



San Francisco Department of Public Health

Behavioral Health Services - Children, Youth, and Families

Performance Objectives FY 2026- 2027

OVERVIEW - CHILDREN YOUTH AND FAMILIES PROGRAMS - PERFORMANCE OBJECTIVES FY 25-26

Measuring client improvement and successful completion of target objectives is an important part of SFDPH contracting. The implementation of the EPIC Electronic Health Record in Fiscal Year 2023-2024 (May.22,2024) increased the ability to collect quality data on a client's presenting issues, demographics, interventions, symptom changes, and discharge status. The Performance Objectives developed for Fiscal Year 2026-27 Health Services (BHS) intend to reduce provider burden in determining objective compliance by using EPIC data to measure objectives - to the extent possible.

The Program Objectives detailed in this document have been carefully defined to measure important behavioral health processes and outcomes. All references to number of days throughout this document mean "Business Days" as that is how EPIC is designed to measure days. Not all objectives apply to all programs. This document is posted at: <https://www.sf.gov/resource/2024/performance-objectives>

Contractors are responsible for compliance with all items in the Performance Objectives and the Declaration of Compliance.

This document is comprised of the following 4 tabs:

Tab 1: Objectives for *Outpatient Mental Health Services and Intensive Outpatient Services*

Tab 2: Objectives for *Therapeutic Behavioral Services*

Tab 3: Objectives for *Individualized Program Services* (Publish on June 30th, 2026)

Tab 4: Objectives for *BHSA* (Publish on June 30th, 2026)

Tabs 1 through 4 provide additional detail about each performance objective. Next to each indicator are columns that describe the following:

- **Client Inclusion Criteria** - identifies which group of clients / programs are included in the measurement of the objective
- **Data Source / Compliance** - identifies the data source used to measure the objective and/or how compliance with the objective is documented and reported
- **Source of Requirement** - e.g., BHS policy, Affordable Care Act, Department of Healthcare Services, etc.
- **Report Availability for Provider**- Epic Reports, Provider's own reports

In several cases contractors are instructed to send an Annual Summary Report to the System of Care (SOC) Program Manager and the Business Office Contract Compliance (BOCC) Program Manager. Reports for BOCC should be sent by e-mail to: bocc@sfdph.org & directly to your CYF program manager.

Tab 1-Output MH & Intensiv Output

Indicator	Type of Objective	Client Inclusion Criteria	Data Source / Compliance	Source of Requirement	Report Availability for Providers
CYF-MH-OP-1: 80% of encounters will be signed within 3 business days	Compliance	All Providers	Epic Hyperspace / Uploaders to Provide Data	DHCS	Epic BHS Encounter Stats Reports (hyperspace users). Uploaders to run own reports.
CYF-MH-OP-2: 90% of clients receiving Targeted Case Management (TCM) and/or Intensive Care Coordination (ICC) will have BHS Care Plan	Compliance	All Providers: TCM Intensive Providers: ICC	Epic Hyperspace / Uploaders to Provide Data	DHCS, Feds	DPH BHS Staff Caseload Report (hyperspace users). Uploaders to run own reports.
CYF-MH-OP-3: On any date 90% of clients will have a Cal AIM 7 Domain Assessment completed within the last year.	Compliance	All providers	Epic Hyperspace / Uploaders to Provide Data	DHCS	DPH BHS Staff Caseload Report (hyperspace users). Uploaders to run own reports.
CYF-MH-OP-4: 80% of clients will improve on at least 1 of their prioritized actionable item/s on the CANS need	Outcome	Clients enrolled in program.	EPIC episode data. Quality Management (QM) calculates.	BHS	QM Quarterly and Annual Reports.
CYF-MH-OP-5: 80% of clients will either maintain or develop at least 1 of their prioritized item/s on the CANS strengths.	Outcome	Clients enrolled in program.	EPIC episode data. Quality Management (QM) calculates.	BHS	QM Quarterly and Annual Reports.

Tab 2 - Therap Bhvrl Svcs

Indicator	Type of Objective	Client Inclusion Criteria	Data Source / Compliance	Source of Requirement	Report Availability for Providers
CYF-TBS-1: At least 60% of Therapeutic Behavioral Services (TBS) clients will have met their TBS treatment goals as measured by discharge summaries.	Outcome	TBS clients discharged 7/01/26- 6/30/27 Note: This applies only to Edgewood TBS	TBS Discharge Summary	BHS Policy Affordable Care Act	N/A- CYF Clinical Operations team will submit an annual report to BOCC with data by 9/15/27