



# San Francisco Department of Public Health

Dr. Grant Colfax  
Director of Health

City and County of San Francisco  
London N. Breed  
Mayor

## Sugary Drinks Distributor Tax Advisory Committee *Subcommittee: Data and Evidence (D/E)*

### NOTES

**July 8, 2020 – 10:00AM**

**Join Via Webex**

<https://sfdph.webex.com/sfdph/j.php?MTID=me94a8c6fb8cf58a3d75d2766643102f9>

Meeting ID: 133 914 9410 Meeting Password: ctDNypJd563

Join Via Phone: 1-415-655-0003

\* 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**

Present: Saeeda Hafiz, Joi Jackson-Morgan, Jonathan Butler, Roberto Vargas, Irene Hilton, Nayeli Bernal (Raimi & Associates), Kym Dorman (Raimi & Associates), Christina Goette, Melinda Martin

Meeting called to order at 10:07am

##### 2) **Approval of June Meeting Minutes** - [discussion and action]

Joi motions to approve June meeting minutes. Jonathan seconds. Meeting minutes are approved.

##### 3) **Review and Consideration of Agenda** – [discussion and action]

Joi motions to approve agenda with the following changes, rearrange agenda item order to after agenda item

4) General Public Comment, 5) SDDT Evaluation Review, 6) Educational Investments Literature Review, 7) Data & Evidence Work Plan Review. Irene seconds the motion. Agenda is approved.

##### 4) **General Public Comment**- [discussion] - No Public Comment

##### 5) **SDDT Evaluation Review – Raimi & Associates** [discussion and possible action]

Kym Dorman of Raimi & Associates presented modified presentation of what was presented previously to SDDT grantees, evaluation webinars and as well as update on overall SDDT evaluation framework. She shared that they are working with the SDDT grantees, including city funded agencies to identify existing data for the FY 19/20 evaluation report. The SDDT grantee webinars provided an opportunity for grantees to provide feedback on the evaluation framework, logic model as well organizations COVID 19 relief efforts. The SDDT evaluation framework aligns with SDDTAC vision and values. Its components is comprised of questions, logic model and data collection for FY 20-21 and dives into existing data, building off of what exists and ensuring that folks are understanding what they are thinking. Kym sought out any initial thoughts from



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members regarding the evaluation questions. Member suggested to phrase as Healthy People and Healthy Places as foundation for evaluation questions. Member questions whether or not certain types of jobs are being created by SDDT funding, whether job types are full or part time, are community members being hired, etc.

Kym shares logic model: goals, strategies, outcomes, impact and metrics. The logic model illustrates how they are we tracking to achieve outcomes and impact. Raimi & Associates is working with grantees to determine what is most meaningful and if that data is available. Kym shared that during the grantee evaluation webinar, the values are critical to the work and the SDDT grantees want to have them lifted in the logic model so that it cuts across everything and is at front and center to the work. Members suggested to note at the bottom of logic model slide. The logic model reflects feedback from SDDT funded organizations, ensuring that the logic model captures the breadth and depth of the work. Metrics are still being finalized and is aligned with outcomes and impact from SDDT funded organizations and government agencies. Member asked if Jonathan – do we need to put in the metrics? Kym shares that the metrics will be drafted and shared with the data and evidence committee. Member suggests that metrics should be quantified inclusion of by what percentage, specific targets and to identify increase or decrease depending on impact, which can motivate grantees in achieving their target goals. Member suggests to use percentages as part of outcomes and include language such as X% per year. Member suggests that it will help guide how data is looked at and how budget recommendations fit within logic model and may help to introduce new recommendations based on what SDDT is doing. Member reminds members that the soda tax is not the only funded program to address issues, that the soda tax supports other initiatives so that people don't feel that soda tax in a vacuum; it takes years for movement; metrics and process measures is critical – behavioral outcomes after process outcomes; health outcomes will be determined in multiple years, especially with structural and economic barriers. Member shared that in part, it is how data is being communicated and grantees can pull from that data. Member shared an example that dental data will only be for kindergarten age children from SDDT but there is also data that is not captured of sealants providing to older children. Kym shared that they will be looking at a broader context of and looking at SDDT grantees. The story of impact of the SDDT funding and the desired impact will be incorporated. Kym notes that they will need to identify how to infuse specific percentages and how the change would be captured, which may be difficult to hone in on clear facts and causal relationship of change when looking at population. Member shares that they like desired impact, it makes it sound aspirational and not holding SDDTAC. Desired impact and collective impact will be added to logic model.

Kym shared that they have had conversations with the Bay Area evidence team (UCB, UCSF and Stanford). Members would like to get the team's perspective on what they feel are the key story lines and align with their work specifically on SSB consumption, social norms and people changing behavior prior to soda tax legislation. It is critical that mitigating harms and deploying resources are noted and identified.

Kym seeks members ideas that are important to include as part of the narrative of SDDT funding. Member suggests highlight things that were not being done before the soda tax or if more is being done, identify the



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baselines and if there is improvement or disease outcomes or health improvement. Identify new things that were not happening before or measuring before. Any new collaborations, new programs, new data. Another member suggests inclusion of hiring of workforce development, no data for health improvement currently but looking at behavioral improvements. It will be helpful to add numbers and what the percentage of the change, raise the prices by what percentage, will need to compare behavior prior and during the soda tax legislation. Member adds that basic numbers around students' stipends, the work they have done and the beginnings of the water stations at the school district and some of those activities. Inclusion of baseline data of water consumption can also tell the story. Member suggests to include qualitative and quantitative data. Kym shares that they are in the processes of possibly doing interviews and want to balance stories and how a program has benefited them or community. Staff added that additional stories can be included from the Emergency Food funds, such as those from Bayview Senior Center food distribution. Member also suggested to include any stories related to the impact of the school kitchen upgrade. Member also suggested in funneling the aligned work of Our Children and Our Families together. Kym shared that Raimi & Associates will combine the feedback from grantee webinar, Bay Area evidence team and D/E subcommittee, finalize metrics and think about outline for the evaluation report for FY 19-20. They like members recommendations of story telling of healthy impact are longer term and behavioral impact currently. Member recommends to keep racial equity lens as history of why health disparities exist, in telling the story that lens can be there in the narrative.

### 6) Educational Investments Literature Review [discussion and possible action]

#### a) Pipeline Programs

Jonathan will create criteria to evaluate white papers to be reviewed for educational investments at the next data and evidence subcommittee meeting. Irene shared with members via email on dental specific pipeline programs. Literature focuses on junior high/high school level programs and have been running for 5 years. Member noted that the age range was not discussed at the SDDTAC meeting and to consider also for others who were already in their careers and possibly needing a boost. Jonathan will include dental pipeline program literature provided by Irene. Member suggested reaching out to Don Woodson or UCSF, affiliated with its health professional pipeline programs. Hopefully he would help identify what exists, including the Metro Health Academy partnership between City College SF and SFSU. Member added that there are several health academies at SFUSD, with local programs that will help round out what opportunities exist. SF Build at UCSF. It was suggested to invite Don Woodson for future discussions and possibly would have great recommendations and ideas. Member suggested to include as part of the criteria, student leadership as a category. After criteria grid is created, share with subcommittee and in hopes to spark discussion. Member shared the possibility of possibly onboarding people via contact tracing, some employees have been deployed into that role, either can be entry level opportunities for those interested in getting into public health. Member shared discussion with Tracey Packer of DPH of the possible opportunity to hiring individuals specifically from Sunnydale and hire the young people to be contact tracers. Member shared that it would be best to work with youth who can support and provide them entry level opportunities that can be paid with more than 10 hours a week, if at all possible. Member added that youth already have skill sets of outreach and connecting with others. Member added that youth would bring tremendous value that can be brought



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via communications to those at highest risk of COVID 19. Putting the youth ahead of it and identify what lessons have been learned from outreach within the Mission and Tenderloin neighborhoods.

### 7) **Data & Evidence Work Plan Review** [discussion and possible action]

Melinda shared the SDDTAC work plan includes an integrated section of what the data and evidence subcommittee was working on FY 19/20. Melinda will update to reflect the newer items that include pipeline programs, data report and evaluation framework. Member suggested to have pipeline programs models after national pipeline program work so that the SDDT pipeline programs can be stronger in relation to its recommendations. Member added to note in work plan that the previous work plan was set and grounded initially and has pivoted and shifted with the changes around COVID 19 and the committee bases its work around the data and what is happening in the community, especially how the pandemic has impacted the community and helps to inform the data and evidence subcommittee's work. Member added the importance to include the impact of COVID-19, being able to reflect on what was initially planned to do, and now plans are being less relevant due to pressing needs of the community and being able to reassess what is happening in the world how the committee responds. Member shared their interests whether or not there are shifts in consumption of SSB, given that people may be taking more risk in this moment, alcohol consumption, mask wearing or people's perceived notion of risk and relevant to the committee's conversation, does it have relation to SSB consumption. Member added that data or behavioral changes during the COVID 19 pandemic will not be available and to look at the national level to determine behavioral changes to SSB consumption and physical activity. Saeeda suggested for members to review the data and evidence work plan and to identify what can be added to the FY 20/21 work plan and send to Melinda before August data and evidence subcommittee meeting.

### 7) **Housekeeping** [discussion and possible action]

#### a) Infrastructure Subcommittee Update

Infrastructure subcommittee reviewed SDDT emergency food budget and its allocations. The committee noted that the Mayor's Office is reviewing departmental budgets and reviewing Board of Supervisors recommendations soon. The Mayor's Office Budget will be released at the end of July including their proposed SDDT budget allocations for FY 20/21 and FY 21/22. Members expressed that hopefully the proposed budget will continue to be allocated to the community and children. Staff shared that SDDT funded organizations are continuing to shift their work according to COVID relief efforts and needs of their communities.

#### b) SDDT Media Update

Melinda shared that Civic Edge contract ended June 30, 2020. Staff has been working with Civic Edge and its partners to close out activities and identifying whether or not SDDT media photos will need to be adjusted to accommodate the health order of masking wearing.

### 8) **Agenda items for August 12, 2020 Meeting** [discussion and possible action]



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- Raimi & Associates evaluation presentation
- Review of D/E work plan
- Educational Investments/Pipeline Programs Literature Review
- Identification of subcommittee interests and collect to present to SDDTAC and how funds will be spent in next fiscal year
- Realignment and development of how to measure impact and identify ways to consider impact given investment for the next fiscal year
- Discuss expanding dental checks for 3<sup>rd</sup> graders

9) **Public Comment** – No Public Comment

10) **Adjournment**

Roberto motions to adjourn meeting. Irene seconds. Meeting is adjourned at 12:00pm

### **PUBLIC COMMENT**

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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415-554-7724 (Office); 415-554-7854 (Fax), E-mail: SOTF@sfgov.org

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### LANGUAGE ACCESS

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](mailto:minouche.kandel@sfgov.org) at least 48 hours in advance of the meeting. Late requests will be honored if possible.

### DISABILITY ACCESS

Family Violence Council meetings are held in room 617 at 400 McAllister Street in San Francisco. This building is accessible to persons using wheelchairs and other assistive mobility devices.

Mayor's Task Force on Anti-Human Trafficking meetings are held in Room 305 at City Hall, 1 Dr. Carlton B. Goodlett

Place in San Francisco. City Hall is accessible to persons using wheelchairs and other assistive mobility devices. Ramps are available at the Grove, Van Ness and McAllister entrances.

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## Comparison between SDDTAC Recommendations and Mayor's Allocations FY19-20

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%	<i>SFUSD via DCYF</i>	
			Comm Engag	\$50,000	.45%	<i>Total</i>	<i>-\$345,000</i>
School Food, Nutrition Education, Student Led Action	\$1,000,000	14.42%	SFUSD	\$1,500,000	14%	<i>SFUSD via DCYF</i>	\$0
	\$500,000		SFUSD	\$500,000		<i>SFUSD via DCYF</i>	
Food Access	\$1,000,000	9.62%	DPH	\$1,000,000	10%	DPH	<i>\$35,000</i>
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%	<i>SFUSD via DCYF</i>	
			Sealant Pgm	\$450,000	3.13%	DPH	
			Edu/Case Mg	\$200,000	1.79%	<i>Total</i>	\$0
Infrastructure	\$1,000,000	11.92%	DPH/CHEP	\$1,000,000	8%	DPH	<i>-\$240,000</i>
Water Access - SFUSD	\$0	2.88%	SFUSD	\$0	0%	<i>SFUSD via DCYF</i>	\$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%	<i>DPH</i>	<i>\$400,000</i>
<b>Total</b>	<b>\$10,400,000</b>	<b>100.0%</b>		<b>\$11,190,000</b>	<b>100%</b>		



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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.



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## SDDTAC Recommendations FY19-20 and 20-21

	FY19-20	FY20-21	%	Department
<b>COMMUNITY-BASED GRANTS</b>				
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
<b>TOTAL COMMUNITY BASED GRANTS</b>	<b>\$4,290,000</b>	<b>\$4,290,000</b>	<b>41%</b>	
<b>SFUSD</b>				
School Food, Nutrition Ed	\$1,000,000	\$1,000,000		SFUSD via DCYF
Student Led Action	\$500,000	\$500,000		SFUSD via DCYF
<b>TOTAL SFUSD</b>	<b>\$1,500,000</b>	<b>\$1,500,000</b>	<b>14%</b>	
<b>FOOD ACCESS</b>				
Healthy Food Purchasing Supplement	\$1,000,000	\$1,000,000		DPH/CHEP
Healthy Retail	\$150,000	\$150,000		OEWD
<b>TOTAL FOOD ACCESS</b>	<b>\$1,150,000</b>	<b>\$1,150,000</b>	<b>11%</b>	
<b>ORAL HEALTH</b>				
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
<b>TOTAL ORAL HEALTH</b>	<b>\$1,000,000</b>	<b>\$1,000,000</b>	<b>10%</b>	
<b>INFRASTRUCTURE</b>				
DPH Infrastructure	\$1,000,000	\$1,000,000		DPH/CHEP
Strategic planning	\$40,000	\$ -		DPH/CHEP
Evaluation	\$200,000	\$200,000		DPH/CHEP
<b>TOTAL INFRASTRUCTURE</b>	<b>\$1,240,000</b>	<b>\$1,200,000</b>	<b>12%</b>	
<b>WATER ACCESS</b>				
Water Access - SFUSD	\$ -	\$340,000		PUC via RPD/DPW?
Water Access - Public Spaces	\$300,000	\$ -		PUC via RPD
<b>TOTAL WATER ACCESS</b>	<b>\$300,000</b>	<b>\$340,000</b>	<b>3%</b>	
<b>SF Recreation &amp; Parks</b>	<b>\$520,000</b>	<b>\$520,000</b>	<b>5%</b>	RPD
<b>HOPE SF Chronic Disease Equity</b>	<b>\$400,000</b>	<b>\$400,000</b>	<b>4%</b>	DPH/Behavioral Health
<b>Total Proposed</b>	<b>\$10,400,000</b>	<b>\$10,400,000</b>	<b>100%</b>	



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	Budget Descriptions
<b>COMMUNITY-BASED GRANTS</b>	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 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:
Health education, food security, physical activity	<ol style="list-style-type: none"> <li>1. Health Education activities including, chronic disease prevention, healthy eating and active living, tap water promotion, oral/dental health</li> <li>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)</li> <li>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.</li> <li>4. Water Promotion, such as support for Spa Water Supplies, station maintenance/beautification, refillable water bottles to distribute to communities, water testing</li> <li>5. Community Based Participatory Research</li> </ol>
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/CHEP 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.



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<b>SFUSD</b>	
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.
<b>FOOD ACCESS</b>	
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.
<b>ORAL HEALTH</b>	
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	
<b>INFRASTRUCTURE</b>	



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<p>DPH Infrastructure</p>	<p><b>A. Personnel</b>            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            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.            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  <b>B. Professional services</b> 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  <b>C. Materials/Supplies</b> for meetings and printing costs  <b>D. Training</b> to support staff development  <b>E. Data</b> for collection (pricing), analysis (Nielsen) and purchase (IRI)</p>
<p>Strategic planning</p>	<p>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</p>
<p>Evaluation</p>	<p>Additional funds for evaluation may:            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</p>
<p><b>WATER ACCESS</b></p>	
<p>Water Access - SFUSD</p>	<p>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.</p>



# San Francisco Department of Public Health

Dr. Grant Colfax  
Director of Health

City and County of San Francisco  
London N. Breed  
Mayor

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 intensifies 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 ADBACKS 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
		<b>TOTAL</b>	<b>1,157,000</b>

\*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.