



# 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

**December 9, 2020 – 10:00AM**

**Join Via Webex**

<https://sfdph.webex.com/sfdph/j.php?MTID=m3d9778d9a5d37263c2b090cf7ac6f81b>

Meeting ID: 133 803 6836; Password: VKsZ7PRV3H9

Join Via Phone: 1-415-655-0003 Access Code: 133 803 6836

\* 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: Joi Jackson-Morgan, Roberto Vargas, Irene Hilton, Saeeda Hafiz, Nayeli Bernal, Frances Vega, Donald Woodson, Kym Dorman, Paige Kruza

Absent: Jonathan Butler

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

Irene clarifies on page 1 of SDDT CBO grants 2-3% budget reduction.

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

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

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

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

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

###### a) **SDDT Memo to Mayor's Office**

Staff shares that a quarterly draft memo was shared with members for their review. The memo will be sent quarterly to the Mayor's Office to provide a SDDT updates to keep them informed. All subcommittees have reviewed the draft memo and it will be voted on at the SDDTAC December meeting. Members will review and be prepared for vote at SDDTAC meeting.

##### 6) **Pipeline Programs – Donald Woodson** [discussion and possible action]

Saeeda welcomes Donald Woodson to the SDDT data and evidence subcommittee meeting. Mr. Woodson



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outlined his presentation of what is being done with UCSF Pipeline Programs, its outcomes and keys to success and challenges. He expresses of what he will present challenges is outside of COVID 19 and how it is being navigated. UCSF's Center for Science, Education and Outreach (CSEO) has been in existence since 1999. Goal is to provide students at SFUSD and beyond, how STEM opportunities can be shared and serve students. CSEO has two programs that focus primarily on SF students: Early Academic Outreach Program (EAOP) and Math, Engineering, Science, Achievement (MESA). The focus of those programs are college prep and focus on health care access, career exploration, health education, life skills and academic support. The program camps and internships are: Program for Investigation & Training in Careers in Health (PITCH), CURE internship, Brain Camp, Summer Science camp and MESA summer experience. The focus is to work with specific schools within the SFUSD and community partners to provide opportunities. In certain schools in SF, certain CBOs and working with students and families. Programs are carved out in the summer focused on health career exploration. CURE Internship focuses on Black/African American and Latinx students to UCSF to work in the labs and have wrap around services to ensure confidence for students. BRAIN camp, run by UCSF students and focused on neurology. Summer Science is focused on 4<sup>th</sup> and 5<sup>th</sup> graders who come to UCSF and will spend a week during hands on STEM activities. MESA Summer Experience is working with SFUSD on Black Star Rising Group, hands on opportunity for bridge building competition. Since programs are yearlong, we are able to have specific outcomes and look as a form of success, the combination of programs and have shown to interest in healthcare. Initial numbers in 9<sup>th</sup> grade were 31% and with exposure to healthcare opportunities has increased to 69%. It is not the healthcare staff that is focused on but also introduce the levels of education needed for each health position, so that students can see where they see themselves. Keys to success: touch points: number of times that we are speaking, advising with students, and seeing the direct correlation with the student. It is an important opportunity to have as many touch points with the students as possible. One stop shop, approach is to look at what can be put into place to support students: college access, healthcare exposure, skill sets, etc. Intentionality, to be very intentional of who we want to work, how we are working with them and what are the potential outcomes of what we want to see. Aligned partnerships, we want to ensure that when developing partnerships, we want to ensure we are aligned for meeting mutual goals and outcomes. Students connecting experience back to the classroom and how those experiences are changing them.

There have been various challenges to our pipeline programs. Funding and the sustainability. If there is no funding to sustain certain activities, it makes it difficult to develop partnerships due to lack of funding. Industry Access: difficult to get young people in the healthcare setting due to policies and regulations and learning how to navigate access. UCSF has just hired a Pipeline Manager who will be focused on identifying ways for increased access, reaching out various departments at UCSF to create more, opportunity and identifying community's needs to expand the opportunities for students at UCSF. Long term tracking and follow up, who are the students within the program. It is up to the programs to create how to engage students over time. UCSF has been somewhat successful; however students sometimes choose other careers. Policies and regulations, being able to navigate for those especially looking for funding.

Member thanks Donald for his presentation and seeks his recommendation about reaching out to sustain



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Black/Brown students in STEM programs, when they often need to work to support their families. What has been successful in attracting Black/Brown students and what promising programs outside of UCSF? Donald responds to the importance of intentionality: wanting to attract Black/Brown students, don't shy away from it and stipends are beyond valuable and not just stipends paying minimum wage. In one UCSF program it pays \$5,000 for the summer, it is purposeful and we talk about it in the CURE internship and having students understand the difference between working at McDonalds and working in one of the STEM working fields and aligning with it is work. If funding is going to be distributed, stipends need to be included. Donald has seen a number of programs that have been working outside of UCSF, such as CPMC and they have been doing similar things and they are yearlong but many of them are summer exposure or job shadowing and is limited due to policy and procedures. They have been successful programs, through Kaiser Permanente, ZSFGH and other programs around in the Bay Area.

Member shares that the 3<sup>rd</sup> Street Youth Center & Clinic which runs the Bridge Program for the past 5 years. It is imperative to provide stipends and want to support the youth. In regard to program sustainability, does UCSF see this as an investment in the future work force? Donald responds, UCSF is now better understanding the value of pipeline programs and thanks to vice chancellor has championed the importance of pipeline programs. Next step is looking at how programs can be better funded. Joi thanks Donald for presenting to the subcommittee and provides background as to the potential of soda tax revenue to support pipeline programs with understanding the challenges, processes and successes. How do we get the city to understand our discussions and know that by doing so, it is addressing equity? Donald suggests looking at what does the data show and look at the diversity in SF. When looking at the importance of healthcare in the city, especially now and looking at the challenges of equity, highlighted through COVID, there is a need to invest in pipeline programs that are focused on Black/Brown students, it should highlight the lack of diversity within the healthcare system in SF and the lack of equity in healthcare. Member asks where this data exists? Donald suggests that it should exist and should highlight the recommendation. Member suggests there should also be an evaluation attached to data. Donald recommends that there has to be an alignment that is intentional in its outcomes for the students that need to be served. He has seen over and over again in the city starts out with the intention and then outcomes get watered down and there should be some accountability of what could be done. Making part of the RFPs to be collaborative and partner with industry partners and funding streams that go to both entities so there is alignment on both ends.

Donald shares that UCSF had to question the point of what happens after the students leave and how to help the students what they have learned to be actionable, which goes back to intentionality. Member asked is it enough to say that we are recommending pipeline program, are we missing another component to accompany this recommendation? Donald suggests to having a scaffolding approach to more than just a 3 week program, which students can build upon their learning. He suggests thinking about the program from a one stop shop approach there are multiple pieces that lead that student to a form of success and what are those barriers? Stipends and scholarships are important. There is a broad sense in pipeline programs and it not just about the career, there are other factors that will help students guide them closer to that choice. Multiple touch points, where are the points in your pipeline program that students can leak out, the ask that you are making should also include where those leaks are, maybe funding for higher education, stipends,



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yearlong program instead of summer programs. Member shares that with stipends coming from SFUSD around soda tax funding we have various youth programs, that have been siloed. A lot of times we are always looking at one lane and it is important to look at the multiple ways of resources. Connection with families, SFUSD is now opening up to have deeper connection with the families. We are curious about how you have set up to work with families to receive this experience for the students especially with the stipends being such a large amount. Donald shares that they have mandatory family night and discusses the stipend with parent/caregiver and provides the breakdown of 3 payments to student and is done purposefully. It is critical to create an environment with the parents/caregivers to ensure that all is aligned with the education provided to the student as well as their families. Member notes that if pipeline programs and how the soda tax committee can work holistically and be interconnected on how we do things and not just about kitchen upgrades to feed students. Member notes that now we are on our data collection side and now want to take deeper dive to find outcomes of local pipeline programs. Saeeda notes that the subcommittee will need to review at January meeting. Donald suggests that if members are interested to have him as a thought partner, he is happy to do so. Saeeda asks Donald if he would be interested to present to the SDDTAC, will work with Roberto for scheduling. Donald thanks everyone and is excited about this potential opportunity and appreciates the emphasis on viable health careers for young people.

7) **Health Career Pathways – Joi Jackson Morgan & Jonathan Butler** [discussion and possible action] - Agenda item will be moved to January data and evidence subcommittee meeting.

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

Kym presents evaluation report to circle back around with its final phases and seek members feedback on the conclusion and recommendations section. The Looking Back/Looking Forward section begins with longer term impacts indicating that population change moves more slowly and will be tracked over time. These sections are to be aligned (conclusion and recommendations). Conclusions include: SDDTAC membership is emerging as a promising practice to meet local needs and inform all of the recommendations brought forward, positive impacts of SF making the case it has been effective, creation of job opportunities for priority populations, strengthening community collaborations and highlighting the rapid response of COVID-19. Kym reviews the alignment of conclusions with recommendations, as well as shared that they were able to receive feedback from Bay Area evidence team and in which they are supportive of the report and had a few edits and comments which the team will be considering and moving forward. Raimi & Associates seeks members final clarifications and edits on conclusions and recommendations. Kym asks if edits can be received by 12/15/2020 and can be realistically incorporated with the intent to complete in early January. Member asked if quarterly memo should be included as part of the submission of the evaluation report? Member responds that the quarterly memo should be sent separate of the evaluation report which will be submitted in Winter 2021 or with March 2021 SDDTAC budget recommendations. Members suggests aligning evaluation report with winter 2021 quarterly memo.

Kym also shares draft evaluation plan and would like to walk through and focus on metrics of the evaluation plan. The SDDT evaluation plan outlines how the plan was developed and close collaboration with SDDTAC, backbone staff and highlights of key themes that were heard via webinars with SDDT grantees. It includes



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metrics and data sources and outline of process metrics. The SDDT evaluation plan is a working document, and Raimi & Associates will ensure that the plan encompasses real time, landscape and within the context. Member shares that it is important to include data that enables SDDTAC to identify and describe disparities and to ensure that equity is being addressed. Another important data component to include is data on those being employed to conduct interventions, to illustrate that the guiding principles of SDDTAC is to address equity in community and that communities are employed to do the implementation. Saeeda thanks Raimi & Associates for working on report and plan. Member shares that subsequent reports will build on current evaluation report and plan. Evaluation plan will be sent out once it is completed. Member will identify if any UCSF scientists would be open to reviewing the SDDT evaluation plan.

### 9) **Potential New SDDT Priority Areas** [discussion and possible action]

#### a. **SDDT D/E FY 21-22 Budget Recommendations**

Move agenda item to next meeting; to provide members time to consider/review potential priorities.

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

- Priority Areas/SDDT Budget
- Healthcare Career Pathways (Joi Jackson-Morgan and Jonathan Butler) with debrief from Donald Woodson

### 11) **Public Comment** – No Public Comment

### 12) **Adjournment**

Irene motions to adjourn. Joi seconds. Meeting is adjourned at 12:01pm.

#### **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.



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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>	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.