

File No. 160343

Committee Item No. 7

Board Item No. 26

### COMMITTEE/BOARD OF SUPERVISORS

#### AGENDA PACKET CONTENTS LIST

Committee: Rules Committee

Date April 14, 2016

Board of Supervisors Meeting

Date April 26, 2016

#### Cmte Board

- Motion
- Resolution
- Ordinance
- Legislative Digest
- Budget and Legislative Analyst Report
- Legislative Analyst Report
- Youth Commission Report
- Introduction Form (for hearings)
- Department/Agency Cover Letter and/or Report
- MOU
- Grant Information Form
- Grant Budget
- Subcontract Budget
- Contract/Agreement
- Form 126 – Ethics Commission
- Award Letter
- Application
- Public Correspondence

#### OTHER (Use back side if additional space is needed)

- Information Sheet \_\_\_\_\_
- Vacancy Notice \_\_\_\_\_
- \_\_\_\_\_
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Completed by: Derek Evans Date April 11, 2016

Completed by: Derek Evans Date April 20, 2016

An asterisked item represents the cover sheet to a document that exceeds 25 pages.  
The complete document can be found in the file.

1 [Reappointments, In-Home Supportive Services Public Authority - Patricia Webb, Patricia  
2 Wooley, Rita Semel, Judith Karshmer, Tatiana Kostanian, and Melvin Beetle]

3 **Motion reappointing Patricia Webb, Patricia Wooley, Rita Semel, Judith Karshmer,**  
4 **Tatiana Kostanian, and Melvin Beetle, terms ending March 1, 2019, to the In-Home**  
5 **Supportive Services Public Authority.**

6  
7 **MOVED,** That the Board of Supervisors of the City and County of San Francisco does  
8 hereby appoint the following designated persons to serve as members of the In-Home  
9 Supportive Services Public Authority, pursuant to the provisions of California Welfare and  
10 Institutions Code, Section 12301.6, and San Francisco Administrative Code, Chapter 70, for  
11 the terms specified:

12 Patricia Webb, seat 2, succeeding herself, term expired, must be a consumer  
13 between the ages of 18 and 60, authorized to represent organizations that advocate for  
14 younger people with disabilities, for a three-year term ending March 1, 2019.

15 Patricia Wooley, seat 4, succeeding herself, term expired, must be a worker who  
16 provides personal assistance services to a consumer, for a three-year term ending March 1,  
17 2019.

18 Rita Semel, seat 6, succeeding herself, term expired, must be a member of the  
19 Human Services Commission, recommended to the Board by the Commission, for a three-  
20 year term ending March 1, 2019.

21 Judith Karshmer, seat 8, succeeding herself, term expired, must be a member of the  
22 Health Commission, recommended to the Board by the Commission, for a three-year term  
23 ending March 1, 2019.

1           Tatiana Kostanian, seat 8, succeeding herself, term expired, must be a member of  
2 the Mayor's Disability Council, recommended to the Board by the Council, for a three-year  
3 term ending March 1, 2019.

4           Melvin Beetle, seat 10, succeeding himself, term expired, must be a consumer over  
5 the age of 55, authorized to represent organizations that advocate for aging people with  
6 disabilities, for a three-year term ending March 1, 2019.

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Board of Supervisors  
 City and County of San Francisco  
 1 Dr. Carlton B. Goodlett Place, Room 244  
 (415) 554-5184 FAX (415) 554-5163

RECEIVED  
 OFFICE OF SUPERVISOR  
 DISTRICT 5

FEB 26 AM 8:12

*PJ*

**Application for Boards, Commissions, Committees, & Task Forces**

Name of Board, Commission, Committee, or Task Force: In Home Supportive Services Public Authority

Seat # or Category (If applicable): 2 District: 5

Name: Patricia ("Tricia") Webb

Home Address: [REDACTED] Eddy Street, [REDACTED] SF, CA Zip: 94115

Home Phone: [REDACTED] Occupation: Retired

Work Phone: \_\_\_\_\_ Employer: \_\_\_\_\_

Business Address: \_\_\_\_\_ Zip: \_\_\_\_\_

Business E-Mail: \_\_\_\_\_ Home E-Mail: [REDACTED]

**Pursuant to Charter, Section 4.101(a)(2), Boards and Commissions established by the Charter must consist of electors (registered voters) of the City and County of San Francisco. For certain other bodies, the Board of Supervisors can waive the residency requirement.**

Check All That Apply:

Resident of San Francisco: Yes  No  If No, place of residence: \_\_\_\_\_

Registered Voter in San Francisco: Yes  No  If No, where registered: \_\_\_\_\_

**Pursuant to Charter, Section 4.101(a)(1), please state how your qualifications represent the communities of interest, neighborhoods, and the diversity in ethnicity, race, age, sex, sexual orientation, gender identity, types of disabilities, and any other relevant demographic qualities of the City and County of San Francisco:**

African-American female in her fifties. Wheelchair user. Mother of two adult sons. Current IHSS board member/former officer (secretary). IHSS consumer. Disability rights advocate.

**Business and/or professional experience:**


Planning for Elders (now Senior and Disability Action) volunteer.  
Service Connect Peer Advocate.  
Community Living Campaign (CLC) volunteer.

**Civic Activities:**

Healthcare Action Team (HAT).  
Senior Survival School.  
Long Term Care Coordinating Council (LTCCC).  
Community Alliance for Disability Advocates (CADA).

Have you attended any meetings of the Board/Commission to which you wish appointment?    Yes  No

Appointments confirmed by the Board of Supervisors require an appearance before the Rules Committee. Once your application is received, the Rules Committee Clerk will contact you when a hearing is scheduled. *(Please submit your application 10 days before the scheduled hearing.)*

Date: 2/4/16    Applicant's Signature: (required) 

(Manually sign or type your complete name.  
NOTE: By typing your complete name, you are hereby consenting to use of electronic signature.)

**Please Note:** Your application will be retained for one year. Once completed, this form, including all attachments, become public record.

**FOR OFFICE USE ONLY:**

Appointed to Seat #: \_\_\_\_\_ Term Expires: \_\_\_\_\_ Date Seat was Vacated: \_\_\_\_\_



Board of Supervisors  
 City and County of San Francisco  
 1 Dr. Carlton B. Goodlett Place, Room 244  
 (415) 554-5184 FAX (415) 554-5163

DATED 26 APR 12

*B*

**Application for Boards, Commissions, Committees, & Task Forces**

Name of Board, Commission, Committee, or Task Force: In Home Supportive Services Public Authority

Seat # or Category (If applicable): 4 District: 10

Name: Patricia Annette Wooley

Home Address: ██████████ 22nd Street, ██████████ SF, CA Zip: 94107

Home Phone: 415-821-1896 Occupation: Independent Provider

Work Phone: ██████████ Employer: In Home Supportive Services

Business Address: \_\_\_\_\_ Zip: \_\_\_\_\_

Business E-Mail: woolp51@live.com Home E-Mail: ██████████

Pursuant to Charter, Section 4.101(a)(2), Boards and Commissions established by the Charter must consist of electors (registered voters) of the City and County of San Francisco. For certain other bodies, the Board of Supervisors can waive the residency requirement.

Check All That Apply:

Resident of San Francisco: Yes  No  If No, place of residence: \_\_\_\_\_

Registered Voter in San Francisco: Yes  No  If No, where registered: \_\_\_\_\_

Pursuant to Charter, Section 4.101(a)(1), please state how your qualifications represent the communities of interest, neighborhoods, and the diversity in ethnicity, race, age, sex, sexual orientation, gender identity, types of disabilities, and any other relevant demographic qualities of the City and County of San Francisco:

I am an African-American woman in her early '60s. The passion and commitment for the work I provide seniors and people with disabilities as well as my fellow IP workers push and drive me to search for other resources to incorporate along with the services I bring to the client/consumer. I am an advocate for both sides and am looking for ways that I can make a change for those in need of services no matter what their ethnicity, race, age, sex, sexual orientation or gender identity. I feel I have something to offer all these people.

**Business and/or professional experience:**

Over 30 years of banking and investment banking customer service/receptionist, where I performed all administrative tasks. Supervisor at Investors Bank & Trust Corporation Department. Student at City College--completed medical office certification program.

**Civic Activities:**

Donate and contribute to struggling families in need of food, shelter, referrals to agencies that can assist them.

Have you attended any meetings of the Board/Commission to which you wish appointment? Yes  No

Appointments confirmed by the Board of Supervisors require an appearance before the Rules Committee. Once your application is received, the Rules Committee Clerk will contact you when a hearing is scheduled. *(Please submit your application 10 days before the scheduled hearing.)*

Date: 2-4-2016 Applicant's Signature: (required) Patricia A. Wooley  
(Manually sign or type your complete name.  
NOTE: By typing your complete name, you are hereby consenting to use of electronic signature.)

**Please Note:** Your application will be retained for one year. Once completed, this form, including all attachments, become public record.

**FOR OFFICE USE ONLY:**

Appointed to Seat #: \_\_\_\_\_ Term Expires: \_\_\_\_\_ Date Seat was Vacated: \_\_\_\_\_



Board of Supervisors  
 City and County of San Francisco  
 1 Dr. Carlton B. Goodlett Place, Room 244  
 (415) 554-5184 FAX (415) 554-5163

APPROVED  
 MAY 26 AM 8:10  
 BZ

**Application for Boards, Commissions, Committees, & Task Forces**

Name of Board, Commission, Committee, or Task Force: In Home Supportive Services Public Authority

Seat # or Category (If applicable): 6 District: 2

Name: Rita R. Semel

Home Address: [REDACTED] Washington Street, [REDACTED] SF, CA Zip: 94109

Home Phone: [REDACTED] Occupation: Retired

Work Phone: \_\_\_\_\_ Employer: \_\_\_\_\_

Business Address: \_\_\_\_\_ Zip: \_\_\_\_\_

Business E-Mail: \_\_\_\_\_ Home E-Mail: [REDACTED]

**Pursuant to Charter, Section 4.101(a)(2), Boards and Commissions established by the Charter must consist of electors (registered voters) of the City and County of San Francisco. For certain other bodies, the Board of Supervisors can waive the residency requirement.**

Check All That Apply:

Resident of San Francisco: Yes  No  If No, place of residence: \_\_\_\_\_

Registered Voter in San Francisco: Yes  No  If No, where registered: \_\_\_\_\_

**Pursuant to Charter, Section 4.101(a)(1), please state how your qualifications represent the communities of interest, neighborhoods, and the diversity in ethnicity, race, age, sex, sexual orientation, gender identity, types of disabilities, and any other relevant demographic qualities of the City and County of San Francisco:**

I am a woman of Jewish heritage in her 90's. I have been involved in community relations for more than 50 years. I am a past president of the Family Services Agency. Served on the boards of United Way, Catholic Charities and Jewish Family and Children Services. Founder and past chair of the San Francisco Interfaith Council. Have served for many years on the SF Homeless Board.



**Business and/or professional experience:**

I was Executive Director of the Jewish Community Relations Council,  
Associate editor of the Jewish Community Bulletin.  
I also worked as a reporter for the SF Chronicle during World War II.

**Civic Activities:**

See previous paragraph.

Have you attended any meetings of the Board/Commission to which you wish appointment?    Yes  No

Appointments confirmed by the Board of Supervisors require an appearance before the Rules Committee. Once your application is received, the Rules Committee Clerk will contact you when a hearing is scheduled. *(Please submit your application 10 days before the scheduled hearing.)*

Date: 8 Feb 2016    Applicant's Signature: (required) *W. A. Sewell*

(Manually sign or type your complete name.  
NOTE: By typing your complete name, you are hereby consenting to use of electronic signature.)

**Please Note:** Your application will be retained for one year. Once completed, this form, including all attachments, become public record.

**FOR OFFICE USE ONLY:**

Appointed to Seat #: \_\_\_\_\_ Term Expires: \_\_\_\_\_ Date Seat was Vacated: \_\_\_\_\_

# City and County of San Francisco



Edwin M. Lee, Mayor

# Human Services Commission

Pablo Stewart, M.D., President  
Rita Semel, Vice President  
Scott Kahn  
James McCray, Jr.  
George Yamasaki, Jr.

Louise Rainey, Secretary

February 18, 2016

Angela Calvillo  
Clerk of the San Francisco Board of Supervisors  
1 Dr. Carlton B. Goodlett Place  
City Hall – Room 244  
San Francisco, California 94102-4689

Dear Ms. Calvillo,

I am pleased to again recommend Human Services Commission Vice President Rita Semel to the San Francisco In-Home Health Support Services Public Authority Governing Board.

Ms. Semel served as Associate Director and then Executive Director of the Jewish Community Relations Council, where she built important coalitions and organized campaigns to advance a just society and a secure Jewish future. For more than five decades, she has mobilized broad coalitions to advance common causes of social concern, worked to advocate for those most in need, and built long lasting relationships among the Bay Area's many communities.

Ms. Semel helped found the San Francisco Interfaith Council in 1990, and her tenure has been marked by orchestrating significant programs which have a direct impact on the lives of San Franciscans – from the emergency winter shelter program for the homeless, for which she has galvanized multi-faith and City cooperation, to the chaplaincy program at the Youth Guidance Center.

Ms. Semel has served as the unofficial, trusted ambassador of the Jewish community to other religious communities for decades. Through the Jewish Community Relations Council, and later working on a national level through Project Interchange, she has led dozens of clergy from other faiths to Israel, to learn about the Jewish community's relationship to the land, people, and their history, and the American and worldwide Jewish experience.

Ms. Semel has already proved an asset to the Governing Board, and I am confident that she will continue to be one moving forward.

Sincerely,

Pablo Stewart, M.D., President  
San Francisco Human Services Commission

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FEB 23 01 01:13  
CITY AND COUNTY OF SAN FRANCISCO  
HUMAN SERVICES COMMISSION



Board of Supervisors  
 City and County of San Francisco  
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 HEREIN IS UNCLASSIFIED  
 DATE 07-25 AM 8:10  
 B

**Application for Boards, Commissions, Committees, & Task Forces**

Name of Board, Commission, Committee, or Task Force: In Home Supportive Services Public Authority

Seat # or Category (If applicable): 8 District: 2

Name: Judith F. Karshmer

Home Address: Chabot Terrace SF, CA Zip: 94118

Home Phone: 813-333-5222 Occupation: Professor/Dean

Work Phone: [REDACTED] Employer: University of San Francisco (USF)

Business Address: 2130 Fulton Street SF, CA Zip: 94117

Business E-Mail: jfkarshmer@usfca.edu Home E-Mail: [REDACTED]

Pursuant to Charter, Section 4.101(a)(2), Boards and Commissions established by the Charter must consist of electors (registered voters) of the City and County of San Francisco. For certain other bodies, the Board of Supervisors can waive the residency requirement.

Check All That Apply:

Resident of San Francisco: Yes  No  If No, place of residence: \_\_\_\_\_

Registered Voter in San Francisco: Yes  No  If No, where registered: \_\_\_\_\_

Pursuant to Charter, Section 4.101(a)(1), please state how your qualifications represent the communities of interest, neighborhoods, and the diversity in ethnicity, race, age, sex, sexual orientation, gender identity, types of disabilities, and any other relevant demographic qualities of the City and County of San Francisco:

68-year-old Jewish woman. Widowed.

**Business and/or professional experience:**

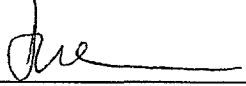
Registered nurse. Psychiatric nurse practitioner. Professor of Nursing. Dean of the School of Nursing & Health Professions (USF).

**Civic Activities:**

St. Mary's Medical Center Community Board.  
San Francisco Health Commission.

Have you attended any meetings of the Board/Commission to which you wish appointment?    Yes  No

Appointments confirmed by the Board of Supervisors require an appearance before the Rules Committee. Once your application is received, the Rules Committee Clerk will contact you when a hearing is scheduled. *(Please submit your application 10 days before the scheduled hearing.)*

Date: 02/05/16 Applicant's Signature: (required)   
(Manually sign or type your complete name.  
NOTE: By typing your complete name, you are hereby consenting to use of electronic signature.)

**Please Note:** Your application will be retained for one year. Once completed, this form, including all attachments, become public record.

**FOR OFFICE USE ONLY:**  
Appointed to Seat #: \_\_\_\_\_ Term Expires: \_\_\_\_\_ Date Seat was Vacated: \_\_\_\_\_

Edward A. Chow, M.D.  
President

David B. Singer  
Vice President

Cecilia Chung  
Commissioner

Judith Karshmer, Ph.D., PMHCNS-BC.  
Commissioner

David Pating, M.D.  
Commissioner

David J. Sanchez, Jr., Ph.D.  
Commissioner

Belle Taylor-McGhee  
Commissioner

**HEALTH COMMISSION  
CITY AND COUNTY OF SAN  
FRANCISCO**

**Edwin M. Lee, Mayor  
Department of Public Health**



Barbara A. Garcia, M.P.A.  
Director of Health

Mark Morewitz, M.S.W.  
Executive Secretary

TEL (415) 554-2666

FAX (415) 554-2665

Web Site: <http://www.sfdph.org>

February 16, 2016

Angela Calvillo  
Clerk of the San Francisco Board of Supervisors  
1 Dr. Carlton B. Goodlett Place  
City Hall, Room 244  
San Francisco, CA 94102-4689

RECEIVED  
FEB 16 2016  
CITY AND COUNTY OF SAN FRANCISCO  
OFFICE OF THE CLERK

Dear Ms. Calvillo,

I am pleased to recommend Commissioner Judith Karshmer, Ph.D, PMHCNS-BC to continue her tenure on the San Francisco In-Home Health Support Services Public Authority Governing Board.

Dr. Karshmer is the Dean of the School of Nursing & Health Professions at the University of San Francisco (USF) and in that capacity has been instrumental in reconfiguring the MSN-CNL program with multiple entry options for both the nurse and non-nurse applicant. Under her leadership, USF launched the first DNP program in California in 2007 and currently has DNP programming for post-baccalaureate students, a DNP completion program for masters' prepared nurses, and a track for the executive nurse leader.

Dr. Karshmer completed her undergraduate degree in nursing at the University of Iowa, graduate degree in advanced psychiatric- mental health nursing at Rutgers University, masters in social psychology at the University of Massachusetts, and Ph.D at New Mexico State University. She was appointed to the Health Commission in May 2013 and is Chair of the Laguna Honda Hospital Joint Conference Committee.

The Board of Supervisors approved Dr. Karshmer's appointment to the In-Home Health Support Services (IHHS) Public Authority Governing Board in 2013. I am confident if given the opportunity, she will continue to make impactful contributions to the IHHS Public Authority Governing Board.

Sincerely,

A handwritten signature in black ink, appearing to read "Edward A. Chow".

Edward A. Chow, MD  
President  
San Francisco Health Commission

cc: Health Commission Correspondence file



Board of Supervisors  
 City and County of San Francisco  
 1 Dr. Carlton B. Goodlett Place, Room 244  
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 BOARD OF SUPERVISORS  
 SAN FRANCISCO  
 ADOPTED 25 APR 01 12  
 B

**Application for Boards, Commissions, Committees, & Task Forces**

Name of Board, Commission, Committee, or Task Force: In Home Supportive Services Public Authority

Seat # or Category (If applicable): 9 District: 4

Name: Tatiana A. Kostanian

Home Address: [REDACTED] 26th Avenue SF, CA Zip: 94122

Home Phone: [REDACTED] Occupation: MHONA International Director

Work Phone: [REDACTED] Employer: MHONA International

Business Address: Box 22162 SF, CA Zip: 94122-3218

Business E-Mail: mhonainternational@gmail.com Home E-Mail: [REDACTED]

Pursuant to Charter, Section 4.101(a)(2), Boards and Commissions established by the Charter must consist of electors (registered voters) of the City and County of San Francisco. For certain other bodies, the Board of Supervisors can waive the residency requirement.

Check All That Apply:

Resident of San Francisco: Yes  No  If No, place of residence: \_\_\_\_\_

Registered Voter in San Francisco: Yes  No  If No, where registered: \_\_\_\_\_

Pursuant to Charter, Section 4.101(a)(1), please state how your qualifications represent the communities of interest, neighborhoods, and the diversity in ethnicity, race, age, sex, sexual orientation, gender identity, types of disabilities, and any other relevant demographic qualities of the City and County of San Francisco:

A senior female in her early '70s. Wheelchair user. Since 1962, owner and founder of MHONA International, a nonprofit that works with, assists and supports the profoundly disabled and their communities. Offers a Hold Help Support Line for people with disabilities and older adults.

**Business and/or professional experience:**

Worked on Gavin Newsom's mayoral campaign (1 year).  
Medical secretary at UC Hospital (3 years).  
Bank of America/Public Affairs Dept. (3 years).  
American President Lines/Purchasing Dept. (14 years).  
Liberty Mutual Insurance Receptionist/Typist (4 years).  
Mutual of New York Secretary/Typist/Receptionist (5 years).

**Civic Activities:**

SF Mayor's Disability Council member  
SF IHSS Public Authority Governing Body member  
SF City College Board for the Homeless  
SF General Hospital CAB Board  
SF Mental Health Consumer & Family Board  
SF Rotary Club--Disabled Representative-Advocate (Secretary)  
SF Coalition for Global Change  
Pathways to Peace

Have you attended any meetings of the Board/Commission to which you wish appointment? Yes  No

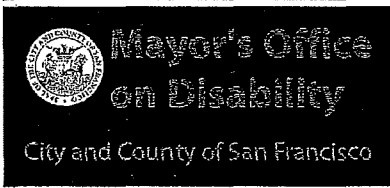
Appointments confirmed by the Board of Supervisors require an appearance before the Rules Committee. Once your application is received, the Rules Committee Clerk will contact you when a hearing is scheduled. *(Please submit your application 10 days before the scheduled hearing.)*

Date: 2-9-16 Applicant's Signature: (required) *Tatiana A. Kestanian*

(Manually sign or type your complete name.  
NOTE: By typing your complete name, you are hereby consenting to use of electronic signature.)

**Please Note:** Your application will be retained for one year. Once completed, this form, including all attachments, become public record.

FOR OFFICE USE ONLY:  
Appointed to Seat #: \_\_\_\_\_ Term Expires: \_\_\_\_\_ Date Seat was Vacated: \_\_\_\_\_



Edwin M. Lee  
Mayor  
Naomi Kelly  
City Administrator  
Carla Johnson, CBO, CASp.  
Director

February 19, 2016

Angela Calvillo  
Clerk of the San Francisco Board of Supervisors  
1 Dr. Carlton B. Goodlett Place  
City Hall, Room 244  
San Francisco, CA 94102-4689

Re: MOD/MDC Appointment to the SF IHSS Public Authority Governing Body

Dear Ms. Calvillo:

I am writing to inform you that the Mayor's Office on Disability/Mayor's Disability Council are recommending to the Rules Committee and the Board of Supervisors that MDC Member Tatiana A. Kostanian be reappointed to Seat 9 (Member of the MDC) on the SF IHSS Public Authority Governing Body.

During her many years as a disability rights advocate, Ms. Kostanian has served on the SF City College Board for the Homeless, SF General Hospital CAB Board, SF Mental Health Consumer & Family Board and Pathways to Peace, to name only a few. Since 1962, she has run MHONA International, a nonprofit that works with, assists and supports the profoundly disabled and their communities.

Ms. Kostanian has proven herself a valuable member of both the MDC and the PA Governing Body. She is very interested in and knowledgeable about issues affecting low-income older adults and people with disabilities. We feel that she has been an important addition to the PA Governing Body and strongly support her continuing in that position.

If you have any questions, please feel free to call me at (415) 554-6789.

Sincerely,

Carla Johnson, CBO, CASp  
Director

Cc: Chip Supanich, Co-chair Mayor's Disability Council  
Denise Senhaux, Co-chair Mayor's Disability Council





**Board of Supervisors**  
**City and County of San Francisco**  
**1 Dr. Carlton B. Goodlett Place, Room 244**  
**(415) 554-5184 FAX (415) 554-5163**

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 BOARD OF SUPERVISORS  
 SAN FRANCISCO

FEB 26 AM 8:12

*[Handwritten signature]*

**Application for Boards, Commissions, Committees, & Task Forces**

Name of Board, Commission, Committee, or Task Force: In Home Supportive Services Public Authority

Seat # or Category (If applicable): 10 District: 6

Name: Melvin ("Mel") E. Beetle

Home Address: [Redacted] 1011 Howard St., [Redacted] SF, CA Zip: 94103

Home Phone: 4 [Redacted] Occupation: Retired

Work Phone: \_\_\_\_\_ Employer: \_\_\_\_\_

Business Address: \_\_\_\_\_ Zip: \_\_\_\_\_

Business E-Mail: \_\_\_\_\_ Home E-Mail: [Redacted]

**Pursuant to Charter, Section 4.101(a)(2), Boards and Commissions established by the Charter must consist of electors (registered voters) of the City and County of San Francisco. For certain other bodies, the Board of Supervisors can waive the residency requirement.**

Check All That Apply:

Resident of San Francisco: Yes  No  If No, place of residence: \_\_\_\_\_

Registered Voter in San Francisco: Yes  No  If No, where registered: \_\_\_\_\_

**Pursuant to Charter, Section 4.101(a)(1), please state how your qualifications represent the communities of interest, neighborhoods, and the diversity in ethnicity, race, age, sex, sexual orientation, gender identity, types of disabilities, and any other relevant demographic qualities of the City and County of San Francisco:**

I am blind in my left eye and have a few residual limitations from my 11/04 stroke. I am a 76-year-old senior, gay, with a domestic partner who is also disabled and on SDI. The Raman Hotel, where I live, is the only SRO here for mostly seniors of whom many are disabled but wish to live independently. They, like me, have IHSS care providers. I am Caucasian but part Native American. I use a walker and cannot climb stairs. I've been a senior peer counselor and involved in many advocacy activities for older adults and people with disabilities. I've served on the IHSS Public Authority Governing Body for the past year.

**Business and/or professional experience:**

Ten years in the Peace Corps. Elementary and high school teacher. College/university professor. Federal Government Program Evaluation Director. As a training officer in the Peace Corps, I supervised anywhere from 50 to 150 employees. Trained the first deaf, blind and physically disabled Peace Corps volunteers. Taught special needs students.

**Civic Activities:**

Senior Action Network (now SDA) volunteer. Senior Homeless Task Force vice president. Only formerly homeless member of Ten Year Plan to End Homelessness Council for San Francisco. Volunteer worker at senior centers. Pollworker for many years. Raman Hotel tenant organizer. Central City SRO Collaborative (CCSRO) tenant leadership program.

Have you attended any meetings of the Board/Commission to which you wish appointment? Yes  No

Appointments confirmed by the Board of Supervisors require an appearance before the Rules Committee. Once your application is received, the Rules Committee Clerk will contact you when a hearing is scheduled. *(Please submit your application 10 days before the scheduled hearing.)*

Date: 2/1/2016 Applicant's Signature: (required) Mel E. Beetle

(Manually sign or type your complete name.  
NOTE: By typing your complete name, you are hereby consenting to use of electronic signature.)

**Please Note:** Your application will be retained for one year. Once completed, this form, including all attachments, become public record.

**FOR OFFICE USE ONLY:**

Appointed to Seat #: \_\_\_\_\_ Term Expires: \_\_\_\_\_ Date Seat was Vacated: \_\_\_\_\_

San Francisco  
BOARD OF SUPERVISORS

Date Printed: June 18, 2015

Date Established:

June 9, 1995

Active

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**IN-HOME SUPPORTIVE SERVICES PUBLIC AUTHORITY**

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**Contact and Address:**

Patrick D Hoctel  
In-Home Supportive Services Public Authority  
832 Folsom Street, 9th Floor  
San Francisco, CA 94107

Phone: (415) 593-8117

Fax:

Email: phoctel@sfihsppa.org

**Authority:**

---

Administrative Code, Chapter 70, and California Welfare and Institutions Code, Section 12301.6 (Ordinance Nos. 185-95; 67-00, 55-05, and 213-08).

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**Board Qualifications:**

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The governing body of the In-Home Supportive Services (IHSS) Public Authority shall be composed of thirteen (13) members appointed by the Board of Supervisors. The Board of Supervisors shall solicit recommendations for appointment of qualified members through a fair and open process, including reasonable written notice to, and affording reasonable response time from, the IHSS Authority, members of the general public, and other interested persons and organizations. No fewer than 50 percent (50%) of the membership shall be individuals who are current or past users of personal assistance services paid for through public or private funds or who are recipients of IHSS.

Membership categories on the governing body shall be as follows:

1. Two (2) consumers over the age of 55 years, each authorized to represent organizations that advocate for aging people with disabilities;
2. Two (2) consumers between the ages of 18 and 60 years, each authorized to represent organizations that advocate for younger people with disabilities;
3. One (1) consumer at-large over the age of 55 years;
4. One (1) consumer at-large between the ages of 18 and 60 years;
5. One (1) worker who provides personal assistance services to a consumer;
6. One (1) Commissioner from the Human Services Commission, recommended to the Board by the Commission;

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7. One (1) Commissioner from the Commission on the Aging, recommended to the Board by the Commission;
8. One (1) Commissioner from the Public Health Commission, recommended to the Board by the Commission;
9. One (1) member of the Mayor's Disability Council, recommended to the Board by the Council;
10. One (1) member representing the bargaining unit of the union that represents IHSS independent providers; and
11. One (1) consumer at-large who is 18 years of age or older.

The IHSS Public Authority shall provide assistance in finding personnel for the IHSS Programs through the establishment of a central registry and related functions, and to perform any other functions, as may be necessary for the operation of the Authority, or related to the delivery of IHSS in San Francisco.

Initial appointments of both the consumer and worker members shall be made from a list of recommendations based on applications designed by, and submitted to, the IHSS Task Force of Planning for Elders in the Central City. The governing body of the Authority may make recommendations to the Board of Supervisors for establishing procedures for consumer and worker member appointments. Every attempt shall be made to assure that each appointee will be able to serve the full term to which he/she has been appointed, in order to ensure continuity in the work of the Authority.

After the terms of the initial period are complete, each appointment to the governing body shall thereafter be for a three-year term. A member may be reappointed, but may not serve more than a total of nine consecutive years on the governing body. The initial appointment periods shall be staggered as follows: Three (3) one-year terms; Four (4) two-year terms; and Four (4) three-year terms. Upon appointment, members shall draw lots to determine the length of each member's initial term.

Qualified applicants must reside in San Francisco and have: familiarity with, or knowledge of, personal assistance services; the capacity to understand their role to aid and assist the Authority in the administration of its duties; and the ability to attend regularly scheduled meetings, which shall occur only in facilities which meet disability access requirements.

Report: The Authority shall submit an annual report to the Board of Supervisors detailing its functions and evaluating its operation for that year. In addition, such report shall present the Authority's specific goals and objectives for the coming year and its plan for meeting those goals and objectives.

Sunset Date: None.

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BOARD of SUPERVISORS



City Hall  
1 Dr. Carlton B. Goodlett Place, Room 244  
San Francisco 94102-4689  
Tel. No. 554-5184  
Fax No. 554-5163  
TDD/TTY No. 554-5227

## VACANCY NOTICE

### IN-HOME SUPPORTIVE SERVICES PUBLIC AUTHORITY (IHSS)

#### Replaces All Previous Notices

NOTICE IS HEREBY GIVEN of the following vacancies:

**Vacant seat 2**, succeeding Patricia Webb, term expired, must be a consumer between the ages of 18 and 60, authorized to represent organizations that advocate for younger people with disabilities, for a three-year term ending March 1, 2019.

**Vacant seat 3**, succeeding Sharon Brunn, term expired, must be a consumer at-large over the age of 55, for the unexpired portion of a three-year term ending March 1, 2017.

**Vacant seat 4**, succeeding Patricia Wooley, term expired, must be a worker who provides personal assistance services to a consumer, for a three-year term ending March 1, 2019.

**Vacant seat 6**, succeeding Rita Semel, term expired, must be a member of the Human Services Commission, recommended to the Board by the Commission, for a three-year term ending March 1, 2019.

**Vacant seat 8**, succeeding Judith Karshmer, term expired, must be a member of the Health Commission, recommended to the Board by the Commission, for a three-year term ending March 1, 2019.

**Vacant seat 9**, succeeding Tatiana Kostanian, term expired, must be a member of the Mayor's Disability Council, recommended to the Board by the Council, for a three-year term ending March 1, 2019.

**Vacant seat 10**, succeeding Melvin Beetle, term expired, must be a consumer over the age of 55, authorized to represent organizations that advocate for aging people with disabilities, for a three-year term ending March 1, 2019.

**Vacant seat 11**, succeeding Luis Calderon, term expired, must be a consumer between the ages of 18 and 60, authorized to represent organizations that advocate for younger people with disabilities, for a three-year term ending March 1, 2018.

**Vacant seat 12**, succeeding Rosie Byers, resigned, must be a member representing the bargaining unit of the union that represents In-Home Supportive Services independent providers, for the unexpired portion of a three-year term ending March 1, 2017.

**Additional Qualification:** No fewer than 50% of the membership shall be individuals who are current or past users of personal assistance services paid for through public or private funds or who are recipients of IHSS ("Consumers").

**Report:** The Authority shall submit an annual report to the Board of Supervisors detailing its functions and evaluating its operation for that year. In addition, such report shall present the Authority's specific goals and objectives for the coming year and its plan for meeting those goals and objectives.

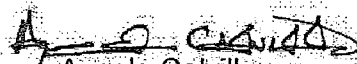
**Sunset Date:** None.

Additional information relating to the In-Home Supportive Services Public Authority may be obtained by reviewing the California Welfare and Institutions Code, Section 12301.6, available at <http://leginfo.legislature.ca.gov>, or San Francisco Administrative Code, Chapter 70, available at <http://www.sfbos.org/sfmunicodes>.

Interested persons may obtain an application from the Board of Supervisors website at [http://www.sfbos.org/vacancy\\_application](http://www.sfbos.org/vacancy_application) or from the Rules Committee Clerk, 1 Dr. Carlton B. Goodlett Place, Room 244, San Francisco, CA 94102-4689. Completed applications should be submitted to the Clerk of the Board. All applicants must be residents of San Francisco, unless otherwise stated.

**Next Steps:** Applicants who meet minimum qualifications will be contacted by the Rules Committee Clerk once the Rules Committee Chair determines the date of the hearing. Members of the Rules Committee will consider the appointment(s) at the meeting and applicant(s) may be asked to state their qualifications. The appointment(s) of the individual(s) who are recommended by the Rules Committee will be forwarded to the Board of Supervisors for final approval.

*Please Note: Depending upon the posting date, these vacancies may have already been filled. To determine if vacancies for this body are still available, or if you require additional information, please call the Rules Committee Clerk at (415) 554-7702.*

  
Angela Calvillo  
Clerk of the Board

DATED/POSTED: April 5, 2016