

SAN FRANCISCO
HEALTH SERVICE SYSTEM

RACIAL EQUITY ACTION PLAN

PHASE 1 DRAFT REPORT



December 2020

Staff Voice Cloud

“I identify as mixed-race white passing. I am still learning...”

“...all we got is one another.”

“...great way to normalize the topic of race with colleagues. I plan to use the questions with my family...”

“I do not feel like my background is relevant”

“I’m very excited to see where this work goes. I hope SFHSS transparently commits and executes something that they’re proud of.”

“We need to make sure that our staff is diverse as well...”

“We don’t know what we don’t know.”

“So if race is basically made up then how could it determine health”

“It would depend if I feel safe (or have a safe space)...”

“I wish the survey was more on inequality rather than being specific to Race...”

“I have found that in my career...divulging less is better.”

“I share if I am asked.”

“Policy and program changes (are needed) in tandem with education.”

“I am hopeful for my grandchildren though.”

“...But everyone has to first recognize that there is a problem.”

“...(racial equity is) not a one-month issue.”

“I have to believe its possible.”

“...but there have been instances where some of my colleagues...made me feel uncomfortable.”

“so glad people felt brave.”

“Senior leaders to find more time to openly engage...”

“Even as POC we all have different experiences...”

“I come from a middle class, but admittedly privileged, background...”

“What choices are we making about how we view others?”

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- Racial Equity Action Plan Initiative Details
- Department Assessment Materials

Acknowledgements

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- Abbie Yant

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- Derrick Tsoi
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Racial Equity Advisory

- Carrie Beshears
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Foreword

The San Francisco Health Service System (SFHSS) was established in 1937 to provide medical care for municipal employees. Today we serve over 130,000 employees, retirees, and their covered dependents, providing health benefits (including medical, dental, and vision) for the City and County of San Francisco, San Francisco Unified School District, City College of San Francisco, and Superior Court of San Francisco. SFHSS also offers voluntary benefit insurance options including group-term life, short-term disability, accident, critical illness, pet, legal advice, and identity theft protection.

SFHSS executes all process phases related to benefit operations and administration of non-pension benefits. This includes managing cost-effective vendor contracts, negotiating annual rates and benefits for health insurance coverage, ensuring legal and financial-audit compliance, and supporting member access to quality healthcare. The department is comprised of six divisions: Administration, Communications, Enterprise System and Analytics (ESA), Finance & Contracts, Member Services and Well-Being. Our department's mission is dedicated to preserving and improving sustainable and quality health benefits, and to enhancing the whole-person health and well-being of our members.

Our department recognizes that Social Determinants of Health (SDoH) – conditions in which people are born, live, learn, work, play, worship, and age¹ – play a significant role in wellness. Race is also a powerful determinant of health, and the COVID-19 pandemic and systemic inequities in our police and justice systems remind us that the fight for racial equity is ongoing for Black, Indigenous and People of Color (BIPOC). SFHSS serves and is comprised of members from diverse communities across the San Francisco Bay Area and beyond. We acknowledge the history and present-day role that race and ethnicity play within our healthcare ecosystem, and strive to be an agent of change recognizing that the journey starts internally.

Phase I of our department's Racial Equity Action Plan (REAP) follows guidance from the San Francisco Office of Racial Equity (ORE) on addressing interpersonal and institutional racism within all city departments through a critical analysis of our organizational culture, leadership practices, and policies related to hiring, retention and promotion. Our staff members have varying and deeply personal lived experiences with racial equity and inequities. By beginning our journey inward, we believe that this growth will create both a healthier SFHSS community and a lasting ripple effect for the members we serve.

“Racial equity is the just and fair inclusion in society so that all people participate, prosper, and reach their full potential, no matter their race, ethnicity or background”

San Francisco Office of Racial Equity
A Division of the Human Rights Commission

Footnotes: 1 – Definition sourced from the Office of Disease Prevention and Health Promotion

THE SAN FRANCISCO HEALTH SERVICE SYSTEM PRESENTS THE FOLLOWING SUMMARY & KEY FINDINGS THROUGH THE REAP PHASE I REPORT

Our department's racial equity work begins internally, centering inquiry, education, and staff voice at the core of our Racial Equity Action Plan.

For the first time in our department's history, staff of all levels gathered to envision an ideal equitable state and to address difficulties of confronting race and equity in the workplace. Training activities leveraged evidence-based approaches from leaders in the field.

50% of SFHSS staff engaged in racial equity training for the first time this year.

Staff expressed excitement and apprehension about addressing racial equity as a department, and appreciated being *asked and heard*.

45% of our staff expressed hope and belief in the possibility to end racial inequity.

Our department's Racial Equity Action Plan seeks to address disparities in racial representation within SFHSS, including an underrepresentation of Black, Indigenous and People of Color to better reflect the communities we serve.

Our department's Racial Equity Action Plan consists of 18 initiatives centered around three core focus areas: *Organizational Culture: Education, Inclusion & Belonging, Equitable Leadership & Board Development, and Staff Recruitment, Retention & Mobility.*

Racial Equity Action Plan Development

Phase I: Organizational Transformation

The Office of Racial Equity (ORE) serves as a new division of the Human Rights Commission with the authority to create a city-wide Racial Equity Framework and mandate the completion of departmental Racial Equity Action Plans. The ORE Phase I framework was released in Spring 2020 and focuses on internal staff programs and policies including the completion of a Racial Equity Climate Survey. Quantitative and qualitative results of departmental surveys and engagement activities are used to build empowering workplace environments through organizational transformation. The ORE Phase II framework will be distributed city-wide in 2021 and will focus on the delivery of external services and programs, targeting community engagement and external equity indicators to support vulnerable populations.

Our department’s charge focuses on serving external membership through benefits administration. This Phase I report communicates how we plan to invest in our most valuable asset, our staff. Organizational transformation begins from the inside out, changing not only the organization’s staff programs and policies but also the thinking and quality of interactions among the people who compose it. The way we treat our membership reflects, first and foremost, how we treat and empower one another.

The ORE provided templated initiatives in seven focus areas¹ for departments to use as a guideline for Phase I (left column). SFHSS incorporated these areas into three department-specific focus areas (right column) that capture the integrity of the guidelines and our staff-voiced needs and vision. Of the 80+ template initiatives our department chose 18 that complement our strategic plan and have the capacity to create the most impact. The following section outlines corresponding initiatives for each focus area that empower our internal staff.

ORE Template Focus Areas	SFHSS Focus Areas
Organizational Culture of Inclusion and Belonging	Organizational Culture: Education, Inclusion & Belonging
Diverse and Equitable Leadership and Management	Equitable Leadership & Board Development
Boards and Commissions	
Hiring and Recruitment	Staff Recruitment, Retention & Mobility
Retention, Promotion, and Protection	
Discipline and Separation	
Mobility and Professional Development	

Footnotes: 1 – SF Office of Racial Equity Citywide Racial Equity Framework and Action Plan – Phase 1
<https://www.racialequitysf.org/s/ORE-SF-Citywide-Racial-Equity-Framework-Phase-1.pdf>

Data-Driven Approach and Timeline

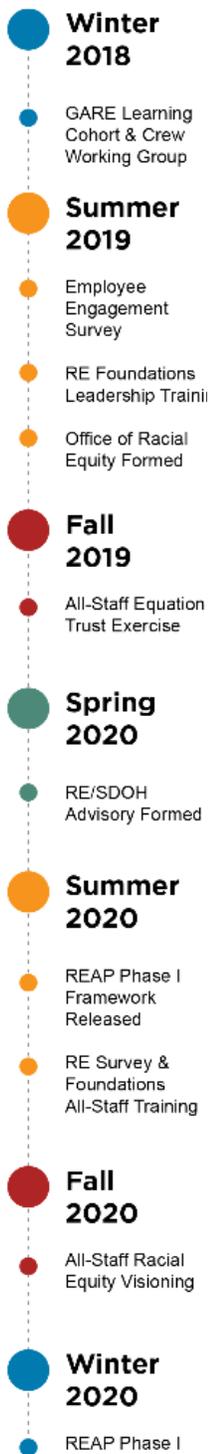
<p><u>What drives our actions:</u></p> <ul style="list-style-type: none"> • Staff-voiced needs and vision • Quantitative/Qualitative evidence of disparities • City-wide best practice framework/strategies recommended by the Office of Racial Equity 	<p><u>Data sources:</u></p> <ul style="list-style-type: none"> • Human Resources Data • Staff Engagement Survey • Racial Equity Climate Survey • Staff Training Feedback & Surveys
<p><u>Who is better off:</u> internal staff who can thrive in an equitable and empowering workplace environment</p>	

Kick-Off: SFHSS Racial Equity Action Plan Initiatives	2021	2022	2023
Organization Culture: Education, Inclusion & Belonging			
Racial Equity Training Schedule			
Public Racial Equity Action Plan & Reporting			
Racial Equity Climate Survey			
Employee Recognition & Appreciation Opportunities			
Workforce Data Transparency			
Staff Engagement Survey			
Equitable Leadership & Board Development			
Accountable & Inclusive Racial Equity Advisory			
Leadership Tailored Racial Equity Training			
Board Specific Racial Equity Training			
Supervisors Trained in Compassionate Discipline/Separation			
Staff Recruitment, Retention & Mobility			
SFHSS Health/Racial Equity Statement			
SFHSS/DHR Baseline Skills Survey & Skill Building Pathways			
Job Listings in Non-Traditional/BIPOC Professional Communities			
Standardize Job Descriptions & Interviews to Remove Barriers of Access			
Staff-Centered Prof. Development through Performance Appraisal Process			
Accessible Budget for Staff Training at All Levels			
Policy/System to Track Equitable Discipline & Separation			
Standardized Exit Interviews			

Gray shaded initiatives have already begun
 Green shaded initiatives will kick-off in their corresponding year.

Note: The Appendix contains a detailed table including our REAP initiative descriptions, impact measures, implementation strategy and resources committed.

Two Year SFHSS Racial Equity Experience



In December 2018, SFHSS¹ was selected from a competitive applicant pool to join 21 other city departments in the Government Alliance for Racial Equity (GARE) 2019 Northern California Learning Cohort. The year-long cohort training program leveraged best practices and resources from GARE’s national network of municipal, regional, and state governments, and yielded tools to apply towards racial equity policy, programming, budget, and leadership development. Additionally, all SFHSS department leadership participated in a full-day offering of GARE’s core curriculum, focused on the government’s role in dismantling historic inequities, produced in partnership between GARE and the San Francisco Human Rights Commission (HRC).

During fiscal year 2019 – 2020, SFHSS continued to develop internal capacity towards addressing racial equity and enhancing staff growth. These milestones included designation of two department Racial Equity Leaders, monthly participation in the City-wide Racial Equity Working Group (CREW), a partnership with Integral Talent Systems to conduct an employee engagement survey, augmentation of deidentified member health data to include race analysis, and the creation of a staff position² focused on the Social Determinants of Health (SDOH) and equity.

Simultaneously, the City made history during the summer 2019 when the Office of Racial Equity (ORE) was formally created by legislative ordinance No 188-19³. The ORE serves as a new division of the HRC with authority to create a city-wide Racial Equity Framework and mandate the completion of departmental Racial Equity Action Plans (REAP). These preceding events catalyzed the formation of an internal Racial Equity Advisory, a group of dedicated staff reporting to the Executive Director for the design and implementation of the department’s REAP and related activities.

Beginning in Summer 2020, the Racial Equity Leads and Advisory began working towards completion of Phase I of the REAP, using guidelines provided by the ORE. The following activities were included in the REAP development process:

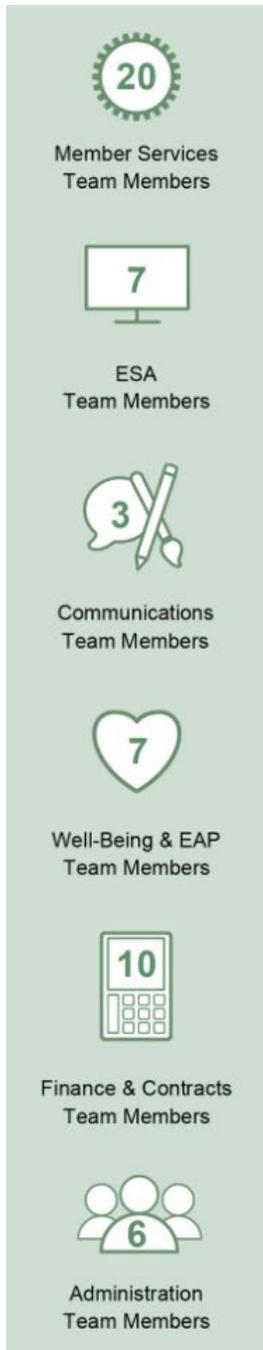
- An inaugural Racial Equity Employee Climate Survey
- A Racial Equity Foundations Training for all staff
- All staff breakout groups: *Early Experiences with Race* discussion
- All staff breakout groups: *Vision for an Equitable SFHSS* discussion
- Staff demographic data and survey feedback analysis
- Monthly racial equity updates at all-staff meetings and Health Service Board meetings.

This report describes our demographic workforce breakdown, major results from REAP development activities, and next steps. Phase I of the SFHSS Racial Equity Action Plan has been made available to members of the public, presented to Health Service Board Commissioners, and submitted to the Office of Racial Equity.

Footnotes: 1 – Represented by Leticia Pagan; 2 – Written by Supervisors Vallie Brown and Sandra Lee Fewer; 3 – Represented by Derrick Tsoi

SFHSS Workforce Demographics

SFHSS is comprised of six divisions: Administration, Communications, Enterprise System and Analytics (ESA), Finance & Contracts, Member Services and Well-Being.



Member Services provides front-line support to members, including offering in-person consultations, answering in-bound calls, enrollment support at benefits events across the City, and presenting year-round new hire and pre-retirement seminars.

Enterprise Systems & Analytics (ESA) provides the comprehensive technical infrastructure for SFHSS including systems configuration and development, IT support for staff, maintaining cybersecurity safeguards and training, managing data, rates, and benefits.

The Communications division drives member engagement in all SFHSS benefits and programs. This includes educating and informing members about their comprehensive benefit options, managing the SFHSS.org website, developing digital and print member communications, and collaborating with Well-Being to engage members in preventative care and wellness offerings.

The Well-Being division has several core functions: the Employee Assistance Program, Well-Being@Work, retiree services, healthy behavior campaigns and challenges, targeted interventions, and the Wellness Center. The Well-Being team leverages existing well-being services offered through the health plans: Kaiser Permanente, Blue Shield of California, and UnitedHealthcare. The Employee Assistance Program employs mental health therapists as well as contracted services to provide mental health services on an individual and organizational level that are free, confidential, and voluntary.

The Finance division manages claims processing and payments for vendor contracts, purchasing for SFHSS, annual budgets for the general fund and trust, and overseeing internal and external audits. Contracts administers vendor oversight through performance guarantees and required reporting, overseeing annual benefit plan renewals and contract negotiations, and managing procurement processes including Request for Proposal (RFP).

Administration's main responsibility is to provide technical support that ensures the efficiency of all departments in the organization. Select team members also support the successful administration of Health Service Board meetings and materials. Administration acts as a connecting link between the senior management and all levels of staff.

HEALTH SERVICE BOARD: Under the City Charter, the Health Service Board (Board) is responsible for conducting an annual review of health rates and benefits. The Board's duties fall into the following: designing and modifying benefit plans, setting health insurance premium rates, and overseeing the administration of SFHSS plan funds. Three commissioners are elected by SFHSS membership. Of the other four commissioners, one is a member of the Board of Supervisors, two are appointed by the Mayor and one is appointed by the City Controller.

Demographics Analysis

In Fiscal Year 2019-2020, the San Francisco Health Service System was staffed by 58 employees¹ with a median age between 50–55 years, and a gender ratio of 2.4 to 1 female to male employee (Figure 1). Over the last five years, the department’s employee population fluctuated between 50 and 60 employees, with a net increase in the number of male employees and employees in the 20–30 age demographic. SFHSS race and ethnic demographics have remained stable for most groups, with the exception of a decrease in the Black employee population (Figure 2).].

In October 2020, the department disaggregated its workforce demographics by race and managerial status using data from PeopleSoft, the City’s human resources data management system. The SFHSS workforce was compared to the 2018 American Community Survey 10 Bay Area Counties workforce availability (2018 ACS), referenced by the San Francisco Department of Human Resources (DHR) In this analysis, more granular race and ethnic categories collected by the City were rolled into parent categories for comparability with the 2018 ACS.

Overall, SFHSS staff consists of employees who identify as Asian, Black, Hispanic and White. No staff identified as American Indian/Alaska Native, Native Hawaiian/Pacific Islander, or Multi-racial. Across the entire department, the percent representation of the SFHSS Asian employee group is greater than double that of the available Asian Bay Area workforce (45% versus 21%).

The SFHSS Black and White employee groups are slightly above (6.7% versus 4.5%) and below (38.3% versus 43.1%) their corresponding workforce availability percentages, and the HSS Hispanic employee group is 8.6% lower (10% versus 18.6%) in comparison to the 2018 ACS data (Figure 3).

When stratifying the SFHSS workforce by race and seniority, racial disparities are revealed (Figure 3). SFHSS Management and Board Commissioners are represented exclusively by Asian and White employees groups – with near parity for the Asian employee group and an overrepresentation of the White employee group in comparison to 2018 ACS data.

Race and gender data describing the SFHSS workforce is sourced from the San Francisco DHR website². The City and County of San Francisco is committed to equal employment opportunity³. It is the City's policy to ensure:

- equal opportunity to all employees and applicants;
- that employees be selected and promoted based on merit and without discrimination;
- reasonable accommodations for qualified employees and applicants that require them.

Figure 1: SFHSS Gender Distribution (Fiscal Year 2019–2020)



Footnotes: 1 – Employee count for FY2019-2020 (N=58) differ from total employee count at the time of demographic analysis for this report (N=53); 2 – SFDHR Citywide Workforce Demographics <https://sfdhr.org/citywide-workforce-demographics>; 3 – SFDHR Equal Employment Opportunity <https://sfdhr.org/equal-employment-opportunity>

Figure 2: SFHSS Race Distribution 2015 – 2020¹

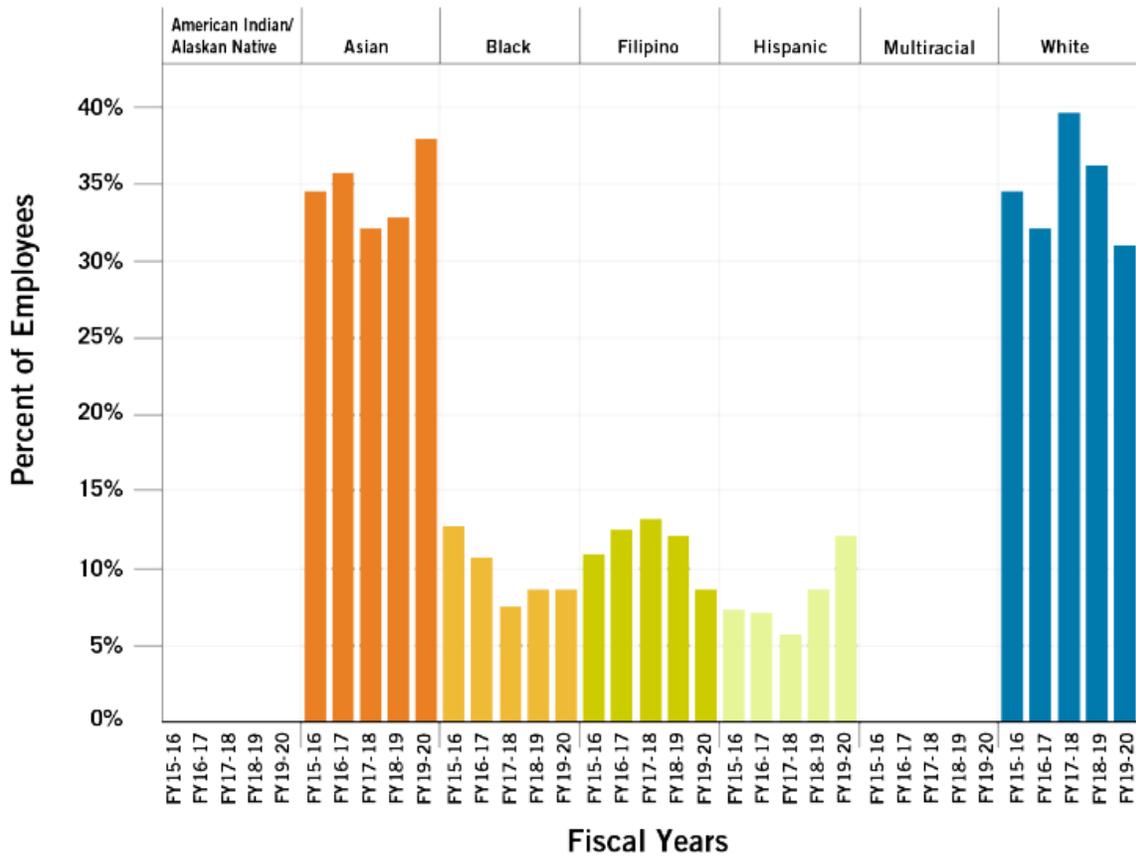
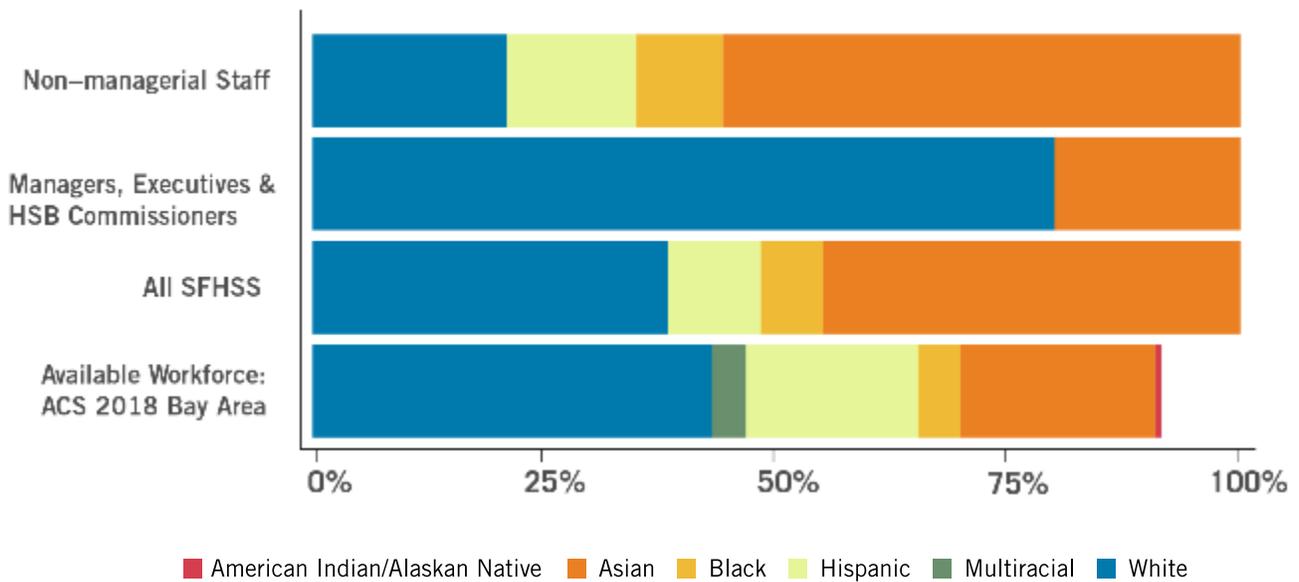


Figure 3: SFHSS Race & Seniority Distribution 2020²



Footnotes: 1 – Corrections were made to the data where miscoding was previously identified. 2 – Filipino was coded to Asian for comparability with race groups available in the 2018 American Community Survey

Department Assessment

Racial Equity Climate Survey

Survey Statistics:



Total Survey Questions



Responses received; 76% response rate



Open-ended reflections from staff



Average completion time: 1 hour and 40 minutes

Survey Themes:

- Staff Familiarity with Racial Equity
- Personal Culture and Sharing Preference
- Awareness of Racial Equity Statements
- Interpersonal & Institutional Racism
- Approaching & Ending Racial Inequities

Racial Equity Foundations Training Survey

Survey Statistics:



Responses received; 55% response rate

Training Themes:

- The role that the City, the Office of Racial Equity, and SFHSS play in advancing equity
- The lived experiences of fellow staff members
- History and the political climate surrounding the Black Lives Matter movement
- Key concepts of Intersectionality, Privilege and Oppression
- Equity versus Equality

Summary

In July 2020, SFHSS conducted its first Racial Equity Climate Survey, Racial Equity Foundations Training, and small-group Early Experiences with Race discussion to raise staff voices and lived experiences to the forefront of our department's Action Plan. For many staff, this was a first-time opportunity to explicitly engage and discuss topics of race and equity amongst colleagues at the workplace. Careful considerations were made to anonymize survey results, separate staff across divisions and direct reports when possible, and create a safe and inclusive environment for discourse.

Survey results and staff reflections uncovered mixed emotions of excitement, readiness, and apprehension in approaching racial equity work as a department. Staff shared their perspectives by relating aspects of the training and survey topics to their own lived experiences and expressed appreciation for being 'asked and heard'. Most staff were comfortable discussing race at work and had some familiarity or lived experience with a wide variety of racial equity concepts. A small number of responses exhibited discomfort and push-back towards employer involvement in race equity work. Detailed results from the department assessment surveys are described below.

Racial Equity Climate Survey

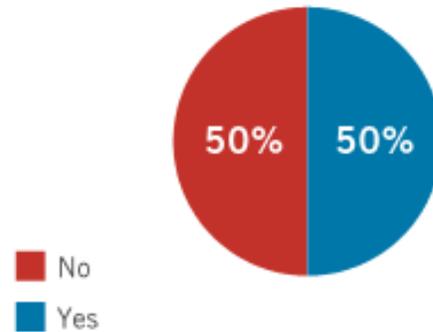
Background

The department's Racial Equity Advisory encouraged individual reflection through a 'Pause and Reflect' activity that included a prompt (Appendix A) and a copy of the climate survey questions and corresponding definitions (Appendix B). All survey questions were sent to staff with a personal message from the Executive Director several days before the live survey link, and division managers were involved in ensuring that staff had adequate time and support to complete the survey. Within the survey, the Racial Equity Advisory made a conscious decision to use an 'awareness' Likert scale in place of an 'agreement' scale in acknowledgement of the lived experiences and realities of our staff and members from marginalized communities.

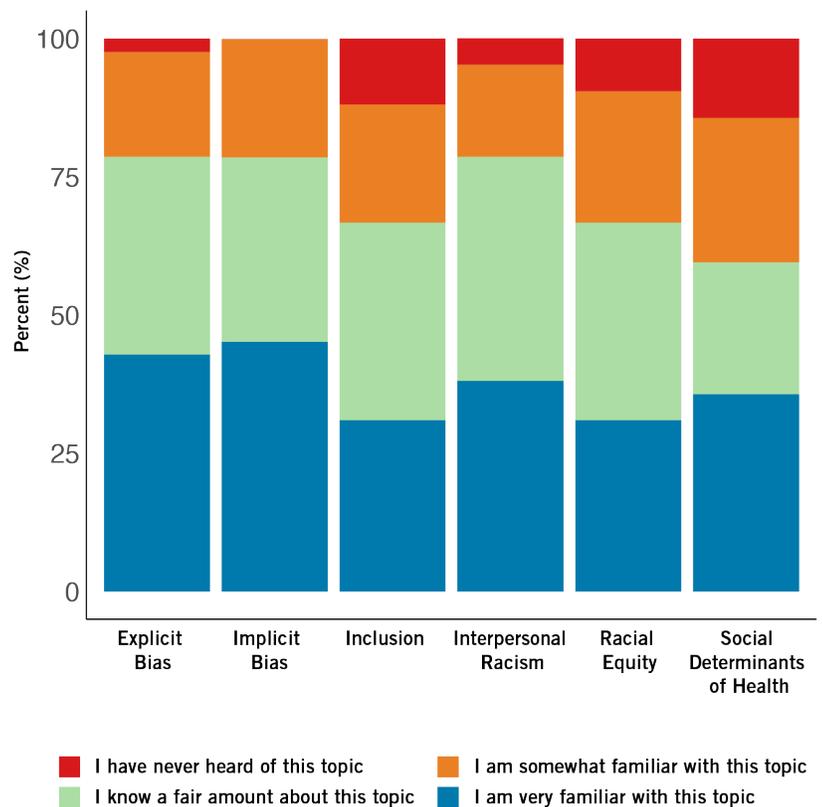
Staff Familiarity with Racial Equity

SFHSS asked staff to rate their familiarity with foundational topics and definitions in health and racial equity discourse, including explicit and implicit bias, interpersonal and institutional racism, inclusion, racial equity, and the social determinants of health. More than 50% of staff confirmed that they knew a fair amount or were very familiar with all of the listed topics. However, more than a third of staff report having never heard of or only being somewhat familiar with the topics and working definitions of racial equity, inclusion, and social determinants of health.

Have you participated in a workplace training related to racial equity?



How familiar are you with the following topic areas?



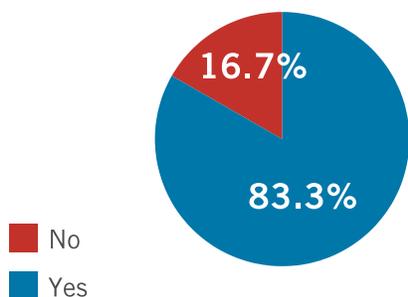
Personal Culture and Sharing Preference

83% of staff respondents report feeling comfortable talking about their background and cultural experiences with their colleagues. Staff expressed that culture is an important facet of their identity and worldview – mentioning family structure, immigration histories, religion, and lived experiences. Some respondents explained that their comfortability was contextually dependent on the audience and situational context. Of those not comfortable sharing, responses cite personal privacy, fear of retribution, sentiments of white guilt, and negative past experiences.

Awareness of Racial Equity Statements

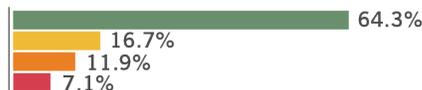
SFHSS asked staff to rate their level of awareness on a series of racial equity statements centered on general, personal, and organizational roles in racial equity. Notably, 100% of staff responded with somewhat (or greater) awareness to the statement: “People of all races play a role in addressing racial equity for black, indigenous, and people of color.” Greater than 70% of staff were moderately or very aware that individual identities created privileges and barriers, unconscious bias perpetuates stereotypes, and injustices against one group affect other groups. Of all statements, staff were least aware that the department acted against staff discrimination and harassment, and that race was a determinant of health.

Are you comfortable talking about your background and cultural experiences with your colleagues?

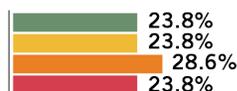


How aware are you of the following statements?

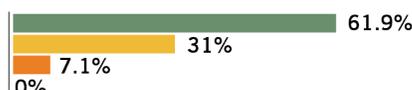
A person's identities (e.g. race, gender, sexual orientation, ability status, etc.) can create privileges and barriers to accessing healthcare, employment, income, food and housing security, etc.



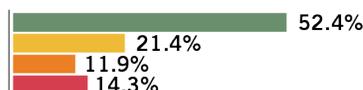
Our organization takes action in response to incidents of harassment or discrimination towards staff members in the workplace.



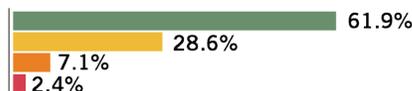
People of all races play a role in addressing racial equity for black, indigenous, and people of color.



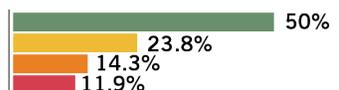
Race is a determinant that influences one's health.



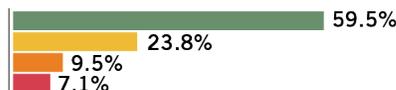
Racial Injustice toward one race or ethnic group can affect the well-being of all race/ethnic groups.



SFHSS is responsible for advocating for racial and health equity on behalf of our membership, including staff.



Unconscious bias and attitudes toward others perpetuate stereotypes.



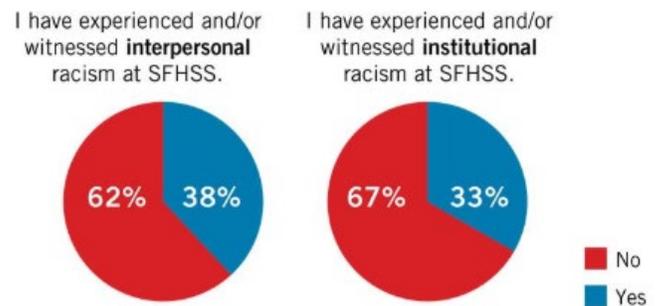
■ Not at all aware ■ Somewhat aware
■ Moderately aware ■ Very aware

How did experiencing interpersonal and/or institutional racism affect you personally or professionally? (please check all boxes that apply)

	Interpersonal Racism	Institutional Racism
My mental health and well-being has been affected.	17%	14%
My job performance and quality of work has been affected.	14%	12%
I have not been selected for job advancement.	14%	12%
I am unable to access clear pathways and resources towards job advancement	N/A	2%
I have been unable to grow my skills as a professional.	5%	7%
The work environment feels unwelcome and/or unsafe.	14%	10%
My relationship with my supervisor(s) are strained.	10%	2%
My relationship with my colleague(s) are strained.	10%	12%
I have considered other transfer/employment opportunities.	17%	19%
None of the above	52%	52%
Other	29%	26%

Experiencing Interpersonal & Institutional Racism

SFHSS asked staff if they had ever experienced or witnessed interpersonal and/or institutional racism at SFHSS, and how these events affected them personally and professionally. A third of staff respondents reported having ever experienced and/or witnessed interpersonal and institutional racism at SFHSS respectively. Respondents cited most often that their mental health was affected by these events, and that they had considered transfers and other employment opportunities.



Interpersonal racism – racism that occurs between individuals; it is the holding of negative attitudes towards a different race or culture.

Institutional racism – refers to institutions, systems and cultural practices that perpetuate racial inequality

Approaching & Ending Racial Inequities

The final survey questions asked staff if they believed it was possible to end racial inequity. In their responses, staff emphasized that there is no one size fits all approach when working with people. They brought to light the reality that racial equity work is difficult and charged but supported building a safe space at SFHSS to continue the dialogue.

45% of staff expressed hope and belief in the possibility to end racial inequity. 31% were undecided or believed that ending racial inequity was conditional or contingent on a series of societal changes. And 24% of staff reported that they did not believe it was possible to end racial inequities.

Racial Equity Foundation Training Survey

Staff were asked to rate their level of understanding on four training concepts both prior to and after attending the foundations training (Appendix C). In all categories, staff understanding shifted from 'none' and 'little' towards 'some' and 'a lot'. Notably, the greatest percent increase (46.6% to 86.7%) occurred in staff understanding more about the lived experiences of colleagues through the *Early Experiences with Race* discussion (Appendix D).

Staff were also asked to rate the usefulness of topics presented during the foundational training. More than 80% of staff respondents found all of the training topics moderately to very useful. No staff reported that education on Intersectionality, Privilege and Oppression was 'Not at all useful'. Overall, greater than 70% staff rated the content and delivery of the Racial Equity Foundations Training as 'Excellent' or 'Very Good'.

What is your level of understanding about:	Before the training				After the training			
	None	A little	Some	A lot	None	A little	Some	A lot
The role that the City and SFHSS play in advancing racial equity	6.7%	16.7%	40%	36.7%	0%	13.3%	30%	56.7%
The role that people of all races play in advancing racial equity	3.3%	10%	40%	46.67%	0%	3.3%	40%	56.7%
The lived experiences of your fellow staff members	20%	33.3%	13.3%	33.3%	3.3%	10%	36.7%	50%
The definition of racial equity as an ideal state in which race does not predict one's outcomes	6.7%	6.7%	36.7%	50%	3.3%	3.3%	33.3%	60%

Please use the rating scale below to share how useful these racial equity training topics were for you:	Not at all useful	Slightly useful	Moderately useful	Very useful
Our Current Climate: Black Lives Matter	3.3%	10%	23.3%	63.3%
Key Concept: Intersectionality, Privilege, Oppression	0%	13.3%	33.3%	53.3%
Small Breakout Group: Early Experiences with Race	6.7%	3.3%	26.7%	63.3%
Equality vs. Equity	6.7%	6.7%	20%	66.7%

Conclusion

Looking Ahead: REAP Phase I

Analyzed data from the department assessment guided the development of a Racial Equity Training Schedule for all levels of staff. SFHSS will kick off the 2021 Racial Equity Training Schedule – one of the organizational culture initiatives included in our REAP. The timeline below includes key steppingstones to building foundational education and awareness surrounding racial equity. The chosen topics reflect areas of growth and interest that staff expressed during departmental assessment activities. SFHSS will develop additional learning tracks pertaining to leadership and Board functions will be developed to complement the all-staff training schedule. These trainings will continuously adapt to the current workplace climate, elevating staff voice and incorporating creative and inclusive evidenced-based approaches.

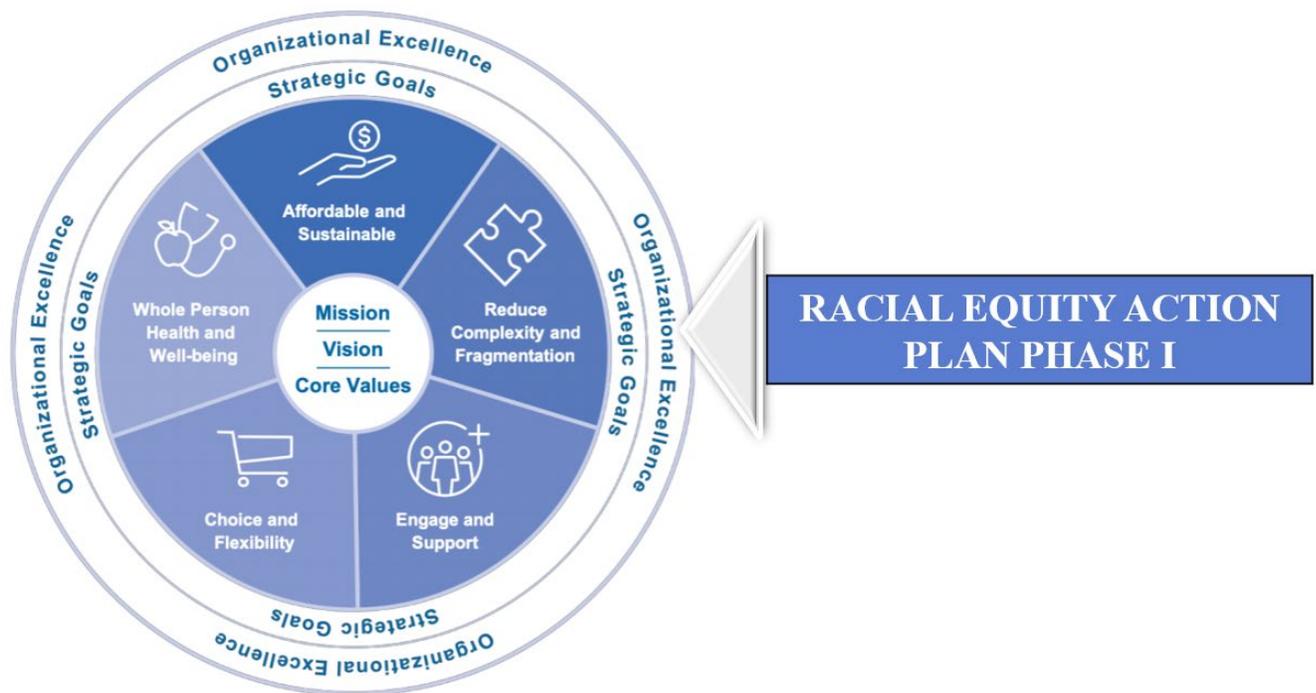


Looking Ahead: REAP Phase II

Phase I of the SFHSS REAP guides how we center racial equity within our city department, policies, practices, and budget in a way that is formalized, intentional, specific, and explicit. On the horizon is Phase II, centered on racial equity for our membership and the communities we serve. Phase II plan development will leverage insights from the Vulnerable Populations Engagement Assessment Details tool (Appendix G), a document provided to all city departments to critically analyze how city departments partner and support San Francisco's vulnerable populations. SFHSS will use this assessment tool and the corresponding Vulnerable Populations Survey (Appendix F) to inform equitable budgeting, programming, policies, and decision-making surrounding the member facing functions performed by the department.

SFHSS Strategic Plan Alignment

Illustrated below are the five SFHSS Strategic Plan Goals for 2020–2022¹ approved by the Health Service Board in 2018. In the Strategic Plan development, SFHSS defined clear member-facing initiatives to positively influence the delivery of care for our members in partnership with our health plans. In the most recent revision of the Strategic Plan, our department sought to further develop the internal ‘Organizational Excellence’ component of the framework through documented initiatives that create an empowering workplace environment for our staff. The REAP development process inspired our department to embed racial equity (through our REAP), within ‘Organizational Excellence’ to enhance our existing Strategic Plan.



SFHSS Vision for Racial Equity

For the first time in our department’s history, staff of all levels gathered to discuss our vision for an equitable SFHSS (Appendix E). Our department’s growth through the examination of racial equity has been transformative for many of our staff, both on a personal and professional level. Although the work is just beginning, the completion of the Phase I report marks a significant milestone in our department’s commitment to developing an equity culture where we lead with race and center intersectionality: how distinct aspects of a person’s identity combine to create different modes of discrimination and privilege. Our department vision includes challenging “race-neutral” ideologies that promote equality on the surface and perpetuate inequity for marginalized staff of color. We hope to create an SFHSS that normalizes anti-racism training and dialogue for staff of all levels. SFHSS is building a culture of inclusion and belonging, free from inequity and powered by staff-voice.

Footnotes: 1 – SFHSS Strategic Plan 2020 – 2022 <https://sfhss.org/resource/sfhss-2020-2022-strategic-plan>

Staff Voice Cloud

“Staff (are) members too and that seems to get lost in a lot of our discussions.”

“I think we can chip away at the issue but there would need to be monumental change...”

“If everyone was inclusive as HSS TEAM, world would not know difference between races.”

“(I’d appreciate) guest speakers from different communities...”

“(From negative past experiences)...I give up and keep my mouth shut.”

“Many people who have social health and social advantages due to their race don’t want to challenge the status quo...”

“...their resilience...it makes me more proud of my race and culture”

“My employer doesn’t need to know about my background and culture.”

“I’m a storyteller and my background and cultural experience is a strength I bring to my work.”

“We can’t impose our ideologies on others, but we can let them know where we stand.”

“I honestly feel that it will never end...”

“Going through the survey reaffirmed my commitment to the cause of equity, but honestly, it really saddened me too.”

“...my upbringing was full of privilege as a white person. The humility that comes with that understanding is profound and challenging.”

“I believe it is the ‘attitude’ and ‘character’ that influences one’s health.”

“...but one having the time to reflect on the questions and the purpose behind them I am more open to why we are being asked to do this.”

“Making people conscious of their unconscious bias is a chore.”

“(It) is a privilege to be asked and heard.”

“I am proud of who I am but do not wear it on my sleeve.”

“I’m also sympathetic to how the human brain is wired to put things in boxes or categories.”

“I do not believe race is a determinant that influences one’s health at all... If I am indeed incorrect, I’d like to be educated on this.”

Appendix: Racial Equity Action Plan Initiative Details

1. ORGANIZATIONAL CULTURE OF INCLUSION & BELONGING

INITIATIVES	INDICATORS		TIMELINE & IMPLEMENTATION PLAN		RESOURCES COMMITTED (LEAD)
	Process Measures	Impact Measures	Kick-off Year	Ongoing Implementation	
<p>1.1 Broaden education, awareness, and community for existing staff around racial equity topics through mixed-methods, intentional trainings and authentic engagement.</p>	# of DEI training and engagement activities programmed	<p>DATA SOURCES: Pre and post surveys disaggregated by race/ethnicity focused on training content utility and delivery, levels of understanding, and open-ended reflections/feedback</p>	<p>Launch: 2020 RE Leads completed an analysis of the racial equity climate at SFHSS through department assessment (climate survey, foundational training, past-data, and staff engagement). RE Leads began incorporating monthly RE Updates during all-staff presentations and released the 2021 Racial Equity Training Plan for a foundational year of learning.</p>	<p>Quarterly: RE Advisory continues to adapt monthly updates and quarterly trainings using relevant social context and foundational concepts from GARE, Race Forward and other thought leaders in the field. Additional training mediums will be explored including video, podcast, articles, and engagement activities. Trainings are accompanied by debriefs to ensure continuous quality improvement and incorporation of staff-voice.</p>	<p>RE Leads RE Advisory</p>
<p>1.2 Develop a RE Action Plan that is updated biannually and available to the public and board commissioners.</p>	Process adherence	<p>DATA SOURCES: Staff familiarity with RE Action Plan & Department Effort Indicators</p>	<p>Launch: 2020 SFHSS Communications Division will review and define opportunities to publicize REAP work. RE Leads will provide all-staff with ongoing updates and provide Executive Director with updates for the Health Service Board.</p>	<p>Bi-Annually: Leadership Team will convene to assess progress of REAP initiatives and to make necessary revisions to the implementation strategy.</p> <p>Annually: Public facing REAP documents will be updated accordingly.</p>	<p>RE Leads Leadership Team Communications Division</p>
<p>1.3 Conduct an annual Racial Equity Climate Survey that assesses the department's commitment to an organizational culture of inclusion and belonging. Analyze subsequent disaggregated data and pay special attention to data pointing to biases against staff of color.</p>	Process adherence	<p>DATA SOURCES: Racial Equity Climate Survey Results</p>	<p>Launch: 2020 RE Leads administered inaugural Racial Equity Employee Climate Survey in July 2020. Results were analyzed and incorporated in the development of this RE Action Plan.</p>	<p>Annually RE Leads will engage RE Advisory to update survey indicators with respect to validity and reliability. Revised indicators and best practices will be incorporated into the climate survey on an ongoing basis. Survey results will support both monitoring and revisions to the department's RE Action Plan</p>	<p>RE Leads RE Advisory</p>
<p>1.4 Develop employee recognition and appreciation opportunities that acknowledge staff performance and whole-person value to the organization</p>	Process adherence	<p>DATA SOURCES: Employee Engagement Survey Results Indicator: The department has a culture of recognition for good performance. Baseline (31%) Strongly Disagree/Disagree (46%) Neutral (23%) Agree/Strongly Agree</p> <p>Indicator: My manager recognizes me in a manner that I appreciate. Baseline (23%) Strongly Disagree/Disagree (17%) Neutral (60%) Agree/Strongly Agree</p> <p>Note: Update future indicators to be more directly related to initiative</p>	<p>Launch: 2021 SFHSS Well-Being will continue researching best practices around workplace culture recognition and appreciation. SFHSS Leadership will implement best practices with their respective divisions.</p>	<p>Monitor As Needed: HSS Well-Being will meet with all levels of staff to ensure that top-down, bottom-up, and staff-staff recognition protocols reflect diversity and inclusivity while leveraging a uniform organizational approach.</p>	<p>Well-Being Division Leadership Team</p>

<p>1.5 Analyze and publish annual summary of hiring, recruitment, and workforce diversity data in the SFHSS Annual Report that is disaggregated by race and seniority.</p> <p>Invite staff to anonymously self-identify detailed race, ethnicity and language beyond categories collected by the City to promote inclusivity.</p>	Reporting adherence	<p>DATA SOURCES: HR Data: % shift in applicant/workforce demographics towards reflecting the community we serve</p>	<p>Launch: 2020 RE Leads partner with DHR Sr. Human Resource Consultant and City Attorney to identify privacy policies and availability of workforce demographics data. ESA analyzes workforce data and prepares summary in department's submitted Racial Equity Action Plan.</p>	<p>Annually: ESA analyzes workforce data and prepares Annual Report summary for review by RE Advisory and department leadership</p> <p>Monitor As Needed: Department leadership leverages REAP process and impact measures and workforce demographics data to review and engrain equity and inclusion into our department's retention and promotion strategy, particularly when vacancies arise across all levels of staff.</p>	<p>RE Leads HSS Enterprise Systems and Analytics (ESA) Division Leadership Team DHR Sr. Human Resource Consultant City Attorney</p>
<p>1.6 Conduct a biannual Staff Engagement Survey to identify ways to improve employee engagement and workplace satisfaction.</p>	Process adherence	<p>DATA SOURCES: Employee Engagement Survey Results Indicators</p> <p>Core Focus Areas Job Fit Alignment Valuing Team Growth</p>	<p>Administered: 2016 & 2019 SFHSS Leadership administered a Staff Engagement Survey through Integral Talent Systems in 2016 and 2019. Results were analyzed and incorporated (where applicable) in the development of this RE Action Plan.</p>	<p>Bi-Annually Leadership Team to update survey indicators with respect to validity and reliability. Survey results will support both monitoring and revisions to the department's RE Action Plan.</p>	<p>Leadership Team Vendor Partner</p>

2. EQUITABLE LEADERSHIP & BOARD DEVELOPMENT

INITIATIVES	INDICATORS		TIMELINE & IMPLEMENTATION PLAN		RESOURCES COMMITTED (LEAD)
	Process Measures	Impact Measures	Kick-off Year	Ongoing Implementation	
<p>2.1 Create a diverse and equitable Racial Equity Advisory committed to executing and keeping the department accountable to its RE Action Plan initiatives. RE Advisory will serve as a planning and operating body in executing the department's vision.</p>	<p>Regularly scheduled meetings with RE Advisory to track and support progress of RE Action Plan initiatives</p>	<p>DATA SOURCES: Personal-growth metrics (e.g. confidence and comfort in facilitation/advisory role)</p>	<p>Launch: 2020 RE Advisory members will catalyze development of the RE action plan through dedicated FTE, leadership initiative, and facilitation support.</p>	<p>Annually: RE Advisory will self-evaluate function, composition, and workflow to ensure equitable access and distribution of work.</p>	<p>RE Leads RE Advisory</p>
<p>2.2 Ongoing racial equity training and professional development for department leadership.</p>	<p># of DEI training and engagement activities programmed</p>	<p>DATA SOURCES: Personal-growth metrics (e.g. % change in REDI awareness, level of understanding about racial equity training concepts, training utility and purpose)</p>	<p>Launch: 2021 RE Leads analyze department assessment results and develop a leadership specific training tract.</p>	<p>Monitor As Needed: Trainings are accompanied by evaluations to ensure continuous quality improvement.</p>	<p>RE Leads RE Advisory</p>

2.3 Ongoing racial equity trainings for Commissioners serving on the HSS Health Service Board	# of DEI training and engagement activities programmed	DATA SOURCES: Personal-growth metrics (e.g. % change in REDI awareness, level of understanding about racial equity training concepts, training utility and purpose)	Launch: 2021 RE Leads leverage available ORE survey templates to gauge the Board's baseline understanding of racial, equity, diversity, inclusion training concepts. RE Leads analyze department assessment results and develop a Board specific training track.	Monitor As Needed: Trainings are accompanied by evaluations to ensure continuous quality improvement.	RE Leads Executive Director
2.4 Partner with DHR to train managers on bias and equitable and compassionate discipline and separation.	# of trainings completed	DATA SOURCES: % reduction of disparities in discipline incidents and actions taken, disaggregated by race and ethnicity when possible	Launch: 2023 Division Managers will consult with the Office of Racial Equity and DHR to define training objectives and gauge availability of training and facilitation materials regarding the topics of discipline and separation.	Monitor As Needed: Division Managers meets to evaluate training utility in creating a clear, equitable, and accountable approach to staff discipline and separation.	DHR Sr. Human Resource Consultant Division Managers

3. STAFF RECRUITMENT, RETENTION & MOBILITY

INITIATIVES	INDICATORS		TIMELINE & IMPLEMENTATION PLAN		RESOURCES COMMITTED (LEAD)
	Process Measures	Impact Measures	Kick-off Year	Ongoing Implementation	
3.1 Release a departmental statement on health and racial equity, diversity, and inclusion (REDI) to be included in all job postings alongside the SFHSS mission, vision, and values.	Process adherence	DATA SOURCES: Tracking applicant/workforce demographics in comparison to the community we serve	Launch: 2021 RE Leads and RE Advisory draft REDI statement in collaboration with staff of all levels through racial equity visioning sessions. REDI statement to be endorsed by department leadership and Health Service Board.	Annually: RE Advisory reviews and updates REDI statement to ensure it continues to reflect departmental and city-wide values.	RE Leads RE Advisory
3.2 Actively list job opportunities on non-traditional & BIPOC centered professional communities and hiring boards.	# of recruitment sources identified and utilized		Launch: 2022 RE Leads partner with DHR Sr. Human Resource Consultant to research non-traditional & BIPOC centered professional communities and hiring boards. Where applicable, RE leads work with internal HSS Finance division to allocate budget for new recruitment sources.	Bi-Annually: RE Advisory and DHR Sr. Human Resource Consultant reviews and updates list of BIPOC centered professional communities and hiring boards as racial equity networks and partnerships grow.	RE Advisory DHR Sr. Human Resource Consultant
3.3 Review, simplify, and standardize job descriptions and interview questions to remove barriers for candidates from non-traditional and underrepresented backgrounds.	# of job listings reviewed by Advisory		Launch: 2022 RE Leads partner with DHR Sr. Human Resource Consultant to research and develop policy and best practices around standardizing job descriptions and interview questions using a racial equity framework.	Monitor As Needed: RE Advisory meets with hiring manager before hiring process kicks-off to review job description structure and interview question utility/approach.	RE Advisory Hiring Manager DHR Sr. Human Resource Consultant

<p>3.4 Enhance Performance Plan Appraisal Report (PPAR) to support staff-centered professional development interests and to identify pathways for skill-building.</p>	<p># of appraisals completed</p>	<p>DATA SOURCES: ITS Employee Engagement Survey Indicators My manager supports my professional growth and development. Baseline (2019) (26%) Strongly Disagree/Disagree (17%) Neutral (57%) Agree/Strongly Agree Note: Update future ITS Indicators to be more directly related to PPAR</p>	<p>Launch: 2022 RE Leads partner with DHR Sr. Human Resource Consultant to analyze and identify themes in the 2019 Employee Engagement Survey Results to inform modifications to the department's Performance Plan Appraisal form and process. Partner with division managers to infuse staff-centered facilitation approaches into PPAR discussions.</p>	<p>Annually: RE Advisory reviews and updates the PPAR to ensure that it continues to reflect staff-voiced engagement needs and departmental values.</p>	<p>RE Leads RE Advisory DHR Sr. Human Resource Consultant Division Managers</p>
<p>3.5 Partner with DHR to complete a baseline professional skills survey. Develop skill building pathways specifically supporting underrepresented staff</p>	<p>Process adherence</p>	<p>DATA SOURCES: Baseline Skills Survey – Impact measures to be determined.</p>	<p>Launch: 2021 Board Secretary resurface baseline professional skills survey draft developed pre-COVID by DHR Sr. Human Resource Consultant and Board Secretary in alignment with ITS 2019 Employee Engagement Survey Results.</p>	<p>Monitor As Needed: Board Secretary partner with DHR Sr. Human Resource Consultant to identify relevant and ongoing opportunities for professional development including workshops and career tracks within and outside of HSS.</p>	<p>DHR Sr. Human Resource Consultant Board Secretary</p>
<p>3.6 Develop internal policy and budget line-item approved for professional development of front-line staff</p>	<p>\$ Amount of budget allocated and utilized for front-line staff extended learning & professional development</p>	<p>DATA SOURCES: % of BIPOC staff utilizing professional development funds</p>	<p>Launch: 2022 HSS Finance Division to ensure that budget allocations reflect equitable opportunities and considerations for staff at all levels. RE Leads meet with department leadership on communication and encouragement of staff participation. Incorporate budget equity analysis tools released and recommended by the Office of Racial Equity.</p>	<p>Annually: HSS Finance Division monitors and balances allocated training budgets.</p>	<p>HSS Finance Division Leadership Team</p>
<p>3.7 Partner with DHR to access de-identified data/reporting from disciplinary actions and separations tracking system. Analyze subsequent disaggregated data and pay special attention to data pointing to biases against staff of color.</p>	<p>Process adherence</p>	<p>DATA SOURCES: # discipline incidents and actions taken, disaggregated by race and ethnicity when possible</p>	<p>Launch: 2023 Executive Director engages DHR Sr. Human Resource Consultant to learn more about the recently established tracking system for disciplinary actions and separation including what data is accessible.</p>	<p>Bi-annual: DHR Sr. Human Resource Consultant will compile biannual disciplinary action report for delivery to Executive Director including impact measures indicated to the left.</p>	<p>DHR Sr. Human Resource Consultant Executive Director</p>
<p>3.8 Develop a standardized process and protocol for administering department exit interviews to better understand the connection between employee feedback, behavior, and organizational trends in discipline and separation. Pay special attention to data pointing to biases against staff of color.</p>	<p># of interviews completed</p>	<p>DATA SOURCES: ITS Employee Engagement Survey Indicators Chances of leaving my job voluntarily during the next year Baseline (2019) (31%) Prefer not to state ; (8%) Very high; (4%) Above average; (15%) Average; (21%) Low; (21%) Extremely Low Realized Employee Attrition</p>	<p>Launch: 2023 RE Leads partner with DHR Sr. Human Resources Consultant to conduct environmental scan of exit interview protocols and glean best practice strategies in the field and amongst the city-wide equity network.</p>	<p>Annually: RE Advisory reviews and updates SFHSS exit interview process to ensure that it captures actionable improvements towards creating an equitable workplace culture and environment. Monitor As Needed: Qualitative feedback to improve workplace culture and environment</p>	<p>RE Leads DHR Sr. Human Resource Consultant RE Advisory</p>

Appendix: Department Assessment Materials

A. PAUSE AND REFLECT EXERCISE PROMPT

Pause and Reflect Exercise

The next step in our journey involves increasing education and awareness about the foundations of racial equity within our department. This includes dedicating time for critical training and collaborative dialogue at the upcoming July 30th All-Staff Meeting.

To help inform that effort we ask that you please [download the attached list of racial equity questions](#) and take time to pause and reflect over the next couple of days. This will prepare you for the actual survey link that will go out early next week. While reviewing the questions, please take notes, reflect on your own experiences, and write down anything new you've learned or would like to share. Each of us has varying and deeply personal lived experiences with racial equity and inequity; your voice is critical as we advance this work. When the survey link goes out via email next week, we hope to hear what you are comfortable sharing from your period of reflection. Thank you for your willingness to participate.

B. RACIAL EQUITY CLIMATE SURVEY QUESTIONS

Q1. Have you participated in a workplace training related to racial equity? Please circle: Yes or No

Q2. Please describe any related trainings you have completed during or before your started working for the City.
Open Ended

Q3. Are you comfortable talking about your background and cultural experiences with your colleagues?
Please circle: Yes or No

Q4. Please share why or why not? Open Ended

Q5. What is important to you about your background and cultural experiences? Open Ended

Q6. As we work together to advance social health and race equity, what is important to think about and ask each other?
Open Ended

Q7. Please use the rating scale below to share your level of familiarity with these racial equity training topics:

Rating Scale: please check mark the boxes below to choose either

Option 1 - I have never heard of this topic

Option 2 - I am somewhat familiar with this topic

Option 3 - I know a fair amount about this topic

Option 4 - I am very familiar with this topic

		Option 1	Option 2	Option 3	Option 4
Social Determinants of Health	the conditions in places where people live, learn, work, and play that affect a wide range of health risks and outcomes (e.g. race, gender, income, housing, food access, occupation, etc.)				
Racial Equity	a state in which race does not predict one's outcomes in a wide range of health and socioeconomic categories (e.g. income, occupation, housing, food access, access to health, etc.)				
Inclusion	authentically bringing historically excluded individuals and/or groups into processes, activities and decision/policy-making in a way that shares power.				
Implicit Bias	when people unconsciously hold attitudes toward others or associate them with stereotypes.				
Explicit Bias	when people are knowingly prejudice against a group or groups.				
Interpersonal Racism	racism that occurs between individuals; it is the holding of negative attitudes towards a different race or culture.				

RACIAL EQUITY CLIMATE SURVEY QUESTIONS CONTINUED

Q8. Please read the following statements carefully and select the level to which you are aware of the following:

Race is a determinant that influences one's health.

Rating Scale (please circle one): Not at all aware, Somewhat aware, Moderately aware, Very aware

Q9. Please share any reflections you have about the statement above:

Q10. Please read the following statements carefully and select the level to which you are aware of the following:

People of all races play a role in addressing racial equity for black, indigenous, and people of color.

Rating Scale (please circle one): Not at all aware, Somewhat aware, Moderately aware, Very aware

Q11. Please share any reflections you have about the statement above:

Q12. Please read the following statements carefully and select the level to which you are aware of the following:

Unconsciously bias and attitudes toward others perpetuate stereotypes.

Rating Scale (please circle one): Not at all aware, Somewhat aware, Moderately aware, Very aware

Q13. Please share any reflections you have about the statement above:

Q14. Please read the following statements carefully and select the level to which you are aware of the following:

Racial injustice toward one race or ethnic group can affect the well-being of all race/ethnic groups.

Rating Scale (please circle one): Not at all aware, Somewhat aware, Moderately aware, Very aware

Q15. Please share any reflections you have about the statement above:

Q16. Please read the following statements carefully and select the level to which you are aware of the following:

A person's identities (e.g. race, gender, sexual orientation, ability status, etc.) can create privileges and barriers to accessing healthcare, employment, income, food and housing security, etc.?

Rating Scale (please circle one): Not at all aware, Somewhat aware, Moderately aware, Very aware

Q17. Please share any reflections you have about the statement above:

Q18. Please read the following statements carefully and select the level to which you are aware of the following:

SFHSS is responsible for advocating for racial and health equity on behalf of our membership, including staff.

Rating Scale (please circle one): Not at all aware, Somewhat aware, Moderately aware, Very aware

Q19. Please share any reflections you have about the statement above:

Q20. Please read the following statements carefully and select the level to which you are aware of the following:

Our organization takes action in response to incidents of harassment or discrimination towards staff members in the workplace.

Rating Scale (please circle one): Not at all aware, Somewhat aware, Moderately aware, Very aware

Q21. Please share any reflections you have about the statement above:

Q22. I have experienced and/or witnessed interpersonal racism (racism that occurs between individuals) at SFHSS.

Please circle: Yes or No

Q23. If you answered yes to experiencing or witnessing interpersonal racism, how did this affect you personally or professionally? (please check all boxes that apply)

- My mental health and well-being has been affected
- My job performance and quality of work has been affected
- I have not been selected for job advancement
- I have been unable to grow my skills as a professional
- The work environment feels unwelcome and/or unsafe
- My relationship with my supervisor(s) are strained
- My relationship with my colleague(s) are strained
- I have considered other transfer/employment opportunities
- Other
- None of the above apply

Q24. I have experienced or witnessed institutional racism (refers to institutions, systems and cultural practices that perpetuate racial inequality) at SFHSS.

Please circle: Yes or No

Q25. How did this affect you personally or professionally? (please check all boxes that apply)

- My mental health and well-being has been affected
- My job performance and quality of work has been affected
- I have not been selected for job advancement
- I am unable to access clear pathways and resources towards job advancement
- I have been unable to grow my skills as a professional
- The work environment feels unwelcome and/or unsafe
- My relationship with my supervisor(s) are strained
- My relationship with my colleague(s) are strained
- I have considered other transfer/employment opportunities
- Other
- None of the above apply

Q26. Do you believe it is possible to end racial inequality? Open Ended

Q27. What thoughts and feelings arose for you while completing this survey? Feel free to reflect on any portion of this survey. Open Ended

C. RACIAL EQUITY FOUNDATIONS TRAINING POST-SURVEY

1. Overall, how would you rate the content of the Racial Equity All-staff training?

- Excellent
- Very good
- Good
- Fair
- Poor

2. Overall, how would you rate the delivery of the training presentation?

- Excellent
- Very good
- Good
- Fair
- Poor

3. What is your level of understanding about:	Before the training				After the training			
	None	A little	Some	A lot	None	A little	Some	A lot
The role that the City and SFHSS play in advancing racial equity								
The role that people of all races play in advancing racial equity								
The lived experiences of your fellow staff members								
The definition of racial equity as an ideal state in which race does not predict one's outcomes								

4. Please use the rating scale below to share how useful these racial equity training topics were for you:	Not at all useful	Slightly useful	Moderately useful	Very useful
Our Current Climate: Black Lives Matter				
Key Concept: Intersectionality, Privilege, Oppression				
Small Breakout Group: Early Experiences with Race				
Equality vs. Equity				

5. Are there any other thoughts or feeling you would like to share?

D. EARLY EXPERIENCES WITH RACE ENGAGEMENT ACTIVITY

Community Agreements for Small Group Discussion

- Step up, step back.
- Speak from your own truth
- No ideas are “right” or “wrong”
- What is said here, stays here. What is learned here, leaves here
- Normalize shifting your perspective
- Sit with silence and unpack discomfort.

Early Experiences with Race

- How racially diverse was your neighborhood growing up? What message(s) did you get about race from living there?
- When was the first time you had a teacher of a different race? When was the first time you had a teacher of the same race?
- When / how did you first realize that races were treated differently in society? Who helped you make sense of that difference?

E. RACIAL EQUITY VISIONING ENGAGEMENT ACTIVITY

(ALL STAFF VERSION)

Racial Equity Visioning

What is our vision for an equitable SFHSS?

- What training and qualities are needed to bring this vision to life?
- How does our workplace culture support our staff? Where can we improve?
- How do we check our biases and embody diversity, equity, inclusion?
- What workplace culture policies, programs and activities are part of your vision?

What motivates your answers?

(LEADERSHIP VERSION)

Racial Equity Visioning

What is our vision for an equitable SFHSS - for our staff and leadership?

- What leadership qualities are needed to bring this vision to life?
- How does our workplace culture help or hinder staff?
- How do we check our biases and embody diversity, equity, inclusion?
- What type of training do we need as a leadership team?

What motivates your answers?

F. VULNERABLE POPULATIONS ENGAGEMENT SURVEY QUESTIONS

Overview of Vulnerable Populations Served

1. Which communities of color do you serve? (Select all that apply) *

- Black or African-American
- Latino/a/x or Hispanic
- Middle Eastern or North African
- Indigenous, Native American or American Indian
- Pacific Islander/Native Hawaiian
- East Asian
- Southeast Asian
- South Asian/Indian
- Filipino/a/x
- Other:

2. What other vulnerable groups/communities do you serve? (Select all that apply) *

- Seniors and Older Adults
- Children and Youth
- Transgender, Gender Variant, Intersex People
- Lesbian, Gay, Bisexual, Queer People
- People with Disabilities and Medical Conditions
- People with Mental Health and Behavioral Health Issues
- People with Limited-English Proficiency
- Undocumented People
- People Facing Food Insecurity
- People who are Subjected to Intimate Partner Violence
- Public Housing Residents
- Caregivers
- Detained/Justice-Involved People
- Shift, Temporary Gig, Low-wage Workers
- Low-income Students
- People facing Digital Access/Connectivity Issues
- People who Rely Exclusively on Public Transit
- Under/Uninsured People
- People Who Are Unbanked/No Access to Credit/Debit Cards
- Other:

Overview of Engagement Activities

3. Please describe your community engagement activities with individuals and groups in San Francisco's communities of color.

SFHSS has not organized community engagement activities with San Francisco's communities of color specifically. As described in the assessment table details, SFHSS serves 122,547 covered lives (approx. 84K actives/dependents and 38K retirees). Our community engagement efforts are currently centered around our Member Services division that provides front-line support to members through consultation and enrollment; our Well-Being division that advises city departments on Well-Being Annual Plans; our Wellness Center that offers group exercise challenges, flu-clinics and benefit fairs; our Employee Assistance Program that provides individual counseling sessions, organizational development consultations, and critical incident response; and our Well-Being network representing 28 City departments.

SFHSS serves as the City's subject matter expert in the area of health benefits administration. As our Racial Equity Action Plan takes shape our organization would like to leverage past stakeholder engagement experiences at the membership, interdivisional, board, and staff levels. SFHSS will continue to engage our health plan partners and serve as a conduit for the specific whole person health and well-being needs of our membership that identify as black, indigenous and people of color.

4. Based on your work, what critical issues do these communities face?

N/A

5. Who are the community based organizations, leaders and/or groups within the vulnerable population(s) you serve? (Describe your engagement with these stakeholders)

N/A

Budget Considerations & Impacts

6. What is your Department's total annual budget for FY 20/21? Briefly describe how your Department generally decides upon its proposed budget allocations:

The total operating budget for FY 20/21 is \$12,102,328. The department does a zero-based budget approach where we look at what is required for each line item each year.

7. What data, indicators and considerations were taken into account to maximize equity and support for vulnerable populations within your proposed Budget?

SFHSS is accountable for the overall health care needs of the City & County of San Francisco membership including employees, their dependents, and retirees. Our membership's rich diversity requires us to design and influence the delivery of healthcare services in ways that meet their unique needs. We look to methods that provide quality care for members when they become ill or develop a chronic condition and support members throughout their life course to maintain well-being.

We take into consideration the whole person, social determinants, quality, and clinical outcomes. As we approach whole person care in an ever-increasingly complex system, our goal is to deliver services that maintain health and well-being; and that our members receive the right care in the right setting. We look at contributors to whole person health such as the demographics of our members and input we receive from members through surveys and focus groups. The investment in mental health services and employee assistance has also been expanded to combat trauma associated with the COVID-19 pandemic.

8. Does your Department provide community participatory budgeting opportunities, or perform external outreach to get feedback on its budget decision-making processes?

Yes

No

VULNERABLE POPULATIONS ENGAGEMENT SURVEY QUESTIONS CONTINUED

9. If your Department does have a community participatory budgeting process, or perform external outreach to get feedback on budget decisions, please outline that process here:

N/A

10. What is your largest projected expenditure? Please go beyond listing a line item and be specific and explanatory. The largest projected expenditure in the operating budget is our staff. The budget in FY 20-21 is \$7,883,600 or 65% of the budget. They work with our members, manage the computer systems, perform the contracts and finance functions, staff the Well-Being Center and Employee Assistance Program.

11. Beyond salaries and benefits, what is your largest projected expenditure? Please go beyond listing a line item and be specific and explanatory.

The second largest expenditure is Non-Personal Services, \$2,299,146 or 19% of the operating budget. The budget for the San Francisco Health Service System's contracts cost is \$2,161,854 or 94% of non-personnel services. The three largest contracts, in order of magnitude, are for actuarial and consulting services which support the rates and benefits process, external employee assistance program services, and management of the flexible benefits.

12. What is your second largest projected expenditure? Please go beyond listing a line item and be specific and explanatory.

The work orders with various other departments are the second largest expenditure. They total \$1,870,497 or 15% of the operating budget. The lease for 1145 Market costs \$1,033,036 or 55% of the work order budget.

13. What is your lowest projected expenditure? Please go beyond listing a line item and be specific and explanatory.

The materials and supplies for the department is the lowest expenditure. For 20-21 the budget is \$49,085 which is less than 1% of the operating budget.

14. What percent and dollar amount of your overall budget supports the vulnerable population(s) you serve?

The operating budget is directed toward the members of SFHSS including the employees, retirees and dependents of the City & County of San Francisco. The exact attribution (percent and dollar amount) that supports vulnerable population(s) within our broader membership is currently unknown.

15. What are the recurring funding gaps or limitations in your overall budget that could inhibit your Department's ability to advance equity?

N/A

16. Please identify potential impacts of your proposed reductions on communities of color and vulnerable communities, and describe what strategies your Department recommends to mitigate any potential adverse impacts.

N/A

17. How does your commitment to vulnerable population(s) show up in your proposed expenditures?

- Staff Time
- Grants to Community-Based Organizations
- Direct Service(s)
- Professional Development for Staff
- Recruitment and Hiring
- Events
- Other:

18. In what ways will your entire budget be realigned for the next fiscal year in targeted ways to advance equity?

Examples of realignment include staff time allocations, exploring targeted health benefits programming, and organizing community engagement efforts that are intended to reduce or eliminate disparities experienced by communities of color and other vulnerable groups. Our current strategic plan focuses on five goals: engagement and support, complexity and fragmentation, choice and flexibility, affordability and sustainability, and whole person health and well-being for our membership. Inclusivity is a core value in our strategic plan that is key to addressing the specific whole person health and well-being needs of our membership that identify as black, indigenous and people of color.

Focus Area

A comprehensive approach to fostering an equitable and just San Francisco includes these focus areas.

19. Does your spending address specific equity needs? Please refer to previous responses about expenditures.

	Largest expenditure	Second largest expenditure	Lowest expenditure
Racial Disparities	X		
Disability Access			X
Transportation and Mobility		X	
Community Health and Wellness	X		
Workforce and Fair Employment			
Information Technology and Digital Equity			X
Education, Knowledge and Community Wisdom	X		
Wealth Building and Economic Justice		X	
Food Justice and Sovereignty		X	
LGBTQIA+ and Gender Justice		X	

20. How do you get feedback on the success of your proposed spending? The return on investment?

HSS does not currently provide community participatory budgeting opportunities, or perform external outreach to get feedback on its budget decision-making processes.

G. VULNERABLE POPULATIONS ENGAGEMENT ASSESSMENT DETAILS

POPULATION	STAKEHOLDER ENGAGEMENT	% OF BUDGET	\$ OF BUDGET	CRITICAL ISSUES	MEASURABLE ACTIVITIES
First Responders and All Frontline Health Care Workers – Expanded Mental Health Services	<p>Participatory planning process with San Francisco Police Department chief, leadership, frontline first responder staff, and the SFHSS Well Being Employee Assistance Program team launched:</p> <p>(1) ComPsych 24/7 one-on-one mental health counseling for any first responder and City employee in need.</p> <p>(2) CORDICO, a phone-based wellness application customized for use by all City first responders.</p> <p>SFHSS also participates in monthly Heal SF Rapid Response Team stakeholder engagement meetings to address immediate and coordinated mental health services for public, private, and non-profit health care workers.</p>	9.4%	\$1,146,267	Enhanced mental health resources designed specifically for the City’s first responders, and expanded mental health services for all frontline health care workers throughout San Francisco. Combined, these new resources will help the City build resiliency and recover from the trauma caused by COVID-19.	<p>Monitoring ComPsych Counseling performance indicators: <i>currently under development in partnership with the vendor.</i></p> <p>Example indicators include:</p> <ul style="list-style-type: none"> - Overall call volume (including 24/7 after-hours call volume) - Case initiation by a ComPsych Intake Clinician (a "Guidance Consultant") - Case referral (referral to SFPD Behavioral Science Unit, SFMTA Claremont EAP Counselor, SFHSS EAP Counselor, the SFPD Managed Health Network, or to one of our Health Plans). <p>Monitoring CORDICO phone-based wellness application performance indicators: <i>currently under development in partnership with the vendor.</i></p> <p>Monitoring mental health performance guarantee and clinical indicators reported by our health care plans, including Kaiser, Blue Shield of California, and United Health Care.</p>

VULNERABLE POPULATIONS ENGAGEMENT ASSESSMENT DETAILS CONTINUED

POPULATION	STAKEHOLDER ENGAGEMENT	% OF BUDGET	\$ OF BUDGET	CRITICAL ISSUES	MEASURABLE ACTIVITIES
People with Medical Conditions – supporting the full spectrum from infancy to older adults	<p>SFHSS conducted 9 focus groups with participation from 34 unique city-wide departments as a part of the Your Health Plan Options 2021 & Beyond series in partnership with Communities in Collaboration (CIC). CIC facilitators and SFHSS staff sat down with members, partners/spouses and adult dependent(s) to learn more about their experiences with health benefits as they are today to better design future health plan options.</p> <p>SFHSS also held stakeholder meetings with UCSF, Hill Physicians, Dignity Health, Brown and Toland Medical Group, and Blue Shield of California to discuss data reporting around social, environmental, and behavioral health indicators that impact high risk/high cost conditions for our membership. Specifically disaggregating data by race, job classification, department, etc.</p>	4%	TOTAL: \$663,557	<p>Member Engagement Focus Group Feedback</p> <p>Service Standards and Accountability: Members expressed a desire for SFHSS to extend more support in enforcing service standards and accountability in ways that better serve patients. Particularly in the following areas: ● Mental Health ● Alternative Medicine ● Potential third-party support</p> <p>Enhanced Communication: Some members stated that they were unaware of some benefits or services provided by SFHSS. Particularly around the following areas: ● Advocacy and problem solving ● Nutrition counseling ● Transition to retirement</p> <p>Meeting Population-Based Needs: Different membership groups have different needs based on location, demographics, or employment type. SFHSS continues to engage subpopulations to explore barriers to care, for instance: ● Members who reside outside the Bay Area ● LGBTQ members ● First Responders ● People of Color</p>	<p>SFHSS supported the collection of member engagement data at each focus groups to include variables such as ethnicity, language, age, education level, and non-binary gender identification that can help quantify demographics related to social determinants of health for our membership.</p> <p>The SFHSS Enterprise Systems and Analytics division is currently supporting SDOH integrations within our All Payers Claims Database (APCD), including newly acquired race data from the San Francisco's Department of Human Resources. SFHSS is also working with DHR to assess opportunities to include worker's compensation claims in the APCD. ESA is running queries around member benefit eligibility data, SDOH indicators, and All Payer Claims data noted below.</p> <p>Member Benefit Eligibility Data:</p> <ul style="list-style-type: none"> - Race, age, gender - Employee status, department, wages - Family Plan, Coverage, Premiums, Medicare <p>Sample SDOH Indicators:</p> <ul style="list-style-type: none"> - Distance traveled to work - Delinquent premium payments - Flexible spending account enrollment - Preferred language - Neighborhood deprivation index <p>All Payers Claims Database:</p> <ul style="list-style-type: none"> - Disease and condition prevalence - Admissions/ Outpatient Services - Claims (services and Rx) - Member Risk Profiles - Service/Utilization metrics - National benchmarks/gaps in care

VULNERABLE POPULATIONS ENGAGEMENT ASSESSMENT DETAILS CONTINUED

POPULATION	STAKEHOLDER ENGAGEMENT	% OF BUDGET	\$ OF BUDGET	CRITICAL ISSUES	MEASURABLE ACTIVITIES
Black, Indigenous, and People of Color – At staff-level, board level, between divisions, and across our benefits membership	<p>Staff-Level Engagement:</p> <ul style="list-style-type: none"> SFHSS formed a Social Determinants of Health Advisory Committee responsible for designing, coordinating, and organizing racial equity plans and activities. A Racial Equity Employee Survey is currently underway to inform the Building Racial Equity Training that will take place this month. Quarterly Racial Equity Employee Forums are kicking off this August. <p>Health Service Board Engagement:</p> <ul style="list-style-type: none"> SFHSS plan to present the departmental Racial Equity Action Plan to the Health Service Board and members of the public in December. <p>Interdepartmental Engagement:</p> <ul style="list-style-type: none"> Partnering with the San Francisco's Department of Human Resources to explore disparities using race data, worker's compensation claims, and delinquent premium payment analysis affecting the city's most vulnerable populations. <p>Membership Engagement:</p> <p>Current State</p> <ul style="list-style-type: none"> SFHSS serves 122,547 covered lives (approx. 84K actives/dependents and 38K retirees). Our Member Services division provides front-line support to members, including offering in-person consultations, answering in-bound calls, Open Enrollment support and benefits events across the City, and presenting year-round new hire and pre-retirement seminars. Our Wellness Center hosted 8K+ visitors in 2019 for group exercise challenges, flu-clinics and benefit fairs. Our Employee Assistance Program responded to 54 critical incidents serving 1,043 people and provided 1,071 individual counseling sessions. EAP also provided 142 organizational department consultations and served a total of 3,270 people. 50% of City departments created a Well-Being Annual Plan for FY19-20 under the guidance of our Well Being Division and our Well-Being Champion network represents 28 City departments (80% of all City departments). <p>Future State:</p> <ul style="list-style-type: none"> SFHSS serves as the City's subject matter expert in the area of health benefits administration. As our Racial Equity Action Plan takes shape our organization would like to leverage past stakeholder engagement experiences at the membership, interdivisional, board, and staff levels. SFHSS will continue to engage our health plan partners and serve as a conduit for the specific whole person health and well-being needs of our membership that identify as black, indigenous and people of color. 	0.07%	<p>One 2820 Senior Health Program Planner (0.5 FTE) \$88,000</p> <p>One 2820 Senior Health Program Planner (1.0 FTE) \$176,658</p> <p>Interdivisional Advisory Group also includes the Communications Director, ESA Manager, and Well Being Manager.</p>	To be determined through future stakeholder engagement activities at the staff, health service board, interdepartmental, and membership level.	<p>SFHSS is in the progress of collecting quantitative and qualitative data through a Racial Equity Employee Survey, including experiences with interpersonal and institutional racism, mobility, professional development, and organizational culture with respect to belonging and inclusion. This survey assesses staff's foundational knowledge of racial equity training topics and offers open ended opportunities to share what is important to them about their background and cultural experiences and what is important for us to think about as we work together to advance social health and race equity.</p> <p>The SFHSS Racial Equity Action Plan will include Racial Equity indicators to measure current conditions and impact, outcomes resulting from changes made within programs or policy, and performance measures to evaluate efficacy, that demonstrate how our City department will address Racial Disparities within the department as well as in external programs benefitting our membership's whole person health and well-being.</p>