



San Francisco Department of Public Health

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Director of Health

City and County of San Francisco
London N. Breed
Mayor

Sugary Drinks Distributor Tax Advisory Committee Infrastructure Subcommittee

MINUTES

December 3, 2019

2 PM

25 Van Ness Ave, Suite 650

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

Order of Business:

1. Call to Order / Roll Call [discussion and action]

Michelle called meeting to order at 2:10pm

Present: Michelle Kim, Derik Aoki, Rita Nguyen, Linda Barnard (via phone), Jorge Rivas

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

Rita moves to approve November minutes, Jorge seconds the motion and the minutes were approved.

3. Approval of Agenda [discussion and action]

Agenda Item #7 – Review of FY 19-20 budget and considerations for FY 21-22 budget recommendations to Review of FY 19-20 & FY 20-21 budget and considerations for FY 21-22 budget recommendations

Rita motions to approve agenda with edits. Jorge seconds the motion. The agenda was approved.

4. General Public Comment

No public comment

5. House Keeping [discussion and possible action]

- a. Data & Evidence Subcommittee Update

Fall 2019 data report up for vote at December SDDTAC meeting

- b. Community Input Subcommittee Update

Next media campaign photoshoot on 12/5/2019 at Recreation and Park site

6. Strategic Planning Session – Raimi & Associates [discussion and possible action]

- a. Status update on strategic planning components (goals/strategies)

Kym Dorman reviews SDDTAC approved mission, vision and values. Member recommends

including evaluation as part of the mission, as it is also a part of their work. It was agreed amongst members to include evaluation as a descriptor. Values were approved by SDDTAC and also has descriptions.

Kym reviews draft strategies with Goal 1: Healthy People! and Goal 2: Healthy Places! She notes that the strategies derived from annual report principles while also reviewing other SDDTAC documents and aligning entities. The intent is to have the strategic plan with goals with explanations. Goal 2 – Healthy Places focuses on primarily past budget priorities, an illustration of data of the annual report. An example would be local hiring, an area that falls into strategies and derived directly from the DPH logic model. Member recommends that wording should be “hire local residents” and this strategy should have process and impact measures, to ensure a reflection of SDDTAC’s funding recommendations.

Member suggests that Goal 1: Healthy People! should include a policy strategy. Kym indicated that Goal 2: Healthy Places! Strategies focus on policy/system and environmental strategies and can include statements that all strategies utilize policy/systems and environmental approaches. Member notes that healthy eating strategy is listed as a behavioral outcome but does not entirely capture the infrastructure/system to achieve the outcome. Member shares that goal 1 strategies include policy/system/environmental approaches and are a direct impact and inherent of systems change.

Kym Dorman presented Slide 17 noting support for SDDTAC, referencing an operational goal such as organizational operational excellence. Member suggested that this can be placed elsewhere in the strategic plan.

Discussion moved back to the draft strategies and was noted that Goal 1: draft strategies 3-4 is repetitive as well in Goal 2 draft strategies, which can be combined that they should result in outcomes. Member added that draft strategies goal 1: strategy #4 expand peer-led/promotora-led interventions, should be inclusive across all goals or include as a description. Members also noted that in the draft impacts and outcomes, breastfeeding is not explicitly included as part of the strategies, similarly to oral health. It was suggested to build strategies to support breast feeding and oral health strategies. Health outcome: increase food security should be classified specifically as community and economic outcomes for food security.

7. Review of FY 19-20 & FY 20-21 budget and considerations for FY 21-22 budget recommendations

Members reviewed the following documents:

- Final Soda Tax Allocations – FY 2019-20 and FY 2020-21
- Comparison Final Document FY 18-19 and FY 19-20

Some budget information was not available during the meeting and context was needed for members to make budget considerations. Members would like the following questions to be addressed before making budget considerations:

- How much infrastructure funds are needed, inclusive of evaluation?
- Will not include strategic planning funds, where can these funds be allocated?
- Should funds for strategic planning implementation be included? Or will SDDT backbone staff conduct monitoring?
- Evaluation – will additional funds be needed?
- Clarification on split funds between Recreation and Park and SFUSD supporting water access between FY 18-19 and FY 19-20
- What are the needs of DPH?
- Which funds are tied to multiple commitments? How is that decided?

- Less work and funds have been committed to breastfeeding and pregnant women
- Should media funding be included – what else is still needed for media campaign?
- What SDDT funds have yet to be expended?
- Is there any carryover funds?
- Are any of the programs funded by SDDT over or under funded?

Member noted that FY 18-19 and FY 19-20 funds allocated for Recreation and Park (\$2Mil) is in the process of being set up to get the program started. Currently Recreation and Park is building programming for hiring and once infrastructure is set up, funds will be expended. Members agreed that funds for Recreation and Park would be similar, however where would the \$2 Mil come out of.

8. Discuss possible agenda items for 1/7/20 Meeting [discussion and possible action]

- Strategic planning update
- SDDT FY 21-22 year budget considerations
- Evaluation update

9. Public Comment

Jorge announced that he was appointed to the Economic Mitigation Committee and will be stepping down from the SDDTAC. Today's infrastructure committee meeting will be his last day for SDDT. He will be appointing a colleague to represent seat 7. Members thanked him for his service.

10. Adjourn

Jorge motions to adjourn meeting. Rita seconded the motion. Meeting is adjourned at 4:09pm.

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 FY 19-20

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

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

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

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

SDDTAC Recommendations FY19-20 and 20-21

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

	Budget Descriptions
COMMUNITY-BASED GRANTS	City Departments should contract directly with CBOs through an RFP process managed through the Community Health Equity and Promotion (CHEP) Branch of the Department of Public Health. CBG should 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"> 1. Health Education activities including, chronic disease prevention, healthy eating and active living, tap water promotion, oral/dental health 2. Physical Activity opportunities, including: a) Dance and movement, sports, yoga, walking groups, biking, etc.; b) Efforts to influence changes to the built environment (ie sidewalks, streets, parks, buildings, etc) or safety of the built environment that facilitates increased physical activity and walking and biking for utilitarian trips, sometimes referred to as active transportation); and c) pursuit of institutional or local policies that facilitate physical activity and active transportation (such as adequate PE time and instructors, commuter benefits for active transportation, etc) 3. Healthy Eating/Food Security*, including: a) Community-based pantries, community-based hot meals, community kitchens and community home delivery services; b) Increased financial resources (i.e. wages, income, government nutrition supplements, vouchers, etc.); c) Changes to the built environment that facilitate food security; and d) Pursuit of institutional or local policies that facilitate food security. 4. Water Promotion, such as support for Spa Water Supplies, station maintenance/beautification, refillable water bottles to distribute to communities, water testing 5. Community Based Participatory Research
CBOs working with SFUSD	7% of all CBO funding (eg 7% of approximately \$4.3 million) should go towards CBOs implementing programs/initiatives that take place in school settings. Funding to issue grants to CBOS should follow the guidelines above.
Media	To develop and implement a media campaign focused on the impact of the SDDT with an emphasis on grassroots, community-led storytelling. Community Based Participatory Principles will be utilized in the development of the storytelling campaign, with CBOs funded to co-develop the campaign with a contracted media agency. The funds should support both a local and regional media campaigns. The regional campaign should be in coordination with other jurisdictions with similar sugary beverage taxes to leverage resources and augment the intended goals of the SDDTAC. A portion of the local media campaigns must include a merchant education component. A smaller proportion of the funds (to be determined by the Department of Public Health and any contracted entities) may support media/communications campaigns that highlight the health harms of sugary beverage intake and encourage tap water consumption. A portion of the funds must include merchant education. The local campaign must include merchant education component. DPH/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.
SFUSD	
School Food, Nutrition Ed	To improve the quality and appeal of school meals and support nutrition education to increase participation in school meal programs (for example: cooking and serving equipment, staff professional development, and innovative procurement and menu strategies to increase freshly prepared food). Funding will target schools with the largest populations of high-risk students that are disproportionately targeted by the sugary drinks industry.
Student Led Action	Support student led efforts to decrease consumption of sugary drinks and increase awareness of sugary drinks consumption among students, with focus on schools with the largest populations of high-risk students that are disproportionately targeted by the sugary drinks industry. SFUSD should provide to SDDTAC a proposal of how funding will be spent through student led action.
FOOD ACCESS	

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

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

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