Bidder Instructions

This appendix of the RFP contains detailed functional requirements for the systems desired by the California Department of Corrections & Rehabilitation (CDCR). The codes below have been used to indicate whether CDCR envisions the requirements to be part of the first release of the new solution or a future release.

Response Code	Definition
N (No)	The functionality identified in the requirement will not be provided.
Y (Yes)	Requirements will be met through transfer system, configuration, customization, modification or development.
T (Transfer System) **G (ConfiGuration)** **C (Customization)** **M (Modification)** **D (Developed)**	The Bidder shal inidcate how the requirement will be met by checking either: **T**ransfer System, Confi**G**uration, **C**ustomization, **M**odification or **D**eveloped: **T = Transfer** - The requirement will be met through an existing system that Bidder has implemented at another site or State. **G = Configuration** - The requirement will be met through changes to setting of tables, switches, and rules without modification to the source code. Include any changes to the existing or 'out of the box' workflow functionality. **C = Customization** - The requirement will be met through changes to the existing reports or programs. This would include custom code developed to perform specific functions or validations outside the standard code. Include the creation of a new report, query or workflow that does not exist within the current application. **M = Modification** - The requirement will be met through changes to the source code which would require analysis and re-application during updates, upgrades, or when applying software patches. **D = Developed** - The requirement will be met by developing new functionality and software code.
3 (Supplied by Third Party)	Requirement will be met by third-party software package and is included in this proposal. Note: In the Comments column, indicate the name of the proposed third-party software package and indicate the interface/integration services being proposed.
F (Future)	Requirement will be met by packaged software that is currently under development, in Beta test, or not yet released. Note: In the Comments column next to this response, indicate the date when requirement will be available for implementation. If possible, also indicate any additional costs.

Note:

1. An omitted response will be assumed to be the same as a response code of “N”.
2. Only one (1) response per requirement will be accepted.
3. Any deviation from the response codes will be re-coded at the discretion of the CDCR.

HCSS Functional Requirements

Category	Requirement #		Mandatory	Optional	Response Code					Comments
					No	Yes	T, G, C, M, D	3	F	
GENERAL SYSTEM REQUIREMENTS *Requests, Scheduling, Recording Encounters, Notifications, & Workflow functions.*										
System	***F-1***	The Health Care Scheduling System (HCSS) shall have the capability to track and manage all health-care related scheduling requests and appointments for offenders.	x							
	F-2	The system shall support the intent and functionality of all use cases in RFP Appendix E, Use Cases.	x							
Requests	***F-3***	The system shall be able to automatically generate standard appointment requests for mandated checkups based on business rules such as offender date of birth, initial arrival at an institution, transfer, Dental Priority Code, level of Mental Health Care, etc.	x							
	F-4	The system shall allow a user to manually enter appointment requests.	x							
	F-5	The system shall allow for users to request specific care providers, location, or clinic when requesting an appointment.	x							
	F-6	The system shall allow a user to indicate required, preferred, and optional attendees when requesting an appointment be scheduled.	x							
	F-7	The system shall allow a user to indicate a preferred time range for an appointment to be held, and the system shall warn if the selected range is outside of mandatory timelines.	x							
	F-8	The system shall allow for appointment requests to be part of a series (e.g., a series of 10 physical therapy requests following a treatment plan, blood sugar checks, blood pressure checks, etc).	x							
	F-9	The system shall allow the due date for a requested appointment to be automatically generated according to business rules, or to be entered at the requestor's option (with administrative authorization).	x							

	F-10	The system shall prioritize appointment requests based on business rules (per policies).	x							
	F-11	The system shall allow the user to indicate dependencies between multiple requests for procedures that require preliminary diagnostic services or other preparations.	x							
	F-12	The system shall allow a user to select a person, location, or clinic to route a request to.	x							
	F-13	The system shall allow a user to route a single appointment request to multiple scheduling queues. In the case of a request for services made by an offender, multiple issues are often placed on the same request form. The system must be able to split a request and generate a separate identical request to deliver to the scheduler for each care provider discipline, e.g., separate dental and medical requests. For reporting purposes, each request received by a different health care discipline (dental, mental, medical, etc.) must have a different identifier that can be reported as a separate request, but linked to the original single form submitted by the offender.	x							
	F-14	The system shall allow multiple requests to be linked to existing pending requests and/or scheduled appointments that have not occurred (to avoid duplicate request causing additional unnecessary appointments).	x							
	F-15	The system shall allow to cancel requests.	x							
	F-16	The system shall prompt the user to enter the reason for cancelling a request.	x							
	F-17	The system shall provide the ability to merge duplicate requests for service for a single offender. Duplicate requests should be linked in a way that preserves the historic record of multiple offender requests.	x							
Scheduling	***F-18***	The system shall allow requested appointments to be scheduled.	x							
	F-19	The system shall record a scheduling request for an offender (e.g. offender, event, date, time, duration, reason, location, transportation time needed, requestor, etc.)	x							
	F-20	The system shall notify the scheduler if the patient offender requires ADA needs / reasonable accommodations / extra resources.	x							
	F-21	The system shall identify and schedule required resources for each scheduled event (e.g. staff, facilities, equipment, ADA needs / reasonable accommodations / effective communication, and staff assistants).	x							

	F-22	The system shall allow an offender to be scheduled for a single appointment or a recurring appointment.	x							
	F-23	The system shall allow schedulers to process requests regardless of the schedulers or the appointment's location.	x							
	F-24	The system shall allow the scheduler to view request queues by location, clinic, type of appointment, provider requested and deadline.	x							
	F-25	The system shall allow for an appointment to be scheduled and viewed from multiple perspectives (care provider, clinic, offender calendar views, etc.).	x							
	F-26	The system shall be able to display a tentative schedule for user selected locations and timeframes. The schedule will remain tentative until it is locked in by the scheduler. The tentative schedule should be kept up to date and available.	x							
	F-27	The system shall be able to display all pending requests and scheduled appointments for an offender, clinic, provider, or location.	x							
	F-28	The system shall store multiple scheduled appointments for a single offender (there should be no limit to the number of scheduled events allowed per offender).	x							
	F-29	The system shall be able to schedule multiple offenders and/or multiple care providers to a single appointment or event.	x							
	F-30	The system shall allow the user to reschedule an individual appointment or groups of appointments (including full days, etc.)	x							
	F-31	The system shall have the capability to track the number of offenders scheduled to a group or block appointment and alert the scheduler if attendance reaches capacity.	x							
	F-32	The system shall suggest an appointment time length based upon offender custody level, type of appointment, other appointments occurring at the same location, and historic appointment times (by offender and appointment type).	x							
	F-33	The system shall be able to suggest appointment times based on user-selected criteria (type of appointment, specific care provider, time of day preferences, etc.).	x							
	F-34	The system shall notify the scheduler if the security or disability status of an offender may increase the duration of an appointment.	x							
	F-35	The system shall allow to add additional time to the standard time required for an appointment due to security or disability status of an offender.	x							

	F-36	The system shall be able to display all qualified care providers (e.g., not available, available, available after deadline).	x							
	F-37	The system shall be able to suggest care provider(s) based upon prior offender treatment history, relative provider location to offender, level of security required, and care provider availability.	x							
	F-38	The system shall allow for the scheduling of appointments beyond mandatory deadlines and allow for the entry of a reason code.	x							
	F-39	The system shall be able to indicate if an appointment is in conflict with another scheduled appointment and notify the appropriate scheduler.	x							
	F-40	The system shall track dependencies between appointments.	x							
	F-41	The system shall track sequence of appointments and alert the user if prerequisite for an appointment cannot be met.	x							
	F-42	The system shall allow for a conflict to be routed to appropriate administration for resolution.	x							
	F-43	The system shall have the capability to alert the scheduler if two offenders are scheduled to adjacent appointments and there might be a security issue.	x							
	F-44	The system shall be able to indicate if an appointment is in conflict with mandated timelines.	x							
	F-45	The system shall allow for the rescheduling of large time blocks of appointments to accommodate events such as lockdowns.	x							
	F-46	The system shall allow an authorized user to be able to suspend all scheduled appointments for an offender, care provider, location, or clinic for a set time (or indefinitely).	x							
	F-47	The system shall allow authorized users to cancel scheduled appointments.	x							
	F-48	The system shall prompt the user to enter the reason for cancelling a appointment.	x							
	F-49	The system shall suggest a priority designation (based upon pre-established business rules) for each appointment based on past history (e.g., by user, appointment, offender, clinic, etc.)	x							
	F-50	The system shall allow users to specify priority (based upon pre-established business rules) for appointments based on predefined priority codes.	x							

	F-51	The system shall be able to warn the user of urgent scheduled appointments being suspended or canceled. The user should be able to take the scheduling of an urgent medical issue off-line to ensure adequate care is provided to an offender regardless of lockdown or other schedule disruptions. The conclusion of user actions must be recorded in the system.	x							
	F-52	The system shall allow care providers to receive pending requests and suspended appointments transferred from other institutions or yards in order to select which requests and appointments to schedule and which to cancel (with selected reason codes).	x							
Encounter Recording	***F-53***	The system shall record whether scheduled events occurred (e.g. kept, rescinded, cancelled, rescheduled, refused, etc.)	x							
	F-54	The system shall allow a user to record an encounter after the scheduled appointment has taken place.	x							
	F-55	The system shall allow for the recording of unscheduled encounters between care providers and offenders (e.g., emergency treatment).	x							
	F-56	The system shall allow users to record the attendance of the care provider(s) and offender(s). (typically needed for large meetings and educational encounters).	x							
	F-57	The system shall allow users to record encounters with multiple offenders (e.g., a user should be able to record attendance in bulk, without having to go to each offender record).	x							
	F-58	The system shall allow users to report that required discussions took place with the offender when the user records the encounter.	x							
	F-59	The system shall prompt the user to input a reason codes when closing encounters	x							
	F-60	The system shall have the capability to record the start and end times of an encounter.	x							
	F-61	The system shall allow a user to create a new appointment request when recording that an encounter took place.	x							
	F-62	The system shall prompt a user recording a missed appointment to indicate if the appointment should be requested again with the same deadline date (to ensure mandatory deadlines are met).	x							

	F-63	The system shall prompt the provider to record that any enhanced communication services (interpreter, translator, etc. . .) has been provided. The user should be able to select the type of assistance provided for reporting purposes.	x							
	F-64	The system shall allow a user to create an appointment request linked to the information in a prior appointment (including due date) when recording that an encounter took place.	x							
	F-65	The system shall prompt a dental care provider to update and record the offender Dental Priority Code after each encounter (the system will support Dental Priority Codes).	x							
	F-66	The system shall be able to prompt users to complete the recording process for encounters that have occurred and not been recorded properly (e.g., encounters that have not been recorded after 3 days).	x							
Notifications	***F-67***	The system shall generate warnings, notifications and user prompts that are clearly stated in English.	x							
	F-68	The system shall be able to notify custody of missed offender appointments and generate reports.	x							
	F-69	The system shall be able to notify health care providers of the suspension, cancellation, or transfer of appointments and requests associated with offender events (transfers, lockdowns, court visits).	x							
	F-70	The system shall identify scheduling conflicts based on business rules, and generate warning notifications about any issues.	x							
	F-71	The system shall recommend scheduling alternatives based on business rules.	x							
	F-72	The system shall be able to warn users of impending due dates to ensure appointments are scheduled within mandatory deadlines.	x							
	F-73	The system shall be able to notify a care provider of impending offender transfer (within and between institutions).	x							
	F-74	The system shall be able to notify care providers of an offender's arrival at the institution, and prompt for appointments to be requested.	x							
	F-75	The system shall be able to notify schedulers of changes to their request pool workload.	x							
Workflow	***F-76***	The system shall be able to route requests, notifications, and alerts to users, request pools, and queues according to business rules.	x							

	F-77	The system shall allow for some requests to be routed through an approval process before scheduling.	x							
	F-78	Some appointments require other dependent appointments to be completed prior to the visit. The system shall have the capability for the scheduler to link these events in order to warn the scheduler if the preceding required events have not been completed.	x							
	F-79	The system shall track the scheduling and recording of dependent appointments. A scheduler should be notified if dependent appointments are incomplete before other affected appointments are due to occur. (e.g., an x-ray must be requested, scheduled, and complete before a doctor's appointment can be held).	x							
TRACKING *Providing informed reporting*										
General	***F-80***	The system shall maintain a record (e.g. audit trail) of all changes made to data in the system. This should be readily searchable by user ID or offender. This must include but is not limited to: - The user ID of the person who made the change - The date and time of the change - The information that was changed - The data before and after it was changed, and which screens were accessed and uses	x							
	F-81	The system shall be able to maintain a complete log of offender appointment history.	x							
	F-82	The system shall assign a unique number for each scheduled appointment and encounter and link the information to the unique offender number.	x							
	F-83	The system shall track all entries, changes, and deletions by date, time, and user name.	x							
	F-84	The system shall record the date, time, and the name of the user for all actions taken within the system (request, schedule, cancel, etc.).	x							
	F-85	The system shall record the date, time, and name of persons viewing appointment requests.	x							
	F-86	The system shall record the date, time, name of the care provider, and name of the user recording all encounters.	x							
	F-87	The system shall allow for a reason code to be linked to a user action (appointment cancellation, rescheduling, etc.).	x							
	F-88	The system shall allow for the selection of a reason code when a user records a missed appointment (e.g., "no show" due to Lockdown).	x							

	F-89	The system shall allow for the selection of a reason code when a user suspends or cancels a scheduled appointment.	x							
	F-90	The system shall be able to record the date, time, and name of the user who suspends or cancels an appointment.	x							
	F-91	The system shall allow a user to record the steps taken to resolve a scheduling conflict.	x							
	F-92	The system shall allow to report on attendance for group appointments (e.g. therapy sessions).	x							
	F-93	The system shall be able to report on offender encounters by care provider and report other care provider workload statistics.	x							
PLANNING & TRAINING TOOLS *For planning and training purposes, hypothetical scenarios and simulations provide users with the ability to more effectively perform their roles within the HCSS, as well as plan for upcoming events and workload. Users should be able to explore ways to optimize scheduling, efficiency, and unit performance regarding court-mandated guidelines and overall business goals.*										
General	***F-94***	The system shall allow for hypothetical scenarios and simulations to be performed and run at any level of depth (enterprise-wide, institution, clinic, treatment type, request queue, user selected requests, etc.).	x							
	F-95	The system shall allow hypothetical scenarios and simulations to be performed and run for any user determined timeframe (previous 2 months, current week, next 3 months, etc.).	x							
	F-96	The system shall allow users to perform hypothetical scheduling scenarios to optimize the schedule according to user determined criteria (e.g., having all chronic care appointments on Tuesday, or not having appointments after 3pm on Fridays).	x							
	F-97	The system shall allow hypothetical scenarios to use existing pending requests and scheduled appointments.	x							
	F-98	The system shall allow users to create fictitious requests, scheduled appointments, and request queues for hypothetical scenarios.	x							
	F-99	The system shall allow users to adjust existing asset and resource constraints for hypothetical scenarios.	x							

	F-100	If there is significant staff overtime on the tentative schedule, the system shall have the capability to generate a new schedule scenario based on user inputted criteria (e.g., eliminate overtime while maintaining deadlines, or only schedule critical offenders on Friday).	x							
	F-101	The system shall, for training purposes, allow hypothetical simulations to be run for any role within the system (requestor, scheduler, administrator) or any manual or automatic activity (scheduling, monitoring due dates, sending alerts, etc.).	x							
	F-102	The system shall allow for hypothetical simulations to be performed with existing real, or user created requests and scheduled appointments.	x							
	F-103	The system shall, in any scenario or simulation, clearly highlight situations involving overtime, missed mandated dead-lines, inappropriate offender combinations, etc.	x							
	F-104	The system shall include complete user documentation detailing the capabilities and functions of the proposed solution, in the form of an on-line user guide. This must describe how all end-user functions of the system are used, including functions reserved for supervisors and managers. Separate versions must be provided for different categories of users.	x							
	F-105	The system shall provide an on-line tutorial / user guide / help function to assist CDCR staff in learning how to perform job tasks, manage work flows, and use the functions and capabilities of the system.	x							
	F-106	The system shall provide on-line help with instructions for how to complete data fields that are incorrect or incomplete on a record.	x							
	F-107	The system shall provide on-line tutorial / user guide / help screens to the user based on what he or she is attempting to accomplish (as determined by the current screen, function, data field).	x							
ADMINISTRATION *System Wide & Clinical*										
System Wide	***F-108***	The system shall accommodate the need for management to assign individual users to single or multiple roles and to perform multiple tasks. They must be able to access the screens that best match the role they are playing or task they are performing at any given time.	x							
	F-109	The system administrator shall be able to create new roles and profiles.	x							

	F-110	The system shall provide authorized CDCR users with access to data and functions in the proposed solution by the user's role and profile.	x							
	F-111	The system shall be able to display a list of treatment locations for which an administrator is responsible.	x							
	F-112	The system shall have the ability to organize requests into request pools by health discipline, offender location, time of appointment, urgency, care provider, or any other request data.	x							
	F-113	The system shall allow administrators to change business rules and indicate a date for the change to take effect (e.g., mandated timelines may change for routine generated appointments).	x							
	F-114	The system shall allow to assign standard duration to individual types of appointments and shall allow the user to override the standard duration for individual appointments.	x							
	F-115	Business rules such as Dental Priority Code based action shall be able to be modified to stay current with the practice of health care in the field.	x							
Institution / Clinic	***F-116***	The system shall allow an administrator to designate blocks of time when appointments may be scheduled by provider, location, clinic, etc.	x							
	F-117	The system shall allow an administrator to designate the type of appointment allowed for scheduling during designated blocks of available time.	x							
	F-118	The system shall allow an administrator to indicate a maximum capacity (for both offenders and providers) for appointments occurring during designated time blocks.	x							
	F-119	The system shall allow an offender to be assigned to a coordinator/ scheduler to manage their requests.	x							
	F-120	The system shall be able to display a list of schedulers who have the appropriate authorization and skills to schedule appointments for any selected pool.	x							
	F-121	The system shall allow offenders to be assigned to special coordinators or schedulers or other logically constructed pools (e.g., assign requests to schedulers by type of discipline, or assign offenders to schedulers to manage all offender scheduling).	x							
	F-122	The system shall allow an administrator to assign pools of requests to be scheduled to specific schedulers.	x							
	F-123	The system shall allow a type or pool of requests to be assigned to one or multiple schedulers.	x							

	F-124	The system shall allow an Administrator to assign, de-assign, or re-assign multiple schedulers to a pool of requests.	x							
	F-125	The system shall provide the ability for administrators to view, monitor and re-assign work to other staff (groups or individuals).	x							
	F-126	The system shall allow for the de-assignment and re-assignment of offenders and request pools to specific schedulers.	x							
	F-127	The system shall allow for assignment of offender requests to a specific unit and/or staff member (e.g., case manager, coordinator) throughout the process based on business rules, including but not limited to: Priority (system-wide or unit specific), staff skill-set; and staff classification.	x							
	F-128	The system shall allow for an assigned Case Manager/Care Coordinator to be notified of calendar events for specific offenders.	x							
	F-129	The system shall be able to transfer pending requests and suspended appointments to other institutions.	x							
USER FUNCTIONALITY *Design, Usability, & Search, etc.*										
General	***F-130***	The system shall allow a request queue to be searched or sorted according to any request field (offender name , CDCR#, due date, location, clinic).	x							
	F-131	The system shall allow a user to view, sort, and filter all requests entered within a given timeframe for an offender.	x							
	F-132	The system shall be able to display requests in a queue based upon request details or offender demographics (location, type of appointment, offender age, physical disability, etc.).	x							
	F-133	The system shall allow for the user to rank items in a queue (by care urgency, due date, or user entered ranking) and sort accordingly.	x							
	F-134	The system shall allow users to search and sort offender records by CDCR#, offender name, offender location, and assigned care provider.	x							
	F-135	The system shall provide partial text search ability (or fuzzy search).	x							
	F-136	The system shall allow the user to search SOMS for identified offenders and import the offender profile for scheduling purposes.	x							

	F-137	The system shall allow multiple individuals to view but not update offender specific scheduling information at the same time.	x							
	F-138	The system shall allow a health care services request to be assigned to staff in different business units concurrently, such as an intake audit by case records and initial classification workup by a counselor, happening at the same time.	x							
	F-139	The system shall allow a user to manually drag and drop appointments on the tentative schedule and have the system generate a new schedule around the user's changes.	x							
	F-140	The system shall allow users to overide system calculated data, but require the selection of an approved reason for the overide.	x							
	F-141	The system shall have the capability to print offender schedule information.	x							
	F-142	The system shall be able to export or allow extraction of calendar data by offender, clinic, care provider, etc., but HCSS is not anticipated to guarantee data will remain unchanged after export.	x							
	F-143	The system shall edit and validate individual field values to ensure that only valid data is entered. Validation options include, but are not limited to the following: Field type (e.g., numeric, alpha, required); Validity (e.g., table look-up, data look-up); relational edits (e.g., editing relationships between fields); Field values (e.g., acceptable range).	x							
	F-144	The system shall be able to display an offender's disability/language/special needs status to notify appropriate personnel of offender needs.	x							
	F-145	The system shall provide screens customized by job function or task. These screens should present the information, layout, options, and tools applicable to the particular job function or task, and should be the same for all users performing that function or task.	x							
	F-146	When recording an encounter that has occurred, the system shall be able to auto-populate appointment request information for any follow-up appointment requests.	x							
	F-147	The system shall provide ready access to common productivity tools and job aids including: Calendar; Quick reference telephone number list.	x							

	F-148	The system shall provide the ability for staff to view current offender schedules in a variety of formats (such as view offender schedules for a housing unit; assigned to a caseload, attending a particular event, special activities lists, etc.).	x							
	F-149	The system shall provide the capability for authorized CDCR personnel to select and modify multiple offender schedules (e.g. 500+ if necessary) and make the same change to all of them (e.g., rescheduling a whole day of appointments due to a lockdown, add notes).	x							
	F-150	The system shall allow appointments to be different lengths of time.	x							
	F-151	The system shall allow appointment classification based on type, duration, resources, discipline, etc.	x							
	F-152	System shall allow users to compile a "Favorites List" with the screens/ applications most commonly used by the individual user	x							
SYSTEM REQUIREMENTS *Security & Integration*										
General	***F-153***	The system must support the management of business rules within tables external to the source code. Additionally, the system must provide the flexibility for business rules to be changed by CDCR in accordance with policy or legal changes.	x							
	F-154	The system shall allow authorized CDCR business personnel without programming or database management knowledge to enter, update, review and apply the business rules used by the system and keep track of changes to all the business rules within tables external to the source code.	x							
	F-155	The system shall allow for the creation, modification, and deletion of Business Rules to inform system processes.	x							
	F-156	The system must be able to create reports that demonstrate compliance with court mandated metrics and CDCR policies and procedures+C182.	x							
	F-157	The system must be able to report reasons for non-compliance.	x							
	F-158	The system shall allow for the data entry of Health Care Services Request Forms into the system by schedulers with time stamping.	x							
	F-159	If multiple users are editing a scheduling record at the same time, the system shall be able to maintain data consistency and integrity.	x							

	F-160	The system shall refresh workflow queues automatically.	x							
Integration	***F-161***	The system shall integrate with the Strategic Offender Management System (SOMS) as stated in Appendix F, HCSS System Interfaces.	x							
	F-162	The system shall keep updated record information for offenders who exist in SOMS.	x							
	F-163	The system must have the capability to classify offenders (as "active" or "inactive" or released, out to court, etc.). Hence if a prisoner is released or is for some other reason inactive (e.g. sent to an out-of-state prison) historical records of the offender should be maintained but future appointments will no longer be automatically generated.	x							
	F-164	The system shall retrieve offender data within 24 hours from a variety of physical locations.	x							
	F-165	The system shall allow for the entry of requests from handheld devices or offender self-serve kiosks.	x							
	F-166	The system shall allow minor changes (e.g. font, color) to the layout of user screens.	x							
	F-167	In the case of outside contractors or providers, the system shall provide notifications to users via Microsoft Outlook or other acceptable forms of email.	x							
Security	***F-168***	The system shall support multiple user profiles and roles. Authorized business users must be able to define and change the functions, capabilities and data access rights associated with each role or profile.	x							
	F-169	The system shall store offender health care schedule data in a central enterprise-wide system.	x							
	F-170	The system shall provide the ability to perform system administration functions such as reference table maintenance and adding / removing users from the system.	x							
	F-171	The system shall encrypt data passing through the network.	x							
	F-172	The system shall encrypt data within the file system.	x							

HCSS Technical Requirements

Category	Requirement #		Mandatory	Optional	Response		Comments
					No	Yes	
Regulations	*T-1*	The proposed solution must conform with the sub-parts of Section 508 of the Americans with Disabilities Act (ADA) (http://www.section508.gov/) as determined by CDCR	X				
	T-2	The proposed solution must meet the requirements of applicable federal and State laws and regulations as determined by CDCR. (CCR Title 15 Section 3 [Penal Code] for adults, Health and Welfare Code for DJJ, Freedom of Information Act)	X				
	T-3	The proposed solution must comply with the 42 CFR § 160 -164 (HIPAA of 1996) to the extent and in the manner determined to be applicable by CDCR (business associate status)	X				
Hardware / Software	*T-4*	All hardware specifications must conform to the California Strategic Sourcing Initiative (CSSI) where possible. Details of supported hardware configurations can be found at http://www.pd.dgs.ca.gov/StratSourcing/default.htm	X				
	T-5	The Bidder shall provide a "productive use" warranty for a minimum of one year after system certification/acceptance by the CDCR. This warranty shall ensure that the application functions in a stable and dependable manner according to system design specifications.	X				
	T-6	The proposed solution shall operate within a Service Oriented Architecture (SOA) utilizing web services.	X				
	T-7	All hardware and software to be implemented must be scalable, highly available and meet the performance constraints as defined in other sections of the technical constraints .	X				
Database	*T-8*	The proposed solution must employ a relational database management system (RDBMS). Oracle and MS SQL are the preferred databases but other relational databases may be considered.	X				
	T-9	The system shall maintain a unique identifier for each encounter.	X				
	T-10	If multiple users are editing a record at the same time, the system shall be able to maintain data consistency and integrity.	X				

Housing the Solution	***T-11***	All environments (Production, QA/Staging, Development/Test, Training, Disaster Recovery) must be housed at a new CDCR data center specifically for the California Prison Health Care Services (either as Customer Owned Equipment Managed Service (COEMS) or mandated services); the exception is the initial development solution which may be housed in a vendor environment (this does not need to be in Sacramento).	X				
	T-12	The vendor shall list all environments and recommend additional environments (such as conversion) which are necessary for the solution to be successful.	X				
Network Support	***T-13***	The proposed solution must deliver services via the CDCR Wide Area Network.	X				
	T-14	The proposed solution must use Transmission Control Protocol/Internet Protocol (TCP/IP) for all network communication.	X				
	T-15	The proposed solution must use Secure Sockets Layer (SSL) protocol for all network communications (Both Level 1 & 2).	X				
Workstation Software	***T-16***	The proposed solution must support a browser based interface (Internet Explorer V6.0 or above) running on the current version of Microsoft Windows operating system as required by CDCR.		X			
System Administration	***T-17***	The system must support the management of business rules needed to comply with all applicable laws, CDCR policies, and operational procedures. Additionally, the system must provide the flexibility to adapt to changes in any of these areas.	X				
	T-18	The system shall allow authorized CDCR personnel without programming or database management knowledge to enter, update, review and apply the business rules used by the system and keep track of changes to all the business rules.	X				
	T-19	The system shall allow for the creation, modification, and deletion of Business Rules to inform system processes.	X				
	T-20	The system shall provide the ability to perform system administration functions such as reference table maintenance and adding / removing users from the system.	X				
	T-21	The system shall support multiple user profiles and roles. Authorized business users must be able to define and change the functions, capabilities and data access rights associated with each role or profile.	X				

User Interface	***T-22***	The proposed solution must provide a user-friendly color Graphical User Interface (GUI) for user presentation. The GUI must be consistent throughout the solution. Examples include but are not limited to: Standard naming conventions Pointing device support Pop-up windows Keyboard functionality Button navigation Drop down lists Auto fill Context sensitive help	X				
	T-23	The system shall allow for the future entry of requests from handheld devices or kiosks.		X			
Error and Exception Handling	***T-24***	The proposed solution must provide logging, reporting and accessing errors and exceptions.	X				
System Interfaces	***T-25***	The proposed solution must exchange data with the Strategic Offender Management System (SOMS) from CDCR as described in RFP Sections IV and VI as well as RFP Appendix F, HCSS System Interfaces. Data shall include the following: Offender Demographics (Name, CDCR ID, alias, DOB, gender, language) Offender Location (Reception Center, Yard, Housing Unit) Offender Classification Case Worker (location, phone number, email) Counselor (location, phone number, email) Date of arrival (day, month, year, time) Release Date (planned, last effective, last planned release date) Health Status (medical, dental, mental health, TB status, HIV status) Disability Status/Effective Communication (DDP Code, TABE Score, DPP Code, EC Need, Health Care Appliances) Transfer Date (day, month, year, time) Date and time of event (day, month, year, time) Event type (e.g. work, education, visitation, etc.) Event location (on-site, off-site) Planned Release/Parole Date (day, month, year, time) Release type Parole region Actual Release date (day, month, year, time) Appointment purpose (health care appointment) Priority Code Appointment time (day, month, year, time) Appointment location (yard, clinic, room, hospital, etc.) Special Assistance requirements	X				

	T-26	The proposed solution must exchange data with the SAP HR module of Business Information System (BIS) from CDCR as described in RFP Sections IV and VI as well as RFP Appendix F, HCSS System Interfaces. Data shall include the following: Provider name, demographics, employee ID, DOB, gender, ethnicity Proivider qualification, designation, specialty Provider certification type, description, expiration Provider location (institution, yard) Facility/asset name, asset type, maximum capacity, availability Facility/asset location (institution, yard, clinic) Contractor name, demographics, contractor ID, gender, ethnicity Contractor location (street address, state, zip code) Contractor qualifications, designation, specialty Contractor credential type, description, expiration Contract terms and conditions, availability, price, capacity Shift location (institution, yard, clinic) Shift staff demographics, name, employee ID, gender, ethnicity Shift schedule, day, start time, break time, end time, vacation, sick days Staff skills, certifications, competencies	**X**				
	T-27	The proposed solution must exchange data with the Clinical Data Repository as described in RFP Sections IV and VI as well as RFP Appendix F, HCSS System Interfaces. Data shall include the following: Inmate-patient, name, offender ID Appointment type, unique appointment ID, location, date, time, mandated deadline Care provider, name, employee ID, location Offender(s) show/no-show, care provider(s) show/no-show Reason code (missed appt. reason codes) Appointment type, unique appointment ID, location, date, time, mandated deadline Care provider, name, employee ID, location Treatment code DPC code, follow-up, reschedule, new event request	**X**				
	T-28	The proposed solution must comply with National Information Exchange Model (NIEM) Department of Justice standards for information exchange, where possible.		**X**			
	T-29	The proposed solution should include all applicable data elements in the NIEM standard.		**X**			
	T-30	In the case of outside contractors or providers, the system shall provide email notifications to users through an SMTP and POP3 interface .		**X**			
	T-31	The system shall be able to support HL7 v.2.4 or higher	**X**				
	T-32	The system shall integrate with the Enterprise Master Patient Index (EMPI) in CRD.	**X**				

	T-33	The system shall allow to export schedules.	X				
	T-34	The system shall allow users to import schedule form SOMS.	X				
	T-35	The proposed solution must be able to support XML interfaces.	X				
System Security Management	*T-36*	The proposed solution must support user authentication and authorization, per NIST 800-63.		X			
	T-37	The proposed solution must comply with CDCR security policies (provided in the Bidder's Library).	X				
	T-38	The proposed solution must support Federal Information Processing Standard (FIPS) 199 and 200.		X			
	T-39	The proposed solution must comply with FIPS 140-2 for Encryption		X			
	T-40	The proposed solution must support National Institute of Standards and Technology (NIST) 800-18 , 30 , 53, 53a.		X			
	T-41	The proposed solution must include security administration roles, such as security architect, security administrator, security analyst, delegated administrator.	X				
Availability	*T-42*	The proposed solution has an uptime of 20 hours a day, seven days a week.	X				
	T-43	The proposed solution has an uptime of 24 hours a day, seven days a week.		X			
	T-44	The proposed solution must be available no less than 99.99 percent of scheduled uptime in any calendar month and must support typical high availability solutions such as load balancing.	X				
	T-45	Routine maintenance must not impact online availability or performance.	X				
Performance	*T-46*	The proposed solution must provide the following user response times as measured over a period of one hour determined by CDCR: a) No more than two seconds ninety-five percent (95%) of the time for any transaction b) No more than five (5) seconds ninety-five percent (95%) of the time for any offender search.	X				
Capacity	*T-47*	The proposed solution must support the workload and user base described in RFP Sections III and IV.	X				
	T-48	The proposed solution must support an annual workload growth of 5%.	X				
Data Retention and Archive	*T-49*	The proposed solution must distinguish between active (related to incarcereated inmate) and inactive data (related to released inmate) and provide the ability to change the case from active status to inactive status and from inactive status back to active status.	X				
	T-50	The proposed solution must not allow inactive cases to deteriorate performance of active data.	X				

	T-51	The proposed solution must integrate with EMC storage.	X				
	T-52	The system must have archiving (inactive cases?) capability.	X				
Audits	*T-53*	The proposed solution must have the ability to provide an audit trail for all changes , additions and deletions to data (including operational and security data).	X				
Reports	*T-54*	The proposed solution must provide reports for all critical business functions, defined both as readable formatted reports for distribution on paper and/or alternate media, and data in a format that can be imported into standard Microsoft office tools.	X				
	T-55	The proposed solution must provide the ability for reports to be automatically generated and distributed on a periodic basis.	X				
	T-56	The proposed solution must generate ad-hoc reports on data contained within HCSS.	X				
	T-57	The proposed solution must provide drill down capability, providing summary information as well as the ability to drill down to the details associated with the summary information.	X				
	T-58	The proposed solution must provide option to save ad-hoc report criteria.	X				
	T-59	The proposed solution must provide drill-down reporting capability.	X				
	T-60	The proposed solution must be able to provide reports on requests and appointments againts all dimensions tracked.	X				
Single Sign On	*T-61*	The proposed solution must comply with the HL7 Clinical Context Object Workgroup (CCOW) standard		X			

HCSS Implementation Requirements

Category	Requirement #		Mandatory	Optional	Response		Comments
					No	Yes	
Project Management	***M-1***	The Contractor must employ, maintain, and execute a project management methodology that complies with the Project Management Institute standards or equivalent.	X				
	M-2	The Contractor must describe the project management approach and methodology to be used for all HCSS Project lifecycles.	X				
	M-3	The Contractor shall develop a Project Management Plan (PMP) conforming to to the Project Management Body of Knowledge. The scope of the PMP shall also incorporate the following component processes: - Schedule Management - Issues and Action Items - Cost Management - Staff Management - Communications Management - Configuration Management - Risk Management - Quality Management - Change Management	X				
	M-4	The Contractor shall develop a Project Charter.	X				
	M-5	The Contractor shall develop a Project Governance Plan.	X				
	M-6	The Contractor shall develop a Change Management Plan. The Change Management Plan must describe/use well-defined change management processes, including pre-defined migration processes for software releases, operating system upgrades, layered software upgrades, and hardware configuration changes.	X				
	M-7	Where available, the Contractor shall use CDCR templates for Project Management deliverables.	X				
	M-8	The Contractro shall develop a Communications Management Plan. The Communications Management Plan must describe participant's roles and responsibilities, internal communications, external communications, other communications and information management including communications protocols.	X				

	M-9	The Contractor shall establish an Issue and Action Item Process that must ensure that unanticipated issues, action items and tasks are assigned to a specific person for action and are tracked to resolution. The Issue and Action Item Process must document the following: - Issue description. - Issue priority. - Issue status (e.g., open, pending, under investigation, resolved). - Plan for resolution. - Individual responsible for resolution. - Targeted resolution date. - Actual resolution dates. - Resolution action.	**X**				
	M-10	Risks, issues, and actions must be entered into and tracked in the CDCR Clarity Program and Project Management System (PPMS).	**X**				
	M-11	All project management and tracking systems must utilize the CDCR PPMS, which will be made available to the Contractor for access.	**X**				
	M-12	The Contractor must provide project management documents (e.g., Project Management Plan, Project Schedule, Work Breakdown Structure, etc.) using Microsoft software products. The software version must be no less than a version still available on the common market and that is still supported by the manufacturer. CDCR will work with the vendor in approving specific versions to assure that the application is synchronized with CDCR's plans.	**X**				
	M-13	The Contractor shall advise CDCR and Contractor management of progress in meeting goals and schedules contained in the work plans. Weekly progress meetings attended by the Contractor and CDCR. These may include walkthroughs of selected deliverables as requested by CDCR staff.	**X**				
	M-14	The Contractor shall enter project status information into the CDCR Clarity PPMS on a weekly basis and formal status reports prepared monthly, for reporting at monthly Project Manager meetings.	**X**				
	M-15	The Contractor shall develop weekly progress reports. Weekly written progress reports, provided by the Contractor to CDCR one working day before each weekly meeting, and containing items to be discussed at the meeting, including: □ Progress of each task/activity. □ Action items and decisions from the previous meeting. □ Problems encountered, proposed resolutions, and projected completion dates for problem resolution □ Planned activities for the next two reporting periods. □ Status of contractually defined deliverables, milestones, and walkthroughs scheduled in the project schedule. □ Updating of information on a weekly basis in the CDCR enterprise Clarity project and portfolio management tool. □ Other information as needed (per Contractor or CDCR).	**X**				

	M-16	The Contractor shall develop monthly progress reports. The progress report shall include deliverables , milestones, walkthroughs, CDCR approvals, and lessons learned and shall be used by the Contractor and CDCR in measuring the Contractor's progress and performance. The report shall also contain: - Issues, problems, and corrective actions, steps, and assignments. - Risks and Mitigations. - Cost Variance reporting - Lessons Learned - Percentage complete - Resources and time required to completion	**X**				
	M-17	If the Contractor must substitute Key Position Staff dring the project, the Contractor must submit to the CDCR, in writing, the reason for the change and provide a completed Staff Experience Reference Form and resume for the substitute personnel. The CDCR will either approve or reject the substitution.	**X**				
	M-18	The Contractor must provide contract close-out plans and manage project close-out activities in accordance with the plan.	**X**				
Environment Installation and Configuration	***M-19***	The Contractor shall submit to CDCR as part of their proposal, specifications for all necessary hardware, software and tools for the five (5) HCSS system environments. The five (5) envrionments iclude: - Production - QA/Staging - Development/Test - Training - Disaster Recovery	**X**				
	M-20	The Contractor shall develop a technical infrastructure document which describes all of the hardware, system software and tools necessary for each of the five (5) HCSS system environments.	**X**				
	M-21	The Contractor shall develop an environment configuration manual that describes the environment installation and configuration necessary for each of the five (5) HCSS system environments.	**X**				
	M-22	The Contractor is responsible for installing and configuring all hardware, software and tools purchased under this Contract until Systems Acceptance for the five (5) HCSS system environments.	**X**				
	M-23	The Contractor is responsible for maintaining all hardware, software and tools purchased under this Contract until Systems Acceptance for the five (5) HCSS system environments.	**X**				
	M-24	The Contractor shall provide readable source code and object (executable) code and documentation for all functionality developed by the contractor, which shall be owned by the CDCR; licenses to readable source code and object (executable) code and documentation for all COTS functionality and escrow of source code for COTS.	**X**				
	M-25	The Contractor shall provide a data dictionary and data model for the HCSS.	**X**				

Business Process Change Management	***M-26***	The Contractor shall develop a Business Process Change Management Plan. The CDCR envisions significant process change during the development and implementation of HCSS. The HCSS project involves the implementation and integration of COTS components. The CDCR anticipates improvements to its business processes and the need to manage changes to its organization. The Contractor is required to provide plans for a Change Readiness Assessment, Gap Analysis, and Recommendations for Organizational and Process Changes.	X				
	M-27	The Contractor shall document the BPM acitivities and outcomes such as Change Readiness Assessment, Gap Analysis and Recommendations for Organizational and Process Changes	X				
Knowledge Transfer & Training	***M-28***	The Bidder shall describe the approach to knowledge transfer and training.	X				
	M-29	The Contractor shall develop (in cooperation with CDCR) a Knowledge Transfer and Training Plan to describe the approach for bringing managers, end users, and technical personnel to a familiar level of understanding with how the new system works and how it differs from the system being replaced. Should identify training on software development tools and Train-the-Trainer, training documentation necessary, Training Transition, User Training Plan, and Training Tools	X				
	M-30	The Knowledge Transfer and Training Plan shall address and describe, at a minimum: - Training goals/standards and the specific plan for training technical personnel and end users. - Strategy for providing training early in the project to allow the training goals to be implemented throughout the project life cycle. - Tasks, deliverables and resources necessary to complete the training effort and identify tools and documentation that shall be necessary to support proposed effort. - Types of training, the specific courses and course materials, the training approach for both technical personnel and end users, and how training effectiveness shall be measured and addressed. - Deliverables to support initial and ongoing training including user manuals, system manuals, and on-line help and training materials for technical/non-technical personnel. - Knowledge Transfer to enable CDCR personnel to operate, maintain, configure and modify the new systems including operation of the testing tools, supporting infrastructure, and security. - Metrics for tracking progress in achieving training and knowledge transfer objectives. - Reporting progress of training and knowledge transfer activities.	X				
	M-31	The Contractor shall provide train the trainer or end user training documentation (including user manuals, online content, reference cards, etc.).	X				

	M-32	The Contractor shall provide CDCR a training course outline for review and acceptance at least thirty (30) calendar days prior to the scheduled training.	X				
	M-33	The Contractor shall submit all training packages to CDCR for review and acceptance at least twenty-one (21) calendar days prior to the scheduled training.	X				
	M-34	The Contractor shall provide training manuals for all classroom training they provide.	X				
	M-35	The Contractor shall provide all training materials developed for the HCSS system to CDCR. Those materials shall become the property of CDCR and may be modified and duplicated by CDCR	X				
	M-36	The Contractor shall provide electronic copies of all training materials (end-user, technical, trainee and instructor) in a format that can be updated and printed by CDCR staff using software for which CDCR owns licenses.	X				
	M-37	The Contractor shall provide updated training documentation as necessary to incorporate new processes or functionality due to system releases, upgrades, or changes throughout the contract term.	X				
	M-38	The Contractor shall schedule all training during regular work hours as approved by the CDCR, unless the Contractor receives advance approval from CDCR for specific training at other times.	X				
	M-39	The Contractor shall provide instructions to the CDCR on Contractor tools and procedures used to support the Project.	X				
	M-40	The Contractor shall provide all training within the State of California.	X				
	M-41	The Contractor shall ensure that Contractor staff members are not assigned to train CDCR staff and work on critical path development tasks concurrently.	X				
	M-42	The Contractor shall provide end-user training documentation in written manuals, on compact disc, and online, as part of a help facility for the system.	X				
	M-43	The Contractor shall schedule staff training in a manner that is least disruptive to the normal business operations.	X				
	M-44	The Contractor shall assist CDCR in developing end-user training on the HCSS business application and system functionality. The Contractor shall provide end-user training for up to 80 CDCR field team trainers who will, in turn, train non-technical CDCR field staff on HCSS system functionality and business processes.	X				
	M-45	The Contractor shall provide end-user classroom training for all end-users up to a maximum of 15 training sessions.	X				
	M-46	The Contractor shall develop train-the-trainer training for up to 80 CDCR Staff.	X				
	M-47	The Contractor shall identify the number of staff necessary for maintenance and operations (M&O) of the solution as well as the skill sets necessary.	X				
	M-48	The Contractor shall develop and provide training for HCSS Technical Support Staff	X				

	M-49	For the duration of the contract, the Contractor shall continue to provide training to the CDCR technical staff if system upgrades have been installed and there is a change in system functionality.	X				
System Design, Development & Customization	***M-50***	CDCR utilizes a structured SDLC that is consistent with industry-standard best practices as well as CDCR requirements for information technology projects. The Contractor must use a structured SDLC process, including an iterative software development methodology and incremental deployment of functionality to the production environment. Includes software and database design, system configuration management plan and procedures, and user interface standards	X				
	M-51	The Contractor shall develop a Business Continuity Plan. The Business Continuity Plan shall at a minimum address: -Impact analysis (Business Impact Analysis, BIA) -Threat analysis -Definition of impact scenarios -Recovery requirement documentation	X				
	M-52	The Contractor shall develop a Systems Engineering Management Plan.	X				
	M-53	The Bidder must submit a narrative describing the design and development approach and methodology with their proposal.	X				
	M-54	All change requests cost estimates must include the use of a Cost Analysis tool.	X				
	M-55	The Contractor shall incorporate the design and development approach into a comprehensive Design and Development Plan (Software Development Plan).	X				
	M-56	The Contractor shall follow industry standards for all development work, including database naming and usage.	X				
	M-57	The Contractor shall provide CDCR access to the software components and documentation.	X				
	M-58	The Contractor may not use CDCR production system resources (data or source files), or data derived from the production system resources, off-site without authorization from CDCR.	X				
	M-59	The Contractor shall describe the overall testing approach and methodology used for the HCSS Project	X				
	M-60	The Contractor shall incorporate the testing approach into a comprehensive Test Plan . The Test Plan shall include the procedures for documenting the completion of each test phase, test scripts, test conditions, test cases, and test reports. Detailed Test Plans shall be created for the following: - Unit Testing - Functional Testing - Integration Testing - Security Testing - Regression Testing - Stress/Load Testing - Performance Testing	X				

	M-61	The Test Plan must, at a minimum, address the following areas: - Test philosophy (including objectives, required levels or types of testing, and basic strategy (developing, testing and release of major subsystems/components). - Procedures and approach to ensure the testing will satisfy specific objectives and demonstrate that the requirements are met. - Procedures and approach to ensure that each phase of the testing is complete, and how formal reports/debriefings will be conducted for each phase of testing. - Overview of testing facilities, environment and specific testing tools to be used. - Overview of processes and procedures that shall be used by the Bidder for releasing testing results and review of test results. - Process and procedures for tracking and reporting for results/variances/defects shall be tracked and reported. - CDCR resources required during the development lifecycle for component/UAT testing.	**X**				
	M-62	Testing and Development shall have their own environments, separate from Production. Testing or development shall not be performed in the production environment.	**X**				
	M-63	The Test Plan must further address the following areas: - Staff/resources. - Method for review of test cases and procedures. - Configuration management of the test environment.	**X**				
	M-64	The Test Plan must further address the following areas: - Describe User Acceptance Testing and User Sign-Off. - Plan and deliverables for interface testing - Plan and deliverables for security testing, including configuration and vulnerability testing - Plan and deliverables for performance testing - Plan and deliverables for availability and reliability testing (pilot testing). - Plan and deliverables for functional testing.	**X**				
	M-65	The Test Plan shall provide a detailed description of each test required to ensure that all of the system, interfaces, and components comply with the requirements and specifications.	**X**				
	M-66	The Contractor shall provide and use an automated testing tool for, at a minimum, stress/load and regression testing. The tool shall at minimum perform the test execution and generate the test reports.	**X**				
	M-67	The Contractor shall repeat the test lifecycle when a failure occurs at any stage of testing (e.g., a failure in Acceptance Testing that necessitates a code change will require the component to go back through Unit Testing, Integration Testing, and so forth).	**X**				
	M-68	The Contractor shall perform Full Lifecycle Testing throughout the duration of the project. This includes Unit, Integration/String, System, Operational (Stress/Load, Performance), and Regression Testing.	**X**				

	M-69	The Contractor shall be responsible for building test plans, executing test plans, and creating reports. CDCR will evaluate the Contractor test plans, and Contractor test results, and may validate the testing done by augmenting it with CDCR testing.	X				
	M-70	The Contractor shall document the testing tools, test configurations and related documentation.	X				
	M-71	The Contractor shall provide the CDCR with the test scripts, testresults and quality reports.	X				
	M-72	The Contractor shall provide staff to CDCR to answer questions and address any problems that may arise during testing conducted by CDCR.	X				
	M-73	The Contractor shall refine the test documents, procedures, and scripts throughout development and through full system acceptance to reflect the as-built design and current requirements.	X				
	M-74	The Contractor shall allow CDCR to run validation and testing software against externally facing Internet applications to help identify potential security issues, and must agree to repair any deficiencies found during this testing.	X				
	M-75	As Health Care events contain date and time-sensitive elements, the testing infrastructure must provide a method of altering and synchronizing the system date throughout each test phase. This requires the ability to change the system date and time in some scenarios.	X				
	M-76	The Contractor must develop a comprehensive Problem Resolution Management Plan that describes the approach to be taken in managing all problems discovered during any testing phase and in production.	X				
	M-77	The Contractor shall install and test a single Problem Resolution Tracking System that the Contractor and CDCR shall use collaboratively for the tracking of system defects, security, and system issues.	X				

	M-78	The Problem Resolution Tracking System must, at a minimum, include: - All defects in the solution identified during any testing phase or in production must be recorded, prioritized, tracked, and resolved in a timely manner. Each must be assigned a "Defect Level" based on the following definitions: + Critical - Results in a complete system outage and/or is detrimental to the majority of the development and/or testing efforts. There is no workaround + Serious - System functionality is degraded with severe adverse impact to the user and there is not an effective workaround + Moderate -System functionality is degraded with a moderate adverse impact to the user but there is an effective workaround. + Minor - No immediate adverse impact to the user. - The Contractor shall allow CDCR full access to the Problem Resolution Tracking System - The Problem Resolution Tracking System shall be designed in a manner to allow for the transfer of ownership to the CDCR following contract completion. - The processes and management of the Problem Resolution Tracking system shall be addressed as part of the Contractor Quality Management Plan. - The Contractor shall comply with the "Defect Level" approach as described above, including the requirement that HCSS Project Management shall designate the level of severity to all defects. Critical and serious defects (incidents) shall require remediation and retesting before the system enters production. Moderate and Minor defects shall be fixed and tested to CDCR's satisfaction prior to system acceptance.	X				
Implementation	***M-79***	The Contractor shall describe the implementation approach and methodology used for the HCSS Project.	X				
	M-80	The Contractor shall incorporate the implementation approach into a comprehensive Implementation Plan. CDCR requires incremental deliveries of functionality to the production environment. CDCR anticipates considerable collaboration with the Contractor in the plan's construction, with particular attention to high complexity components of the existing Offender Management Systems as well as the proposed solution.	X				

	M-81	The Implementation Plan must include information on technical challenges, deployment schedule phasing (both functionally and geographically) The Implementation Plan shall: • Deliver solutions that include a significant portion of the technical infrastructure early in the schedule, without compromising the quality or inherent security of the solution. This should also validate the design and architecture. • Expose technically challenging areas of the project as soon as possible. New external interfaces and data conversion being impacted by the new solution, should, where possible, be deployed early in the Project. • Deliver customized functionality to CDCR in incremental pieces that are in logical business application sequence. • Include a deployment schedule developed in cooperation with CDCR that ensures continuous, uninterrupted Health Care Scheduling support throughout the project.	**X**				
	M-82	The Contractor shall develop a Capacity Plan (in alignment with the new CDCR data center for the California Prison Health Care Services) to include, at minimum, the following areas: • A description of how system capacity and capacity requirements were calculated, including all formulas and calculations used in capacity planning for HCSS. • A description of how HCSS capacity requirements will be met. • How capacity issues will be managed for all components of the HCSS project. • Descriptions of how capacity utilization will be monitored and capacity thresholds will be established. • A description of corrective and escalation processes that will be used in the event any capacity thresholds are reached.	**X**				
	M-83	Disaster recovery requirements relative to the physical systems and planning for recovery from operational failures are not the responsibility of the Contractor. However, the Contractor's knowledge of the system solution will be helpful in CDCR's business continuity and disaster recovery planning. The Contractor shall develop an Operational Recovery Plan that addresses the following: • Areas of the HCSS system most susceptible to failure or disaster that would result in downtime. • Recommendations for system recovery processes, or steps to take in the event of a downtime event. • Recommendations for CDCR on how to comprehensively and effectively mitigate the risk of a downtime event. • Recommendations for securing the system during a period of emergency operation.	**X**				
	M-84	The Contractor shall describe the interface management approach and methodology used for the HCSS Project.	**X**				

	M-85	The Contractor shall incorporate the interface management approach into a comprehensive Interface Management Plan. The Interface Management Plan will be used by CDCR to document the plan for integrating the HCSS System with all systems internal and external to HCSS. The Interface Management Plan shall, at a minimum, address the following areas: • The approach to developing and managing internal and external system interfaces. • Technical tools that will be used for data transformation, transport and error recovery. • Tasks, deliverables and resources necessary to complete interface development and implementation. • Description of how the HCSS development and test systems will work with the external interfaces. • References to applicable sections in the relevant design documents that describe how the HCSS system will be synchronized with the specific internal and external interfaces. • References to applicable sections in the detailed design that describe the mappings between internal and external system data and the HCSS system data. • Descriptions of the process for managing changes to the interfaces, both in the production and non-production environments • Interface(s) needed for maintaining data synchronization between an interim production solution and the final production implementation.	**X**				
	M-86	The Interface Management Plan will, at a minimum, document the following areas: - Approach to developing and managing external system interfaces. - System interfaces, data sources, data format, frequency of updates, expected data volume and technical tools that will be used for data transformation, transport and error recovery. - Data sources, data targets and field mappings. - Tasks, deliverables and resources necessary to complete interface development and implementation. - Process for interfacing and collaborating with interface partners, including roles, responsibilities, deliverables and timelines. - How the HCSS development and test systems shall work with the external non-production interfaces. - Process for managing changes to the interfaces, both in the production and non-production environments. - Approach for maintaining data synchronization between pilot, production and the current system throughout implementation. - Interface tools	**X**				
	M-87	The Contractor shall document the output from the Interface design that shows the interfaces will operate properly.	**X**				

	M-88	The Contractor shall describe the data conversion approach and methodology used for the HCSS Project. It is assumed that the HCSS will at a minimum contain the last appointment for each inmate by discipline, appointment type and appointment type. Given the limited amount of data to be converted and the fragmented legacy systems, CDCR assumes that the data conversion will mostly be manual.	X				
	M-89	The Contractor shall develop a Software Configuarion Management Plan.	X				
	M-90	The Contractor shall provide a software configuration management system to store, control, and track instances (baselines during the construction lifecycle) of all software configuration items that shall be developed for the CDCR.	X				
	M-91	The server(s) that house the Contractor's software configuration management systems shall reside at the CDCR, and the software configuration management system shall be accessible by CDCR personnel.	X				
	M-92	The Contractor must use an industry standard software configuration management tool.	X				
	M-93	The Contractor shall describe the requirements management approach and methodology used for the HCSS Project.	X				
	M-94	The Contractor shall incorporate the requirements management approach into a comprehensive Requirements Management Plan. The Requirements Management Plan will be used by the project to assure that requirements are met. The Requirements Management Plan shall, at a minimum, address the following areas: • Establishment of a baseline for existing requirements. • Management of versions of requirements. • Establish and maintain CDCR's requirements traceability matrix that will be used for requirements management, and will map where in the software a given requirement is implemented. • A requirements change control process. • A methodology for managing requirements in an iterative development lifecycle. • Procurement, installation, and administration of requirements management tools. • A description of the relationship between the requirements management role and the other roles (i.e. test management, quality assurance management) on the project. • Publishing of standard reports related to requirements management.	X				

	M-95	When functionality is ready to be delivered to CDCR for User Acceptance Testing (UAT), it shall be delivered in the form of a Pre-Production Release. Since CDCR will perform UAT and approve all releases into production, a pre-production release is equivalent to a production release and requires the rigor associated with a production release. Upon successful completion of UAT, CDCR will schedule a release to be moved to the Production environment. Each Pre-Production Release shall include the following: • Release-specific Hardware and Software solution components. • Release Description including Architecture or Design updates, new functionality introduced, defects fixed, modifications to interfaces with other systems, other changes to existing code, and any software and hardware configuration changes. • Release Contents including a description of the release structure and contents and instructions for assembling and/or configuring the components of the release. • Test Plan and test execution results. • Detailed hardware and software configuration information including any software and hardware dependencies and instructions at a leve l of detail that will enable CDCR system administration staff to rebuild and configure the hardware environment without outside assistance. • Database documentation conforming to industry standards. • Detailed configuration information for any 3rd party hardware and software. The Contractor shall provide updated documentation when system upgrades to software or equipment occurs through the life of the contract.	**X**				
	M-96	Implementation is expected to be iterative from both a business process and applied technology perspective. CDCR will accept the products into the production environment through application of the acceptance criteria testing plans. For releases that include either servers at the new CDCR data center for the California Prison Health Care Services, or that impact the data network, designated representatives of CDCR must have been trained, and their own internal checklists must have been met, prior to a production release date being scheduled.	**X**				
	M-97	The Contractor shall deliver to CDCR a Requirements Traceability Matrix for all delivered functionality, showing all testing activities tracing to delivered functionality, and all delivered functionality tracing to requirements in the requirements repository	**X**				
	M-98	The Contractor shall validate that each interface is working correctly. The Contractor will repair all interface-related problems caused by contractor-developed interfaces.	**X**				
	M-99	The Contractor shall assist CDCR in identifying root causes for all HCSS interface related problems.	**X**				
	M-100	The Contractor shall assist CDCR with testing and release preparation in the pre-production environment.	**X**				

	M-101	Planning for the on-site support provided to users during implementation. It provides an overview of the type, duration and level of support that each user will encounter. The Contractor must produce and execute an On-Site Implementation Support Plan. The Plan shall include site-specific information on the number of resources needed to provide on-site support by classification and length of time, and by organization. It also defines the roles and responsibilities that are necessary to deliver on-site support to the new system immediately following cutover and, where appropriate, on an ongoing basis as a part of the site's user support program.	X				
	M-102	The Contractor must provide staff at the proposed number of staff, ratios and duration for on-site support (as identified in previously submitted implementation approach and plan).	X				
	M-103	The Contractor must assess the pre-implementation readiness of each part of the organization (approx. 45) and shall document the status in a Pre-Implementation Readiness Assessment. The Contractor shall conduct an implementation readiness review ten days prior to cutover at each part of the organization.	X				
	M-104	Upon successful completion of the Pre-Production testing, the Contractor shall, in coordination with CDCR, create a Production Release Plan that shall consist of an updated Pre-Production Release notification to assist CDCR in successfully releasing and maintaining the system in the Production environment. It must include, but not be limited to, the following components: • Updated Configuration Information required satisfying the CDCR production configuration management requirements. • Updated System Architecture. • Updated Detailed Design, including detailed system, technical, and user documentation. • Deployment schedule	X				
	M-105	The Bidder shall describe the approach to pilot the HCSS, including a high level draft pilot plan.	X				

	M-106	The Pilot Plan shall address at a minimum: - Pilot locations, users, durations, sequencing and timing - Pilot support model including roles and responsibilities of the Contractor and CDCR; number of staff on-site and off-site; staffing hours; - How the pilot will be representative of staff from each broad category of work reflected in the HCSS and represent the diversity in size of the various offices - Strategy for testing of all production functionality of the system including interfaces to external systems - Reporting in the dual environment - Training of users and technical staff - Help desk procedures, functionality and incident reporting - Problem management procedures - Help related documentation - Functionality and operations of interfaces - Approach for validating worker productivity and efficiency - Approach for testing and validating mobility - Readiness planning - Plan and approach for resolving data corruption issues as a result of conversion - Disaster Recovery procedures and practices - Change management processes - Approach for communication and coordination of pilot activites and issues - Approach and procedures for evaluating user experience and feedback - Approach and process for evaluation of the pilot against defined pilot succes	**X**				
	M-107	The pilot(s) shall test all components of the system including at a minimum: - Training - Help desk - Production Support - Documentation - Interfaces - All Functionality - Reporting - Worker Efficiency Metrics - Mobility - Data Conversion - Readiness Planning - Implementation Support - Security - Data Corruption - Disaster Recovery - Problem escalation - Change process	**X**				
	M-108	The Contractor shall produce a Lessons Learned Document after conducting the system pilots and provide recommendations for changes to the implementation process.	**X**				
Security	***M-109***	The Contractor shall describe the system security approach used for the HCSS project.	**X**				

	M-110	The Contractor shall provide a System Security Plan that describes the security approach for the system. In the area of security, CDCR operates under federal and state laws and policies.	X				
	M-111	The System Security Plan shall address the following areas at a minimum: • General Information about System Environment, Interconnections/Information Sharing, Applicable Laws or Regulations, Information Sensitivity, Responsible Parties, General System Description • Security Controls pertaining to Risk Assessment and Management, User Rules or Behavior, Implementation Phase, Operation and Maintenance Phase • Operational Controls pertaining to Personnel Security, Physical and Environmental Protection, Input/Output Controls, Contingency Plans, Maintenance, Integrity, Documentation, Training, Incident Response • Technical Controls pertaining to User Identification and Authentication, Logical Access Controls, Audit Trails	X				
Quality Management	***M-112***	The Contractor shall describe the quality management approach and methodology used for the HCSS Project.	X				
	M-113	The Contractor shall develop a Quality Management Plan to describe the approach they will use to ensure the quality of the work as it pertains, at a minimum, to the following items: • CDCR's management of the requirements. This includes the identification of inconsistencies between the requirements, and the project's plans and work products. • CDCR's requirements traceability matrix that will be used for requirements management, and will map where in the software a given requirement is implemented. • CDCR's configuration management activities that include: baseline control, and monitoring the software library. Approved changes to baseline software and/or documentation should be made properly and consistently in all products, and no unauthorized changes are to be made. • The practices and procedures that will be followed for reporting, tracking, and resolving problems or issues identified in software development, system transition, and system maintenance. • The business process changes resulting from HCSS. • A change readiness assessment of CDCR's organization. This may include a gap analysis and recommendations for organization change required to support HCSS. • The quality of work products developed and delivered by Contractor's sub-contractors/partners, if applicable.	X				

	M-114	The Contractor shall also describe in the Quality Management Plan how they will go about implementing the following in order to facilitate the Quality Management Process: • A metrics process that describes how measurements will be identified, collected, and analyzed to ensure that quality goals, including management and system goals, are being met. It should also describe the types of project metrics used. • The Contractor's organizational structure, and the roles and responsibilities of Contractor staff as they relate to quality management. • Description of the processes and management of the Defect and Issue Tracking system for resolution of items and, if applicable, how corrective action plans will be developed to address more significant issues.	X				
Maintenance, Upgrades, Production Support & Transition	***M-115***	The Contractor shall describe the production support and transition approach and methodology used for the HCSS Project.	X				
	M-116	The Contractor shall incorporate the production support and transition approach into a comprehensive Production Support and Transition Plan (Software Transition Plan) complying with the system architectural design, that will describe how the Contractor intends to support the System and transition that support over to the responsible CDCR entities.	X				
	M-117	The Contractor shall, at a minimum, provide routine system upgrades and fixes to Contractor software at no additional cost. In addition, the Contractor shall provide at no additional charge, routine system upgrades and fixes to application software and field/technical services bulletins periodically as they become available within 24 hours after they receive them from application licensors, subcontractors, manufacturers, and other third parties.	X				
	M-118	The Contractor shall provide CDCR with a list of personnel, contact information, and their area of expertise of who shall be performing system production support	X				
	M-119	The Contractor shall repair any corrupted data that is associated with a system problem.	X				
	M-120	With concurrence from CDCR, the routine planned maintenance activities shall be scheduled without disrupting the negotiated operational hours. Contractor shall provide CDCR with a copy of the schedule at least 30 days in advance of the scheduled maintenance date for approval.	X				
	M-121	The testing tools and test configurations shall be provided to the CDCR as the systems are transitioned into support.	X				
	M-122	The Contractor shall provide instructions and training for CDCR support staff that may need to access and support the system remotely (e.g . thruogh PDA's tabled PC's or VPN).	X				

	M-123	The Contractor shall develop an automated process for purging production system files when necessary.	X				
	M-124	The Contractor shall establish an automated maintenance routine that shall at a minimum: - backup the user IDs and password data - identify expired IDs and related data	X				
	M-125	Upon completion of any maintenance call, the Contractor shall furnish a maintenance activity report to CDCR within 24 hours, which shall include, at minimum, the following: • Date and time notified. • Date and time of arrival. • If hardware, type and serial number(s) of machine(s). • If software, the module or component name of the affected software code. • Time spent for repair. • List of parts replaced and/or actions taken. • Description of malfunction or defect.	X				
	M-126	The Contractor must produce a System Operation Manual, which includes System Administration procedures. Describes the scheduled operations of the production system. It is the operator's instruction manual. It contains specific instructions on things an operator needs to do to manage the system on a daily basis. Descriptions of administrative tasks provide instructions on how to run the job, and what to do in abnormal situations.	X				
	M-127	The System Documentation shall include at a minimum: - Data Dictionary - Data Models - Interface design specifications - Passwords & Activation Codes - Developer's Manual outlining and detailing operating, maintenance, development, processes, standards, procedures, plus any other technical information required to fully support the application. - Operations cycles and procedures including batch or background process schedule, dependencies, sequencing, and timing. - Administrative Tasks including system users administration, system security administration, reference data maintenance, creation of report templates and maintenance of service provider data and contracts. - Other reference materials and presentations required to supplement the training and support activities	X				
	M-128	The Bidder shall develop a High Availability & Disaster Recovery Plan for the entire HCSS application based on the assumption that HCSS will be recovered at an alternate data center as designated by the CDCR.	X				
	M-129	Describes the procedures for system administrators to add, update or remove user IDs and passwords.	X				

	M-130	The Contractor shall submit a Help Desk Support Plan for use by the existing CDCR Help Desk addressing: - Overview of support strategy assuming that CDCR will provide Tier 1 and 2 help desk support - Help desk design - Help desk operations (processes and procedures) - Incident management procedures and processes including escalation - Problem management procedures and processes - Reporting	X				
	M-131	The Contractor shall provide CDCR with help desk scripts and decision trees for Tier 1 and 2 help desk support.	X				
	M-132	The Bidder shall provide a Transition-Out Plan six month prior to production support contract expiration. The Plan must contain transition task descriptions, an organization chart, and job descriptions for all support staff.					
	M-133	The Bidder shall provide instructions and training for CDCR support staff that may need to access and support the system remotely.					
	M-134	The Bidder shall agree to continue normal HCSS operations activities until completion of Transition-Out Plan activities.					
Defect Resolution and System Acceptance Requirements	***M-135***	During the maintenance period, the maximum time to restore the functionality of applications and resolve incidents shall be within the timeframes listed below, based on RFP Section VI, Table VI-4: Incident Severity Level Definitions. • Severity Level One incidents shall not exceed one (8) clock hours between the opening of an incident and final closure, unless a time extension is approved by CDCR. • Severity Level Two incidents shall not exceed forty (24) business hours between the opening of an incident and final closure, unless a time extension is approved by CDCR. • Severity Level Three incidents shall not exceed eighty (40) business hours between the opening of an incident and final closure, unless a time extension is approved by CDCR. • Severity Level Four incidents shall not exceed eighty (80) business hours between the opening of an incident and final closure, unless a time extension is approved by CDCR.	X				
	M-136	The Contractor will work with CDCR technical and program staff to fix problems, optimize the system, and implement changes to the internal HCSS system, external HCSS web system, that supports HCSS functionality, Business Intelligence system supporting HCSS, and Web Content Management system. This will include making changes, testing changes, and providing documentation for changes and test results.	X				

	M-137	The Contractor will respond to critical service requests with a response time not to exceed 2 hours. A critical service request involves failure or degraded operation of a hardware or software component that prevents or seriously impedes CDCR in performing work, and there is no viable or sufficient workaround, redundancy, or backup capability that permits unimpeded operation.	X				
	M-138	The Contractor will respond to non-critical service requests with a response time not to exceed 8 hours. A non-critical service request involves failure or degraded operation of a hardware or software component where there is a viable workaround, redundancy, or backup capability that permits continued satisfactory operation.	X				
	M-139	The Contractor shall develop a Sustem Acceptance Document.	X				
	M-140	There shall be one System Acceptance event for the full Health Care Scheduling System. This System Acceptance event will mark the end of successful Production and Support and the beginning of Maintenance and Operations.	X				
	M-141	Conditions for System Acceptance shall include: • Infrastructure must be hosted by CDCR. • Change configuration and release management must be provided by the CDCR. • Wide area network (WAN) must be maintained and supported by CDCR. • Distributed computing environment including desktops, printers and local area networks (LANs) for CDCR users must be provided by the CDCR. • The service desk must be provided by the CDCR. • The CDCR must be able to provide application maintenance, development and testing immediately after acceptance of the HCSS system without the Contractor's intervention. • Disaster recovery services must be provided by the CDCR. • All ownership of licenses and maintenance contracts must be transitioned from the Contractor to the CDCR. • CDCR will provide software vulnerability risk assessment for all third party software include in vendor's solution. • The resolution of all documented Contractor-responsible deficiencies as stipulated through the approved defect and issue tracking process. • The HCSS System successfully performs in the production environment for a period of thirty (30) consecutive business days without any level 1 or level 2 deficiencies. • Knowledge transfer and training for end users has been provided. • The successful completion of all other work breakdown structure elements, tasks, and deliverables as specified in the Contractor project schedule as approved by the State.	X				

	M-142	Once all System Acceptance conditions have been met, the Contractor shall provide to the CDCR for approval, a System Acceptance document that shall include a final Requirements Traceability Matrix identifying all HCSS system requirements allocated to current, in-production system components. Sign-off of this document by CDCR will constitute System Acceptance and trigger the beginning of Maintenance and Operations.	X				
	M-143	Upon System Acceptance, the HCSS System will be turned over to CDCR for Maintenance and Operations (M&O). To prepare CDCR for this transition, the Contractor and CDCR will partner in order to develop and assimilate the CDCR M&O operations team with an CDCR M&O Plan. The Contractor shall develop a formal methodology to be used by CDCR to manage and operate the new system during CDCR M&O that is documented in the CDCR M&O Plan. The Contractor shall replace all other HCSS and Contractor project management plans with the CDCR M&O Plan at the conclusion of Production Support. The M&O Plan shall incorporate methodologies and practices which will assist CDCR in successfully managing the HCSS system's M&O lifecycle and shall address the following areas: • Support Model. • Triage Procedures. • Tools. • Identification of Roles and Responsibilities of support personnel. • Release Management. • Upgrades. • Maintenance. • On-going Operations. • Customer Support. • Specific support procedures for production. • Deliverables. • Resource Requirements (staff loading). • Business Services Migration. • Capacity Management. • Technology Refresh. • System Security. • Backup and Recovery. • Disaster Recovery. • Defect/Issue management.	X				
Staff Management	***M-144***	As part of the Proposal, the Bidder must describe the staffing approach and methodology used for the HCSS Project, which shall include: • Estimated number of vendor's resources needed per each phase of the project. • The number of staff resources within the following categories: Management, Business, and Technical. • A description of the methodology used to releasing and adding staff to the project. • Providing a project organization chart	X				

General Contractor Responsibilities	***M-145***	The Contractor shall only be allowed to access the HCSS network while on-site. No remote access hardwired/wireless to the CDCR network shall be allowed without special arrangements being made with CDCR; the Information Security Office will hold approval.	X				
	M-146	Information placed on removable media must conform to the policies laid out in Department of Finance (DOF) Budget Letter BL05-32 (11/05) and State Administrative Manual chapter 4841.2 Information Integrity and Security.	X				
	M-147	If the information placed on removable media contains inmate health information, the contractor shall obtain prior written approval.	X				
	M-148	The Contractor must notify CDCR data owners and the CDCR Information Security Office (ISO) within two (2) hours of a suspected or real security incident involving any information asset, including, but not limited to: responding to availability outages; equipment failures, system or data integrity; or losses, misuse, or improper access to or dissemination of information.	X				
	M-149	The Contractor shall work with CDCR and the new CDCR data center for the California Prison Health Care Services to configure the interfaces between the new HCSS environment and any existing legacy environment.	X				
	M-150	The Contractor agrees that all materials and documents that are developed as part of the HCSS project shall become the property of CDCR. Materials and documents copyrighted prior to the date of contract signature are exempted from this provision.	X				
	M-151	The Contractor shall store all work products and deliverables on CDCR's local area network (LAN) at all times. The most current version of all work products and deliverables must be continuously available for CDCR review at all times (according to established version controls).	X				
	M-152	The Contractor shall comply with all applicable CDCR policies and procedures and shall return all CDCR property including security badges prior to termination of the Contract.	X				
General CDCR Responsibilities	***M-153***	CDCR will designate a “CDCR primary point of contact” to whom all project communications may be addressed and who has the authority to act on all aspects of the Contract.	X				
	M-154	CDCR shall provide all naming convention, IP addresses and managed access to the existing development, test, and pre-production systems.	X				
	M-155	CDCR will provide information as required by the Contractor to perform its responsibilities under this Contract and timely review and approval of the Contractor’s information and documentation.	X				
	M-156	CDCR shall provide the following items to the Contractor to support this effort: office space for the duration of the Contract including: desk, chair, telephone, personal computer, printer access, Internet connection, Microsoft Office, Microsoft Project and technical support for adding Contractor-owned software required for completion of this Contract.	X				