



San Francisco Department of Public Health

Grant Colfax, MD
Director of Health

City and County of San Francisco
London N. Breed
Mayor

Sugary Drinks Distributor Tax Advisory Committee Infrastructure Subcommittee

DRAFT MINUTES

Join Via Zoom

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Meeting ID: 957 8894 9256 Passcode: 851890

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January 5, 2021 – 2:00PM

*Please note that public comment will be held after every agenda item. If a member of the public would like to comment on a topic that is *not* on the agenda, they may do so during general public comment at the start of the meeting. Please see the *Notes* section of this document for additional information.

Order of Business:

1. Call to Order / Roll Call [discussion and action] Meeting called to order at 2:12pm

Present: Michelle Kim, Linda Barnard, Larry McClendon, Dongmei Tan, Christina Goette

Absent: Derik Aoki

2. Approval of November and December Meeting Minutes [discussion and action]

Linda motions to approve November meeting minutes. Larry seconds. November minutes are approved.

Michelle motions to approve December meeting minutes. Larry seconds. December minutes are approved.

3. Approval of Agenda- [discussion and action]

Michelle motions to approve agenda. Linda seconds. Agenda is approved.

4. General Public Comment – No Public Comment

5. House Keeping [discussion and possible action] - No updates

6. Economic Mitigation Working Group Report [discussion and possible action]

Larry recaps how the report intersects with the work of SDDT. The working group was found and developed mostly with the frustration from small business owners, who also that intersect with sugary beverage tax. Within the last 3 years, SF policy shift has encroached on business fundamentals all the while, as we are trying to make SF a safer and healthier city, sometimes policy efforts have impacts on businesses. Similar to the work of SDDTAC, when the legislation was passed to tax an item, the sugary beverage sales are one of the items are often the lifeline of businesses, which caused tension. After a deeper investigation and research, a lot of the business owners actually did not have too much of a conflict with the sugary beverage tax, as business owners aligned with its mission to support community. At the very same time, a parallel policy regarding restricting flavored tobacco sales, again

with the purposes of selling products that attract youth and making SF healthier and safer. Today there is the SDDT and restriction on flavored tobacco products and there is an abatement of taxes on premises of small businesses (smaller corner markets). Small businesses gathered together and compelled the small business commission to start an economic mitigation group for the purposes of developing recommendations that could be sent to the Board of Supervisors and Mayor's Office for the purposes of supporting and building the foundation for those small businesses. Jorge Rivas was tasked to oversee this work. This report is presented as SDDT is part of the element of the impact of small businesses and wanted to ensure that members of the Infrastructure subcommittee were aware of these recommendations from the working group and stakeholders that are a touch point in the work we are involved in. It is also to see what came out of the working group recommendations and to identify to SDDTAC what small businesses need and due to the final budget allocations, SDDTAC was not able to delve into the work. This report provides a snapshot of what small business owners are dealing with and includes 15 recommendations which intersects on impacts on small businesses. Member highlights the option to intersect with report or not. The essence of this report is rooted in tobacco initiatives that have put an economic impact on these small businesses. Members have the opportunity to review and digest the report, as SDDTAC will be in discussion about budget recommendations. Member would like to hear about how others feel and would like to know more about tobacco restrictions and unsure about the ask for small business owners, how would we tie this into our current work. Member curious about how SDDT fits into 15 recommendations. Larry responds that tobacco policy versus the SDDT is that SDDT is a revenue policy to collect additional revenue of sugary beverages. With the tobacco policy, the city restricts small business owners from selling flavored tobacco with the purposes of making sure that tobacco companies do not take advantage of bringing in a younger interest audience. The most popular tobacco products are restricted which stopped foot traffic and sales. SDDT efforts were happening at the same time as the tobacco flavored product restrictions which created frustration from small business owners. Based on research from some small business owners were in alignment with purpose of SDDT. In respect to #8/#9 recommendations of enhancing the healthy retail program, they would have to make that allocation to the program itself, because the request in the report is a larger city wide effort and outside of the SDDT initiatives, but the SDDT funds 70% of the healthy retail budget. Member clarifies if the ask is to fund the program more than 70% or ask the Board of Supervisors. Member responds that should the Board of Supervisors decide to elevate the working group's recommendations and identify funding for the healthy retail program, to make small grocers to become a healthier option for consumers. The small business commission wants reparations for the loss of income based on the policies of SF. Through the Healthy Retail Program, when support is provided to small business such as refrigeration, etc, this provides an opportunity to provide healthier options and access to community members. In this case the small business want the equal economic loss to be replaced by set equipment efforts, trying to make up for loss of income. Member asked if the working group make a recommendation of where to get funding to the Board of Supervisors. Larry responded no they did not. Member asked where would SDDTAC support these recommendations. Member shared that in the past SDDTAC recommendations funds were recommended for the Healthy Retail Program. Member suggests to consider the working group's recommendation #11, which could be used for SDDT funding to support smaller stores to purchase bulkier and healthy items, so that the price for those healthy items could be set at a price point to be more affordable. Recommendation #11 can be enhanced with a focus on helping healthy retailers buy bulkier healthy items at an affordable price for community consumers. The Board of Supervisors should be the body to fund the working group's recommendations. Member is not clear of what the ask is, to support the working group in its recommendations, is it a letter of support, or what else? Member suggests to consider what is happening with our constituents and to be aware of the information from the working group's recommendations and possibly consider to provide recommendations for budget allocations or how it aligns with SDDT. Should this report be passed on to other committee members, it may get lost but the infrastructure committee can present it with a description. Member suggests to present in February to

the SDDTAC but also suggests to have Board of Supervisors make the determination on how to support small businesses. Staff shares that SDDTAC will be focusing of budget recommendations in February this report can be referenced in SDDTAC annual report recommendations how values are in alignment with other city bodies recommendations. Michelle shares that she will share working group's report and see how the SDDTAC will respond.

7. SDDT Priority Areas [discussion and possible action]

a. Mental Health/Violence Prevention Framework

SDDTAC continues to discuss how mental health/violence prevention fit within the budget recommendations. Michelle discusses to review what existing SDDT funds are already supporting the areas of mental health and violence prevention. Members agree with Michelle as well as the need to continue discussions about the proposed framework. Member shared the concept was shared with the COVID Command Center and loved the idea, they could support the activities but are fearful of the idea of gathering people together. Member suggested to move event to the spring but would still need to determine what the concept is. In discussions with co chair, it is not advised to label as violence prevention framework but branding it differently with the mission of the inclusion of violence prevention and better mental health outcomes. Michelle suggests to work with DPH staff on identifying existing mental health/violence prevention SDDT funded organizations. Staff shared that most SDDT grant funded organizations are not focused on mental health but rather that better nutrition and physical activity efforts help to improve mental health, everything that SDDT funds is in support of improving mental health rather than it supporting a specific mental health intervention. Member shared that initially the discussions were around how isolation affects mental health and the stress of the stay at home and mask orders. Intent was to provide safe space for Bayview community members to access resources for all age ranges. There is a need to have more description for the Board of Supervisors to approve. Michelle shares that DCYF hosts community hubs for the youth and may be similar to this idea. Member suggests that it be similar to the after school community hub model but for all age ranges. Member suggests that this may not be something ready for the March recommendations submission but Larry has identified funding to support this concept, but there can be other possible funding to support these proposed efforts. Member suggests that CBOs can possibly offer in kind support to do this work and that some CBOs have expressed interest in working together. Michelle suggests to possibly consider funding in FY 22-23 as vaccinations will also be rolled out. Member suggests as possibly having SDDT funded organizations promote the concept/event as it is aligned with the work, without having to call out specific dollar amounts. It is important that we keep these discussions in mind, especially as we will come out of the pandemic, we will all be dealing with various sorts of recovery and to be able to provide the community with this proposed type of event with resources for community members' to access, as well as requiring SDDT funded agencies to support/help with convening these types of mental health access events. Michelle will share with SDDTAC at the next meeting. Joi, Larry and Linda to meet to discuss next steps in moving forward.

8. Subcommittee FY 21-22 Budget Recommendations [discussion and possible action]

Subcommittee has not previously discussed due to discussions focusing on mental health/violence prevention. Member suggests that it is difficult to discuss as members are unaware of what expenditures have been spent/not spent from SDDT funded agencies and CBOs. Member suggests to ask on spending report from SDDT funded agencies. Staff to share at February meeting to help inform recommendations. Whether or not the funds were spent, and if the funding will be able to be carried over, moving forward into FY 21-22.

9. Discuss possible agenda items for February 2, 2021 Meeting [discussion and possible action]

- Updates on SDDT spending report
- FY 21-22 Budget Discussions
- Quick update on mental health discussions

10. Public Comment – No Public Comment

11. Adjourn

Linda motions to adjourn. Larry seconds. Meeting is adjourned.

General Public Comment: At this time, members of the public may address the SDDTAC Advisory Committee on items of interest to the public that are within the subject matter jurisdiction of the Committee but do not appear on the agenda.

With respect to agenda items, the public will be given an opportunity to address the Committee when the item is reached in the meeting. Each member of the public may address the Committee for up to three minutes.

The Brown Act forbids a Committee from taking action or discussing any item not appearing on the posted agenda, including those items raised at Public Comment. In response to public comment on an item that is not on the agenda, the Committee is limited to:

- Briefly responding to statements made or questions posed by members of the public, or
- Requesting staff to report back on a matter at a subsequent meeting, or
- Directing staff to place the item on a future agenda. (Government Code Section 54954.2(a).) 10.

Each action item will hold public comment before a vote is made.

Explanatory documents are available at the 25 Van Ness Ave, Suite 500 during regular business hours. If any materials related to an item on this agenda have been distributed to the SDDTAC after distribution of the agenda packet, those materials are available for public inspection at the address above during normal business hours.

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Per the Language Access Ordinance (Chapter 91 of the San Francisco Administrative Code), Chinese, Spanish and or Filipino (Tagalog) interpreters will be available upon requests. Meeting Minutes may be translated, if requested, after they have been adopted by the Family Violence Council/Mayor's Task Force on Anti-Human Trafficking. Assistance in additional languages may be honored whenever possible. To request assistance with these services please contact the

Minouche Kandel 415-252-3203, or minouche.kandel@sfgov.org at least 48 hours in advance of the meeting. Late requests will be honored if possible.

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Comparison between SDDTAC Recommendations and Mayor’s Allocations FY 19-20

Item	SDDTAC Rx Amount	SDDTAC Rx %	SDDTAC Rx Agency	Mayor's Budget	% of Mayor's Budget	Mayor's Proposed Agency	Variance
Community-Based Grants	\$4,290,000	41.25%	DPH/CHEP	\$2,995,000	26.76%	DPH	
				\$300,000	2.68%	SFUSD via DCYF	
			Comm Engage	\$50,000	.45%	Total	-\$345,000
School Food, Nutrition Education, Student Led Action	\$1,000,000	14.42%	SFUSD	\$1,500,000	14%	SFUSD via DCYF	\$0
	\$500,000		SFUSD	\$500,000		SFUSD via DCYF	
Food Access	\$1,000,000	9.62%	DPH	\$1,000,000	10%	DPH	\$35,000
Healthy Retail SF	\$150,000	1.44%	OEWD	\$150,000	1%	OEWD	\$0
Oral Health	\$1,000,000	9.62%	DPH – Task Force	\$450,000	4.02%	SFUSD via DCYF	
			Sealant Pgm	\$450,000	3.13%	DPH	
			Edu/Case Mg	\$1,000,000	8%	Total	\$0
Infrastructure	\$1,000,000	11.92%	DPH/CHEP	\$1,000,000	8%	DPH	-\$240,000
Water Access – SFUSD	\$0	2.88%	SFUSD	\$0	4%	SFUSD via DCYF	\$0
Water Access - Public Spaces	\$300,000		PUC/DPH	\$300,000	2.68%		
SF Recreation & Parks	\$520,000	5%	RPD	\$2,895,000	5%		\$2,375,000
HOPE SF Peer Enhancements	\$400,000	3.85%	N/A	\$400,000	0%	DPH	\$400,000
Total	\$10,400,000	100.0%		\$11,190,000	100%		

Description of intended purpose from Mayor's Budget
Community-Based Grants: Funding to issue grants to CBOs for programs and services in the following areas (1) Health Education, (2) Physical Activity, (3) Food Access, and (4) a Media/Awareness Campaign.
School Food, Nutrition Education, student-led action: Funding to (1) improve the quality of school meals, (2) support nutrition education, and (3) support student-led efforts to decrease consumption of SSBs and increase awareness around students.
Food Access: Healthy Food Purchasing Supplement
Healthy Retail: Will provide Healthy Store makeovers to 2 additional stores and continue ongoing providing support to 10 stores.
Oral Health school-based: Funding to support oral health in schools, including the cost of sealants.
Oral Health: Funding for Community Task Forces
Infrastructure: To fund a contract through DPH for facilitation and strategic support for the SDDTAC. Will also support research needs, including purchasing of data, and costs at DPH related to the administration of CBO grant program.
Water Access: One-time for the installation of water refilling stations in schools. Also can be used to purchase refillable water bottles for students.

SFRPD: Funding to Rec Park to provide continued support of the Peace Parks program.

Hope SF Peer Enhancements: Fund training and peer wage increases.

SDDTAC Recommendations FY19-20 and 20-21

	FY19-20	FY20-21	%	Department
COMMUNITY-BASED GRANTS				
Health education, food security, physical activity	\$3,260,000	\$3,260,000		DPH/CHEP
CBOs working with SFUSD	\$300,000	\$300,000		DPH/CHEP
Media	\$680,000	\$680,000		DPH/CHEP
Community engagement	\$50,000	\$50,000		DPH/CHEP
TOTAL COMMUNITY BASED GRANTS	\$4,290,000	\$4,290,000	41%	
SFUSD				
School Food, Nutrition Ed	\$1,000,000	\$1,000,000		SFUSD via DCYF
Student Led Action	\$500,000	\$500,000		SFUSD via DCYF
TOTAL SFUSD	\$1,500,000	\$1,500,000	14%	
FOOD ACCESS				
Healthy Food Purchasing Supplement	\$1,000,000	\$1,000,000		DPH/CHEP
Healthy Retail	\$150,000	\$150,000		OEWD
TOTAL FOOD ACCESS	\$1,150,000	\$1,150,000	11%	
ORAL HEALTH				
Community task forces	\$450,000	\$450,000		DPH/MCAH
School-based sealant application	\$350,000	\$350,000		DPH/SF Health Network
School-based education and case management	\$200,000	\$200,000		SFUSD via DCYF
TOTAL ORAL HEALTH	\$1,000,000	\$1,000,000	10%	
INFRASTRUCTURE				
DPH Infrastructure	\$1,000,000	\$1,000,000		DPH/CHEP
Strategic planning	\$40,000	\$ -		DPH/CHEP
Evaluation	\$200,000	\$200,000		DPH/CHEP
TOTAL INFRASTRUCTURE	\$1,240,000	\$1,200,000	12%	
WATER ACCESS				
Water Access - SFUSD	\$ -	\$340,000		PUC via RPD/DPW?
Water Access - Public Spaces	\$300,000	\$ -		PUC via RPD
TOTAL WATER ACCESS	\$300,000	\$340,000	3%	
SF Recreation & Parks	\$520,000	\$520,000	5%	RPD
HOPE SF Chronic Disease Equity	\$400,000	\$400,000	4%	DPH/Behavioral Health
Total Proposed	\$10,400,000	\$10,400,000	100%	

	Budget Descriptions
COMMUNITY-BASED GRANTS	City Departments should contract directly with CBOs through an RFP process managed through the Community Health Equity and Promotion (CHEP) Branch of the Department of Public Health. CBG should

Health education, food security, physical activity	<p>support community-based programs and services that address the health inequities of those most targeted by the beverage industry. Funding should go to Community Based Organizations (CBOs) and Faith Based Organizations (FBOs) for the following strategies:</p> <ol style="list-style-type: none"> 1. Health Education activities including, chronic disease prevention, healthy eating and active living, tap water promotion, oral/dental health 2. Physical Activity opportunities, including: a) Dance and movement, sports, yoga, walking groups, biking, etc.; b) Efforts to influence changes to the built environment (ie sidewalks, streets, parks, buildings, etc) or safety of the built environment that facilitates increased physical activity and walking and biking for utilitarian trips, sometimes referred to as active transportation); and c) pursuit of institutional or local policies that facilitate physical activity and active transportation (such as adequate PE time and instructors, commuter benefits for active transportation, etc) 3. Healthy Eating/Food Security*, including: a) Community-based pantries, community-based hot meals, community kitchens and community home delivery services; b) Increased financial resources (i.e. wages, income, government nutrition supplements, vouchers, etc.); c) Changes to the built environment that facilitate food security; and d) Pursuit of institutional or local policies that facilitate food security. 4. Water Promotion, such as support for Spa Water Supplies, station maintenance/beautification, refillable water bottles to distribute to communities, water testing 5. Community Based Participatory Research
CBOs working with SFUSD	7% of all CBO funding (eg 7% of approximately \$4.3 million) should go towards CBOs implementing programs/initiatives that take place in school settings. Funding to issue grants to CBOS should follow the guidelines above.
Media	To develop and implement a media campaign focused on the impact of the SDDT with an emphasis on grassroots, community-led storytelling. Community Based Participatory Principles will be utilized in the development of the storytelling campaign, with CBOs funded to co-develop the campaign with a contracted media agency. The funds should support both a local and regional media campaigns. The regional campaign should be in coordination with other jurisdictions with similar sugary beverage taxes to leverage resources and augment the intended goals of the SDDTAC. A portion of the local media campaigns must include a merchant education component. A smaller proportion of the funds (to be determined by the Department of Public Health and any contracted entities) may support media/communications campaigns that highlight the health harms of sugary beverage intake and encourage tap water consumption. A portion of the funds must include merchant education. The local campaign must include merchant education component. DPH/CHPEP will contract with media agency, and oversee the campaign progress, with guidance from the Community Input Subcommittee on the local and regional community-led story telling campaigns and guidance from the Infrastructure Subcommittee on the merchant focused campaign.
Community engagement	Community engagement activities (ex. community conveners, focus groups, town halls, attending existing community meetings, etc.) to ensure that meaningful community engagement opportunities are fully integrated throughout the work of the SDDTAC, so that impacted populations can inform the decisions of the full committee.
SFUSD	
School Food, Nutrition Ed	To improve the quality and appeal of school meals and support nutrition education to increase participation in school meal programs (for example: cooking and serving equipment, staff professional development, and innovative procurement and menu strategies to increase freshly prepared food). Funding will target schools with the largest populations of high-risk students that are disproportionately targeted by the sugary drinks industry.
Student Led Action	Support student led efforts to decrease consumption of sugary drinks and increase awareness of sugary drinks consumption among students, with focus on schools with the largest populations of high-risk students that are disproportionately targeted by the sugary drinks industry. SFUSD should provide to SDDTAC a proposal of how funding will be spent through student led action.
FOOD ACCESS	
Healthy Food Purchasing Supplement	Support programs that increase financial resources to purchase healthy food such as vouchers and food purchasing incentives. This investment is meant to support both the communities most impacted by the health consequences of sugary beverage consumption and to support the local economy including local merchants. These funds should be RFPed out to CBOs and FBOs according to the Community Based Grants guidelines.

Healthy Retail	Supporting small business to increase healthy food access in high risk and impacted communities and neighborhoods by: 1) supporting business operations; 2) promoting community engagement; and 3) improving the retail environment.
ORAL HEALTH	
Community task forces	Support development of community infrastructure such as oral health community task forces that incorporate diverse stakeholders for outreach, education, and interventions to address the oral health needs of children in high risk populations.
School-based sealant application	Support school-based and school-linked preventive oral health programs within SFUSD schools serving high risk target populations. This should also support SFUSD dedicated oral health staffing.
School-based education and case management	
INFRASTRUCTURE	
DPH Infrastructure	<p>A. Personnel</p> <p>1) Backbone staffing to support SDDTAC a. A program manager to provide backbone staffing to the SDDTAC, including: i) Staffing full committee and 3 subcommittees in compliance with Sunshine and Brown Acts; ii) Coordinating among city agencies and funded CBOs to promote collective impact; iii) Help guide vision and strategy of SDDTAC, support aligned activities; manage SDDTAC work and timeline; and iv) Working with evaluation team to establish shared measurement practices b. As necessary, manage citywide/soda tax impact media c. Develop/Compile and Manage completion of SDDTAC Annual Report d. Manage SDDTAC biennial nominations process</p> <p>2) Staffing to support DPH SDDT implementation of community based grants a. Manage work of contractors, including: i) develop and implement CBO RFP process; ii) provide technical assistance for CBOs and merchants; iii) promote collective impact in coordination with SDDTAC backbone staff and City Agencies; and iv) work with evaluator and SDDTAC backbone staff to develop and implement evaluation plan and evaluation technical assistance.</p> <p>3) Staffing to support research and evaluation of SDDT impact, including data purchases as necessary a. At least 1.0 FTE epidemiologist; b. Support data analysis for annual report; c. Manage data purchases; d. participate in development and implementation of SDDT evaluation</p> <p>B. Professional services including: i) technical assistance for funded CBO and FBO; ii) evaluation - to implement evaluation framework and evaluate funded city agencies, CBO and FBO, and process evaluations from applicants, and provide evaluation technical assistance; iii) city attorney to provide ongoing technical consultation</p> <p>C. Materials/Supplies for meetings and printing costs</p> <p>D. Training to support staff development</p> <p>E. Data for collection (pricing), analysis (Nielsen) and purchase (IRI)</p>
Strategic planning	Strategic planning consultant to facilitate the SDDTAC in creating a strategic plan to guide the work. The development of this plan should be informed by multiple guiding principles to at least include: the 10 essential public health services, community input regarding its priorities and needs, lessons learned and best practices from other jurisdictions that have implemented similar taxes. The strategic planning process should address, among other aspects, the near and long term strategic goals of the SDDTAC; the role of CBOs, FBOs, and city agencies in achieving this vision; how the SDDTAC's goals fit within the context of city-wide coalitions with similarly aligned goals
Evaluation	Additional funds for evaluation may: <ul style="list-style-type: none"> a. support community based participatory research (ex. street intercept, merchant interview, focus groups) b. develop a system to collect data c. expand technical assistance d. conduct more qualitative evaluation that can help develop stories that describe impact of tax
WATER ACCESS	

Water Access - SFUSD	To install hydration stations at low income schools serving students with health disparities (ex. Bayview, Chinatown, Mission), to elevate the schools to the Silver or Gold standard for hydration stations (i.e. one on each floor, centrally located, and conduct water education). Funds may support purchase of Spa Water Supplies, station maintenance and beautification, refillable water bottles to distribute to students, water testing.
Water Access - Public Spaces	To install or upgrade existing hydration station(s) in public spaces that target high-risk populations that are disproportionately targeted by the sugary drink industry (community identified public spaces). This funding should support high-quality, visually appealing, stations that can serve as a highlighted example of the potential for hydration stations. This can include beautifying and optimizing current station(s) or creating new one(s).
SF Recreation & Parks	To support staffing and supplies, including healthy food, for Peace Parks programs in target populations
HOPE SF Chronic Disease Equity	To fund services to public housing residents in the HopeSF sites. Public housing is a known risk factor for diet sensitive health disparities. The concentrated poverty and resource isolation intensify the impact of race and poverty. This funding will be used to support resident peers, trained as community health workers, to provide health education, chronic disease self-care programs, and linkages to care. Each of the 4 sites will have two full time peer community health workers who will provide a variety of programming. The funding supports both wages and some program expenses.

* Funding should support programs and services that increase financial resources to purchase healthy food; access to healthy fruits and vegetables while minimizing processed foods for high-risk communities; foods that are affordable and convenient; and programs that support the consumption of healthy foods including the ability to prepare and store meals and the knowledge of basic nutrition, food safety and cooking. Priority programs should incorporate a community-based food security perspective and have demonstrated increased ability of food insecure residents to purchase, access, and consume consumption of healthy, fresh, low-to-no cost and culturally appropriate foods, including but not limited to food vouchers/incentives, transportation and delivery and prepared foods.

ONGOING ADDBACKS FROM FY 2017-2018

PROGRAM	DEPARTMENT	DESCRIPTION	
Food Security – Healthy Food Purchasing Supplement	DPH	Maintain current service levels: Vouchers and education to increase consumption and access to nutritious foods by increasing the ability of low income residents to purchase fruits and vegetables at neighborhood vendors and farmers’ markets in collaboration with DPH Healthy Retail Program.	50,000
Healthy Corner Store Retail	ECN	Promoting corner stores and markets to sell healthy products as opposed to sugary beverages, etc.	60,000
Food Security – Home Delivered Meals (HDM)	HSA	Address current waitlist: Delivery of nutritious meals, a daily-safety check/friendly interaction to homebound seniors/adults with disabilities who cannot shop or prepare meals themselves. Many providers offer home assessments/nutrition education/counseling.	477,000
Food Security – Congregate Lunch Meals	HSA	Address current waitlist: Daily, hot, nutritious meals for seniors/adults with disabilities	220,000
Senior Fitness	HSA	Senior fitness programming at IT Bookman and George Davis	200,000
Congregate Meal Program	HSA	Congregate Meal Program A	75,000
Congregate Meal Program	HSA	Congregate Meal Program B	75,000
TOTAL			1,157,000

*The Board of Supervisor’s made a series of addbacks in the FY 17-18 budget. When the Board of Supervisors makes changes to the Mayor’s budget, some of these changes are “addbacks” denoting the Board’s decision to add funds back for a particular service. Addbacks become part of an agency’s baseline budget.