

File No. 250147

Committee Item No. _____

Board Item No. 28

COMMITTEE/BOARD OF SUPERVISORS

AGENDA PACKET CONTENTS LIST

Committee: _____

Date: _____

Board of Supervisors Meeting

Date: February 25, 2025

Cmte Board

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

OTHER

- _____
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Prepared by: Lisa Lew

Date: February 21, 2025

Prepared by: _____

Date: _____

1 [Children’s Dental Health Month - February 2025]

2

3 **Resolution recognizing the month of February 2025 as “Children’s Dental Health**
4 **Month” in the City and County of San Francisco.**

5

6 WHEREAS, Although 100% preventable, caries (cavities or tooth decay) is the most
7 common chronic disease in children in the United States and can persist into adulthood and
8 across the lifespan; and

9 WHEREAS, Oral health is essential to overall well-being and quality of life; and

10 WHEREAS, Tooth decay negatively impacts children’s nutritional intake, growth, and
11 weight gain; and

12 WHEREAS, If left untreated, tooth decay can result in pain and infection affecting a
13 child’s self-esteem in addition to their ability to sleep, eat, focus and attend school; and

14 WHEREAS, Research shows that poor oral health in children is significantly associated
15 with absenteeism and poor academic performance; and

16 WHEREAS, In California, children miss an estimated 874,000 school days due to
17 dental problems; and

18 WHEREAS, Poor dental health can be costly to families, the healthcare system, and
19 the government; and

20 WHEREAS, The cost of emergency dental care is approximately 10 times more than
21 the cost of early childhood caries preventive dental care (\$6,498 vs. \$660); and

22 WHEREAS, Preschool children enrolled in Medi-Cal that receive an early preventive
23 dental visit are more likely to receive additional preventive services throughout childhood and
24 have lower overall dental expenditures; and

25

1 WHEREAS, Tooth decay has been classified by the Surgeon General as the single
2 most prevalent chronic childhood disease, more common than asthma and hay fever; and

3 WHEREAS, The Department of Public Health (DPH) provides community-based dental
4 services and an annual citywide kindergarten dental assessment, and the DPH Maternal Child
5 and Adolescent Health Section provides education, case management, community
6 coordination, and advocacy for the most underserved and vulnerable residents in San
7 Francisco; and

8 WHEREAS, Profound disparities persist, with children of color and low-income children
9 experiencing untreated tooth decay at twice the rate than those of their White counterparts;
10 and

11 WHEREAS, In the 2017-2018 school year, the rate of caries experience was 44%
12 among kindergarten children in low-income San Francisco schools, which was nearly three
13 times higher than the rate found among children from higher-income schools; and

14 WHEREAS, The rate of caries experience also varied by zip code, where
15 neighborhoods such as Chinatown, Mission, and Bayview Hunters Point continue to bear the
16 highest burden of tooth decay; and

17 WHEREAS, Tooth decay disproportionately impacts African American, Latino, and
18 Asian children, with Asian children experiencing the highest rates of dental decay; and

19 WHEREAS, The mission of CavityFree SF is to achieve optimal oral health and
20 eliminate oral health disparities for all San Francisco children by influencing policy and
21 establishing systems that provide preventive services and treatment in dental, medical,
22 school, and community settings; working with community partners to promote healthy
23 behaviors; integrating oral health with overall health; and increasing access to oral health
24 care; and

25

1 WHEREAS, Through three community-based Children’s Oral Health Task Forces
2 (Chinatown, Mission, and Bayview Hunters Point), CavityFree SF engages with parents,
3 caregivers, and community partners to strategize and promote the importance of oral health in
4 a way that is most acceptable, appropriate, and effective for the communities experiencing the
5 greatest disease burden; and

6 WHEREAS, In 2017, the SF Children’s Oral Health Collaborative, now known as
7 CavityFree SF (founded in 2012), created the San Francisco Children’s Oral Health Strategic
8 Plan (2020-2025) which outlines six strategies to accomplish its mission: Increase access to
9 oral health care services in traditional dental settings for San Francisco children and pregnant
10 women; increase access to oral health care services for San Francisco children and pregnant
11 women outside of traditional dental settings; integrate oral health with overall health care;
12 increase awareness and practice of optimal children's oral health behaviors among diverse
13 communities in San Francisco; develop and establish an ongoing population-based oral
14 health surveillance system to address the oral health of San Francisco children; and provide
15 coordination and oversight for the implementation of the Strategic Plan; and

16 WHEREAS, The American Dental Association recognizes February as National
17 Children’s Dental Health Month; now, therefore, be it

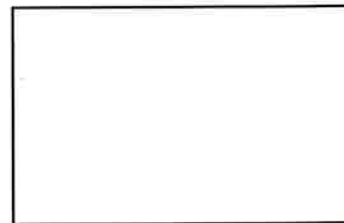
18 RESOLVED, That the San Francisco Board of Supervisors recognizes the outreach
19 efforts by CavityFree SF to communities bearing the greatest burden of tooth decay; and, be it

20 FURTHER RESOLVED, That the City and County of San Francisco will continue to
21 support outreach, education, and oral health programs for children, in addition to
22 strengthening prevention strategies; and, be it

23 FURTHER RESOLVED, That the San Francisco Board of Supervisors recognizes the
24 month of February 2025 as Children’s Dental Health Month in the City and County of San
25 Francisco.

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):

Sauter, Melgar, Engardio, Sherrill, Chen, Dorsey, Mandelman, Fielder, Mahmood, Chan, Walton

Subject:

Children's Dental Health Month – February 2025

Long Title or text listed:

Resolution recognizing the month of February 2025 as "Children's Dental Health Month" in the City and County of San Francisco.

Signature of Sponsoring Supervisor: