



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

October 14, 2020 – 10:00AM

Join Via Webex

<https://sfdph.webex.com/sfdph/j.php?MTID=m231b410f1c67688772643a83fbf2a9d8>

Meeting ID: 133 206 8144 Meeting Password: awGQNp86Ts6

Join Via Phone: 1-415-655-0003 Access Code: 133 206 8144

* 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: Irene Hilton, Roberto Vargas, Joi Jackson-Morgan, Christina Goette, Melinda Martin

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

Joi motions to approve minutes. Irene seconds. Minutes are approved.

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

Irene motions to approve agenda. Joi seconds. Agenda is approved.

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

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

a) **SDDT Budget Review**

Staff shared that the SDDT FY 20-21 budget was passed by the Board of Supervisors as presented by the Mayor's Office. Member asked if there is an update as to the \$2.7Mil that was deducted from the SDDTAC budget recommendations as well the budget cuts to SFUSD. Staff responded that there has not been an update but that there is a 2-3% budget reduction for SDDT funded CBO grants. Carry forward funds for the Oral Health Taskforce, CBO food security (\$500K) was approved. Member noted that if RPD was able to maintain scholarship funds, it is important to identify what the \$2.7Mil was allocated to. Member moves that staff follow up with Mayor's Office to provide description of how diverted funds are being spent. Irene seconds. Motion is approved.

6) **SDDT Evaluation Report – Raimi & Associates** [discussion and possible action]



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Kym from Raimi & Associates presented latest update on SDDT evaluation report. Current report has yet to be formatted due to receiving additional input and feedback. Kym presented the background of the report, which indicates the landscape, SF generally healthy, however there are still disparities such as food access, income, systemic inequities, etc. The intent is to uplift key stories and how those link to the SDDTAC strategic plan and alignment with the logic model. The evaluation report has two goals of strengthening people by promoting equity to promote healthy places. Each goal area corresponds to specific strategies either implemented by SDDT grants highlighting programming pre COVID and during COVID pandemic times. Evaluation report will include appendices with more detail on SDDT grantees.

Second section of the report focuses on how SDDT funds have helped to create healthy places and highlights funding leveraged to focus on structural inequities, such as physical retail environment. Member recommended the importance to be clear on how SDDT funded work is linked to inequities. Kym shared that the report strategies of uplifting stories of the impact of SDDT funding and how it has been used to address place-based inequities: water, healthy retail, dental care, recreation activities and safe parks, etc.

Member asked if there is any impact data, using the examples of water access or any other examples. There is information on SDDT funding and impact on water and hydrations stations in key neighborhoods: 9 in schools and 10 in parks, which will also include map for hydration stations. Due to COVID there was a delay in installation. Current data is for stations that have been implemented. Member expressed importance of the collection of behavioral data and has there been SDDT funded agencies that collect behavioral data. There is one study by Dr. Annisha Patel that has researched the impact of installing water stations and policy change. Member asked if there is a section on data sets which could set up future recommendations, to ensure that it is reflected in the priorities. Staff shared that SDDT grantees to collect behavior change data, pre data was collected prior to COVID but due to COVID post data was is not available. The Qualtrics data from SDDT funded grantees will be listed, data is not as robust for current year due to COVID-19, but Raimi & Associates anticipates for future years behavioral data will be more robust.

Additional findings highlighting hyper local economy in key neighborhoods: healthy food purchasing supplements, Eat SF vouchers and support for local farms. SDDT supported emergency food – able to leverage addressing structural inequities that existed prior to COVID 19 due to systems and infrastructure in place for SDDT grants. Stories are highlighted with HOMEY and Farming Hope. SDDT funds were used to address physical activity in most impacted neighborhoods. Important to include overarching strategy and specifics about details from RPD. Member recommends including information of RPD's efforts to support essential work's childcare, if SDDT funds were used. Linda to clarify.



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Conclusions section, Raimi & Associates will include trend data to see overtime if there was change that occurred. Would like to include information as to what members would like to see in the findings to illustrate to decision makers and policy makers how this funding and data will be set up for the future. Member suggests reimagining new strategies for encouraging consumption of public water, especially as we are in a new world where COVID 19 exists and to approach the thinking of how to invest soda tax funds with COVID 19 still in existence. The need to think about how soda tax funds that impact the same communities but do not abandon the focus on chronic disease and disparities within the context of COVID 19. In the looking ahead section, its to be responsive to the community's needs and ensuring that policymakers understand our recommendations and what we are prioritizing. It is important for SDDTAC to pivot our recommendations to incorporate COVID into our work. Raimi & Associates agrees and wants to ensure that the intent is coming through in the report. Member agrees that it is important to note where soda tax funding started and how the committee had to respond and pivot with community in mind. Draft evaluation report will be shared with the SDDTAC next week. Please forward any comments by Monday to ensure edits are incorporated before SDDTAC meeting next week. Evaluation report format will be like SDDTAC strategic plan with photos. Members to submit feedback no later than Wednesday, October 28th.

7) **Responding to COVID Impact** [discussion and possible action]

Roberto sought out member's feedback that can be shared and discussed at the full committee meeting next week and encourages members to think about recommendations that consider priorities that because of COVID 19. Member shares that committee has been doing the work and agrees to welcoming feedback. Kym Dorman shares that Kris Madsen shared that SF SDDTAC as a model and Raimi & Associates will determine how to include that information. Member discussed how various members have contributed to various ways that they have worked in response to COVID 19.

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

- November D/E meeting cancelled – meeting date falls on Veteran's Day
- Presentation from Raimi & Associates (evaluation report and evaluation plan)
- Invitation and Presentation from Donald Woodson on best practices and local Pipeline Programs
- Presentation from Joi and Jonathan on Pipeline Programs data analysis research

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

10) **Adjournment** - Irene motions to adjourn. Joi seconds the motion. Meeting is adjourned.



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



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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>
Total	\$10,400,000	100.0%		\$11,190,000	100%		



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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
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%	



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	Budget Descriptions
COMMUNITY-BASED GRANTS	<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"> 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	<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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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	



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<p>DPH Infrastructure</p>	<p>A. Personnel 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. 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 C. Materials/Supplies for meetings and printing costs D. Training to support staff development E. Data 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>WATER ACCESS</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
		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.