



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

NOTES

May 7, 2019

3:30 PM

25 Van Ness Ave, Suite 710

*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]
2. Approval of April Meeting Minutes [discussion and action]
 - a. Derik moves, Rita seconds. Motion passes unanimously.
3. Approval of Agenda- [discussion and action]
 - a. Linda moves to approve agenda; Derik Seconds. Motion passes unanimously
4. General Public Comment
5. House Keeping [discussion and possible action]
 - a. Set committee membership –
Propose 5 members so quorum would be 3 - Jorge, Roberto, Derik, Rita, Linda
Revisit membership composition when Michelle Kim (chair) returns.
Roberto moves to make Jorge, Roberto, Derik, Rita, Linda official members with an assessment of membership when Michelle returns from maternity leave. Linda seconds.
Motion passes unanimously.
6. Awareness Campaigns [discussion and possible action]
 - a. Awareness campaigns (*Storytelling campaign; Limits on campaigns with respect to state campaign; discuss what restrictions are on using campaign logo*)
Since the last meeting, DPH began discussion with BAYCAT studio for the media work. BAYCAT is located in BV; fulfills Local Business Enterprise requirement for contracts. It is a Non-Profit social entrepreneurial model: they train low-income youth of color and hire them to do the work. BAYCAT's strength is video and storytelling. Received a proposal from BAYCAT today; staff haven't had time to review.

Will propose an ad hoc media committee to advise and provide DPH regular feedback.

Before end of the FY vendor will provide a campaign plan. DPH staff will ask for an ad hoc committee at May SDDTAC meeting. Campaign Deliverables: media buy; campaign strategy plan – video, print, merchant, website. Will get a report of any research they conduct as well.

7. SDDTAC Workplan [discussion and possible action]

a. Upcoming grantee presentations

Shift presentations a bit to give committee time to focus only on recommendations in late fall. Therefore, ask Paula if she can present Healthy Food Purchasing Supplement in June; have all of SFUSD funded work in August; add HSA for all its food security work to present in November.

b. List of Experts for SDDTAC presentations

SDDTAC doesn't have criteria for who comes to full committee vs. just subcommittee. May need criteria to help select, b/c only have 4-5 meetings for guest speakers left before needing to focus on next set of Rx.

If speakers come to full committee, chairs would need to make sure presentation is pertinent to the work of the full committee.

Ask them: How does it further the work of the committee? What are you going to present? How is it going to inform our upcoming work?

Ask each subcommittee to prioritize a. which speaker they want for a full committee and b. which one in the next 5 months. Provide answer questions below.

Who

What

How it informs work of SDDTAC

When – particular month/window of time the speaker should come and why (relevant to recommendations,

Do you want them before Nov2019 – if yes, why).

what advice does speaker have for this committee on xxx topic

15 minute presentation: 5-10 minute presentation and ~5 min QnA

Subcommittees can publicize who is coming to their subcommittee and open to whole committee. *Christina to ask subcommittee chairs to provide above info for their preferred presenters, highlighting which are their priority presenters.*

After their next subcommittee meeting submit list to RV, JJM, and backbone. Recommend that co-chairs will make final decisions on who presents to full committee.

For infrastructure – what does this committee want to recommend?

Interested in national trends – Jim Krieger?

Anticipate that media campaign generates a lot of conversation - how would it be structured to move to decision quickly. Learning from other media campaigns that have been developed.

NYC has done many awareness campaigns on SSBs. – Christina will id contact

Roberto Vargas moves to put forward 2 speakers for full committee –lessons learned

around SSB media campaigns and Jim Krieger/proxy - national trend related. Derik Seconds. Motion passes unanimously.

Clarification for media – maybe focus should be on how to ensure that SF media campaign will be successful and how to decide in a complex group process.

SDDTAC has determined that it wants several strategies and trust staff to move on it.

Infrastructure speakers

Jim Krieger

Media expert

Rob Lustig to infrastructure list.

8. Strategic Planning Consultant [discussion and possible action]

- a. Responses – extended deadline to May 10

At the full committee Jonathan Butler, Vanessa Bohm, Saeeda Hafiz, and Joi Jackson Morgan volunteered to review proposals.

9. Community Engagement Document

- a. Infrastructure committee discussed ideas for community engagement processes and feedback (**minimum reporting guidelines**).

Committee members discussed a tool for when and how people can engage with SDDTAC processes. Attempt to put structure in place so public can understand how to engage and which representatives to go to for any specific constituencies. **The following is a list of brainstorm ideas. The committee made no decisions, plan is to continue discussion next meeting:**

Suggest adding on-going communications with SDDTAC representatives- and how to reach. Timeline helpful. There are different organizations and community members not affiliated with a CBO necessarily. Each representative to think about how they can reach broader representation from their specific constituencies. Provides transparency on who getting input from and who reporting back to.

Develop a survey for committee members to respond to who they are reaching out to. Ask what coalitions or groups they report to and how often; mechanism for ongoing communication with the public. Discussed questions for a survey that committee members would respond to: what outreach planning to do in coming year for constituencies you are representing. Could have members fill out survey and co-chairs facilitate discussion with committee about what are reasonable expectations. (there may be \$50k to support the community input process)

Concern that a member unwittingly asked to be an individual spokesperson for whole committee in process of doing outreach. Each member might have set up contacts and ways to do the outreach. Have to represent the group only when the committee has collectively agreed to something. Include expectations of committee representatives and when, how, where input and report back is happening. Is it fair to add these expectations -adding work - to committee representatives, since they were seated because of their expertise/ connections. Find out what people are doing now and assess whether it makes sense to add more meetings that allow committee members to get more input through those channels.

Ensure that committee members representing their constituencies as broadly (and fairly across committee members). Want to encourage members to do more outreach and

engagement. Makes sense to note what a minimum of outreach would look like.

Interest expressed in understanding/asking city departments about how they come to their decisions – how they prioritize.

Need to continue discussion, no decisions made.

10. Discuss possible Agenda items for 6/4/19 SDDTAC Meeting [discussion and possible action]
 - a. Discuss further the community engagement guidelines
 11. PUBLIC COMMENT - NONE
 12. Adjourn
- Linda moves to adjourn; Roberto seconds. Motion passes unanimously.

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Comparison between SDDTAC Recommendations and Mayor's Allocations FY 18-19

Item	SDDTAC Rx Amount	SDDTAC Rx %	SDDTAC Rx Agency	Mayor's Budget	% of Mayor's Budget	Mayor's Proposed Agency	Variance
Community-Based Grants	\$4,680,000	45% (7% school-based)	DPH/CHEP	\$3,817,000		DPH	
				\$728,000	7%	SFUSD via DCYF	
				\$4,545,000	44%	Total	-\$135,000
School Food, Nutrition Education, Student Led Action	\$1,000,000	15%	SFUSD	\$1,500,000	14%	SFUSD via DCYF	\$0
	\$500,000		SFUSD			SFUSD via DCYF	
Food Access	\$1,000,000	9.6%	DPH	\$1,035,000	10%	DPH	\$35,000
Healthy Retail SF	\$150,000	1.40%	OEWD	\$150,000	1%	OEWD	\$0
Oral Health	\$1,000,000	10.0% (5.5% school-based)	DPH	\$550,000	5%	SFUSD via DCYF	
				\$450,000	4%	DPH	
				\$1,000,000	10%	Total	\$0
Infrastructure	\$1,000,000	10%	DPH/CHEP	\$800,000	8%	DPH	-\$200,000
Water Access - SFUSD	\$300,000	4% (3% school-based)	SFUSD	\$450,000	4%	SFUSD via DCYF	\$0
Water Access - Public Spaces	\$150,000		PUC/DPH				
SF Recreation & Parks	\$520,000	5%	RPD	\$520,000	5%		\$0
HOPE SF Peer Enhancements	\$0	N/A	N/A	\$400,000	4%	DPH	\$400,000
Total	\$10,300,000	100.0%		\$10,400,000	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.

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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%	

	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
Health education, food security, physical activity	
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	<p>Additional funds for evaluation may:</p> <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.