File No. 3110

Committee Item No. ______ Board Item No. ______ 1

COMMITTEE/BOARD OF SUPERVISORS

AGENDA PACKET CONTENTS LIST

Committee: Rules Committee

Date December 5, 2013

Board of Supervisors Meeting

Date OFCEMBER 17, 2013

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 Subcontract Budget
		Contract/Agreement
		Form 126 – Ethics Commission
		Award Letter Application
	台	Public Correspondence
OTHE	ER	(Use back side if additional space is needed)
H	H	
H.		
Com	nleted	by: Linda Wong DateDecember 2, 2013
	pleted	

FILE NO. <u>131107</u>

MOTION NO.

[Appointments, In-Home Supportive Services Public Authority]

Motion appointing Patricia Wooley and Judith Karshmer, terms ending March 1, 2016, to the In-Home Supportive Services Public Authority.

MOVED, That the Board of Supervisors of the City and County of San Francisco does hereby appoint the following designated persons to serve as members of the In-Home Supportive Services Public Authority, pursuant to the provisions of Welfare and Institutions Code Section 12301.6, and Board of Supervisors Ordinance Nos. 185-95 and 55-05, for the terms specified:

Patricia Wooley, seat 4, succeeding Elva Moran Hernandez, term expired, must be a worker who provides personal assistance services to a consumer, for the unexpired portion of a three-year term ending March 1, 2016.

Judith Karshmer, seat 8, succeeding James Illig, resigned, must be a member of the Health Commission, recommended to the Board by the Commission, for the unexpired portion of a three-year term ending March 1, 2016.

Rules Committee BOARD OF SUPERVISORS

Board of Supervisors RECEIVED City and County of San Francisco BOARD OF SUPERVISORS 1 Dr. Carlton B. Goodlett Place, Room 244 SAN FRANCISCO (415) 554-5184 FAX (415) 554-7714 2013 JUL 31 AN 9:06 Application for Boards, Commissions, Committees, & Task Forces In-Home Supportive Name of Board, Commission, Committee, or Task Force: Services Publ Seat # or Category (If applicable): District: Name: Zip: <u>7</u>9 Home Address: hudepea Home Phone: ccupation: SSEmployer: Work Phone: **Business Address:** Zip: Business E-Mail: Woolp51@liverCom Home E-Mail: _ _____ OliverCom 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: Registered voter in San Francisco: Yes Z No 🗌 If No, where registered: Resident of San Francisco , Z Yes D No If No, place of residence:____ 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: on and commitment fl Servers and Perso s with My Jellew IP Wor pushes a or the rescuces e Droicer the (Ma

Business and/or professional experience:

Ver 30 glars of Banking & Fovestment Banking ustemen Dervice, Receptionist where I performed all Over administrative Task. Supervisor at Investers + Treest Corporation Department. Student at City College Completed & Medica Office Cert Program

Civic Activities:

Donate and contribute to struggting in need of food, shelter, referrals to Ad that Can assist them.

Have you attended any meetings of the Board/Commission to which you wish appointment?

For appointments by the Board of Supervisors, appearance before the RULES COMMITTEE is a requirement before any appointment can be made. *(Applications must be received 10 days before the scheduled hearing.)*

Date: 6/21/13 Applicant's Signature: (required) Patricia Wea

Yes. No

<u>Please Note</u>: 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:

01/20/12

IHSS



In-Home Supportive Services Public Authority

July 30, 2013

2102

 $^{\circ}$

The Honorable Norman Yee Board of Supervisors Rules Committee City Hall, Room 263 1 Dr. Carlton B. Goodlett Place San Francisco, CA 94102

Dear Committee Chair Yee:

ي On behalf of the IHSS Public Authority Governing Body, I write to recommend Patricia Wooley to fill Seat #4 (Worker who provides personal assistance services to a consumer) on the Public Authority board. (Note: The Rules Committee did not approve Elva Moran Hernandez's reappointment to the board because she does not reside in San Francisco City and County.) I join with our Governing Body officers to unanimously commend Ms. Wooley's appointment to you. She has already impressed us with her dedication and compassion as an independent provider (IP) of home care services and an On-Call worker.

Before joining the Registry as an IP in March 2011, Ms. Wooley worked for over 30 years in the banking industry, including customer service and investment banking. She brings her knowledge of both budget and finance to the board. In addition, by virtue of her reliability and devotion to her IHSS consumers, Ms. Wooley was asked to become an On-Call worker in August 2012, a position reserved only for our IP's with the best track records.

Again, the IHSS Public Authority heartily endorses Patricia Wooley and strongly encourages the Rules Committee to recommend her appointment to our Governing Body to the Board of Supervisors. Please let me know if you have any concerns about her appointment or have other questions.

Sincerely,

ouva Calan

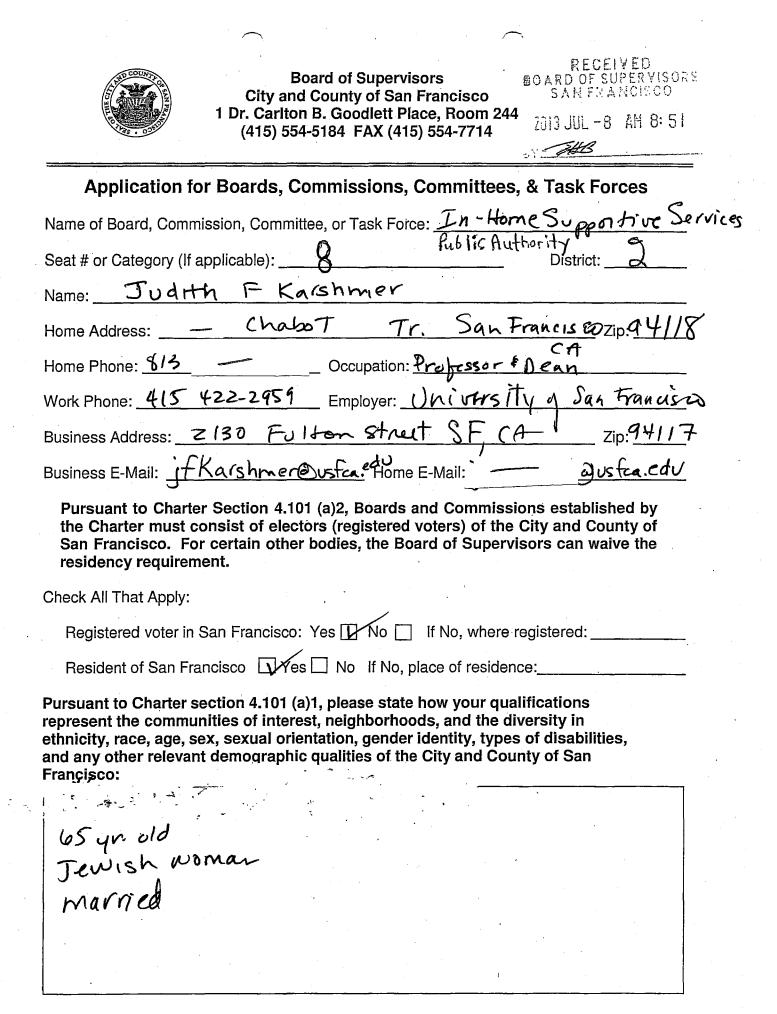
Donna Calame Executive Director

Cc: The Honorable Malia Cohen The Honorable London Breed Angela Calvillo, Clerk of the Board Linda Wong, Rules Committee Clerk Alice Wong, IHSS Public Authority Board President

Ph: 415-243-4477 Fax: 415-243-4407

832 Folsom Street, 9th Floor San Francisco, CA 94107

e-mail: info@sfihsspa.org



Business and/or professional experience:

Registered Nurse; Psychiatric Nurse Practitioner, Professor & Nursin; Dear of the School of Nursing & Health Profession

Civic Activities:

St. Marry's Medical Center Commenty Board San Francisco Health Commission

Have you attended any meetings of the Board/Commission to which you wish appointment?

For appointments by the Board of Supervisors, appearance before the RULES COMMITTEE is a requirement before any appointment can be made. (Applications must be received 10 days before the scheduled hearing.)

Applicant's Signature: (required) Date:

Yes No T

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:

01/20/12

CERTIFICATE OF APPOINTMENT OF OFFICER/DEPARTMENT HEAD

Part I – Information on Officer/Department Head

Health Commission	DPH	PE-99999(Commissioners only)
Name of Board or Commission	Department	PE-
Job Code #: 0109 No Benefits/variou		0114 @ \$100 per month
pay rates	s	0 0115 @ \$100 per half-day
•••	0112 @ \$50 per meeting	□ 0118 @ \$500 per month
Or Other Job Code	0113 @ \$75 per meeting	0119 No Compensation/has benefits
		U 0 1 19 No Compensation/has benefits
Judith Karshmer		
Name of Appointee	· · · ·	
·	(415)	5/14/17
Social Security #	Telephone #	
- Chabot Tr.	San Franci	500, (A 94118
Address		
May 14, 2013	January 15, 2017	Catherine Waters
Effective Date of Appointment	For Term Ending (Date) (Applicable only to commissioners	Name of Commissioner/Dept. Head Replaced
Part II - Appointing Authority's S	Signature	
Appointing Officer's Certificate or Commis	ssion - I have this day made the appoir	tment as recorded above.
Ca	hope -	
	Officer Signature A County of San Francisco	
Date Title		
Part III - Board of Supervisors R	atification	
Ratification by Board of Supervisors (Required Redevelopment Commission)	ired for Appointment of Controller, City Administr	ator, Treasure Island Development Authority,
Motion #:	File #: Date	FA 11
		e of Action:
Part IV – Oath of Office		e of Action:
Part IV – Oath of Office Appointee's Oath and Acceptance	l swear ti	nat I possess the qualifications required by
Part IV – Oath of Office	l swear ti	
Part IV – Oath of Office Appointee's Oath and Acceptance	l swear ti	nat I possess the qualifications required by
Part IV – Oath of Office Appointee's Oath and Acceptance Subscribed and sworn to this 14th day of	May, 2013 before me.	nat I possess the qualifications required by Id this office and I accept this appointment.
Part IV – Oath of Office Appointee's Oath and Acceptance Subscribed and sworn to this 14th day of Signature	May, 2013 before me.	nat I possess the qualifications required by
Part IV – Oath of Office Appointee's Oath and Acceptance Subscribed and sworn to this 14th day of Signature Mayor's Director of Board & Commission	May, 2013 before me. Appointments	nat I possess the qualifications required by Id this office and I accept this appointment.
Part IV – Oath of Office Appointee's Oath and Acceptance Subscribed and sworn to this 14th day of Signature Mayor's Director of Board & Commission Title (Must be an Officer qualified by Law	Appointments to administer an Oath.)	hat I possess the qualifications required by Id this office and I accept this appointment. Web- e's Signature & Date
Part IV – Oath of Office Appointee's Oath and Acceptance Subscribed and sworn to the 14th day of Signature Mayor's Director of Board & Commission Title (Must be an Officer qualified by Law Part V – Separation from Office of	Appointments to administer an Oath.)	hat I possess the qualifications required by d this office and I accept this appointment. M_{2} b's Signature & Date M_{2}
Part IV – Oath of Office Appointee's Oath and Acceptance Subscribed and sworn to this 14th day of Signature Mayor's Director of Board & Commission Title (Must be an Officer qualified by Law Part V – Separation from Office of	Appointments to administer an Oath.)	hat I possess the qualifications required by Id this office and I accept this appointment. Web B's Signature & Date
Part IV – Oath of Office Appointee's Oath and Acceptance Subscribed and sworn to this 14th day of Signature Mayor's Director of Board & Commission Title (Must be an Officer qualified by Law Part V – Separation from Office of The appointment of the above named com is to be separated effective as indicated. Part VI (For DHR use only)	Appointments to administer an Oath.) of Commissioners nmissioner Date of Separation:	hat I possess the qualifications required by d this office and I accept this appointment. M s's Signature & Date M M M M M M M M M M
Part IV – Oath of Office Appointee's Oath and Acceptance Subscribed and sworn to this 14th day of Signature Mayor's Director of Board & Commission Title (Must be an Officer qualified by Law Part V – Separation from Office of The appointment of the above named con is to be separated effective as indicated. Part VI (For DHR use only) Appointment entered by:	Appointments to administer an Oath.) of Commissioners nmissioner Date of Separation:	hat I possess the qualifications required by d this office and I accept this appointment. M_{2} b's Signature & Date M_{2}
Part IV Oath of Office Appointee's Oath and Acceptance Subscribed and sworn to this 14th day of Signature Mayor's Director of Board & Commission Title (Must be an Officer qualified by Law Part V Separation from Office of The appointment of the above named com is to be separated effective as indicated. Part VI (For DHR use only) Appointment entered by: Copies Sent: HSS Commission	Appointments to administer an Oath.)	hat I possess the qualifications required by this office and I accept this appointment. P's Signature & Date 4 14, 2013 Submitted by & Date: Appointment (AP) #: Appointment Office
Part IV - Oath of Office Appointee's Oath and Acceptance Subscribed and sworn to this 14th day of Signature Mayor's Director of Board & Commission Title (Must be an Officer qualified by Law Part V - Separation from Office of The appointment of the above named com is to be separated effective as indicated. Part VI (For DHR use only) Appointment entered by: Copies Sent: HSS Copies Sent: HSS Commission Description Commission Description	Appointments to administer an Oath.) Date Date Date Date Date Date Date Dat	hat I possess the qualifications required by d this office and I accept this appointment. b's Signature & Date Submitted by & Date:
Part IV – Oath of Office Appointee's Oath and Acceptance Subscribed and sworn to this 14th day of Signature Mayor's Director of Board & Commission Title (Must be an Officer qualified by Law Part V – Separation from Office of The appointment of the above named com is to be separated effective as indicated. Part VI (For DHR use only) Appointment entered by: Copies Sent: I HSS I Commission Separation entered by:	Appointments to administer an Oath.) Date of Separation: Date Appoint Date Appoint Date Appoint	hat I possess the qualifications required by d this office and I accept this appointment. B's Signature & Date

Sonia E. Melara, M.S.W. President

Edward A. Chow, M.D. Vice President

Cecilia Chung Commissioner

Judith Karshmer, Ph.D, PMHCNS-BC Commissioner

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

Beile Taylor-McGhee Commissioner

June 17, 2013

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

Dear Ms. Calvillo,

I am pleased to recommend Commissioner Judith Karshmer, Ph.D, PMHCNS-BC to 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.

I am confident she will greatly contribute to the San Francisco In-Home Health Support Services Public Authority Governing Board.

Sincerely,

Sonia E. Melara, MSW President San Francisco Health Commission

cc: Health Commission Correspondence file

HEALTH COMMISSION CITY AND COUNTY OF SAN FRANCISCO

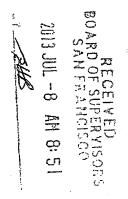
Edwin M. Lee, Mayor Department of Public Health



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: <u>http://www.sfdph.org</u>



San Francisco BOARD OF SUPERVISORS

Date Printed: November 13, 2013

Date Established:

June 9, 1995

Active

IN-HOME SUPPORTIVE SERVICES PUBLIC AUTHORITY

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@sfihsspa.org

Authority:

Welfare and Institutions Code Section 12301.6; Ordinance No. 185-95; Ordinance No. 55-05.

Board Qualifications:

The governing body of the In-Home Supportive Services (IHSS) Public Authority shall be composed of 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 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 consumers over the age of 55 years, each authorized to represent organizations that advocate for aging people with disabilities;

2. Two consumers between the ages of 18 and 60 years, each authorized to represent

organizations that advocate for younger people with disabilities;

3. One consumer at-large over the age of 55 years;

4. One consumer at-large between the ages of 18 and 60 years;

5. One worker who provides personal assistance services to a consumer;

6. One Commissioner from the Human Services Commission, recommended to the Board by the Commission;

7. One Commissioner from the Commission on the Aging, recommended to the Board by the

"R Board Description" (Screen Print)

San Francisco BOARD OF SUPERVISORS

Commission;

8. One Commissioner from the Health Commission, recommended to the Board by the Commission;

9. One member of the Mayor's Disability Council, recommended to the Board by the Council. 10. One member representing the bargaining unit of the union that represents IHSS independent providers.

11. One consumer at-large who is 18 years of age or older.

The In-Home Supportive Services Public Authority shall provide assistance in finding personnel for the In-Home Supportive Services 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 appointment 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 or 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:

(1 Three one-year terms;

(2) Four two-year terms; and

(3) Four 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 annually a 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.

"R Board Description" (Screen Print)

San Francisco BOARD OF SUPERVISORS

Sunset Date: None

"R Board Description" (Screen Print)