

File No. 250438

Committee Item No. \_\_\_\_\_

Board Item No. 50

## COMMITTEE/BOARD OF SUPERVISORS

### AGENDA PACKET CONTENTS LIST

Committee: \_\_\_\_\_

Date: \_\_\_\_\_

Board of Supervisors Meeting

Date: April 29, 2025

#### Cmte Board

- |                          |                                     |  |
|--------------------------|-------------------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/>            | Motion                                       |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | Resolution                                   |
| <input type="checkbox"/> | <input type="checkbox"/>            | Ordinance                                    |
| <input type="checkbox"/> | <input type="checkbox"/>            | Legislative Digest                           |
| <input type="checkbox"/> | <input type="checkbox"/>            | Budget and Legislative Analyst Report        |
| <input type="checkbox"/> | <input type="checkbox"/>            | Youth Commission Report                      |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | Introduction Form                            |
| <input type="checkbox"/> | <input type="checkbox"/>            | Department/Agency Cover Letter and/or Report |
| <input type="checkbox"/> | <input type="checkbox"/>            | MOU  |
| <input type="checkbox"/> | <input type="checkbox"/>            | Grant Information Form                       |
| <input type="checkbox"/> | <input type="checkbox"/>            | Grant Budget                                 |
| <input type="checkbox"/> | <input type="checkbox"/>            | Subcontract Budget                           |
| <input type="checkbox"/> | <input type="checkbox"/>            | Contract/Agreement                           |
| <input type="checkbox"/> | <input type="checkbox"/>            | Form 126 – Ethics Commission                 |
| <input type="checkbox"/> | <input type="checkbox"/>            | Award Letter                                 |
| <input type="checkbox"/> | <input type="checkbox"/>            | Application                                  |
| <input type="checkbox"/> | <input type="checkbox"/>            | Public Correspondence                        |

#### OTHER

<input type="checkbox"/>	<input type="checkbox"/>	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____
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Prepared by: Lisa Lew

Date: April 25, 2025

Prepared by: \_\_\_\_\_

Date: \_\_\_\_\_

1 [Parkinson's Awareness Month - April 2025]

2  
3 **Resolution recognizing April 2025 as Parkinson's Awareness Month in the City and**  
4 **County of San Francisco to raise awareness and support for those affected by**  
5 **Parkinson's disease.**  
6

7 WHEREAS, Parkinson's disease is a chronic, neurodegenerative disorder that  
8 predominantly affects the dopamine-producing neurons in specific areas of the brain and is  
9 the second most common neurodegenerative disease in the world after Alzheimer's disease;  
10 and

11 WHEREAS, Parkinson's disease now affects almost one million people in the United  
12 States and more than 10 million people across the world; and

13 WHEREAS, Almost 90,000 people in the United States are diagnosed with Parkinson's  
14 disease every year; and

15 WHEREAS, By 2030, it is expected that the number of people with Parkinson's disease  
16 in the United States will rise to 1.2 million; and

17 WHEREAS, The total cost of Parkinson's disease in the United States, including both  
18 direct and indirect costs, is almost \$52 billion a year; and

19 WHEREAS, Medications for treatment of Parkinson's disease cost an average of  
20 \$2,500 a year and therapeutic surgery can cost up to \$100,000 per patient; and

21 WHEREAS, Parkinson's disease affects quality of life, putting an incredible strain on  
22 both those affected by the disease and their loved ones; and

23 WHEREAS, Symptoms of Parkinson's disease include, but are not limited to, tremors  
24 (mainly in the hands), difficulty of fine motor skills, slowing of movement, limb stiffness,  
25 balance difficulties, loss of smell, and cognitive impairment; and

1           WHEREAS, Symptoms of Parkinson’s disease can vary from person to person, thus  
2 making it critical that patients get an accurate diagnosis; and

3           WHEREAS, A specific lab or imaging test can diagnose Parkinson’s Disease; and

4           WHEREAS, It is important to educate San Franciscans about the symptoms of  
5 Parkinson’s disease and its diagnosis methods; and

6           WHEREAS, There is currently no cure for Parkinson’s Disease, but there are  
7 treatments that may help ease symptoms; and

8           WHEREAS, Medical professionals, researchers, caregivers, and volunteers are  
9 working tirelessly to improve quality of life for people with Parkinson’s disease and their  
10 families; and

11           WHEREAS, We need more research, education, and support services to discover  
12 better treatments and improve access to quality care for people living with Parkinson’s  
13 disease; now, therefore, be it

14           RESOLVED, That the Board of Supervisors hereby recognizes the Month of April 2025  
15 as Parkinson’s Awareness Month and supports local efforts to advance research and to  
16 ensure equitable access to quality care for people impacted by Parkinson’s disease.

## **Introduction Form**

(by a Member of the Board of Supervisors or the Mayor)

I hereby submit the following item for introduction (select only one):

- ☐ 1. For reference to Committee (Ordinance, Resolution, Motion or Charter Amendment)
- ☐ 2. Request for next printed agenda (For Adoption Without Committee Reference)  
(Routine, non-controversial and/or commendatory matters only)
- ☐ 3. Request for Hearing on a subject matter at Committee
- ☐ 4. Request for Letter beginning with "Supervisor  inquires..."
- ☐ 5. City Attorney Request
- ☐ 6. Call File No.  from Committee.
- ☐ 7. Budget and Legislative Analyst Request (attached written Motion)
- ☐ 8. Substitute Legislation File No.
- ☐ 9. Reactivate File No.
- ☐ 10. Topic submitted for Mayoral Appearance before the Board on

The proposed legislation should be forwarded to the following (please check all appropriate boxes):

- ☐ Small Business Commission      ☐ Youth Commission      ☐ Ethics Commission
- ☐ Planning Commission      ☐ Building Inspection Commission      ☐ Human Resources Department

General Plan Referral sent to the Planning Department (proposed legislation subject to Charter 4.105 & Admin 2A.53):

- ☐ Yes      ☐ No

(Note: For Imperative Agenda items (a Resolution not on the printed agenda), use the Imperative Agenda Form.)

Sponsor(s):

Subject:

Long Title or text listed:

Signature of Sponsoring Supervisor: