

**Health Commission
City and County of San Francisco
Resolution No. 20-10**

**IN SUPPORT OF LONG TERM CARE COORDINATING COUNCIL (LTCCC) RESOLUTION TO
IMPROVE THE CITY-WIDE BUDGETING PROCESS**

WHEREAS, in June 2009, the Human Services Agency and the Department of Public Health sponsored an analysis by the City Services Auditor division of the Controller's Office of home and community-based long term care services spending administered by the City and County of San Francisco; and

WHEREAS, the Controller's Office worked with the LTCCC's Long Term Care Financing and Public Policy Workgroup to develop basic definitions for "home and community-based long term care services"; and

WHEREAS, the Controller's Office worked with city departments and programs to identify budgeted spending summaries for fiscal years 2007/08, 2008/09, and 2009/10 for home and community-based long term care services; and

WHEREAS, in March 2010, the Controller's Office completed its final report, entitled: *Fiscal Analysis of Home and Community-Based Long Term Care Services*; and

WHEREAS, the LTCCC has reviewed the Controller's Office final report, and compared it to existing data on growing target populations; and

WHEREAS, the LTCCC has found that: (1) spending trends across the three years of analysis are erratic; (2) three years of analysis are not enough to be confident about long term trends; (3) no mechanism exists for making strategic decisions about community-based long term care services spending as a whole; and (4) service planning often does not reflect cross-departmental impacts of increasing or decreasing services; and

WHEREAS, the LTCCC has recommended that:

1. The LTCCC, the Health Commission, the Human Services Commission, the Aging and Adult Services Commission and all other relevant governing bodies should adopt the report's definitions for home and community-based long term care services, as well as the broad definitions of immediate need and continuum services, as a framework for use in future research or analysis across departments.
2. Working with the Controller's Office, the Mayor should develop a cross-departmental budgeting and tracking process for home and community-based long term care services mirrored after previous citywide budgeting efforts (e.g., Children's baseline, Violence

Prevention, Children's System of Care, Better Streets, Family Resource Centers).
Specifically:

- A. The Mayor should use the information from the Controller's Office report to establish a home and community-based long term care services baseline level of City funding.
 - B. The Mayor should require departments to track budgeted investments in home and community-based long term care services, as well as continuum versus immediate need categorization in future budgeting cycles, based on the Controller's Office report's definitions. (The Controller's Office would be a valuable resource in helping to develop a plan to implement departmental mechanisms for tracking these investments, potentially as a part of departments' annual audit plan).
 - C. The Controller's Office should continue to update this three-year analysis with information from future budgets to better identify long-term spending trends and compare them against the baseline.
 - D. The Controller's Office's analysis should incorporate a comparison of spending trends to growth rates in the target populations and the intensity of consumer needs over time.
 - E. The LTCCC should review the analysis annually before city departments submit budgets to their respective Commissions (November or December), and provide recommendations to the Mayor's Office where appropriate.
3. The LTCCC should create a new membership seat for the Mayor's Office to facilitate understanding of the implications of community-based long term care issues and growing target demographics for budgeting.
 4. HSA and DPH should conduct a coordinated analysis to assess the fiscal impact of known future changes in related program eligibility (e.g., health care reform) in order to maintain total spending levels that keep pace with growing target populations.
 5. The Controller's Office should work with all departments that fund home and community-based long term care services to systematically analyze additional cross-departmental opportunities to leverage state or federal revenue (e.g., Leno waiver, CSBG-HR, Prop 63, ADRC). This effort may assist in maintaining total spending levels that keep pace with growing target populations.
 6. The LTCCC should seek research opportunities that assess the benefits and impact of services in order to provide balance to the "cost-focused" approach of this fiscal analysis.
 7. HSA/DAAS, in collaboration with the Mayor's Office, should initiate a strategic discussion about the role of IHSS now and in the future, given: (a) the enormous role that the program plays in the city's home and community-based long term care services budget; and (b) that the program continues to be targeted for significant funding cuts at the state level. The city will need to be prepared for any programmatic restructuring that may be necessary to ensure that the program remains a viable linchpin service.

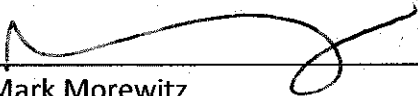
8. The Mayor should require cross-departmental service planning when service investments offer opportunities to predict future service needs. For example, the city's significant capital investments in housing may result in future target populations for support services at the same time that support services have been cut. When future residents of this housing move from other community living arrangements, service providers should be actively involved in reorganizing existing services to ensure access. If residents move from institutional settings, service expansions may be necessary. This may require a structured periodic review of relevant departmental plans.
9. The LTCCC should identify and develop funding and policy mechanisms that address silo programming to improve service coordination for home and community-based long term care services. When necessary, the LTCCC may request an executive order and/or staff support from the Mayor to facilitate implementation and accountability tracking of these mechanisms.

WHEREAS, the LTCCC has adopted these findings and recommendations concerning the need for improving citywide planning and budgeting, and for improved service planning in San Francisco;

WHEREAS, the Human Services Commission and the Aging and Adult Services Commission have endorsed these findings and recommendations;

NOW, THEREFORE, BE IT RESOLVED, that these findings and recommendations be endorsed by the San Francisco Health Commission.

I hereby certify that the San Francisco Health Commission at its meeting of December 7, 2010 adopted the foregoing resolution.



Mark Morewitz

Executive Secretary to the Health Commission