FY 2024–25 Substance Use Services – Adult Outpatient Performance Objectives

Indicator	Type of Objective	Client Inclusion Criteria	Data Source / Compliance	Source of Requirement	Report Availability for Providers
SUD Adult-OP-1: At least 60% of clients will have successfully completed treatment or will have left before completion with satisfactory progress as measured by discharge codes.	Outcome	All clients discharged in FY24-25 Excludes: Clients with < 3 visits in 60 day period	CalOMS Discharge Status Field	ACA	CalOMS Discharge Status Report Avatar Report
SUD Adult-OP-2: At least 70% of clients will maintain abstinence or show a reduction of Alcohol and Other Drug use.	Outcome	Clients in Tx ≥ 60 days and discharged, or for whom CalOMS data updated in FY24-25	CalOMS admission, Annual Update, and Discharge Data	ACA	QM Quarterly Report SFDPH website, BHS/QM section
SUD Adult-OP-3: 100% of initial requests for services (phone and walk-ins) will be recorded in the Avatar Timely Access Log.	Process	All initial requests for Services from new clients (without an open episode in the program) Number of entries in Timely Access Log should be ≥ number of new episodes opened in FY24-25	Avatar - BOCC calculates	BHS Policy/DHCS	Timely Access Log Report Dashboard Avatar Report
SUD Adult-OP-4: 90% of clients will be offered an appointment within 10 business days of the initial request for services.	Process	All clients with non-urgent needs beginning Tx with a new provider in FY24-25	Avatar - BOCC calculates	BHS Policy/DHCS	Timely Access Report (Program) Avatar Report
SUD Adult-OP-5: 100% of clients admitted will have an accepted Cal-OMS Admissions by DHCS.	Process	Clients admitted during FY24-25	Cal-OMS Accept and Reject Report	BHS Policy/DHCS	Avatar: CalOMS Admission Errors by Program Report DHCS: Accept and Reject Report

FY 2024–25 Substance Use Services – Adult Outpatient Performance Objectives

SUD Adult-OP-6: 100% of clients enrolled in program over 365 days will have an accepted Cal-OMS Annual Update by DHCS.	Process	Clients enrolled in program for 365 days or more during FY24-25	Cal-OMS Accept and Reject Report	BHS Policy/DHCS	Avatar CalOMS Discharge Errors by Program Report DHCS: Accept and Reject Report
SUD Adult-OP-7: 100% of clients discharged will have the CalOMS Discharge Status field completed.	Process	Clients discharged during FY24-25	CalOMS Discharge Status Field	BHS Policy/DHCS	CalOMS Discharge Timely Status Avatar Report
SUD Adult-OP-8: No more than 40% of clients will be coded as CalOMS Administrative Discharge.	Process	Applicable to all CalOMS programs with clients discharged in FY23-24 NOTE: Administrative discharge codes "4" and "6" only used when client interview not possible and full set of CalOMS items cannot be completed	CalOMS Discharge Status Field	BHS Policy/DHCS	CalOMS Administrative Discharge Status Report Avatar Report
SUD Adult-Prop C-1: Programs will submit SUDS outpatient excel report or other internal tracking document of client's link to services monthly by the 15 of the following month to SFDPH SUD System of Care (BHS-SUD@sfdph.org)	Process	Applicable to Programs receiving Prop C: Bayview Hunter's Point Foundation; Curry Senior Center; HR360-AAHC, -AARS/LWCC, -Adapt, -SF Adult OP; Mission Council-IOP, -OP; SFAF-Stonewall Project; The Latino Commission; UCSF Alliance Health Project	SUDS Outpatient Programs Navigators Report	BHS Policy	N/A

FY 2024–25 Substance Use Services – Adult OTP Performance Objectives

Indicator	Type of Objective	Client Inclusion Criteria	Data Source / Compliance	Source of Requirement	Report Availability for Providers
SUD Adult-OTP-1: At least 60% of clients will have successfully completed treatment or will have left before completion with satisfactory progress as measured by discharge codes.	Outcome	All clients discharged in FY24-25 Excludes: Clients with < 3 visits in 60 day period	CalOMS Discharge Status Field	ACA	CalOMS Discharge Status Report Avatar Report
SUD Adult-OTP-2: At least 70% of clients will maintain abstinence or show a reduction of Alcohol and Other Drug use.	Outcome	Clients in Tx ≥ 60 days and discharged, or for whom CalOMS data updated in FY24-25	CalOMS admission, Annual Update, and Discharge Data	ACA	QM Quarterly Report SFDPH website, BHS/QM section
SUD Adult-OTP-3: 100% of initial requests for services (phone and walk-ins) will be recorded in the Avatar Timely Access Log.	Process	All initial requests for Services from new clients (without an open episode in the program) Number of entries in Timely Access Log should be ≥ number of new episodes opened in FY24-25	Avatar - BOCC calculates	BHS Policy/DHCS	Timely Access Log Report Dashboard Avatar Report
SUD Adult-OTP-4: 90% of clients will be offered an appointment within 10 business days of the initial request for services.	Process	All clients with non-urgent needs beginning Tx with a new provider in FY24-25	Avatar - BOCC calculates	BHS Policy/DHCS	Timely Access Report (Program) Avatar Report
SUD Adult-OTP-5: 100% of clients admitted will have an accepted Cal-OMS Admissions by DHCS.	Process	Clients admitted during FY24-25	Cal-OMS Accept and Reject Report	BHS Policy/DHCS	Avatar: CalOMS Admission Errors by Program Report DHCS: Accept and Reject Report

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FY 2024–25 Substance Use Services – Adult OTP Performance Objectives

SUD Adult-OTP-6: 100% of clients enrolled in program over 365 days will have an accepted Cal-OMS Annual Update by DHCS.	Process	Clients enrolled in program for 365 days or more during FY24-25	Cal-OMS Accept and Reject Report	BHS Policy/DHCS	Avatar CalOMS Discharge Errors by Program Report DHCS: Accept and Reject Report
SUD Adult-OTP-7: 100% of clients discharged will have the CalOMS Discharge Status field completed.	Process	Clients discharged during FY24-25	CalOMS Discharge Status Field	BHS Policy/DHCS	CalOMS Discharge Timely Status Avatar Report
SUD Adult-OTP-8: No more than 40% of clients will be coded as CalOMS Administrative Discharge	Process	Applicable to all CalOMS programs with clients discharged in FY23-24 NOTE: Administrative discharge codes "4" and "6" only used when client interview not possible and full set of CalOMS items cannot be completed	CalOMS Discharge Status Field	BHS Policy/DHCS	CalOMS Administrative Discharge Status Report Avatar Report
SUD Adult-OTP-9: At least 70% of clients admitted to a methadone maintenance treatment program will stay in treatment ≥ 12 months.	Outcome	All clients admitted in FY24-25	Avatar episode opening & closing dates for discharged clients	ACA	Methadone Maintenance TX Duration Avatar Report

FY 2024–25 Substance Use Services – Adult Residential Performance Objectives

Indicator	Type of Objective	Client Inclusion Criteria	Data Source / Compliance	Source of Requirement	Report Availability for Providers
SUD Adult-RES-1: At least 60% of clients will have successfully completed treatment or will have left before completion with satisfactory progress as measured by discharge codes.	Outcome	All clients discharged in FY24-25 Excludes: Clients with < 3 visits in 60 day period	CalOMS Discharge Status Field	ACA	CalOMS Discharge Status Report Avatar Report
SUD Adult-RES-2: At least 70% of clients will maintain abstinence or show a reduction of Alcohol and Other Drug use.	Outcome	Clients in Tx ≥ 60 days and discharged, or for whom CalOMS data updated in FY24-25	CalOMS admission, Annual Update, and Discharge Data	ACA	QM Quarterly Report SFDPH website, BHS/QM section
SUD Adult-RES-3: 100% of initial requests for services (phone and walk-ins) will be recorded in the Avatar Timely Access Log.	Process	All initial requests for Services from new clients (without an open episode in the program) Number of entries in Timely Access Log should be ≥ number of new episodes opened in FY24-25	Avatar - BOCC calculates	BHS Policy/DHCS	Timely Access Log Report Dashboard Avatar Report
SUD Adult-RES-4: 100% of clients admitted will have an accepted Cal-OMS Admissions by DHCS.	Process	Clients admitted during FY24-25	Cal-OMS Accept and Reject Report	BHS Policy/DHCS	Avatar: CalOMS Admission Errors by Program Report DHCS: Accept and Reject Report
SUD Adult-RES-5: 100% of clients discharged will have the CalOMS Discharge Status field completed.	Process	Clients discharged during FY24-25	CalOMS Discharge Status Field	BHS Policy/DHCS	CalOMS Discharge Timely Status Avatar Report

FY 2024–25 Substance Use Services – Adult Residential Performance Objectives

SUD Adult-RES-6: No more than 40% of clients will be coded as CalOMS Administrative Discharge	Process	Applicable to all CalOMS programs with clients discharged in FY23-24 NOTE: Administrative discharge codes "4" and "6" only used when client interview not possible and full set of CalOMS items cannot be completed.	CalOMS Discharge Status Field	BHS Policy/DHCS	CalOMS Administrative Discharge Status Report Avatar Report
SUD-RSD-1: 100% of clients in Residential Step-Down will have documented monthly verification of enrollment in an Outpatient treatment program (Outpatient, Intensive OP, NTP, Recovery Services).	Process	Clients in program ≥ 30 days	SUDS RSD Report of Client Connection to SUD Services or Internal Tracking Document	BHS Policy DHCS	NA
SUD-RSD-2: Program will submit SUDS RSD Report of Client Connection to SUD Services monthly to DPH by the 15th of the following month.	Process	Residential Step-Down Only	SUDS RSD Report of Client Connection to SUD Services or Internal Tracking Document	BHS Policy DHCS	NA

FY 2024–25 Substance Use Services – CYF Outpatient Performance Measures

Indicator	Type of Objective	Client Inclusion Criteria	Data Source / Compliance	Source of Requirement	Report Availability for Providers
CYF-SA-OP-1: At least 60% of clients will have successfully completed treatment or will have left before completion with satisfactory progress as measured by discharge codes.	Outcome	Clients discharged in FY 24-25	CalOMS Discharge Status Field	Affordable Care Act (ACA)	CalOMS Discharge Status Report
CYF-SA-OP-2: 100% of initial requests for services (phone and walk-ins) will be recorded in the Avatar Timely Access Log.	Compliance	All initial requests for services, from new (non-registered) clients, or clients registered in Avatar w/o an open episode in program	1. Avatar No. of entries recorded in Timely Access Log should be > No. of new episodes opened in FY 24-25 2. CYF SUD Program Manager	BHS Policy/DCHS	Timely Access Report (Program) Avatar Report
CYF-SA-OP-3: 100% of clients must be offered an appointment within 10 business days of the initial request for services.	Compliance	All clients with non-urgent needs opening an episode with the provider	Timely Access Log records, extended wait times for appt documented via attestation in Avatar Timely Access Log	BHS Policy/DCHS	Timely Access Report (Program) Avatar Report
CYF-SA-OP-4: 100% of clients in treatment will have a Discharge Summary & discharge diagnosis completed no later than 30 days after episode closing.	Process	All clients whose case has been opened for more than 30 days after completion of the assessment (initial or annual).	Avatar. BOCC calculates	BHS Policy/DCHS	AVATAR Discharge Report
CYF-SUD-OP-5: 100% of clients admitted in FY 24-25 will have an accepted Cal-OMS Admissions by DHCS.	Process	Clients admitted during FY 24-25	Cal-OMS Accept and Reject Report	BHS Policy/DHCS	Avatar: CalOMS Admission Errors by Program Report DHCS: Accept and Reject Report
CYF-SUD-OP-6: 100% of clients discharged during FY24-25 will have the CalOMS Discharge Status field completed.	Process	Clients discharged during FY24-25	CalOMS Discharge Status Field	BHS Policy/DHCS	CalOMS Discharge Timely Status Avatar Report
CYF-SUD-OP-7: No more than 40% of clients will be coded as CalOMS Administrative Discharge during FY24-25. NOTE: Administrative discharge codes "4" and "6" only used when client interview not possible and full set of CalOMS items cannot be completed	Process	Applicable to all CalOMS programs with clients discharged in FY24-25	CalOMS Discharge Status Field	BHS Policy/DHCS	CalOMS Administrative Discharge Status Report Avatar Report

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FY 2024–25 Substance Use Services – CYF Prevention Performance Objectives

Indicator	Type of Objective	Client Inclusion Criteria	Data Source / Compliance	Source of Requirement	Report Availability for Providers
CYF-SAPP-1: Program will achieve positive program effect, as measured through the Ahearn Green Evaluation, in the parent cluster scale.	Outcome	* Parents/Caregivers attending 13th or 14th session	Program Sign-in/Attendance sheets; Admissible Retro-Post tests administered at 13th session; Ahearn Green Associates will provide the analyzed data and results to SOC, which will provide the data to BOCC	SUBG/ARPA	Outcome Evaluation Report from Ahearn Green Associates
CYF-SAPP-2: Program will achieve positive program effect, as measured through the Ahearn Green Evaluation, in the child cluster scale.	Outcome	* Parents/Caregivers attending 13th or 14th session	Program Sign-in/Attendance sheets; Admissible Retro-Post tests administered at 13th session; Ahearn Green Associates will provide the analyzed data and results to SOC, which will provide the data to BOCC	SUBG/ARPA	Outcome Evaluation Report from Ahearn Green Associates
CYF-SAPP-3: Program will achieve positive program effect, as measured through the Ahearn Green Evaluation, in the family cluster scale.	Outcome	* Parents/Caregivers attending 13th or 14th session	Program Sign-in/Attendance sheets; Admissible Retro-Post tests administered at 13th session; Ahearn Green Associates will provide the analyzed data and results to SOC, which will provide the data to BOCC	SUBG/ARPA	Outcome Evaluation Report from Ahearn Green Associates
CYF-SAPP-4: Agencies will meet 60% fidelity to the evidenced-based model Strengthening Families Program	Outcome	* Group Leaders and sessions that are observed. * Parents/Caregivers attending the observed session	Group Leader Surveys; Site visit observations and analysis; parent satisfaction surveys; Ahearn Green Associates will provide the analyzed data and results to SOC, which will provide the data to BOCC.	SUBG/ARPA	Fidelity Evaluation Report from Ahearn Green Associates
CYF-SAPP-5: SFP will graduate 1 cycle of 8-12 unduplicated families with elementary school children	Compliance	*Elementary school children and their Parents/Caregivers * 85% attendance rate *Only Jamestown, Youth Leadership Institute, Urban YMCA, & JCYC	Program Sign-in/Attendance sheets. Annual report submitted to SOC Program Manager. Program Data submitted to State database ECCO. SOC Program Manager will provide the analyzed data and results to BOCC	SUBG/ARPA	N/A
CYF-SAPP-6: SFP will graduate 1 cycle of 8-12 unduplicated families with middle school youth	Compliance	*Middle school youth and their Parents/Caregivers * 85% attendance rate *Only Jamestown, Youth Leadership Institute, Urban YMCA	Program Sign-in/Attendance sheets. Annual report submitted to SOC Program Manager. Program Data submitted to State database ECCO. SOC Program Manager will provide the analyzed data and results to BOCC	SUBG	N/A
CYF-SAPP-7: SFP will graduate 2 cycles of 8-12 unduplicated families with elementary school children	Compliance	*Elementary school children and their Parents/Caregivers * 85% attendance rate *Only Horizons	Program Sign-in/Attendance sheets. Annual report submitted to SOC Program Manager. Program Data submitted to State database ECCO. SOC Program Manager will provide the analyzed data and results to BOCC	SUBG	N/A
CYF-SAPP-8: SFP will graduate 2 cycles of 8-12 unduplicated families with middle school age youth	Compliance	*Middle school youth and their Parents/Caregivers * 85% attendance rate *Only Horizons and JCYC	Program Sign-in/Attendance sheets. Annual report submitted to SOC Program Manager. Program Data submitted to State database ECCO. SOC Program Manager will provide the analyzed data and results to BOCC	SUBG	N/A
CYF-SAPP-9: SFP will graduate 1 cycle of 8-12 unduplicated families with elementary or middle school children	Compliance	*Elementary or Middle school youth and their Parents/Caregivers * 85% attendance rate * All Programs	Program Sign-in/Attendance sheets. Annual report submitted to SOC Program Manager. Program Data submitted to State database ECCO. SOC Program Manager will provide the analyzed data and results to BOCC	SUBG	N/A
CYF-SAPP-10: SFP will graduate 1 cycle of 8-12 unduplicated families with high school children	Compliance	*High School youth and their Parents/Caregivers * 85% attendance rate * JCYC	Program Sign-in/Attendance sheets. Annual report submitted to SOC Program Manager. Program Data submitted to State database ECCO. SOC Program Manager will provide the analyzed data and results to BOCC	ARPA	N/A
CYF-SAPP-11: YMCA will enroll 10 unduplicated parents/caregivers to the SFP outreach pilot program	Compliance	* Only applies to Urban YMCA	Program Sign-in/Attendance sheets. Annual report submitted to SOC Program Manager. Program Data submitted to State database ECCO. SOC Program Manager will provide the analyzed data and results to BOCC	ARPA	N/A
CYF-SAPP-12: 100% of Youth graduates of the CMCA program will show 80% improvement on retro-post tests	Compliance	*High school youth *85% attendance rate * All programs	Program Sign-in/Attendance Sheet; admissible CMCA Retro-Posttests administered at end of programming. Youth Leadership Institute will provide analyzed data and results to SOC, which will provide the data to BOCC	SUBG	Annual Evaluation Report from Youth Leadership Institute
CYF-SAPP-13: CMCA program will graduate 20 unduplicated high school youth	Outcome	*High school youth *85% attendance rate *only applies to Jamestown, YMCA Urban Services & Youth Leadership Institute	Program Sign-in/Attendance sheets. Annual report submitted to SOC Program Manager. Program Data submitted to State database ECCO. SOC Program Manager will provide the analyzed data and results to BOCC	SUBG	N/A
CYF-SAPP-14: CMCA program will graduate 30 unduplicated high school youth	Compliance	* High school youth * 85% attendance rate *only applies to Horizons & JCYC	Program Sign-in/Attendance sheets. Annual report submitted to SOC Program Manager. Program Data submitted to State database ECCO. SOC Program Manager will provide the analyzed data and results	SUBG	N/A
CYF-SAPP-15: 100% of DPH Youth Alcohol Prevention Coalition graduates will show 80% improvement on retro-posttests	Outcome	* High school youth who have graduated from prior year CMCA Program * 85% attendance rate * All programs	Program Sign-in/Attendance Sheet; admissible CMCA Retro-Posttests administered at end of programming. Youth Leadership Institute will provide analyzed data and results to SOC, which will provide the data to BOCC	SUBG	Annual Evaluation Report from Youth Leadership Institute
CYF-SAPP-16: DPH Youth Alcohol Prevention Coalition will graduate 3 high school youth.	Compliance	* High school youth who have graduated from prior year CMCA Program * 85% attendance rate * All programs	Program Sign-in/Attendance sheets. Annual report submitted to SOC Program Manager. Program Data submitted to State database ECCO. SOC Program Manager will provide the analyzed data and results to BOCC	SUBG	N/A
CYF-SAPP-17: 100% of Children graduates of the Botvin Life Skills Training will show an 80% improvement between pre- and post-tests.	Outcome	* 85% attendance rate * All programs	Program Sign-in/Attendance sheets; admissible Pre-test & Post-test administered at enrollment & graduation to SOC, which will analyze the data and provide the results to BOCC.	SUBG/ARPA	N/A

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FY 2024–25 Substance Use Services – CYF Prevention Performance Objectives

CYF-SAPP-18: Botvin Life Skills Training will graduate 48 unduplicated youth from elementary school	Compliance	* Elementary School children * 85% attendance rate *only applies to Youth Leadership Institute and YMCA	Program Sign-in/Attendance sheets. Annual report submitted to SOC Program Manager. Program Data submitted to State database ECCO. SOC Program Manager will provide the analyzed data and results to BOCC	SUBG/ARPA	N/A
CYF-SAPP-19: Botvin Life Skills Training will graduate 72 unduplicated youth from elementary school	Compliance	* Elementary School children * 85% attendance rate *only applies to Horizons	Program Sign-in/Attendance sheets. Annual report submitted to SOC Program Manager. Program Data submitted to State database ECCO. SOC Program Manager will provide the analyzed data and results to BOCC	SUBG/ARPA	N/A
CYF-SAPP-20: Botvin Life Skills Training will graduate 96 unduplicated youth from elementary school	Compliance	* Elementary School Children * 85% attendance rate *only applies Jamestown	Program Sign-in/Attendance sheets. Annual report submitted to SOC Program Manager. Program Data submitted to State database ECCO. SOC Program Manager will provide the analyzed data and results to BOCC	SUBG/ARPA	N/A
CYF-SAPP-21: Botvin Life Skills Training will graduate 108 unduplicated youth from elementary school	Compliance	* Elementary School children * 85% attendance rate *only applies to JCYC	Program Sign-in/Attendance sheets. Annual report submitted to SOC Program Manager. Program Data submitted to State database ECCO. SOC Program Manager will provide the analyzed data and results to BOCC	SUBG/ARPA	N/A
CYF-SAPP-22: Botvin Life Skills Training will graduate 24 unduplicated youth from middle school	Compliance	* Middle School Children * 85% attendance rate * Only applies to Horizons and Jamestown	Program Sign-in/Attendance sheets. Annual report submitted to SOC Program Manager. Program Data submitted to State database ECCO. SOC Program Manager will provide the analyzed data and results to BOCC	SUBG/ARPA	N/A
CYF-SAPP-23: Botvin Life Skills Training will graduate 48 unduplicated youth from middle school	Compliance	* Middle School Children * 85% attendance rate * Only applies to JCYC and YMCA	Program Sign-in/Attendance sheets. Annual report submitted to SOC Program Manager. Program Data submitted to State database ECCO. SOC Program Manager will provide the analyzed data and results to BOCC	SUBG/ARPA	N/A
CYF-SAPP-24: Botvin Life Skills Training will graduate 24 unduplicated youth from high school	Compliance	* High School Children * 85% attendance rate * Only applies to YLI and Horizons	Program Sign-in/Attendance sheets. Annual report submitted to SOC Program Manager. Program Data submitted to State database ECCO. SOC Program Manager will provide the analyzed data and results to BOCC	SUBG/ARPA	N/A

FY 2024–25 Substance Use Services – Individualized Performance Objectives

Indicator	Type of Objective	Client Inclusion Criteria	Data Source / Compliance	Source of Requirement	Report Availability for Providers
Community Forward SF: A Women's Place, AWP Drop-In & Over Night Partial Day (ONPD) SA Funded Services at AWP, AWP Shelter and AWP Drop-In					
1. 85% of clients who access the Drop-In Center will have contact with a Case Manager/Peer Counselor who will initiate a needs assessment.	Process	Based upon an annual unduplicated client (UDC) count in FY24-25	Sign-in sheets, Peer Counselor logs, Case Manager logs & client files; performance tracked quarterly for SOC Program Manager; contractor prepares Annual Summary of achievement for AOA Program Manager. Program must have program data ready at the time of BOCC site visit.	BHS	N/A
2. 20% of clients accessing the Drop-In Center will be placed in AWP's Shelter Case Management, Transitional Housing, HIV Transitional Housing or Substance Abuse Program provided by CATS or other qualified service agencies.	Process	Based upon an annual UDC count in FY24-25	Sign-in sheets, Peer Counselor logs, Case Manager logs & client files; performance tracked quarterly for SOC Program Manager; contractor prepares Annual Summary of achievement for AOA Program Manager and BOCC. Program must have program data ready at the time of BOCC site visit.	BHS	N/A
City College of San Francisco Drug & Alcohol Studies Program					

FY 2024–25 Substance Use Services – Individualized Performance Objectives

1. By June 30, 2025, ARC will outreach and recruit 50 new student for the HLTH 100 cohort class, ARC website and events, listservs, and community referrals as is evidence from contact records and registration applications to CCSF	Process	All BHS Cohort students in FY24-25	Program documentation of communication with students & Peer Care Managers; contractor prepares Annual Summary of achievement for AOA Program Manager and BOCC. Program must have program data ready at the time of BOCC site visit.	BHS-AOA Admin	N/A
2. By June 30, 2025, 35 students will be engaged and enroll into HLTH 100, as evidenced by student enrollment census sheets kept in locked files.	Process	All BHS Cohort students in FY24-25	Program documentation of communication with students & Peer Care Managers; contractor prepares Annual Summary of achievement for AOA Program Manager and BOCC. Program must have program data ready at the time of BOCC site visit.	BHS-AOA Admin	N/A
3. By June 30, 2025, 80% (20 of 25) students will successfully complete the program requirements of the first three courses (HLTH 100, HLTH 70, HLTH 49), as evidenced by Argos tracking system.	Process	All BHS Cohort students in FY24-25	Program documentation of communication with students & Peer Care Managers; contractor prepares Annual Summary of achievement for AOA Program Manager and BOCC. Program must have program data ready at the time of BOCC site visit.	BHS-AOA Admin	N/A

4. By June 30, 2025, 80% (25 of 25) of ARC students will successfully complete their internship fieldwork (250 hours over 2 semesters), as evidenced by the program's internship records and timesheets.	Process	All BHS Cohort students in FY23-24	Program documentation of communication with students & Peer Care Managers; contractor prepares Annual Summary of achievement for AOA Program Manager and BOCC. Program must have program data ready at the time of BOCC site visit.	BHS-AOA Admin	N/A
5. By June 30, 2025, 80% (25 of 25) of ARC students will be eligible to petitions for their CCSF, ARC certificate as is evidenced by certificate application submissions and Argos student tracking system.	Process	All BHS Cohort students in FY23-24	Program documentation of communication with students & Peer Care Managers; contractor prepares Annual Summary of achievement for AOA Program Manager and BOCC. Program must have program data ready at the time of BOCC site visit.	BHS-AOA Admin	N/A
6. By June 30, 2025, one in person ARC course will be developed as an online/hybrid course.	Process	All BHS Cohort students in FY24-25	Program documentation of communication with students & Peer Care Managers; contractor prepares Annual Summary of achievement for AOA Program Manager and BOCC. Program must have program data ready at the time of BOCC site visit.	BHS-AOA Admin	N/A
San Francisco AIDS Foundation (SFAF) / Stonewall Program - Positive Reinforcement Opportunity Project (PROP)					

FY 2024–25 Substance Use Services – Individualized Performance Objectives

1. 70% of clients who complete at least 8 weeks of the program "agree" that they learned new skills to address their substance use goals while enrolled in the PROP program.	Outcome	Clients who have completed at least 8 weeks of the program.	Self-Report Exit Survey. Clients who "agree" with this item. Contractor offers survey to participants 8 to 10 weeks into program, compiles data and prepares Annual Summary for AOA Program Manager and BOCC. Program must have program data ready at the time of BOCC site visit.	BHS	N/A
2. 60% of clients who complete at least 8 weeks of the program "agree" that they either stopped or reduced their use of stimulants (methamphetamine/cocaine) while in the PROP program.	Outcome	Clients who have completed at least 8 weeks of the program.	Self-Report Exit Survey. Clients who "agree" with this item. Contractor offers survey to participants 8 to 10 weeks into program, compiles data and prepares Annual Summary for AOA Program Manager and BOCC. Program must have program data ready at the time of BOCC site visit.	BHS	N/A
3. 90% of the clients who self-report having stopped or reduced their use of stimulants (from question 2), will have negative U/A toxicology results or clinical notes that will be verified by the PROP Program Director validating the reduction or abstinence in the use of stimulants.	Outcome	Clients who have completed at least 8 weeks of the program who report having stopped or reduced stimulant use on their Exit Survey.	Program Director review of urine toxicology screen results (UAs) and clinical notes from each visit. Contractor offers survey to participants 8 to 10 weeks into program, compiles data and prepares Annual Summary for AOA Program Manager and BOCC. Program must have program data ready at the time of BOCC site visit.	BHS	N/A
The Salvation Army Harbor Lights					

FY 2024–25 Substance Use Services – Individualized Performance Objectives

1. Per our contract, by the end of the fiscal year, The Salvation Army (TSA) will have enrolled 30 individuals in residential treatment, and 60 individuals in RWS (detox) as measured by program enrollment data documented between APD and SA and stored in Avatar.	Process	All program clients	Contractor prepares Annual Summary of achievement for AOA Program Manager and BOCC. Program must have program data ready at the time of BOCC site visit.	BHS	N/A
2. By the end of the fiscal year, 50% of participants will have completed a minimum of 180 days of residential treatment as measured by program enrollment and length of treatment data documented by APD and TSA and stored in Avatar and/or Tracking Log.	Process	All program clients	Contractor prepares Annual Summary of achievement for AOA Program Manager and BOCC. Program must have program data ready at the time of BOCC site visit.	BHS	N/A
3. By the end of the fiscal year, TSA will have achieved a 70% occupancy rate in their residential program that will be maintained throughout the project, as measured by program enrollment data documented APD and TSA and stored in Avatar and/or Tracking Log.	Process	All program clients	Contractor prepares Annual Summary of achievement for AOA Program Manager and BOCC. Program must have program data ready at the time of BOCC site visit.	BHS	N/A
4. Participants enrolled in treatment at The Salvation Army, for fiscal year 24-25	Process	All program clients	Contractor prepares Annual Summary of achievement for AOA Program Manager and BOCC. Program must have program data ready at the time of BOCC site visit.	BHS	N/A
The Salvation Army - STARR					

FY 2024–25 Substance Use Services – Individualized Performance Objectives

1. Maintain 90% occupancy rate for withdrawal management/residential treatment beds.	Process	All clients with an episode opened in FY 24-25	Avatar Episode	STARR Grant	Batch File Episode Report
2. 50% of participants enrolled in withdrawal management will successfully complete their treatment by meeting their individualized treatment goals.	Process	All clients with an episode opened in FY 24-25	Salvation Army and HTA Data Collection	STARR Grant	N/A
UCSF Citywide ICM SUD Engagement - 3832ANC					
1. 20% of clients admitted FY24-25 with ED visits in 3 months prior to opening will have fewer ED visits in subsequent 3 months.	Outcome	Clients admitted to the program during FY 23-24	Contractor prepares Annual Summary of achievement for AOA Program Manager and BOCC. Program must have program data ready at the time of BOCC site visit.	BHS - SUD Admin	Provider pulls from Epic or other databases.
2. 60% clients who have been placed in housing or shelter in FY 24-25, will maintain good standing with shelter or housing for 14 consecutive days.	Outcome	Objective not rated if this is fewer than 5 clients.	Contractor prepares Annual Summary of achievement for AOA Program Manager and BOCC. Program must have program data ready at the time of BOCC site visit.	BHS - SUD Admin	Provider outcomes database.
3. 60% of clients will attend one or more outpatient medical visits.	Outcome	All UDC counted in FY23-24	Contractor prepares Annual Summary of achievement for AOA Program Manager and BOCC. Program must have program data ready at the time of BOCC site visit.	BHS - SUD Admin	Provider pulls from Epic or other databases.
RAMS - Children's Wellness Center (Also listed under CYF SOC)					
1. RAMS will screen 100% of referred youth for Substance Use	Compliance	All completed referrals	Contractor provides quarterly updates to CYF SUD Program Manager, who will provide analyzed data and results to BOCC.	BHS - CYF SFUSD	N/A

2. RAMS will provide early intervention services for 100% youth identified as having Substance use issues	Compliance	All open cases identified with a SUD need	Contractor provides quarterly updates to CYF SUD Program Manager, who will provide analyzed data and results to BOCC.	BHS - CYF SFUSD	N/A
3. Schedule at least one training to school staff on substance use related topic	Compliance	N/A	Contractor provides quarterly updates to CYF SUD Program Manager, who will provide analyzed data and results to BOCC.	BHS - CYF SFUSD	N/A
4. RAMS will refer 100% of youth needing services beyond early intervention to SUD SOC. In cases families decline, there needs to be a record of declination.	Compliance	All completed referrals	Contractor provides quarterly updates to CYF SUD Program Manager, who will provide analyzed data and results to BOCC.	BHS - CYF SFUSD	N/A
Youth Leadership Institute (YLI)					
1. YLI will provide a minimum of one day official CMCA training on the CMCA model to other CYF prevention provider agencies	Compliance	All CYF Prevention Providers (Horizons Unlimited, Jamestown Community Center, JCYC, Youth Leadership Institute, YMCA, and SEADC)	Program Sign-in/Attendance sheets. SOC Program Manager will provide the analyzed data and results to BOCC.	SUD CYF	N/A
2. YLI will create and provide an adult/youth leadership activities curriculum for CMCA program consistent with the county's associated strategic objectives	Compliance	All CYF Prevention Providers (Horizons Unlimited, Jamestown Community Center, JCYC, Youth Leadership Institute, YMCA, and SEADC)	Copy of activity guide, proof of activity guide being shared with the prevention agencies. SOC Program Manager will confirm completion to BOCC.	SUD CYF	N/A

3. YLI will create and provide an adult/youth leadership activities curriculum for YAPC program consistent with the county's associated strategic objectives	Compliance	All CYF Prevention Providers (Horizons Unlimited, Jamestown Community Center, JCYC, Youth Leadership Institute, YMCA, and SEADC)	Copy of activity guide, proof of activity guide being shared with the prevention agencies. SOC Program Manager will confirm completion to BOCC.	SUD CYF	N/A
4. YLI will offer technical assistance and coaching on CMCA and YAPC models to CYF prevention provider agencies	Compliance	All CYF Prevention Providers (Horizons Unlimited, Jamestown Community Center, JCYC, Youth Leadership Institute, YMCA, and SEADC)	Attendance sheets, evaluation surveys, minutes. SOC Program Manager will verify and provide results to BOCC.	SUD CYF	N/A
5. YLI will conduct CMCA model fidelity site-visits with each CYF prevention provider agency to ensure CMCA framework is done to fidelity	Compliance	All CYF Prevention Providers (Horizons Unlimited, Jamestown Community Center, JCYC, Youth Leadership Institute, YMCA, and SEADC)	Reports on model fidelity site-visits. SOC Program Manager will confirm completion to BOCC.	SUD CYF	Model Fidelity Site-Visit report from Youth Leadership Institute
6. 100% of the YLI formal training sessions will include a satisfaction survey	Outcome	All CYF Prevention Providers (Horizons Unlimited, Jamestown Community Center, JCYC, Youth Leadership Institute, YMCA, and SEADC)	Evaluation/satisfaction surveys. SOC Program Manager will provide the analyzed data and results to BOCC.	SUD CYF	Satisfaction Report from Youth Leadership Institute
Westside Community Services SUD Clubhouse					

FY 2024–25 Substance Use Services – Individualized Performance Objectives

1. Number of unduplicated OTP clients who utilized the Clubhouse per month (1 UOS = 1 client)	Outcome	Clients seen at Westside Clubhouse in FY 24-25	Westside Clubhouse will track and share with SUD Program Manager monthly.	Individualized Performance Objective for Pilot Program	N/A
2. Number of visits per OTP client who utilized the Clubhouse per month, (1 UOS = 1 client visit to the Clubhouse)	Outcome	Clients seen at Westside Clubhouse in FY 24-25	Westside Clubhouse will track and share with SUD Program Manager monthly.	Individualized Performance Objective for Pilot Program	N/A
3. To provide a monthly calendar schedule of all activities for members of the Westside Clubhouse to SUD (SOC) Program Manager	Process	Clients seen at Westside Clubhouse in FY 24-25	Westside Clubhouse will track and share with SUD Program Manager monthly.	Individualized Performance Objective for Pilot Program	N/A
4. To provide interim and final results of Clubhouse member surveys to System to Care (SOC) Program Manager, organized separately for OTP clients and all Clubhouse members	Outcome	Clients seen at Westside Clubhouse in FY 24-25	Westside Clubhouse will track and share with SUD Program Manager quarterly.	Individualized Performance Objective for Pilot Program	N/A
CCSF Addiction and Recovery Counseling					

FY 2024–25 Substance Use Services – Individualized Performance Objectives

1. By June 30, 2025, Addiction and Recovery Counseling (ARC) staff will outreach and recruit 50 new student for the HLTH 100 cohort class, ARC website and events, listservs, and community referrals as is evidence from contact records and registration applications to CCSF	Process	Students outreach	CCSF ARC	DPH BHS SUD SOC; contractor prepares Annual Summary of achievement for SUD Program Manager and BOCC. Program must have program data ready at the time of BOCC site visit	N/A
2. By June 30, 2025, 35 students will be engaged and enroll into HLTH 100, as evidenced by student enrollment census sheets kept in locked files.	Outcome	Students enrolled into HLTH 100	CCSF ARC	DPH BHS SUD SOC; contractor prepares Annual Summary of achievement for SUD Program Manager and BOCC. Program must have program data ready at the time of BOCC site visit	N/A

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FY 2024–25 Substance Use Services – Individualized Performance Objectives

3. By June 30, 2025, 80% (20 of 25) students will successfully complete the program requirements of the first three courses (HLTH 100, HLTH 70, HLTH 49), as evidenced by Argos tracking system.	Outcome	Students enrolled in the ARC coursework	CCSF ARC	DPH BHS SUD SOC; contractor prepares Annual Summary of achievement for SUD Program Manager and BOCC. Program must have program data ready at the time of BOCC site visit	N/A
4. By June 30, 2025, 80% (20 of 25) of ARC students will successfully complete their internship fieldwork (250 hours over 2 semesters), as evidenced by the program's internship records and timesheets.	Outcome	Students enrolled in the ARC coursework	CCSF ARC	DPH BHS SUD SOC; contractor prepares Annual Summary of achievement for SUD Program Manager and BOCC. Program must have program data ready at the time of BOCC site visit	N/A

FY 2024–25 Substance Use Services – Individualized Performance Objectives

5. By June 30, 2025, 80% (20 of 25) of ARC students will be eligible to petitions for their CCSF, ARC certificate as is evidenced by certificate application submissions and Argos student tracking system.	Outcome	Students enrolled in the ARC coursework	CCSF ARC	DPH BHS SUD SOC; contractor prepares Annual Summary of achievement for SUD Program Manager and BOCC. Program must have program data ready at the time of BOCC site visit	N/A
6. By June 30, 2025, one in person ARC course will be developed as an online/hybrid course.	Outcome	N/A	CCSF ARC	DPH BHS SUD SOC; contractor prepares Annual Summary of achievement for SUD Program Manager and BOCC. Program must have program data ready at the time of BOCC site visit	N/A