

SAN FRANCISCO
HEALTH SERVICE SYSTEM

RACIAL EQUITY ACTION PLAN

PHASE 1 REPORT

December 2020

An illustration of five hands of different skin tones (light, dark, brown, tan, and pink) joined together in a circle, symbolizing unity and diversity. The hands are wearing various accessories: a watch, a bracelet with a heart, a ring, and a watch. The background is a solid blue color.

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

Executive Director

- Abbie Yant

Racial Equity Leads

- Derrick Tsoi
- Leticia Pagán

Racial Equity Advisory

- Carrie Beshears
- Irene Umipig
- Jessica Shih
- Julisa Nunez
- Rin Coleridge

Health Service Board Endorsement

The San Francisco Health Service Board (Board) recognizes that race and the Social Determinants of Health (SDOH) are important factors of whole person health and well-being. The Board acknowledges that initiatives in the SFHSS Strategic Plan and Racial Equity Action Plan support inclusivity for staff and membership in alignment with our core values.

On December 10, 2020, the Health Service Board approved the design and development of the SFHSS Racial Equity Action Plan: Phase I. Phase I supports staff empowerment through programs that benefit our workplace environment. Phase II will focus on the delivery of external services and programs benefitting our membership at large. The Board endorses and approves the implementation, assessment, and evaluation of Phase I and Phase II initiatives to advance racial equity throughout 2021-2023. Consistent with the SFHSS Strategic Plan, this includes education and awareness training to better understand how distinct social, environmental, and demographic factors can impact whole person health and well-being.



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 Systems 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

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 discussing 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 of ending 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.

The SFHSS Racial Equity Action Plan consists of 18 initiatives centered around three departmental 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 by improving staff programs, policies, culture, and the 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 template initiatives in seven focus areas¹ (left column below) for departments to use as a guideline for Phase I SFHSS incorporated these areas into three department-specific focus areas (right column below) 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. These initiatives were chosen based on relevancy to our department and the capacity to create sizable impact for our staff. The following page highlights corresponding initiatives for each SFHSS focus area.

ORE Template Focus Areas	SFHSS Focus Areas
Organizational Culture of Inclusion and Belonging	Organizational Culture: Education, Inclusion & Belonging
Diverse and Equitable Leadership and Management Boards and Commissions	Equitable Leadership & Board Development
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 SFHSS REAP Phase I Appendix contains a detailed table including initiative descriptions, impact measures, implementation strategy and resources committed.

Two Year SFHSS Racial Equity Experience

Winter 2018

GARE Learning Cohort & Crew Working Group

Summer 2019

Employee Engagement Survey

RE Foundation Leadership Training

Office of Racial Equity Formed

Fall 2019

All-Staff Equity Trust Exercise

Spring 2020

RE/SDOH Advisory Form

Summer 2020

REAP Phase I Framework Released

RE Survey & Foundations All-Staff Training

Fall 2020

All-Staff Racial Equity Visioning

Winter 2020

REAP Phase I

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 of 2019 when the Office of Racial Equity (ORE) was formally created by legislative ordinance No 188-19³. 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:

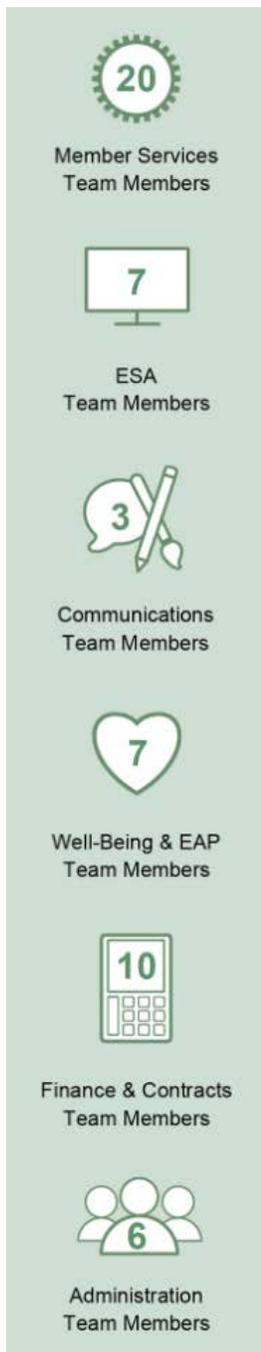
- An inaugural Racial Equity Employee Climate Survey
- A Racial Equity Foundations Training for all staff
- All staff breakout groups: *Early Experiences with Race* discussion
- All staff breakout groups: *Vision for an Equitable SFHSS* discussion
- Staff demographic data and survey analysis
- Monthly 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 Systems 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, and 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 categories: 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 (AIAN), Native Hawaiian/Pacific Islander (NHPI), or Multi-racial. Across all SFHSS staff within the 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 SFHSS 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

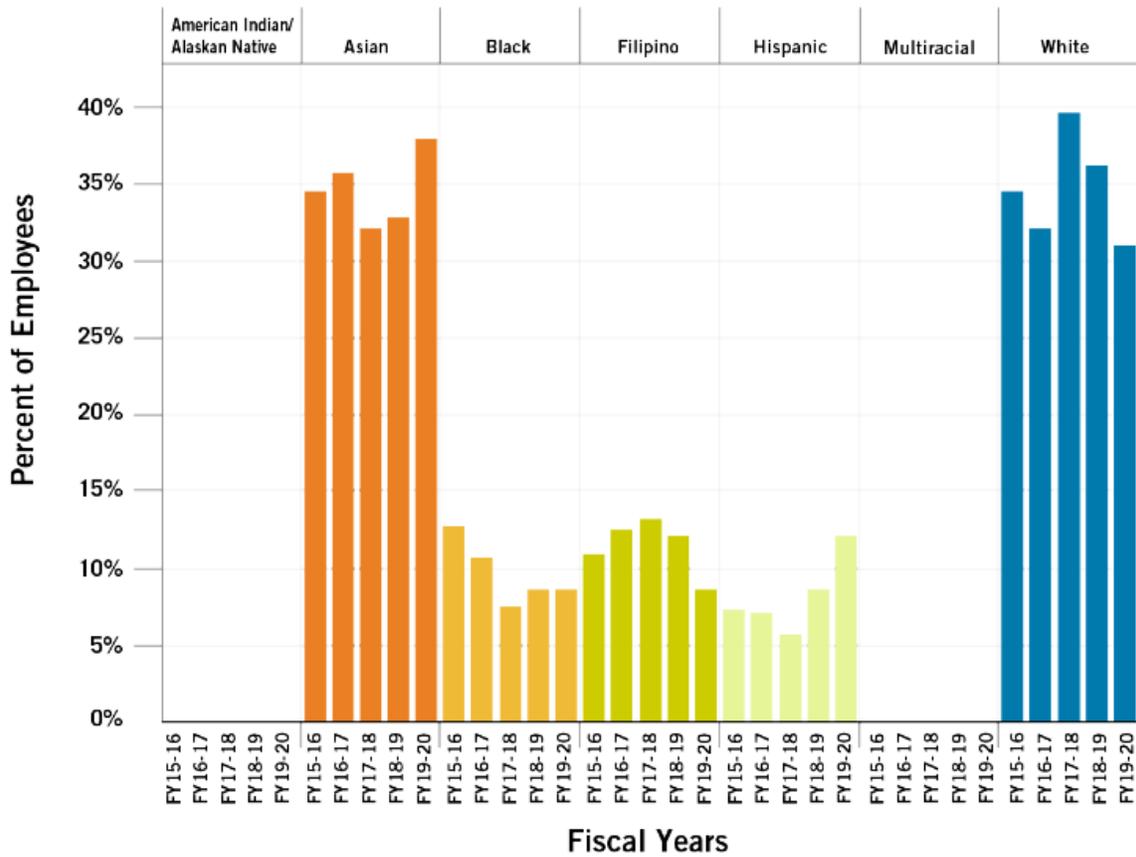
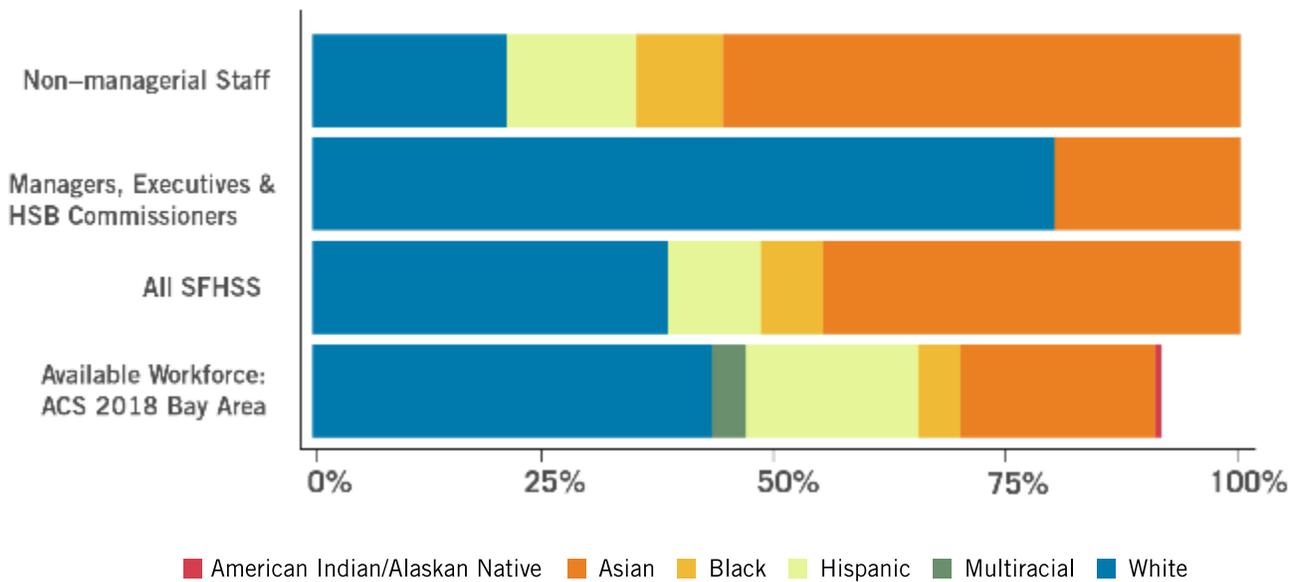


Figure 3: SFHSS Race & Seniority Distribution 2020²



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 an inaugural Racial Equity Climate Survey, a Racial Equity Foundations Training, and a small-group Early Experiences with Race discussion to raise staff voices and lived experiences to the forefront of our department's REAP. 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 racial equity work. Detailed results from the department assessment surveys are described below.

Racial Equity Climate Survey

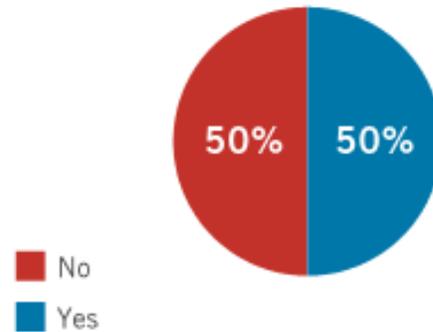
Background

The department's Racial Equity Advisory encouraged individual reflection through a 'Pause and Reflect' activity that included a prompt and a copy of the survey questions and corresponding definitions (Appendix A and B). All survey questions were sent to staff with a personal message from the Executive Director, 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.

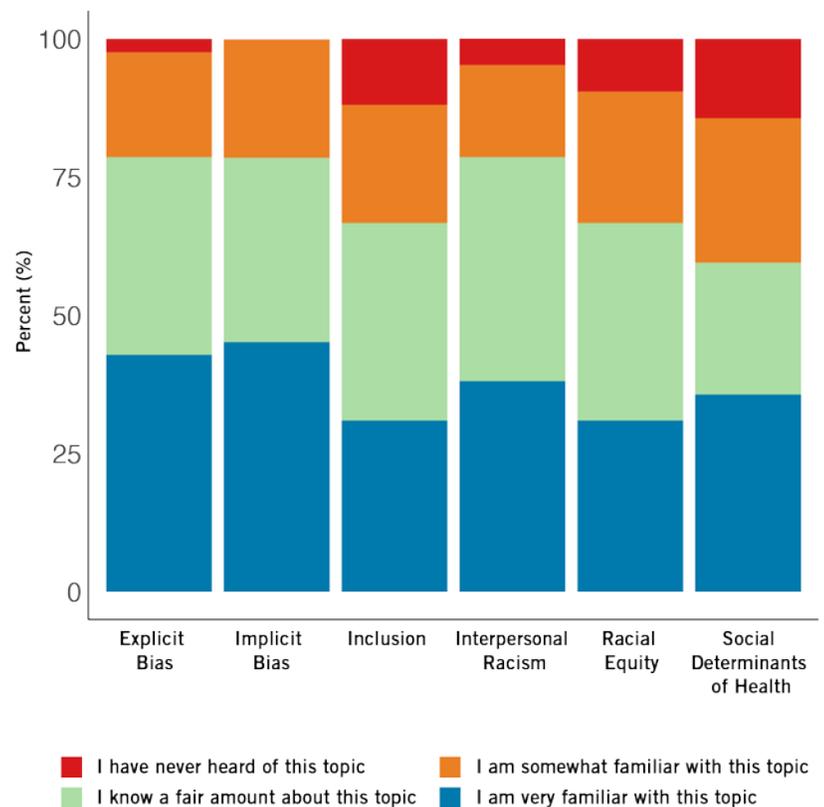
Staff Familiarity with Racial Equity

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



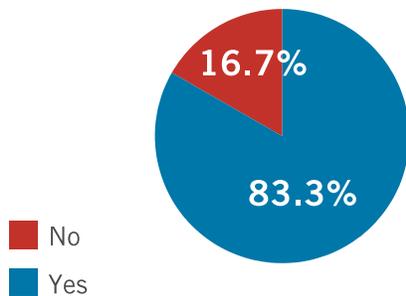
Personal Culture and Sharing Preference

83% of staff respondents reported feeling comfortable with talking about their background and cultural experiences with their colleagues. Staff expressed that culture is an important facet of their identities and worldviews – 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 cited personal privacy, fear of retribution, sentiments of white guilt, and negative past experiences.

Awareness of Racial Equity Statements

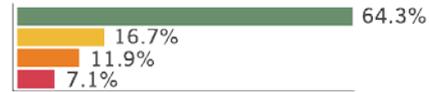
SFHSS asked staff to rate their level of awareness on a series of racial equity statements centered on general, personal, and organizational roles in racial equity. Notably, 100% of staff responded with somewhat (or greater) awareness to the statement: “People of all races play a role in addressing racial 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 to health, that unconscious bias perpetuates stereotypes, and that injustices against one group affect other groups. 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?

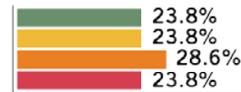


How aware are you of the following statements?

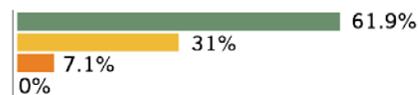
A person's identities (e.g. race, gender, sexual orientation, ability status, etc.) can create privileges and barriers to accessing healthcare, employment, income, food and housing security, etc.



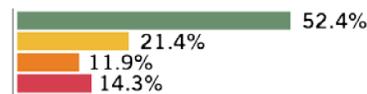
Our organization takes action in response to incidents of harassment or discrimination towards staff members in the workplace.



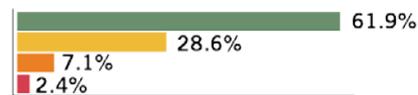
People of all races play a role in addressing racial equity for black, indigenous, and people of color.



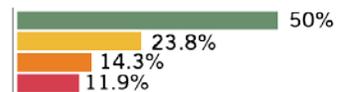
Race is a determinant that influences one's health.



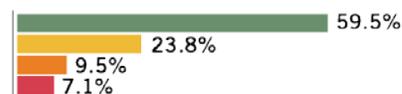
Racial Injustice toward one race or ethnic group can affect the well-being of all race/ethnic groups.



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.



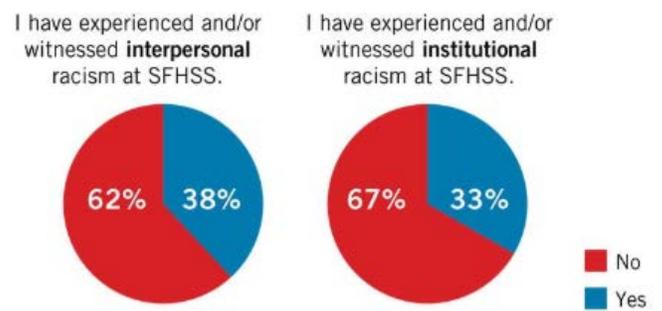
■ Not at all aware ■ Somewhat aware
■ Moderately aware ■ Very aware

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 experienced and/or witnessed interpersonal and institutional racism and 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 in tackling these issues. They acknowledged that racial equity work is challenging and charged but supported building a safe space at SFHSS to continue the dialogue.

45% of staff expressed hope and belief in the possibility of ending 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 one another 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 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. The timeline below includes key steppingstones to building a 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 to complement the all-staff training schedule. These trainings will continuously adapt to the current workplace climate and incorporate creative and inclusive evidenced-based approaches.

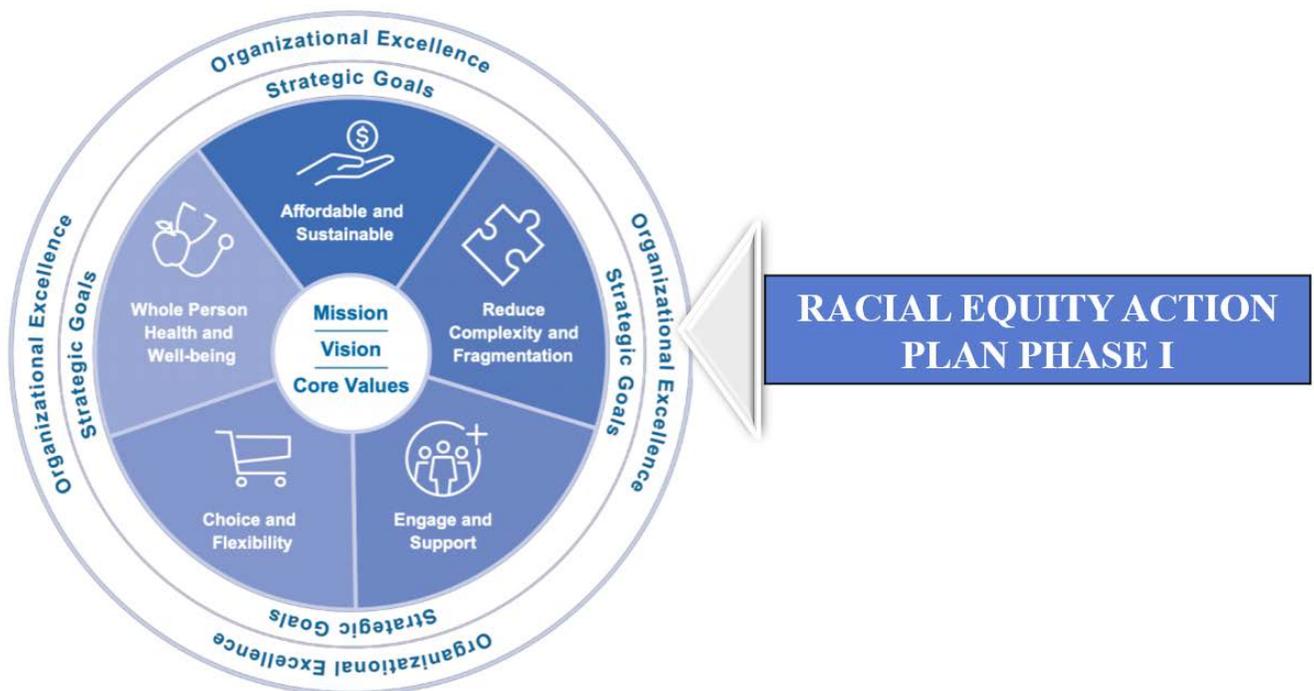


Looking Ahead: REAP Phase II

Phase I of the SFHSS REAP guides how we center racial equity within our departmental 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 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 improve 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 ‘*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 the 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 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. SFHSS seeks to normalize anti-racism training and dialogue to support 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.”