



# 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)*

### MINUTES

February 10, 2021 – 10:00AM

Join Via Zoom

<https://sfdph.zoom.us/j/92705994996?pwd=RIVzRUtBalh3Vk9GaXNpYTJGR0lZUT09>

Meeting ID: 927 0599 4996; Passcode: 269275

Join Via Phone: + 1(669) 900 6833 US (San Jose)

\* 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** Meeting called to order at 10:06am

Present: Jonathan Butler, Saeeda Hafiz, Irene Hilton, Roberto Vargas

Absent: Joi Jackson Morgan

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

Jonathan motions to approve minutes. Irene motions to approve. Minutes are approved.

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

Jonathan recommends to remove agenda item “opportunities/highlights” to end of agenda before 11:30am.

Irene motions to approve agenda as recommended. Jonathan seconds. Agenda is approved.

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

5) **Housekeeping** – [discussion and possible action]

Staff shares that there are 13 candidates who have applied for the SDDTAC upcoming vacancies. Members expressed support for candidates applying for research/medical institution seats. Member asked if being employed by a community based organization is required for the health equity seats 1-3? Staff responds that the SDDTAC legislation indicates that there should be a broad representative of non-profit organizations. Member also expressed support for SFUSD PAC appointed candidate. Staff shared that March SDDTAC meeting may be cancelled, so that staff can orient new members. Jonathan and Roberto expressed interest in mentoring new members. New members will not join subcommittees as of yet. The orientation can be open to the SDDTAC so that they too can join the orientation. Members expressed support for existing members who can serve as co-chairs for the upcoming term.



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### 6) SDDT Annual Report [discussion and possible action]

#### a. Data and Evidence Subcommittee Section

Saeeda presented the data and evidence subcommittee report to be included as part of the annual report submission in March. "Committee" should be changed to "subcommittee". Member clarified that members did not meet with BOS at subcommittee level but rather co chairs. Member suggested to add to accomplishment section and to include the following as well:

- for the past year the committee focused on covid 19 expanding to go beyond emergency;
- Support for local economic development
- Accomplishments #11 : the funds will show that how money was divided up and assigning it to kitchen upgrades, breastfeeding, etc.

Member recommends to adding that data and evidence subcommittee member made budget recommendations for additional revenue to support healthcare career pipeline programs and to continue strategy development. Additional accomplishments include: pipeline program presentation and discussion with Don Woodson (UCSF), literature reviews, voting on another subcommittee chair. In addition, to add to local economic development, that committee responded to full committee request for reviewing data and evidence on pipeline pathway development for young people into health career pathways, hearing from local experts and reviewing literature on the subject to make recommendations on SDDTAC support for health career pathways. Member shared the future considerations section. Saeeda shared that she pulled out disproportionate burdens levels of diet related chronic diseases, linked with COVID, to keep it as a priority and continues to be compounded by COVID. Member suggested to add "these same communities are compounded by; without the word and, we understand the communities are also disproportionately impacted by COVID and understand that diet related chronic disease is a risk factor for illness and death for COVID." Member suggested to ensure that data and evidence continue to update research database related to behavioral outcomes/consumption and SDDT strategies from strategic plan, which includes topics related to racism, health disparities research achieving equity. The importance to align research with community and to address the issues by being able to reference the latest evidence around behavioral factors and SDOH. We don't have evidence of that as of now, but as new evidence comes in, it should be updated with the inclusion of context of COVID 19. Members suggest to collect data/evidence in google folder. Member reminded members that d/e has started with a grid and it should be updated with the latest evidence and the need to flesh out mental health and SDOH. Member suggests rather than saying that we are objective but guided by data evidence, relying on our DPH staff for latest data and relying on our network in the scientific community for the latest evidence. Leaving behind the legacy of the practice and sharing with the full committee. Member expresses that data and evidence have this plan in place to make sure we update our evidence based on priorities and the SDDT strategic plan, to always go back to that.

Jonathan motions to approve data and evidence section report with edits. Roberto seconds. Motion passes.

#### b. SDDT FY 21-22 and FY 22-23 Budget Recommendations/Descriptions



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Staff provided overview of budget recommendations from other subcommittees.

Member recommends to fund strategy of career health pathways for \$150K to pilot, explore opportunities in that realm and to support status quo in the past. Member shared that there have been communication from community about concerns about water access for people experiencing homelessness. Member recommends to continue investment in public water stations. Members agree to operate by percentages and affirm to that.

Data and Evidence Subcommittee FY 21-22 SDDT Budget Recommendations:

- Community Based Grants: \$3,800,000 [Community Based Grants \$3,500,000; SFUSD working with CBOs \$300K]
- SFUSD: \$1,500,000 [School Food, nutrition education \$1,000,000; Student Led Action \$500K]
- Food Access: \$1,350,000 [Healthy Food Purchasing Supplement \$1,200,000; Healthy Retail \$150K]
- Oral Health: \$1,000,000 [Taskforces \$450K; School Based Sealant Application \$350K; School Based Education & Case Management \$200K]
- Water Access: \$100,000K – Public Spaces
- SF Recreation & Parks: \$950K
- Infrastructure: \$800K

Data and Evidence Subcommittee FY 22-23 SDDT Budget Recommendations:

- Community Based Grants: \$3,800,000 [Community Based Grants \$3,500,000; CBOs working with SFUSD \$300K]
- SFUSD: \$1,650,000 [School Food, Nutrition Education \$1,000,000; Student Led Action \$500K; College Scholarships/Healthcare Career Pathways \$150K]
- Food Access: \$1,350,000 [Healthy Food Purchasing Supplement \$1,200,000; Healthy Retail \$150K]
- Oral Health: \$1,000,000 [Taskforces \$450K; School Based Sealant Application \$350K; School Based Education and Case Management \$200K]
- Water Access: \$100K – SFUSD
- SF Recreation & Parks \$1,775,000 [Peace Parks \$650K; SVIP Funding \$225K; Requity \$900K]
- Breastfeeding: \$175K
- Support for Small Business/Merchants: \$250K
- Infrastructure: \$800K

7) **Opportunities/Highlights of Serving on SDDTAC** [discussion and possible action] tabled to next meeting

8) **Agenda items for Next Meeting** [discussion and possible action]

- April meeting – review of literature database
- Keep members informed of new member orientation
- Glance at work plan to use as a tool in serving on SDDTAC



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

### 10) **Adjournment**

Roberto motions to adjourn. Irene seconds. Meeting is adjourned at: 12:29pm.

#### **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.

#### **RINGING AND THE USE OF CELLPHONES**

The ringing of and use of cell phones, pagers and similar sound-producing electronic devices are prohibited at this meeting. Please be advised that the Chair may order the removal from the meeting room of any person(s) responsible for the ringing or use of a cell phone, pager, or other similar sound-producing electronic devices.

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City Hall – Room 244 1 Dr. Carlton B. Goodlett Place, San Francisco, CA 94102-4683,  
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.

Assistive listening devices, American Sign Language interpreters, readers, large print agendas or other accommodations are available upon request. Please make your requests for accommodations to Minouche Kandel (415) 252-3203, or [minouche.kandel@sfgov.org](mailto:minouche.kandel@sfgov.org). Requesting accommodations at least 72 hours prior to the meeting will help to ensure availability.

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



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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>	<p>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:</p> <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	<p>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.</p>
Media	<p>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.</p>
Community engagement	<p>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.</p>



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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>



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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.