of this Policy should be reported to any supervisor. Every report will be fully investigated, and corrective action will be taken where appropriate.

As a reminder, employees are not to work overtime without permission from their supervisor. Should an employee work overtime without permission, they will be entitled to compensation for all hours worked but will be subject to discipline up to and including termination.

Acknowledgment

I acknowledge that I have been provided with and understand Outreach Ministries International’s Rest Break and Meal Period Policy and understand that it is effective immediately. I agree to comply with this policy. I understand that I may be subject to disciplinary action, up to and including termination of employment if I violate this policy.

I have read and understand the above policy and agree to abide by its guidelines.

Signature

Date



WORKPLACE CONDUCT POLICY

Outreach Ministries International (OMI) endeavors to maintain a positive work environment, and every employee plays a role in fostering this environment. Accordingly, all employees are expected to abide by certain standards of conduct, based on honesty, common sense, and professionalism.

The rules set forth below are intended to establish standard expectations for employee conduct and performance but are not intended to be exhaustive. Employees should be aware that unacceptable or inappropriate conduct, even if not specifically listed below, may result in disciplinary action, up to and including termination, at OMI's sole discretion.

Employees may be disciplined and/or terminated for unacceptable or inappropriate conduct, including but not limited to the following:

1. Obtaining employment on the basis of false or misleading information; falsifying employment documents or work records, including completing another employee's time record
2. Theft or unauthorized taking or removal of OMI's property or the property of another employee
3. Breach of confidence, including disclosure, misappropriation, or misuse of confidential information
4. Violation of safety rules and/or policies, including failure to report any unsafe condition, damage to equipment, or a job-related injury
5. Fighting, threatening, bullying, or disrupting the work of others
6. Insubordination or derogatory behavior toward supervisory or management personnel
7. Derogatory, aggressive, or malicious behavior toward any personnel
8. Poor work performance, exhibiting carelessness or negligence in the performance of your job
9. Violation of the OMI's punctuality and attendance standards, including but not limited to irregular attendance, habitual lateness, or unexcused absences
10. Illegal gambling on OMI property
11. Willful destruction or careless usage or damage to OMI's assets or to the equipment or possessions of another employee
12. Unauthorized use or wasting of OMI's supplies, resources, and other work materials
13. Excessive use of work time to engage in conduct of a personal or social nature, or other conduct that detracts from the employee's performance of their job duties
14. Carrying or possessing a weapon such as a gun, dangerous devices, or other weapons on or around OMI premises, including parking lots
15. Participation in a business in competition with the OMI, pursuant to applicable law
16. Use, possession, or sale of unlawful drugs, cannabis, or alcohol while on OMI premises, while on duty, or reporting to work under the influence of alcohol or any unlawful drugs
17. Sleeping or malingering on the job

- 18. Violation of a confidentiality agreement that exists between OMI and any employee
- 19. Violation of any OMI policy on harassment, discrimination, and/or retaliation
- 20. Any other violation of OMI's policies, which are subject to change from time to time, at the OMI's sole discretion

OMI reserves the right to impose whatever discipline it chooses, or none at all, if and when a violation of this policy occurs. OMI will deal with each situation individually and nothing in this policy shall be construed as a promise of specific treatment in a given situation.

Observance of these rules will help to ensure that our workplace remains a safe and desirable place to work, and all employees are expected to observe this policy as outlined above, at all times.

I acknowledge that I have received a copy of Outreach Ministries International's Workplace Conduct Policy. I also acknowledge that I have read and understand the contents and agree to adhere to this policy.

I have read and understand the above policy and agree to abide by its guidelines.

Employee Signature

Date

DI Office Locations and Mailing Addresses

- Chico 645 Salem Street
(PO Box 8190, Chico, CA 95927-8190)
- Chino Hills ... 15315 Fairfield Ranch Road, Ste. 100
(PO Box 60006, City of Industry, CA 91716-0006)
- Fresno 2555 S. Elm Avenue
(PO Box 32, Fresno, CA 93707-0032)
- Long Beach ... 4300 Long Beach Blvd., Ste. 600
(PO Box 469, Long Beach, CA 90801-0469)
- Los Angeles 888 S. Figueroa Street, Ste. 200
(PO Box 513096, Los Angeles, CA 90051-1096)
- Oakland 7677 Oakport Street, Ste. 325
(PO Box 1857, Oakland, CA 94606-1857)
- Sacramento 5009 Broadway
(PO Box 13140, Sacramento, CA 95813-3140)
- San Bernardino 371 West 3rd Street
(PO Box 781, San Bernardino, CA 92402-0781)
- San Diego ... 9246 Lightwave Avenue, Bldg. A, Ste. 300
(PO Box 120831, San Diego, CA 92112-0831)
- San Francisco 745 Franklin Street, Rm. 300
(PO Box 193534, San Francisco, CA 94119-3534)
- San Jose 297 West Hedding Street
(PO Box 637, San Jose, CA 95106-0637)
- Santa Ana 2 MacArthur Place, Suite 400
(PO Box 1466, Santa Ana, CA 92702-1466)
- Santa Barbara 128 East Ortega Street
(PO Box 1529, Santa Barbara, CA 93102-1529)
- Santa Rosa 606 Healdsburg Avenue
(PO Box 700, Santa Rosa, CA 95402-0700)
- Stockton 3127 Transworld Dr., Ste. 150
(PO Box 201006, Stockton, CA 95201-9006)
- California State Government Employees
(PO Box 2168, Stockton, CA 95201-2168)
- Van Nuys 15400 Sherman Way, Rm. 500
(PO Box 10402, Van Nuys, CA 91410-0402)



STATE OF CALIFORNIA

LABOR AND WORKFORCE DEVELOPMENT AGENCY

EMPLOYMENT DEVELOPMENT DEPARTMENT

*This pamphlet is for general information only,
and does not have the force and effect of the law,
rule or regulation.*

The EDD is an equal opportunity employer/program. Auxiliary aids and services are available upon request to individuals with disabilities. Requests for services, aids, and/or alternate formats need to be made by calling DI at 1-866-490-8879 (voice), or through the California Relay Services at 711.



DISABILITY INSURANCE PROVISIONS



Disability is an illness or injury, either physical or mental, which prevents customary work. Disability includes elective surgery, pregnancy, childbirth, or related medical conditions.

Disability Insurance (DI) is a component of the State Disability Insurance (SDI) program, designed to partially replace wages lost due to a non-work-related disability (see "Other Programs," for job-related disabilities).

SDI contributions are paid by California workers covered by the SDI program. Contribution rates may vary from year to year. For current rates, visit the DI website at www.edd.ca.gov/disability, or contact the Employment Development Department (EDD) Disability Insurance customer service at 1-800-480-3287 or EDD employment tax customer service at 1-888-745-3886.

DI Plans

- **State Plan.** The DI state plan is covered in this brochure.
- **Voluntary Plan (VP).** A private plan, approved by the Director of the EDD, which may be substituted for the State Plan. Voluntary Plans may be established if the employer and majority of employees agree to do so. VP information and filing a claim may be done through your employer. If you are covered by a VP, the provisions of this brochure may not apply to you. Obtain information about your coverage and file a VP claim through your employer.
- **Elective Coverage (EC).** Employers and self-employed persons, including general partners, may elect coverage. The method of computing benefits for EC participants is not the same as for mandatory rate payers. The cost of participating, which is set annually, can be obtained from your local EDD Employment Tax Customer Service Office.

EC claims are filed in the same manner as State Plan claims; however, there are some differences in eligibility requirements from those listed in this pamphlet.
- For additional information or to apply for coverage, contact EDD DI customer service at 1-800-480-3287, EDD employment tax customer service at 1-888-745-3886, or visit our website at www.edd.ca.gov/disability.

How to Claim State Plan Benefits

1. Use **SDI Online** to securely file for benefits or request a paper claim form online.
 - By Internet: www.edd.ca.gov/disability.
 - By phone: **1-800-480-3287**.
 - By mail: EDD, Disability Insurance, PO Box 989777, West Sacramento, CA 95798-9777.
 - In person by visiting any of the DI offices listed under "DI Office Locations."
 - California state government employees covered by SDI should call **1-866-352-7675**.
2. When filing using SDI Online, complete all required fields. A receipt number will be generated when your claim is submitted.

If using a paper *Claim for Disability Insurance (DI) Benefits* (DE 2501) form, complete and sign Part A-Claimant's Statement. Print clearly, and verify your answers are complete and correct as errors delay payment.
3. Have your physician/practitioner complete the Part B - Physician/Practitioner's Certificate online or use the paper claim form. If filing online, your physician/practitioner will need your receipt number to complete the Part B - Physician/Practitioner's Certificate.

Usually a claim cannot begin more than seven days before you were examined by or under the care of a physician/practitioner. Certification may be made by a licensed medical or osteopathic physician and surgeon, nurse practitioner, physician assistant, chiropractor, dentist, podiatrist, optometrist, designated psychologist, or an authorized medical officer of a United States government facility. Certification may also be made by a licensed nurse-midwife or licensed midwife for disabilities related to normal pregnancy or childbirth.
4. File online or submit your paper claim form within 49 days from the date your disability begins. If your claim is late, you may lose benefits unless your explanation of the delay is accepted as reasonable.

How Benefits Are Paid

- You have an option on how you receive benefit payments. If you are eligible to receive benefits, the EDD issues benefit payments by the EDD Debit CardSM through Bank of America or by check, mailed from the EDD. You do not have to accept the EDD Debit Card. Please allow 7 to 10 days for delivery of checks in the mail.
- Most properly completed claims are processed within 14 days.
- The first seven days of your DI claim are a non-payable waiting period. If a claim is filed for the same or related cause or condition within 60 days of the initial claim, it will be processed as a continuation of the initial claim for which a waiting period was already served. There will not be a new waiting period in such cases.

Benefits are paid as quickly as possible after all information to determine eligibility is received. If you meet all eligibility requirements, benefits will be authorized. If you are eligible for further benefits, you will be authorized for additional benefits electronically or sent a *Claim For Continued Disability Benefits* (DE 2500A) certification form for you to complete for the next benefit period. Usually these benefit periods are for two-week intervals. However, DI pays benefits based on daily eligibility within a seven-day calendar week. Partial weeks are paid at a daily rate. This rate is one-seventh of your weekly benefit amount. Please allow 10 days from the date you mail or electronically submit a certification for receipt of payment.

How Your Benefit Rate is Determined

Benefit amounts are based on wages paid during a specific 12-month **base period**, determined by the date your claim begins. Consider when to start your claim since this may affect your weekly benefit rate, your maximum benefit amount, and the period of your benefit eligibility. Only **base period** wages subject to the SDI contributions can be used in computing your benefits. To qualify, you must have earned at least \$300 during your base period. The month your claim begins determines which four consecutive quarters are used.

If your claim begins in:

- **January, February, or March, your base period is the 12 months ending last September 30.** (Example: A claim beginning February 14, 2017, uses a base period of October 1, 2015, through September 30, 2016.)
- **April, May, or June, your base period is the 12 months ending last December 31.** (Example: A claim beginning June 20, 2017, uses a base period of January 1, 2016, through December 31, 2016.)
- **July, August, or September, your base period is the 12 months ending last March 31.** (Example: A claim beginning September 27, 2017, uses a base period of April 1, 2016, through March 31, 2017.)
- **October, November, or December, your base period is the 12 months ending last June 30.** (Example: A claim beginning November 2, 2017, uses a base period of July 1, 2016, through June 30, 2017.)

Exceptions: If your claim is determined to be invalid, but you were unemployed and seeking work for 60 days or more in any quarter of your base period, you may be able to substitute wages paid in prior quarters.

You may be entitled to substitute wages paid in prior quarters to either validate your claim or increase your benefit amount, if during your base period you:

- Were in the military service.
- Received workers' compensation benefits.
- Did not work because of a labor dispute.

If your situation fits any of the above, include a letter and supporting documentation with your claim form.

Wage Continuation. If your employer continues to pay you wages during your DI claim, your DI benefits may be affected. DI benefits plus wages cannot exceed your regular weekly wage. DI benefits are not affected by vacation pay you may receive.

Maximum Benefits. The maximum benefit amount is 52 times the weekly rate, but not more than your total base period wages. Exception: For employers and self-employed individuals who elect SDI coverage, the maximum benefit amount is 39 times the weekly rate.

Additionally, benefits are payable only for a limited period to a resident in an alcoholic recovery home or drug-free residential facility that is both licensed and certified by the state in which the facility is located. However, disabilities related to or caused by acute or chronic alcoholism or drug abuse, being medically treated, do not have this limitation.

Pregnancy. As with any medical condition, your disability period begins the first day you are unable to do your regular or customary work. DI benefits are based on the period of time your physician/practitioner certifies you are unable to do your regular or customary work. Do not send in your claim for pregnancy-related DI benefits until the date your physician/practitioner certifies you are unable to work.

NOTE: For information on Paid Family Leave (PFL) bonding benefits, see the "Other Programs" section of this brochure.

You May Not be Eligible for Benefits

- If you are receiving Unemployment Insurance or PFL benefits.
- If you are not working or looking for work at the time your disability begins.
- If you are in custody due to conviction of a crime.
- If your full wages are paid.
- If you are receiving workers' compensation at a weekly rate equal to or greater than the DI rate. If workers' compensation benefits are paid at a lower rate than your DI rate, you may be paid the difference.
- For the amount of time a claim is late (without good cause).
- If you make a false statement or fail to report a material fact. (A 30 percent penalty may be assessed if benefits are overpaid because you willfully withheld a material fact or made a false statement.)
- If you fail to attend an independent medical examination when requested. (Fees for such examinations are paid by the EDD.)

The California Unemployment Insurance Code provides for penalties consisting of fines, imprisonment, and loss of benefit rights for fraud against the SDI program.

Your Rights. You are entitled to:

- Know the reason and basis for any decision that affects your benefits.
- Appeal any decision about your eligibility for benefits. (Appeals must be sent to the DI office in writing.)
- Request an appeal hearing before an Administrative Law Judge (ALJ). You may further appeal the ALJ's decision to the California Unemployment Insurance Appeals Board and the courts.
- Privacy – all claim information will be kept confidential except for the purposes allowed by law.

Your Obligations. Your responsibilities:

- Complete your claim and other forms correctly, completely, and truthfully.
- Submit your claim and other forms according to time limits on forms. If your claim is submitted late and you believe you have a good reason for being late, you should include a written explanation of the reason(s) with the form.
- Contact DI if you do not understand a question or how to answer it.
- Include your name and claim identification number on letters to DI.

Contact DI

- By **email** at <https://askedd.edd.ca.gov>.
- By phone at:
 - English 1-800-480-3287
 - Spanish 1-866-658-8846
- By **U.S. mail** addressed to PO Box 13140, Sacramento, CA 95813-3140. If you do not have a current claim, you may write to any DI office. Note: Do not mail claim forms to this PO Box.
- By **TTY** (teletypewriter for deaf, hearing-impaired, and speech-impaired persons only) at 1-800-563-2441.
- **In person** by visiting any of the DI offices listed under "DI Office Locations."

Other Programs

If you are injured on the job or become ill as a result of your occupation, notify your employer.

If you are able and available to work but unemployed, contact the Unemployment Insurance program of the EDD through the website at www.edd.ca.gov/unemployment, or by phone at 1-800-300-5616 (TTY 1-800-815-9387).

If you need help in finding work, job training, retraining, or other services in order to return to work, visit your local America's Job Center of CaliforniaSM formerly known as One-Stop Career Centers listed at www.servicelocator.org, or in the white pages of your phone directory.

If your disability is permanent or is expected to continue for a year or more, contact the U.S. Social Security Administration at www.ssa.gov, or by phone at 1-800-772-1213 (TTY 1-800-325-0778).

If you take time off work to care for a family member or if you take time off from work to bond with a new child, including newly adopted, newly placed foster children, or those of your registered domestic partner, contact the EDD PFL program at www.edd.ca.gov/disability, or by phone at 1-877-238-4373, or through the California Relay Service at 711.

Note: A PFL bonding claim form will be sent automatically with the final benefit payment to new mothers receiving DI benefits.

If you are a victim of a crime, contact the California Victim Compensation program at 1-800-777-9229 (TTY 1-800-735-2929). You may also contact your county Victim/Witness Assistance Center.

Questions about spousal or parental support obligations should be directed to the district attorney's office for the county that issued the court order.

Questions about child support obligations should be directed to the Department of Child Support Services at 1-866-901-3212 (TTY 1-866-399-4096).



About California Paid Family Leave

For many working Californians, finding time to be with a loved one when they need it most can be difficult. California's Paid Family Leave program was created for those moments that matter – when you are bonding with a new child or caring for a seriously ill family member.

Fast Facts About California Paid Family Leave

- Provides partial wage replacement benefits to bond with a new child (either by birth, adoption, or foster care placement) or to care for a seriously ill family member (child, parent, parent-in-law, grandparent, grandchild, sibling, spouse, or registered domestic partner).
- Doesn't have to be taken all at once.
- Provides approximately 60 to 70 percent of your salary during your leave.
- Funded through your State Disability Insurance tax withholding, so you are most likely eligible if you've paid into State Disability Insurance (noted as "CASDI" on paystubs) or a qualifying voluntary plan in the past 5 to 18 months.
- To bond with a new child, leave can be taken anytime within the first 12 months of a child entering your family.
- Citizenship and immigration status do not affect eligibility.

CALIFORNIA PAID FAMILY LEAVE

moments matter.

Paid Family Leave:

Giving Californians the benefits they need to be there for the moments that matter.

English	1-877-238-4373
Spanish	1-877-379-3819
Cantonese	1-866-692-5595
Vietnamese	1-866-692-5596
Armenian	1-866-627-1567
Punjabi	1-866-627-1568
Tagalog	1-866-627-1569
TTY	1-800-445-1312

Individuals can also visit a Paid Family Leave or Disability Insurance office to obtain claim forms, receive information, or speak to a representative.

Visit a State Disability Insurance office (edd.ca.gov/Disability/Contact_SDI.htm) near you.



For more information, visit:
CaliforniaPaidFamilyLeave.com

The EDD is an equal opportunity employer/program. Auxiliary aids and services are available upon request to individuals with disabilities. Requests for services, aids, and/or alternate formats need to be made by calling 1-866-490-8879 (voice). TTY users, please call the California Relay Service at 711.



CALIFORNIA PAID FAMILY LEAVE

Helping Californians be present for the moments that matter.



Do I Qualify For California Paid Family Leave?

To qualify for Paid Family Leave benefits, **you must meet** the following requirements:

- Need to take time off from work to care for a seriously ill family member or to bond with a new child.
- Be covered by State Disability Insurance (or a voluntary plan in lieu of State Disability Insurance).
- Have earned at least \$300 in the past 5 to 18 months.
- Submit your claim no later than 41 days after you begin your family leave. Do not file before your first day of leave.

If required by your employer, you must use up to two weeks of unused vacation leave or paid time off. Check with your human resources department to confirm your employer's requirements.

How Are Benefit Amounts Calculated?

California Paid Family Leave provides approximately 60 to 70 percent of your weekly salary (from \$50 up to \$1,300 weekly).

The benefit amount is calculated from your highest quarterly earnings over the past 5 to 18 months, before the start of your claim. The Employment Development Department (EDD) has an online calculator that can help you estimate your weekly benefit amount. Visit the [Disability Insurance and Paid Family Leave Calculator \(edd.ca.gov/PFL_Calculator\)](https://edd.ca.gov/PFL_Calculator) to estimate your benefit.

If you are found eligible to receive benefits, you have an option on how you receive your benefit payments: by the EDD Debit CardSM through Bank of America or by check, mailed from the EDD.



Does Paid Family Leave Provide Job Protection?

California Paid Family Leave does not provide job protection or a right to return to work.

However, job protection may be provided under other laws such as the federal Family and Medical Leave Act, the California Family Rights Act, or the New Parent Leave Act (if you qualify).

Notify your employer of your plan to take leave and the reason for taking leave according to your company's policy.

How Do I Apply For Benefits?

Apply for Paid Family Leave benefits by visiting [SDI Online \(edd.ca.gov/SDI_Online\)](https://edd.ca.gov/SDI_Online).

You may also apply using a paper form. Visit [EDD Forms and Publications \(edd.ca.gov/Forms\)](https://edd.ca.gov/Forms) to request a *Claim for Paid Family Leave (PFL) Benefits (DE 2501F)* form.

For caregiving claims, you must provide medical certification showing that the care recipient has a serious health condition and requires your care. This needs to be completed by the care recipient's physician/practitioner. Information about the care recipient and their signature are also required.

For bonding claims, you must provide documentation showing proof of relationship between you and the child (e.g., a copy of the child's birth certificate, adoptive placement agreement, or foster care placement record).

If you are currently receiving pregnancy-related Disability Insurance benefits, it is not necessary to request a Paid Family Leave claim form. The form to file for bonding will be sent through your SDI Online account or by mail when your pregnancy-related disability claim ends.

If you are covered by a voluntary plan, contact your employer for information about your coverage and instructions on how to apply for benefits.

If your claim is denied, you have the right to:

- Know the reason for denial.
- Appeal decisions about your eligibility for benefits. Visit [Appeals \(edd.ca.gov/Disability/Appeals.htm\)](https://edd.ca.gov/Disability/Appeals.htm) for information.

All claim information is confidential except for purposes allowed by law.

CALIFORNIA PROTECTS THE CIVIL RIGHTS OF LGBTQ+ PEOPLE

DFEH



FACT SHEET

In California, LGBTQ+ people have equal civil rights, dignity, and worth. The California Department of Fair Employment and Housing (DFEH) is here to help.

It is unlawful for employers, landlords, businesses of all kinds, health care providers and insurers, homeless shelters, state-funded programs and services, and others to discriminate against anyone or treat them unequally because of their sexual orientation, gender identity, gender expression, or sex. Similarly, it is against the law to assault or threaten anyone (or their property) with violence because of these characteristics.

If you have experienced discrimination or violence because you are, or are perceived to be, or are a friend or family member of an

LGBTQ+ person (or any other sexual orientation or gender identity), file a complaint with DFEH. Likewise, if you have experienced discrimination or violence because of how you express your gender, such as the clothes you choose to wear or how you do your hair, file a complaint with DFEH.

And, don't forget that California law protects everyone (including LGBTQ+ people) from discrimination and violence based on race, national origin, disability, and other protected characteristics.

ADDITIONAL EXAMPLES OF UNLAWFUL DISCRIMINATION

- A state-funded program for small businesses turns you away because of bias against transgender and/or lesbian women of color
- A bank gives you less favorable loan terms or denies you a loan because you have a same-sex partner who doesn't speak English and is an immigrant
- A housing provider tries to evict you because you have a Section 8 voucher and a pride flag in your window
- An employer won't even consider your application for a job because you're an older LGBTQ+ person

EXAMPLES OF UNLAWFUL DISCRIMINATION/VIOLENCE

- Your co-workers harass you because you're gay or bisexual
- Your employer prohibits you from using the restroom consistent with your gender identity
- A hotel or restaurant that regularly hosts weddings refuses to host your wedding to someone of the same sex
- A health care provider treats you unequally because you're lesbian or gender non-binary
- A state-funded youth program fails to stop bullying of you because of how you express your gender
- A landlord won't rent to you because your child appears to be LGBTQ+
- Staff at a homeless shelter treats you unequally because they think you are LGBTQ+
- Your neighbor keys your car because he doesn't approve of your "lifestyle"

If you have a disability that requires a reasonable accommodation, DFEH can assist you by phone or, for individuals who are Deaf or Hard of Hearing or have speech disabilities, through the California Relay Service (711), or you can contact us below.

TO FILE A COMPLAINT

Department of Fair Employment and Housing

dfeh.ca.gov

Toll Free: 800.884.1684

TTY: 800.700.2320

TRANSGENDER RIGHTS IN THE WORKPLACE

DFEH



WHAT DOES “TRANSGENDER” MEAN?

Transgender is a term used to describe people whose gender identity differs from the sex they were assigned at birth. Gender expression is defined by the law to mean a “person’s gender-related appearance and behavior whether or not stereotypically associated with the person’s assigned sex at birth.” Gender identity and gender expression are protected characteristics under the Fair Employment and Housing Act. That means that employers may not discriminate against someone because they identify as transgender or gender non-conforming. This includes the perception that someone is transgender or gender non-conforming.

WHAT IS A GENDER TRANSITION?

1. “Social transition” involves a process of socially aligning one’s gender with the internal sense of self (e.g., changes in name and pronoun, bathroom facility usage, participation in activities like sports teams).

2. “Physical transition” refers to medical treatments an individual may undergo to physically align their body with internal sense of self (e.g., hormone therapies or surgical procedures).

A person does not need to complete any particular step in a gender transition in order to be protected by the law. An employer may not condition its treatment or accommodation of a transitioning employee upon completion of a particular step in a gender transition.

FAQ FOR EMPLOYERS

• What is an employer allowed to ask?

Employers may ask about an employee’s employment history, and may ask for personal references, in addition to other non-discriminatory questions. An interviewer should not ask questions designed to detect a person’s gender identity, including asking about their marital status, spouse’s name, or relation of household members to one another. Employers should not ask questions about a person’s body or whether they plan to have surgery.

• How do employers implement dress codes and grooming standards?

An employer who requires a dress code must enforce it in a non-discriminatory manner. This means that, unless an employer can demonstrate business necessity, each employee must be allowed to dress in accordance with their gender identity and gender expression. Transgender or gender non-conforming employees may not be held to any different standard of dress or grooming than any other employee.

• What are the obligations of employers when it comes to bathrooms, showers, and locker rooms?

All employees have a right to safe and appropriate restroom and locker room facilities. This includes the right to use a restroom or locker room that corresponds to the employee’s gender identity, regardless of the employee’s assigned sex at birth. In addition, where possible, an employer should provide an easily accessible unisex single stall bathroom for use by any employee who desires increased privacy, regardless of the underlying reason. Use of a unisex single stall restroom should always be a matter of choice. No employee should be forced to use one either as a matter of policy or due to harassment in a gender-appropriate facility. Unless exempted by other provisions of state law, all single-user toilet facilities in any business establishment, place of public accommodation, or state or local government agency must be identified as all-gender toilet facilities.

FILING A COMPLAINT

If you believe you are a victim of discrimination you may, within three years* of the discrimination, file a complaint of discrimination by contacting DFEH.

To schedule an appointment, contact the Communication Center below.

If you have a disability that requires a reasonable accommodation, the DFEH can assist you by scribing your intake by phone or, for individuals who are Deaf or Hard of Hearing or have speech disabilities, through the California Relay Service (711), or you can contact us below.

CONTACT US

Toll Free: (800) 884-1684
TTY: (800) 700-2320
contact.center@dfeh.ca.gov
www.dfeh.ca.gov

* Effective 1/1/2020.

Emergency Evacuation Plan and Policy

This comprehensive evacuation plan provides essential procedures and protocols to ensure the safe and orderly evacuation of all clients, staff, and guests during emergency situations. The plan establishes clear roles and responsibilities, defines evacuation procedures for various scenarios, and ensures compliance with safety regulations while accommodating individuals with special needs.

This evacuation plan is designed to protect the lives and safety of all building occupants by providing clear procedures for emergency response and evacuation. The primary objectives include:

- Establishing effective emergency communication systems
- Defining clear evacuation routes and procedures
- Ensuring accountability for all occupants during emergencies
- Providing special assistance for persons with disabilities
- Maintaining coordination with emergency responders

Emergency Contact Information

Emergency Services

- **Fire Department:** 911
- **Police Department:** 911
- **Emergency Medical Services:** 911
- **Poison Control:** 1-800-222-1222

Key Personnel

- **Emergency Coordinator:** Director and/or Assistant Director
- **Alternate Emergency Coordinator:** Lead General Operations Staff
- **Floor Keepers:** General Operations Staff
- **Sweep Team Members:** General Operations Staff

Organizational Structure and Roles

Emergency Response Team Structure

Emergency Coordinator

The Emergency Coordinator has overall responsibility for emergency response, including planning and preparation. This individual ensures doors are secured, conducts backup headcounts at safe locations, and coordinates with emergency responders.

Assistant Emergency Coordinator

The Assistant Coordinator uses mass alert systems to notify occupants, contacts emergency services, and gathers reports from floor keepers. If the organization uses an emergency communication system, this person should have administrative access.

Floor Keepers

Floor Keepers are responsible for specific areas or floors and work closely with the Emergency Coordinator to prepare for emergency evacuations. Each floor or area should have a designated Floor Keepers with an assistant or alternate assigned in case of absence.

Floor Keepers responsibilities include:

- Being familiar with emergency procedures and evacuation plans
- Knowing locations of building exits, evacuation assembly points, and areas of refuge
- Remove the lock from the rolling parking lot gate for primary point of exit
- Encouraging occupants to move toward exits quickly during emergencies
- Conducting area sweeps by walking, calling out, knocking on doors, and closing doors when exiting
- Reporting floor status and emergency information to the Emergency Coordinator
- Assisting in identifying missing persons

Evacuation Team Members

The evacuation team should consist of Sweep Teams. Every Sweep Team should comprise two members using the "buddy system" for safety.

- **Sweep Team Members:** Conduct final sweeps of assigned areas to ensure all occupants have evacuated

Evacuation Procedures

Immediate Response Actions

Upon hearing an emergency alarm or receiving evacuation instructions:

1. Remain calm and cease all activities immediately
2. Leave personal belongings behind - do not return for coats, purses, or briefcases
- 3. Bring client list of names and sign in log binder for guests to assembly point**
4. Follow designated evacuation routes to the nearest exit
5. Assist others who may need help, if safe to do so
6. Evacuate animals, if safe to do so
7. Proceed to the designated assembly area
- 8. DO NOT leave before meeting at assembly area and notifying Emergency Coordinator of your safe arrival**
- 9. Conduct roll call of clients, guests, volunteers, and employees using list of names**

Evacuation Routes and Exits

- Primary and secondary evacuation routes must be clearly marked and posted throughout the facility
- All evacuation routes and emergency exits must remain unobstructed at all times
- Emergency lighting should be installed in case of power outages during evacuation
- Route maps showing evacuation paths, emergency exits, fire extinguisher locations, and assembly points must be posted in each work area

Animal Evacuation Plan, if safe to do so

- Have a list of animals on-site, their locations, and keep leashes, cages, and emergency pet kits (food, water, medication) readily accessible.
- Quickly and calmly contain all animals in carriers for safe transport. If time does not permit, open kennel doors, and leave a marked exit open for pets to escape as a last resort.
- Staff or assigned volunteers should know in advance who is responsible for each animal to prevent chaos and ensure no pet is left behind.

Assembly Areas and Accountability

Designated Assembly Points

Assembly areas should be located at least 500 feet away from the building and clearly identified. Each department should have both a main assembly area and an alternate assembly area in case the primary location cannot be used.

ASSEMBLY AREA: NORTH CORNER OF FORREST AVE & N. SACRAMENTO RD

ALTERNATE ASSEMBLY AREA: SOUTH CORNER OF DAISY AVE & N. LOWER SACRAMENTO RD.

Accountability Procedures

Once at the assembly area:

1. Floor Keepers report to the Emergency Coordinator with status of their assigned areas
2. Conduct headcounts using alphabetical lists with missing persons columns
3. Immediately report any missing persons to the Emergency Coordinator
4. Emergency Coordinator communicates with first responders and provides building status
5. No one may re-enter the building until the "all clear" signal is given by authorized personnel

Special Considerations for Persons with Disabilities

Planning Requirements

Organizations must provide equal access to emergency evacuation for persons with disabilities in compliance with ADA requirements. This includes developing Personal Emergency Evacuation Plans (PEEPs) for individuals with permanent or temporary disabilities.

Evacuation Options for Persons with Disabilities

Evacuation Assistance

For persons requiring assistance:

- Establish a buddy system with trained assistants
- Provide evacuation chairs in select locations for persons with mobility limitations
- Ensure assistants know proper lifting and transfer techniques
- Have written instructions for disability-related equipment readily available

Specific Disability Considerations

Mobility Impairments

- Persons requiring minor physical assistance may be helped by trained volunteers under evacuation manager guidance
- Those requiring major physical assistance should remain in areas of refuge until emergency personnel arrive
- Wheelchair users should have their chairs evacuated with them if possible, with power turned off before lifting

Visual Impairments

Assistants should offer their elbow to guide individuals with visual impairments through evacuation routes, communicating as necessary to ensure safe evacuation.

Hearing Impairments

Visual notification systems and written instructions should supplement audio alarms to ensure persons with hearing impairments receive emergency notifications.

Communication Procedures

Emergency Notification Systems

Multi-Channel Communication

Emergency notifications should be sent through multiple channels including:

- Handheld Radios
- SMS text messages
- Phone calls

Notification Priorities

Communication should be targeted and customized for different groups:

1. **Immediate occupants:** Location-specific evacuation instructions
2. **Emergency response team:** Detailed situation reports and coordination information
3. **Senior management:** Executive briefings and decision-support information

Information Management

Emergency Communication Templates (SCENARIOS ATTACHED TO THIS PLAN)

Pre-written notification templates should be prepared for different emergency scenarios to speed response time. Templates should include:

- Nature of the emergency
- Required actions (evacuate, shelter-in-place, etc.)
- Evacuation routes and assembly points
- Special instructions for persons with disabilities
- Contact information for updates

Training and Drills

Training Requirements

All Personnel Training

All staff, clients, and regular guests should receive training on:

- Emergency evacuation procedures and routes
- Location of emergency equipment and alarm systems
- Assembly point locations and accountability procedures
- Procedures for assisting persons with disabilities
- Communication systems and notification methods

Emergency Response Team Training

Emergency Coordinators and Floor Keepers must complete specialized training including:

- Emergency Evacuation Training (required certification)
- Fire extinguisher training (optional)
- Proper lifting and transfer techniques for persons with disabilities
- Two-way radio operation and communication protocols

Evacuation Drills

Evacuation drills should be conducted at least annually, with more frequent drills recommended for high-risk facilities. Drill types should include:

1. **Basic evacuation drills:** Standard evacuation following normal procedures
2. **Scenario-based drills:** Simulating blocked exits, equipment failures, or other complications
3. **Tabletop exercises:** Discussion-based reviews of evacuation procedures

Drill Evaluation

After each drill, conduct a thorough evaluation including:

- Timing of evacuation process
- Effectiveness of communication systems
- Identification of procedural problems or confusion
- Assessment of assistance provided to persons with disabilities
- Recommendations for plan improvements

Plan Maintenance and Review

Regular Updates

This evacuation plan should be reviewed and updated annually or after any significant changes to:

- Building layout or occupancy
- Personnel assignments or contact information
- Emergency procedures or regulations
- Lessons learned from drills or actual emergencies

Maintain records of:

- Emergency team assignments and training completion
- Evacuation drill reports and improvement recommendations
- Updates to emergency contact information
- Equipment inspections and maintenance
- Plan distribution and training documentation

External Coordination

Copies of this evacuation plan should be provided to:

- Local fire department
- Police department
- Emergency medical services
- Emergency management director
- Building management (if applicable)

Regular meetings should be held with local emergency responders to review procedures and ensure coordination during actual emergencies.

Emergency Communication Templates

ACTIVE SHOOTER EVACUATION SCENARIO:

- Upon notification or detection of an active shooter on site, immediately determine the safest course of action for yourself and others: Run, Hide, or Fight.

Run (Evacuate if Possible)

- If there is a safe and accessible escape route, immediately leave the building using the closest exits shown on the map.
- Leave belongings behind and encourage others to evacuate, but do not stay behind if others refuse to run.
- **Bring client list of names and sign in log binder for guests to assembly point if possible**
- **Move quickly to the designated assembly areas well away from the shelter:**
 - **Primary Assembly Area 1: Forrest Ave**
 - **Alternate Assembly Area 2: Daisy Ave.**
- Keep hands visible, follow law enforcement directions, and call 911 when safe.
- **At Assembly Area, conduct roll call of clients, guests, volunteers, and employees using list of names to ensure all are accounted for.**
- **Make a list of unaccounted for individuals or individuals that could not be evacuated and their last known location. Provide the list to Emergency Response Professionals.**

Hide (Shelter in Place if Evacuating is Unsafe)

- If evacuation is not possible, find a secure room inside the building to hide.
- Lock and block doors with furniture if possible, turn off lights, silence phones, and stay out of sight.
- Stay silent and remain calm. Do not open the door until law enforcement announces an all-clear.
- Staff should assist persons with disabilities to reach secure hiding places.

Fight (Last Resort)

- If in imminent danger and unable to evacuate or hide, be prepared to disrupt or incapacitate the shooter by using any objects nearby as improvised weapons.
- Act aggressively and decisively to stop the threat.

After Law Enforcement Arrives

- Keep hands visible, empty, and follow all instructions.
- Expect law enforcement teams to prioritize stopping the shooter and may bypass injured persons; rescue teams will follow to assist victims.
- Remain at the assembly area until law enforcement authorizes leaving or returning to the building.

EARTHQUAKE EVACUATION SCENARIO:

In the event of an earthquake at the shelter, follow these steps using the provided evacuation plan map to ensure everyone's safety.

- When the earthquake starts, instruct everyone to Drop, Cover, and Hold On away from windows, heavy objects, or anything that could fall over.
- After the shaking stops, quickly assess for injuries. Provide first aid if safe to do so, and assist anyone who needs extra help, especially those with limited mobility or injuries.

Evacuation Process

- Evacuate the building in an orderly manner using the nearest safe exit as shown on the map. Watch for hazards like broken glass or debris.
- Leave personal belongings behind - do not return for coats, purses, or briefcases
- **Bring client list of names and sign in log binder for guests to assembly point**
- Follow designated evacuation routes to the nearest exit
- **Guide all clients and staff toward the designated assembly areas listed on the map:**
 - **Assembly Area 1: Forrest Ave**
 - **Alternate Assembly Area 2: Daisy Ave**
- **DO NOT leave before meeting at assembly area and notifying Emergency Coordinator of your safe arrival**
- Keep to clear pathways and avoid standing under or near damaged structures. Use both vehicular and walk-in gates as marked for safe exit.

Special Instructions

- Assign staff and/or clients to assist persons with disabilities, ensuring they have a support buddy or are given priority evacuation through the safest routes.
- For those who cannot evacuate independently, employ the cradle lift or two-person carry as outlined in emergency training.
- Evacuate pets, if safe to do so, keeping animal control practices in place.
- Avoid designated Smoking Area and dumpsters, as these could pose additional post-earthquake risks.

Final Steps

- **At Assembly Area, conduct roll call of clients, guests, volunteers, and employees using list of names to ensure all are accounted for.**
- **Make a list of unaccounted for individuals or individuals that could not be evacuated and their last known location. Provide the list to Emergency Response Professionals.**
- Await further instructions from emergency services before leaving the assembly points or re-entering any buildings.
- Only designated trained personnel may re-enter to retrieve medical supplies or essential gear, and only if the area is deemed safe.

EXPLOSION EVACUATION SCENARIO:

- If an explosion occurs, immediately instruct all shelter occupants to drop and cover their heads, taking shelter away from windows and unsecured items until the initial danger passes.
- As soon as it is safe, check for injuries and hazards such as fire, smoke, debris, or unstable structures before moving anyone.

Evacuation Process

- Evacuate the building in an orderly manner using the nearest safe exit as shown on the map. Watch for hazards like broken glass or debris.
- Leave personal belongings behind - do not return for coats, purses, or briefcases
- **Bring client list of names and sign in log binder for guests to assembly point**
- Follow designated evacuation routes to the nearest exit
- **Guide all clients and staff toward the designated assembly areas listed on the map:**
 - **Assembly Area 1: Forrest Ave**
 - **Alternate Assembly Area 2: Daisy Ave**
- Direct evacuees upwind and at least 150 feet away from the site of the explosion to avoid toxic fumes and secondary blasts
- **DO NOT leave before meeting at assembly area and notifying Emergency Coordinator of your safe arrival**

Special Instructions

- Assign staff and/or clients to assist persons with disabilities, ensuring they have a support buddy or are given priority evacuation through the safest routes.
- For those who cannot evacuate independently, employ the cradle lift or two-person carry as outlined in emergency training.
- Evacuate pets, if safe to do so, keeping animal control practices in place.

Final Steps

- **At Assembly Area, conduct roll call of clients, guests, volunteers, and employees using list of names to ensure all are accounted for.**
- **Make a list of unaccounted for individuals or individuals that could not be evacuated and their last known location. Provide the list to Emergency Response Professionals.**
- Await further instructions from emergency services before leaving the assembly points or re-entering any buildings.
- Only designated trained personnel may re-enter to retrieve medical supplies or essential gear, and only if the area is deemed safe.
- Remain outside and upwind, away from the building, until emergency officials provide the “all clear” signal.

FIRE EVACUATION SCENARIO:

In the event of a fire at the shelter, follow these steps using the provided evacuation plan map to ensure everyone's safety.

- When fire or smoke is detected, immediately activate the nearest fire alarm pull station and notify staff and residents with loud, clear instructions.
- Instruct everyone to stop what they are doing and proceed to the nearest exit as shown on the evacuation map. Leave belongings behind if they could delay evacuation.

Evacuation Process

- Evacuate the building in an orderly manner using the nearest safe exit as shown on the map. Watch for hazards like broken glass or debris.
- Leave personal belongings behind - do not return for coats, purses, or briefcases
- **Bring client list of names and sign in log binder for guests to assembly point**
- Follow designated evacuation routes to the nearest exit
- **Guide all clients and staff toward the designated assembly areas listed on the map:**
 - **Assembly Area 1: Forrest Ave**
 - **Alternate Assembly Area 2: Daisy Ave**
- **DO NOT leave before meeting at assembly area and notifying Emergency Coordinator of your safe arrival**
- Keep to clear pathways and avoid standing under or near damaged structures. Use both vehicular and walk-in gates as marked for safe exit.

Special Instructions

- Assign staff and/or clients to assist persons with disabilities, ensuring they have a support buddy or are given priority evacuation through the safest routes.
- For those who cannot evacuate independently, employ the cradle lift or two-person carry as outlined in emergency training.
- Evacuate pets, if safe to do so, keeping animal control practices in place.

Final Steps

- **At Assembly Area, conduct roll call of clients, guests, volunteers, and employees using list of names to ensure all are accounted for.**
- **Make a list of unaccounted for individuals or individuals that could not be evacuated and their last known location. Provide the list to Emergency Response Professionals.**
- Await further instructions from emergency services before leaving the assembly points or re-entering any buildings.
- Only designated trained personnel may re-enter to retrieve medical supplies or essential gear, and only if the area is deemed safe.
- Follow all directions from on-site emergency responders and keep all fire lanes, access points, and assembly areas clear for response operations.

TRAIN DERAILMENT EVACUATION SCENARIO:

- Upon notification or detection of a train derailment on the tracks behind the building, immediately notify emergency services (911) and activate the shelter's emergency alert system to inform all clients and staff of the situation.
- Assess the situation from a safe distance, staying upwind and uphill from the derailment to avoid exposure to potential hazardous materials or smoke.

Evacuation Process

- Evacuate the building in an orderly manner using the nearest safe exit as shown on the map. Watch for hazards like broken glass or debris.
- Leave personal belongings behind - do not return for coats, purses, or briefcases
- **Bring client list of names and sign in log binder for guests to assembly point**
- Follow designated evacuation routes to the nearest exit
- **Guide all clients and staff toward the designated assembly areas listed on the map:**
 - **Assembly Area 1: Forrest Ave**
 - **Alternate Assembly Area 2: Daisy Ave**
- **DO NOT leave before meeting at assembly area and notifying Emergency Coordinator of your safe arrival**

Special Instructions

- Assign staff and/or clients to assist persons with disabilities, ensuring they have a support buddy or are given priority evacuation through the safest routes.
- For those who cannot evacuate independently, employ the cradle lift or two-person carry as outlined in emergency training.
- Evacuate pets, if safe to do so, keeping animal control practices in place.
- **Do not attempt to approach the train or track area; wait for hazmat teams and emergency responders.**

Communication and Coordination

- The Emergency Coordinator center should coordinate with emergency services, railroad authorities, and local hazmat teams to obtain details about the derailment, car contents, and risk areas.
- **At Assembly Area, conduct roll call of clients, guests, volunteers, and employees using list of names to ensure all are accounted for.**
- **Make a list of unaccounted for individuals or individuals that could not be evacuated and their last known location. Provide the list to Emergency Response Professionals.**
- Await further instructions from emergency services before leaving the assembly points or re-entering any buildings.
- Only designated trained personnel may re-enter to retrieve medical supplies or essential gear, and only if the area is deemed safe.

Other types of evacuation scenarios that might occur at a homeless shelter include:

- **Shelter-In-Place:** When it is safer to remain indoors rather than evacuate, such as during violent threats outside, chemical spills nearby, or severe weather like tornadoes. Occupants lock doors and windows, stay away from exterior walls and windows, and wait for all-clear.
- **Bomb Threat:** Partial or full evacuation due to a reported suspicious package or bomb threat. Special care to evacuate calmly and to designated safe assembly points well away from the building or threat area.
- **Hazardous Materials Incident:** Evacuate or shelter-in-place following accidents involving chemical, biological, or radiological substances either inside or near the shelter. May include evacuation to a different site or shelter-in-place with sealed rooms.
- **Severe Weather Evacuation:** For flooding, wildfires, winter storms, or hurricanes requiring immediate shelter or removal from the premises to secure locations.
- **Utility Failure or Threat:** Evacuation due to gas leaks, power outages, or structural damage that makes continuing to stay inside unsafe.
- **Lockdown or Lockout:** Lockdown is used to secure occupants inside the building when there is a threat inside, while lockout secures the building from external threats but allows normal internal operations.

These different scenarios require tailored responses including full or partial evacuation, sheltering in place, or lockdown, depending on the nature, location, and severity of the emergency.

Evacuation Details:

Step	Yes / No	Time	Comments
Alarm activated and functioned			
Staff responded			
Staff verified emergency			
Staff alerted all persons			
Evacuation commenced			
Persons with disabilities assisted			
All persons evacuated			
Assembly point reached			
Roll call completed			

Injuries and Medical Assistance:

Number of injuries: _____

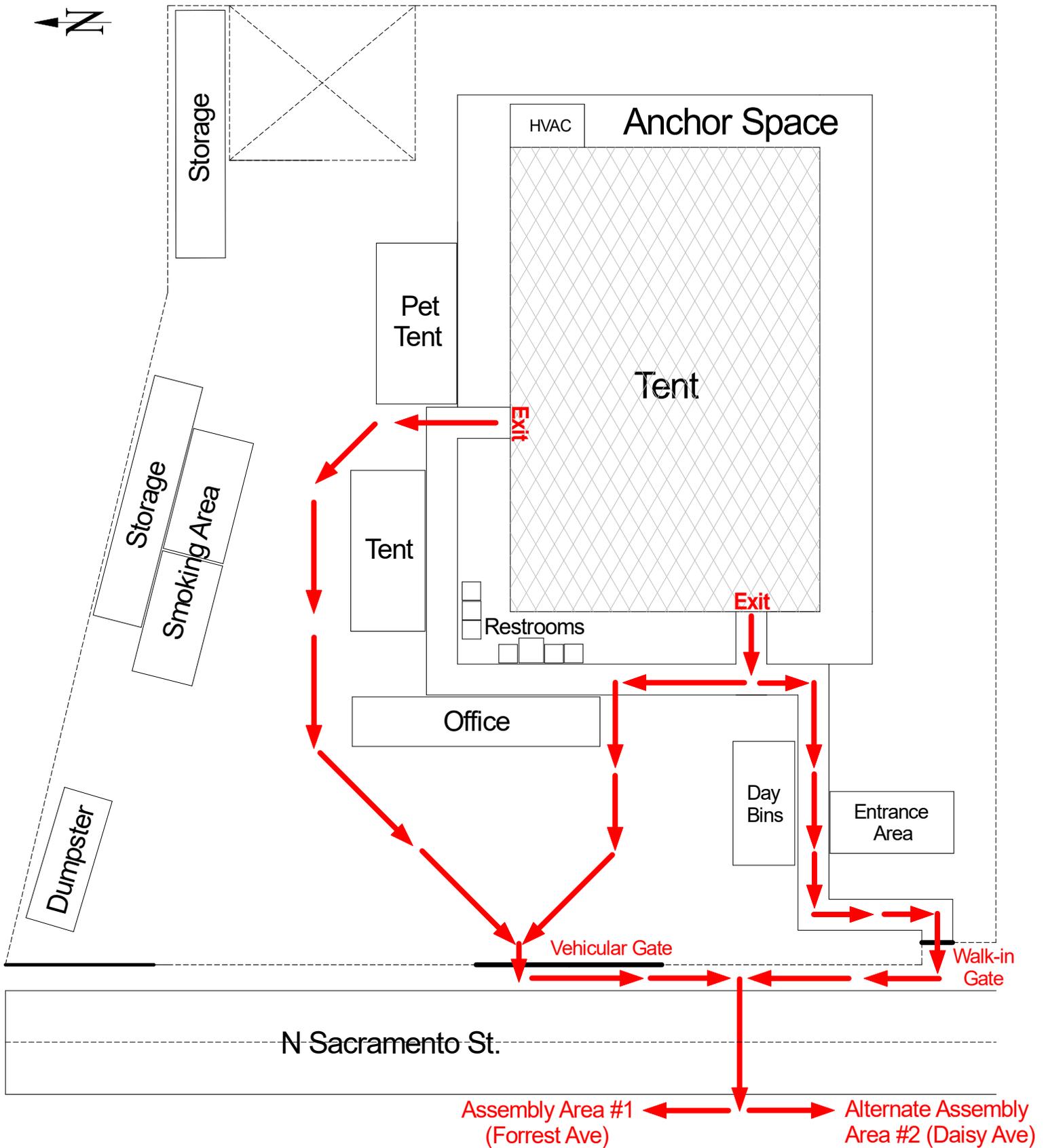
Description of injuries and treatment provided: _____

Property Damage (if any):

Emergency Services Involved:

- Fire Department: [Yes/No]
- Police: [Yes/No]
- Ambulance/EMS: [Yes/No]
- Hazmat Team (if applicable): [Yes/No]
- Other (Specify): _____

Emergency Evacuation Plan





A Pathway to Stability and Hope

Located at **710 N. Sacramento St.**, the Lodi Access Center (LAC) stands as a beacon of hope and transformation for the city’s unsheltered community. Established in July 2022, the LAC was born from an urgent need to provide not only safe shelter, but a comprehensive, compassionate approach to addressing homelessness. Recognizing that the path from crisis to stability requires more than just a bed, the LAC was designed to provide the tools, services, and support systems that foster lasting change.

The LAC is a 46-bed (formerly 49 bed), low-barrier shelter specifically designed to be accessible to the city’s unsheltered individuals, regardless of the obstacles they may face. By removing high-threshold entry requirements, the Access Center ensures that services are available to those most in need, whether they are grappling with mental health challenges, substance use, or other barriers that often prevent access to traditional shelters.

The vision of the LAC is simple yet powerful: to empower individuals to reclaim their lives through safety, stability, and supportive relationships that promote long-term self-sufficiency, sobriety, and hope.

Comprehensive Services that Go Beyond Shelter

The Lodi Access Center offers a robust, client-centered program that includes:

- Secure shelter: Safe, stable accommodations for up to 46 individuals.
- Showers and laundry: Facilities to maintain hygiene and dignity.
- Meals: Nutritious food provided daily to support health and well-being.
- Charging stations: Access to power for essential devices, enabling connection to family, resources, and job opportunities.
- Case management and wrap-around services: Individualized support to address housing, employment, mental health, and substance use needs.
- Pathways to resources: Connections to community-based programs, benefits enrollment, medical care, employment, and more.

These integrated supports help address the complex realities of homelessness and aim to not only provide temporary relief, but to build a solid foundation for lasting change.

Strong Community Partnerships and Proven Results

Originally operated by Inner City Action, management was transferred in November 2024 to Outreach Ministries International (OMI). OMI is a respected local nonprofit organization with an established and engaged presence in the greater Lodi community for over 40 years. The organization's reach includes several community-focused groups such as Gravity Church, Agape Love, and 2nd Step Housing, creating a far reaching and measurable impact.

The effectiveness of the Lodi Access Center has continued to provide measurable outcomes.

From **November 1, 2024 to October 31, 2025**, under OMI's stewardship:

- **59 clients connected to supportive programs:** These include substance use treatment, mental health services, and vocational training—critical resources that address root causes of homelessness and foster resilience.
- **115 clients transitioned into housing:** By facilitating access to permanent and supportive housing, the LAC helps individuals move beyond the shelter system and toward independence.
- **51 clients gained employment:** Through job readiness training, career counseling, and employer partnerships, clients can develop the skills and confidence needed to re-enter the workforce.

The Lodi Access Center exemplifies what is possible when compassion, innovation, and community partnership converge. Through comprehensive services, committed leadership, and measurable outcomes, the LAC offers more than shelter, it offers a real chance at transformation.

A Vision for the Future

As the temporary emergency center continues its work, construction has begun for the 23,000 sq. ft facility on the same site. The expanded center will nearly double the existing bed count and is anticipated to provide enhanced services including mental health beds, mental health respite, and sobering beds.

This project reflects a forward-thinking collaboration between the City of Lodi, San Joaquin County, and the County Health Care Services Agency. The new facility will launch with a diverse mix of care-focused services and an initial bed count designed to meet immediate needs, with the flexibility to expand up to 208 beds as demand and resources allow. Plans include on-site clinical care, integrated behavioral health services, and housing navigation, enhancing support for both shelter residents and the wider community.

The future is bright at the Lodi Access Center. With compassionate leadership, dedicated partners, and a strong foundation of support, the LAC is not just providing shelter, it's paving the way for sustainable transformation.

The future is bright at the Lodi Access Center!

For more information, please visit: www.lodiaccesscenter.com -or- www.lodi.gov/1232/Homelessness-Initiatives





DOING THE MOST GOOD®

Lodi Corps & Hope Harbor Family Services Center

Response to



REQUEST FOR PROPOSAL

FOR

**ACCESS CENTER AND EMERGENCY SHELTER
OPERATIONAL MANAGEMENT SERVICES**

City of Lodi
Community Development Department
Neighborhood Services Division
221 W. Pine Street, Lodi, California 95240
Ph: 209-269-4519
NeighborhoodServices@lodi.gov

Lyndon Buckingham
General

William & Catherine Booth
Founders

Douglas & Colleen Riley
Territorial Leaders



DOING THE MOST GOOD

The Salvation Army

Lodi Corps Community Center & Hope Harbor Family Service Center
erving Greater Lodi since 1889

Majors Phyllis & Richard Pease
Corps Officers

Majors Lynn & Osei Stewart
Divisional Leaders

Advisory Board

Martha Hammond, <i>Chair</i>	Christine Cesena	Steve Cottrell	Marilee Ginoulis	Nicole Goehring	Pam Kludt
John Shinn, <i>Vice Chair</i>	Rick Kludt	Steve Opp	Jon Velasquez	Calvin Young	Clint Waring
Annette Murdaca, <i>Emeritus</i>					

November 3, 2025

City of Lodi
Community Development Department
Neighborhood Services Division
221 W. Pine Street
Lodi, CA 95240

Neighborhood Services Team,

On behalf of The Salvation Army Lodi Corps, thank you for the opportunity to propose our Access Center and Emergency Shelter Operational Management Services to the City of Lodi.

We understand that safe shelter is the first step in empowering our unhoused neighbors, and finding the right organization to operate the Access Center is a daunting task. The Salvation Army's experience and commitment to *Doing the Most Good* allow us to provide shelter services with operational effectiveness and fiscal responsibility. Our proposal the Access Center provides 24/7 management with comprehensive case management services using Housing First methodology and the LIFNAV and Pathway of Hope frameworks 3 meals and a snack to each guest daily, Housing and Employment Navigation, coordination of and access to services of other providers, and outreach our unhoused neighbors in Lodi, and a Good Neighbor plan with the residents and businesses around the Access Center.

Thank you for the opportunity to present our RFP response to become the Access Center operator for the City of Lodi. If you have any questions, please do not hesitate to contact me.

In His Service,

Richard Pease, Major
Corps Officer
richard.pease@usw.salvationarmy.org
(209) 369-5896 x1101

PROPOSER INFORMATION

1. Name of Entity or Organization: The Salvation Army Lodi Corps
2. Physical Address: 525 W. Lockeford Street, Lodi, CA 95240
3. Mailing Address (if different than above): P.O. Box 1388, Lodi, CA 95241-1388
4. Executive Director/CEO
 - Name: Major Richard Pease
 - Title: Corps Officer
 - Email: richard.pease@usw.salvationarmy.org
 - Phone Number: (209) 369-5896 x1101
5. Contact Person (if different than above)
 - Name:
 - Title:
 - Email:
 - Phone Number:
6. Number of years organization has been in business: 160
7. Number of year's organization has operated as a 501(c)(3): 111
8. Federal Tax ID Number: 94-1156347
9. Has this organization operated under another name? () Yes (X) No
 - a. If yes, list all previous names:
10. Are you registered with sam.gov? (X) Yes () No
 - If yes, please provide UEI number: LF19UDKFKQM6
 - If no, please register for UEI number at <https://sam.gov/entity-registration>
11. Number of year's organization has conducted the program for which services are being requested: 160
12. Provide 3 References to speak to your organizations work and successes with homelessness services:
 - a. First Baptist Church of Lodi, 267 N. Mills Avenue, Lodi, CA 95242 | Pastor Glen Barnes, Lead Pastor, glen@fbclodi.org | (209) 334-1332 | (209) 329-1387

b. Family Promise of San Joaquin County, 6148 Gettysburg Place, Stockton, CA 95207 | Jory Gwasdoff, Executive Director, jory@familypromise.org | (209) 323-4284

c. Community Service Team, Lodi, CA 95240 | Bill Moersch, Founder/President, bill@communityserviceteam.com | (209) 602-5000 | (252) 723-1000

13. Describe your organization's history and experience in providing services to individuals experiencing homelessness:

For over 150 years, The Salvation Army has stood as a beacon of hope for individuals experiencing homelessness across the United States. In California, it holds the distinction of being the longest-standing nonprofit dedicated to this cause, sheltering over 9,000 people each night through a robust infrastructure that includes 3,002 transitional housing beds, 2,236 shelter beds, 2,234 permanent housing beds, and 1,563 recovery and wellness beds. This enduring commitment is especially evident in Lodi, where The Salvation Army has operated continuously for more than 30 years, initiating emergency shelter services in the early 1990s and expanding its reach to meet the evolving needs of the local population.

Central to its efforts in Lodi is the Hope Harbor Family Service Center, a comprehensive facility offering emergency shelter, food, and support to men, women, and families—including single-parent households. The center's services extend beyond immediate shelter to include transitional housing via Hope Avenue Apartments, addiction recovery programs, and workforce development initiatives such as a culinary arts program that has graduated over 100 individuals. Seasonal warming and cooling centers, public hot meals, and financial assistance further demonstrate The Salvation Army's commitment to year-round support for vulnerable residents.

The organization's innovative approach is exemplified by The Way Out initiative and its Life Navigation (LIFNAV) program, which emphasize person-centered care. These programs foster engagement through positive relationships, empower individuals with personalized goal setting, and equip them with tools for self-sufficiency. LIFNAV Connect, a smartphone-accessible portal integrated with the Homeless Management Information System (HMIS), streamlines access to real-time shelter availability, local resources, and case tracking. This technology reduces barriers and accelerates rehousing by enabling informed decision-making and coordinated service delivery.

The Salvation Army's low-barrier shelters reflect its inclusive philosophy, welcoming individuals regardless of sobriety, religious affiliation, or whether they have pets, partners, or possessions. These shelters provide wraparound services such as meals, hygiene facilities, case management, and access to medical and mental health care. The organization actively participates in the San Joaquin Continuum of Care (SJCoC), utilizing HMIS and WellSky systems for data collection and outcome tracking. Its national Pathway of Hope program offers long-term case management for families with children, focusing on employment, housing, education, and spiritual care—with 76% of participants reporting increased financial stability and 60% experiencing greater hope.

Community engagement is a cornerstone of The Salvation Army's mission. Through daily neighborhood cleanups, outreach to unsheltered individuals, and collaboration with local businesses, law enforcement, and city officials, the organization fosters a safe and respectful environment. Supported by policies that ensure cleanliness and minimal disruption, The Salvation Army's holistic, compassionate, and data-driven approach continues to transform lives and communities, offering both immediate relief and sustainable pathways to stability.

1. Service Summary

The Salvation Army Lodi Corps appreciates the opportunity to provide this proposal to operate the Access Center as a 24/7 low-barrier shelter and service hub for individuals experiencing homelessness in Lodi. We do this in alignment with our mission to preach the gospel of Jesus Christ and meet human needs in His name without discrimination. We will operate the Access Center compassionately and consistently within all legal and contractual requirements. With an initial capacity of 60 beds and scalable up to 208, the Center will be a one-stop shop, provide emergency shelter, meals, hygiene services, medical and behavioral health access, housing navigation, and employment support to the unhoused.

Our operational philosophy is rooted in the Housing First model, which prioritizes immediate access to shelter without preconditions. This approach reduces barriers and allows individuals to stabilize before engaging in voluntary services. All services will be tracked using HMIS and WellSky systems to ensure accountability and measure outcomes.

The Access Center will integrate LIFNAV (Life Navigation Coaching), a person-centered framework that empowers individuals to design their own path to housing and quality of life. LIFNAV coaches help guests identify personal goals, navigate housing options, and access shallow subsidies and employability tools. This model fosters transformational relationships and restorative community connections, reducing the days of homelessness and increasing long-term stability.

For families with children, the Center will connect eligible participants to Pathway of Hope, The Salvation Army's national initiative to break the cycle of intergenerational poverty. Through intensive case management, spiritual care, and community partnerships, Pathway of Hope supports families in achieving increased hope, financial stability, and self-sufficiency.

Key outcomes will be tracked in alignment with the Core Outcome Metrics outlined in the RFP, including:

- Exit Rate to Permanent Housing: The HUD 2023 rate was 32.4%, our goal is 40% through coordinated housing navigation.

- **Employment Outcomes:** We will track both job attainment and active job-seeking, with a goal of 25% of overnight guests gaining employment during program participation.
- **Engagement in Services:** We expect at least 75% of guests to engage in case management or navigation services.
- **Recidivism Reduction:** We will monitor returns to homelessness and aim to keep this below 15% compared to the HUD reported national average of 18.7%.
- **Guest Satisfaction:** Anonymous surveys will be used to measure satisfaction, with a target rate of 85% or higher.

Guests will receive three meals daily, snack, access to showers, clothing closets, and supportive services. Day center hours are 9 a.m. to 4 p.m., with quiet hours from 10 p.m. to 6 a.m. Sunday–Thursday and 11 p.m. to 6 a.m. Friday–Saturday.

To minimize neighborhood impact, we implement daily clean-up, enforce behavior policies, and maintain open communication with local businesses and residents through our Good Neighbor Plan.

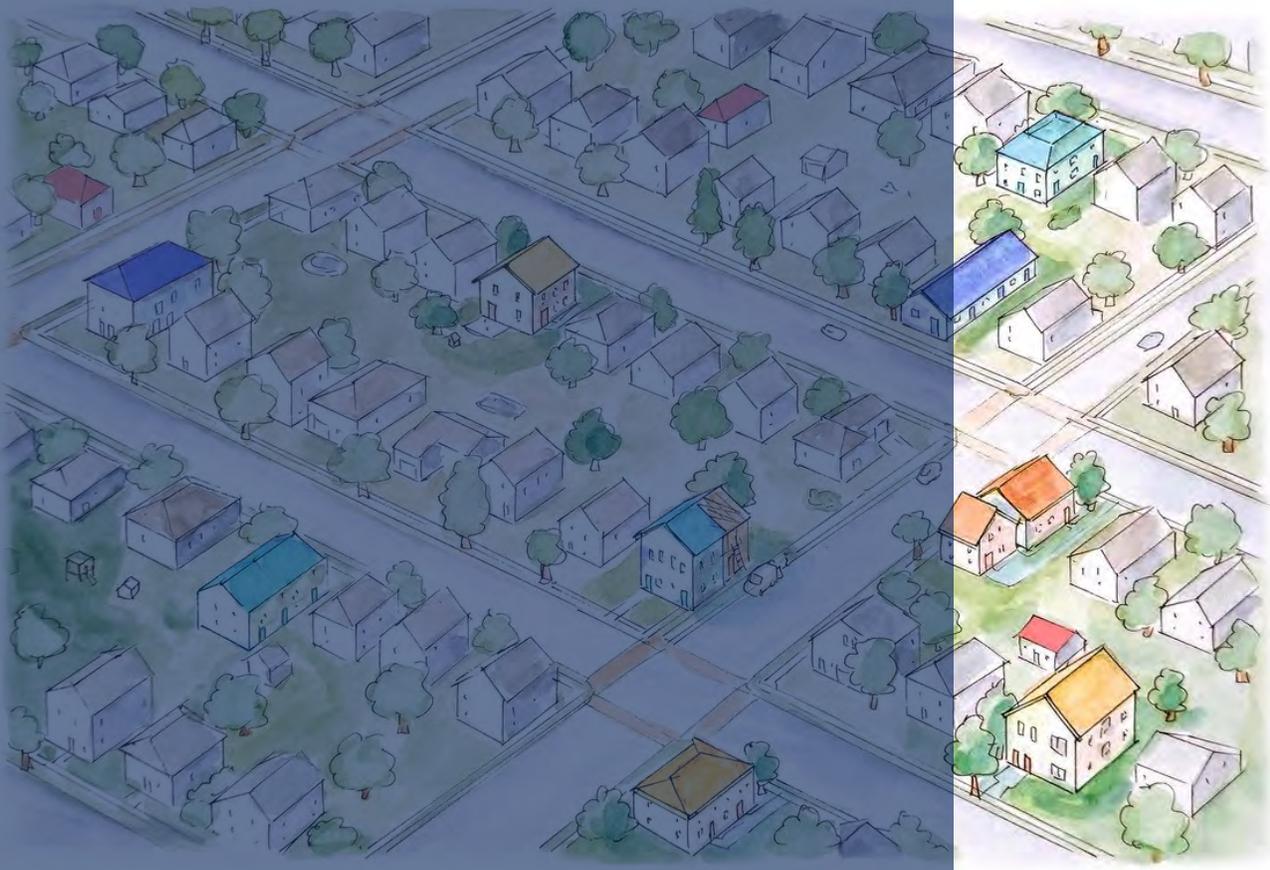
Ultimately, the Access Center serves as a gateway to transitional and permanent housing, including Hope Harbor, Hope Avenue Apartments, Main Street Apartments, and other locations supporting long-term independence in a clean and sober environment.



DOING THE MOST GOOD™

LIFNAV

Data, Housing, and Community



OUR VISION

People experiencing the fullness of life through transformational relationships within great neighborhoods.



OUR MISSION

Preach the gospel in the name of Jesus Christ, meet basic human needs, and serve without discrimination.

Our Vision

People experiencing the fullness of life through transformational relationships with self, God, others and all creation.



The Need

Housing stability is the foundation of the quality of life of individuals, families, and communities.

Life Navigation Coaching

Resourcing personal goals increases the speed of success to a higher quality of life.

LIFNAV



1 Engage

LIFNAV Connect allows those displaced to map their path to rehousing, while locating basic human needs for the journey.

Our life navigation coaches engage individuals and families. Coaching individualized goals strengthens the hope of a restored quality of life.

2 Empower

LIFNAV participants design their plan for an increased quality of life. Most often, the first goals are social (where in town they find a home and prefer community), second individual (personal preferences of expression), and third the house/apartment that provides safety. Achieving these goals usually requires an increase of income.

LIFNAV Employability Plus provides the tools necessary to enhance employability and increase income.



3 Equip

Restorative communities create a social, individual space from which to prioritize housing. Housing market re-entry resources are provided with shallow subsidy grants to strengthen the new resident in their neighborhood. Such grants significantly reduce future housing loss and are the most economically efficient means of creating great neighborhoods.



Life Navigation Coaching Playbook

Reducing the days of reversible homelessness experienced by strengthening self-resolution pathways to housing.

Behavioral Insights: Integrating experience and applying science for mission excellence.



Social Capital Measurements

Client Information	
Client:	
Caseworker:	
Date:	
Description of Community : City : State : Zip : Social Groups - Signify by City , State (CS)	

This questionnaire is to help us connect you to community, so we'd like to start by asking what gives you a sense of community or a feeling of belonging. This process may be repeated to bring to mind other communities for comparison.

	Strongly --Disagree	-Disagree	+Agree	Strongly ++Agree	Item Score
1. Your family - friends give you a feeling of belonging					
2. The people in this neighborhood give you a sense of belonging					
3. Living in <City> gives you a sense of You expect employment in <City>					
4. Your place of worship sense of welcome					
5. Generally speaking most people can be trusted					
6. You can trust most people in the neighborhood					
7. You can trust most people at a You expect employment in <City>					
8. You can trust local media/government					
9. You enjoy family time in <City>					
10. Your family or friends help support you					
11. You expect income /employment in <City>					
12. Your place of worship assists with your basic human needs as necessary					
* This community is a good place to live.					
Total Score					



Reference: "Harvard Kennedy School – Saguaro Seminar :: Measurement :: SK 2006 Community Benchmark Survey." Accessed July 26, 2015.
<http://www.hks.harvard.edu/programs/saguaro/measurement/sk-2006-community-benchmark-survey>.

Community Connections

Social capital through community connections is a subset of questions of Robert Putnam’s work: The Social Capital. The intent is to recognize the value of social capital in stabilization of at risk individuals within community.

Score items as follows :

Directions:

1. Tally Choices Per Location
2. Multiply Score By Choice
3. Total Item Score for Total Score
4. Compare Scores of Locations

Listed below are a number of statements. Read each statement and place an [X] in the box that describes how much you agree with that statement right now.

	City One _____	City Two _____	City Three _____
--	X -1=	X -1=	X -1=
-	X 1=	X 1=	X 1=
+	X 3=	X 3=	X 3=
++	X 4=	X 4=	X 4=
Total Score			



Power in Hope

Client Information

Client: _____

Caseworker: _____

Date: _____

Description of the Situation

Just as every family is unique, so is each community. And this distinctiveness creates the opportunity and the freedom for partners to work together to map the best routes — the ones that meet families where they are and encourage them to move forward — on the pathway of hope. Casey Foundation 2019 <https://www.casey.org/hope/>

This questionnaire is to help us encourage the hope you have. Please indicate the extent to which you tend to agree or disagree with each statement. In each case, make your choice in terms of how you feel right now, not what you have felt in the past or would like to feel. Listed below are a number of statements. Read each statement and place an [X] in the box that describes how much you agree with that statement right now.

	Strongly -- Disagree	- Disagree	+ Agree	Strongly ++ Agree	Item Score
1. I have a positive outlook toward life.					
2. I have short and/or long range goals					
3. I feel all alone.					
4. I can see possibilities in the midst of difficulties.					
5. I have a faith that gives me comfort.					
6. I feel scared about my future.					
7. I can recall happy/joyful times.					
8. I have deep inner strength.					
9. I am able to give and receive caring/love.					
10. I have a sense of direction.					
11. I believe that each day has potential.					
12. I feel my life has value and worth.					
Total Score					

Herth Hope Index Scoring Sheet

Scoring consists of summing the points for the subscale and for the total scale. Subscales are based on the three factors. The total possible number of points on the total scale is 48 points - the higher the score the higher the level of hope for the client.

Score items as follows (Note the following items need to be scored in reverse: 3, 6):

Strongly Disagree = 1 Disagree = 2 Agree = 3 Strongly Agree = 4

Directions:

1. Score each item
2. Place score Item Score
3. Total Item Score for Total Score
4. Total subscale scores

Listed below are a number of statements. Read each statement and place an [X] in the box that describes how much you agree with that statement right now.

	Strongly Disagree	Disagree	Agree	Strongly Agree	Item Score
1. I have a positive outlook toward life.	1	2	3	4	
2. I have short and/or long range goals	1	2	3	4	
3. I feel all alone.	4	3	2	1	
4. I can see possibilities in the midst of difficulties.	1	2	3	4	
5. I have a faith that gives me comfort.	1	2	3	4	
6. I feel scared about my future.	4	3	2	1	
7. I can recall happy/joyful times.	1	2	3	4	
8. I have deep inner strength.	1	2	3	4	
9. I am able to give and receive caring/love.	1	2	3	4	
10. I have a sense of direction.	1	2	3	4	
11. I believe that each day has potential.	1	2	3	4	
12. I feel my life has value and worth.	1	2	3	4	
Total Score					

© 1989 Kaye Herth
1999 items 2 & 4 reword



Client Information

Client: _____
 Caseworker: _____
 Date: _____

Description of the Situation

“There are two primary choices in life: to accept conditions as they exist, or accept the responsibility for changing them” — Denis Waitley

This questionnaire is to help us help you with the changes that you may choose. Each statement describes how a person might feel when starting to get help. Please indicate the extent to which you tend to agree or disagree with each statement. In each case, make your choice in terms of how you feel right now, not what you have felt in the past or would like to feel. For all the statements that refer to your “situation,” answer in terms of how you have described your situation at the top.

There are FIVE possible responses:	Strongly Disagree	Disagree	Undecided	Agree	Strongly Agree
1. It doesn't make much sense for me to consider changing my situation.					
2. I've been thinking that I might want to improve my situation.					
3. At times my situation causes problems and I'm determined to change it.					
4. It is frustrating , but I feel I might be having a recurrence of a bad situation that I thought I had fixed.					
5. Trying to change my situation is pretty much a waste of time .					
6. I guess I have faults, but there's nothing that I really need to change about my situation.					
7. I thought once I had improved before everything would be fine. I find myself still struggling in this situation .					
8. My situation is not good and I think I should work to improve it .					
9. I am really working hard to improve my situation.					
10. I hope that someone will have some good advice for me about how to improve my situation.					
11. Anyone can talk about changing their situation; I'm actually going to do something about it.					
12. After all I had done to try and improve my situation, every now and then I still find myself struggling .					

Choice for Change Scoring Sheet

Client Information
Client:
Caseworker:
Date:
Description of the Situation

Directions:

Use this scoring sheet to give a score of 1-5 for each X the client marked on the URICA questionnaire.

There are FIVE possible responses:	Strongly Disagree	Disagree	Undecided	Agree	Strongly Agree
1. It doesn't make much sense for me to consider changing my situation.	5	4	3	2	1
2. I've been thinking that I might want to improve my situation.	1	2	3	4	5
3. At times my situation causes problems and I'm determined to change it.	1	2	3	4	5
4. It is frustrating, but I feel I might be having a recurrence of a bad situation that I thought I had fixed.	1	2	3	4	5
5. Trying to change my situation is pretty much a waste of time.	5	4	3	2	1
6. I guess I have faults, but there's nothing that I really need to change about my situation.	5	4	3	2	1
7. I thought once I had improved my situation everything would be fine, but sometimes I still find myself struggling.	1	2	3	4	5
8. My situation is not good and I think I should work to improve it.	1	2	3	4	5
9. I am really working hard to improve my situation.	1	2	3	4	5
10. I hope that someone will have some good advice for me about how to improve my situation.	1	2	3	4	5
11. Anyone can talk about changing their situation; I'm actually going to do something about it.	1	2	3	4	5
12. After all I had done to try and improve my situation, every now and then I still find myself struggling.	1	2	3	4	5

Pre-screening: URICA Assessment Scoring Sheet

Client Information

Client/Case Number: _____

Caseworker: _____

Date: _____

	Pre-contemplation	Contemplation	Action	Maintenance
Questions 1, 2, 3, 4	1) It doesn't make much sense for me to consider changing my situation. <div style="text-align: right;">Score: <input style="width: 40px;" type="text"/></div>	2) I've been thinking that I might want to improve my situation. <div style="text-align: right;">Score: <input style="width: 40px;" type="text"/></div>	3) At times my situation causes problems and I'm determined to change it. <div style="text-align: right;">Score: <input style="width: 40px;" type="text"/></div>	4) It is frustrating, but I feel I might be having a recurrence of a bad situation that I thought I had fixed. <div style="text-align: right;">Score: <input style="width: 40px;" type="text"/></div>
Questions 5, 7, 8, 9	5) Trying to change my situation is pretty much a waste of time. <div style="text-align: right;">Score: <input style="width: 40px;" type="text"/></div>	8) My situation is not good and I think I should work to improve it. <div style="text-align: right;">Score: <input style="width: 40px;" type="text"/></div>	9) I am really working hard to improve my situation. <div style="text-align: right;">Score: <input style="width: 40px;" type="text"/></div>	7) I thought once I had improved my situation everything would be fine, but sometimes I still find myself struggling. <div style="text-align: right;">Score: <input style="width: 40px;" type="text"/></div>
Questions 6, 10, 11, 12	6) I guess I have faults, but there's nothing that I really need to change about my situation. <div style="text-align: right;">Score: <input style="width: 40px;" type="text"/></div>	10) I hope that someone will have some good advice for me about how to improve my situation. <div style="text-align: right;">Score: <input style="width: 40px;" type="text"/></div>	11) Anyone can talk about changing their situation; I'm actually going to do something about it. <div style="text-align: right;">Score: <input style="width: 40px;" type="text"/></div>	12) After all I had done to try and improve my situation, every now and then I still find myself struggling. <div style="text-align: right;">Score: <input style="width: 40px;" type="text"/></div>
Total:				
Average <small>(Divide 'Total' by 3):</small>				
Range:	3-15	3-15	3-15	3-15

Scoring Instructions:

1. Referring to the "URICA Client Assessment" sheet above, score each category as follows (**Note: The following items need to be scored in reverse: 1, 5, and 6**):
 Strongly Disagree = 1 Disagree = 2 Undecided = 3 Agree = 4 Strongly Agree = 5
2. Transfer score from each question from the client's completed Self-Assessment Form.
3. Total scores in each column.
4. Divide each column by 3, noting equal amount (=)
5. Add columns titled "Contemplation + Action + Maintenance" to arrive at a CAM Score – input into table below
6. Subtract column titled "Pre-contemplation" from CAM Score to find Readiness Score – input into table below
7. Results of Change Assessment Scoring:
 - 3 or lower classified as "Pre-contemplators" or "Contemplators" (Likely screened out of program)
 - 4-6 classified as "Preparation" (Possible client for program)
 - 7-8 classified as "Action" (Good potential client for program)
 - 9-10 classified as "Maintenance" (Ready for transition or too high functioning to start program)

CAM Score (Contemplation + Action + Maintenance totals)	Pre - contemplation total	Readiness Score (CAM Score subtract Pre-contemplation Score)

Quality of Life Self-Determination

Client Information

Client: _____

Caseworker: _____

Date: _____

Subjective Quality of Life

As we identify the needs in which we should invest (necessarily an ongoing venture given the fluid nature of priorities and fulfillment), we can decide what type(s) of relationships or programs that will create the most opportunities to fulfill that need for the lowest level of investment. Invest where marginal utility is highest. Serve the person according to their choices.

	Not Important	Not Fulfilled		Fulfilled	Important
1. Physical Health			Physical		
2. Mental Health			Physical		
3. Safety			Physical		
4. Security			Physical		
5. Emotions			Individual		
6. Creativity			Individual		
7. Self-Hood			Individual		
8. Freedom			Individual		
9. Income			Material		
10. Employment			Material		
11. Housing			Material		
12. Goods			Material		
13. Intimacy			Social		
14. Participation in Groups			Social		
15. Faith			Social		
16. Leisure			Social		



Recorded and/or Referenced Priorities

Top Three Priorities	
Date	

Top Three Priorities	
Up Date	

Top Three Priorities	
Up Date	

Top Three Priorities	
Up Date	

Quality of life: An approach integrating opportunities, human needs, and subjective well-being. Costanza, Fisher, Ali, et al., <https://www.pdx.edu/sites/www.pdx.edu.sustainability/files/Costanza%20et%20al.%20QOL%202007.pdf>



SMART Plan of Achievement (PoA)

Client:	
Caseworker:	
Date:	

Goal 1: <i>(Short description of personal objective here)</i>	Assessment Category: <i>(check one)</i>	
Description: <i>(Eventual personal outcomes after issue is resolved)</i> <ul style="list-style-type: none"> 	Daily living situation (Housing & Food)	Education (Adult & Youth)
	Health & Healthcare	Family & Home
	Income & Employment	Social & Spiritual

Activities Towards Goal <small>What are the short-term activities that will help us achieve our objective?</small>	Personal Responsibility <small>Who is responsible for completing the activity?</small>	Date to be Accomplished <small>When will the activity be accomplished?</small>	Comments or Concerns <small>Is there anything that might prevent us from accomplishing the activity?</small>
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			

<i>Client Signature:</i>	<i>Caseworker Signature:</i>
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Date Goal Achieved _____

Reference: The Salvation Army National Headquarters Pathway of Hope Program



Goal 2: (Short description of personal objective here)	Assessment Category: (check one)		
Description: (Eventual personal outcomes after issue is resolved) <ul style="list-style-type: none"> 	Daily living situation (Housing & Food)		Education (Adult & Youth)
	Health & Healthcare		Family & Home
	Income & Employment		Social & Spiritual

Activities Towards Goal What are the short-term activities that will help us achieve our objective?	Personal Responsibility Who is responsible for completing the activity?	Date to be Accomplished When will the activity be accomplished?	Comments or Concerns Is there anything that might prevent us from accomplishing the activity?
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			

<i>Client Signature:</i>	<i>Caseworker Signature:</i>
--------------------------	------------------------------

Date Goal Achieved _____



Goal 3: <i>(Short description of personal objective here)</i>		Assessment Category: <i>(check one)</i>	
Description: <i>(Eventual personal outcomes after issue is resolved)</i> • • •	<input type="checkbox"/>	Daily living situation (Housing & Food)	<input type="checkbox"/>
	<input type="checkbox"/>	Health & Healthcare	<input type="checkbox"/>
	<input type="checkbox"/>	Income & Employment	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	Education (Adult & Youth)	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	Family & Home	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	Social & Spiritual	<input type="checkbox"/>
Activities Towards Goal What are the short-term activities that will help us achieve our objective?	Personal Responsibility Who is responsible for completing the activity?	Date to be Accomplished When will the activity be accomplished?	Comments or Concerns Is there anything that might prevent us from accomplishing the activity?
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
Client Signature:		Caseworker Signature:	

Date Goal Achieved _____



PATHWAY — OF — HOPE



National
Pathway of Hope
Committee



National Pathway of Hope Strategic Framework

National Pathway of Hope Strategic Framework

Pillars of Success



Culture



Impact



Sustainability

Purpose Statement

After more than a decade of transformational work in the community through Pathway of Hope, this document provides a cohesive national framework for consistency that identifies three Pillars of Success: Culture, Impact and Sustainability as The Salvation Army forges ahead in the alleviation of poverty.

Vision Statement

Families are welcomed and encouraged through The Salvation Army Pathway of Hope initiative to break the cycle of crisis and vulnerability, and intergenerational poverty. Through a strengths-based lens infused with hope and pastoral care, families are empowered to address their root causes of poverty. Every Pathway of Hope team recognizes the culture, impact and sustainability pillars requisite to effectively meet the mission of The Salvation Army.



Pillar I: Culture



VISION STATEMENT: Pathway of Hope is embedded in the culture of service and support to communities across our country; an evolutionary return to The Salvation Army roots. Bridging corps and social service ministries, integrating people, and transforming lives.

Core Values

SPIRITUAL CARE (HEART)

LEADERSHIP CHAMPIONS (MIND)

TRAINING & EDUCATION (SKILLS)

Strategies for Success



Spiritual Care

- Each corps has a written pastoral care plan and a strategy for connecting corps and social services.
- Training for spiritual/pastoral care providers and increasing the number of dedicated Spiritual Care personnel.
- Implementing a framework for pastoral care calls and intentional collaboration of pastoral care teams.



Leadership Champions

- Identify and cultivate multi-level leadership champions who are passionate, committed and will advocate and promote the success of Pathway of Hope.
- Pathway of Hope is a standing agenda item for officer's councils, CFOT, and round table events to promote engagement.
- Intentional, multi-level leadership connections between corps ministries and Pathway of Hope including youth and music.



Training & Education

- Pathway of Hope training is incorporated in all College for Officer Trainings Schools.
- A focus on front line leadership and worker capacity building through e-learning, regular training and workshops.
- Access to case worker certifications, aimed at improving impact, quality of service delivery, promote consistency, and ensure integrity of the approach.

Pillar II: Impact



VISION STATEMENT: To engage families, impacted by poverty, who desire transformational change that along with intensive case management and the support of a faith community, positively impact the lives of parents, children and communities.

Core Values

INCREASED HOPE

INCREASED STABILITY

POVERTY ALLEVIATION

Strategies for Success



Increased Hope

- Identify personal and community strengths that are foundational to overcoming crises.
- Encourage the connection to faith-based communities and other systems of spiritual support that are critical to a family's empowerment.
- Provide access to mental health and medical care services that address determinants of a family's health and well-being.



Increased Stability

- Identify opportunities that lead to an increased and sustainable family income above the poverty threshold and reduce the dependency on social services.
- Provide access to life and decision-making skills that prioritize and support a wholistically healthy quality of life.
- Develop SMART goals that create a family environment where every member thrives.



Poverty Alleviation

- Encourage continued skill development, positive social connections and spiritual support, goal achievements, and increased financial literacy.
- Support the shift in mindset, that hope, faith, access, and action influences today and future generations.



Pillar II: Sustainability

VISION STATEMENT: Pathway of Hope is ingrained in The Salvation Army culture and will be sustained for decades to come through investing in personnel, community partnerships and through private and public funding sources. POH will fulfil the needs of current generations without compromising the needs of future generations.

Core Values

PERSONNEL

COMMUNITY ENGAGEMENT

DIVERSE FUNDING SOURCES

Strategies for Success



Personnel

- Invest in personnel development through training, mentorship, and ongoing support.
- Ensure competitive pay to recruit skilled case managers.
- Develop standard case manager and case worker job descriptions that include the use of the Pathway of Hope Approach.



Community Engagement

- Create a culture that promotes community collaboration at the local level.
- Develop a team approach that supports collaboration within the organization.



Diverse Funding Sources

- Diversify the program's funding sources to reduce reliance on any one source.
- Develop a budget allocation strategy that allows POH positions to be a standard role.
- Integrate POH into the Community Relations and Development fundraising strategy.

2. Organizational Experience

Founded in 1865, The Salvation Army brings 160 years of experience meeting individuals where they are and helping them to transform their lives. Arriving in Lodi in 1889, The Salvation Army is an integral part of our community. Over 136 years, our size and scope have evolved, but our promise of *Doing the Most Good* has remained consistent. Since the reopening of the Lodi Corps in 1991, The Salvation Army has been a reliable community partner addressing food insecurity, homelessness, addiction, and poverty; providing hope and life transformation. The Archway Shelter began our work sheltering men in the 1990's. Hope Harbor opened in 2005 to support single adults and women with children. In 2012, Hope Harbor began serving families and opened a sober living fourplex. These programs have effectively helped many people transform their lives in our community.

This chart summarizes five years of Hope Harbor's key service outcomes and program impact in Lodi.

Hope Harbor — Annual Totals by Program Year (Oct 1–Sep 30)

	2020–21	2021–22	2022–23	2023–24	2024–25
Meals served	23,000+	24,000+	25,000+	26,000+	18,225
Showers / hygiene kits	2,700	2,800	2,900	3,100	2,025
Clothing articles distributed	5,000	5,200	5,500	5,800	3,900
Individuals seen by CMC (medical)	190	200	210	220	150
Pre-Program completions/ARC placed	65	70	75	80	53
Transitional Living → perm. housing	22	25	28	32	21
Clients gaining employment	12	15	18	22	14
Families placed in permanent housing	7	8	10	12	7
Clients transported to appointments	85	90	95	110	75

The Salvation Army coordinates low-barrier shelters in Modesto and Stockton, with proven success in housing placement, employment, and engagement. As a 501(c)(3), we have extensive experience managing shelters, case management, and regulatory compliance. Our staff are trained in trauma-informed care and cultural competency. Strong infrastructure and community ties make The Salvation Army a reliable partner for Lodi's Access Center.

Major Pease has 6½ years of low-barrier shelter experience in Olympia, WA, and Denver, CO. In Denver, he led teams operating COVID hotel shelters, the Crossroads Men's Shelter (280 beds), two Safe Outdoor Space sites, and the Lambuth Family Shelter (20 units), serving men, women, and families. All programs used comprehensive case management—Housing First, LifNAV, and Pathway of Hope—to support unhoused individuals in overcoming challenges.

John Narvaez, the current director of Hope Harbor, has been working with The Salvation Army since 2013 and took on his present role in 2017. He brings personal understanding of addiction and its impact on housing, along with extensive outreach experience supporting people without stable homes. Under John's leadership, Hope Harbor offers nightly meals, shower facilities, and clothing to unhoused neighbors. He guides his team in collaborating with other local service providers to offer comprehensive support. As a founding member of the Lodi Committee on Homelessness, John is highly regarded in Lodi for his expertise in the field.

3. Collaborative Partnerships

The Salvation Army of Lodi has cultivated strong partnerships with key stakeholders across San Joaquin County. These include San Joaquin County Behavioral Health, San Joaquin Health, local hospitals, law enforcement agencies, SJ Cares, Family Promise, faith-based organizations, a countless variety of service providers, the Lodi Committee on Homelessness, and the San Joaquin County Continuum of Care. These partnerships enable the Access Center to offer integrated services such as family support, medical respite care, mental health treatment, and substance use recovery support. Collaborative relationships also facilitate use of Coordinated Entry System, shared data systems (including the Homeless Management Information System [HMIS]), and joint outreach efforts. The Salvation Army actively participates in regional planning and service coordination meetings, ensuring alignment with countywide homelessness strategies. These partnerships are not only operational but also strategic, allowing the Access Center to leverage external expertise, resources, and funding to enhance service delivery. The organization's history of collaboration demonstrates its commitment to community-based solutions and its ability to work effectively across sectors to address homelessness.

We have worked collaboratively and alongside with the previous and current temporary operators of the Access Center (Inner City Action and Outreach Ministries International) on numerous issues and jointly helping a significant number of individuals turn their lives around. We frequently work with various service entities, including, but not limited to Family Promise, Lodi House, PREVAIL, Adventist Health Lodi Memorial Hospital, Community Medical Center, Adult & Teen Challenge Faith Home Network, and numerous faith-based organizations. It is only through years of experience and networking that The Salvation Army and its staff have developed and refined its working relationship with so many entities.

4. Operational Methodology

The Access Center program aims to offer a clean, safe space for individuals seeking shelter. Services are provided in an effective and respectful manner. The objective is to support guests in achieving and maintaining independent living and improving overall quality of life across physical, mental, emotional, and spiritual domains.

The program will offer resources for individuals to pursue health, financial stability, recovery from addiction, and connections to support networks with the aim of promoting self-sufficiency. Guests collaborate with case managers to identify barriers to housing, employment, and independence, and may choose their housing and supportive services. The process maintains options for guests to make decisions regarding their progress while providing resources, structure, and accountability.

The operational framework is built on trauma-informed care principles, structured intake procedures, and individualized case management. Guests will undergo a comprehensive intake process within 48 hours of entry, followed by the development of personalized service plans. Services will be delivered by a multidisciplinary team including a case manager, housing and employment navigator, and volunteers. Staff will use HMIS and WellSky to monitor guest progress and ensure compliance with reporting requirements. Daily operations will include meal service, hygiene access, medical and behavioral health referrals, and employment support. The shelter will also serve as a warming/cooling center during extreme weather events. Policies and procedures are in place to ensure safety, confidentiality, and equitable access. The operational methodology is designed to be scalable, adaptable, and responsive to the evolving needs of the homeless population in Lodi.

The Salvation Army regularly reviews its programs, assesses community needs, and seeks input to address challenges. Since 1991, The Salvation Army has demonstrated its ability to review and adapt programming to meet evolving need in our community. The Army originally opened the Archway Shelter for men, but due to increased need in the community we opened Hope Harbor in 2005 and added shelter for unhoused women and single mothers. In 2011, in response to rising need for family shelter we added 3 family units to Hope Harbor. 18 years ago, we

responded to the need for employment training by opening our Culinary Arts program. To date we have completed 35 16-week sessions and 94% of our students started employment the Monday after graduation.

Under the current design, families will not be able to stay at the Access Center, despite over 300 unhoused children in Lodi Unified School District in 2024–25. Other shelter options are limited, especially for those testing positive for substances. One strategy will be to temporarily split the family allowing the parent testing positive to detox while providing safe, secure housing for the other parent and children. We will also work with the City to look at other options in the event both parents test positive for substance use, perhaps developing a plan for the use of the flex space to address this emerging need.

5. Tasks and Implementation

The Access Center's launch aligns with the City of Lodi's construction and occupancy milestones. Below is a streamlined timeline leading to the July 1, 2026 opening:

- **January 2026:** Finalize contract execution following anticipated City Council award on January 7.
- **February 2026:** Begin recruitment for shelter director, case managers, shelter staff, janitorial team, outreach coordinator, and administrative support.
- **March 2026:** Conduct staff training in trauma-informed care, CPR/First Aid, de-escalation, cultural competency, confidentiality, and emergency protocols. Finalize operational systems including janitorial, laundry, landscaping, and maintenance routines. Secure insurance and submit compliance documentation.
- **April 2026:** Develop and test intake procedures, orientation materials, and bed reservation systems. Coordinate with San Joaquin County Behavioral Health and Health Services for onsite service delivery. Launch neighborhood outreach and introduce the Good Neighbor Plan. Establish clean-up routines for surrounding zones.
- **May 2026:** Configure HMIS and WellSky systems for data tracking. Define monthly reporting formats and outcome metrics. Conduct emergency drills and readiness walkthroughs.
- **June 2026:** If feasible, initiate a soft launch with phased guest intake. Finalize staffing adjustments.
- **July 1, 2026:** Official program launches with 60 overnight beds and full day services.

Year One Goals

The first year will be guided by goals aligned with the City's Core Outcome Metrics and The Salvation Army's LIFNAV and Pathway of Hope frameworks. These goals emphasize housing stability, behavioral health access, workforce development, and family reunification. Together, they form a comprehensive roadmap for the Access Center's inaugural year, ensuring that every action contributes to sustainable change and community well-being.

Goal	Deadline	Core Metric Alignment
House 100 individuals (housing type is based on individual's self-determined goals)	June 30, 2027	Number of Individuals Housed
Connect 150 guests to behavioral health or substance use services	May 31, 2027	Number Connected to Supportive Services
Enroll 75 guests in workforce development or education programs	April 30, 2027	Number Beginning Training or Education Programs
Achieve a 60% exit rate to permanent housing	June 30, 2027	Exit Rate to Permanent Housing
Maintain an average length of stay under 90 days for 50% of guests	March 31, 2027	Average Length of Stay
Engage 100 unsheltered individuals through outreach	February 28, 2027	Number of Unsheltered Individuals Contacted
Achieve 75% guest engagement in case management	January 31, 2027	Rate of Guest Engagement in Services
Facilitate 50 family reunifications	June 15, 2027	Number Reconnected to Family
Achieve 85% guest satisfaction rate through quarterly surveys	June 30, 2027	Guest Satisfaction Rate
Implement and track 100 individualized guest goals using LIFNAV coaching	May 31, 2027	Improvement in Guest-Identified Goals

6. Shelter Operations Capability

The Salvation Army of Lodi is equipped to develop, implement, and manage the Access Center as a full-service emergency shelter, drawing on over 30 years of local experience and a robust infrastructure that meets city, state, and federal standards.

Our operational capacity is built on a foundation of successful shelter programs, including Hope Harbor and regional low-barrier shelters in Modesto and Stockton. These programs have consistently demonstrated high rates of housing placement, employment, and service engagement. The Access Center will provide 60 beds with the ability to scale up to 208 beds, supported by a multidisciplinary team trained in trauma-informed care, de-escalation, cultural competency, and emergency response.

Staffing will include a shelter director, case managers, a housing navigator, janitorial and laundry staff, outreach coordinators, and administrative support. All personnel will undergo onboarding and continuing education in accordance with National Social Services Standards (NSS), including CPR certification, confidentiality protocols, and ADA compliance.

The facility itself will be a turnkey site provided by the City of Lodi, featuring a commercial kitchen, laundry, dining area, sleeping quarters, administrative offices, and space for visiting service providers. Operational systems will include structured intake, daily routines, and individualized case management. Guests will be screened within 48 hours of entry, and orientation will be mandatory for all new arrivals.

Our internal systems are designed for transparency and accountability. We utilize HMIS and WellSky for data collection, reporting, and compliance with San Joaquin Continuum of Care (SJCoC) requirements. Monthly reports will be submitted to the City, tracking metrics such as bed occupancy, service utilization, and housing outcomes.

The Salvation Army's policies and procedures manual governs all aspects of shelter operations, including guest rights, staff responsibilities, emergency preparedness, and grievance resolution. We maintain HIPAA-compliant guest records and enforce strict confidentiality standards.

Our infrastructure also supports coordinated entry and wraparound services. We maintain active partnerships with San Joaquin County Behavioral Health, local hospitals, law enforcement, and faith-based organizations to ensure seamless integration of medical respite, mental health services, and substance use treatment.

In alignment with federal strategies such as “All In,” our approach emphasizes low-barrier access, rapid rehousing, and trauma-informed care. We are committed to continuous improvement through internal audits, performance reviews, and stakeholder engagement.

This comprehensive framework ensures that The Salvation Army of Lodi is fully prepared to operate the Access Center with excellence, compassion, and accountability.

7. Admission and Program Participation Procedures

Admission to the Access Center will follow a low-barrier approach that prioritizes accessibility and dignity.

Guest Rules and Guidelines

The Access Center will operate on a guest's rights and responsibilities model. Attached is a sample Rights and Responsibilities document that will be adapted to the Access Center.

Identification Requirements

Guests will be required to provide ID and social security card or any form of ID within 7 business days.

As we seek to help the unsheltered overcome obstacles, we can be flexible in accepting other forms of ID for shelter entry. Case Mangers will assist guests in obtaining ID and other required documents that remove housing barriers.

Screening and Assessment Protocols

All guests must complete an intake packet outlining opportunities and expectations. Within the first 48 hours, each guest will meet with a case manager for a thorough needs evaluation and to discuss available support. Guests will be screened using NSOPW.com to verify they are not a registered sex offender.

Bed Reservation and Allocation System

Registered guests will retain their assigned bed and storage. New guests are assigned beds based on availability and priority, considering needs or referrals from agencies.

New Guest Orientation Process

All guests must attend an orientation on arrival, with documentation required. The orientation includes a facility tour, and covers basic information, behavior expectations inside and outside the shelter, and safety guidelines.

Policy for Day-Use Guests and Services

Non-residents can use the shelter's services, like showers, lunch, and clothing, weekdays from 9 a.m. to 4 p.m. First-time guests must submit full HMIS info; future visits require only a quick check-in.

Returning Guest Procedures

Guests who are already recorded in the HMIS database may use a simplified check-in process and retain their assigned bunk and storage unit, provided there has been no interruption in their stay.

Exit and Re-admission Criteria for Disqualification

Guests may check out on their own or be discharged for not meeting responsibilities. Annual stays are limited and return intervals depend on departure reason. Standard stays are 90 days, extendable to 180 days if guests engage in case management and progress toward goals, subject to space. Those ineligible for readmission are referred elsewhere; discharged guests face a minimum 30-day blackout, which may increase for serious violations.

After completing 180 days without extension, guests must wait another 180 days before returning. Guests who leave without notice and are absent over three days must wait two weeks before readmittance; this is subject to case manager recommendations and shelter director approval. Needs, bed availability, and prior conduct are considered.

Daytime access to resources is possible even when overnight stays are not. Before a 180-day stay ends, guest efforts are reviewed for possible extensions. Additional support beyond 180 days may be granted for those actively improving their situation. All guests are reassessed at timeline endpoints for possible extension or transition help.

The program aims to support guests working towards stability and independence. Absences over three days mean continued accommodation cannot be guaranteed; returning guests are placed as

space allows, using first-come, first-served rules. If no space is available, staff will attempt to refer the individual to other available facilities.

RIGHTS AND RESPONSIBILITIES

You have the right to be respected

You have the right to be treated with respect and without discrimination on the basis of national origin, religion, race, color or sexual orientation by everyone who lives and works here.

You have the responsibility to treat everyone who lives and works here with respect and without discrimination on the basis of national origin, religion, race, color or sexual orientation.

You have the right to be heard

1. We encourage residents to deal with conflicts directly with the people involved whenever possible. If you need help to resolve a conflict, staff is available to assist you to facilitate a meeting. If a conflict with a staff member arises that you feel has not been resolved, you can speak with the Program Manager, or the Director(s) of Seattle Social Services. The grievance policy is included in the intake process and it is available from the shelter staff.
2. Your case manager is available each day between 9 AM and 3 PM. Case managers can help with problem solving, information, referral and support.

You have the right to self-determination

1. We are here to support you in making your own decisions. You have the responsibility to set your own goals while you are here.
2. It is your responsibility to accept case management, which helps you
 - Make safety plans for yourself
 - Clarify your goals while in the shelter and working your plan to reach them
 - Use information about resources, programs and your rights
 - To pursue your priorities
 - Achieve housing stability

You have the right of safety, privacy and to establish schedules that allow each woman adequate rest, peaceful time and the time to complete tasks.

It is your responsibility to respect the comfort and peace of other residents and attend the weekly house meeting.

Every resident has the right to live without the threat of violence

You are responsible to monitor your own behavior.

1. Physical and verbal violence are not acceptable at the shelter program
2. No weapons are allowed in the building
3. Any illegal activity (including alcohol and drug use) is not allowed on the property

Violation of the above will result in immediate discharge from the shelter.

Every resident has the right to a healthy, sober and drug free environment

You are responsible for maintaining your mental health, recovery and/or sobriety. This shelter maintains a smoke free environment, abiding by Washington State Law 70.160.11

It is your responsibility to not bring alcohol or drugs into the shelter. Alcohol and drugs are not permitted in the shelter.

Every resident has the right to a clean and physically safe environment

You are responsible to keeping your area clean and safe for yourself and others.

You have the right to store your property here in your two boxes and/or locker.

You are responsible for your own property. DO NOT loan, give or sell any property to another guest or staff person. The Salvation Army accepts no responsibility for loaned and lost items.

You are responsible for your own medications. Medications should be kept locked up at all times.

You have the right to reside in a program that works for you

If the Shelter Program does not work for you, your Case Manager can help you find alternative housing that will better suit your needs.

Signed: _____ Date: _____

Witness: _____ Date: _____

8. Connection to Services and Housing

The Access Center is designed as a hub for coordinated services, connecting guests with housing, healthcare, employment, and social support. Onsite partnerships with organizations such as San Joaquin County Behavioral Health, San Joaquin Health, and other agencies will provide access to medical, mental health, and substance use services. Case managers will collaborate with guests to develop individualized service plans that may include housing navigation, benefits enrollment, and employment readiness. The Salvation Army's relationships with local landlords and housing providers are intended to facilitate rehousing and permanent supportive housing placements. The program will utilize the LifNAV (Life Navigation Coaching) model to assist guests in developing life skills and working toward long-term stability. Collaboration with the local Continuum of Care and participation in the coordinated entry system aims to align services with regional priorities and match guests to suitable housing interventions. The Access Center's integrated service model is structured to reduce fragmentation, increase engagement, and promote housing outcomes.

An element of the Access Center will be the provision for outside agencies to use onsite office space to connect unsheltered individuals with resources at a single location offering comprehensive services. Following the model established by The Salvation Army of Modesto, the center will offer space for external agencies (such as Veterans Affairs and Mental Health) to meet with guests during regular weekday office hours, as well as after hours when necessary. This approach has led to an increase in appointment attendance by addressing issues related to travel and storage of personal items. The ability to hold follow-up appointments supports completion of paperwork and access to services.

Guests will have access to Salvation Army social services where applicable, and case managers will guide them to relevant agencies and services for housing, employment, social assistance, addiction rehabilitation, mental health, and other needs.

Service agencies and support groups will be able to schedule meetings in the resource center after operating hours, enabling meetings during evenings and weekends. The resource center can accommodate homeless court sessions, recovery and accountability meetings (including

Alcoholics Anonymous, Narcotics Anonymous, Celebrate Recovery), life skills classes (covering healthy living, exercise, anger management, parenting), Bible studies, and additional opportunities. These activities provide ongoing practical support and foster connections between unsheltered individuals and community members who can assist with their transition to greater self-sufficiency and stability.

9. Housing-Focused Goals

The Access Center is designed to address homelessness in Lodi by offering immediate shelter and facilitating efficient transitions to permanent housing. The program seeks to minimize the length of stay through individualized case planning, housing navigation, and referrals to transitional and permanent housing options. Guests are assessed using standardized tools and matched with suitable housing resources via the coordinated entry system. The Salvation Army applies housing-first principles and collaborates with local housing providers to enable prompt placements. Employment support services, including job readiness training and workforce development referrals, are intended to help guests increase self-sufficiency. Housing outcomes are tracked using HMIS, and monthly reports are submitted to the City of Lodi. Continuous quality improvement processes are implemented to identify challenges and improve strategies. The Access Center's approach is based on evidence-informed practices and aligns with federal, state, and local objectives to reduce the incidence, duration, and recurrence of homelessness. Using The Salvation Army's Pathway of Hope methodology, guests receive individualized case management that aids guests in identifying barriers to permanent housing. Through case management, guests will develop action plans to overcome barriers, and they will be connected resources that will aid them in reaching their self-determined goals.

The Salvation Army will also facilitate access to workforce development programs, job training, and employment opportunities to support income generation for housing. The Salvation Army of Lodi maintains partnerships with employers who collaborate with case managers to identify suitable candidates for available positions.

With the opening of the Access Center, The Salvation Army intends to modify some existing Hope Harbor shelter beds to create additional entry options for guests transitioning from the Access Center. This would include access to a transitional living stage at Hope Harbor or Hope Avenue Apartments; both located near the Access Center. Our transitional living program supports guests by allowing them to move from low-barrier shelter to an environment offering increased support, with extended time for those awaiting openings in limited local housing options. Additionally, guests in transitional living may obtain a positive reference from The

Salvation Army for future housing opportunities, demonstrating their suitability as tenants for stable housing or apartments. We will also refer guests to the Main Street Apartments, Salas Park Senior Housing Complex (when completed), and other suitable housing options.

10. HMIS Participation

The Salvation Army of Lodi is a committed and experienced participant in the Homeless Management Information System (HMIS), actively contributing to the San Joaquin County Continuum of Care (SJCoC) data infrastructure. As the designated operator of the Access Center, we will ensure full compliance with all HMIS data entry and reporting requirements.

All guest-level data—including demographics, service utilization, housing outcomes, and referrals—will be entered into HMIS in real time or within 24 hours of intake. Our team will also utilize WellSky, The Salvation Army’s approved database system for the Western United States, to enhance data analysis and integration with other service systems. These systems will be used in tandem to ensure accuracy, redundancy, and continuity of care.

To maintain high data quality, all staff will receive comprehensive training in HMIS protocols, confidentiality standards, and system navigation. Training will include HIPAA compliance, Release of Information procedures, and guest privacy protections. Staff will also be trained to recognize and respond to the special needs of individuals experiencing homelessness, mental health challenges, substance use disorders, and domestic violence.

Our data collection plan includes tracking:

- Number of individuals transitioned to housing or other programs
- Types of resources accessed (e.g., mental health, substance use treatment, counseling)
- Meals and hygiene services provided
- Overnight and day service utilization (duplicated and unduplicated counts)
- Outreach contacts and transportation to service appointments

Monthly reports will be submitted to the City of Lodi, including statistical summaries of bed nights, meals served, services accessed, and guest progress. These reports will be generated using HMIS and WellSky, supplemented by physical documentation such as sign-in logs and count sheets to ensure backup in case of system outages

Guest records will be securely stored in password-protected systems and locked physical files, accessible only to authorized personnel. All data sharing will be governed by signed Release of Information forms, and no information will be disclosed without guest consent unless required by law.

To ensure continuous improvement, we will conduct regular internal audits, performance reviews, and data validation checks. Our Shelter Director will coordinate with City and County staff through monthly meetings to align reporting practices and resolve any discrepancies.

Participation in HMIS is a cornerstone of our commitment to transparency, accountability, and evidence-based service delivery. By leveraging robust data systems and adhering to rigorous standards, The Salvation Army of Lodi will ensure that the Access Center operates with integrity and responsiveness to both guest needs and community expectations.

11. Coordinated Entry Participation

The Salvation Army of Lodi is a committed and experienced participant in the Coordinated Entry System (CES) operated by the San Joaquin Continuum of Care (SJCoC). At the Access Center, CES protocols will be fully integrated into intake, assessment, and referral processes to ensure that guests are matched to appropriate housing and services based on standardized criteria.

Upon entry, all guests will undergo a comprehensive intake process that includes a vulnerability index assessment. This tool helps prioritize individuals for housing and supportive services based on their level of need. Case managers will conduct evaluations within the first 48 hours of shelter entry, identifying barriers to housing, employment, and health, and developing individualized service plans.

All guest-level data will be entered into the Homeless Management Information System (HMIS), which allows for real-time data sharing with CES lead agencies and partner organizations. This ensures continuity of care and avoids duplication of services. The Access Center will serve as a centralized assessment site, offering wraparound services, community support, and volunteer coordination—all under one roof.

The Salvation Army maintains active partnerships with hospitals, law enforcement, mental health providers, rehabilitation centers, and other shelters. These relationships support coordinated referrals and case conferencing, enabling guests to transition seamlessly between programs. Our team regularly participates in outreach events and collaborates with Caltrans and other agencies during encampment clean-ups to engage unsheltered individuals and connect them to CES and shelter services.

The Access Center will also host visiting service providers—including Veterans Affairs, behavioral health, and housing agencies—who will meet with guests onsite. This eliminates transportation barriers and increases appointment attendance and service engagement.

To ensure compliance with CES standards, all staff will be trained in intake protocols, confidentiality, and referral procedures. Monthly reports will be submitted to the City of Lodi,

and data will be shared with CES partners in accordance with signed Release of Information agreements.

By aligning with CES, the Access Center supports equitable access to housing and services, prioritizes the most vulnerable, and contributes to the broader goal of reducing homelessness across San Joaquin County. This coordinated approach ensures that every guest receives the most effective interventions based on their unique needs and circumstances.

12. Accessibility and Inclusion

The Salvation Army of Lodi is deeply committed to its mission *to preach the gospel of Jesus Christ and meet human needs in His name without discrimination*. This commitment is reflected in the design and operations of the Access Center, which will be inclusive and accessible to all individuals experiencing homelessness, regardless of age, gender, race, ethnicity, language, disability, or background.

The Access Center will comply fully with the Americans with Disabilities Act (ADA), ensuring that restrooms, showers, sleeping areas, and common spaces are physically accessible. The facility will be equipped to accommodate individuals with mobility impairments, and staff will be trained to assist guests with physical limitations in navigating the shelter safely.

Staff training will include instruction on addressing the needs of individuals with physical, mental, and developmental disabilities, as well as those with cultural, racial, linguistic, and sexual differences. Training modules will cover trauma-informed care, cultural competency, de-escalation techniques, and emergency response protocols. These trainings are aligned with the National Social Services Standards (NSS) and The Salvation Army's internal policies.

To support individuals with limited English proficiency, the Access Center will offer translation services and multilingual materials. Intake forms, program guidelines, and signage will be available in multiple languages, and staff will be trained to recognize and respond to diverse communication needs.

The Salvation Army's Adaptive Ministry model, implemented across the Western Territory, informs our approach to serving individuals with disabilities. This model emphasizes dignity, choice, and empowerment, ensuring that services are developmentally, culturally, and linguistically appropriate. When non-disability-related needs cannot be reasonably accommodated, staff will provide referrals to more suitable programs or agencies.

The Access Center will also include space for visiting service providers, such as mental health professionals, medical clinics, and support groups. These partnerships will allow guests with special needs to receive care onsite, reducing transportation barriers and increasing service engagement.

Guests with service animals will be accommodated in accordance with ADA and fair housing laws. Staff will be trained on appropriate interaction with service animals, and policies will be in place to ensure that animals are under control and do not pose a threat to others. *See response 20 for additional detail.*

By integrating accessibility into every aspect of facility design, staffing, and service delivery, The Salvation Army ensures that the Access Center is a welcoming and supportive environment for all individuals, including those with disabilities and special needs. This inclusive approach supports our broader goal of reducing barriers to shelter and promoting long-term stability for the most vulnerable members of our community.

13. Outreach to Unsheltered Individuals

The Salvation Army of Lodi will proactively engage Lodi’s unsheltered population and encourage voluntary relocation to the Access Center through a compassionate, coordinated, and data-informed outreach strategy. Our approach is rooted in the LIFNAV (Life Navigation Coaching) framework, which emphasizes engagement, empowerment, and equipping individuals to pursue their own path to housing and stability.

A full-time Outreach Coordinator will be employed to regularly seek out unsheltered individuals and offer immediate access to shelter, transportation to the Access Center, and connections to services. This role is not only about encouraging individuals to come to the Access Center, but also about bringing services directly to those who may not otherwise engage. Outreach will include distribution of hygiene kits, food, and printed materials detailing available resources.

Outreach efforts will be coordinated with the City of Lodi, San Joaquin County agencies, SJ Cares, Caltrans, law enforcement, the Lodi Community Liaison Officer, and other community partners. During encampment clean-ups, encampment and “hot spot” visits, or emergency situations, our team will participate and offer shelter and services, ensuring that individuals are not displaced without support.

The Access Center will serve as a central hub for outreach coordination. All outreach contacts will be tracked using the Homeless Management Information System (HMIS), allowing us to monitor engagement, service utilization, and outcomes. This data-driven approach ensures accountability and supports continuous improvement.

Transportation is a key component of our outreach strategy. Authorized staff and insured Salvation Army volunteers will provide transportation to and from the shelter in Salvation Army vehicles. A public contact number will be available for pick-up requests during daytime hours, and emergency transportation will be available during overnight hours if initiated by law enforcement or hospitals.

The Salvation Army will also pursue the development of a Street Level Outreach team modeled after successful programs in Stockton and King County, Washington. This team, composed of trained staff and volunteers, will be equipped in trauma-informed engagement, motivational interviewing, and crisis intervention. The team will operate with compassion and cultural sensitivity, meeting individuals where they are and offering a pathway to stability.

LIFNAV will be fully integrated into the outreach process. Life Navigation Coaches will engage individuals during outreach, helping them identify personal goals and develop a self-determined plan toward housing. LIFNAV Connect, a mobile technology platform, will eventually be used to access real-time shelter availability, service directories, and guest history, enhancing the effectiveness of street-level engagement.

This proactive outreach model ensures that individuals who may not seek shelter on their own are reached and offered support. By combining LIFNAV's person-centered coaching with coordinated outreach, The Salvation Army contributes meaningfully to Lodi's goal of reducing unsheltered homelessness and building restorative community connections.

New Dignity Health grant allows Salvation Army street level team to expand to California

When it comes to solving homelessness, trust can lead to truly life-changing outcomes. That's been the case with [the Street Level homeless outreach initiative in Seattle](#). And it's been so effective since launching in 2019 that The Salvation Army just secured more than \$1 million in new grant funding from Dignity Health to expand the program to four California communities: Central Valley, San Joaquin County, San Bernardino and Central Coast (including San Luis Obispo, Santa Barbara, and Ventura counties).



“One of the reasons we believe the Seattle model is so effective is because the first touch engagement is with someone who has had access to the system themselves,” said Sabrina Kiser, Western Territorial Social Services Director. “It’s about the relationship first. It’s about offering a cup of coffee or water, and just saying hello.”

Kiser also said building and maintaining trust is all about consistency and “keeping your word,” which is why the Street Level team will station a specially-wrapped vehicle in a specific area in each of the four communities to begin outreach and case management in order to help people find housing and other services.

The Salvation Army’s Street Level mobile outreach program is a housing first, person-centered, strengths-based approach to help people experiencing homelessness connect with service providers and increase their housing stability. This strategy focuses on meeting people where they are in a non-threatening way in order to help them find resources appropriate for their situation. The primary goal of this program is to improve people’s housing situation, but important milestones related to engagement with case management and improvement on the Self-Sufficiency Matrix will also be tracked each quarter to measure progress.

In the program’s first year, the Seattle team was able to permanently house 142 people after setting an initial goal of housing 20, and they’ve likewise exceeded their goal for 2020. Still, more work is to be done, and the Western Territory has committed to doubling its impact on homelessness by 2024 through its [The Way Out initiative](#).

“In order to do this, we really need partners to come alongside us so we can work together to find solutions,” Kiser said.

The Dignity Health partnership will provide critical support to help mitigate the increasing rates of homelessness in some of California’s most vulnerable rural and suburban areas. For example, while The Salvation Army Ventura County social services already deploys an existing successful street outreach program that helps connect chronically homeless people to local services and shelter, the Street Level mobile van would enable the program to grow.

Recognizing the links between healthcare and homelessness, Dignity Health is committed to collaborating with community partners to coordinate critical services for people with the greatest needs by working with local hospitals and community healthcare networks—particularly during the ongoing coronavirus pandemic.

“We have been working together on efforts to address rural homelessness along with developing a collective response to COVID-19,” said Ashley Brand, Dignity Health System Director of Community and Homeless Health. “The Salvation Army partnership seems boundless given our shared mission, vision, values and focus on serving those who are vulnerable.”

Most recently, Dignity Health granted The Salvation Army \$50,000 for COVID-19 relief efforts in Los Angeles in March, which supported direct services to those impacted by the social and economic effects of the pandemic. The Street Level grant provides funding for a year of staffing the mobile Street Level team and the vehicles. One staff member will focus on direct case management, while the other will focus on cultivating relationships with community leaders that can be used for referrals to employment or childcare services, or to facilitate access to housing. Clients will also receive referrals to community resources and services that target their need for essentials like food, water, clothing and hygiene items.

The partnership grew out of a multidivisional effort, said Maria Todaro, Western Territorial Director of Corporate Engagement. “This came about through many discussions and through fundraising working hand-in-hand with social services at Territorial Headquarters, and coordinating with leadership and social services teams—then all of the divisions collaborated on a shared narrative,” she said. “This provided the framework for the grant proposal, and is a great illustration of how if we work together across divisions, we can make a big impact.”

And that collaborative spirit hasn’t gone unnoticed: it’s what those at all levels of the organization hope will prove that the initiative has legs—or wheels—to go the distance in solving homelessness.

“I have been praying for the Street Level project for some time, and to see it take hold like this is truly an answer to prayer,” said Commissioner Kenneth G. Hodder, National Commander of The Salvation Army. “I am confident that, once people see how effective it is, the mobile outreach program will become a key element in the Army’s battle against homelessness.”

Street Level outreach van becomes go-to resource in California's Central Valley

As soon as The Salvation Army Stockton Corps found out it [had been selected to lead a Street Level mobile homeless outreach program](#), the team got right to work. Before even receiving the van from Dignity Health for the program, the corps was becoming an essential resource to those experiencing homelessness in San Joaquin County, California.



“We started to build relationships with community partners who were doing homeless [outreach] to see what they were doing and figure out how we were going to incorporate the vehicle,” said Lieutenant Juan Oregel, Salvation Army Stockton Corps Officer. “I grew up here in Stockton. Returning back home was really heartbreaking. I know...it’s heartbreaking everywhere, but I think when you see areas [where] as a child you would ride bikes...and people are living [there], it was really heartbreaking. It [made me] want to investigate and get to really know and understand more of what the city was going through.”

Rather than duplicate any existing efforts or services, Oregel and the Street Level outreach team made connections with county and city officials and community agencies. From conversations with them, they identified the gaps existing in homeless outreach for San Joaquin County that they could tackle.



“We spent that time joining other outreach efforts in the county and getting to know all the different agencies working towards [combating] homelessness, and seeing what they’re doing and trying to identify where there might be gaps and how we can fill those gaps and link [people to] those resources,” said Melinda Ramirez, Street Level Outreach Program Director for The Salvation Army in Stockton.

So as soon as they received their Street Level van in February, they hit the road and started conducting regular outreach efforts at encampments, safe parking lots and shelters all over San Joaquin County—including Stockton, Tracy and Manteca—to meet these needs and provide on-to-go case management to get people off the streets.

“Success is not just getting people housed,” Ramirez said. “It’s a slow progression for a lot of people and it’s doing the steps necessary to get to the point that they’re housing ready. We have to build trust

with people.”

In just two months since the program launched, they’ve housed 13 people (including six households), gotten identification cards for 25 people, and connected 12 individuals to federal benefits like Medi-Cal and food stamps. They’ve also distributed essential items like meals, hygiene supplies and clothing.

“Our goal is to reach people who aren’t being reached already, bridge that gap, and connect them with resources that they wouldn’t otherwise have access to with the goal of housing,” Ramirez said. “Any sort of improvement is a success. Once you show someone their situation can improve, it gives them hope. Any little success is just a huge score and builds their spirits and confidence.”

Some weeks, they join other larger groups of agencies in their outreach efforts. Other weeks, they go out on their own to find new encampments and areas to serve. And being a mobile service is especially important as cities in the county like Manteca and Tracy are at least a 30 to 90-minute commute to Stockton—which serves as a hub for most essential resources for the homeless population.

“Stockton is the seat of the county and it’s where all the services are,” Ramirez said. “When you’re homeless and don’t have a vehicle or gas, [you] can’t or don’t take advantage of the resources in the county. It’s important for us to go out to those outlying cities in the county and reach out to them. The resources don’t get to them any other way.”

The van has become a beacon of hope for individuals facing homelessness in the county.

“Now that we have the new van with the big Salvation Army logo on it, they see us a block away and they’re already coming out waiting for us,” said Sean Mefford, Salvation Army Stockton Street Level Community Outreach Specialist. “They’re willing to talk to us. People know that we’re there to try to help them.”

But the work doesn’t stop here. The Street Level mobile outreach team also serves the community in other ways—distributing food boxes and other essential items to [migrant field workers](#) in the community and meals for Salvation Army Stockton Silvercrest residents. They’re also present at community events, passing out meals and establishing more connections for partnerships and resources for their day-to-day outreach operations.



“[It’s about] having the community see that there is a purpose behind this van,” Oregel said. “We’re just trying to use this outreach in so many different ways. It has opened up so many doors that we didn’t even imagine.”

Establishing that presence is paying off because the Street Level Outreach Team is now receiving calls with referrals for assistance in the county and other agencies are asking to join them on their regular outreach days to offer additional services.

“Everyone’s excited. When we can’t make it with the larger group that goes, we get a phone call and a text asking, ‘Are you guys coming with us, where’s the van?’” Ramirez said. “They miss us when we’re not there for sure.”

Oregel wants the community to feel like the van doesn't just belong to The Salvation Army, but to the community as a whole.

"It's a Salvation Army vehicle, but I continuously tell them, 'This is yours, too...What can you use this vehicle for? Call us up. Let us know,'" Oregel said.

Ramirez is proud of what they've been able to accomplish so far and optimistic about the future. As affordable housing is a struggle in the county, she hopes to connect with landlords in the community to make it easier to secure housing for people transitioning out of homelessness. She also wants to expand their reach—even across county lines.

But in the meantime, she is happy to see the impact they are having in the county.

"I love the faith people have in what we're doing," Ramirez said. "We've shown them that we can get things done and that we are essential to all the community."

Do Good:

- See how [The Salvation Army fights homelessness](#).
- Are you best suited to join the Fight for Good in disaster relief? Mental health? Social justice? [Take our What's Your Cause quiz](#) and discover where you can make the biggest impact today.
- It's because of people like you that The Salvation Army can serve more than 31 million Americans in need each year. (*That's almost one person every second, every day.*) Your gift helps The Salvation Army fight for good all year in your community. It's an effort to build well-being for all of us, so together we rise. And that good starts with you. [Give to spread hope](#) with a donation of funds, goods or time today.

14. Community Engagement and Good Neighbor Plan

The Salvation Army of Lodi recognizes the importance of maintaining positive relationships with the surrounding community. The Access Center's Good Neighbor Plan, modeled on our current Hope Harbor Good Neighbor Plan, will include daily clean-up efforts in designated zones, proactive communication with nearby residents and businesses, and coordination with city ambassadors and law enforcement.

Our current posted good neighbor policy for Hope Harbor states *“Please know that all the business on this block work together to ensure we have a safe, clean, and well-maintained street.... it is everyone's responsibility to ensure trash, litter, debris, cigarette butts, etc. are cleaned up quickly. It also means that camping on sidewalks or in cars, defecating or urinating in public, loitering and littering is strictly prohibited. We greatly appreciate the extra efforts you have made to support our neighborhood. For those who continue to abuse the policy however, any further violations can and will result in the loss of services at The Salvation Army. This means if you are found to be in violation of the policy, you may not be allowed access for showering, clothing exchanges, meals, restroom, overnight stays and other supportive services. If you have any questions, please contact The Salvation Army Director, John Narvaez at (209-367-9560).”*

Since 2005, The Salvation Army has worked with our neighboring businesses to limit the negative impact of the unsheltered in the neighborhood surrounding Hope Harbor. We currently have staff members monitor and clean the area immediately around Hope Harbor Shelter.

As operators of the Access Center, we will have a staff position to coordinate all clean up reaching areas noted in this RFP. This position will have access to a Salvation Army vehicle, providing transportation as needed on clean up days. We will provide a flyer and phone number to local businesses and neighbors that can be used to reach out to shelter leadership and clean up teams to report areas of concern.

Weather permitting, we will clean the primary area around the Access Center no less than 5 days a week. We will clean other areas as needs arise, and weather permitting, and within resources of available guests, volunteers, and staff, cleaning in the full RFP defined area 4 days a week.

We will connect with local businesses and neighbors to provide our contact information to report concerns, post instructions for the Access Center guests, and work in partnership with the ambassadors, city departments, and law enforcement to address the unsheltered who are unwilling to follow our good neighbor policy regarding loitering or other behavior not on shelter grounds.

The Salvation Army's goal will be to respond to neighborhood communication within 12 hours and begin mitigation within 24 hours of reported concerns.

The Salvation Army plans to continue the Access Center Advisory Board and will use the attached Good Neighbor Plan template from the Homeless Resource Coalition to develop a plan that is mutually acceptable to The Salvation Army, the Access Center neighborhood residents and businesses, and the City of Lodi.



Good Neighbor Agreement Template

Background: This Good Neighbor Agreement Template (referred to in this document as agreement) was developed by [Homeless Leadership Coalition](#) and community stakeholders to provide a strategy to address neighbor concerns that often arise when new resources to support those experiencing homelessness are developed or expanded within a community.

Parties to the agreement: Parties to this agreement include business and residential neighbors living around the *[named shelter/facility]* and as represented by their neighborhood association, business association and other key stakeholders.

- *NAME Neighborhood Association*
- *NAME Service Providers*
- *NAME area businesses or business associations or chambers of commerce*
- *NAME Other stakeholders such as schools, churches, Parks and Recreation etc*

Boundaries of this agreement:

[Describe area w/ geographic border, and/or attach map]

Legal Status of Agreement: Parties to this agreement are committed to maintaining safety and livability of the area; it is to this end they enter into this agreement. All participants understand this agreement is not a legally binding contract, nor is it intended to be. Further, all parties acknowledge that they have been advised and given time to review and present this document to independent counsel.

Purpose, Assumptions, & Goals: The purpose of this agreement is to identify ways for community stakeholders to work together to address potential impacts of *[named shelter/facility]* as well as be good neighbors in support of clients/residents/guests of the shelter/ facility and to formalize the goodwill and positive working relationships between stakeholders for the benefits of all neighbors. Discussion of this agreement can be a tool to clarify the best ways to address neighborhood concerns.

Inherent in this agreement is the assumption that all parties have certain basic rights; these include:

- All neighbors have the right to feel safe and welcome.
- All neighbors have the right to safe and quiet enjoyment of their properties and public spaces.
- All neighbors have the right to access available community resources, services and public facilities to meet their needs.

Goals:

- Initiate and maintain open communications and understanding among all parties
- Encourage all parties to be proactive and ready to respond to concerns that may arise
- Develop procedures or protocols for resolving concerns and problems
- Enhance neighborhood safety while promoting access to services
- Reduce crime and fear of crime and nuisance complaints within the neighborhood

All parties agree to:

- Participate in this agreement
- Participate in collaborative problem solving around issues that arise within the boundaries of this agreement
- Develop, maintain and enhance good working relationships between the above named parties
- Use and promote direct, respectful, and civil communications while promoting responsiveness to community concerns by
 - Resolving problems quickly and as directly as possible
 - Encouraging first line communications occur one-one via in person, phone or video communication or email.
 - Providing participants in this agreement with updated contact information if there are key leadership changes (Addendum contains contact list)
 - Reserve email for productive purposes such as information, planning, logistics, reminders or confirming prior conversations
 - Encourage neighbors or other community members to contact **(agency)** directly regarding questions or concerns as they relate to the shelter property or the local Neighborhood Association
- Enhance neighborhood safety and livability and promote access to services by
 - Fostering positive relationships between the shelter/facility and neighbors
 - Encouraging a sense of safety, welcome and investment in the neighborhood among all community members
 - Reporting crime and suspicious activity in the neighborhood to law enforcement

Service Provider Agreements *(would include named shelter/facility/group of providers)*:

- Offer ongoing services that support clients/residents in achieving long-term personal goal that contribute to their self-sufficiency
- Train staff to address client needs with a trauma informed approach, motivational interviewing, de-escalation skills, conflict resolution skills
- Encourage clients/residents to be good neighbors by abiding by the facility/shelter code of conduct or trespassing through neighboring properties or rights of way
- Livability
 - Encourage clients/residents to reduce litter and provide opportunities for litter patrol
 - Assign staff or residents to pick up litter in the perimeter on a regular schedule
 - Provide regular trash disposal

- Ensure that client/resident belongings are not left on sidewalks
- Designate smoking and outdoor space provided on facility/shelter property
- Designate parking and outdoor space provided on facility/shelter property
- Encourage residents to have a sense of ownership in the neighborhood and pride in their residence
- Hold clients/residents responsible for their actions. *A code of conduct may be attached as an addendum to this agreement.*
- Prioritize outreach to individuals experiencing homelessness who are referred to the designated point of contact for the shelter/facility by signatories to this agreement

Neighborhood Association Agreements:

- Neighborhood Association board serves as a point of contact for residents of the neighborhood when they have questions and concerns that arise from the shelter/facility.
- Elevate neighbor concerns to the appropriate party in a timely manner
- Educate neighborhood on the existence of this agreement and the best ways to positively resolve concerns
- Invite and welcome service providers and shelter residents to attend neighborhood association meetings and offer opportunities for regular updates on the successes of the facility
- Engaging in ongoing problem solving with parties to this agreement to maintain clear lines of communication and an orientation to problem solving

Business/ Business Association Agreements:

- Maintain lines of open communication with parties to this agreement
- Communicate concerns of unneighborly behavior when they may relate to known clients/shelter guests
- Direct in an efficient and timely way questions/comments received by staff and customers to the shelter provider
- Immediately report to the shelter provider/facility any issues which arise relating to the physical or structural aspects of shared or adjacent spaces

Law Enforcement Agreements:

- Maintain lines of communication open with parties to this agreement
 - Note: Emergency situations should always be reported by calling 911 and Non-emergency situations can be addressed by calling the non-emergency phone number *(list for county)*
- Enforce laws according to policies and resources
- Provide education about the role of law enforcement as it relates to the homeless crisis

Communication Protocol:

1. Communicate directly and with respect and civility to the individual, shelter, business, or applicable association or service provider whenever possible

2. Meet approximately 90 days after shelter/facility opening to review agreements and problem solve issues that may have arisen
3. Create an opportunity for service providers and residents to speak at upcoming neighborhood association meeting
4. Livability issues should be addressed by associated parties to this agreement as soon as possible once notified via email, phone or in person communications
5. When issues or concerns related to this agreement are not resolved, participants agree to seek mediation services with the support of the **neighborhood association** prior to pursuing other remedies.

Signatories

Suggested Attachments

1. Contact Lists
2. Code of Conduct
3. Map
4. Glossary of terms

Glossary of Terms

Neighbor: residents, business owners, agencies and property owners, clients, residents and facility staff

Service Provider: an agency usually a nonprofit or government service that is provided for the health, well-being or self-sufficiency of an individual or group of individuals.

15. Security Policies and Procedures

The security of the guests, neighbors, and businesses surrounding the Access Center will be of high importance.

Secured Entry/Exit Points

The site plan features an entrance for staff, guests, and visitors, staffed during daytime hours. The Access Center includes security screening with bag checks, metal detectors, and a bed bug oven for item sanitation.

On-site Security Personnel

A staff member will always serve as a security monitor inside the building, responsible for searching personal items, overseeing the premises, and using the City's security system as needed. Ambassadors or police will be contacted when safety or legal issues arise.

Loitering Deterrence

Loitering will be managed using the Good Neighbor Policy, allowing service denial for noncompliance. We will coordinate with ambassadors and law enforcement as necessary.

Conflict De-escalation

Staff are trained to de-escalate conflicts and apply policies to all guests, whether on or off site. Positive and respectful interactions are required. A manual outlines expectations for staff and volunteers, who must follow standards of conduct along with guests. Complaints, grievances, and appeals can be reported through a formal process.

Guest Property Storage

Guests are expected to use city-provided lockers near each bed, secured with a combination padlock that can be reset by staff. This system ensures access for staff if a guest forgets their code or leaves unexpectedly, without breaking personal locks.

Lockable lockers will be available to every guest, and storage totes for extra items can be checked out at set times daily, stored in a staff-monitored room. Items left behind after departure will be held for 30 days before being donated, recycled, or discarded.

Guests must keep sleeping areas tidy, and unsecured storage (like boxes or carts) is not allowed. The rolling tote system from the temporary Access Center will continue, with case management addressing any issues related to belongings.

Possession of drugs and weapons including confiscation, disposal, or storage procedures

The center requires all guests to be searched at check-in and during their stay. Illegal drugs, weapons, and alcohol are banned. Drugs or weapons found are documented and stored safely until disposed of or sent to police. Legal items that could be weapons, like knives or scissors, are returned when guests leave. Refusal to surrender drugs or weapons results in removal from the property, with law enforcement involved if necessary.

Coordination with Law Enforcement

Documented procedures will outline how to handle concerns such as accidents, injuries, self-harm, fighting, bomb threats, theft, vandalism, and mental health issues. These procedures will include relevant emergency and non-emergency contact numbers for both on-site and off-site incidents. The Salvation Army will also provide law enforcement with 24/7 workspace, internet access, and refreshments.

Overflow management

With an RFP flex capacity of 206, The Salvation Army and the City will decide when to activate additional beds. The Salvation Army's budget includes on-call staff to ensure safety. In emergencies, Hope Harbor Shelter may open for overnight stays, as it does during cold weather.

16. Health and Safety Policies

The Salvation Army maintains robust health and safety protocols that will be implemented at the Access Center to ensure the well-being of all guests, staff, and visitors. These policies are grounded in best practices and reflect our commitment to dignity, safety, and compliance with local, state, and federal standards.

Medication Handling

The Access Center will not be licensed to provide medical services directly. Therefore, prescription and over the counter (OTC) medications will be securely stored while guests are in the Access Center. Medications will be accessible at scheduled times with staff maintaining detailed medication logs to track dosages and ensure accountability. Guests may self-administer OTC medications under observation, and all medications—prescribed or OTC—must be stored at the medical desk.

Infection Control Protocols

To prevent the spread of disease and viruses, the Access Center will follow all governmental health regulations and Salvation Army Territorial instructions. Guests exhibiting symptoms or illness may be quarantined in designated respite beds. A tuberculosis test will be required within seven days of admittance, and case managers will assist guests in scheduling and transportation for testing. We anticipate that, similar to our Stockton model, medical providers will conduct periodic on-site health screenings once the facility is operational.

HIPAA Compliance and Confidentiality

The Salvation Army strictly adheres to HIPAA standards across all locations. Personal health information is only shared with authorized organizations upon signed consent from the guest. Staff are trained in confidentiality protocols, and all guest records are securely stored and managed using HMIS and WellSky systems, supplemented by physical documentation for backup and continuity.

Staff Training and Emergency Preparedness

All staff will be trained in CPR, First Aid, trauma-informed care, de-escalation techniques, and emergency response procedures. Evacuation plans will be posted throughout the facility and reviewed regularly. Staff will also be trained in security screening, including bag checks and controlled access protocols.

Integration with On-Site Medical Services

The Access Center will collaborate closely with San Joaquin County Health Services to provide on-site medical care, behavioral health support, and crisis intervention. This partnership ensures that guests have access to comprehensive wraparound services, including a medical clinic, sobering center, and behavioral health respite care. Coordination with these providers will be essential for managing outbreaks, facilitating health screenings, and supporting long-term recovery.

Through these integrated policies and partnerships, The Salvation Army of Lodi ensures that the Access Center remains a safe, healthy, and supportive environment for all individuals served.

17. Facility Maintenance Plan

The Access Center’s facility maintenance plan ensures that the shelter remains clean, safe, and operational always. Daily janitorial services will be provided by trained staff, with responsibilities including cleaning restrooms, showers, common areas, and sleeping quarters. Monthly deep cleaning will be scheduled to address high-traffic zones and ensure sanitation standards.

Guests will be expected to participate in maintaining their personal spaces and common areas as part of community engagement.

Maintenance logs will be kept tracking repairs, inspections, and service requests. The facility’s infrastructure—including HVAC, plumbing, and electrical systems—will be monitored by designated staff and serviced by licensed contractors as needed.

Landscaping and exterior upkeep will be performed weekly to maintain curb appeal and neighborhood standards.

The Salvation Army’s facilities team will conduct quarterly facility audits and submit maintenance reports to the City of Lodi.

This proactive approach ensures that the Access Center remains a dignified and functional space for service delivery.

18. Transportation Plan

Guest Transportation to/from the Access Center Facility

Transportation of guests to and from the low barrier shelter may be provided by a staff member or authorized volunteer in a Salvation Army owned vehicle. If a guest becomes employed and/or regular transportation becomes an issue, we will try to get the guest a bike, a bus pass, or some other means of transportation.

Transportation of a new guest with the possessions to the Access Center

Transportation of guests intending to stay at the Access Center (including limited possessions) will be provided by authorized staff based on vehicles availability. Any excess possessions will be picked up and disposed of the next business day by staff or a volunteer. A contact number will be available to the public to call for pick up during the day.

Response to Emergency Transport Needs Initiated by Police or City Staff

Overnight staff will include a staff member who is authorized to operate a Salvation Army vehicle for the emergency pick up of individuals if initiated by the Police Department or City staff. A contact number for the police department will be provided.

Receiving Donations and Deliveries

The Salvation Army has established policies and a proven track record for the receipt of donations and deliveries. The same process we use at Hope Harbor and the Corps Community Center will be implemented.

19. Nondiscrimination and Equity Policies

Fulfilling our mission *to preach the gospel of Jesus Christ and to meet human needs in His name without discrimination*, The Salvation Army of Lodi is committed to operating the Access Center and Low Barrier Shelter in full compliance with federal, state, and local civil rights laws, including the Americans with Disabilities Act (ADA), the Fair Housing Act, and Equal Employment Opportunity regulations. In accordance with these laws and our organizational values, we do not discriminate in the provision of services or employment based on race, color, ancestry, national origin, religion, sex, sexual orientation, gender identity, age, marital or family status, veteran status, disability, source of income, or any other protected status.

All guests are treated with dignity and respect, and staff are trained in trauma-informed care, cultural competency, implicit bias, and inclusive service delivery. The shelter's intake forms, signage, and program materials are designed to be accessible and inclusive for individuals of diverse backgrounds and abilities.

To ensure a safe and respectful environment, The Salvation Army enforces policies that prohibit harassment, retaliation, and discrimination.

We will continue our collaborative work with Valley Mountain Regional Center, the Veteran's Administration, and other entities regarding individuals that may have special needs and considerations. We will make reasonable accommodations when appropriate.

In alignment with our *Protecting the Mission* vulnerable population safety standards, the low-barrier shelter will not house minors. Families with children will be accommodated at Hope Harbor. If the situation arises where a member of the family is unable to meet Hope Harbor's entry requirements as a result of substance abuse, staff will work to find a solution that provides safe shelter for the family.

For the safety of all guests and staff, The Salvation Army screens all incoming guests against both the national sex offender registry and our internal registry of individuals with prior concerns at Salvation Army facilities. While some Salvation Army shelters may admit registered offenders

in low-barrier settings, the Lodi Access Center will operate under a policy that denies shelter services to registered sex offenders.

Alternative referrals will be provided to individuals who are ineligible for services due to program limitations, including those identified through sex offender screening. These policies are embedded in our intake procedures, operational agreements with the City of Lodi, and our commitment to maintaining a safe, equitable, and welcoming environment for all.

NON-DISCRIMINATION IN PROGRAMS AND DELIVERY OF SERVICES

1. Statement on Non-Discrimination in Programs and Services
In providing its programs and services, The Salvation Army is committed to accommodating all those in need in accordance with our capacity to help without unlawful discrimination or harassment based on age, race, color, religion, sex, national origin, marital status, disability, citizenship, sexual orientation, gender identity, gender expression, or any other characteristic.

2. Capacity to Serve
This means that no one will be excluded from services on any basis not related to legitimate program concerns. Programs and services are provided on a non-discriminatory basis according to the needs of those to be served and the capacity, both financial and programmatic, of the specific services provided to address those needs. This commitment to appropriate service provision demands clearly developed criteria for program participation, as well as essential program rules and behavioral expectations.

3. Immigration Status
The Salvation Army will provide services without regard to the immigration status of service recipients unless otherwise required by applicable law or a funding contract. Therefore, unless required to do so by applicable law or a funding contract, The Salvation Army will not ask persons receiving services about their immigration status and will not require that persons receiving services provide social security numbers as a condition to receiving services.

4. The Salvation Army is a Religious Organization
Worship services conducted by The Salvation Army are open to all persons. Spiritual support and encouragement is made available through Salvation Army personnel to all who seek such services.

The Salvation Army seeks to promote intergroup understanding and to give full support to the imperatives of human and civil rights, sharing that spiritual affinity which makes all persons part of one human family.

From its inception, The Salvation Army has been concerned with the spiritual and social needs of all people. Its services in all parts of the world have been developed in recognition of the Biblical principle that all persons are equal in intrinsic value and that all persons bear the divine image. (Gen. 1:27)

20. Pet and Service Animal Accommodation

The Access Center will accommodate pets and service animals in a manner that balances guest access with safety and operational feasibility. Up to 20% of shelter beds will be designated for guests with crated pets, following the successful model implemented at our Modesto facility.

All animals must be vaccinated and spayed or neutered prior to admittance. However, recognizing the current delays in accessing low-cost veterinary services, we will accept animals with scheduled appointments for these procedures. Case managers will assist guests in coordinating veterinary care and, when possible, we will arrange for animal service providers to visit the shelter on-site. We have very good working relationships with Lodi Animal Control, Animal Friends Connection, and some local veterinarians to assist in this regard.

Service and support animals must adhere to behavioral guidelines. Animals must be always leashed or crated and under the immediate control of their owner or a designated proxy. Owners are fully responsible for the care, clean up, and supervision of their animals.

If an animal exhibits disruptive or aggressive behavior, shelter management may require its removal from common areas or, in repeated cases, from the shelter entirely. All decisions regarding animal removal will be made by Shelter Management.

Guests with severe allergies may request reasonable accommodations, such as separation from animals. However, fear of animals or minor allergies will not be considered grounds for exclusion of pets or service animals.

All animal owners will be required to sign a shelter animal agreement outlining rules and responsibilities prior to admittance. Staff will receive training on service animal policies, including appropriate interaction protocols.

In alignment with our low-barrier philosophy, our goal is to reduce obstacles to shelter access. Guests actively working to meet animal care requirements will not be denied entry, provided their case manager is informed and involved in the process.

SERVICE ANIMAL POLICY – GUIDELINES FOR STAFF AND SHELTER GUESTS

Salvation Army Modesto County Shelter Program

REASONABLE ACCOMMODATION PROCESS

When a shelter guest with a disability makes an accommodation request, housing management will consider the request promptly, and grant it when reasonable. When someone inquires about living with a service or support animal, follow our reasonable accommodations policy must be followed. Each client (up to the total animal capacity of the building (45) is allowed one (1) service or support animal unless two separate disabilities can be documented. Then a second animal may be approved.

DETERMINE WHETHER YOU NEED VERIFICATION

- If the person's disability is obvious or otherwise known to you, and if the need for the service animal is also apparent, do not request any additional information about the disability or the need for the accommodation. For example, a blind person with a guide dog does not need to verify his disability or need for the dog.
- If the disability is known, but the accommodation need is not apparent, request only information necessary to evaluate the disability-related need for the accommodation. For example, if you know a resident has depression and s/he wants to have an assistance dog, staff may ask the shelter guest "what is the reason or service that the service or support animal provides". Do NOT request animal certification.
- If neither the disability nor the need is clear, ask only what special service the animal is trained for. Document that need in the client file.

WHO SHOULD PROVIDE VERIFICATION

When verification of disability status or disability-related need is appropriate, you can require that the individual provide written verification from a doctor or other medical professional, or other qualified third party who, in their professional capacity, has knowledge about the person's disability and the need for reasonable accommodation. Written verification should be provided by someone with sufficient knowledge and training to verify that the applicant or resident meets the fair housing definition as a person with a disability, and that there is a disability-related need for a service or support animal. Remember, you cannot require someone to provide details about his or her disability and you cannot require a certificate for a service or support animal accordingly to CA law.

When someone requests to live with a service or support animal, management will provide a prompt written response (see sample letters).

RULES FOR SERVICE AND SUPPORT ANIMALS

there are no limitations on the size, weight, and type of service animals

both service animals and support animals can be required to meet the same reasonable behavior rules

The shelter can require service dogs or cats to be licensed, if required in your municipality and if you require licensing of pets (currently Stanislaus County is not requiring licensing of animals at the shelter (11/15/19) However, documented proof (from a licensed Veterinarian or Animals Hospital) of all vaccines for animals as well as proof of being spayed or neutered is also mandatory before entry into the shelter building.

All service and support animals must adhere to behavioral guidelines or risk being removed from the shelter property.

Disruptive Behavior, barking, growling or fighting with other animals is prohibited.

Any forms of violence, biting other animals, shelter staff or guests is expressly prohibited and will result in immediate removal of the animal

All Service and Support Animals must be leashed, in a carrier or caged at ALL times on the Property. ALL animals must in in immediate control of the animal's owner at all times.

ANIMAL CARE AND SUPERVISION

The resident (or resident's proxy per written agreement) has the responsibility to care for and supervise the service animal. The resident (or the residents proxy per written agreement) should retain full control of the animal at all times. This generally means that while the animal is in common areas, it should be on leash, in a carrier, or otherwise in the direct control of its owner. When around other people or animals, the service animal should be well behaved (no jumping, snarling, nipping, excessive barking). The resident is responsible for the safe removal of animal waste products.

REMOVAL OF A SERVICE ANIMAL

If a service animal is unruly or disruptive (aggressively jumping, nipping, etc.), the manager may ask the resident (or resident's proxy per written agreement) remove the animal from a common area. If the animal's inappropriate behavior happens repeatedly, the manager may request that the resident (or resident's proxy per written agreement) not bring the animal into common areas until steps have been taken to mitigate the behavior (such as refresher training) or ask that the animal be removed from the residential premises.

WHAT ABOUT OTHERS WHO ARE AFRAID OF OR ALLERGIC TO ANIMALS?

A 'fear of' or minor allergy to dogs or other animals is not a disability, so management does not need to "accommodate" in those situations. In rare cases, a person's allergy may be so severe that animal contact may cause respiratory distress. In those situations, the allergic person may also request an accommodation, such as keeping the animal and the allergic person separate, as much as is possible. Staff will attempt to separate shelter guests with allergies from pet areas.

SENSITIVITY AND AWARENESS

Management will ensure that staff is properly trained about service animal policies, including the following rules:

- Allow a service animal to accompany the resident at all times and everywhere in the community except where animals are prohibited for safety reasons (such as in a pool or sauna).
- Do not separate or attempt to separate a resident from the service animal.
- Do not pet or talk to a service animal when it is working – this distracts the animal from its tasks.
- Do not feed a service animal, which may have specific dietary requirements. Unusual food or food at an unexpected time may cause the animal to become ill.
- Do not deliberately startle a service animal or make noises at the animal (barking, whistling, etc.).
- Be aware that many people with disabilities do not care to share personal details.
- If other residents complain that they are not allowed pets and want to know why an exception was made, state that your community complies with the fair housing laws. You can also refer your residents to the community's accommodation policy.



Assistance Animal Agreement

Violation of this agreement will result in notice and corrective action, up to and including termination of your residence and/or participation in this program as permitted by law. Complaints of rule violations must be made in writing and signed by the person complaining. Management and residents alike may file such complaints. You will be notified if a complaint regarding your Assistance Animal is being investigated.

PRIOR UNDERSTANDING

You acknowledge that no other oral or written agreement or understanding exists regarding this Assistance Animal Agreement.

THIS IS A BINDING AND LEGAL DOCUMENT. READ CAREFULLY BEFORE SIGNING.

By signing this statement bellow, I am acknowledging that I have read, understand and will abide by all of the terms of conditions stated in this Assistance Animal Agreement.

I have witnessed the above signatures.

_____	_____	_____
Print Name (Participant)	Signature	Date
_____	_____	_____
Print Name (Program Director)	Signature	Date

21. Grievance and Complaint Procedures

The Salvation Army is committed to maintaining a safe, respectful, and accountable environment for all guests, staff, and volunteers. To support this commitment, the Access Center will have clear procedures for submitting grievances and whistleblower reports. For reference, the Hope Harbor Grievance Policy is attached.

Guest Grievance Procedure

Guests may submit complaints verbally or in writing to any staff member. Staff will assist individuals who need help documenting their concerns. Complaints should include relevant details such as the nature of the issue, individuals involved, dates, times, and any supporting evidence or witnesses. Anonymous complaints are accepted, though contact information is encouraged to facilitate follow-up.

- All complaints are reviewed by a case manager and shelter director within 72 hours.
- Interviews are conducted confidentially.
- Written resolutions are provided within 10 days.
- If unresolved, guests may appeal within 5 business days to the Corps Officer, who will conduct a final review.

The grievance process is explained during intake and outlined in orientation materials. Staff are trained to handle grievances with empathy and professionalism, and retaliation against individuals who file complaints is strictly prohibited.

Whistleblower Policy

The Salvation Army encourages guests, staff, and volunteers to report concerns related to unethical conduct, policy violations, illegal activity, or any behavior that may compromise safety or integrity.

- Reports may be made directly to the case manager, Shelter Director, or Corps Officer.
- An anonymous reporting mechanism is available.

- Contact information for reporting concerns is clearly posted and includes access to The Salvation Army Divisional Headquarters and the City of Lodi.

Whistleblower identities are protected to the maximum extent allowed by law. Retaliation against whistleblowers is strictly prohibited and may result in disciplinary action, including termination or legal consequences. All reports are promptly and thoroughly investigated by designated leadership.

**The Salvation Army
Hope Harbor Shelter - Lodi
POLICIES AND PROCEDURES MANUAL**

07.05 PROGRAM: GRIEVANCE POLICY

Policy: The Salvation Army Hope Harbor Shelter shall ensure that every client is treated with respect and fairness.

Procedures:

At intake, the client is made aware and signs the Grievance Procedure Form and is made aware of the Incident Report process. Should there be a conflict between a client and staff regarding case planning or any other conflict where a client disagrees and would like to report, the following steps provide a process for resolution of such issues:

- A.** The resident should discuss the issue or problem with the staff person on duty. In all cases the first step in resolving any grievance or conflict is to attempt to resolve the issue directly with the staff member. Every effort should be made to resolve the issue as soon as possible.
- B.** Should this fail, the grievance should be documented, on the Incident Report, by the resident and submitted to the Shelter Director. The Shelter Director will meet with both parties within 48 hours and is expected to resolve the issue and document the resolution on the appropriate form.
- C.** If the issue is still unresolved, the Incident Report and any other documents will be presented to the Shelter Director.
- D.** If the issue is still unresolved, the Incident Report and any other documents will be presented to the Corps Officers for a final decision.
- G.** If the issue is still unresolved, the client may file a written complaint with the Corps Officers in charge.

See Attached Form



GRIEVANCE PROCEDURE

In order to provide the best possible service to you, the Salvation Army has adopted a Grievance procedure in case you wish to file any complaints concerning services provided to you. All complaints must be submitted in writing, signed and no later than thirty (30) days from the date of the incident. All complaints must include the following information:

1. Full name, telephone number and mailing address of the person filing the complaint
2. Full name of the person or group against whom the complaint is being filed
3. A clear and concise statement explaining the alleged violation including facts, date and time of the alleged violation.
4. The remedy being sought. This must be consistent with the complaint and the services provided by The Salvation Army.

Upon receipt of such complaint, The Salvation Army will process the matter and a hearing with the Director of Social Services will be established within thirty (30) days of the filing date of the complaint.

Any decision regarding a complaint may be appealed in writing to the Corps Commanding Officer.

The Salvation Army does not discriminate in the provision of services on the basis of race, ethnic origin, physical handicap, sex, age, marital status, sexual orientation or religious affiliation.

I have read or have had read to me and fully understand the information listed on this grievance procedure.

Signature: _____

Date: _____

The Salvation Army, Hope Harbor Shelter
525 W. Lockeford St.
Lodi, CA 95240
(209) 369-5896

Notice to Employees of Whistleblower Rights & Remedies (41 U.S.C. § 4712)

The Salvation Army is committed complying with applicable Whistleblower protection laws and regulations. Retaliation will not be tolerated against individuals who report compliance concerns in good faith. Please see The Salvation Army's Whistleblower Policy in your applicable handbook, as well as Complaint Procedure and THQ Reporting Hotline Sections. This Notice of Whistleblower Rights and Remedies provides employees with a summary of rights and remedies as set forth in 41 U.S.C. § 4712.

Protected Disclosures

Employees are protected against discharge, demotion, and discrimination as a reprisal for disclosing information that the employee reasonably believes is evidence of any of the following:

- A gross mismanagement of a federal contract or grant;
- A gross waste of federal funds;
- An abuse of authority relating to a federal contract or grant;
- A substantial and specific danger to public health or safety; or
- A violation of law, rule, or regulation related to a federal contract (including competition for or negotiation of a contract) or grant.

Employees are protected by § 4712 when they disclose these types of information to the following persons or entities:

- A member of Congress or a representative of a committee of Congress;
- An Inspector General;
- The Government Accountability Office;
- A federal employee responsible for contract or grant oversight or management at the relevant federal agency;
- An authorized official of the Department of Justice or other law enforcement agency;
- A court or grand jury; or
- A management official or other employee of The Salvation Army who has the responsibility to investigate, discover, or address misconduct.

Employees who initiate or provide evidence of misconduct in any judicial or administrative proceeding relating to waste, fraud, or abuse on a federal contract or grant are also protected.

Submitting Complaints to Funding Agencies

Whistleblowers may file complaints with federal agencies if they believe they were discriminated against for their disclosure of information. Complaints of this nature must be submitted within three years of the date of the alleged discrimination. Whistleblowers may submit complaints to the Inspector General of the federal agency that issued the contract or grant. The following federal agency websites provide procedures for submitting complaints (this is not an exhaustive list):

- Department of Agriculture : <http://www.usda.gov/oig/>
- Department of Education: <http://www2.ed.gov/about/offices/list/oig/hotline.html>
- Department of Health and Human Services: <http://www.hhs.gov/>
- Department of Housing and Urban Development: <https://www.hudoig.gov/>
- Department of Justice: <http://www.justice.gov/>
- Department of Treasury: <https://oig.treasury.gov/>

The Inspector General, after receiving such a complaint, will generally perform an investigation and submit a report to the federal agency, which then determines whether sufficient basis exists to conclude that discrimination occurred.

If the agency determines that discrimination has occurred, the pilot program sets out remedies that may be available, including ordering The Salvation Army to reverse an action, reinstate the employee with compensatory damages (including back pay) and benefits, and costs reasonably incurred by the whistleblower in bringing the complaint. The Salvation Army has the right to appeal.

There are many more specifics, and you are encouraged to read the full text of [41 U.S.C. § 4712](#), linked here, or which can be provided to you in hard copy upon request.

22. Incident Reporting and Documentation Policy

The Salvation Army has a comprehensive incident reporting and documentation system that will be implemented at the Access Center to ensure safety, accountability, and compliance with internal policies and external requirements. This system is designed to address a wide range of incidents, including guest and staff injuries, altercations, overdoses, critical behavioral health events, and risk management concerns.

All incidents must be reported immediately to supervisory staff. Staff will complete standardized incident report forms detailing the nature of the event, individuals involved, actions taken, and outcomes. These reports are reviewed by the Shelter Director and securely filed. Serious incidents—such as medical emergencies, violent altercations, or overdoses—will be escalated to the Corps Officer and, when necessary, to law enforcement or emergency services.

In addition to local documentation, The Salvation Army follows an established protocol for notifying Divisional Headquarters (DHQ) and reporting to Sedgwick Insurance Services, our insurance management company. For incidents involving staff injuries, vehicle accidents, or other risk management concerns, the Shelter Director will immediately notify DHQ and submit all relevant details to Sedgwick, including date, time, location, individuals involved, and any medical treatment provided. Sedgwick will manage any applicable workers' compensation claims and insurance processing.

Staff are trained in emergency response, trauma-informed care, CPR/First Aid, de-escalation techniques, and documentation protocols. These trainings are aligned with The Salvation Army's national standards and the City of Lodi's expectations for professional shelter management.

Incident data will be analyzed monthly to identify trends and inform staff training, policy updates, and risk mitigation strategies. This analysis is part of the Access Center's internal monitoring and quality assurance process, which includes regular audits and performance reviews.

The incident reporting system also includes procedures for handling possession of drugs and weapons. Upon entry, guests are subject to searches, and any illegal items will be logged and

safely stored until they can be disposed of through appropriate channels. Refusal to surrender prohibited items may result in removal from the shelter, with police involvement if necessary.

By integrating incident reporting with Sedgwick and DHQ notification protocols, The Salvation Army ensures timely response, protects guests and staff, and supports a safe and respectful shelter environment. This system reflects our commitment to transparency, accountability, and continuous improvement in service delivery.

23. Emergency Preparedness and Response Plan

The Salvation Army's emergency preparedness and response plan for the Access Center is designed to ensure the safety of guests, staff, and volunteers during crises. This plan includes protocols for medical emergencies, building evacuations, and staff training, reinforced by monthly safety communications from our Risk Management Department.

In the event of a medical emergency, trained staff will assess the situation and determine whether to call 911. Staff will remain with the individual until paramedics arrive and notify the front desk to direct emergency responders. All incidents are documented using standardized incident reports and submitted to the Shelter Director. If the incident involves a staff injury, workers' compensation procedures are followed, and Sedgwick Insurance Services is notified in accordance with Salvation Army policy.

The Access Center will also implement a naloxone (Narcan) protocol to respond to opioid overdoses. Staff will be trained in the administration of naloxone, and the medication will be stored in accessible locations throughout the facility. This protocol is part of our broader substance use response strategy and aligns with our commitment to harm reduction and life-saving interventions.

Fire evacuation procedures are clearly posted throughout the facility. When an alarm sounds, all staff, guests, and visitors must exit the building using the nearest safe exit. Designated staff are assigned to specific areas to ensure complete evacuation. The front desk staff is responsible for bringing rosters and sign-in logs to the evacuation site to account for all individuals. Fire drills are conducted monthly under the supervision of the Shelter Director, with documentation of the drill's timing, duration, and any issues encountered. An intervention plan is developed for any deficiencies identified during the drill.

The emergency plan also includes protocols for earthquakes, floods, power outages, water main breaks, bomb threats, and shelter-in-place scenarios. For example, during an earthquake, individuals are instructed to take cover under sturdy furniture or assume a "duck and cover" position away from windows. After the tremor, everyone evacuates to a designated assembly

area, and staff use sign-in sheets to verify attendance. In all scenarios, staff complete incident reports and notify the Shelter Director.

Staff training is a cornerstone of the emergency preparedness plan. All new employees receive orientation within seven days of hire, which includes training on emergency procedures, bloodborne pathogen management, and crisis intervention. Ongoing in-service training sessions are scheduled regularly and may include topics such as CPR/First Aid, conflict resolution, and stress management. At least one staff member per shift is certified in CPR and First Aid, and first aid kits are maintained in key locations throughout the facility and in all Salvation Army vehicles.

To support continuous improvement, the Risk Management Department distributes monthly safety bulletins to all Salvation Army facilities and personnel. These bulletins include updates on safety protocols, reminders about seasonal hazards, and guidance on incident prevention.

This robust and regularly reviewed emergency preparedness plan ensures that the Access Center can respond effectively to emergencies, safeguard lives, and maintain operational continuity.

24. Staff Training and Development

Staff at the Access Center will receive comprehensive training and ongoing professional development to ensure high-quality, trauma-informed service delivery. Training is designed to equip staff with the skills necessary to support individuals experiencing homelessness, including those with behavioral health conditions, disabilities, and substance use disorders. All training aligns with The Salvation Army's national standards and the City of Lodi's operational expectations.

Training is delivered through workshops, online modules, peer mentoring, and regional/national Salvation Army programs. Staff development plans are tailored to individual roles and responsibilities, with certification and renewal schedules clearly defined.

Core Training Areas and Frequency

- **Trauma-Informed Care**

Initial training required within 30 days of hire; refresher every 12 months

Staff learn to recognize trauma symptoms and respond with empathy and support, fostering a safe and respectful environment for all guests

- **De-escalation Techniques**

Initial training within 30 days of hire; refresher every 12 months

Staff are trained to manage conflict and behavioral disruptions using nonviolent communication and crisis intervention strategies.

- **Cultural Competency**

Initial training within 60 days of hire; refresher every 24 months

Training includes instruction on serving individuals of diverse racial, ethnic, linguistic, and sexual backgrounds, ensuring services are developmentally and culturally appropriate.

- **CPR and First Aid Certification**

Certification required within 90 days of hire; renewal every 2 years

At least one staff member per shift must be certified. Training is provided through approved external providers and coordinated by the Shelter Director.

- **Confidentiality and HIPAA Compliance**

Initial training within 30 days of hire; refresher annually

Staff are trained to safeguard guest records and comply with HMIS and HIPAA standards. Data sharing is governed by signed Release of Information agreements.

- **HMIS and Coordinated Entry Procedures**

Initial training within 60 days of hire; refresher annually or as system updates occur

Staff are trained to enter and manage guest data accurately and to coordinate referrals through the San Joaquin County Continuum of Care.

- **Naloxone (Narcan) Administration**

Initial training within 30 days of hire; refresher annually

Staff will be trained to administer naloxone in response to opioid overdoses. Naloxone will be stored in accessible locations throughout the facility.

Additional Training Opportunities

Staff will have access to regional and national Salvation Army training programs. These may include advanced modules in behavioral health, disability services, and emergency response, tailored to specific roles such as case managers, outreach coordinators, and shelter monitors.

This investment in staff capacity ensures that the Access Center operates with professionalism, compassion, and effectiveness.

25. Internal Monitoring and Quality Assurance

The Salvation Army employs a rigorous internal monitoring and quality assurance system, aligned with the National Social Services (NSS) Evaluation and Self-Evaluation Standards. These standards provide a framework for assessing program effectiveness, compliance, and continuous improvement across all Salvation Army social service programs.

Internal monitoring will include monthly audits of guest records, service delivery, data accuracy, and policy adherence. Supervisors will conduct regular staff evaluations and observe service interactions to ensure fidelity to trauma-informed care and shelter protocols. Guest feedback will be collected through surveys and focus groups, and findings will be reviewed by the Shelter Director and shared with leadership for action planning.

The Access Center will also participate in formal evaluations conducted by Divisional Headquarters (DHQ) every two years and by Territorial Headquarters (THQ) every three years, as outlined in the NSS standards. These evaluations assess compliance with Salvation Army policies, program outcomes, and alignment with mission and service goals. Self-evaluations are conducted annually by local leadership to prepare for these reviews and to identify areas for improvement.

To support quality assurance, the Access Center will use HMIS and WellSky systems to track key performance indicators such as housing placements, service utilization, and guest satisfaction. Monthly reports will be submitted to the City of Lodi and shared with County partners to ensure transparency and collaborative problem-solving.

The following table outlines how NSS standards relate to quality assurance and internal monitoring:

NSS Standard Area	Access Center Implementation
Program Effectiveness	Monthly audits, outcome tracking via HMIS and WellSky
Compliance with Policies	Staff evaluations, incident reporting, and adherence to shelter protocols

NSS Standard Area	Access Center Implementation
Guest-Centered Services	Trauma-informed care, cultural competency, ADA compliance, and guest feedback mechanisms
Data Integrity and Confidentiality	HIPAA-compliant recordkeeping, signed Release of Information forms, secure data systems
Staff Development	Ongoing training in CPR, de-escalation, confidentiality, and coordinated entry procedures
Continuous Improvement	Annual self-evaluations, corrective action plans, and integration of feedback into operations
External Evaluation	DHQ reviews every 2 years; THQ reviews every 3 years

This system ensures that the Access Center meets regulatory and funder requirements, including those from the City of Lodi, San Joaquin County, and the Continuum of Care. Data collected through HMIS will be used not only for compliance but also to drive performance improvement, inform strategic planning, and enhance service delivery.

By aligning with NSS standards and maintaining a robust internal monitoring system, The Salvation Army will ensure the Access Center operates with professionalism, transparency, and accountability.



NATIONAL SOCIAL SERVICES STANDARDS

Manual

4th Edition | February 2024

Section 2: National Social Services Standards

I. Organization, Governance, & Administration

The program has an established purpose, a well-defined community that it serves, and a clear direction and realistic plan for how it will maximize its community impact. The program has an established governing authority that is resourceful, ensures program stability, and provides effective and ethical leadership.

1. Statement of Purpose and Mission

1.1.1 The program has a statement of purpose that is defined in writing.

2. Governance

The program administrator and Divisional Headquarters are mutually responsible for effectively communicating with one another on administrative matters.

1.2.1 The program and Divisional Headquarters (or Area Command) communicate on administrative matters regularly. (S)

1.2.2 The program complies with all formal directives of Divisional and Territorial Program Councils.

1.2.3 When there is a change in program leadership, the designated governing body promotes the continuity of the program, policy, and procedures. (S)

1.2.4 There is an active Coordinating Council when the program is part of a Command or Coordination area. (D) (BP)

3. Program Management Team

A local Program Management Team provides ongoing program oversight and support to the program administrator.

1.3.1 The program has an active management team. The management team could include persons such as the Corps officer, program administrator, member of the advisory organization, and key staff.

1.3.2 The program management team provides support and guidance to the program in some or all of the following:

- a. Strategic or action planning;
- b. Adequate resource development and utilization;
- c. Appropriate financial oversight;
- d. Operations management;
- e. Program evaluation;
- f. Community relations;
- g. Program modification and expansion;
- h. Personnel management;

- i. Contract compliance and administration;
- j. Health and safety of staff and program participants;
- k. Data quality and accuracy.

4. Advisory Organizations

The program is linked to an Advisory Organization that is representative of the community and regularly advises the program on policies, management, planning, finances, resource utilization, service delivery, community relations, and fundraising.

- 1.4.1 The program is officially linked to a designated advisory organization that actively provides advice/counsel to the program.
- 1.4.2 The ethnic makeup of the advisory organization is representative of the communities served by the program.
- 1.4.3 The program is directly linked to an existing program committee of the advisory council or board.

5. Program Administration

Administration of the program is the responsibility of an appointed program administrator who may be a Salvation Army officer or a staff member.

- 1.5.1 The program administrator minimizes their activities that interfere with their responsibilities for administering the program.
- 1.5.2 The program administrator engages in appropriate learning in their field(s) of service.
- 1.5.3 An organizational chart documents clear lines of accountability and authority at all levels of the program's organizational and administrative structure.

6. Policies and Procedures

- 1.6.1 The program has a manual that documents the essential operational policies and procedures for effective service delivery.
- 1.6.2 The staff is knowledgeable of and adheres to all program policies and procedures.
- 1.6.3 A process is in place to review policies and procedures annually, revise them as necessary, and date them accordingly.

7. Licensing and Compliance

- 1.7.1 Programs that require a license to operate (for example, child care, behavioral health, substance use treatment) have an active license that is renewed annually or per licensing requirements.

8. Strategic Planning

An active, realistic, and well-designed strategic plan that guides the direction of the program is something that all social services programs should strive for. At a minimum, the program is required to have an annual action plan.

- 1.8.1 If the Corps or Area Command has a strategic plan, the program has clear goals and objectives written into the plan. (BP)

9. Annual Action Plan

Action plans detail the actions and steps to be taken to implement a strategic plan. Even in the absence of a strategic plan, the program creates an action plan in order to identify and work toward essential goals and objectives for the following year.

- 1.9.1 The program has an annual action plan for the coming year, which includes written goals, objectives, and timelines.
- 1.9.2 The program's goals and objectives are reviewed annually.

II. Community

The term community can be used to refer to the geographic area in which a program exists, or to any of several subsets of persons living within (and sometimes outside of) the geographic area.

1. Target Population Identification and Awareness

- 2.1.1 The program serves a clearly defined target population.
- 2.1.2 The program administrator actively gathers, analyzes, and incorporates community and national data to understand its target population to inform the program's ongoing services.
- 2.1.3 The program is aware of any policy issues and legislation that affect the program.

2. Community Education

- 2.2.1 The program is proactive in informing the general public and target population of its purpose, function, and place in the community.
- 2.2.2 The program maintains a file or database of community resources that are reviewed and updated for accuracy annually.
- 2.2.3 The program leadership, in consultation with divisional personnel, presents testimony to local and state government officials to increase awareness of social conditions and forces that affect the lives of the members of the target population. (BP)

3. Community Planning

- 2.3.1 The program actively seeks and develops formal and informal collaborative relationships to improve the quality and quantity of services available to program participants and to address unmet concerns and gaps in the community service system.
- 2.3.2 Formal collaborative relationships are defined through a written service agreement, such as a memorandum of agreement or a memorandum of understanding (MOA/MOU).
- 2.3.3 Memorandum of agreement or understanding are approved through the appropriate territorial MOA/MOU review process, reviewed annually, and updated as needed.

III. Personnel

The program develops a competent workforce to provide services to the public that are of high quality.

1. Personnel Policies and Procedures

3.1.1 Personnel policies and procedures that are unique to a program are approved by Divisional Headquarters and documented as addenda.

2. Recruitment, Hiring and Orientation

3.2.1 The program has a written recruitment and selection process. (S)

Qualifications

3.2.2 Staff have the experience, qualifications, and competence required to perform their duties.

3.2.3 Professional staff meet the accepted standards of their professions, disciplines, licensing, or accrediting bodies.

3.2.4 The program supports staff members where appropriate in their efforts to obtain required licensing and/or certification.

Hiring

3.2.5 Job responsibilities, working hours, and the method of computing compensation for on-call staff are discussed and agreed to in writing at the beginning of the specific assignment. (S)

3.2.6 The program documents reference checks and the verification of credentials. (S)

3.2.7 The program has and provides written formal training to new staff members and documents such training.

Salaries and Benefits

3.2.8 Staff salaries are at least at the median level of comparable positions in the community in which the program operates. (D)

3.2.9 The program has a range of salaries in a graded salary structure. (S)

Representation

3.2.10 The staff is broadly reflective of the diversity of the target population.

3.2.11 The program operates in accordance with The Salvation Army's Policy Statement on Non-Discrimination in Employment.

3. Responsibilities and Coverage

Job Descriptions

3.3.1 There is a written job description for each position at all levels.

3.3.2 Job descriptions are written, current, and accurately reflect the responsibilities and expectations of the job.

- 3.3.3 Each staff member is given a copy of their job description, which is reviewed periodically and updated as necessary.

Coverage

- 3.3.4 The program has a designate who is capable of taking over in the absence of the program administrator.
- 3.3.5 There is sufficient staff to meet the programmatic, administrative, facility, and service needs of the program.
- 3.3.6 Staff positions are sufficient to provide services and protect the safety of the persons served and to deal with unplanned absences of staff members.

4. Staff Development

Supervision

- 3.4.1 The program administrator will provide regular supervisory or consultation time to every staff member under their supervision.
- 3.4.2 Supervisors are given additional training on supervision and management.

Staff Meetings

- 3.4.3 The program administrator conducts and documents regular staff meetings.

Staff Morale

- 3.4.4 The program administrator assesses staff morale and perceptions of leadership.
- 3.4.5 The program promotes the concept of teamwork with all staff members.
- 3.4.6 The program recognizes and celebrates excellent staff performance and achievement.

Personnel Review

- 3.4.6 Employee job performance is reviewed annually with each staff member.

Training and Development

- 3.4.7 The program provides opportunities for training and/or supplemental, continuing, or advanced education of its staff.
- 3.4.8 The program has a budget provision for the training and development of its staff.

5. Personnel Records

- 3.5.1 The program and division maintain a confidential personnel record for each staff member. The master record is maintained at the divisional level, with a copy maintained at the local level. (S)

6. Administration of Volunteers and Interns

- 3.6.1 All volunteers who have access to children and/or vulnerable adults have been cleared through the Territorial Registry and are screened in accordance with territorial child/vulnerable adult safety policies. (S)
- 3.6.2 Volunteers will not fill critical staff positions unless they are qualified and approved to do so.
- 3.6.3 Volunteers have the necessary qualifications and experience required to fulfill their assignments.
- 3.6.4 There is a written statement of duties that outlines the qualifications and responsibilities for each volunteer position, and the volunteer is provided with a copy.
- 3.6.5 Volunteers receive basic training and orientation before assuming the duties or responsibilities of their assigned position.
- 3.6.6 The program adheres to The Salvation Army's Policy Statement on Volunteer Services and Work Performed by Social Service Participants.
- 3.6.7 The program regularly recognizes volunteers for their contributions.
- 3.6.8 If the program utilizes interns, provisions will be made for interns to have regular supervision, consultation and/or review of cases.

7. Volunteer Records

- 3.7.1 The program maintains a written or electronic record for each volunteer in accordance with the territorial policy.

IV. Service

The program provides a range of services that meet a defined need of families, individuals, and/or children, have been approved by Divisional and/or Territorial Headquarters, and are in keeping with the integrated spiritual/social ministry of The Salvation Army.

1. Treatment/Care Philosophy

A program's philosophy of care statement is a brief summary of how program participants can expect to be treated when entering a program. This is different from a mission statement, which is a clear statement of The Salvation Army's mission; or a statement of purpose, which is a brief description of why the program exists and whom it serves.

- 4.1.1 The program's philosophy of care is in writing and reflects the following core values:
- a. To treat all people with dignity and respect;
 - b. To care through presence, relationship, participation, and prevention;
 - c. To seek to address the emotional, physical, and spiritual concerns of the whole person;
 - d. To provide a safe environment (physically and emotionally);
 - e. To faithfully believe that strength and capacity for change are inherent within each individual and within society and that people and communities can affect their own future;
 - f. To work in partnership with others towards a more caring and just society;
 - g. To continuously adapt to a changing environment, create new solutions and approaches that work, and discard those that do not;
 - h. To aspire to provide the highest quality service;
 - i. To achieve measurable and sustainable results.

2. Intake and Orientation

- 4.2.1 Program staff have access to a set of clear, written intake procedures and eligibility criteria in order to conduct consistent intakes.
- 4.2.2 All program participants are provided with verbal and written orientation information as appropriate.
- 4.2.3 Residential programs provide a handbook or written expectations to all program participants.
- 4.2.4 Orientation materials are available in appropriate translations.
- 4.2.5 Program applicants are referred to other community resources when appropriate.
- 4.2.6 Wait lists for services are reviewed regularly and updated as needed.

3. Assessment

Certain social services programs may necessitate the use of a more comprehensive intake and assessment process. Examples of programs or program components in which this standard would apply include, but are not limited to, substance abuse treatment, mental health, residential programs with longer case management components, Pathway of Hope and other longer-term case management programs.

- 4.3.1 A written intake assessment appropriate to the nature of the service(s) provided is completed within 72 hours for each individual or family served.
- 4.3.2 The program has a client-centered comprehensive intake and ongoing assessment process.

4. Crisis Intervention

- 4.4.1 The program has written crisis intervention procedures for areas, which could include:
 - a. Severe mental illness;
 - b. Substance use/abuse;
 - c. Suicidal ideation;
 - d. "Threats of harm to self or others";
 - e. Medical crisis;
 - f. Active shooter;
 - g. Community Violence;
 - h. Victims of human trafficking;
 - i. Victims of domestic violence;
 - j. Victims of sexual assault.
- 4.4.2 The program complies with the territorial procedures for reporting and addressing injuries, accidents, deaths, and other unusual incidents.
- 4.4.3 The staff members receive training to implement the written crisis intervention procedures.
- 4.4.4 There is a debriefing with staff and other applicable persons when a crisis incident has occurred.

5. Case Management

Case management includes service planning, case records, consultation, and workload.

- 4.5.1 The program develops service plans tailored to the needs of each program participant.
- 4.5.2 The development of the service plan involves the active participation of the program participant and, when appropriate, other professionals and/or family members.
- 4.5.3 The staff works in partnership with program participants to access community services for which they are eligible and to overcome obstacles to receiving assistance within the community service system.
- 4.5.4 The service plan is reviewed by staff and the program participant at regular and specific intervals. Progress reports and modifications in the plan are documented.

- 4.5.5 A thorough and accurate case record is kept for each program participant.
- 4.5.6 Case records are reviewed regularly by designated staff members to ensure that quality services are being provided.
- 4.5.7 Case consultation for appropriate staff members is provided.
- 4.5.8 The program offers regular case management to participants based on its program design.

6. Discharge/Termination

- 4.6.1 A discharge plan is written for each individual program participant receiving extended services or care.

7. Ethical Conduct

- 4.7.1 The staff knows and abides by The Salvation Army Social Service Code of Ethics statement.
- 4.7.2 All personnel model ethical and responsible behavior.
- 4.7.3 The program makes its services available without discrimination in keeping with The Salvation Army's Non-Discrimination in Programs and Delivery of Services Policy.

8. Program Participants' Rights and Responsibilities

- 4.8.1 Program participants are notified of their rights and responsibilities.

Complaints and Grievances

- 4.8.2 The program has a written grievance procedure for applicants and program participants to file complaints and appeals when decisions concerning them, or services provided to them are considered unsatisfactory.

Public Relations

- 4.8.3 The program does not require nor coerce program participants to take part in public performances or provide personal testimonies under any circumstances.
- 4.8.4 The program receives the written informed consent of the program participant before using any photographs, audio/visual tapings, or written statements for public relations or fundraising purposes.

9. Confidentiality/Release of Information

- 4.9.1 The program abides by the policies and procedures listed in The Salvation Army's Confidentiality and Protection of Personal Privacy - Guidelines.
- 4.9.2 Information is released by the staff members only when there is a perceived danger that withholding information would put the life and/or safety of the participant or others at risk.
- 4.9.3 The program has a formal release of information form.

- 4.9.4 The program provides a copy of the signed release of information to the program participant and keeps a copy of the release in the case record.
- 4.9.5 The staff do not talk about program participant information in public or open areas where program participants, visitors, or other staff members are present.
- 4.9.6 The staff do not share information about one program participant with another program participant.
- 4.9.7 The staff do not share inappropriate personal information with program participants.

10. Cultural Competence

Cultural competence denotes a set of attitudes and skills that enable the provision of service in a manner that is sensitive, respectful, and responsive to the differing backgrounds, customs, languages, values, expectations, etc. of those we serve. It means identifying ways of opening the door and becoming inclusive of people who might otherwise feel uncomfortable with us or even excluded because of their differences. It calls us to go beyond statements of non-discrimination to being proactive in bridging to others.

- 4.10.1 The program provides ongoing training to increase cultural sensitivity, awareness, knowledge, and cultural humility for its entire staff. Such training may focus on but is not limited to:
 - a. Understanding how culture forms the beliefs and attitudes of the program participants;
 - b. Increasing the staff members' understanding of their own implicit bias and cultural values and beliefs and the impact upon interactions with program participants;
 - c. The role cultural identity plays in motivating human behavior;
 - d. Specialized knowledge and understanding of the history, values, traditions, family systems, communication, religion and spirituality, immigration and refugee status, and artistic expressions of the major program participant groups served;
 - e. The application of cultural knowledge in participant assessments and interventions.
 - f. Staff are aware of and understand vocabulary associated with cultural knowledge that impacts program participants that is inclusive of, but not limited to, unconscious bias, BIPOC (Black, Indigenous, People of Color), intersectionality, and cultural humility.
- 4.10.2 The program provides services in the major languages used by the program participants or seeks the assistance of qualified interpreters when necessary. (BP)
- 4.10.3 The local program has conducted an assessment of its own cultural humility or cultural competency, and steps have been taken to address areas for growth. (BP)
- 4.10.4 The program has a written plan for ensuring an effective response to marginalized and/or underserved populations. (BP)

11. Outcome Evaluation

Outcome evaluations indicate how program participants have benefited/changed through their participation in the program and the services it provides. Changes to be measured may include the participants' knowledge base, skills, attitudes, behaviors, motivation, decisions, and conditions. This type of evaluation assesses the extent to which a program is successful in achieving its desired results.

4.11.1 The program has clear written outcomes.

4.11.2 The program has a process for reviewing its outcomes on a quarterly basis.

4.11.3 The results of outcome evaluations lead to changes in the program's design and delivery to improve the program's effectiveness. (BP)

12. Program Data Collection

4.12.1 The program has a systematic process for collecting and organizing its data on persons served.

4.12.2 The program administrator keeps abreast of the latest social service and best practice research for the program model and infuses best practice thinking into the program.

13. Program Participant Feedback

4.13.1 The program solicits feedback on its services and service delivery from its program participants on a regular basis.

4.13.2 The program solicits feedback on its services and service delivery from its community partners/agencies to enhance programming. (BP)

14. Technology

The use and implementation of technology to enhance a program's service delivery must ensure that participants' information is kept private and secure. Furthermore, services are to be based upon the needs of the population being served, and all parties have the required equipment and are trained in their use.

4.14.1 The program has a written policy for delivering services virtually. (D)

4.14.2 Personnel are trained to provide virtual services and have the necessary equipment and software.

4.14.3 The persons served virtually are given written instructions for setting up and using their communication equipment.

4.14.4 The program abides by the territorial policy for *Client Data Management System Privacy Policy*.

4.14.5 The staff is aware of the ethical principles that should be followed regarding social media and electronic communication and abide by the territorial policy for *Social Media and Digital Communications Policy*.

V. Pastoral Care

The provision of pastoral care in each Salvation Army service is central to our Christian mission. Pastoral care could be provided by a Corps officer, staff member, or an outside chaplain to program participants, volunteers, staff, and community residents as appropriate.

1. Pastoral Care Plan

5.1.1 The program has a written pastoral care plan outlining the overall vision for pastoral care and listing the key spiritual services available to program participants and the program staff.

2. Qualifications/Experience/Responsibilities

5.2.1 There is a person(s) designated as the pastoral care representative/chaplain.

5.2.2 The program provides information about spiritual services/activities during the program participant orientation process.

5.2.3 Pastoral care is offered without coercion.

3. Chaplaincy Specific to Residential Programs

5.3.1 The pastoral care representative has the opportunity and makes efforts to interact with program participants within appropriate boundaries.

5.3.2 The pastoral care representative has regular communication with the staff regarding the care of the residents.

4. Chaplaincy Related to Non-Residential Programs

5.4.1 The pastoral care representative has the opportunity and makes efforts to interact with program participants within appropriate boundaries.

5.4.2 The pastoral care representative is in communication with the staff regarding the care of non-residential program participants.

5. Chaplaincy Specific to Personnel

5.5.1 The pastoral care representative has regular contact with staff and volunteers.

6. Connections to Salvation Army Corps and Other Churches

5.6.1 The pastoral care representative is in contact with the Corps staff and seeks to create a cooperative relationship.

5.6.2 Corps advisory organizations and Corps members are aware of the services and activities provided by the program and are involved in some capacity.

5.6.3 A welcoming atmosphere is extended to program participants by the Corps officers and members.

5.6.4 Efforts are made to assist program participants in finding a church home or faith community that meets their spiritual needs.

7. Documentation

5.7.1 Pastoral care services are documented, and files are kept secure to ensure confidentiality.

VI. Finance & Contract Management

The program is financially sound, manages its affairs prudently, and makes its reports available to the public.

1. Program Budget

- 6.1.1 An annual program budget serves as a guide for effective management of financial resources for the fiscal year.
- 6.1.2 The program budget is formally approved by the Divisional Finance Board/Council prior to the beginning of the current fiscal year. (S)
- 6.1.3 The budget planning process includes the active participation of the Corps officer, program administrator, appropriate staff, and members of the Advisory Board or Council.
- 6.1.4 The program administrator participates in the oversight and management of the program budget.

2. Fiscal Control

- 6.2.1 If the program bills for services provided, it has written billing procedures, an established fee schedule, and a tracking system to ensure that the program is receiving the appropriate revenue for those services. (S)
- 6.2.2 The appropriate staff are adequately trained on the program's billing procedures.
- 6.2.3 The program has a written procedure for ensuring proper fiscal management and oversight.
- 6.2.4 The program has a plan in place to meet emergency and ongoing participant needs that does not require staff use of personal credit cards.

3. Contract Management

- 6.3.1 All contracts have been reviewed and approved by the Divisional and Territorial Finance Board/Councils and are executed by the Board of Trustees/Directors in keeping with established procedures.
- 6.3.2 The program maintains an individual record for each contract.
- 6.3.3 The program administrator is aware of all program expectations listed in the contractual agreements with the funding source or entity.

Contract Compliance

- 6.3.4 The program administrator establishes a written set of procedures for reviewing and maintaining compliance with all contractual obligations.
- 6.3.5 The program staff are aware of any changes in governmental regulations, guidelines, or reporting requirements for operating that particular program.

- 6.3.6 The program is up to date and timely with its completion and submission of all contractual reports and corrective action plans to the appropriate licensing/contracting agency, Divisional Headquarters, and Territorial Headquarters (when required).
- 6.3.7 The program maintains a file of all program reports submitted to each funding agency/contractor.
- 6.3.8 The staff notifies and includes Divisional Headquarters in any contractual reviews of the program.

4. Grant Writing and Fund Development

- 6.4.1 The program budget demonstrates the viability and future continuation of the program and its services.
- 6.4.2 In conjunction with divisional staff, the program has established procedures for the development of grant proposals.
- 6.4.3 The program administrator and appropriate staff members participate in the preparation and final review of grant proposals.
- 6.4.4 The program is proactive in cultivating and fostering relationships with funding entities in order to protect existing funds and identify potential new sources of program revenue.
- 6.4.5 The program is establishing or has an endowment or long-term operating reserve to help fund the program for the long term. (BP)

5. Program Participant Fees/Management of Funds

- 6.5.1 The program process for collecting participant fees is consistent and fiscally responsible.
- 6.5.2 The program demonstrates that it collects fees from the program participants.
- 6.5.3 When possible and where appropriate, the program makes every effort to serve those program participants who are unable to pay.
- 6.5.4 The program has a process in place to hold or monitor the saving of program participant funds if applicable.

VII. Facility & Equipment

The program unit is housed, equipped and maintained in a manner suited to and supportive of its program of services. It provides an attractive, safe, and comfortable setting for all program functions.

- 7.1 The program's facility is clearly identified as a Salvation Army facility unless it would pose a risk to the program participant's safety.
 - a) The program is clearly identified as a Salvation Army facility.

- 7.2 The program has an appropriate amount of access. This is evidenced by:
 - a) The facility residing in an accessible location.
 - b) Adequate parking for staff and program participants.
 - c) Access being controlled by the staff or by locked doors during stated hours.
 - d) The facility is ADA compliant or has made all possible alterations that are readily achievable and can be made without causing undue hardship.

- 7.3 The program provides a welcoming service environment and a pleasant atmosphere for all program participants. This is evidenced by:
 - a) Program furnishings that are adequate and in good condition.
 - b) A waiting room that is neat, cheerful, well-ventilated, well-lit and appropriately furnished.
 - c) Current Salvation Army literature available for program participants.
 - d) Drinking water available.
 - e) Restrooms that are clean, accessible, operational, and adequate in number.
 - f) A telephone is available for client use, and messages can be received.
 - g) A chapel or quiet room is available for spiritual gatherings and or personal prayer.
 - h) The program's physical environment reflects the cultural heritage of the program participants.
 - i) Wall art and program materials represent the cultural heritage of the target communities.

- 7.4. Program staff have adequate facilities to perform their jobs well. This is evidenced by:
 - a) Room(s) for private interviewing are available.
 - b) Offices and workspace allocated to staff are suited to the functions being performed and for the program's services.
 - c) Necessary and workable equipment for staff is available to complete their jobs.
 - d) Break areas and/or meeting areas for staff use.
 - e) Restrooms for staff use only.
 - f) Secure storage space for staff to keep personal belongings.
 - g) Private apartments are provided for live-in staff (where applicable).

- 7.5. All program equipment, furnishings, vehicles, and property are inventoried and secured.
 - a) Equipment, furnishings, vehicles, and property are inventoried and secured.

- 7.6. The program provides appropriate vehicles to serve the program participants (where applicable), and such vehicles are well maintained. This is evidenced by:
- a) Vehicle maintenance logs being kept.
 - b) Vehicles are up to date with inspections. (fire extinguishers, road hazard equipment, and backup warning)
 - c) Vehicles that are safe, serviced, maintained, properly equipped, and operated.
 - d) Vehicles are in compliance with Department of Motor Vehicle regulations and THQ requirements.
 - e) Vehicles have appropriate car seats for infants, toddlers, and young children (where applicable).
 - f) Transportation logs in each vehicle.
 - g) Vehicles have an ANSI-approved first aid kit.
- 7.7. The program maintains the appropriate kitchen equipment and conducts kitchen operations in a manner that provides a safe and sanitary service environment. This is evidenced by:
- a) The kitchen equipment operates properly; electrical connections are secure and safe.
 - b) The exhaust fan is in good condition, operates properly, is clean, and is inspected monthly.
 - c) The exhaust hood is in good condition, has an approved fire extinguishing system, is clean, free of grease and dirt, and is cleaned weekly.
 - d) The Health Department certificate is posted.
 - e) There is a copy of the most recent health department report, and findings have been addressed.
 - f) There is a certified Kitchen Coordinator who oversees the kitchen operations.
 - g) The food storage for dry goods is adequate, and dry food is kept off of the floor (min. of 6 inches).
 - h) The containers of chemicals are clearly labeled and stored away from food.
 - i) Safety data sheets must be kept on file and easily accessible for each chemical present.
 - j) The refrigeration /freezer space is operational, adequate, and meets health department regulations.
- 7.8. The program has a system for providing meals that are healthy for program participants. This is evidenced by:
- a) Program menus are being developed ahead of time.
 - b) Nutritional needs of residents taken into account, including special diets due to medical, religious, or children's needs.
 - c) Program meals are served in a manner that is pleasing to the eye.
 - d) A dining room that is clean and in good repair.
 - e) Kitchen staff wear gloves and hair nets.
 - f) Program meals adhere to the USDA nutrition guidelines.
 - g) Kitchen staff have the appropriate food handling certifications and ensure that meal preparations are adequately supervised.
 - h) There is a method for communicating special dietary needs to the Kitchen Coordinator.

- 7.9. The program's facility and grounds are well cared for. This is evidenced by:
- a) A program facility that is clean & uncluttered.
 - b) Property grounds that are clean, neat, and cared for.
 - c) Program elevators that are checked monthly, inspected at least annually, and the inspection tags are properly displayed.
 - d) Housekeeping carried out on a regular schedule.
 - e) Program conducting regular pest control inspections.
 - f) Program maintenance equipment that is in good working condition.
 - g) Any combustible materials are safely stored in designated areas and containers, not in the boiler or mechanical room, near electrical equipment, or under stairwells.
- 7.10. The program has well-functioning heating, ventilation, and air conditioning systems. This is evidenced by:
- a) Heating, ventilation, and air conditioning systems that function properly, have no leaks, no temperature variations, maintain constant and appropriate temperature, and make minimal noise.
- 7.11. The program's electrical system is in good working order. This is evidenced by:
- a) Wall outlets and switches that operate properly are covered, grounded, and AFCI/GFCI compliant. There are no exposed wires, no loose or hanging wires, or temporary wiring.
- 7.12. The program keeps program participants and staff safe and secure. This is evidenced by:
- a) A designated person(s) responsible for the security system or security management activities.
 - b) Controlling entrances and exits from security-sensitive areas.
 - c) Where there is a camera security system, the program ensures that the system is operational and that there are no significant blind spots that would jeopardize staff and/or program participant safety.
- 7.13. The program has an appropriate fire safety system in place. This is evidenced by:
- a) A written fire safety and evacuation plan is in place and posted in the facility.
 - b) An annual review of the fire safety system.
 - c) Conducting fire drills at least twice a year (or more if required by program type, licensing, contractual obligations, or local fire regulations).
 - d) Fire/heat/smoke detectors operating properly.
 - e) Carbon monoxide detectors are installed and in working order.
 - f) Fire extinguishers that are tagged and accessible on all floors and all areas of the building.
- 7.14. The program has an appropriate evacuation plan and system. This is evidenced by:
- a) An evacuation plan is posted in strategic locations, and routes clearly marked. Alternate routes are also indicated (This includes: tornado, hurricane, or other natural disaster).
 - b) Exit routes (corridors and stairwells) are clear and free from obstruction.
 - c) Exits are clearly marked.
 - d) Exit signs are lit and operational.

- 7.15. Program participants are responsible for maintaining their living quarters and participating in basic housekeeping activities.
- There is evidence that program participants are responsible for maintaining their living quarters and participating in basic housekeeping activities.
 - Such housekeeping activities are restricted to no more than 2 hours per day.
 - These housekeeping activities are agreed to at the time of admission in the participation agreement and apply equally to all participants.
 - There is evidence that program participants are not engaging in inappropriate duties (e.g., security, landscaping, standing kettles, serving food, etc.).
- 7.16. The program has the appropriate facility components to provide an appropriate living environment for residents. This is evidenced by:
- Living quarters that are clean and in good repair.
 - The facility has separate living, dining, and sleeping facilities.
 - Adequate space allocated for recreational/leisure activities.
 - Appropriate furnishings and equipment for leisure activities.
 - An adequate supply of bed linens, towels, washcloths, blankets, mattresses, and mattress covers for each occupant.
- 7.17. Residential and other programs serving children provide the appropriate equipment and play space. This is evidenced by:
- A cleaning/sanitizing regimen for toys and equipment.
 - Age-appropriate toys for children.
 - Indoor and outdoor play spaces for children.
 - Bathing tubs for infants if appropriate.
 - Diaper changing tables with an accessible hand washing sink if appropriate. The changing tables should be placed in a location that is visible to others.
- 7.18. Residential programs abide by Salvation Army specifications for indoor space. Those specifications include:
- The ceiling in each sleeping room is at least 8 feet high.
 - A minimum of 12 square feet per person for dining and leisure areas.
 - Single occupancy rooms are at least 100 square feet.
 - Sleeping quarters open directly to an exit corridor.
 - Room partitions are ceiling-high and smoke-tight.
 - Bedrooms are not used as access to other bedrooms.
 - When temporary housing is purchased from other sources, participant facilities meet Salvation Army standards.
 - The program has the means to isolate a client for health and safety reasons.
 - Bars or protective screens in place to protect residents from falling from windows or roofs.
 - Secure storage space for each program participant.
- 7.19. Beds used by program participants and live-in staff conform to Salvation Army specifications. Those specifications include:
- The program beds are solid and do not wobble; frames are not bent.
 - The bed springs are rigid and give support, and mattresses are firm, clean, protected, and flame-resistant/retardant.

- c) The double-decker beds have guard rails.
 - d) A single bed at least 30 inches wide is available for each person.
 - e) Cribs are available for infants.
 - f) There are at least 50 square feet of floor space for each single or double-decker bed.
 - g) Mattresses are bug-resistant and in good condition (no tears or divots), and old mattresses are regularly rotated out of circulation.
- 7.20. Residential programs have a well-functioning laundry system. This is evidenced by:
- a) Clean linens are provided for each resident and are laundered as necessary, but at least weekly.
 - b) Safe and well-maintained facilities for doing institutional laundry are on the premises, or laundry is done by contract.
- 7.21. Residential programs must have adequate bathing and toilet facilities. These specifications include, but are not limited to:
- a) Bathing and toilet facilities conform to local code requirements.
 - b) Water temperature is controlled to prevent scalding, and both hot and cold water are available 24 hours a day.
 - c) Access to toilet and bathroom facilities without going through the sleeping quarters of other residents.
 - d) Private, individual, unisex bathing and toilet facilities are available.
 - e) The program's toilets, urinals, and showers are provided at a minimum ratio of 1:8. The only exceptions to this are Federal Correction Standard ratios of 1:6.
 - f) Family bathing units contain tub/shower combinations.
 - g) Shower rooms in dormitory areas include a dressing or dry area.
 - h) Communal, unpartitioned showers are not permitted. Each shower unit is in a separate shower stall. Stalls are provided with side-mounted shower heads.

VIII. Safety & Risk Management

1. Safety (General)

- 8.1.1 The program has a set of policies and procedures for emergencies in which staff are trained.
- 8.1.2 The program conducts regular safety education and training for its staff.
- 8.1.3 The program complies with the territorial procedures for reporting and addressing any injuries, accidents, and other unusual incidents.
- 8.1.4 The program has a contingency plan in place if the facility becomes uninhabitable.
- 8.1.5 The program has at least one staff member trained in first aid and CPR on duty at all times.
- 8.1.6 Program first aid kits comply with ANSI standards and are readily available to all workers and program participants.
- 8.1.7 Daily logs are maintained in programs where they are required.

2. Child/Vulnerable Adult Safety

- 8.2.1 The program adheres to approved Territorial Child and Vulnerable Adult Safety Standards.

3. Workplace Violence

- 8.3.1 The program provides staff members training in conflict resolution/de-escalation techniques.
- 8.3.2 Staff members demonstrate an awareness of the risks in their physical environment, whether in the office or while conducting home and community visits, regarding their personal safety.

4. Infectious Disease Control

- 8.4.1 The program takes the recommended measures as indicated by the CDC to minimize the risk of transmission of airborne pathogens within the confines of the program's facility.

5. HIPAA (Health Insurance Portability and Accountability Act)

This standard only applies to programs that are required to be HIPAA compliant. Federal HIPAA guidelines should be consulted to determine the need for compliance.

- 8.5.1 The program adheres to federal HIPAA Guidelines as appropriate.

6. Medication Management

This section only applies if the program accepts responsibility for program participant medications.

- 8.6.1 The program has written procedures and a system in place to assist program participants in managing their medications.
- 8.6.2 The facility provides secure refrigeration for program participants' medications as necessary.

8.6.3 The program maintains an accurate medication log.

7. Tobacco and Vaping Cessation/Prevention

8.7.1 The program prohibits smoking or vaping in any area in which treatment, care, or service is taking place.

8.7.2 The program ensures that any designated smoking/vaping areas are a safe distance from non-smoking program participants.

8.7.3 The program provides smoking cessation education.

26. Confidentiality, Guest Records, and Data Security

The Salvation Army maintains strict policies and practices for safeguarding guest records, ensuring compliance with HIPAA and HMIS standards, and managing data sharing and breach response protocols. These policies are grounded in national Salvation Army guidelines, including those found in the USW Minute Manual, and are reinforced by local procedures tailored to the Access Center.

All guest records are stored securely and accessed only by authorized personnel. Electronic records are maintained in the Homeless Management Information System (HMIS) and WellSky, The Salvation Army's approved data system for the Western Territory. These systems use password-protected access and encrypted data transmission to ensure confidentiality and data integrity. Paper records, including sign-in logs and control sheets, are stored in locked cabinets within restricted-access areas and retained for the appropriate duration to support audits, billing, and legal documentation.

Staff receive mandatory training in confidentiality, HIPAA compliance, and data handling procedures during onboarding and annually thereafter. During intake, guests are informed of their privacy rights and asked to sign Release of Information forms that govern data sharing with partner agencies.

To ensure compliance with funder requirements and regulatory standards, regular audits are conducted to review data accuracy, service documentation, and policy adherence. These audits are overseen by the Shelter Director and shared with Divisional Headquarters (DHQ) for review. Territorial Headquarters (THQ) conducts formal evaluations every three years, while DHQ performs evaluations every two years, in accordance with National Social Services (NSS) Evaluation and Self-Evaluation Standards.

In the event of a data breach or unauthorized access, the Shelter Director will immediately initiate the breach response protocol, which includes notifying DHQ and Sedgwick Insurance Services, The Salvation Army's insurance management provider. All incidents are documented, and corrective actions are implemented to prevent recurrence.

The following table summarizes key components of The Salvation Army’s data security and compliance framework:

Policy Area	Practice at Access Center
HIPAA Compliance	Staff training, signed consent forms, encrypted systems, secure storage
HMIS Participation	Real-time data entry, monthly reporting, compliance with SJ CoC standards
Data Sharing	Governed by signed Release of Information agreements
Record Retention	Electronic and paper records stored securely and retained per audit and legal requirements
Staff Training	Initial and annual training on confidentiality and data handling
Breach Protocols	Immediate notification to DHQ and Sedgwick; documentation and corrective action
External Evaluation	DHQ every 2 years; THQ every 3 years
Internal Monitoring	Regular audits, performance reviews, and compliance checks

These measures ensure that the Access Center operates with transparency, accountability, and respect for guest dignity, while meeting all legal and ethical standards for data protection.

Policy 1-08-05	CONFIDENTIALITY AND THE PROTECTION OF PERSONAL PRIVACY	Attachment (<i>Link 3-02-43H</i>)
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The territorial commander, in harmony with the decision of the Commissioners' Conference and the recommendation of the territorial administrative council, has approved the following:

A. POLICY

People seek help from Salvation Army program units when they have special needs which may range from fairly simple to painfully difficult. Their need for service and the help that can be given is determined through sharing factual and personal information. For this to be effective, there must be trust that the program unit will hold the shared information confidential.

Therefore, the commitment to confidentiality extends to all Salvation Army officers, employees, and volunteers. It includes the knowledge that a person is or has been a recipient of service. The Salvation Army will consider carefully matters of confidentiality as they pertain to the particular setting and commit itself to the highest level of agency practice within a given community.

The presumption of confidentiality applies to The Salvation Army unit as a whole, not only to an individual staff person, since client information is normally shared internally for legitimate purposes of training, supervision, records accountability, and expanded client service.

Principles of confidentiality and how these are carried forward in the program unit will be part of the orientation of each new employee, advisory organization member, and other volunteers. As a general principle, no information about individuals receiving Salvation Army services will be disclosed outside of the organization except when informed written consent has been obtained from the service recipient. National Salvation Army guidelines, which are received and updated periodically regarding particular confidentiality issues, should be available to all staff.

Individual program units will assume responsibility for being fully aware of and responsive to the requirements pertaining to confidentiality that impact upon them as a result of contractual commitments, the requirements of law specific to the program, the demands of standard-setting bodies, as well as Salvation Army standards for the particular program.

B. GUIDELINES

The following guidelines are issued in connection with The Salvation Army Policy Statement on Confidentiality and the Protection of Personal Privacy.

1. Fact of Participation

The fact that an individual is or has been a participant in a Salvation Army program, social service, or community service program should not be disclosed outside The Salvation Army unit, except as may be specifically defined in the national standards in effect for the particular kind of program. This restraint will not apply to public meetings or programs in which participants take part as "members," e.g., troop activities, community center programs, and boys' clubs.

Inquiries by visit, telephone or letter regarding a participant in a Salvation Army residential program should be answered with the statement that information as to whether a particular individual is or has been in residence cannot be divulged; that, if in fact the individual is in residence, he/she will be advised of the inquiry, and that, at his/her discretion, the client may or may not communicate with the inquirer.

2. Disclosure to Other Organizations

Disclosure of limited client information to other social service agencies, for the purpose of a referral to or from The Salvation Army, generally would be permitted if a determination is made that the disclosure is in the interest of the client.

Before client records can be disclosed to individuals or agencies outside of The Salvation Army, the written consent of the client must be obtained. The consent should be in writing and should identify the information to be disclosed, the person or agency to whom it will be disclosed, the purpose of the disclosure, and the date upon which the client's consent expires. Use of the Authorization for Release of Information form is recommended for this purpose. If a funder or program requires the use of a

specific authorization for the release of information, the required form may be utilized if approved by the appropriate command.

Disclosure of information relating to program participants should not be made to employers, credit agencies, unions, or other similar organizations, except under terms and conditions contractually defined where employment is an integral part of the program (e.g., contracts with federal or state correctional authorities for early release programs), or at the request, and with the consent of the participant.

Disclosures to governmental agencies or organizations that determine benefits such as the Social Security Administration are permissible when the authorization to release information is signed by the client.

If there is doubt about whether client information should be disclosed, legal advice should be obtained from territorial staff counsel through the appropriate Salvation Army administrative headquarters.

3. Clearing House

Whereas, as a general rule, there is no objection to participation by The Salvation Army in clearing houses, there are any number of situations in which such disclosure is prohibited by contract or regulation or where disclosure of the information could damage the client. Because of the varied and fluctuating makeup of the usual Army case load, written consent of the client should be included in the clearing house procedure. The information provided to the clearing house should be limited to that which is necessary for the clearing house to perform its basic function. The clearing house should provide some written statement (e.g., agreement or policy statement) that the clearing house will limit the further disclosure of such information.

Where clearing house information is shared electronically by several agencies through computer access, the clearing house should have written agreements from each participating agency limiting computer access to appropriate staff at each agency.

4. Information to the Client

Where required by Federal, State or local law or a funding contract, upon written request by a client, The Salvation Army will provide such requesting client access to information contained in his/her own case record. In other cases, The Salvation Army will consider whether such access is in the best interest of the client and does not involve a risk of harm to others. Before allowing such access by a client, The Salvation Army will redact information about any individuals other than the requesting client. If the record contains counseling records or other information relating to the client's psychiatric, psychological or mental health conditions, the professional responsible for the client's treatment will review the records to determine whether the release of the information is appropriate. If disclosure is determined not to be appropriate, the records will not be disclosed to the client unless required pursuant to a court order. Information disclosed should be limited to that which is included in the formally completed and approved case record. The formal case record should contain only factual information and formal conclusions, not informal counselor notes and/or casual observations. Information contained in the record that was provided by other agencies or individuals, and not Salvation Army personnel, should not be disclosed to the client.

5. Law Enforcement Personnel

Except where a crime has been committed at a Salvation Army institution, voluntary disclosure to law enforcement agencies, whether local or state police, district attorney, the FBI, or Immigration and Customs Enforcement (ICE), of the participation by an individual in a Salvation Army program, or of information contained in any record(s), should be refused subject to the exceptions set forth below.

Whether served by an attorney in a civil action or at the instance of a governmental agency, a subpoena served on The Salvation Army for information regarding a participant should be resisted. It is noted that a subpoena is not the same as a court order. Specifically, local legal counsel should be retained to appear in court to move to quash the subpoena, thus compelling the person seeking disclosure of the information to show the court good cause for such disclosure, in order to request a court order. In any case, before any action is taken, the local Salvation Army operation should contact its immediate administrative headquarters.

Since an arrest warrant or a search warrant is a court order which has been issued by a court after a showing of probable cause, if such a warrant is presented to a Salvation Army facility relating to a client in residence, The Salvation Army facility should

cooperate with the law enforcement agency in making the arrest or the search, preferably in a manner which will involve the least disruption of the program at the facility.

Because law enforcement personnel are precluded from conducting a search of a residence without an arrest or search warrant, and because a criminal summons does not constitute a warrant, The Salvation Army should not produce a participant or otherwise cooperate with law enforcement personnel seeking to serve a criminal summons on a resident at a Salvation Army institution. Law enforcement personnel should be advised that they will be required to produce a valid arrest or search warrant before The Salvation Army will cooperate with them, whether in making the arrest or the search, on the terms set forth in the prior paragraph. (This paragraph added per NLC's letter of August 17, 2001)

6. Release of Records Under Court Order

The Salvation Army is the owner and controller of all client records unless otherwise specified by a funding contract. No records may be removed from Salvation Army premises or transmitted to other parties without specific written approval by The Salvation Army officer in charge or the executive director, in consultation with local legal counsel.

In the event that Salvation Army client records are required by order of a court of competent jurisdiction, when good cause for such disclosure has been determined by the court, the records which have been subpoenaed by the court shall be delivered to the court, on the date requested, only by The Salvation Army officer in charge or the executive director or other staff as designated in writing.

If the court requires a review of a client record, The Salvation Army representative shall accompany the record to the court, and request that the court review such record in closed chambers and admit only the minimum portion of such record which is relevant to the proceedings under consideration.

7. Limitations of Court Testimony

No Salvation Army personnel shall voluntarily testify about a client's participation in the program. Further, if subpoenaed or compelled to testify by court order, Salvation Army personnel shall first consult with territorial legal counsel about the opportunity to seek court relief to quash any subpoena or court order.

Generally, any Salvation Army personnel compelled to testify should be accompanied by legal counsel designated by territorial legal counsel. Legal counsel can assist Salvation Army personnel with asking the court for permission to be excused from offering any assessment that is beyond their technical qualifications, including but not limited to education, licensure, registration, certification, and professional skill and experience.

8. Child/Elder Abuse

Notwithstanding any other provisions of these guidelines, Salvation Army facilities will comply with all state and municipal laws requiring reporting to governmental agencies of instances of child/elder abuse. Failure to comply with such laws can result in criminal sanctions.

Notwithstanding the contrary, information is to be withheld where The Salvation Army is required by law (as in alcohol and drug programs regulated or funded by a federal agency or in child care or health care facilities, which disclosure is prohibited by state regulations) and/or where by contract The Salvation Army has agreed to maintain the confidentiality of client records.

Related National Minute:

- 1) Access By Researchers to Records Created By The Salvation Army and Held in Its National Archives and Research Center
- 2) Volunteer Services and Work Performed By Social Services Participants

Western Territory Note: On the next page is the Client Authorization For Release Of Information followed by Volunteer Authorization For Release Of Information.

THE SALVATION ARMY

AUTHORIZATION FOR RELEASE OF INFORMATION

I, _____
(name of client)

a participant in The Salvation Army _____
(name of program/service)

hereby authorize _____
(director or other employee)

to disclose to _____
(recipient of information)

the following information (Specify the kind and amount of information): _____

The purpose of the disclosure authorized herein is to _____

This consent may be revoked by me at any time except to the extent that action has **already been taken regarding this release of information**. This consent (unless expressly revoked earlier) expires on (Specific date, event or condition of expiration): _____

Signature: _____ Date: _____

Signature of Witness: _____ Date: _____

Signature of Parent, Guardian or Legal Representative
(required for minor, incompetent, or deceased participant) _____

Date: _____

Specify Relationship: _____

Approved by the October 2022 Commissioners' Conference pp. 700-716

Refer to the National Minute/Policy titled: Confidentiality and the Protection of Personal Privacy – Guidelines

The Salvation Army Western Territory
VOLUNTEER AUTHORIZATION REGARDING RELEASE OF INFORMATION

I have received a copy of and understand The Salvation Army's Policy on Confidentiality and the Protection of Personal Privacy.

This consent may be revoked by me at any time except to the extent that action has already been taken regarding this release of information. This consent (unless expressly revoked earlier) expires on (Specific date, event or condition of expiration): _____

Volunteer Signature: _____

Print Volunteer Name: _____

Date: _____

Minute 14-05 **INFORMATION TECHNOLOGY SECURITY POLICY**

.01 POLICY STATEMENT

The following policy governs the security of information technology within The Salvation Army, USA Western Territory. Security of our sensitive information depends on vigilance by all participants. The Salvation Army is committed to protecting officers, employees, partners, vendors, donors, clients, beneficiaries, soldiers and the organization from illegal or damaging actions by individuals, either knowingly or unknowingly.

.02 LOST EQUIPMENT AND MEDIA

Because lost or stolen equipment and media (laptops, iPads, smart phones, thumb drives, DVDs, CDs, external/USB hard drives etc.) can represent a serious threat to security, leading to lost credibility, violations of confidentiality, or destruction of assets, reports to law enforcement and IT must be provided as soon as the loss is discovered.

.03 INFORMATION SENSITIVITY

This policy is intended to help users determine what information cannot be disclosed without proper authorization. All data that is not approved for public release shall be considered confidential or sensitive.

In accordance with our obligation to be compliant with relevant laws, personally identifiable information (PII) shall be treated with the utmost sensitivity and confidentiality. PII can include such things as:

- Name when connected to sensitive information
- Credit card numbers
- Driver's license number
- Date of birth
- Medical history, case notes, pastoral & counseling notes
- Social Security Number or other government identification number
- Physical location such as IP address or geolocation coordinates
- Vehicle registration plate number and/or VIN
- Face, fingerprints, or handwriting
- Birthplace
- Genetic information

Authorized access to confidential and proprietary information should follow the principle of the least access. That is, provide the individual with only the resources necessary to perform their duties and no more.

Some individuals will have incidental or transitory access to sensitive data needed to perform their duties relative to technology or security without needing access to the data itself. Such individuals shall not proactively look at the content of the data, keep copies, or disclose any information they see during their work. They must treat it as if they had not seen it.

The information covered in these guidelines includes, but is not limited to, information that is either stored or shared via any means. This includes: electronic information, information on paper, and information shared orally or visually such as telephone and video conferencing. Confidential information must not be left unattended in conference rooms or other public places.

.04 PCI COMPLIANCE

The Payment Card Industry (PCI) Data Security Standard (DSS) provides a detailed structure for securing cardholder data that is stored, processed and/or transmitted.

GENERAL STATEMENTS

Individual Commands will be responsible to ensure that appropriate personnel are informed of these policies and trained on their implementation.

To reduce risk, we will maintain a posture of recording only the minimal amount of card holder data necessary.

1. Incident Response Team
The Secretary for Business Administration will head the PCI Incident Response Team. An annual meeting of the Incident Response Team will review PCI policy and make recommendations for changes, if applicable, and review and make changes to the Incident Response Plan, as necessary.

The Territorial IT Director will contract with a qualified vendor to conduct a PCI audit (Gap analysis) annually or upon significant changes to the environment. The audit will result in a formal documented analysis of risk, including identification of critical assets, threats, and vulnerabilities as it relates to credit card processing that will be presented to the Incident Response Team.

2. Electronic Processing

To ensure compliance with PCI standards, all credit card payments (including donations) will be processed only through vendors and systems approved by the Territorial Finance Council.

The use of tokenized systems of credit card processing through “*Elavon Safe-T Suite*” have been selected by the Territory as a primary system for payment processing to be used for ARC POS, CCMS (Kroc) Sales, and ecommerce sites for TradeWest and Events.

Third party processors CDS and Classy are to be used as primary donation processing with integration to Portfolio.

The use of Square is approved only where the above primary systems are not available. Examples of this are program service fees, fund raising events, rentals, sales of equipment, sales of merchandise, (where POS is not available), and all Camp revenue streams.

Do not store card holder data electronically on a computer, on a memory chip (such as a thumb drive), or any other electronic storage media. Do not transmit card holder data electronically except by the approved systems.

Territorial IT will oversee all service providers with whom cardholder data is shared, or that could affect the security of cardholder data, before engagement and again annually. All written agreements will acknowledge that service providers are responsible for the security of cardholder data and that all required policies and procedures are documented and implemented.

3. Routine Inspections

Monthly, the local manager or Corps Officer will inspect credit card devices, looking for evidence of tampering or unauthorized change of the unit.

Evidence of tampering may include:

- Unexpected attachments or cables plugged into the device
- Missing or changed security labels or serial number
- Broken or differently colored casing or cables
- Changes to other external markings or appearance
- Unauthorized change of equipment

Any discovered problems or discrepancies will be immediately reported to the Command Finance Secretary or Manager. A log of monthly inspections will be kept at the store or unit and made available annually during PCI audits.

4. Security of credit card devices

Local managers, Corps Officers, and other front-line personnel will refuse access to any credit card equipment to anyone without prior notification of the visit and proper, verifiable Salvation Army identification. This includes anyone purporting to be from IT or other official sounding department or Command HQ.

5. Personnel and PCI Security Awareness

PCI DSS requires that anyone who will work with cardholder data will complete training relative to Army policies and procedures for credit card handling before beginning to work with card holder data and repeat the training annually. The individual trained will sign a form to indicate that they have been trained and will comply with Salvation Army policy related to credit card procedures. Training documentation will be kept by the command Human Resources Department and made available during annual PCI Audits.

THQ will implement a security awareness program to ensure all personnel are made aware of the importance of cardholder data security. March is designated "PCI Awareness Month in The Western Territory.

Anyone who will be processing credit cards for the Salvation Army must have a criminal background screening prior to working with credit cards. Command Finance Departments will maintain a list of all employees authorized to process credit card transactions within the command. The Command Finance Secretary or Manager will ensure that user access to credit card processing is revoked upon termination of employment and conduct an annual review of all authorized users.

6. Paper Media

It is best to never put card holder data onto paper media. Because that is not entirely possible, all paper media will be handled in such a way that protects the stored cardholder data. Therefore, each unit in the Western Territory that takes credit card payments must comply with the requirements listed below for any paper media that contains credit card or card holder data.

- The CVV number (3-digit security code on the back of Visa or Mastercard, or 4-digit security code on the front of American Express) will not be kept on paper or by any other means past the first transaction use.
- Create and adhere to local procedures to easily distinguish between Salvation Army personnel and visitors in areas where cardholder data (such as membership forms) is accessible. Make sure all visitors are handled as follows:
- Authorized before entering areas where cardholder data is processed or maintained.
- Given a physical token (for example, a badge or access device) with a clearly defined expiration date and that identifies the visitors as not onsite personnel.
- Asked to surrender the physical token before leaving the facility or at the date of expiration.
- Use a visitor log to maintain a physical audit trail of visitor activity. Document the visitor's name, the firm represented, and the onsite personnel authorizing physical access on the log. Retain this log for a minimum of three months, unless otherwise restricted by law.
- Make no unnecessary copies. Treat all copies with the same controls as the originals.
- Physically secure all paper media including any membership forms, donor forms, or purchase orders.
- Do not scan paper documents to create an electronic version.
- Maintain strict control over the internal or external distribution of any kind of paper media, including the following:
- Classify media so the sensitivity of the data can be determined, such as stamping the page "confidential."
- Send the media by secured courier or other delivery method that can be accurately tracked.
- Ensure management approves of all paper media that is removed from a secured area
- Maintain strict control over the storage and accessibility of paper media. Properly maintain inventory logs of all media and conduct media inventories at least annually.
- Destroy media when it is no longer needed for business or legal reasons by cross-cut shredding, incinerating, or pulping hardcopy materials so that cardholder data cannot be reconstructed. Use of a NAID AAA certified shredding service is acceptable when the certification is verified annually.

Things to NEVER do with cardholder data:

- Never transmit card holder data via mail, email, fax, scan, etc. This includes card number, expiration date, security codes, birth dates.
- Never store card holder data electronically in a document, spreadsheet, database, or email.

7. In Summary

The only appropriate way to store cardholder data, if it must be kept, is on the original paper form, in a secured location, as described above.

.05 SCREEN LOCKING

All PCs, laptops and workstations will be secured with a password-protected screensaver with the automatic activation feature set at 15 minutes or less. It should be standard practice to lock the screen (Windows Key + L) when leaving a computer unattended.

.06 PHYSICAL SECURITY

A locked office door enhances security for the computer systems behind it. Rooms, closets, cupboards with networking equipment installed, networked appliances and computers, such as servers and multimedia systems, routers, switches, WAPs, and attached storage devices, should have locks or some other form of physical security.

Portable computers and mobile devices should not be left where they can be seen in cars or near office windows. Hotel rooms and conference rooms also present a risk of theft, tampering, or vandalism.

.07 NETWORK CONNECTIVITY

The purpose of this policy is to safeguard The Salvation Army's network integrity, protect sensitive and confidential data, and ensure compliance with organizational security standards. Unauthorized devices and connectivity methods pose significant risks to the security of our systems and the confidentiality of our data, potentially leading to breaches, data loss, or unauthorized access.

The security of The Salvation Army's network is critical to maintaining trust with our officers, employees, clients, and partners. Our business network handles sensitive information, including proprietary business data, personally identifiable information (PII), financial records, and other confidential materials.

The Salvation Army prohibits the connection of any unapproved or rogue network devices to its business network infrastructure. Only network devices explicitly approved and configured by the IT Department—including routers, switches, wireless access points, and Internet of Things (IoT) devices—are permitted. This policy also extends to any unauthorized internet connectivity methods, such as personal hotspots or external modems, which bypass the organization's secure network.

Approved Devices Only:

- Only network devices (e.g., routers, switches, wireless access points, IoT devices) that have been evaluated, approved, and configured by the IT Department may be connected to The Salvation Army's business network.
- All approved devices must meet organizational security standards, including encryption, authentication, and monitoring requirements.

Prohibited Devices:

- Officers, employees, contractors, or third parties are strictly prohibited from connecting unapproved or personal network devices—such as personal routers, unmanaged switches, wireless access points, or IoT gadgets (e.g., smart speakers, camera systems)—to the business network.
- Examples of prohibited actions include plugging a personal wireless router into an Ethernet port or connecting an unmanaged IoT device to the business network.

Unauthorized Internet Connectivity:

- The use of non-authorized internet connectivity methods, such as personal mobile hotspots, USB modems, or external VPNs not approved by the IT Department, is prohibited on devices connected to The Salvation Army's business network.
- Such methods bypass organizational security controls and expose the business network to external threats.

Any exception to this policy must be formally requested in writing and approved by the IT Department.

Exceptions will only be granted if they do not compromise the security of the business network or sensitive data.

.08 VIRTUAL PRIVATE NETWORK

The purpose of this policy is to ensure the security and integrity of The Salvation Army's business network by regulating the use of Virtual Private Networks (VPNs). This policy applies to all officers, employees, contractors, and third parties accessing The Salvation Army's business network.

Company-Approved VPN on Business Network:

- It is the responsibility of individuals with VPN privileges to ensure that unauthorized users are not allowed access to internal networks.
- By using VPN technology with personal equipment, users must understand that their machines are a de facto extension of the business network, and as such are subject to the same rules and regulations that apply to The Salvation Army-owned equipment, i.e., their machines must be configured to comply with security policies.
- Only approved VPN solutions are permitted for accessing the business network, whether on-site or remotely.

- Unauthorized VPNs, including personal VPN services, are strictly prohibited on the business network to prevent security risks such as data breaches or malware introduction.
- Multi-factor authentication (MFA) is mandatory for all company-approved VPN connections to ensure secure access.

Personal VPN Usage:

- Employees may use personal VPN services on their personal devices when not connected to the business network (e.g., at home or on public Wi-Fi).
- Personal VPNs must be disconnected before accessing the business network or company resources.

Compliance and Monitoring:

- The IT department will monitor network traffic to detect and block unauthorized VPN usage.
- Attempts to bypass this policy may result in disciplinary action, up to and including termination.

Requesting VPN Access:

- Individuals requiring VPN access to the business network must request it through the IT department.
- Only approved VPN software and configurations will be provided.

.09 DIAL IN

Dial in connectivity is not authorized under any circumstance.

.10 USER INSTALLED REMOTE CONTROL

Remote Control and Remote Access Tools provide a way for computer users and support staff alike to share screens, access work computer systems from off site. Examples of such software include Logmein, GoToMyPC, VNC, Windows Remote Desktop (RDP) and pcAnywhere. While these tools can save considerable time and money by eliminating travel and enabling collaboration, they also provide a back door into the network that can be used for theft of, unauthorized access to, or destruction of assets. As a result, these should not be established without IT knowledge and assistance to ensure security compliance. Configurations should not be changed from those set by IT staff.

.11 CONTENT FILTERING

All Army computers attached to the Internet must have some form of content filtering and monitoring for security, risk management and accountability.

.12 INTERNET BLOCKING

The categories of Internet content which will be blocked are approved by Territorial Finance Council and published by the IT Department.

Exceptions may be granted by the Chief Secretary upon receipt of a letter with rationale from the command head.

If a site is mis-categorized, users may request the site be un-blocked by submitting a ticket to the IT Help Center. IT will review the request and un-block the site if it is mis-categorized.

.13 PEER TO PEER

The use of Peer-to-Peer (P2P) file-sharing applications is prohibited.

.14 INTERNAL SECURITY

Recognizing the importance and confidentiality of much of our electronic data, it is imperative that appropriate security based on Microsoft Active Directory user ID is implemented.

User IDs will be established and removed automatically through UltiPro. Employees will be added only after they have been approved to hire by Command Finance Council. The Command Human Resources Department should take a proactive approach to inputting newly hired staff and removing any terminations through UltiPro in a timely manner. Exceptions will be routed through the Command HR to instruct IT.

Under no circumstances will user IDs be shared. A user ID will identify an individual. Generic IDs are not allowed. Unmonitored use of another's account, even if the ID and/or password is not shared, is not allowed.

Volunteer, consultant, and temporary staff that require access to Army computer systems will be given User IDs at the request of the Command Human Resources Dept., as well. All such user IDs will have an automatic expiration date and will require reauthorization every 90 days.

.15 PASSWORDS

Passwords are an important aspect of computer security. A poorly chosen password may result in unauthorized access and/or exploitation of The Army's resources. All users, including contractors and vendors with access to The Salvation Army's systems, are responsible for taking the appropriate steps, as outlined below, to select and secure their passwords.

Password Requirements

All Salvation Army managed passwords must meet the following minimum standards:

1. Minimum Length: All passwords must be at least 12 characters long.
2. Complexity: Passwords must include a mix of:
 - a. Uppercase letters (A-Z)
 - b. Lowercase letters (a-z)
 - c. Numbers (0-9)
 - d. Special characters (e.g., !, @, #, \$, etc.)
3. Account Lockout: After 5 failed login attempts, the account will be locked for 30 minutes. Contact IT support if you need assistance unlocking your account sooner.
4. Passphrase Recommendation: We strongly recommend using a passphrase—a sequence of words or a sentence that is easy for you to remember but hard for others to guess (see Password Guidelines below).
5. Multi-Factor Authentication (MFA): Where available, MFA must be enabled to add an extra layer of security. Users must configure and use MFA as part of the authentication process.
6. Expiration: Passwords must be changed every 180 days, provided the account remains uncompromised.

Password Guidelines

- Use a Passphrase: We strongly recommend using a passphrase—a sequence of words or a sentence that is easy for you to remember but hard for others to guess. For example:
 - "BlueSky\$Rain1999"
 - "2 drink coffee every day!"
- Safeguard your passwords and commit passwords to memory or store passwords securely if needed (e.g. in an approved password manager).
- If you suspect your account has been compromised, change your password and report to the IT Help Center immediately.
- Don't easily use guessable information like your name, birthdate, phone number, or "password123."
- Don't share your password with anyone, including coworkers or IT StaU (unless required for support purposes as noted above).
- Don't write passwords down in unsecured locations (e.g., sticky notes).

The IT Department will configure systems to ensure compliance with this policy, and provide support for password resets, account lockouts, and MFA issues.

.16 MALWARE

New viruses and other malware are discovered every day. No anti-virus software or malware protection is always 100% effective. It is everyone's responsibility to be vigilant.

- Ensure the standard, supported anti-virus software is working. Anti-virus updates and software patches will be automatically released to Army owned and attached systems. If separated from the Army network for extended periods, the user should proactively run anti-virus and software patch updates as they become available.
- Never download files from unknown or suspicious sources.
- Always scan removable media (such as thumb drives) before using.
- Back-up critical data on a regular basis and store the data in a safe place in accordance with the Data Retention Policy.

.17 SOCIAL ENGINEERED ATTACKS

The IT Department will routinely notify users of fraudulent social engineering attacks and techniques that can be used to detect them. Vigilance by all is the best defense.

Social Engineering Attacks come through someone contacting an individual via phone, in person, email, fax, or online - and elusively trying to collect sensitive information. The person is being "socially pressured" or "socially encouraged" or "tricked" into sharing

sensitive data or logging into a fraudulent website revealing their ID and password. Attacks usually include a statement of urgency and a threat of loss unless the user complies.

Immediately report all such attacks to the Help Center. Do not hesitate to ask IT for help or clarification if you have suspicion regarding any such possible attack.

.18 INTEGRITY

Critical files should be stored on file or cloud servers provided and maintained by the IT Dept. Critical files include all data shared by two or more individuals; important word-processing, spreadsheet or database documents. Users should be reminded to store all such data on file servers rather than their individual hard disks. IT personnel are responsible for security and backup/recovery of all data in this category. Documents/data not stored on file servers lost through malfunction on a desktop or laptop computer might not be recoverable.

Sensitive and/or confidential data may not be stored on personally owned laptops, mobile computing devices, smart phones, thumb drives, external drives, or non-Army cloud storage systems unless there is encryption and password security meeting the above password requirements in place. Lost or stolen equipment or compromised cloud storage systems must immediately be reported.

.19 MALICIOUS USE

The following activities are strictly prohibited, with no exceptions:

1. Effecting security breaches or disruptions of network communication. Security breaches include, but are not limited to, accessing data of which the user is not an intended recipient or logging into a server or account that the user is not expressly authorized to access, unless these duties are within the scope of regular duties. For purposes of this policy, "disruption" includes, but is not limited to, network sniffing, pinged floods, packet spoofing, denial of service, and forged routing.
2. Port scanning or security scanning is expressly prohibited unless carried out by authorized IT personnel.
3. Executing any form of network monitoring which will intercept data not intended for the employee's host, unless carried out by authorized IT personnel.
4. Circumventing user authentication or security of any host, network or account.
5. Interfering with or denying service to any other user (for example, denial of service attack).
6. Using any program/script/command, or sending messages of any kind, with the intent to interfere with, or disable, a user's session, via any means, locally or via the network.
7. Unauthorized use, or forging, of email header information.

.20 WIFI

This policy specifies the conditions that wireless infrastructure devices must satisfy to connect to the network. Only those wireless access points (WAPs) that meet the standards specified in this policy or are granted an exception by the IT Dept. are approved for connectivity to the network.

All wireless infrastructure devices that reside at an Army site and connect to the Army network should:

- Be installed, supported, and maintained by The IT Department.
- Use approved authentication protocols and infrastructure.
- Use approved encryption protocols.

The official standard for Salvation Army WiFi includes wireless networks for Business / Staff, Guests, and Public users.

Wi-Fi Network Definitions

- **Business Network:** A secure Wi-Fi network reserved for authorized officers, employees, and contractors to access company systems, data, and resources. Authenticated using the Microsoft Active Directory user ID and password and/or certificates and may not be given to guests. Unapproved wireless devices (rogue devices) are prohibited on the Business Network. Discovered rogue devices may be disabled.
- **Guest Network:** A separate, restricted Wi-Fi network designed for residents and other non-staff individuals, providing basic internet access only. Authorized via unique PIN provided by local staff via the IT Department.
- **Public Network:** A separate, restricted Wi-Fi network designed for visitors, vendors, and other non-staff individuals, and computer labs providing basic internet access only. Authorized via unique

passwords provided by the IT Department, passwords will change periodically.

.21 BLUETOOTH SECURITY

This policy provides for secure Bluetooth operations. It protects the Army from loss of PII and proprietary data.

When pairing your Bluetooth unit to your Bluetooth enabled equipment (i.e., phone, laptop, etc.), ensure that you are not in a public area. If your Bluetooth enabled equipment asks for you to enter your pin after you have initially paired it, you should refuse the pairing request and report it to the Help Center, immediately. Unless your Bluetooth device itself has malfunctioned and lost its pin, this is a sign of a hack attempt.

Whenever possible, Bluetooth devices should employ 'security mode 3,' which encrypts traffic in both directions. If your device allows the usage of long PIN's, you should use either a 13 alphabetic PIN or a 19-digit PIN (or longer). Switch the Bluetooth device to use the hidden mode, and activate Bluetooth only when it is needed. Update the device's firmware when a new version is available.

Whenever possible, wireless keyboards, mice, and headsets should use a supplied USB dongle rather than native PC Bluetooth and the software from the manufacturer rather than default drivers available with the operating system. The software for these devices should be kept up-to-date.

The following is a list of unauthorized uses of Bluetooth:

- Eavesdropping
- Device ID spoofing
- Denial of Service attacks
- Attacking other Bluetooth enabled devices

User responsibilities:

- Bluetooth users are required to report any loss, theft, or misuse of Bluetooth devices or systems immediately to the Help Center.
- Due to inherent security vulnerabilities, extremely sensitive information should not be discussed or transmitted via Bluetooth.

27. City and County Partner Coordination

The Salvation Army will maintain consistent and collaborative communication with the City of Lodi and San Joaquin County partners to ensure the successful operation of the Access Center. This coordination is foundational to delivering integrated services, maintaining transparency, and aligning with regional strategies to reduce homelessness.

City of Lodi Coordination

The Shelter Director will provide monthly reports to City staff detailing bed nights, meals served, services accessed, and outreach activities. These reports will be generated using HMIS and WellSky systems and will include performance metrics such as housing placements, service utilization, and guest satisfaction. Regular meetings will be scheduled to review these metrics, discuss operational challenges, and share success stories. The Salvation Army will also maintain open lines of communication through on-site visits and correspondence, ensuring that both City leadership and the broader community remain informed and engaged.

A designated liaison will facilitate coordination between Salvation Army leadership and City departments, including law enforcement, public works, and neighborhood services. This role will support the implementation of the Good Neighbor Plan, which includes daily clean-up of surrounding areas, loitering deterrence, and responsiveness to community concerns.

The Salvation Army will continue the Access Center Advisory Board, which is comprised of local business, community, and faith-based leaders. The Advisory Board will continue to meet regularly to review the Access Center operations and provide valuable feedback from the community. This will enable The Salvation Army to continue to improve serving the needs of the individuals and the community. A representative from the Oversight Board will provide feedback to the City Council on a regular basis.

County Partner Collaboration

The Access Center collaborate with the onsite service delivery from San Joaquin County Behavioral Health, Health Services, and Housing departments. These partnerships will allow

guests to access medical care, mental health support, substance use treatment, and housing navigation without leaving the shelter. The Salvation Army will coordinate joint planning sessions and case conferencing with these agencies to ensure continuity of care and avoid duplication of services.

The Access Center will also participate in San Joaquin Continuum of Care (SJCoC) board meetings and the Lodi Committee on Homelessness meetings and their relevant subcommittees, contributing to regional planning and policy development.

Communication and Reporting Framework

Coordination Element	Practice
Monthly City Reports	Bed nights, meals, services, outreach, and performance metrics
Regular City Meetings	Review data, discuss operations, share updates
County Service Integration	Onsite access to health, housing, and behavioral services
Case Conferencing	Joint planning with County partners
Community Engagement	Flyers, contact info, and clean-up coordination with neighbors
SJCoC Participation	Board and subcommittee involvement
Lodi Committee on Homelessness	Membership and subcommittee involvement
Good Neighbor Plan	Daily clean-up, loitering deterrence, and community responsiveness

This coordinated approach ensures that the Access Center operates as part of a unified system addressing homelessness in Lodi. By maintaining strong relationships with City and County partners, The Salvation Army will deliver impactful services, promote transparency, and support long-term solutions for individuals experiencing homelessness.

28. Data Collection and Reporting

The Salvation Army will implement a comprehensive data collection and reporting system to monitor performance and ensure accountability at the Access Center. This system integrates multiple platforms—primarily the San Joaquin County Homeless Management Information System (HMIS) and The Salvation Army’s Western Territory-approved WellSky database—to track guest demographics, service utilization, and outcome metrics.

All guest interactions, services, and progress will be documented in HMIS and WellSky. These systems allow for real-time data entry and encrypted transmission, ensuring compliance with HIPAA standards and Continuum of Care (CoC) data-sharing agreements. Staff will be trained in data entry protocols, confidentiality, and quality assurance procedures during onboarding and through ongoing professional development.

Monthly reports will be submitted to the City of Lodi and other stakeholders, detailing:

- Number of individuals transitioned to housing or other programs
- Types of services accessed (e.g., mental health, substance use treatment, counseling)
- Meals and hygiene services provided
- Overnight and day service utilization (duplicated and unduplicated counts)
- Outreach contacts and transportation to service appointments

In addition to digital systems, paper documentation (e.g., sign-in logs, control sheets) will be used as backup and for continuity during power outages or system disruptions.

The Access Center will also incorporate data from LIFNAV and Pathway of Hope programs. LIFNAV Connect, a mobile-enabled portal, will collect and track:

- Demographic information
- Case history with The Salvation Army
- Real-time shelter availability
- Personal goals and progress toward housing, income, and stability

Pathway of Hope will track family-specific outcomes such as:

- Financial stability
- Employment status
- Housing retention
- Engagement with spiritual care and community support

All data will be analyzed to identify trends, inform decision-making, and guide program improvements. Regular audits and performance reviews will ensure data integrity and compliance with funder requirements.

The following table summarizes the data systems and their functions:

System	Function
HMIS	Tracks guest-level data, service utilization, housing outcomes
WellSky	Internal Salvation Army database for Western Territory; supports reporting
LIFNAV Connect	Mobile portal for engagement, goal tracking, and shelter availability
Pathway of Hope	Tracks family progress toward stability and self-sufficiency
Paper Records	Backup documentation for audits, billing, and continuity

This integrated approach ensures that the Access Center operates with transparency, accountability, and responsiveness to guest needs and community goals.

29. CalAIM Medical Respite Experience

The Salvation Army is actively preparing to launch a five-bed Medical Respite program at the Access Center, aligned with the CalAIM initiative. While we do not currently operate a Medical Respite program, we are in the process of contractor certification with both HealthNet and Health Plan of San Joaquin, with the goal of becoming a certified CalAIM provider by May 2026.

Medical Respite, also known as recuperative care, provides short-term residential support for individuals experiencing homelessness who are recovering from illness or injury but do not require hospitalization. The Access Center's design includes dedicated space for these beds, and we will coordinate closely with San Joaquin County Health Services and Behavioral Health to ensure seamless integration with onsite medical and behavioral health services.

Based on national benchmarks, the average length of stay in Medical Respite programs ranges from 30 to 45 days. With five beds operating year-round, we anticipate serving approximately 40 to 60 unique individuals annually. These beds will be prioritized for guests discharged from hospitals, emergency departments, or referred by managed care plans (MCPs) and community providers.

Coordination protocols will include:

- Referral and intake coordination with MCPs, hospitals, and clinics
- Authorization and claims submission for Medi-Cal reimbursement
- Discharge planning in collaboration with referring entities
- Follow-up care coordination to support long-term health stabilization

Outcomes will be tracked using HMIS and WellSky systems, including:

- Discharge destinations
- Health stabilization indicators
- Hospital readmission rates
- Length of stay

- Service utilization
- Guest satisfaction and goal attainment

All data will be submitted monthly to the City of Lodi and shared with County partners as required. Our reporting will comply with Department of Health Care Services (DHCS) standards and CalAIM billing protocols.

To inform our program design, we will draw on lessons learned from other Salvation Army facilities, particularly our Modesto shelter, which has successfully integrated medical and behavioral health services into its low-barrier shelter model. We will collaborate with Modesto leadership to adapt intake procedures, staffing models, and service coordination strategies to meet the unique needs of Lodi's population.

The Salvation Army Lodi Corps
Proposed Access Center Budget

	Year 1 60 Guest Beds	Year 1 Per bed Surge	Year 2 60 Guest Beds	Year 2 Per bed Surge	Year 3 60 Guest Beds	Year 3 Per bed Surge	Year 4 60 Guest Beds	Year 4 Per bed Surge	Year 5 60 Guest Beds	Year 5 Per bed Surge
REVENUE										
City of Lodi Contract	\$1,680,783		\$1,731,206		\$1,783,143		\$1,836,637		\$1,891,736	
Other Revenue	\$25,000		\$25,750		\$26,523		\$27,318		\$28,138	
Gifts In Kind: Food	\$164,250		\$169,178		\$174,253		\$179,480		\$184,865	
Gifts in Kind: Other	\$50,000		\$51,500		\$53,045		\$54,636		\$56,275	
TOTAL REVENUE	\$1,920,033	\$0	\$1,977,634	\$0	\$2,036,963	\$0	\$2,098,072	\$0	\$2,161,014	\$0
EXPENSE										
Salaries & Benefits	\$1,137,488		\$1,171,612		\$1,206,761		\$1,242,964		\$1,280,252	
Food & Meal Expenses	\$262,800		\$270,684		\$278,805		\$287,169		\$295,784	
Janitorial & Laundry Supplies	\$45,000		\$46,350		\$47,741		\$49,173		\$50,648	
Landscape Maintenance Supplies	\$2,500		\$2,575		\$2,652		\$2,732		\$2,814	
Transportation Costs	\$10,000		\$10,300		\$10,609		\$10,927		\$11,255	
Office Supplies & Administrative Expenses	\$15,000		\$15,450		\$15,914		\$16,391		\$16,883	
Technology & Equipment	\$15,000		\$15,450		\$15,914		\$16,391		\$16,883	
Outreach Expenses	\$40,000		\$41,200		\$42,436		\$43,709		\$45,020	
Neighborhood Clean-Up & Good Neighbor Engagement	\$20,000		\$20,600		\$21,218		\$21,855		\$22,510	
Insurance	\$37,239		\$38,357		\$39,507		\$40,693		\$41,913	
Employee Training and Development	\$15,000		\$15,450		\$15,914		\$16,391		\$16,883	
20% NICRA	\$320,005		\$329,606		\$339,494		\$349,679		\$360,169	
TOTAL EXPENSE	\$1,920,033	\$0	\$1,977,634	\$0	\$2,036,963	\$0	\$2,098,071	\$0	\$2,161,014	\$0
Operational Cost per bed night	\$87.67		\$90.30		\$93.01		\$95.80		\$98.68	
Contract Cost per bed night	\$76.75	\$65.00	\$79.05	\$66.95	\$81.42	\$68.96	\$83.86	\$71.03	\$86.38	\$73.16

The Salvation Army

Access Center Budget Methodology

The proposed budget for the Access Center is \$1,920,033 for the first year of operations. Of this total, we propose **\$1,680,783** in funding from the City of Lodi for 60 beds (**\$76.75 per bed night**) with the balance coming from In-kind support (\$189,250) and Other Revenue (\$25,000). For the surge capacity, we propose a flat rate of **\$65.00 per bed night**. We believe this budget is reasonable for the service requested in the RFP.

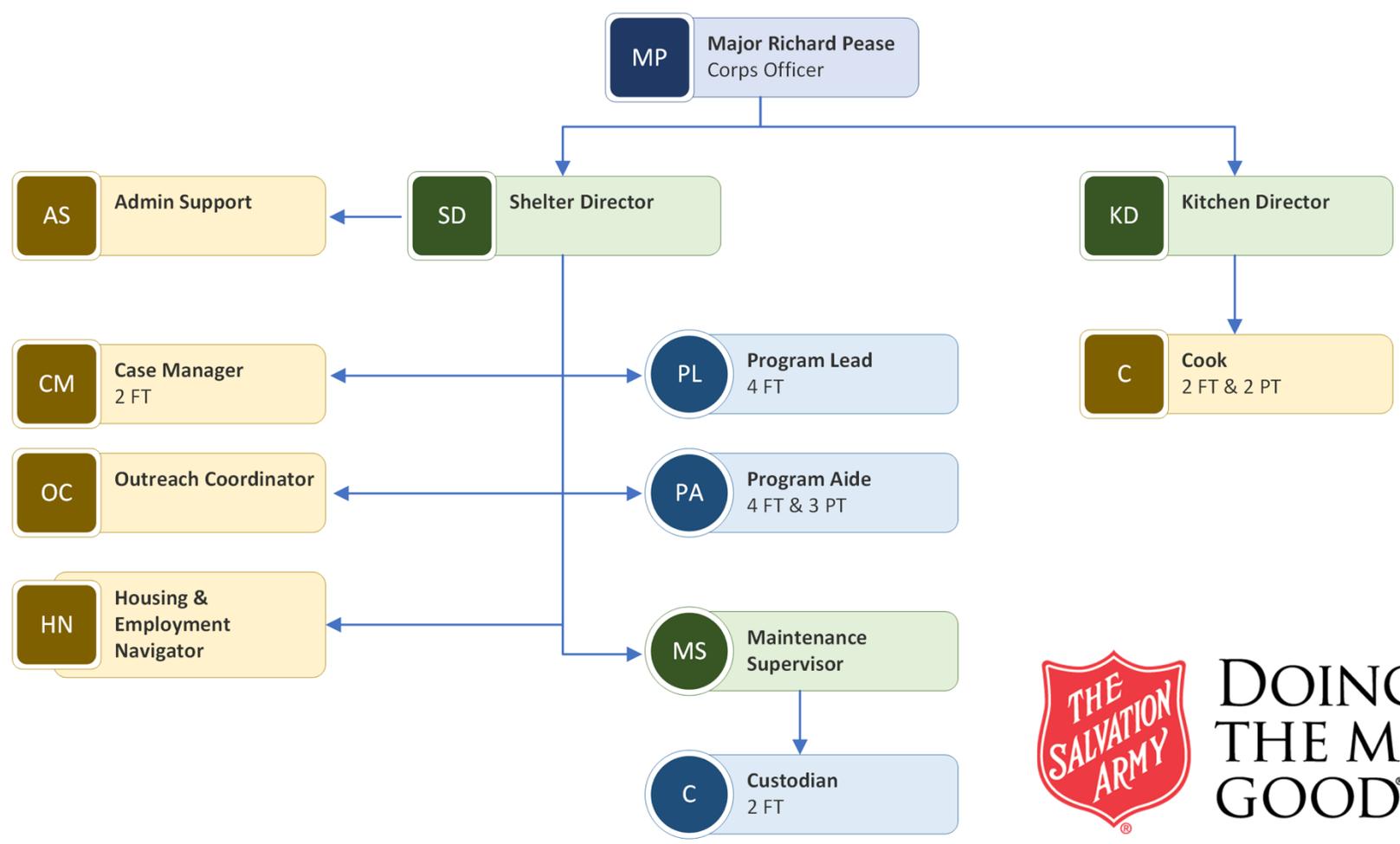
We are also providing budgets for year 2 to 5 of the contract incorporating a 3% annual increase to account for inflation and cost escalation.

This budget assumes 24/7 staffing providing high quality service to Access Center guests and ensures a safe, welcoming environment which promotes self-assessment and self-sufficiency progress.

It is anticipated that there will be additional volunteer support that will enhance service provision and quality, but we have not quantified this in the budget.

The Salvation Army will pursue additional revenue sources for program enhancement and expansion, but until the Access Center is operational it is difficult to determine the nature and scope of those enhancements. If enhancement funding is secured, it will be incorporated into future budgeting and may allow us to reduce the City of Lodi's Access Center operational cost.

Proposed Organizational Chart Lodi Access Center



Staffing Budget Methodology

The staffing plan for the Lodi Action Center reflects a strategic and cost-conscious approach to delivering comprehensive services to guests while maximizing available resources. The plan includes a mix of exempt and non-exempt positions, tailored to support shelter operations, outreach, case management, and administrative functions. This staffing model not only ensures robust coverage across all operational areas but also demonstrates fiscal responsibility by utilizing shared positions with Hope Harbor.

Exempt Positions include leadership and specialized service roles:

- The **Shelter Director** is budgeted at 50% time, leveraging shared staffing with Hope Harbor at the Access Center to reduce costs under this contract.
- Two **Case Managers** and a **Housing & Employment Navigator** are included to provide direct support and guidance to guests.
- An **Outreach Coordinator** will engage with the community and support guest transitions.
- A **Kitchen Director**, also budgeted at 50%, is shared with Hope Harbor, again reducing the cost burden to this contract.

Non-Exempt Positions cover essential operational roles:

- Four **Cooks** (2 FT & 2 PT), each budgeted at 50%, are shared with Hope Harbor, allowing the Lodi Action Center to benefit from experienced staff at half the cost.
- A **Maintenance Supervisor** is also shared at 50%, ensuring facility upkeep while maintaining budget efficiency.
- **Custodians, Program Leads, and Program Aides** are included to maintain cleanliness, safety, and guest support throughout the facility. The Program Lead and Program Aide counts are based on a 4-week rotation that ensures adequate staff coverage during all shifts to maintain a safe environment. (*see sample schedule*)
- An **Administrative Support** role is budgeted at 50%, shared with Hope Harbor, to manage clerical and operational tasks.

Position Summary

Shelter Director – Responsible for day-to-day oversight and operation of the Access Center. Sets the standard for guest service, ensures team is using Housing First approach in the LIFNAV and Pathway of Hope Framework. Works with Corps Officer to identify funding opportunities for program development and service expansion. Provides regular reports on Access Center activity and outcomes.

Administrative Support – Provides support for all volunteer, HR, finance, and reporting needs. Ensures that team is using the HMIS and Wellsky systems, and coordinates onboarding and training for the team.

Case Manager – Using a Housing First approach, works with guests to help them identify their goals and barriers to them. Within the LIFNAV and Pathway of Hope frameworks, guides guests through the process of overcoming barriers and meeting their self-determined goals. Coordinates with other providers to meet guest needs, and works to develop relationships with new guests, encouraging them to access services.

Outreach Coordinator – Works in the community to meet unhoused individuals where they are at, develop relationship, and encourage them to come to the Access Center. Introduces unhoused neighbors to LIFNAV, encouraging them to begin the process of setting self-determined goals and identify barriers to self-sufficiency. Responsible for Good Neighbor Plan execution, scheduling regular cleanup activities, visiting neighbors, and responding to requests for service.

Housing and Employment Navigator – Works with guests and Case Managers to find paths to housing, employment, and skills development. Works with local employers to identify needs and match guests to opportunities. Coordinates workforce development opportunities for guests through The Salvation Army and workforce development partners. Cultivates relationships with landlords to identify housing opportunities for guests. Coordinates housing placement with other agencies to match guests to the resource that meets their needs and self-identified goals.

Program Lead – Leads daily Access Center operational tasks for assigned shift including guest check-in, guest relations, laundry services, guest requests, shelter monitoring, and other operational tasks.

Program Aide – Assists Program Lead with daily Access Center operational tasks.

Kitchen Director – Develops nutritious menus and executes a feeding program that utilizes in-kind donations supplemented by food purchases. Oversees the kitchen team and ensures a safe, clean, healthy dining program.

Cook – Supervised by the Kitchen Director, executes the daily menu, providing guests with nutritious, safe meals in a welcoming environment.

Maintenance Supervisor – Responsible for Access Shelter maintenance including cleaning, basic maintenance, and landscaping.

Custodian – Under the supervision of the Maintenance Supervisor maintains daily cleanliness of the Access Shelter based on a regular cleaning schedule.

4-Week 24/7 Shift Rotation Schedule

Teams Makeup:

Team	Program Lead	Program Aide
A	Program Lead A	Program Aide A
B	Program Lead B	Program Aide B
C	Program Lead C	Program Aide C
D	Program Lead D	Program Aide D

Week 1

Day	Day (7:00 AM – 3:00 PM)	Swing (3:00 PM – 11:00 PM)	Night (11:00 PM – 7:00 AM)	Team OFF	PT Aide (9:00 PM – 5:00 AM)
Mon	Team A	Team B	Team C	D	PT-1
Tue	Team B	Team C	Team D	A	PT-2
Wed	Team C	Team D	Team A	B	PT-3
Thu	Team D	Team A	Team B	C	PT-1
Fri	Team A	Team B	Team C	D	PT-2
Sat	Team B	Team C	Team D	A	PT-3
Sun	Team C	Team D	Team A	B	PT-1

Week 2

Day	Day (7:00 AM – 3:00 PM)	Swing (3:00 PM – 11:00 PM)	Night (11:00 PM – 7:00 AM)	Team OFF	PT Aide (9:00 PM – 5:00 AM)
Mon	Team D	Team A	Team B	C	PT-2
Tue	Team A	Team B	Team C	D	PT-3
Wed	Team B	Team C	Team D	A	PT-1
Thu	Team C	Team D	Team A	B	PT-2
Fri	Team D	Team A	Team B	C	PT-3
Sat	Team A	Team B	Team C	D	PT-1
Sun	Team B	Team C	Team D	A	PT-2

Week 3

Day	Day (7:00 AM – 3:00 PM)	Swing (3:00 PM – 11:00 PM)	Night (11:00 PM – 7:00 AM)	Team OFF	PT Aide (9:00 PM – 5:00 AM)
Mon	Team C	Team D	Team A	B	PT-3
Tue	Team D	Team A	Team B	C	PT-1
Wed	Team A	Team B	Team C	D	PT-2
Thu	Team B	Team C	Team D	A	PT-3
Fri	Team C	Team D	Team A	B	PT-1
Sat	Team D	Team A	Team B	C	PT-2
Sun	Team A	Team B	Team C	D	PT-3

Week 4

Day	Day (7:00 AM – 3:00 PM)	Swing (3:00 PM – 11:00 PM)	Night (11:00 PM – 7:00 AM)	Team OFF	PT Aide (9:00 PM – 5:00 AM)
Mon	Team B	Team C	Team D	A	PT-1
Tue	Team C	Team D	Team A	B	PT-2
Wed	Team D	Team A	Team B	C	PT-3
Thu	Team A	Team B	Team C	D	PT-1
Fri	Team B	Team C	Team D	A	PT-2
Sat	Team C	Team D	Team A	B	PT-3
Sun	Team D	Team A	Team B	C	PT-1



**“This place saved my life,
more than once!”**

*- Jason, Hope Harbor Alumni
& Current Employee*



Contact Us

The Salvation Army
Lodi Corps Community Center &
Hope Harbor Family Services Center

Majors Phyllis & Richard Pease, Corps Officers



Lodi Corps: (209) 369-5896

Hope Harbor: (209) 367-9560



Lodi Corps: 525 W. Lockeford Street

Hope Harbor: 622 N. Sacramento Street



lodi.salvationarmy.org



facebook.com/LodiSalArmy



**THE SALVATION ARMY
LODI CORPS**

**Programs and
Services**

serving Greater Lodi since 1889

In 365 Days, Lodi provided . . .



Meals Served
242,593



Nights Sheltered
22,584



Clothing Given *
30,027



Utility Assistance
104



Toys Given
5,178



Families Housed
61

Financial Assistance (direct & in-kind)

\$1,096,292

Total Services Provided -
Lodi Corps - serving Greater Lodi

300,922

* All data is for fiscal year 2024. Clothing Given includes Comfort Kits to those in need.

Our Mission

The Salvation Army, an international movement, is an evangelical part of the universal Christian Church.

- It's **message** is based on the Bible.
- It's **ministry** is motivated by the love of God.
- It's **mission** is to preach the gospel of Jesus Christ and to meet human needs in His name without discrimination.

Our Commitment

The Salvation Army Lodi Corps & Hope Harbor Family Services Center seeks to serve and support individuals and families seeking shelter and transition to safety and stability. We are committed to the principle of Biblical justice and love, providing equitable access to resources for every member of our community. We strive to promote principles and behaviors that lead to lasting change. We hope that by offering kindness, meeting basic needs, and introducing opportunity, we can promote transformational outcomes for any willing program participant.



DOING
THE MOST
GOOD®

Join Us

- Visit our Church
- Become a financial supporter
- Be a Bellringer - registertoring.com
- Adopt an Angel at Christmas
- Volunteer - volunteer.usawest.org
- Sponsor an event

Please send your tax deductible donations to:

The Salvation Army Lodi Corps
P.O. Box 1388
Lodi, CA 95241-1388

OUR PROGRAMS

CHURCH PROGRAMS

- Sunday School - 9:00 am Sunday
- Holiness Meeting - 10:00 am Sunday
- Bible Study
- Celebrate Recovery *Coming Soon*

EMERGENCY PROGRAMS

- Cooling/Warming Center
- Overnight Shelter for Men, Women, & Families
- Community Dinner - 5:00 pm Daily
- Shower Access - 5:30 pm Daily
- Friday Fair

HOUSING PROGRAMS

- Transitional Living for Men & Women
- Support Team Housing for Men & Women

SPECIALIZED PROGRAMS

- Pre-Program Rehab Services for Men & Women
- Residential Culinary Training Program

FAMILY SERVICES

Contact: (209) 369-5896

- Emergency Food Boxes
- Sally Bags
- Utility Assistance

SEASONAL PROGRAMS

- Thanksgiving Day Meal
- Christmas Assistance
- Summer Camp
- Back To School Supplies

RESOLUTION NO. 2026-_____

A RESOLUTION OF THE LODI CITY COUNCIL AWARDING OPERATION OF THE LODI ACCESS CENTER AND EMERGENCY SHELTER TO THE COUNCIL-SELECTED OPERATOR, BASED ON RANKING AND RECOMMENDATION PROVIDED BY THE EVALUATION COMMITTEE, OF OUTREACH MINISTRIES INTERNATIONAL, INC. AND AUTHORIZING STAFF TO NEGOTIATE AN AGREEMENT AND RETURN TO CITY COUNCIL FOR FINAL CONTRACT APPROVAL

=====

WHEREAS, the City of Lodi issued a Request for Proposals (RFP) for the operation of the permanent Lodi Access Center and Emergency Shelter; and

WHEREAS, five proposals were received, one of which was determined to be non-responsive; and

WHEREAS, four complete and responsive proposals were evaluated and ranked based on written proposals and interviews by an Evaluation Committee Comprised of community stakeholders and representatives from other local jurisdictions; and

WHEREAS, the City Council has reviewed the information and ranking provided by the Evaluation Committee and desires to award operation of the Lodi Access Center and Emergency Shelter to the Council-selected operator based on ranking and recommendation of the Evaluation Committee, and to authorize final contract negotiations.

NOW, THEREFORE, BE IT RESOLVED that the Lodi City Council does hereby award operation of the Lodi Access Center and Emergency Shelter to Outreach Ministries International, Inc., and authorize City Staff to negotiate an agreement consistent with the RFP scope of services, and to return to City Council for final contract approval.

Dated: January 27, 2026

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I hereby certify that Resolution No. 2026-_____ was passed and adopted by the City Council of the City of Lodi in a special meeting held January 27, 2026, by the following votes:

- AYES: COUNCIL MEMBERS –
- NOES: COUNCIL MEMBERS –
- ABSENT: COUNCIL MEMBERS –
- ABSTAIN: COUNCIL MEMBERS –

OLIVIA NASHED
City Clerk

2026-_____