**Attachment One**

**Business Requirements Traceability Matrix**

**Request for Proposal Number 6097 Z1**

Bidders are instructed to complete a Business Requirements Traceability Matrix for Operating Leased Automated Pharmacy Dispensing Machines Solution. Bidders are required to describe in detail how their proposed solution meets the conformance specification outlined within each Business Requirement.

The traceability matrix is used to document and track the project requirements from the proposal through testing to verify that the requirement has been completely fulfilled. The winning Bidder will be responsible for maintaining the contract set of Baseline Requirements. The traceability matrix will form one of the key artifacts required for testing and validation that each requirement has been complied with (i.e., 100% fulfilled).

The traceability matrix should indicate how the Bidder intends to comply with the requirement and the effort required to achieve that compliance. It is not sufficient for the Bidder to simply state that it intends to meet the requirements of the RFP. DHHS will consider any such response to the requirements in this RFP to be non-responsive. The narrative should provide DHHS with sufficient information to differentiate the Bidder's business solution from other Bidders' solutions.

The Bidder must ensure that the original requirement identifier and requirement description are maintained in the traceability matrix as provided by DHHS. Failure to maintain these elements may be grounds for disqualification.

How to complete the traceability matrix:

| Column Description | Bidder Responsibility |
| --- | --- |
| Req # | The unique identifier for the requirement as assigned by DHHS, followed by the specific requirement number. This column is dictated by this RFP and should not be modified by the Bidder. |
| Requirement | The statement of the requirement to which the Bidder should respond. This column is dictated by the RFP and must not be modified by the Bidder. |
| (1) Comply | The Bidder should insert an "X" if the Bidder's proposed solution complies with the requirement. Describe in the response how the Bidder's proposed solution meets the requirement. The Bidder should leave blank if the Bidder's proposed solution does not comply with the requirement.If left blank, the Bidder should also address the following:• Capability does not currently exist in the proposed system, but is planned in the near future (within the next few months)• Capability not available, is not planned, or requires extensive source-code design and customization to be considered part of the Bidder's standard capability• Requires an extensive integration effort of more than 500 hours |
| (a) Core | The Bidder should insert an "X" if the requirement is met by existing capabilities of the core system or with minor modifications or configuration to existing functionality. |
| (b) Custom | The Bidder should insert an "X" if the Bidder proposes to custom develop the capability to meet this requirement. Indicate "custom" for those features that require substantial or "from the ground up" development efforts. |
| (c) 3rd Party | The Bidder should insert an "X" if the Bidder proposed to meet this requirement using a 3rd party component or product (e.g., a COTS vendor, or other 3rd party). The Bidder should describe the product, including product name, its functionality and benefits in their response. |

**BUSINESS REQUIREMENTS**

The following requirements describe what is needed to support DHHS business project operations.

Each requirement is identified by the following first three characters:

|  |  |
| --- | --- |
| GEN | General Functional Requirements |
| SAF | Safety Requirements |
| WOR | Workflow Requirements |
| CSM | Controlled Substance Management Requirements |
| REP | Reporting Requirements |
| SEC | Security User Access Requirements |
| SER | System Service Support Requirements |
| TRN | Training |

***General Functional Requirements***

This section presents the overall general requirements that apply to the system. Describe in the Response how the proposed solution meets the requirement.

| **Req #** | **Requirement** | (1)Comply | (a)Core | (b)Custom | (c)3rd Party |
| --- | --- | --- | --- | --- | --- |
| GEN-1 | Describe how the proposed solution is designed for inpatient hospital dispensing of single-unit or unit-dose packages. |  |  |  |  |
| Response: |
| GEN-2 | The bidder’s proposed solution must have secure methods to document and track all returns. Describe the methods available to handle unused medications that have been removed from the ADM. |  |  |  |  |
| Response: |
| GEN-3 | Describe how the proposed solution has the functionality to track outdated medications. Describe how this functionality works. |  |  |  |  |
| Response: |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| GEN-4 | Describe the system capability to track stock of medications stored in a medication refrigerator. If the refrigerator contains controlled substances, the proposed solution must include a locking component for the refrigerator. |  |  |  |  |
| Response: |
| GEN-5 | Describe the features available to ensure accurate storage, dispensing, and administration. For example, a barcode scanner, audible or visual warnings, etc.  |  |  |  |  |
| Response: |
| GEN-6 | Describe how non-inventory items, such as a patient’s own medication are managed with the system. |  |  |  |  |
| Response: |
| GEN-7 | Describe the proposed solution’s ability to work with 120 volt electrical outlets.  |  |  |  |  |
| Response: |
| GEN – 8 | Please describe the diminsions of the machines. They must fit and function in rooms with the following sizes:LRC Buildings:Bldg 3: 1st Floor Door Opening is 38”; Room size 15’ x 19’  2nd Floor Door Opening is 29”; Room sizes 8’ x 15’Bldg 5: Door openings are 40”; Room size 11’ x 8’Bldg 10: Door openings are 36”; Room size is 14’ x 15’ and 12’ x 12’Bldg 14: 1st Floor Door Opening is 44”; Room size 11’7” x 10’4” 2nd Floor Door Opening are 36”; Room size 15’ x 7’ and 13’ x 9’Whitehall Buildings:CLC Building: Door opening is 29”, Height is 80”; Room size 14’ x 11’Warner Bldg: Door opening is 29”, Height is 80”; Room size 14’ x 11”NRC Building:1West: Door Opening: 42” x 80”; Room Size 12’6” x 17’2West, 2East, 3West, and 3East: Door Opening 42” x 80”; Room Size 13’ x 15’Pharmacy: Door Opening: 42” x 80”; Room Size 30’ x 30’ Please describe any special requirements for the rooms that the machines will be located in. |  |  |  |  |
| Response: |
| GEN-9 | Nebraska Revised Statutes §71-2445, §71-2446, §71-2447, and §71-2449 describe the requirements for use of automated dispensing machines in Nebraska hospitals. Describe how your system meets the requirements set forth by these statutes. |  |  |  |  |
| Response: |

***Safety Requirements***

| **Req #** | **Requirement** | (1)Comply | (a)Core | (b)Custom | (c)3rd Party |
| --- | --- | --- | --- | --- | --- |
| SAF-1 | Current inpatient pharmacy software in use is RxConnect. Describe how the vendor will establish and manage the interface with RxConnect in such a manner as to provide accurate, real-time medication profiles for all active patients.Profiling functionality should include the following:* 1. Transmission of all components of medication orders, including drug, dose, route, frequency, dosing schedule, and order start/stop times,
	2. Information on whether or not a pharmacist has reviewed an order. This functionality should then lead to the safety feature of limiting the variety and quantity of medications that are accessible without pharmacist review (override).
 |  |  |  |  |
| Response: |
| SAF-2 | Describe how the proposed solution’s UPS power backup has the capability to minimize downtime in the event of power failure. |  |  |  |  |
| Response: |
| SAF-3 | Describe the proposed solution’s ability to support user witness documentation. |  |  |  |  |
| Response: |

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| --- | --- | --- | --- | --- | --- |
| SAF-4 | Describe the features available to prevent pharmacy staff from incorrectly loading a medication in the machine, i.e., right drug in the right machine position. |  |  |  |  |
| Response: |
| SAF-5 | Describe how the proposed solution indicates if there are additional medications listed for a patient beyond what appears on the screen. |  |  |  |  |
| Response: |
| SAF-6 | Describe the features available to alert or warn a user if a medication is being removed from the station outside of the timeframe allowed per hospital/facility policy. |  |  |  |  |
| Response: |
| SAF-7 | Describe the functionality available to prevent a user from dispensing the same medication to a patient more than once in a defined timeframe. For example, if a night nurse pulls a pain medication for a patient and gives it at 07:00 am, is there any safeguard to prevent the day nurse from pulling the same medication to give at 7:15 am? |  |  |  |  |
| Response: |
| SAF-8 | Describe the features available to identify doses due but not removed to prevent errors of omission. |  |  |  |  |
| Response: |
| SAF-9 | Describe the safety features available to limit users with a certain access/security level from withdrawing medications of a certain class or individual medication products. For example, does the proposed solution provide a way to limit medication aides from accessing any controlled substances from the machine? |  |  |  |  |
| Response: |
| SAF-10 | Instances occur where it is not feasible to have an existing medication order prior to removing a medication from the ADM. Typically this is done through a process called an “override”. This practice, although allowable, requires careful monitoring by pharmacy and nursing departments. Describe the proposed solution’s ability to provide ADM override data (e.g. name of medication, quantity, location of the automated device, event date and time) in a format to allow for routine review to help evaluate and manage those medications approved for override access. If there are additional features available through the solution to minimize the risk of override use, please describe. |  |  |  |  |
| Response: |
| SAF-11 | Describe the features available to direct user attention to higher-alert medications. Does the system use Tall-man lettering, standardized concentration displays, and/or standardized drug formulation designations (ex. Depakote ER vs CR)? If so, are these maintained by the vendor or the facility? |  |  |  |  |
| Response: |

***Workflow Requirements***

| **Req #** | **Requirement** | (1)Comply | (a)Core | (b)Custom | (c)3rd Party |
| --- | --- | --- | --- | --- | --- |
| WOR-1 | Describe the proposed solution’s ability to allow for monitoring of all the facility ADM machines in a central location, e.g. the inpatient pharmacy at the facility. |  |  |  |  |
| Response: |
| WOR-2 | Describe the features available in the proposed solution to improve efficiency and workflow. Does the proposed solution have a way to limit the access to medications that are only due during a specific timeframe? Can the proposed solution be configured to require two users to document certain events (high alert medications, controlled substance waste, etc.)? |  |  |  |  |
| Response: |
| WOR-3 | Describe what safeguards the proposed solution provides if there is an attempt to unload an ordered medication from an ADM. |  |  |  |  |
| Response: |
| WOR-4 | Describe the proposed solution’s ability to allow users to stop conducting an ADM inventory mid-way through the process and then restart the inventory process at the point they left off once they log back onto an ADM. |  |  |  |  |
| Response: |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| WOR-5 | Explain the capability the proposed solution has to allow a user to locate a specific medication and dose in any ADM in the facility. If available, are there limitations to the number of users? Does a user have to be logged in to one of the machines in order for this to work? |  |  |  |  |
| Response: |

***Controlled Substance Management Requirements***

| **Req #** | **Requirement** | (1)Comply | (a)Core | (b)Custom | (c)3rd Party |
| --- | --- | --- | --- | --- | --- |
| CSM-1 | Describe how the proposed solution includes a controlled substance manager cabinet for the LRC facility that will interface with all LRC automated dispensing cabinets. The controlled substance manager cabinet must be able to accommodate 80 unique line items and must be located in the pharmacy.  |  |  |  |  |
| Response: |
| CSM-2 | Describe how the controlled substance manager cabinet tracks the inventory changes from the cabinet in the pharmacy to the ADMs throughout the facility. What features are available to identify discrepancies and potential diversion within the process of delivering controlled substances from the pharmacy to the ADMs? |  |  |  |  |
| Response: |
| CSM-3 | Describe how the proposed solution maintains a perpetual inventory for controlled substances and also maintains a history that can generate a secure record of “chain of custody” of inventory. The machines will be configured and stocked by hospital facility pharmacy staff. Describe how the proposed solution allows for ADM inventory counts to be audited at any time. |  |  |  |  |
| Response: |
| CSM-4 | Describe the features available to identify discrepancies and potential diversion within the ADM system as a whole. |  |  |  |  |
| Response: |
| CSM-5 | Describe how the proposed solution allows for inventory audits as often as every shift based on facility-specific criteria. For example, all CII through CV medications in an ADM must be inventoried each shift. |  |  |  |  |
| Response: |
| CSM-6 | Describe how the proposed solution provides count verification customization with a blind count feature. For example, all controlled substance events require a user to enter the inventory amount at the time of the transaction, without a prompt for the expected amount. |  |  |  |  |
| Response: |

***Reporting Requirements***

| **Req #** | **Requirement** | (1)Comply | (a)Core | (b)Custom | (c)3rd Party |
| --- | --- | --- | --- | --- | --- |
| REP-1 | Describe how the proposed solution has a robust reporting feature, including the ability to import and export data and configure reports at the facility level. The system must be able to produce various dispensing reports to include:* + - 1. all ADM events
			2. usage by date range
			3. return report
			4. usage by unit
			5. usage by drug
			6. stock replenishment
			7. user activity and
			8. inventory details.

The system must have the ability to report administration events by patient for a defined period of time. |  |  |  |  |
| Response: |
| REP-2 | Describe the ad hoc reporting capabilities offered through the proposed solution. |  |  |  |  |
| Response: |

***Security and User Access Requirements***

| **Req #** | **Requirement** | (1)Comply | (a)Core | (b)Custom | (c)3rd Party |
| --- | --- | --- | --- | --- | --- |
| SEC-1 | Describe how the proposed solution allows the facility to have administrative rights to oversee the systems including the ability to configure multiple access rights and security levels based on user privilege, to import/export data and to configure and generate reports. Describe the different access rights and/or security levels available and the methods by which facility clinical and IT staff can manage user access. |  |  |  |  |
| Response: |
| SEC-2 | Describe how the proposed solution provides fingerprint scanning access on all ADMs. |  |  |  |  |
| Response: |
| SEC-3 | Describe how the proposed solution tracks all activity specific to each user and process, including, at a minimum: date and time of login, invalid login attempts, and all transactions. This information must be able to be audited at any time. |  |  |  |  |
| Response: |

***System Service Support Requirements***

| **Req #** | **Requirement** | (1)Comply | (a)Core | (b)Custom | (c)3rd Party |
| --- | --- | --- | --- | --- | --- |
| SER-1 | The Contractor must provide routine on-site equipment maintenance and on-call 24/7 technical assistance in any situation, including support for nursing and pharmacy staff. Describe how the proposed solution’s maintenance/support is to be provided including expected response times. |  |  |  |  |
| Response: |
| SER-2 | Describe how the process for system upgrades and routine maintenance impacts end user access. If downtimes are necessary, how is the potential impact on clinical care minimized? |  |  |  |  |
| Response: |
| SER-3 | Describe the process for replacement when a machine has been out of service for more than 3 calendar days. |  |  |  |  |
| Response: |
| SER-4  | Describe the process for returning the machines to the contractor at the end of the lease period, if the lease is not renewed. |
| Response: |

***Training Requirements***

| **Req #** | **Requirement** | (1)Comply | (a)Core | (b)Custom | (c)3rd Party |
| --- | --- | --- | --- | --- | --- |
| TRN-1 | Describe how the Bidder's proposed solution provides initial and ongoing training and training materials for all operational aspects of the system to all end users, internal and external.The winning Bidder is encouraged to use a combination of classroom and on-line learning techniques, as appropriate. Describe the proposed training plan. |  |  |  |  |
| Response: |
| TRN-2 | Describe how the Bidder's proposed solution develops, uses and provides training material to DHHS for initial and ongoing training. The content of these materials will be consistent with the User Manual, any Operating Procedures and Help text. |  |  |  |  |
| Response: |