

April 2026 Business Office of Contract Management (BOCC) Program and Fiscal Monitoring

Agency: Richmond Area Multi-Services (RAMS)				
Fiscal Monitoring Outcome (Agency-wide): FY 25-26 Citywide Fiscal Monitoring Complete, no issues/findings.				
Program Monitoring Outcomes:				
Section:	Program Name:	CID #	Year Monitored:	Plan of Action Required?
BHS	RAMS Peer Specialist Mental Health Certificate	1000020708	23-24	No
Overall Program Score	Program Performance	Program Deliverables	Program Compliance	Client Satisfaction
4 - Commendable/Exceeds Standards	4 - Commendable/Exceeds Standards	4 - Commendable/Exceeds Standards	4 - Commendable/Exceeds Standards	4 - Commendable/Exceeds Standards
Comments: The program met 100% of its contracted performance objectives and 111% of its contracted units of service target. The program completed its client satisfaction and analyzed the results.				

Agency: Richmond Area Multi-Services (RAMS)				
Fiscal Monitoring Outcome (Agency-wide): FY 25-26 Citywide Fiscal Monitoring Complete, no issues/findings.				
Program Monitoring Outcomes:				
Section:	Program Name:	CID #	Year Monitored:	Plan of Action Required?
BHS	RAMS Peer to Peer Services	1000020708	23-24	No
Overall Program Score	Program Performance	Program Deliverables	Program Compliance	Client Satisfaction
4 - Commendable/ Exceeds Standards	4 - Commendable/ Exceeds Standards	4 - Commendable/ Exceeds Standards	4 - Commendable/ Exceeds Standards	4 - Commendable/ Exceeds Standards
Comments: The program met 100% of its contracted performance objectives and 82% of its contracted units of service target. The program completed its client satisfaction and analyzed the results.				

Agency: Westside Community Services				
Fiscal Monitoring Outcome (Agency-wide): FY 24-25 Citywide Fiscal Monitoring Completed with no findings/issues.				
Program Monitoring Outcomes:				
Section:	Program Name:	CID #	Year Monitored:	Plan of Action Required?
BHS	Eleanora Fagan Center (aka Kean)	1000035747		
Overall Program Score	Program Performance	Program Deliverables	Program Compliance	Client Satisfaction
Comments: Eleanora Fagan Center (aka Kean) not yet monitored, began 24-25.				

Agency: San Francisco Health Authority				
Fiscal Monitoring Outcome (Agency-wide): Not Applicable				
Program Monitoring Outcomes: Not monitored by BOCC.				
Section:	Program Name:	CID #	Year Monitored:	Plan of Action Required?
		1000037893		
Overall Program Score	Program Performance	Program Deliverables	Program Compliance	Client Satisfaction
Comments:				
Section:	Program Name:	CID #	Year Monitored:	Plan of Action Required?
		1000037894		
Overall Program Score	Program Performance	Program Deliverables	Program Compliance	Client Satisfaction
Comments:				

Agency: YMCA				
Fiscal Monitoring Outcome (Agency-wide): FY24-25 Citywide Fiscal Monitoring completed with no findings/issues.				
Program Monitoring Outcomes:				
Section:	Program Name:	CID #	Year Monitored:	Plan of Action Required?
BHS	Urban Services YMCA of San Francisco Intensive Supervision and Clinical Services (ISCS) Program	1000010841	23-24	No
Overall Program Score	Program Performance	Program Deliverables	Program Compliance	Client Satisfaction
2 - Improvement Needed/Below Standards	1 – Unacceptable	NA	4 - Commendable/ Exceeds Standards	4 - Commendable/ Exceeds Standards
Comments: The program met 34% of its contracted performance objectives and was exempted from its contracted units of service target. The program submitted its client satisfaction results in a timely fashion, the return rate was more than 50%, and the percentage of clients indicating satisfaction with the program's services was 90-100%. Monitor note regarding low Program Performance score: “These scores reflect a notable decline since the last monitoring period, where overall achievement was 77.5%, compared to 34% in the current period. Contributing factors likely include the transition from using Avatar to Epic, which significantly impacted documentation across many providers in BHS. This, combined with a small client caseload, meant that several Objectives could not be achieved. Given the substantial impact of the EHR transition and the fact that many of these Objectives will not carry forward into FY24-25, no Plans of Action (POAs) will be assigned at this time. In addition, FY24-25 has concluded at the time of the completion of this report. The program is advised to seek technical assistance from the SOC to ensure awareness of all documentation standards in Epic.”				

Agency: Community Youth Center				
Fiscal Monitoring Outcome (Agency-wide): FY24-25 Citywide Fiscal Monitoring completed with no findings/issues.				
Program Monitoring Outcomes:				
Section:	Program Name:	CID #	Year Monitored:	Plan of Action Required?
BHS	CYC ISCS/EPSTD Outpatient Program	1000010830	23-24	No
Overall Program Score	Program Performance	Program Deliverables	Program Compliance	Client Satisfaction
4 - Commendable/ Exceeds Standards	3 - Acceptable/ Meets Standards	NA	4 - Commendable/ Exceeds Standards	4 - Commendable/ Exceeds Standards
Comments: NOTE: The program code and associated data with this report was incorrectly applied. The scores are accurate, but the name of this program should be “CYC EPSTD Outpatient Program” leaving as-is for now as the reports were finalized and signed under this name. The program met 83% of its contracted performance objectives and was exempted from its contracted units of service target. The program submitted its client satisfaction results in a timely fashion, the return rate was more than 50%, and the percentage of clients indicating satisfaction with the program's services was 90-100%.				

Agency: Community Youth Center				
Fiscal Monitoring Outcome (Agency-wide): FY24-25 Citywide Fiscal Monitoring completed with no findings/issues.				
Program Monitoring Outcomes:				
Section:	Program Name:	CID #	Year Monitored:	Plan of Action Required?
BHS	CYC EPSDT Outpatient Program	1000010830	23-24	No
Overall Program Score	Program Performance	Program Deliverables	Program Compliance	Client Satisfaction
3 - Acceptable/ Meets Standards	3 - Acceptable/ Meets Standards	NA	4 - Commendable/ Exceeds Standards	1-Unacceptable
<p>Comments: NOTE: The program code and associated data with this report was incorrectly applied. The scores are accurate, but the name of this program should be “CYC ISCS/EPSTDT Outpatient Program” leaving as-is for now as the reports were finalized and signed under this name. The program met 78% of its contracted performance objectives and was exempted from its contracted units of service target. The program submitted its client satisfaction results in a timely fashion, the return rate was more than 50%, and the percentage of clients indicating satisfaction with the program's services was less than 50%. Monitor note about client satisfaction results: "After discussing possible reasons for the low satisfaction rate, BOCC recommended that the program resume the use of paper surveys, ensuring MRNs and Program Codes are pre-filled to improve accuracy and response rates. A Plan of Action (POA) will not be assigned, as the program is already aware of the issue and has a strategy in place to mitigate low scores in future survey cycles."</p>				

Agency: Community Youth Center				
Fiscal Monitoring Outcome (Agency-wide): FY24-25 Citywide Fiscal Monitoring completed with no findings/issues.				
Program Monitoring Outcomes:				
Section:	Program Name:	CID #	Year Monitored:	Plan of Action Required?
BHS	CYC TAY – Asian & Pacific Islander Youth & Family Community Support Services (APIYFCSS)	1000010830	23-24	No
Overall Program Score	Program Performance	Program Deliverables	Program Compliance	Client Satisfaction
4 - Commendable/ Exceeds Standards	4 - Commendable/ Exceeds Standards	NA	4 - Commendable/ Exceeds Standards	4 - Commendable/ Exceeds Standards
Comments: The program met 100% of its contracted performance objectives and was exempted from its contracted units of service target. The program completed its client satisfaction survey and analyzed the results.				

Agency: Instituto Familiar de la Raza				
Fiscal Monitoring Outcome (Agency-wide): FY 24-25 Citywide Fiscal Monitoring completed, with 1 outstanding finding on the audited financial statements completed late. The agency attributed some of the delays to delays in contract certification, which then caused delays in the revenue reconciliations needed to complete the audit. However, the agency significantly improved the timeliness of its audited financial statements, and the FY24–25 audit was completed within six months of year-end—sooner than the City’s nine-month standard and within the six-month best practice timeline.				
Program Monitoring Outcomes:				
Section:	Program Name:	CID #	Year Monitored:	Plan of Action Required?
BHS	IFR ISCS/EPSTDT Services La Cultura Cura and Family F.I.R.S.T	1000011456	23-24	No
Overall Program Score	Program Performance	Program Deliverables	Program Compliance	Client Satisfaction
4 - Commendable/ Exceeds Standards	4 - Commendable/ Exceeds Standards	NA	4 - Commendable/ Exceeds Standards	4 - Commendable/ Exceeds Standards
Comments: The program met 91% of its contracted performance objectives and was exempted from its contracted units of service target. The program submitted its client satisfaction results in a timely fashion, the return rate was more than 50%, and the percentage of clients indicating satisfaction with the program's services was 90-100%.				

Agency: Instituto Familiar de la Raza				
Fiscal Monitoring Outcome (Agency-wide): FY 24-25 Citywide Fiscal Monitoring completed, with 1 outstanding finding on the audited financial statements completed late. The agency attributed some of the delays to delays in contract certification, which then caused delays in the revenue reconciliations needed to complete the audit. However, the agency significantly improved the timeliness of its audited financial statements, and the FY24–25 audit was completed within six months of year-end—sooner than the City’s nine-month standard and within the six-month best practice timeline.				
Program Monitoring Outcomes:				
Section:	Program Name:	CID #	Year Monitored:	Plan of Action Required?
BHS	IFR Sana Sana Program (SSIP) Full Service Partnership (FSP) 0-5	1000011456	23-24	No
Overall Program Score	Program Performance	Program Deliverables	Program Compliance	Client Satisfaction
3- Acceptable/Meets Standards	4 - Commendable/ Exceeds Standards	NA	4 - Commendable/ Exceeds Standards	4 - Commendable/ Exceeds Standards
Comments: The program met 68% of its contracted performance objectives and was exempted from its contracted units of service target. The program submitted its client satisfaction results in a timely fashion, the return rate was more than 50%, and the percentage of clients indicating satisfaction with the program's services was 90-100%.				

Agency: The Latino Commission				
Fiscal Monitoring Outcome (Agency-wide): The FY25-26 Citywide Fiscal and Compliance Monitoring was completed with no findings/issues.				
Program Monitoring Outcomes:				
Section:	Program Name:	CID #	Year Monitored:	Plan of Action Required?
BHS-SUS	Casa Lil'Hawk	1000032798	NA	
Overall Program Score	Program Performance	Program Deliverables	Program Compliance	Client Satisfaction
Comments: This program was slated to begin in September 2025 but did not start operation until January 2026. Not yet monitored by BOCC.				