BerryDunn
Assurance, Tax, Consulting

TECHNICAL PROPOSAL FOR

CHILD WELFARE REFORM ANALYSIS

NEBRASKA DEPARTMENT OF HEALTH AND HUMAN SERVICES, CHILDREN AND FAMILY SERVICES DIVISION

BerryDunn
100 Middle Street,
Portland, ME 04101
207.541.2200

Charles K. Leadbetter, PMP®, Principal
cleadbetter@berrydunn.com

Danielle Ewing, PMP®, Project Manager
dewing@berrydunn.com

Proposal submitted on:
June 14, 2019, before 2:00 p.m. Central Time in response to Solicitation Number 6084 Z1

June 14, 2019

Annette Walton, Julie Schlitz, Buffy Meyer
State Purchasing Bureau
1526 K Street, Suite 130
Lincoln, NE 68508

Dear Ms. Walton, Ms. Schlitz, and Ms. Meyer:

Thank you for the opportunity to submit this proposal in response to Solicitation Number Request for Proposal (RFP) 6084 Z1 for Child Welfare Reform Analysis, issued by the State of Nebraska (State) Department of Administrative Services (DAS) Materiel Division, State Purchasing Bureau (SPB) on behalf of the Department of Health and Human Services (DHHS) Children and Family Services (CFS) Division.

Berry Dunn McNeil & Parker, LLC (BerryDunn) is an independent consulting and certified public accounting firm that serves clients nationally. Providing operational assessment; business process analysis and improvement; and child welfare reform analysis, planning, and implementation services to public agencies are strengths of our firm and of our strategic partners for this proposal—including Chapin Hall, Face-to-Face Integrated Technologies (Face-to-Face), and Strategy Solutions, LLC. Together, we have an extensive history of successfully assisting clients with similar efforts, and we welcome the opportunity to assist you on this important initiative.

Our approach is simple: **consistently produce high-quality services, strive for unparalleled client satisfaction, and deliver both at a reasonable cost.** You can feel confident selecting BerryDunn and our team of experienced professionals—we have the expertise, proven methodologies, and resources to lead this project and fulfill your objectives. As you evaluate which team is right for you, please consider the following:

- We offer an experienced, highly qualified, senior team with the expertise and commitment required to support the State's success. Our team is comprised of individuals who have dedicated their careers to researching child welfare system solutions; who have "real world" practical experience as former federal and state child welfare leaders; and who have deep expertise supporting state agencies with business process improvement, change management, project management, and implementation support for large-scale system change efforts.
- We offer a comprehensive Assessment, Planning, and Implementation Framework designed specifically for child welfare systems that is currently being used by other jurisdictions around the country, as well as proven methodologies and tools for the core services being requested by CFS. The framework supports development of actionable solutions, sustainable results, and capacity within CFS.

Form A
Bidder Contact Sheet
Request for Proposal Number 6084 Z1

Form A should be completed and submitted with each response to this RFP. This is intended to provide the State with information on the bidder's name and address, and the specific person(s) who are responsible for preparation of the bidder's response.

Preparation of Response Contact Information	
Bidder Name:	Berry Dunn McNeil & Parker, LLC d|b|a BerryDunn
Bidder Address:	100 Middle Street, Suite 5 Portland, ME 04101
Contact Person & Title:	Ann Marie Lynch, Manager
E-mail Address:	alynch@berrydunn.com
Telephone Number (Office):	(207) 541-2345
Telephone Number (Cellular):	(207) 251-9869
Fax Number:	(207) 774-2375

Each bidder should also designate a specific contact person who will be responsible for responding to the State if any clarifications of the bidder's response should become necessary. This will also be the person who the State contacts to set up a presentation/demonstration, if required.

Communication with the State Contact Information	
Bidder Name:	Berry Dunn McNeil & Parker, LLC d|b|a BerryDunn
Bidder Address:	100 Middle Street, Suite 5 Portland, ME 04101
Contact Person & Title:	Charles K. Leadbetter, Principal
E-mail Address:	cleadbetter@berrydunn.com
Telephone Number (Office):	(207) 541-2249
Telephone Number (Cellular):	(207) 541-2249
Fax Number:	(207) 774-2375

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1. Request for Proposal Form

1. REQUEST FOR PROPOSAL FORM

This form has been provided on the following page(s).

REQUEST FOR PROPOSAL FOR CONTRACTUAL SERVICES FORM

BIDDER MUST COMPLETE THE FOLLOWING

By signing this Request for Proposal for Contractual Services form, the bidder guarantees compliance with the procedures stated in this Request for Proposal, and agrees to the terms and conditions unless otherwise indicated in writing and certifies that bidder maintains a drug free work place.

Per Nebraska's Transparency in Government Procurement Act, Neb. Rev Stat § 73-603 DAS is required to collect statistical information regarding the number of contracts awarded to Nebraska Contractors. This information is for statistical purposes only and will not be considered for contract award purposes.

_____ NEBRASKA CONTRACTOR AFFIDAVIT: Bidder hereby attests that bidder is a Nebraska Contractor. "Nebraska Contractor" shall mean any bidder who has maintained a bona fide place of business and at least one employee within this state for at least the six (6) months immediately preceding the posting date of this RFP.

______I hereby certify that I am a Resident disabled veteran or business located in a designated enterprise zone in accordance with Neb. Rev. Stat. § 73-107 and wish to have preference, if applicable, considered in the award of this contract.

_____ I hereby certify that I am a blind person licensed by the Commission for the Blind & Visually Impaired in accordance with Neb. Rev. Stat. §71-8611 and wish to have preference considered in the award of this contract.

FORM MUST BE SIGNED USING AN INDELIBLE METHOD (NOT ELECTRONICALLY)

FIRM:	Berry Dunn McNeil & Parker, LLC d|b|a BerryDunn
COMPLETE ADDRESS:	100 Middle Street, Suite 5 Portland, ME 04101
TELEPHONE NUMBER:	(207) 541-2249
FAX NUMBER:	(207) 774-2375
DATE:	June 14, 2019
SIGNATURE:	
TYPED NAME & TITLE OF SIGNER:	Charles K. Leadbetter, Principal

2. CORPORATE OVERVIEW

The Corporate Overview section of the Technical Proposal should consist of the following subdivisions:

2.1 BIDDER IDENTIFICATION AND INFORMATION

a. The bidder should provide the full company or corporate name, address of the company's headquarters, entity organization (corporation, partnership, proprietorship), state in which the bidder is incorporated or otherwise organized to do business, year in which the bidder first organized to do business and whether the name and form of organization has changed since first organized.

Berry Dunn McNeil & Parker, LLC (doing business as BerryDunn) is a national information technology (IT) consulting, management consulting, and certified public accounting firm formed in 1974. We are incorporated and organized to do business in the State of Maine.

The address of our headquarters in Portland, Maine, is:

100 Middle Street

4th Floor, East Tower

Portland, ME 04101

207-541-2200

We are a privately held company and have experienced sustained growth throughout our 45-year history.

Other names under which our organization has been organized and conducted business include:

- Berry, Dunn & McNeil Chartered – from 1974 to 1982
- Berry, Dunn, McNeil & Parker Chartered – from 1982 to 1999

2.2 FINANCIAL STATEMENTS

b. The bidder should provide financial statements applicable to the firm. If publicly held, the bidder should provide a copy of the corporation's most recent audited financial reports and statements, and the name, address, and telephone number of the fiscally responsible representative of the bidder's financial or banking organization. If the bidder is not a publicly held corporation, either the reports and statements required of a publicly held corporation, or a description of the organization, including size, longevity, client base, areas of specialization and expertise, and any other pertinent information, should be submitted in such a manner that proposal evaluators may reasonably formulate a determination about the stability and financial strength of the organization. Additionally, a non-publicly held firm should provide a banking reference. The bidder must disclose any and all judgments, pending or expected litigation, or other real or potential financial reversals, which might materially affect the viability or stability of the organization, or state that no such condition is known to exist. The State may elect to use a third party to conduct credit checks as part of the corporate overview evaluation.

1974
FOUNDED

50
STATES

33
YEARS SERVING HHS AGENCIES

BerryDunn is an independent consulting and certified public accounting firm with a Government Consulting Group dedicated to serving state, local, and quasi-governmental agencies. We were formed in 1974 and have experienced sustained growth throughout our 45-year history. Our firm provides a full range of professional services, including IT and management consulting; tax, audit, and accounting services; and wealth management services.

BerryDunn has successfully worked with more than 300 state, local, and quasi-governmental clients in all 50 states. The firm employs more than 390 staff members—including over 160 in our Government Consulting Group—which includes a dedicated public-sector health and human services (HHS) consulting team.

Our Government Consulting Group has been supporting states across the nation for more than 33 years as they solve some of their biggest challenges, including modernizing, enhancing, and transforming HHS programs and systems. We have a long and successful history of working with public agencies in support of program and IT assessment and improvement initiatives. **We will combine our national perspective with the lessons learned, relationships developed, and local knowledge acquired by working with CFS to provide unique insight and value to CFS' child welfare program.**

BerryDunn is an **independent firm.** We do not sell, develop, or provide software or hardware, and we do not partner with organizations that do.

Figure 1, on the following page, highlights areas of specialization and expertise for BerryDunn's Government Consulting Group.

Figure 1: BerryDunn Areas of Specialization and Expertise

As a privately held certified public accounting and consulting firm, BerryDunn is not required to prepare audited or un-audited financial statements. However, the financial information and exhibits provided in this section exemplify the strong financial condition of our firm. Should CFS require additional information regarding BerryDunn's financial stability, we would be pleased to provide it at your request. Additionally, for more information on BerryDunn's financial stability, you may contact William Schad, Vice President, Commercial Lending at TD Bank in Portland, Maine, at 207-761-8612 or by email at william.schad@tdbanknorth.com.

Figure 2, on the following page, presents BerryDunn's revenue for the previous 10 fiscal years. Figure 3 provides BerryDunn's condensed financial information for the previous three fiscal years. To further demonstrate our financial stability, we have provided a letter from BerryDunn's primary financial institution demonstrating our good standing.

BerryDunn has **no** judgements, pending or expected litigation, or any other real or potential financial reversals to disclose that might materially affect the viability or stability of the organization.

Figure 2: BerryDunn Annual Revenue (in Millions) Previous 10 Fiscal Years

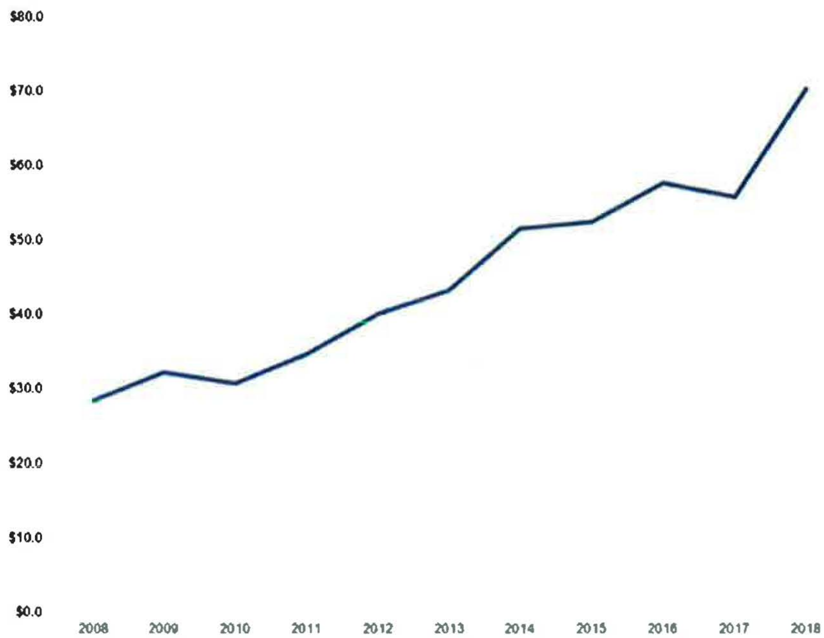

Figure 3: Condensed Financial Information for the Years Ended June 30

	FY16	FY17	FY18
Current Assets	$ 16,018,242	$ 14,063,140	$ 20,882,366
Fixed Assets, Net	2,232,806	2,255,209	2,100,197
	$ 18,251,048	$ 16,318,349	$ 22,982,563
Current Liabilities	4,397,332	5,675,684	6,224,009
Amounts due Principals & Principals' Equity	13,853,716	10,642,665	16,758,554
	$ 18,251,048	$ 16,318,349	$ 22,982,563
Operating Revenue	57,664,659	55,801,216	70,465,868
Operating Expenses	(46,425,993)	(47,730,767)	(57,975,676)
Depreciation & Amortization	(591,088)	(680,860)	(717,418)
Interest Expense	6,040	(10,694)	(104,375)
Net Income	$ 10,653,618	$ 7,378,895	$ 11,668,399

The above information is confidential and proprietary to Berry Dunn McNeil & Parker. Any inquiries on it or requests for additional information should be directed to John M. Chandler, Managing Principal, at 207-775-2387 ext. 2211.

TD Bank
America's Most Convenient Bank®
One Portland Square
P.O. Box 9540
Portland, ME 04112-9540
T 207 761 8600
F 207 761 8660

tdbank.com

March 5, 2019

RE: Berry, Dunn, McNeil & Parker, Inc.
100 Middle Street
Portland, Maine 04101

To Whom It May Concern:

Berry, Dunn, McNeil & Parker, Inc. has a Working Capital Line of Credit with TD Bank with a current availability in the low seven (7) figure range.

Berry, Dunn, McNeil & Parker, Inc. has been a valued customer of TD Bank, N.A. since 1991, always maintaining a satisfactory loan and deposit relationship with the Bank. Over the past twenty four (24) years they have consistently demonstrated the financial capacity and credit worthiness to successfully provide accounting, tax, and business consulting services throughout the Northern New England area.

Berry Dunn is a well-regarded customer of the Bank and they have handled their affairs with the utmost integrity.

Please feel free to call me should you have any questions.

Sincerely,

Colin P. March
Senior Relationship Manager

2.3 CHANGE OF OWNERSHIP

c. If any change in ownership or control of the company is anticipated during the twelve (12) months following the proposal due date, the bidder should describe the circumstances of such change and indicate when the change will likely occur. Any change of ownership to an awarded vendor(s) will require notification to the State.

No change in ownership or control of the company is anticipated during the 12 months following the proposal due date.

2.4 OFFICE LOCATION

d. The bidder's office location responsible for performance pursuant to an award of a contract with the State of Nebraska should be identified.

BerryDunn is headquartered in Portland, Maine, with offices in Arizona, Connecticut, Maine, New Hampshire, and West Virginia. In addition, we have employees based across the country, as shown in the map below. Our strong client references and our repeated selection by past clients to perform additional work speaks to our ability and commitment to being responsive to client needs—regardless of the geographic location or time zone.

BerryDunn Offices
Portland, ME
Bangor, ME
Manchester, NH
Glastonbury, CT
Charleston, WV
Phoenix, AZ

Remote Employee Locations

The services proposed to CFS will be led by members of BerryDunn's Government Consulting Group who are based in our Phoenix, Arizona office. Team members from Chapin Hall—BerryDunn's strategic partner for this project—are based in Chicago, Illinois. Other BerryDunn project team members, including those from Face-to-Face Integrated Technologies and Strategy Solutions, LLC, are based in locations across the United States, such as Portland, Oregon, and Denver, Colorado.

We regularly work with clients around the country, and have been successful in meeting clients' needs by planning an appropriate level of on-site work to meet project objectives—and by providing our team members with the technologies and tools they need to perform their work, regardless of their location.

2.5 RELATIONSHIPS WITH THE STATE

e. The bidder should describe any dealings with the State over the previous five (5) years. If the organization, its predecessor, or any Party named in the bidder's proposal response has contracted with the State, the bidder should identify the contract number(s) and/or any other information available to identify such contract(s). If no such contracts exist, so declare.

From 2015 to 2017, BerryDunn assisted the Nebraska Department of Motor Vehicles (DMV) with the modernization of its vehicle and title registration system. Details are provided below.

Nebraska Department of Motor Vehicles (DMV) Consulting for the Modernization of a Vehicle and Title Registration System	
Project Background	BerryDunn assisted the Nebraska DMV with planning for a significant technology modernization through analysis, research, and procurement assistance. 
BerryDunn's Solution	We conducted a needs analysis that encompassed the following: • Modeling current environment processes and identifying process challenges • Interviewing peer states to determine lessons learned from similar modernizations • Facilitating system stakeholder sessions to capture system needs and requirements • Conducting market research, including issuing an request for information (RFI) and tabulating responses and presentations • Making recommendations for modernization and legislative changes • Developing functional and technical requirements • Assisting with the development of an RFP for the modernized solution and integration services
Project Outcomes	The result was a comprehensive modernization needs analysis and recommendations that led to the issuance of an RFP in April 2017. The DMV and the Office of the Chief Information Officer (CIO) benefitted from an independent perspective, data-gathering tools, facilitation experience, report writing, and subject matter expertise in the motor vehicle industry.
Project Dates	11/2015 to 04/2017
Contract Number	69061 04

In addition, Chapin Hall has a State Center Nebraska—Data-Sharing Agreement with the State Department of Human and Health Services. (The principal investigator is Fred Wulczyn.) The contract start was September 2011, and the end date is August 2021.

2.6 BIDDER'S EMPLOYEE RELATIONS TO THE STATE

f. If any Party named in the bidder's proposal response is or was an employee of the State within the past sixty (60) months, identify the individual(s) by name, State agency with whom employed, job title or position held with the State, and separation date. If no such relationship exists or has existed, so declare. If any employee of any agency of the State of Nebraska is employed by the bidder or is a subcontractor to the bidder, as of the due date for proposal submission, identify all such persons by name, position held with the bidder, and position held with the State (including job title and agency). Describe the responsibilities of such persons within the proposing organization. If, after review of this information by the State, it is determined that a conflict of interest exists or may exist, the bidder may be disqualified from further consideration in this proposal. If no such relationship exists, so declare.

No such relationship exists.

2.7 CONTRACT PERFORMANCE

g. If the bidder or any proposed subcontractor has had a contract terminated for default during the past ten (10) years, all such instances must be described as required below. Termination for default is defined as a notice to stop performance delivery due to the bidder's non-performance or poor performance, and the issue was either not litigated due to inaction on the part of the bidder or litigated and such litigation determined the bidder to be in default. It is mandatory that the bidder submit full details of all termination for default experienced during the past ten (10) years, including the other Party's name, address, and telephone number. The response to this section must present the bidder's position on the matter. The State will evaluate the facts and will score the bidder's proposal accordingly. If no such termination for default has been experienced by the bidder in the past ten (10) years, so declare. If at any time during the past ten (10) years, the bidder has had a contract terminated for convenience, non-performance, non-allocation of funds, or any other reason, describe fully all circumstances surrounding such termination, including the name and address of the other contracting Party.

BerryDunn and our proposed subcontractors have not had a contract terminated for default over the past 10 years.

2.8 SUMMARY OF BIDDER'S CORPORATE EXPERIENCE

h. The bidder should provide a summary matrix listing the bidder's previous projects similar to this RFP in size, scope, and complexity. The State will use no more than three (3) narrative project descriptions submitted by the bidder during its evaluation of the proposal. The bidder should address the following: i. Provide narrative descriptions to highlight the similarities between the bidder's experience and this RFP. These descriptions should include: a) The time period of the project; b) The scheduled and actual completion dates; c) The Contractor's responsibilities; d) For reference purposes, a customer name (including the name of a contact person, a current telephone number, a facsimile number, and e-mail address); and e) Each project description should identify whether the work was performed as the prime Contractor or as a subcontractor. If a bidder performed as the prime Contractor, the description should provide the originally scheduled completion date and budget, as well as the actual (or currently planned) completion date and actual (or currently planned) budget. Page 35 Revised: 11/16/2018 ii. Contractor and subcontractor(s) experience should be listed separately. Narrative descriptions submitted for subcontractors should be specifically identified as subcontractor projects. iii. If the work was performed as a subcontractor, the narrative description should identify the same information as requested for the Contractors above. In addition, subcontractors should identify what share of contract costs, project responsibilities, and time period were performed as a subcontractor.

BerryDunn and our partners have served clients across the country on projects similar in scope, scale, and complexity to the work being requested by CFS. On the following pages we have provided information for three projects that were successfully completed or are currently underway to demonstrate BerryDunn and our project partners' recent experience providing similar services.

West Virginia Bureau for Children and Families (BCF) Child Welfare Family First Assessment (CW-FFA) Project	
Project Dates	December 2018 – November 2019
Planned and Actual Completion Date	Planned: December 3, 2018 Actual: To be determined (project underway)
Planned and Actual Budget	Actual: $1,765,590 Planned: To be determined (project underway)
Project Description	BerryDunn is providing project management, assessment, planning, and implementation support services to the West Virginia Department of Health and Human Resources (DHHR) to help ensure that the State of West Virginia is aligned and compliant with the Family First Prevention Services Act (FFPSA, or Family First). The purpose of this project is to guide and assist the Bureau for Children and Families (BCF) to design and enact programmatic changes resulting from the FFPSA.
BerryDunn's Responsibilities	BerryDunn's scope of work includes the following services: • Project Management: The BerryDunn team is responsible for initiation, execution, control, and monitoring of project activities in accordance with the approved Project Management Plan. • Family First Current-State and Compliance Impact Assessment: BerryDunn is identifying priorities for Family First compliance activities based on DHHR direction, and is performing the impact assessment work accordingly. An approach and plan for each individual impact assessment is being developed in collaboration with DHHR. The result will be a deliverable for each identified FFPSA section in the form of a report, which will document BerryDunn's findings regarding the impact of FFSPA requirements on current-state processes in the following areas: o DHHR policies o Financials o Business operations o Stakeholders o Systems • Research and Analysis: BerryDunn is providing coverage of related state and national work group calls at the request of DHHR, producing notes for each call. BerryDunn is providing continued research and analysis related to monitoring compliance with system-related provisions, and is summarizing findings in a concise manner suitable for the intended use and audience. • Work Group Facilitation: BerryDunn is assisting with stakeholder engagement (coordination, planning, preparation, facilitation) as well as

West Virginia Bureau for Children and Families (BCF) Child Welfare Family First Assessment (CW-FFA) Project	
	additional tasks related to determined Family First gaps, compliance, and needs for implementation. This includes performing activities to help DHHR collaborate with public child welfare agencies, private child-serving agencies, behavioral health and substance abuse providers, the Court Improvement Project, local court jurisdictions, and children and families.
Project Outcomes	The primary outcomes of the Child Welfare Family First Assessment (CW-FFA) project include: • An Impact Assessment and understanding of the current processes and procedures affecting West Virginia's compliance with the FFPSA across numerous domains, including policies, financials, business operations, stakeholders, and systems. • A Compliance Gap Analysis based on the current state assessment and the Impact Assessment(s), in order to assist DHHR in identifying remaining work to achieve FFPSA compliance. • Prioritization of the identified compliance gaps, development of strategies to address the selected gaps, and assistance with implementation of the strategies. • Analysis of new rules, regulations, and policy changes related to the FFPSA, which may affect program compliance. • DHHR compliance with the FFPSA.
Client Contact Information	Mr. Jeremiah Samples Deputy Secretary West Virginia DHHR 1 Davis Square, Suite 100E Charleston, WV 25301 304-356-5405 (office phone) Jeremiah.samples@wv.gov 
Prime or Subcontractor?	BerryDunn serves as prime contractor for this engagement.

Washington, D.C. Child and Family Services Agency (CFSA) Family First Prevention Services Act (FFPSA) Readiness Assessment, Planning, and Initial Implementation of Prevention Services *(project performed by Chapin Hall)*	
Project Dates	July 2016 to present – annually funded engagement; FFPSA readiness and planning began in June 2018
Planned and Actual Completion Dates	Planned: July 2016 to present Actual: July 2016 to present – annually funded engagement; FFPSA readiness and planning began in June 2018 to present
Planned and Actual Budget	Planned and Actual Budget: The project budget is a component of a larger, multi-jurisdiction focused foundation-funded partnership, so it is difficult to show a planned budget number; more details can be provided by Chapin Hall if required by the State.
Project Description	In 2018, the District of Columbia embarked on a comprehensive and cross sector readiness assessment and planning effort to inform implementation of the FFPSA. The District of CFSA is an early adopter of the Family First prevention services opportunity and quickly engaged its stakeholders and sister public agencies to join in the readiness assessment and planning process. In order to access title IV-E funding for prevention services as provided for in Family First, CFSA was required to develop and submit a Prevention Plan to the federal Children's Bureau for approval ahead of implementation on October 1, 2019. Chapin Hall, a long-standing capacity-building partner of CFSA's with funding from Casey Family Programs, provided its readiness assessment and planning framework and suite of tools to guide visioning, decision-making and the development of CFSA's Prevention Plan. CFSA and its stakeholder partners submitted the first in the nation Prevention Plan to the Children's Bureau and is readying for implementation on October 1. CFSA is redesigning the services and supports provided to children and families at risk of entering foster care. Additionally, the District of Columbia, as a result of the visioning and planning effort, will be leveraging Family First to create opportunities for intervening with families for whom primary prevention could stave off potential crises thus further reducing the number of children and families who become known to child protection. Together CFSA and Chapin Hall are working to develop an implementation approach for the Prevention Plan, guiding an implementation team to lead the effort, and readying for the transformative redesign of prevention services and child welfare in the District of Columbia.
Chapin Hall's Responsibilities	Key activities led by Chapin Hall include: 1. **Provided capacity building with CFSA leaders for 10 months,** including support with technical aspects of the Family First legislation and strategy for planning and implementation.

Washington, D.C. Child and Family Services Agency (CFSA)
Family First Prevention Services Act (FFPSA) Readiness Assessment, Planning, and Initial Implementation of Prevention Services *(project performed by Chapin Hall)*

2. **Co-designed agendas and co-facilitated the Family First Planning work group meetings with agency leaders, providers, stakeholders and sister agencies, and meetings of three subgroups including primary prevention, data informed target population/Candidate selection, and service array/EBPs.** The Family First Planning work group met from July 2018-January 2019, comprising leadership and staff from sister agencies and community providers as well as key programmatic and operational areas within CFSA. The purpose of the group was to (a) gain a shared understanding of Family First as a lever for change, (b) develop a shared vision for Family First in the District of Columbia and how families could be served differently, and (c) initiate coordination and collaboration for serving families more holistically across systems in the District. The work group (and subsidiary subgroups) took the lead on using data provided by CFSA and sister agencies to develop recommended target populations for Family First in D.C. and a proposed evidence-based practice service array in alignment with the legislation and the identified needs of children and families. These recommendations were largely adopted by CFSA and were at the center of the Family First theory of change in the District's prevention plan, which was submitted to the Children's Bureau in early April.
3. **Co-led business process mapping of prevention services.** Chapin Hall facilitated business process mapping sessions with CFSA leadership and staff to reflect current operations as well as future-state operations under Family First. The process mapping enabled CFSA to identify areas where process, practice, and tools need refinement under Family First to support development of an implementation work plan. The "future state" business process maps are being recrafted for use in training, IT development, and policy development prior to implementation of Family First.
4. **Conducted action and vision oriented qualitative assessment interviews with key agency leaders.** Chapin Hall facilitated a series of assessment sessions with CFSA leadership from relevant programmatic and operational areas to explore readiness for implementation of Family First. Chapin Hall's readiness assessment, planning, and implementation suite of tools was used to structure these conversations: for each component relevant to their role, leaders were asked to assess the agency's degree of readiness and highlight changes needed to prepare for Family First. The assessment interviews served as a useful forum for agency leadership to understand and explore the requirements and vision for Family First relevant to their own roles and operational functions, and to reflect on both technical and adaptive changes required to ensure the successful launch on October 1, 2019.

Washington, D.C. Child and Family Services Agency (CFSA) Family First Prevention Services Act (FFPSA) Readiness Assessment, Planning, and Initial Implementation of Prevention Services *(project performed by Chapin Hall)*	
	5. **Informed and contributed to implementation plan development.** The readiness assessment yielded a detailed accounting of tasks required to prepare the agency and partners for Family First. Chapin Hall provided a capture tool to collect information and supported the translation of information into the agency's Family First implementation plan. 6. **Promoted development of a Family First implementation team.** CFSA recently launched a Family First implementation team to lead and oversee execution of all tasks within the implementation work plan. The team comprises key agency leadership who are responsible for attending weekly implementation team meetings and carrying out assigned Family First preparation and readiness tasks in their administrations. Chapin Hall supported development of a charter for the team to guide their efforts and participates in implementation team meetings. 7. **Synthesized content and co-drafted the Prevention Plan.** Chapin Hall co-authored CFSA's prevention plan, which was submitted to the Children's Bureau in April 2019, the first plan submitted by any jurisdiction. The plan reflects key decisions made in the Family First Planning work group and identified throughout planning process described above. Key activities planned for the Chapin Hall team to complete in the coming months include: • Provide capacity building and expertise to the Family First implementation team as they execute the implementation plan. • Further the agency's continuous quality improvement (CQI) infrastructure and processes to prepare for the evaluation and CQI requirements in Family First. • Explore opportunities to map and improve business processes related to referring families to evidence-based practices, monitoring fidelity of EBPs, and tracking improvements in family functioning to reduce entry into foster care.
Project Outcomes	The District of Columbia and CFSA will benefit by: • Implementing the FFPSA in October 2019, which will positively transform the child welfare system for the children and families of the District of Columbia. • Redesigning the prevention service array to better meet the assessed needs of children and families and reduce the risk of foster care entry. • Maximizing relationships across sister agencies, community-based organizations, and stakeholders to design a more holistic approach to meeting child and families' needs.

Washington, D.C. Child and Family Services Agency (CFSA) Family First Prevention Services Act (FFPSA) Readiness Assessment, Planning, and Initial Implementation of Prevention Services *(project performed by Chapin Hall)*	
	• Developing an effective approach to readiness, planning, and implementation that will result in long-term sustainability of the child welfare transformation underway.
Client Contact Information	Ms. Brenda Donald, Director Child and Family Services Agency Phone: 202-442-6100 | Fax: 202-727-6505 Email: Brenda.donald@dc.gov 
Prime or Subcontractor?	Chapin Hall serves as prime contractor for this foundation-funded engagement via Casey Family Programs.

Colorado Department of Human Services (CDHS) Child Welfare Practice Model and Business Process Redesign Project *(Project performed by Face-to-Face)*	
Project Dates	December 2011 – June 2015
Planned and Actual Completion Date	Planned: June 2015 Actual: June 2015
Planned and Actual Budget	Planned: $300,000 per year (subcontractor contribution to budget was between $103,000 and $150,000) Actual: As Planned
Project Description	The Colorado Child Welfare Practice Initiative Project was a technical assistance project sponsored by the Children's Bureau. This project was specifically focused Colorado child welfare practice reform. The three-year project was a collaborative effort with the State and county stakeholder teams to define and implement a Colorado child welfare practice and process model, with a focus on providing technical assistance to ensure improved capacity for data measurement and quality assurance. The Colorado Practice Model (CPM) Project was developed by 32 child welfare professionals, stakeholders, and consumers. The practice model was designed to guide Colorado child welfare services at both State and county levels addressing the challenges of a county-administered State. The Vision, Mission, and Values of the Colorado child welfare system were incorporated into the standards of practice for every phase of service, documented in process mapping by specific tasks relative to service delivery to meet organizational standards. Face-to-Face was contracted for the full three years to provide onsite project management, implementation management, facilitation of all State and county process mapping working sessions, development of practice model indicators, and support the State project team in development of evaluation measurement. When the federal three-year contract was closing out in 2014, the State contracted directly with Face-to-Face to provide implementation support for the Quality Practice Team initiative in 2014 – 2015. The Quality Practice Teams were created to implement CQI in all 64 counties. The Face-to-Face team traveled with State partners to each county to train fidelity to the process and practice model and to use county specific data to inform practice decisions to lead to improvement of outcomes.
Face-to-Face IT's Responsibilities	Key activities led by Face-to-Face include: • Leading child welfare business process mapping sessions to document State standards. • Tailoring the child welfare standard process maps to incorporate individual county requirements, while maintaining fidelity to the model.

Colorado Department of Human Services (CDHS) Child Welfare Practice Model and Business Process Redesign Project *(Project performed by Face-to-Face)*	
	• Identifying opportunities for improvement at both State and county levels using data to inform the team of challenge areas. • Designing Child Welfare Practice Standards and Practice Indicators that are both measurable and observable. • Creating Peer-to-Peer county CQI groups to share successes and brainstorm challenges. This provided a continuous feedback loop to improve practice and processes, offer a venue for counties to scale their identified best practices.
Project Outcomes	• Implementation of a Statewide Child Welfare Practice Model that was flexible enough to apply to all 64 counties that provides measurable service delivery standards for quality service delivery for clients in urban, suburban, and rural geographical locations. • Realigning processes to meet state policy standards across all 64 counties and redesigning processes to improving the quality, accuracy, and efficiency of the service delivery to families, youth, and children. This ensured the quality of service delivery on a statewide measurable baseline. • Implementation of CQI through training, coaching and mentoring. This included onsite working sessions with every county CQI team, and follow on virtual support sessions for the Peer-to-Peer county teams. • Development of State and county data dashboards aligned with the practice and process model identified outcomes and Child and Family Service Review (CFSR) reviews.
Client Contact Information	Mr. Andrew Johnson, Manager, Youth Services Unit Office of Children, Youth and Families Phone: 720-203-9255 Email: andrew.johnson@csh.org
Prime or Subcontractor?	Face-to-Face served as a federal subcontractor for three years and as prime contract for the final year. As subcontractor, Face-to-Face had full project management responsibilities including project activities from kickoff to close out including: - Development and maintenance of the project plan - Status Reporting and results presentation to State administration and county administration - Facilitation of the full series of business process mapping and redesign for the entire practice model/all phases of child welfare case management - Facilitation of policy reviews and practice development working sessions to define the CPM

Colorado Department of Human Services (CDHS) Child Welfare Practice Model and Business Process Redesign Project *(Project performed by Face-to-Face)*
- Monthly county stakeholder reviews of dashboard data to measure fidelity to the model - Onsite working sessions with each of the 64 counties - Development and Delivery of the CQI training - Coaching the Quality Practice Teams in CQI - Presentation at 2 annual Federal Grantee sessions per year - Peer-to-Peer meeting participation with all states in Region 8 - Peer-to-Peer Monthly conference calls with New Mexico practice model team This counted for approximately 33% of the budget.

In addition to the three projects provided above, Table 1 includes a partial list of additional relevant projects performed by BerryDunn and other members of our project team. Due to the extensive number of HHS projects that the BerryDunn Government Consulting Group and our partners for this project engaged in over the last 33 years, we have only provided a sample of projects within this table. However, we would be pleased to provide additional information should CFS desire it.

Table 1: Additional Examples of the BerryDunn Project Team's Relevant Experience

Client – Project	Description
Arizona Division of Developmental Disabilities (DDD) – Feasibility Study for IT System Replacement	BerryDunn provided current state assessment and **gap analysis review for the DDD system and associated business processes**. This included developing recommendations for modernizing the IT solution to track and improve service delivery to DDD clients. (2018) *Proposed team members with experience on this project include: Danielle Ewing, Naomi Snodgrass, Jessica Dill*
Arizona Office of the Auditor General – Independent Review and Audit	Chapin Hall conducted an **independent review and audit of the State's child safety system and the Department of Child Safety**. Chapin Hall conducted a legislatively mandated examination of the systemic risks and relative strengths of the child safety system in Arizona. To create a set of empirical recommendations for reform and development, Chapin Hall conducted interviews and focus groups across the state, surveyed staff at all levels, and completed administrative data analysis, policy analysis, and a literature review. Based on this examination and the resulting recommendations, Chapin Hall provided consultation on the establishment of a new Department of Child Safety with a focus on implementation challenges and conducted follow-up review of implementation of new practices to document preliminary findings. (2014 to 2015) *Proposed team members with experience on this project include: Dana Weiner and Clare Anderson*
Center for States – Child Welfare Subject Matter Expertise	Chapin Hall partners with ICF International as a subcontractor in their work with the Children's Bureau on the Capacity Building Center for States, the primary federal technical assistance provider for state child welfare agencies. Within this collaboration, Chapin Hall delivers **subject matter expertise across a range of child welfare issues; supports states in their implementation of systems change initiatives,** including CFSR Program Improvement Plans (PIPs); and provides guidance and technical assistance in the development and submission of federal reports. *Proposed team members with experience on this project include: Clare Anderson*
Colorado Department of Human Services (CDHS) – Needs Assessment	BerryDunn provided CDHS with a **needs assessment, gap analysis, best practices report, options analysis and recommendations**, and **resource assessment and action plan** for their childcare automated tracking system

Client – Project	Description
	(2014). In 2018, our team provided CDHS with an **operational, financial, and account review of automated support and enforcement processes and system in compliance with federal system certification guidelines** set forth in the latest version of "Automated Systems for Child Support Enforcement: A Guide for States" issued by the Administration for Children and Families (ACF), Office of Child Support Enforcement *Proposed team members with experience on this project include: Charlie Leadbetter*
Colorado Practice Model (CPM) Project – Framework and Standards Development	Face-to-Face supported CPM through **facilitation and development of a practice framework and standards** for the CPM with 64 county stakeholders and the state team. Face-to Face also assisted in **development and implementation of practice strategies and training**. (2011 to 2013) *Proposed team members with experience on this project include: Mary Iannone-Walker, Libby Wells*
Colorado Trails – SACWIS Development Project	Face-to-Face provided on-site **application support and training to end users statewide** for the project implementation phase. (1997-2000) *Proposed team members with experience on this project include: Iannone-Walker, Libby Wells*
Federal Children's Bureau Capacity Building Collaborative – Center for States and Center for Tribes	Face-to-Face provided **project management, strategic planning, capacity building, and knowledge transfer** approaches for state and tribal teams. (2016 to present) *Proposed team members with experience on this project include: Mary Iannone-Walker*
Hawai'i Department of Human Services Med Quest Division (MQD) – Organizational and Business Process Redesign	In 2017, the Hawai'i MQD embarked upon an Organizational Transformation Project to optimize its client service delivery model. To assist with the effort, MQD engaged BerryDunn to perform an **operational assessment of its client-facing sections** and to provide—and help implement—**recommendations to improve the effectiveness and efficiency of the delivery of services** in a way that best leverages the capabilities of its integrated eligibility system (IES). Key services included performing an organizational and operational assessment, leading business process improvement and redesign efforts, developing training materials, facilitating a leadership development series, overseeing organizational change management and communication efforts, and assisting with implementation of the new service delivery model. (2017 to present) *Proposed team members with experience on this project include: Danielle Ewing*

Client – Project	Description
Illinois Department of Children and Family – Family Services Review	In 2019, Chapin Hall conducted a **systemic review of critical incidents in Intact Family Services.** The report may be found at the following link: https://www.chapinhall.org/wp-content/uploads/Systemic-Review-Critical-Incidents.pdf *Proposed team members with experience on this project include: Dana Weiner and Michael Cull*
Los Angeles County – Governance and Strategic Planning	In Los Angeles County, Chapin Hall is partnering with the Department of Children and Family Services in the development of an outcomes oriented governance structure and **processes to give child welfare leaders a more transparent and intentional approach to decision-making, resource allocation, strategy selection and outcomes monitoring.** Chapin Hall is also supporting the development of a new strategic plan that streamlines and prioritizes outcomes for improvement and the key strategies needed. *Proposed team members with experience on this project include: Jennifer O'Brien, Sonali Patel, Clare Anderson*
Maryland Child Welfare – System Transformation	Chapin Hall is working with the State of Maryland to **transform the quality of child welfare and adult services and improve critical safety, permanency, and well-being outcomes for children, families, and vulnerable adults.** A critical element of this collaboration is developing and implementing the Department of Human Services' Social Service Agency's "Integrated Practice Model." The Integrated Practice Model builds on the agency's foundational family-centered practice, older youth, and adult services practice frameworks to include an explicit understanding of trauma's impact on families and the workforce. All assessments are aligned with the practice model to ensure evidence informs decision-making across the continuum of care. Maryland and Chapin Hall are working together to ensure the practice model is meaningfully incorporated into all aspects of agency infrastructure and processes, including hiring practices, policy, training curricula, coaching methodologies, and CQI practices. *Proposed team members with experience on this project include: Miranda Lynch, Clare Anderson*
Massachusetts Health Information Exchange(HIX)/Integrated Eligibility Solution (IES) – Financial Review and Cost Allocation Planning	BerryDunn has helped the Commonwealth to develop methodologies to allocate costs for the IES between Medicaid, CHIP, HIX grants, and State General Fund. We helped the Commonwealth **to identify measures to allocate cost to the benefitting programs while maximizing the allocation to Medicaid and CHIP.** We worked with the Commonwealth to find the measure that best allocates costs so that the Commonwealth's allocation plan would be compliant with federal regulations while maximizing the recoveries of federal revenues from Medicaid and CHIP, which are non-capped entitlement programs. (2012 to 2017) *Proposed team members with experience on this project include: Steven*

Client – Project	Description
	Whitney
New Hampshire DHHS– Public Assistance Cost Allocation Plan (PACAP)	BerryDunn is working to update DHHS' current PACAP. The team is conducting **a thorough analysis of DHHS and its existing cost allocation and recovery model, and will develop a new PACAP that maximizes the State's recovery of federal funds and complies with federal cost accounting** and allocation requirements. (2019) *Proposed team members with experience on this project include: Steven Whitney*
New York City Division of Policy Planning, and Measurement – Capacity-Building for Prevention Services	In New York City, Chapin Hall partnered with the ACS Division of Policy, Planning, and Measurement in New York City **to inform practice and decision-making related to families receiving prevention services.** To inform practices, Chapin Hall developed a case review survey tool, completed business process mapping, surveyed staff, and provided technical assistance around implementation of the Child and Adolescent Needs and Strengths. Data analytics informed service delivery decision-making. In collaboration with agency staff, Chapin Hall experts co-designed a CQI approach being implemented across ACS and its private providers. *Proposed team members with experience on this project include: Dana Weiner, Clare Anderson*
Tennessee – implementation of Title IV-E Waiver	Chapin Hall has supported seven jurisdictions in the implementation of the title IV-E waiver, to include Tennessee, which included supporting the scale up of evidence-based interventions **to help improve the quality of foster parenting and increase placement stability, development of a implementation and governance structure for fidelity monitoring, and strengthening CQI infrastructure and approach.** Chapin Hall provided leadership coaching on strategy development, deployment and tracking to improve overall system functioning. *Proposed team members with experience on this project include: Clare Anderson*
Texas Department of Family and Protective Services – Enterprise Applications Change Program Project	Face-to-Face **supported the Texas Information Management Protecting Adults and Children in Texas (IMPACT) system enhancement** project through business analysis and as-is mapping, facilitation of requirements definition sessions, and definition of to-be business processes and workflows. (2017) *Proposed team members with experience on this project include: Libby Wells*
Texas HHS Commission – Performance Management and Data Analytics Project	Face-to-Face provided lead support for the development of the full set of project delivery framework documents, including the Vendor Statement of Work, RFP Evaluation Criteria, Business Case, Project Plan, Acquisition Plan,

Client – Project	Description
	RFOs and Federal Advance Planning Document. They also provided vendor oversight of the Data Strategy Assessment and Technical Solution Implementation for an **enterprise-wide solution to support all HHS departments; Medicaid, child support, Supplemental Nutrition Assistance Program (SNAP), TANF, childcare, child support, and IV-E eligibility for child welfare.** (2018 to 2019) *Proposed team members with experience on this project include: Mary Iannone-Walker*
University Nevada School of Medicine (UNSOM) Mojave Mental Health – Medicaid Rate Review and Recommendation Report	BerryDunn analyzed the mental health and physical health services provided by the Mojave clinic in partnership with the prime contractor, The Baldacci Group. Through this initiative, **we assessed the costs associated with each mental and physical health service offered by the Mojave clinic to identify the costs and revenues associated with each service.** BerryDunn reviewed how Mojave allocated costs between Medicaid and State funds by analyzing all claims data as well as Mojave's Cost Allocation Plan (CAP) and Random Moment Time Study (RMTS) for three years to evaluate the clinic's claiming and documentation practices. *Proposed team members with experience on this project include: Steven Whitney*
Vermont Agency of Human Services – Business Process Redesign for Specialized Programs	BerryDunn supported the design of new data collection and reporting processes for HHS programs by documenting the as-is environment; identifying opportunities to **streamline processes, improve client service, and reduce errors and bottlenecks; documenting common data elements required to support the specialized programs in the future (to-be) environment; and eliciting and documenting the high-level to-be vision** desired by the State. We developed documentation, including process maps and supporting narrative for over 100 business processes spanning several HHS departments (2015 to 2016) *Proposed team members with experience on this project include: Danielle Ewing, Charlie Leadbetter*
Vermont Department for Children and Families (DCF) – Child Data System Selection Project	BerryDunn provided the DCF with consulting services to develop requirements for a unified data management system to **improve children and families' data management, financial, and reporting capabilities**. Our team conducted **business process analysis, documentation, and modeling, stakeholder work sessions, requirements development**, procurement assistance, and project management. (2010 to 2012) *Proposed team members with experience on this project include: Charlie Leadbetter*
WAHBE –System Integrator Re-Procurement Planning	BerryDunn has provided services to WAHBE in the **strategizing, planning, documentation, and development of requirements and procurement documents** for WAHBE to contract with a system vendor to take over

Client – Project	Description
	operations of the Washington Healthplanfinder (HPF). This has included development of a staffing model and future financial model, definition of vendor services and requirements and service domains. (2018 to present) *Proposed team members with experience on this project include: Danielle Ewing, Naomi Snodgrass, Jessica Dill*
Washington Health Benefit Exchange (WAHBE) – Financial and Programmatic Audit and APDU Consulting	BerryDunn is currently performing a Financial and Programmatic Audit of the Washington Health Benefits Exchange (WAHBE). The objective of our audit is the expression of an opinion about whether WAHBE fairly presented its financial statements in all material respects, in conformity with U.S. Generally Accepted Accounting Principles and Uniform Guidance examination standards. BerryDunn also helped **WAHBE update its CAPs for Implementation and Operational Advanced Planning Documents (APDs)** to obtain funding for the design, development, and implementation of enhancements to its HPF system, as well as funding for the operations and maintenance of HPF. *Proposed team members with experience on this project include: Steven Whitney*
West Virginia DHHR – Enterprise Portfolio Management Office (EPMO)	BerryDunn is providing project management; business, technical, and policy analysis; and HHS subject matter expertise to the department. We worked with the department to **develop a strategic plan, which identified 25 initiatives necessary to achieve its goals and objectives**. A recommendation that arose from the strategic planning process was the need for a PMO, which would support the use of effective and appropriately scaled project management principles, processes, tools, and techniques in order to implement the 25 initiatives. (2018 to present) *Proposed team members with experience on this project include: Brady Birdsong, Charlie Leadbetter*
West Virginia DHHR–Child Welfare Family First Assessment	BerryDunn is assisting in the development of a current state **assessment of child welfare systems** impacted by FFPSA and the management of sub-projects to help West Virginia's implementation of the FFPSA. (2018 to present) *Proposed team members with experience on this project include: Naomi Snodgrass, Lauren McTear, Sarah Stacki, Jessica Dill, Brady Birdsong*

2.9 SUMMARY OF BIDDER'S PROPOSED PERSONNEL/MANAGEMENT APPROACH

i. The bidder should present a detailed description of its proposed approach to the management of the project. The bidder should identify the specific professionals who will work on the State's project if their company is awarded the contract resulting from this RFP. The names and titles of the team proposed for assignment to the State project should be identified in full, with a description of the team leadership, interface and support functions, and reporting relationships. The primary work assigned to each person should also be identified. The bidder should provide resumes for all personnel proposed by the bidder to work on the project. The State will consider the resumes as a key indicator of the bidder's understanding of the skill mixes required to carry out the requirements of the RFP in addition to assessing the experience of specific individuals. Resumes should not be longer than three (3) pages. Resumes should include, at a minimum, academic background and degrees, professional certifications, understanding of the process, and at least three (3) references (name, address, and telephone number) who can attest to the competence and skill level of the individual. Any changes in proposed personnel shall only be implemented after written approval from the State.

2.9.1 APPROACH TO MANAGEMENT OF THE PROJECT

Our BerryDunn team members have worked together and cultivated relationships with our contractor partners throughout the years, and they will begin this project based on a foundation of trust, respect, and collaboration. The project will be fully supported by individuals who regularly lead or participate in projects of similar size and complexity. Our team includes:

- **Senior professionals** who have decades of experience with the child welfare system and programs, who have supported several states through the Capacity Building Center for States, and who are former state and federal senior leaders in child, youth, and family programs; social workers; and foster parents
- **Subject matter experts (SMEs)** who have dedicated their lives to researching and understanding how to improve the child welfare system and who have in-depth knowledge of "what works"—balanced by real-world, practical insights
- **Experienced team members** who have years of practice honing core capabilities essential for successful project execution: business process improvement stakeholder engagement, facilitation, and information gathering; research and data analysis; implementation planning and oversight; project management; and change management

> *"BerryDunn has been a true partner to West Virginia and is unequivocally the best vendor I have worked with in my nearly 30 years of experience. They bring high-quality people to our projects and have very little turnover in staff, both of which have been key factors contributing to our project successes."*
>
> **Mr. Edward Dolly, Former CIO, Office of Management Information Services, West Virginia Department of Health and Human Resources**

We have carefully selected a core team of senior professionals and skilled business, policy, and technical analysts to bring the expertise and experience needed to provide the services requested by CFS. The core team will be supported by SMEs with deep expertise in child welfare focus areas—such as federal requirements, training, and technology—and administrative staff, such as a technical writer/editor and project coordinator. As with all BerryDunn projects, a firm principal—Charlie Leadbetter—will perform project oversight to commit our firm and team to the project and reinforce the highest quality of our services.

Figure 4, on the following page, presents our proposed project team's organizational structure, designed to promote the success of this project and provide the expertise and high-quality deliverables requested by CFS.

Figure 4: Proposed Project Team Organizational Structure

Our proposed project manager—Danielle Ewing—has more than 20 years of experience leading project teams in complex, high visibility environments. She will leverage the right team members for the right tasks based on each individual's experience and expertise. She will establish clear roles and responsibilities so that each team member is focused on what he or she needs to accomplish within the context of the broader project goals. Danielle will also communicate these roles and responsibilities to the CFS team, minimizing confusion and helping ensure a clear, coordinated approach to project execution.

We have structured our team based on members' areas of expertise, such as organizational functioning, policy, data, CQI, funding/finance, and technology. However, as a core team member and the lead of BerryDunn's State HHS Practice Area for the last eight years, Danielle Ewing is also well informed of the skills of our SMEs and other BerryDunn resources who have experience relevant to this project. This knowledge will enable Danielle to bring these resources into the project as needs arise (e.g., as a result of requests from CFS for expanded reviews). Due to the number of employees in our Government Consulting Group and our wide network of subcontractors, we have the ability to quickly ramp up to address unplanned-for project needs, as required by—and in agreement with—CFS.

We have provided additional information on our approach to managing the project in Section 3.5.1.5: Methodology: Project Management.

2.9.2 STAFF ROLES AND RESPONSIBILITIES

Table 2 provides a brief description of the roles and responsibilities of our proposed project team members. Resumes with detailed information on staff background and qualifications are provided in Section 2.9.3: Resumes.

Table 2: BerryDunn Project Roles and Responsibilities

Name/Project Role	Responsibilities
Charlie Leadbetter *Project Principal*	• Provide engagement management and oversight of our team • Maintain overall responsibility for the quality of BerryDunn's services and deliverables • Confirm CFS' satisfaction with our team and services, and request feedback on opportunities for improvement • Help ensure the full commitment of our firm to this engagement • Provide support for and oversight of our team • Provide subject matter expertise • Participate in meetings and presentations with CFS leadership and the project management team, as appropriate • Review and approve invoices for services before submission to CFS

Name/Project Role	Responsibilities
Danielle Ewing, MBA, MPH *Project Manager*	• Serve as primary point of contact for CFS • Develop and maintain the project work plan and schedule • Maintain the contract set of baseline business requirements and help ensure traceability throughout the project • Lead project initiation and closeout activities • Perform day-to-day project and staff oversight • Manage risks, issues, decisions, and action items • Provide oversight for information gathering meetings and presentations, and lead business process mapping sessions • Oversee and coordinate development of deliverables • Help ensure effective communication and coordination of team members • Provide organizational change management, project management, process improvement, and other subject matter expertise • Manage project team resources • Help ensure project team performs according to BerryDunn guidelines and quality standards
Naomi Snodgrass, MBA *Lead Senior Business Analyst*	• Partner with our project manager and other team members to execute the project work plan • Lead development of project deliverables • Conduct background research and analysis • Facilitate information gathering meetings (including business process mapping sessions) with CFS and external stakeholders • Assist with overseeing and coordinating the work of business analysts • Participate in development of the project status report, and participate in project status meetings as needed
Amy Dworksy, PhD *Principal Investigator and Team Lead – Best Practice and Partnerships*	• Provide child welfare partnerships, stakeholder, and consumer engagement and assessment expertise • Provide child welfare best practice expertise • Provide leadership in the development, analysis, and synthesis of the stakeholder survey • Partner with our project manager and other team members to execute the project work plan • Contribute to development of project deliverables • Conduct background research and analysis
Elissa Gitlow, MSW	• Provide child welfare partnerships, stakeholder, and consumer engagement and assessment expertise

Name/Project Role	Responsibilities
Team Analyst– Best Practice and Partnerships	• Conduct research, analysis, and synthesis on child welfare best practices • Support development, analysis, and synthesis of stakeholder surveys • Partner with our project manager and other team members to execute the project work plan • Contribute to development of project deliverables • Conduct background research and analysis
Clare Anderson, MSW *Team Lead – Policy, Services, and Training*	• Provide child welfare policy, services, and training expertise • Provide leadership in the analysis and synthesis of CFS policies, services, evidence-based practice, and training • Provide child welfare expertise during business process mapping sessions and other information gathering activities • Partner with our project manager and other team members to execute the project work plan • Contribute to development of project deliverables • Conduct background research and analysis
Denali Dasgupta, MUP *Team Analyst – Policy, Services, and Training*	• Provide child welfare policy, services, and training expertise • Conduct research, analysis, and synthesis on CFS policies, services, evidence-based practice, and training • Provide child welfare expertise during business process mapping sessions and other information gathering activities • Partner with our project manager and other team members to execute the project work plan • Contribute to development of project deliverables • Conduct background research and analysis
Michael Cull, PhD *Team Lead – Organizational Functioning*	• Provide child welfare organizational functioning, staffing, contracting, and child protective services reporting and crisis response expertise • Provide leadership in the analysis and synthesis of CFS organizational functioning, staffing, contracting, and child protective services reporting and crisis response • Contribute expertise to best practice and policy analysis • Provide child welfare expertise during business process mapping sessions and other information gathering activities • Partner with our project manager and other team members to execute the project work plan • Contribute to development of project deliverables • Conduct background research and analysis

Name/Project Role	Responsibilities
Tami Walker, MS *Team Analyst – Organizational Functioning*	• Provide child welfare organizational functioning, staffing, contracting, and child protective services reporting and crisis response expertise • Conduct analysis and synthesis of CFS organizational functioning, staffing, contracting, and child protective services reporting and crisis response • Contribute expertise to best practice and policy analysis • Provide child welfare expertise during business process mapping sessions and other information gathering activities • Partner with our project manager and other team members to execute the project work plan • Contribute to development of project deliverables • Conduct background research and analysis
Jesse Renny-Byfield, PhD *Team Lead – Data Analytics and CQI*	• Provide child welfare data analytical and CQI expertise • Provide leadership in the analysis and synthesis of CFS administrative data and CQI capacity • Provide child welfare expertise during business process mapping sessions • Partner with our project manager and other team members to execute the project work plan • Contribute to development of project deliverables • Conduct background research and analysis
Jason Brennan, MPPA *Team Analyst – Data Analytics and CQI*	• Provide child welfare data analytical and CQI expertise • Conduct analysis and synthesis of CFS administrative data and CQI capacity • Provide child welfare expertise during business process mapping sessions and other information gathering activities • Partner with our project manager and other team members to execute the project work plan • Contribute to development of project deliverables • Conduct background research and analysis
Michelle Arnold, MSW *Senior Policy Analyst*	• Provide child welfare expertise on policy, process, and outcomes • Ensure integrated efforts across the teams • Promote comprehensive synthesis of the assessment and recommendations across content areas • Provide team and SME integration • Contribute to development of project deliverables • Conduct background research and analysis

Name/Project Role	Responsibilities
Michelle Prior, MBA *Senior Fiscal Analyst*	• Partner with our project manager and other team members to execute the project work plan • Provide child welfare program funding expertise, including maximizing federal funding • Facilitate targeted interviews and meetings with CFS leaders and staff related to fiscal matters • Participate in other information gathering activities as needed • Contribute to development of project deliverables • Conduct background research and analysis
Lauren McTear *Senior Business Analyst/Process SME*	• Partner with our project manager and other team members to execute the project work plan • Assist with development of the inventory of CFS business processes • Facilitate business process mapping sessions • Provide National Human Services Interoperability Architecture (NHSIA) and HHS business process expertise • Participate in other information gathering activities as needed • Contribute to development of project deliverables • Conduct background research and analysis
Mary Iannone-Walker, MSW *Senior Technical Analyst*	• Partner with our project manager and other team members to execute the project work plan • Provide child welfare program technical/IT system expertise • Facilitate targeted interviews and meetings with CFS leaders, CFS staff, and other State IT stakeholders (e.g., Office of the CIO, DHHR Informational Systems and Technology, and Judicial Branch of Information Technology Division) related to technology matters • Participate in other information gathering activities as needed • Contribute to development of project deliverables • Conduct background research and analysis
Libby Wells *Technical Analyst*	• Partner with our project manager and other team members to execute the project work plan • Provide support to the senior technical analyst and provide child welfare program technical/IT system expertise • Support targeted interviews and meetings with CFS leaders, CFS staff, and other State IT stakeholders (e.g., Office of the CIO, DHHR Informational Systems and Technology, and Judicial Branch of Information Technology Division) related to technology matters • Participate in other information gathering activities as needed

Name/Project Role	Responsibilities
	• Contribute to development of project deliverables • Conduct background research and analysis
Setha Nhoung/Jessica Dill and Sarah Stacki *Senior Business Analyst/Business Analysts*	• Create, refine, and maintain project monitoring and tracking tools • Schedule meetings and interviews with stakeholders • Prepare draft communications and meeting materials • Perform background research • Participate in information gathering, review, and analysis activities • Contribute to development of deliverables, including business process maps • Develop the process map/organizational chart of the current CFS structure and intersection with relevant support Divisions' operations, including State office staff extending into regional staff • Capture meeting notes and action items, and perform follow-up as needed • Provide support to other team members as needed • Establish and maintain the BerryDunn KnowledgeLink SharePoint site, and/or assist with maintaining documentation on CFS' SharePoint site • Archive project materials
Brady Birdsong, MS **Dana Weiner, PhD** **Debra Lewis-Miller** **Jennifer O'Brien, MS** **Mary Alice Mehaffey** **Miranda Lynch, MS** **Sonali Patel, MSW, MBA** **Steve Whitney, J.D.** *SMEs*	• Serve as project advisors and resources to BerryDunn and CFS, drawing on their respective areas of expertise and historical perspective, including, but not limited to: o Child welfare training and learning collaboratives o Technology, including Comprehensive Child Welfare Information System (CCWIS) o Child welfare operations o Cross-systems and stakeholder partnerships o Child welfare organizational strategy, governance, and alignment o CFSR, PIP, and federal requirements o Parent and family engagement o Child and family assessment, case, and permanency planning o Child protective services response o Child welfare practice o Implementation and fidelity monitoring o Use of data and evidence in decision-making o CQI o State and federal policy o Federal funding optimization and cost allocation

Name/Project Role	Responsibilities
	• Support the project team for highly specialized services and based on the needs of the project • Participate in specialized meetings • Contribute to development of deliverables
Various Individuals *BerryDunn Administrative Support (Project Coordinator and Technical Writer/Editor)*	• Schedule meetings • Upload background documentation to Microsoft (MS) SharePoint • Summarize the results of the web surveys using survey tools • Edit/proof deliverables

2.9.3 RESUMES

We have provided resumes highlighting the qualifications and experience of project team members on the following pages. Due to page constraints, we have limited the resumes to three pages for each individual, and resumes are not reflective of the entirety of their experience. In addition, for individuals who are not in key roles (that is, they are in the SME pool to be leveraged if/as needed), we have only included brief biographies for conciseness. We would be pleased to provide additional information and references on these individuals should CFS desire it.

Charles K. Leadbetter, PMP®

Project Principal

Charlie is a principal and leads BerryDunn's State Government Consulting Group. He has served as project manager and participated on project teams for clients in the public sector for over 25 years, with a focus on providing independent and objective services related to strategic planning, organizational assessments, business process improvement, system planning, procurement, and implementation oversight. Charlie has experience managing complex health and human services projects with large BerryDunn and subcontractor teams and utilizes project management best practices during all of his engagements.

Key Qualifications

- 25 years of state agency consulting experience, including with dozens of HHS agencies
- Experience overseeing assessment, planning, and implementation efforts for complex, large-scale change efforts
- Expertise in business analysis, process improvement, and system planning
- Certified Project Management Professional® (PMP)

Relevant Experience

BerryDunn (1993 to present)

West Virginia Department of Health and Human Resources (DHHR)

Child Welfare Family First Assessment (10/2018 to present).

Charlie is serving as the project principal overseeing the development of a current state assessment of child welfare systems impacted by the FFPSA and the management of sub-projects to help West Virginia's implementation of the FFPSA.

Arizona Department of Economic Security/Division of Developmental Disabilities (ADES/DDD) – *Focus HIPAA TCS Compliance Project (04/2019 to present).*

Charlie is the project principal for this engagement to perform an assessment and gap analysis of DDD's compliance and alignment with HIPAA- and CMS- transactions and claim processing code sets and to develop alternatives and an IT roadmap to close gaps and achieve the desired future state.

Washington Health Benefit Exchange (WAHBE) – *O&M System Integrator Re-Procurement Planning (05/2018 to 05/2019).*

Charlie provided leadership and oversight to this engagement to assess, define requirements, and develop an RFP for the re-procurement of an O&M system integrator for the WAHBE.

South Carolina Department of Health and Environmental Control (DHEC) – *EHR System Planning and Procurement Assistance (09/2016 to 05/2018).*

Charlie served as project principal for this project with DHEC to plan for selection and implementation of an EHR. Key activities for this project included assessing the current environment, guiding DHEC through its vision for the desired future state, and performing a needs assessment. Additionally, the project team facilitated joint requirements planning sessions, developed system requirements, and developed an RFP for the EHR.

Vermont Department of Health Laboratory – *Project Management for STARLIMS Laboratory Information Management System (02/2017 to 04/2018).*

Charlie served as the project principal for this project with the Department of Health (DOH), leading initial project recovery activities for the implementation of a laboratory information system. He oversaw the team that helped the State to assess project risks and issues, gather lessons learned from previous project phases, and understand their project management and other project processes to develop a strategy and recommendations to successfully turn the project around to achieve project goals and objectives.

Vermont Agency of Human Services (AHS)

Business Process Redesign for Specialized Programs (02/2015 to 10/2016).
Charlie was principal for this project, working with AHS and Pacific Health Policy Group to develop uniform reporting requirements and business processes via the Health and Human Services Enterprise (HSE) to support state and federal reform initiatives.

HSE Lesson Learned Initiative (03/2014 to 04/2014).
Charlie served as project principal for a "lessons learned" initiative to help the State evaluate the governance, management, and oversight of the initial implementation of this first release of the Health Services Enterprise solution (Vermont Health Connect and MAGI Medicaid eligibility) including the best approach to organizational realignment to meet its goals.

Medicaid Enterprise Solution Risk Assessment, Cost Benefit Analysis, and Implementation Advance Planning Document (IAPD) Development (02/2011 to 04/2011).
Charlie oversaw a risk assessment for Vermont's Medicaid Enterprise System replacement project, as the State considered alternatives for replacing its outdated Medicaid Management Information System (MMIS).

West Virginia Bureau for Children and Families (BCF) – *Project Management for Enterprise Content Management Project (08/2015 to 08/2016).*
As project principal, Charlie provided oversight to the BerryDunn team's collaboration with BCF to develop as-is business processes that depict how the BCF conducts major processes today and identify where bottlenecks, challenges, and redundancies exist.

Massachusetts Executive Office of Education – *Early Education Current and Future Business Process Analysis and Documentation (01/2015 to 12/2015).*
Charlie served as project principal to document and analyze the current and future state business processes related to the Quality Rating Improvement System (QRIS), and develop a roadmap for future process, policy, and system changes.

Colorado Department of Human Services (DHS) – *Childcare Tracking System Needs Assessment and RFP Development (06/2014 to 08/2015).*
Charlie served as project principal to oversee an initiative to provide best practices research, needs assessment, and a feasibility study for the current childcare automated tracking system for the DHS. This project's goal was to understand the current system's technical feasibility relative to the Colorado Childcare Assistance Program. In this role, Charlie was responsible for the quality of work provided to the DHS, including the approval of all deliverables. Subsequently, BerryDunn was contracted to work with the DHS to develop the RFP for the future hybrid tracking system.

Massachusetts Executive Office of Health and Human Services (EOHHS) – *Next Generation Systems Planning Project and MITA SS-A (05/2011 to 02/2015).*
Charlie served as project manager for Massachusetts' Next Generation Systems Planning Project. The initial effort was to complete a MITA SS-A for the Departments of Developmental Services (DDS), Mental Health (DMH), and Public Health (DPH). The CMS MITA SS-A framework was leveraged to enable the agencies to define the current state of their major business processes and technical environment to determine which areas should be matured in order to meet their business needs and vision. Our team listed and prioritized the Commonwealth's goals, documenting the core business processes by agency,

and completing both the as-is and to-be assessment of business and technical capabilities. We then leveraged the information gained from these activities and assisted the agencies in the development of a Consolidated Requirements Document, which served as the basis for the procurement of the next generation system(s). BerryDunn then supported the development of the RFP and worked with EOHHS to procure the next generation system.

State Medicaid Health IT Planning and IAPD Development (10/2010 to 04/2011).
BerryDunn led the development of Massachusetts' State Medicaid Health IT Plan (SMHP), as required by the American Recovery and Reinvestment Act and Health Information Technology Economic and Clinical Health (HITECH) Act. The SMHP serves as the strategic vision for EOHHS as it moves forward with the development of health information technology (HIT) and information exchange activities and will become a critical component of the overall Commonwealth HIT Plan. Following the development of the SMHP, BerryDunn developed the IAPD, which set forth the Commonwealth's funding request and cost justification to CMS. Charlie served as project director for this engagement, where he was responsible for four core teams of BerryDunn and subcontractor resources, along with SMEs and other project resources.

Missouri Department of Mental Health (DMH) – *Electronic Medical Record System Assessment and Long-Range Information Strategy Plan (03/2013 to 04/2013).*
BerryDunn completed an independent assessment of DMH's current information systems, as well as future information system needs as defined by DMH management and the HITECH Act. Based on the team's evaluation, BerryDunn developed an Information Strategy Plan to identify gaps between the current and long-range business and technical needs and provide a roadmap for DMH to acquire, develop, and/or integrate clinical information systems to optimize efficiency and meet state/federal regulatory requirements.

Vermont Department of Children and Families (DCF) – *Project Management and Quality Control for Vermont Family and Children Tracking System (VFACTS) Implementation (02/2011 to 06/2012).*
The Vermont DCF engaged BerryDunn to analyze the current processes and business needs for the Child Development Division's Integrated Services Data Management System. As the result of our analysis, DCF determined the need to procure a new system. BerryDunn then assisted with the development of functional requirements and an RFP document. We then provided project advisory services during the implementation of the selected system. Charlie had responsibility for the quality of work provided to the DCF, including the approval of all deliverables.

Education and Memberships

BS, Computer Science and Economics, University of Maine

Certified Project Management Professional®, Project Management Institute®

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Nick Toumpas, Former DHHS Commissioner (Retired)
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Danielle Ewing, MBA, MPH, PMP®, Prosci® CCP, CPHIMS, LSSGB, CSM

Project Manager

Danielle is a senior manager in BerryDunn's Government Consulting Group with over 21 years of professional experience working in and with the private and public HHS sectors as a clinician, hospital administrator, and consultant to health insurers and state governments. She is focused on providing operational assessment, process improvement, project management, change management, business analysis, and quality assurance services to help HHS clients plan for and successfully implement policy, program, and technology initiatives. Her diverse experience provides her with a solid and multi-dimensional understanding of today's HHS landscape.

Key Qualifications

- 21 years of experience in the HHS sector and over 8 years consulting to state HHS agencies
- Experience providing project management and change management oversight for complex, high-visibility, large-scale system change efforts
- Deep expertise in facilitation and business process improvement and redesign
- Certified Project Management Professional®(PMP), Lean Six Sigma Green Belt, and Change Practitioner

Relevant Experience

BerryDunn (08/2011 to present)

Arizona Department of Economic Security/Division of Developmental Disabilities (ADES/DDD) – *Focus HIPAA TCS Compliance Project (04/2019 to present).*
Danielle is the project manager for this engagement to perform an assessment and gap analysis of DDD's compliance and alignment with HIPAA and CMS transactions and claim processing code sets and to develop alternatives and an IT roadmap to close gaps and achieve the desired future state.

Washington Health Benefit Exchange (WAHBE) – *System Development, Maintenance, and Operations (SDMO) System Integrator Re-Procurement Planning (11/2018 to 05/2019).*
Danielle was project manager for this engagement to assess WAHBE's current state, facilitate visioning sessions and define its desired future state, and define requirements to help it achieve its goals through development of an RFP for an SDMO vendor.

Oregon Enterprise Technology Services (OR ETS) – *Integrated IT Service Management (ITSM) (03/2018 to 06/2018).*
Danielle provided the OR ETS department with business process mapping and analysis services in support of its ITSM system project. This included facilitating process improvement workshops, leading business process mapping sessions, and developing associated process map materials. Danielle then partnered with ETS to identify requirements and to make recommendations addressing the issues identified with existing processes to improve the efficiency and effectiveness of processes to allow ETS to provide greater value to its customers.

Hawai'i Department of Human Services Med-QUEST Division (MQD) – *Organizational and Business Process Redesign (07/2017 to 12/2017 – project remains underway and is in its implementation phase).*
Danielle served in the role of project director/manager for a large-scale organizational and business process redesign effort for the client-facing sections of Hawaii's Med-QUEST Division. Danielle led an

intensive operational assessment of multiple facets of the organization—including organizational structure, workforce, technology, environment, data, training, and policies, procedures, and processes. She led information gathering efforts such as business process mapping sessions, web surveys, listening sessions, targeted meetings, and data analysis, and she analyzed opportunities for improvement based on best practices and Hawai'i's unique needs. The assessment culminated in a report that included findings and prioritized short-and long-term recommendations for organizational transformation of the division, as well as a roadmap and implementation plan. As of May 2019, BerryDunn continues to provide comprehensive implementation support for the recommendations.

Vermont Department of Health Laboratory – *Project Management for STARLIMS Laboratory Information Management System (02/2017 to 04/2018).*
Danielle served as the engagement manager/co-project manager for this project with the Department of Health (DOH), leading initial project recovery activities for the implementation of a laboratory information system. Danielle drove intensive efforts with the State project team to assess project risks and issues, gather lessons learned from previous project phases, and understand their project management and other project processes to develop a strategy and recommendations to successfully turn the project around to achieve project goals and objectives.

South Carolina Department of Health and Environmental Control (DHEC) – *Electronic Health Record (EHR) System Planning and Procurement Assistance (09/2016 to 01/2017).*
Danielle served as project manager for this project with DHEC to plan for selection and implementation of its EHR. Key activities included assessing the current environment, guiding DHEC through its vision for the desired future state, and performing a needs assessment. In addition, Danielle facilitated joint requirements planning sessions, led a team in the development of system requirements, and developed an RFP.

Vermont Agency of Human Services (AHS) — *Business Process Redesign for Specialized Programs (02/2015 to 10/2016).*
Danielle served as project manager for this initiative to develop uniform reporting requirements and business processes via the HSE to support State and federal reform initiatives. She managed several activities including the re-evaluation of existing reporting requirements and data collection for specialized programs across Vermont's Medicaid department and three sister departments; the development of a standardized, streamlined, and integrated list of core data elements; and the development of "as-is" business process maps and the desired "to-be" vision to support specialized programs.

Health Services Enterprise Lessons Learned Initiative (03/2014 to 04/2014).
Danielle served as project manager for a lessons learned initiative to help the State evaluate the governance, management, and oversight of the initial implementation of the first release of the Health Services Enterprise solution (Vermont Health Connect Health Insurance Exchange and MAGI Medicaid eligibility) including the best approach to organizational realignment to meet their goals.

Massachusetts HIX/IES Entities – *IV&V Services (Periodically from 02/2013 to 10/2015).*
Danielle served as the test support lead as part of BerryDunn's IV&V team for the Massachusetts' HIX/IES implementation. Danielle also co-led the HIX/IES Pre-Operational and Operational Readiness Assessments to determine readiness for go live on October 1, 2013, and she did the same for go-live for open enrollment in 2014. She also assisted with completion of testing efforts related to CMS' Blueprint, reviewed deliverables to evaluate compliance with mandatory Affordable Care Act requirements.

Maryland Health Benefit Exchange – *IV&V for Maryland's HBE Implementation (03/2013 to 04/2014).*
Danielle provided project management and subject matter expertise for BerryDunn's IV&V team for the

HBE implementation. In this role, she led the Maryland HBE Operational Readiness Assessment to determine readiness for go-live on October 1, 2013, and developed an associated Corrective Action Plan.

West Virginia Offices of the Insurance Commissioner (OIC) – *Health Insurance Exchange (HIX) Planning (08/2011 to 03/2013).*
Danielle worked with the OIC from 2011 to 2013 on several key activities, including developing the HIX IT Strategic Plan; developing the HIX Business Plan and Financial Sustainability Model; developing a Request for Information (RFI) for a HIX IT solution; and providing policy analysis in areas such as Financial Management and the Navigator Program.

Health Dialog (2007 to 2011)

Danielle served as program manager and director of client services for Health Dialog, a provider of population health management, healthcare analytics, and decision support services. In this role, she managed client relationships on health plan accounts and worked in collaboration with the client to develop and evolve program strategy.

Willamette Falls Hospital (2003 to 2007)

Danielle served as director of ambulatory services, with responsibility for leading all strategic and operational aspects of urgent care, occupational health, and rehabilitation services at the hospital's satellite clinics. She was tasked by the executive team with turning the clinics around and improving scorecard measures including patient and employee satisfaction, clinical quality, and profitability, with significant improvements made in all areas.

Education and Memberships

MPH, Johns Hopkins University and MBA, Marylhurst University

BS, Physical Therapy, University of New England

Certified Project Management Professional® (PMP®)

Lean Six Sigma Green Belt (LSSGB) certification

Prosci® Certified Change Practitioner (CCP)

Certified Professional in Health Information & Management Systems (CPHIMS)

Certified Scrum Master (CSM)

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Naomi Snodgrass, MBA

Lead Senior Business Analyst

Naomi is an experienced business analyst and project manager providing government agencies with project planning, facilitation, and consensus building; organization and process assessment; analysis and prioritization of stakeholder input; research; and data-driven decision-making. She has led project teams in large planning, design, and implementation efforts and has functional knowledge and familiarity with many areas of health and human services processes and programs including: child welfare, children's health programs, eligibility and enrollment, medical claims processing, pharmacy benefit management systems, healthcare provider reimbursement, diseases, and health management.

Key Qualifications

- Government agency consulting experience with a focus on health and human services systems and programs
- Business analysis, project management, process assessment, and facilitation skills
- Extensive strategy, planning, procurement, and implementation expertise

Relevant Experience

BerryDunn (08/2018 to present)

West Virginia Department of Health and Human Resources (DHHR) – *Child Welfare Family First Assessment (10/2018 to present).*
Naomi is assisting with project management, support, and analysis services for the assessment and gap analysis focused on the State of West Virginia's compliance and alignment with the Family First Prevention Services Act.

Washington Health Benefit Exchange (WAHBE) – *O&M System Integrator Re-Procurement Planning (09/2018 to present).*
Naomi supports this project as a procurement specialist to help the BerryDunn team assess, define requirements, and develop an RFP, including innovative staffing, cost, and evaluation approaches for the re-procurement of an Agile model-based operations and maintenance system integrator.

Arizona Department of Economic Security/Division of Developmental Disabilities (ADES/DDD) – *Feasibility Study for IT System Upgrade/Replacement (08/2018 to 12/2018).*
Naomi was responsible for performing cost benefit analysis and developing recommendations about short- and long-term options for modernizing the IT solution for tracking long-term care for the DDD.

Public Knowledge, LLC (08/2000 to 08/2018)

Naomi worked as a management consultant director providing professional services to clients in the areas of project planning and strategy, healthcare systems review and assessment, implementation and testing, and policy development. Relevant project experience includes:

- Provided services to a state organizational readiness team to support an enterprise-wide assessment of the state agency's readiness to undergo a large-scale system project to improve delivery of human services to statewide clients.
- Led the development of training curriculum for use with statewide employees and contractors and served as project advisor for numerous large-scale, statewide system projects with multiple stakeholders in developing strategy, communication, and project tracking/documentation.

- Managed multiple projects with responsibility for budget preparation and tracking, client satisfaction, quality assurance monitoring, staffing, and project team training and mentoring. Naomi led procurement and quality assurance and IV&V assistance to over 10 states in the development and implementation of health and human services systems.

KPMG Consulting (07/1998 to 04/2000)

Naomi worked as health and human services practice manager for multiple projects with responsibility for budget preparation and tracking, client satisfaction, quality assurance monitoring, staffing, and project team training and mentoring. She defined and procured technology enhancements using web-based and e-business solutions for state government clients. Additionally, Naomi developed operations analysis, procurement, training, implementation planning, testing, and requirements definition documents.

Washington State Health Care Authority (05/1995 to 06/1998)

As a training manager, Naomi managed the Basic Health Plan training unit, which supported over 100 operational employees' program training needs. She coordinated procedure and new policy implementation in operational units. She contributed to division-wide decision-making regarding strategic planning and operational policies and practices as member of Basic Health management team.

Swedish Medical Services (10/1994 to 04/1995)

As an application specialist and trainer, Naomi was responsible for implementation and operation of a centralized physician practice management system. She also managed training activities, including development and design of training materials and course, and overseeing training for clinic staff on system operation. She planned and coordinated acceptance test, conversion, and post-implementation support activities for multiple clinics.

KPMG Consulting (04/1989 to 10/1994)

As a health and human services consultant, Naomi provided functional and technical expertise to numerous private-sector and governmental clients in the areas of medical claims processing, provider reimbursement, Medicaid, children's health, and other healthcare policy. She also conducted workflow and operation assessments and large-scale claims audits for claims processing systems in both fee-for-service and managed care environments.

Education and Memberships

MBA, University of Illinois at Urbana

BA, Psychology, University of Illinois at Urbana

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Amy Dworsky, PhD

Principal Investigator and Team Lead – Best Practice/Partnerships

Amy is highly skilled in quantitative and qualitative research methods, analysis of administrative and survey data, and evaluation of programs in partnership with state child welfare agencies. She conducts research focused on youth aging out of foster care, homeless youth, and foster youth who are pregnant and/or parenting as well as the systems in which those youth are involved. Amy is currently the principal investigator (PI) for an evaluation of a home visiting program for pregnant and parenting foster youth and an evaluation of a risk reduction training to reduce infant mortality among the children of young parents in foster care. She is also working on a federally funded project focused on programs for transition-age youth in foster care. Amy has previously been the PI on a number of child welfare-related studies. These include studies of child welfare services involvement among children born to youth in foster care, a program for youth involved in both the child welfare and juvenile or criminal justice system, and a pregnancy prevention and sexual health training for caseworkers and foster parents. Amy was also co-investigator for the Midwest Evaluation of the Adult Functioning of Former Foster Youth, a longitudinal study of young people who aged out of foster care in Illinois, Iowa, and Wisconsin.

Key Qualifications

- Expertise in child welfare policy and practice
- Extensive experience in pregnant, parenting, and homeless youth in the child welfare system
- Dually-involved and transition-age youth in the child welfare system

Professional Positions

Chapin Hall at the University of Chicago (2002 to present)

- *Research Fellow (2014 to present)*
- *Senior Researcher (2004 to 2014)*
- *Researcher (2002 to 2004)*

Institute for Research on Poverty, University of Wisconsin-Madison (1997 to 2002) – *Research Assistant*

Education and Memberships

PhD, Social Work, University of Wisconsin-Madison

MSW, Social Work, Syracuse University

BA, Williams College

Publications and Presentations

Dworsky, A., Wulczyn, F., & Huang, L. (2018). Predictors of running away from out-of-home care: Does county context matter? *Cityscape: A Journal of Policy Development and Research, 20,* 101 –115.

Dworsky, A., & Gitlow, E. (2017). Employment outcomes of young parents who age out of foster care. *Children and Youth Services Review, 72,* 133 – 140.

Dworsky, A., Dion, M.R., Kleinman, R., & Kauff, J. (2016). The Family Unification Program (FUP): A housing option for former foster youth. *Child Welfare, 95,* 9 – 25.

Dworsky, A. (2015). Child welfare services involvement among the children of young parents in foster care. *Child Abuse and Neglect, 45,* 68 – 79.

Dworsky, A., Napolitano, L., & Courtney, M. (2013). Homelessness during the transition from foster care to adulthood. *American Journal of Public Health, 103,* 318 – 323.

Dworsky, A., Aherns, K., & Courtney, M. (2013). Health insurance coverage and receipt of family planning services among current and former foster youth: Implications of the health care reform law. *Journal of Health Policy, Politics and Law, 38(2),* 421 – 440.

Dworsky, A., & Courtney, M. (2010). The risk of teenage pregnancy among transitioning foster youth: Implications for extending state care beyond age 18. *Children and Youth Services Review, 32*, 1351 – 1356.

Dworsky, A., Roller White, C., O'Brien, K., Pecora, P., Courtney, M.E., Kessler, R., Sampson, N., & Hwang, I. (2010). Racial and ethnic differences in the outcomes of former foster youth. *Children and Youth Services Review, 32*, 902 – 912.

Dworsky, A., & Perez, A. (2010). Helping former foster youth graduate from college through campus support programs. *Children and Youth Services Review, 32(2)*, 255 – 263.

Dworsky, A., & Courtney, M. (2009). Homelessness and the transition from foster care to adulthood. *Child Welfare, 88(4),* 23 – 56.

Dworsky, A. (2005). Self-sufficiency of Wisconsin's former foster youth. *Children and Youth Services Review, 27,* 1085 – 1118.

Dworsky, A., & Courtney, M. (2008). Addressing the mental health service needs of foster youth during the transition to adulthood: How big is the problem and what can states do? *Journal of Adolescent Health, 44(1),* 1 – 2.

Dworsky, A., Courtney, M., & Zinn, A. (2007). Child, parent and family level predictors of child welfare services involvement among TANF applicant families. *Children and Youth Services Review, 29*, 802 – 820.

Courtney, M., & **Dworsky, A.** (2006). Short-term outcomes for young adults transitioning from out-of-home care in the U.S. *Child and Family Social Work, 11, 209 – 219.*

Courtney, M., **Dworsky, A.**, Piliavin, I., & Zinn, A. (2005). Involvement of TANF Applicant Families with Child Welfare Services. *Social Service Review*, *79(1),* 119 – 157.

Day, A., **Dworsky, A.**, & Weng, F. (2013). An analysis of foster care placement history and post-secondary graduation rates. *Research in Higher Education Journal, 19,* 1 – 17.

Day, A., **Dworsky, A.**, Fogarty, K., & Damashek, A. (2011). An examination of post-secondary retention and graduation among foster care youth enrolled in a four-year university. *Children and Youth Services Review, 33,* 2335 – 2341.

Day, A., Riebschleger, J., **Dworsky, A.**, Damashek, A., & Fogarty, K. (2012). Maximizing educational opportunities for youth aging out of foster care by engaging youth voices in partnership for social change. *Children and Youth Services Review, 24,* 1007 – 1014.

Dworsky, A. (2018). The role of community colleges in the postsecondary educational attainment of current or former foster youth. In D. McNair and S. Holguin (Eds.), *New directions for community colleges: Supporting foster youth*. Hoboken, NJ: Wiley.

Dworsky, A. (2018). The sexual and reproductive health of youth in foster care. In Elizabeth Trejos and Nancy Trevino (Eds.), *Handbook of foster youth.* New York: Routledge/Taylor and Francis.

Dworsky, A. (2008). The transition to adulthood among youth aging out of care: What have we learned? In D. Lindsey (Ed.). *Child Welfare Research.* New York: Oxford University Press.

Courtney, M., & **Dworsky, A.** (2008). Comparing welfare and child welfare populations: An argument for rethinking the safety net. In D. Lindsey (Ed.). *Child Welfare Research.* New York: Oxford University Press.

Dworsky, A. (2011). Children and adolescents as sources of information in longitudinal studies. In Melton, G., Ben-Arieh, A and Cashmore, J. (Eds.*) Children in Childhood: A Handbook of Child Research.* New York, Sage.

Dworsky, A., Roller White, C., O'Brien, K., Pecora, P., Courtney, M., Kessler, R., Sampson, N., & Hwang, I. (2011). Beyond disproportionality: Are there racial or ethnic differences in foster care alumni outcomes? In D. Green, K. Belanger, L. Bullard, & R. McRoy (Eds.), *Racial Disproportionality in Child Welfare.* Washington, DC: Child Welfare League of America.

Dworsky, Amy & Dasgupta, Denali, (2018). *Housing for Young Adults in Extended Federally Funded Foster Care.* OPRE Report #2018-66, Washington, DC: Office of Planning, Research, and Evaluation, Administration for Children and Families, U.S. Department of Health and Human Services.

Dworsky, A., & Gitlow, E. (2017). *Evaluation of the Regenerations Program for dually involved youth in DCFS care.* Chicago: Chapin Hall at the University of Chicago.

Dworsky, A. (2014). *Families at the nexus of housing and child welfare.* Washington, DC: State Policy Advocacy and Reform Center.

Dworsky, A., Smithgall, C., & Courtney, M. (2014). *Supporting youth transitioning out of foster care. Issue brief 1: Education programs.* OPRE Report # 2014-66. Washington, DC: Office of Planning, Research and Evaluation, Administration for Children and Families, U.S. Department of Health and Human Services.

Dworsky, A. & Dion, R. (2014). *Evaluating housing programs for youth who age out of foster care.* Washington, DC: U.S. Department of Housing and Urban Development.

Courtney, M., **Dworsky, A.**, Brown, A., Cary, C., Love, K., & Vorhies, V. (2011). *Midwest Evaluation of the Adult Functioning of Former Foster Youth: Outcomes at Ages 26.* Chicago, IL: Chapin Hall at the University of Chicago.

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Elissa Gitlow, MSW

Team Analyst – Best Practice/Partnerships

Elissa's research and evaluation efforts are focused on providing actionable information to support solutions that improve the lives of children and families. Her current work includes an evaluation for the Illinois Department of Child and Family Services of a home-visiting pilot program for pregnant and parenting youth who are in the foster care system or who have recently aged out; an evaluation pertaining to the National Youth in Transition Database (NYTD); and a pilot initiative of an infant and early childhood mental health consultation model across early childhood systems in Illinois. Her prior work as a member of Illinois' BUILD Initiative evaluation team for six years coincided with the creation of the Illinois Governor's Office of Early Childhood Development, and helped demonstrate pathways between the various domains that comprise the early childhood learning universe. Elissa has prior experience in child welfare from her time working at Court Appointed Special Advocates (CASA) of Cook County as an advocate supervisor, director of Child Advocacy, and as the program's executive director. At CASA, Elissa was responsible for the implementation of the CASA program, as well as for the supervision of program staff and advocate volunteers.

Key Qualifications

- Child welfare systems and child welfare-involved youth
- Qualitative data collection and analysis
- Child development

Professional Positions

Chapin Hall at the University of Chicago (2006 to present)

- *Researcher (2014 to present)*
- *Associate Researcher (2006 to 2014)*

Court Appointed Special Advocates (CASA) of Cook County (1999 to 2005)

- *Director of Child Advocacy (2001 to 2005)*
- *Interim Executive Director (2003)*
- *Trainer of CASA Volunteers (2000 to 2001)*
- *Advocate Supervisor (1999 to 2001)*

Prevent Child Abuse America (1998 to 1999) – *Senior Specialist, Credentialing*

National Resource Center for Permanency Planning (1997 to 1998)

- *Permanency Planning Specialist (1998)*
- *Information Specialist (1997)*

Selected Projects

Researcher, IL Pregnant and Parenting Youth in Care – Home Visiting Pilot (IL-PPYC) (2015 to 2019)

Researcher, Voices of Youth Count (2016 to 2018)

Researcher, Fussy Baby Network Advanced Training of Healthy Families in Illinois Evaluation (2015 to 2018)

Education and Memberships

MS, Social Work, Columbia University

BA, Sociology and Political Science, New York University

Publications and Presentations

Dworsky, A., & **Gitlow, E.** (2017). Employment outcomes of young parents who age out of foster care. *Children and Youth Services Review, 72*, 133 – 140.

Barak, A., Spielberger, J. & **Gitlow, E**. (2014). The challenge of relationships and fidelity: Home visitors' perspectives. *Children and Youth Services Review, 42*, 50 – 58.

Dworsky, A., **Gitlow, E**., & Ethier, K. (2018). *Evaluation of the Home Visiting Pilot for Pregnant and Parenting Youth in Care: FY 2018 Preliminary Report*. Chicago, IL: Chapin Hall at the University of Chicago.

Dworksy, A., & **Gitlow, E.** (2016*). Evaluation of the Regenerations Program for Dually Involved Youth in DCFS Care*. Chicago, IL: Chapin Hall at the University of Chicago.

Dworsky, A., & **Gitlow, E.** (2015*). What happens to young parents who age out of foster care? Results from the TPSN outcomes study*. Chicago, IL: Chapin Hall at the University of Chicago.

Spielberger, J., **Gitlow, E**., Winje, C., & Harden, A. (2014). *Building a System of Support for Evidence-Based Home Visitation Programs in Illinois: Findings from Year 4 of the Strong Foundations Evaluation*. Chicago, IL: Chapin Hall at the University of Chicago.

Gitlow, E., Banman, A., & Spielberger, J. (2014). *Developing Infrastructure to Support a State System of Prevention*. Presented at The Society for Social Work and Research 2014 Annual Conference, Austin, TX.

Spielberger, J., **Gitlow, E.**, & Dadisman, K. (2012) *Building a Strong Foundation: Enhancing Training and Technical Assistance for Home Visitors in Illinois*. Presented at 2012 EBHV Grantee meeting, Washington, DC.

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Clare Anderson, MSW

Team Lead – Policy, Services, and Training

Clare has nearly 30 years of experience and is a national expert on child welfare policies, programs, and practices. She is a policy fellow at Chapin Hall, where she leads a team devoted to large-scale child welfare improvement in jurisdictions across the country. The team currently is supporting implementation of federal and state policy opportunities, including the title IV-E waiver and the Family First Prevention Services Act, to promote system transformation and improve outcomes for children, youth, and families. Prior to joining Chapin Hall, Clare was the deputy commissioner of the Administration on Children, Youth and Families at the U.S. Department of Health and Human Services, and spent a decade at the Center for the Study of Social Policy providing technical expertise to child welfare systems. She began her career as a frontline social worker.

Key Qualifications

- Child welfare
- Service array and evidence-based practice
- Policy
- Implementation and change management
- System improvement

Professional Positions

Chapin Hall at the University of Chicago (2013 to present) – *Policy Fellow*

Administration on Children, Youth and Families, US Department of Health and Human Services (2010 to 2013) – *Deputy Commissioner*

Center for the Study of Social Policy (2000 to 2010)

- *Senior Associate (2006 to 2010)*
- *Associate (2000 to 2006)*

Children's National Medical Center (1992 to 2000)

- *Victim Services Specialist (1997 to 2000)*
- *Consultant Emergency Response Team (1992 to 1997) – Independent Contractor*

Baptist Home for Children and Families (1993 to 2000)

- *Consultant Clinical Supervisory (1997 to 2000) – Independent Contractor*
- *Director of Clinical and Counseling Services (1995 to 1997)*
- *Senior Clinical Social Worker (1994 to 1995)*
- *Mental Health Therapist and Case Manager (1993 to 1994)*

Selected Grants and Contracts

Project Director; System Assessment, Planning and Readiness for the Family First Prevention Services Act in North Carolina; The Duke Endowment (2019 to 2020)

Project Director; Development of Outcomes Oriented Practice Model; Children's Home Society of North Carolina (2018 to 2019)

Project Director; Capacity Building and Implementation of Child Welfare System Improvement; Chapin Hall – Casey Family Programs Partnership (2013 to 2019)

Education and Memberships

MSW, University of Alabama

Bachelor's, Social Work, University of Alabama

Publications and Presentations

Anderson, C. (2019, May). *Planning for the Family First Prevention Services Act: A conversation among states.* American Public Human Services Association, Washington, DC.

Anderson, C. (2019, April). *Family First assessment, planning and implementation: Chapin Hall framework and state example.* Child Welfare League of America, Washington, DC.

Anderson, C. (2019, January). *Family First readiness assessment, planning and implementation: Chapin Hall framework and tools.* National Alliance for Children's Trust and Prevention Funds, Webinar.

Anderson, C. (2018, October). *The Family First Prevention Services Act: Opportunities for partnerships and transformation.* Global Alliance for Behavioral Health and Social Justice, Denver, CO.

Anderson, C. (2018, August & 2018, July). *Assessing and planning for the Family First Prevention Services Act.* Casey Family Programs Family First Regional Convenings, Seattle, WA & Atlanta, GA.

Anderson, C. (2018, July). *Child Welfare 101* National Conference of State Legislatures; Denver, CO.

Anderson, C. (2018, April). *21st Century Strategies for Outcomes Driven Continuous Quality Improvement* Child Welfare League of American Annual Conference; Washington, DC.

Anderson, C. (2018, April). *Entry and Exit Data: Leveraging Simple Metrics for Continuous Quality Improvement* Casey Family Programs, Title IV-E Waiver Demonstration Projects Convening; Chicago, IL.

Anderson, C. & Legters, L. (2018). Well-Being as a frame for practice and policy for young people who have experienced crime and victimization. *2018 National Crime Victims Rights Week Blog.*

Anderson, C. (2016). Early trauma and health. *Health Affairs, 35*(3) 547 –548.

Anderson, C. & Patel, S. (2015). Child welfare and systems of care: Opportunities for partnerships. *Issue Brief.* National Technical Assistance Network for Children's Behavioral Health.

Anderson, C. et al. (2011). Evidence-based practices for children exposed to violence: A selection from federal databases. U.S. Department of Justice and U.S. Department of Health and Human Services.

Committee on supporting the parents of young children, National Academies of Science. (2016). *Parenting matters: supporting parents of children ages 0-8.* Washington, DC: The National Academies Press.

Editor, U.S. Department of Health and Human Services. (2014). *Four-part series: Integrating safety, permanency, and well-being in child welfare.*

- Integrating Safety, Permanency and Well-being: View from the Field (Wilson, C.)
- A Comprehensive Framework for Nurturing the Well-being of Children and Adolescents (Biglan, A.)

- Screening, Assessment, Monitoring Outcomes, and Using Evidence-based Practices to Improve the Well-being of Children in Foster Care (Conradi, L. et al)
- A Case Example of the Administration on Children, Youth, and Families' Well-being Framework: KIPP (Akin, B. et al)

Killos, L., Roller White, C., Pecora, P. J., Maher, E., O'Brien, K., Danielson, D., & Anderson, C. (2015). Strategies to improve the use and usefulness of research in child welfare. *Special Issue: Research, Child Welfare Journal, 94*(2) 33 – 56.

Samuels, B. H. and Anderson, C. (2014). Well-being: Federal attention and implications. *CW360°. Attending to Well-Being in Child Welfare. 4-6.* Center for Advanced Studies in Child Welfare.

Samuels, B.H. et al. (2012). Integrating safety, permanency, and well-being for children and families in child welfare: A summary of administration on children, youth, and families projects in FY 2012. U.S. Department of Health and Human Services.

Samuels, B.H. et al. (2012). Child welfare waiver demonstrations for fiscal years 2012 – 2014. Information Memorandum: ACYF-CB-IM-12-05. U.S. Department of Health and Human Services.

Samuels, B.H. et al. (2012). Promoting social and emotional well-being for children and youth receiving child welfare services. Information memorandum: ACYF-CB-IM-12-04. U.S. Department of Health and Human Services.

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Jennifer Williams, Administrative Commissioner, Office of Continuous Quality Improvement
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Denali Dasgupta, MUP

Team Analyst – Policy, Services, and Training

Denali investigates how systems and programs can support vulnerable youth and children through adolescence and into adulthood. She has a particular interest in helping program leadership and staff leverage administrative data to better understand their youth populations and their program strategies. Denali works on both the qualitative and quantitative aspects of mixed-methods design studies. Her research projects have provided evaluation and implementation support to federal and state programs, city agencies, and community organizations. Prior to joining Chapin Hall, Denali worked in housing, demographic, and municipal finance research for the Citizens' Housing & Planning Council and the Campaign for Fiscal Equity.

Key Qualifications

- Child welfare
- Administrative data use
- Continuous quality improvement systems

Professional Positions

Chapin Hall at the University of Chicago (2011 to present)

- *Researcher (2015 to present)*
- *Associate Researcher (2011 to 2015)*

Campaign for Fiscal Equity (2010) – *Associate Director for Policy*

Office of the New York City Comptroller (2008 to 2009) – *Policy Analyst*

Citizens Housing and Planning Council (2007 to 2008) – *William R. Ginsberg Fellow/Research Analyst*

NYU Rudd Center for Food Policy and Obesity (2007 to 2008) – *Project Associate, Advanced Project in Urban Planning*

NYU Furman Center for Real Estate and Policy (2006 to 2007) – *Research Assistant*

Education and Memberships

MUP, Urban Planning, New York University Robert F. Wagner School of Public Service

BA, Linguistics, Yale University

Publications and Presentations

Kull, M., **Dasgupta, D**., Schlecht, C., Dworsky, A., Lynch, M., Hill, Z., & Samuels, B. (2019). *Capacity assessment and integration support for the Washington Department of Children, Youth, and Families: Final report.* Chicago, IL: Chapin Hall at the University of Chicago.

Burkhardt, T., **Dasgupta, D**., Schlecht, C., Carreon, E., & Pacheco-Applegate, A. (2018). *Chicago Young Parents Program Evaluation: Implementation Evaluation and Follow-Up Study*. Chicago, IL: Chapin Hall at the University of Chicago.

Dworsky, A. & **Dasgupta, D.,** (2018). *Housing for young adults in extended federally funded foster care. OPRE Report #2018-66*, Washington, DC: Office of Planning, Research, and Evaluation, Administration for Children and Families, US. Department of Health and Human Services.

Spain, A.K., Ehrlich, S.B., Cowhy, J.R., **Dasgupta, D.K.,** & Lockaby, T. (2018). *A community effort to support the transition from pre-K to kindergarten.* Chicago, IL: University of Chicago Consortium on School Research and Chapin Hall at the University of Chicago.

Spielberger, J., Axelrod, J., **Dasgupta, D.,** Cerven, C., Spain, A., Kohm, A., & Mader, N. (2016). *Connecting the dots: Data use in afterschool systems.* Chicago, IL: Chapin Hall at the University of Chicago.

Seshadri, R., Smithgall, C., Goerge, R., Ippolito, J., **Dasgupta, D.,** Wiegand, E., Guiltinan, S., & Wood, M. (2015). *Evaluation of teen outreach program in Chicago: Final Impact Report for Chicago Public Schools.* Chicago: Chapin Hall at the University of Chicago.

Dasgupta, D. (2017, June). *Building a program narrative and communicating with data.* Workshop presented at the Chapin Hall Collaborative Data + Practice Summit, Chicago, IL.

Dasgupta, D., Brooks, C. and Mader, N. (2016, May). *Anchor institutions as crucial hubs: The Chapin Hall Collaborative.* Presented at the Council of Large Public Housing Authorities (CLPHA)'s Bringing Education Home: Affordable Housing & Education Summit, Washington, DC.

References

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Pace University
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Michael Cull, PhD

Team Lead – Organizational Functioning

Michael has a strong clinical background working with vulnerable populations, and extensive experience with organizational evaluation and improvement in healthcare and the human services. His approach leverages tools such as organizational assessment, human-centered design, and systems analysis of critical incidents, including deaths and near deaths, to build team culture and help systems learn and improve. Additionally, Michael has specific expertise in applying safety science to improve safety, reliability, and effectiveness in organizations.

Key Qualifications

- Child welfare
- Children's mental heath
- Human-centered design
- Workforce development

Professional Positions

Chapin Hall at the University of Chicago (2018 to present) – *Policy Fellow*

State of Tennessee (2014 to 2018) – *Deputy Commissioner*

Vanderbilt University Faculty Appointments (2002 to 2017)

- *Assistant Professor, Vanderbilt University School of Nursing (2012 to 2017)*
- *Assistant Professor, Psychiatry (2009 to 2012)*
- *Associate in Psychiatry (2002 to 2009)*

Vanderbilt University Medical Center (1999 to 2014)

- *Director of Education and Dissemination, Quality and Patient Safety (2011 to 2014)*
- *Administrative Director, Outpatient Psychiatry (2007 to 2011)*
- *Executive Director, Vanderbilt Community Mental Health Center (2006 to 2011)*
- *Director, Center of Excellence for Children in State Custody (2006 to 2011)*
- *Program Coordinator, Center of Excellence for Children in State Custody (2001 to 2006)*
- *Research Coordinator, Department of Emergency Medicine (2000 to 2001)*
- *Psychiatric Assessment Specialist, Vanderbilt Psychiatry (1999 to 2000)*

Selected Grants and Contracts

Principal Investigator, Casey Family Programs, Partnership for Child Safety (2018 to 2019)

Principal Investigator, Tennessee Department of Mental Health, Tennessee Integrated Court Screening and Referral Project (2010 to 2013)

Principal Investigator, Administration for Children and Families, Children's Bureau, Renewal House Family Connections Demonstration Project (2009 to 2012)

Metro Nashville Public Schools, Counseling Services for Students Receiving Special Education Services (2008 to 2012)

Principal Investigator, Tennessee Governor's Office of Children's Care Coordination and Department of Children's Services, Center of Excellence for Children in State Custody (2007 to 2012)

Principal Investigator, Tennessee Department of Children's Services, Child and Adolescent Needs and Strengths (CANS) Implementation (2006 to 2012)

Education and Memberships

PhD, Public Administration, Tennessee State University, Institute of Government

MSN, Child/Adolescent Psych Mental Health Nurse Practitioner, Vanderbilt University

BSN, Nursing, University of Tennessee Knoxville

Honors and Awards

Distinguished Alumni, Institute of Government, Tennessee State University, 2017

Ambassador of Hope Award (Vanderbilt Center of Excellence), NAMI Nashville, 2008

Silver Achievement Award (Vanderbilt Center of Excellence), American Psychiatric Association, 2004

Publications and Presentations

Fisher, M., Epstein, R., Urbano, R., Vehorn, A., **Cull, M.**, Warren, Z. (2018) A Population-based Examination of Maltreatment Referrals and Substantiation for Children with Autism Spectrum Disorder. *Autism*

Urbano, R., Epstein, R., **Cull, M.**, Vehorn, A., & Warren, Z. (2017). Autism and Child Maltreatment: A Population-Based, Record Linkage Methodology for Studying Children Referred to Child Protective Services. In *International review of research in developmental disabilities* (Vol. 52, pp. 1 – 35). Academic Press.

Vogus, T, **Cull, M**, Hengelbrok, N., Modell, S., & Epstein, R. (2016) Assessing Safety Culture in Child Welfare: Evidence from Tennessee. *Children and Youth Services Review.*

Epstein, R., Schlueter, D., Gracey, K., Chandrasekhar, R., & **Cull, M**. (2015) Examining Placement Disruption in Child Welfare. *Residential Treatment for Children & Youth.*

Morath, J., Fillip, R., and **Cull, M**. (Oct 2014) Through the Eyes of the Workforce: Creating Joy, Meaning, and Safer Healthcare in Perioperative Services. *AORN Journal.*

Cull, M, Rzepnicki, T, O'Day, K., & Epstein, R (Sep 2013) Applying Principles from Safety Science to Improve Child Protection. *Child Welfare.*

Epstein, R., Bobo, W, **Cull, M.**, & Gatlin, D. (Apr 2011). Sleep and school problems among youth in state custody. *Journal of Nervous and Mental Disease.*

Cull, M., Santen, S. & Prisco, L. (Nov 2000) Compassion Fatigue and Burnout: Are Emergency Nurses in a Level One Trauma Center at Risk? (published abstract) *Journal of the Southern Medical Association*

Cull, M, *Team-based Strategies to Advance a Safety Culture.* Invited Keynote 2019 Vermont Statewide Child Welfare Conference, Killington, VT.

Cull, M, *Strategies and Tactics for Safe, Reliable and Effective Teams.* Invited Plenary 2018. Utah Safety Summit, Provo, UT.

Cull, M, *Advancing a Safety Culture in Child Welfare.* Invited Plenary 2018. Colorado Child Welfare Conference, Loveland, CO.

Schlueter D, Jarrett R, Epstein RA, **Cull, MJ**, Chandrasekhar R, Gracey KA. (2018). Dynamic and interactive administrative reporting. Peer reviewed podium presentation, *14th Annual TCOM Conference*, October 3-5, Chicago, IL.
Lomascolo D, Goodpasture T, **Cull, MJ**, Epstein RA. (2017). Using spaced education in child welfare. Peer reviewed poster presentation, *American Evaluation Association Annual Conference.* November 6 – 8. Washington, D.C.

Cull, MJ, Epstein RA, Goodpasture T. (2017). Development of a communimetric measure for child death review in child welfare. *13th Annual TCOM Conference.* October 4 – 6. San Antonio, TX.

Epstein RA, **Cull, MJ**, Jarrett R, Schleuter D, Chandrasekhar R, Butler M, Schaffer A, Gracey K. (2017). Using the CANS to identify potentially problematic prescribing to youth in child welfare. *13th Annual TCOM Conference.* October 4 – 6. San Antonio, TX.

Epstein RA, **Cull, MJ,** (2016). TCOM in Child Welfare. Invited Presentation. *12th Annual TCOM/CANS Conference.* November 16, Princeton, NJ.

Cull, M, *Evidence-based Strategies to Advance a Safety Culture in Child Welfare*. Invited Plenary 2017. One Child, Many Hands, Field Center, University of Pennsylvania, Philadelphia, PA.

Cull, MJ, Epstein RA. (2016). Evidence-based strategies to advance a safety culture in child welfare. Invited keynote presentation. *Annual Conference of the Public Children Services Association of Ohio (PCSAO).* September 21, Columbus, OH.

Cull, M. & Hengelbrok, N. *Evidence-based Strategies to Advance a Safety Culture in Child Welfare.* Invited Keynote 2016. Casey Family Programs Annual Strategic Planning Retreat. Atlanta, GA.

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Tami Walker, LMSW

Team Analyst – Organizational Functioning

Tami conducts research related to issues of child maltreatment and child and family well-being. Through evaluations and time use studies, Tami has had the opportunity to work with numerous child welfare systems and gain a thorough understanding of their policies and processes. She began her career as a frontline worker and social service administrator. This unique background allows her to quickly build bridges of understanding between research and policy professionals and child welfare administrators.

Key Qualifications

- Child welfare system
- Organizational management
- Qualitative research
- Teaching and curriculum development

Professional Positions

Chapin Hall at the University of Chicago (2015 to present) – *Associate Researcher*

University of Tennessee, College of Social Work (2014 to present) – *Adjunct Instructor, Leadership and Advanced Social Work Practice*

University of Louisville, Kent School of Social Work (2014 to 2017) – *Adjunct Instructor, Advanced Social Work Practice I & II*

Center of Excellence for Children in State's Custody, Vanderbilt University (2014 to 2015) – *Program Coordinator*

YWCA of Nashville and Middle TN (2001 to 2003; 2007 to 2014)

- *Senior Director of Domestic Violence Services (2007 to 2014)*
- *Community Living Coordinator (2001 to 2003)*

Destiny Group International (2003 to 2007) – *Program Director (based in Baja, Hungary)*

Education and Memberships

MSW, Social Work, University of Tennessee

BS, Human Services, Henderson State University

Publications and Presentations

Alpert, L., Haight, J., **Walker, T.**, Binkowski, B., (January, 2019). *Interventions to Promote Evidence-Based Decision-Making in Child Welfare.* 22nd Annual Society for Social Work Researchers Conference, San Francisco, CA.

Walker, T., (May, 2018). *Assessing mental health in under six minutes: Using cutting edge technology to diagnose and report on behavioral mental health in foster care youth.* American Public Human Services Association conference, Washington, D.C.

Gibbons, R., Pellegrin, L., **Walker, T**., Wulczyn, F. (February, 2018). *Assessing mental health in under six minutes: Using cutting edge technology to diagnose and report on behavioral mental health in foster care youth.* The Center for State Child Welfare Data, Chapin Hall at the University of Chicago.

Affronti, M., **Walker, T.** (August, 2016). *Including Stakeholder Voices in Waiver Evaluations.* 18th Annual Child Welfare Waiver Demonstration Project Meeting. Washington, D.C.

Feldman, S., Monahan-Price, K., **Walker, T.,** and Weiss, A. (January, 2016). *The view from above: The Relationship Between senior management perspectives and front-line implementation.* 20th Annual Society for Social Work Research Conference. Washington, D.C.

Walker, T. (August, 2015). *Domestic violence and children.* Vanderbilt Center of Excellence for Children in State's custody, Lunch and Learn series. Nashville, TN.

Walker, T. (Quarterly, 2014 – 2015). *Domestic Violence and Motivational Interviewing.* TN Department of Children's Services, CPS Assessment Academy. Nashville, TN.

Walker, T. (Quarterly, 2014 – 2015). *Domestic violence and children.* TN Department of Children's Services, CPS Assessment Academy. Nashville, TN

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Jesse Renny-Byfield, PhD

Team Lead – Data Analytics and Continuous Quality Improvement

Jesse works with child welfare system and community stakeholders to improve practice with data-driven insights. Jesse has over a decade of experience using qualitative and quantitative methods to work collaboratively toward understanding and solving complex social problems. Prior to joining Chapin Hall, Jesse was responsible for overseeing all federal data reporting within a state human services child welfare bureau. Jesse has a rich skill set with expertise in qualitative and quantitative methods, research design, and analyses, and excels at translating complex data into usable products for diverse audiences.

Key Qualifications

- Experience as a state data liaison for NCANDS and AFCARS reporting
- Over a decade of experience designing and managing research projects, including evangelizing results to diverse stakeholders
- Mixed methods researcher with academic and professional expertise in predictive analytics
- Extensive experience developing ethnographic analyses, leading focus groups, and writing surveys
- Comfortable with all phases of research, including data base monitoring, developing data queries, analyzing qualitative and quantitative data, and working solo or in teams

Professional Positions

Chapin Hall at the University of Chicago (2019 to present) – *Researcher*

Iowa Department of Human Services (2016 to 2019) – *Management Analyst*

MSI International (2019) – *Capacity Building Consultant (based in Kabul, Afghanistan)*

Forcier Consulting (2015) – *Methods Consultant/Researcher (based in Juba, South Sudan)*

IDS International (2014) – *Research Director (based in Kabul, Afghanistan)*

MindEdge, Inc. (2013 to 2014) – *Writer*

US Department of Defense (2011 to 2013) – *Social Scientist (based in Lashkar Gah, Helmand Province, Afghanistan)*

Education and Memberships

PhD, Applied Cultural Anthropology, University of California

MA, Archaeology, University of California

BS, Anthropology, University of California

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Jason Brennen, MPPA

Team Analyst – Data Analytics and Continuous Quality Improvement

Jason brings over 14 years of research and policy experience in the evaluation, implementation, and sustainability of evidence-informed policies and practices in child welfare, juvenile justice, and mental health systems. His work supports community and statewide change efforts to realign services with child and family needs and develop systems to monitor progress toward meaningful outcomes. This is accomplished by partnering with leadership and staff to identify and assess systems improvement goals and develop practices and protocols that support data-driven decision-making and performance monitoring. Jason's most recent work has involved state- and county-level projects in Illinois, Connecticut, South Carolina, Maryland, and Washington.

Key Qualifications

- Child welfare, juvenile justice, and mental health systems
- System-level data reporting and continuous quality improvement processes
- Business process mapping
- Evidence-based screening, assessment, and casework practices
- Cross-systems collaboration and information sharing
- Organizational- and system-level trauma-informed care

Professional Positions

Chapin Hall at the University of Chicago (2016 to present) – *Senior Policy Analyst*

Northwestern University, Mental Health Services & Policy Program (MHSPP) (2003 to 2006; 2009 to 2016)

- *Senior Program Administrator (2015 to 2016)*
- *Program Manager (2010 to 2015)*
- *Temporary Staff (2009 to 2010)*
- *Program Coordinator (2003 to 2006)*

Illinois Collaboration on Youth (ICOY) (2013 to 2016) – *Consultant*

Global Hyatt, Inc. (2007 to 2008) – *Associate Manager of Marketing*

Princeton-in-Asia (2006 to 2007) – *Teaching Fellow*

McCann-Erickson (2000 to 2003) – *Account Executive*

Rhode Island Department of Health, Mental Health Division (1999 to 2000) – *Program Development Associate*

Selected Grants and Contracts

Project Analyst, Capacity Assessment and Integration Support for the Washington Department of Children, Youth, and Families, Gates Foundation (2018 to 2019)

Project Manager, Program Development and Capacity Building, Get IN Chicago (2018 to 2019)

Project Analyst, Juvenile Justice Collaborative Capacity Building, Illinois Collaboration on Youth (ICOY) (2018 to 2019)

Project Director, Multi-System Trauma-Informed Collaborative (MSTIC), US Department of Justice, Office of Juvenile Justice and Delinquency Prevention (2016 to 2019)

Project Manager, Regenerations Program Evaluation, Illinois Department of Children & Family Services (DCFS) (2016 to 2019)

Project Analyst, Data Validation and Quality Improvement, South Carolina Department of Social Services (2018)

Project Manager, Study to Unify Outcomes Reporting and Contractual Reporting Requirements, McCormick Foundation (2016 to 2018)

Project Analyst, Mental Health Services Review for Youth Involved in Juvenile Justice, Office of the Chief Judge, Circuit Court of Cook County (2016 to 2017)

Project Manager, Post-Residential Treatment Survey Feasibility Study, Building Bridges Initiative (BBI) (2016)

Senior Program Administrator, Data Reporting and Evaluation contract for Mental Health Services & Policy Program (MHSPP), Illinois Department of Children & Family Services (DCFS) (2015 to 2016)

Program Manager, Data Reporting and Evaluation contract for Mental Health Services & Policy Program (MHSPP), Illinois Department of Children & Family Services (DCFS) (2010 to 2015)

Education and Memberships

MPPA, Northwestern University

BA, Psychology, Brown University

Publications and Presentations

Brennen, J., Axelrod, J., Guarino, K., & Gonsoulin, S. (2019). *Building a multi-system trauma-informed collaborative: A guide for adopting a cross-system, trauma-informed approach among child-serving agencies and their partners.* Chicago, IL: Chapin Hall at the University of Chicago & Washington, DC: American Institutes for Research.

Brennen, J., Axelrod, J., Guarino, K., & Gonsoulin, S. (2019). *Multi-System Trauma Informed Collaborative (MSTIC) – A Final Report Prepared for the Office of Juvenile Justice & Delinquency Prevention (OJJDP).* Chicago, IL: Chapin Hall at the University of Chicago.

Brennen, J.M., Farrell, A.M., & Weiner, D.A. (2019). *A Review of Best Practices for Comprehensive Case Management for High Risk Youth Involved in Juvenile Justice – A Report Prepared for Get IN Chicago.* Chicago, IL: Chapin Hall at the University of Chicago.

Brennen, J., Karter, C., Moore, F., & Axelrod, J. (2017). *Understanding the alignment of service provider utility with contractual reporting requirements – A Report Prepared for the McCormick Foundation.* Chicago, IL: Chapin Hall at the University of Chicago.

Brennen, J.M., Steiner, L., Weiner, D., & Epstein, R. A. (2017). *Mental Health Services Review of the Cook County Circuit Court's Juvenile Justice Division.* Chicago, IL: Chapin Hall at the University of Chicago.

Burnett-Ziegler, I., **Brennen, J.,** & Jackson, C. (2009). Illinois's Mental Health Juvenile Justice Initiative: Use of Standardized Assessments For Eligibility and Outcomes. In J.S. Lyons & D.A. Weiner (Eds.), Behavioral health care: *Assessment, service planning, and total clinical outcomes management (*pp. 1 – 20). New York, NY: Civic Research Institute.

Chor, K.H.B., **Brennen, J.M.,** Luo, Z.; Foltz, R.; & Epstein, R.A. (2018). *Regenerations Pilot Program Evaluation Report: July 1, 2015 to June 30, 2017.* Chicago, IL: Chapin Hall at the University of Chicago.

Clapier, B., Alpert, L. & **Brennen, J.** (2018). Data Validation Report for South Carolina Department of Social Services (SC DSS). Chicago, IL: Chapin Hall at the University of Chicago.

Kull, M., Dasgupta, D., Schlecht, C., Dworsky, A., Lynch, M., Hill, Z., Reed, A., **Brennen, J.,** Mayer, M., Moore, F., Lockaby, T., Haight, J. M., Weiner, D., Axelrod, J., & Samuels, B. (2019, May*). Capacity assessment and integration support for the Washington Department of Children, Youth, and Families: Final report.* Chicago, IL: Chapin Hall at the University of Chicago.

Weiner, D., McCrae, J., & **Brennen, J.** (2017). *Building Bridges Initiative (BBI): Post-residential follow-up survey feasibility study.* Chicago, IL: Chapin Hall at the University of Chicago.

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Michelle Arnold, MSW

Senior Policy Analyst

Michelle works with jurisdictions in Illinois and Maryland to conduct process evaluations, implement system reforms, and leverage organizational strengths. Using integrated scientific research, real-world experience, and policy expertise, she collaborates with public and private agency leaders to create positive change in the lives of children and families. During her career, Michelle has worked to improve outcomes for the most vulnerable youth and families in Illinois by promoting trauma-informed policies and practices into the service delivery infrastructure. Prior to joining Chapin Hall, she served as the chief operating officer at the Illinois Collaboration on Youth (ICOY), where she directed youth development and juvenile justice-related capacity building activities, ICOY's child welfare independent living program, and the organization's operational functions.

Key Qualifications

- Trauma-informed systems development and implementation
- Child, youth, and family evidence-based and evidence-informed interventions
- Strength-based policy and practices to build workforce capacity
- Effective stakeholder engagement to improve outcomes for children, youth, and families

Professional Positions

Chapin Hall at the University of Chicago (2016 to present) – *Senior Policy Analyst*

Youth Network Council, dba Illinois Collaboration on Youth (2009 to 2016)

- *Chief Operations Officer (2015 to 2016)*
- *Director of the TIYSI Project (2009 to 2016)*
- *Program Director (2009 to 2015)*

Voices for Illinois Children (2007 to 2009) – *Manager of the Foster Kids are Our Kids Campaign, Aging-Out Project*

Youth Network Council, Pathways Independent Living Program (2000 to 2007)

- *Director of Quality Management (2005 to 2007)*
- *Division Manager (2004 to 2005)*
- *Project Manager (2000 to 2004)*

Catholic Charities, Archdiocese of Chicago (1991 to 2000)

- *Development Director (1997 to 2000)*
- *Division Manager for the Child/Adult Residential Services Division (1991 to 1997)*

State of Illinois (1985 to 1991)

- *Co-Director of the Governor's Task Force on Human Services Reform (1993)*
- *Illinois Department of Public Aid Assistant Director (1990 to 1991)*
- *Assistant to the Governor for Human Services (1987 to 1990)*
- *Illinois Bureau of the Budget Analyst (1986 to 1987)*
- *Illinois Office of the Governor, James H. Dunn Fellow (1985 to 1986)*

Selected Grants and Contracts

U.S. Health and Human Services, Substance Abuse and Mental Health Services Administration/Trauma Informed Youth Services Initiative, Project Director and Principal Investigator (2009 to 2016)

Director of the Foster Kids are Kids Campaign, Voices of Illinois Children (2007 to 2009)

Education and Memberships

Certifications of Business Administration, Non Profit Management, University of Illinois

MSW, Policy, Planning, and Administration, University of Illinois

Bachelor's, Social Work, University of Illinois

Honors and Awards

James H. Dunn Fellowship, Governor's Office, State of Illinois

Publications and Presentations

Arnold, M. & Studzinski, A. Being Trauma Informed. DuPage PADS All-Staff Training, September 2016.

Arnold, M. & Studzinski, A. Brain Development, Impact of Trauma and Responding to Trauma. Caritas Family Solutions All-Staff Learning Sessions, Southern Illinois, Summer, 2016.

Studzinski, A & **Arnold, M.** Building Resiliency Using A Trauma Informed Approach. Ogle County Juvenile Justice Symposium, Ogle, IL, July 2016.

Arnold, M. & Powell, M. Caring for Yourself to Care Effectively for Others. Second Annual "Piecing It All Together: Fostering Family Resilience" Conference, Oak Park, IL March 2016.

Arnold, M. Vicarious Trauma and Compassion Fatigue: Taking Care of Yourself. Family Counseling Center Annual Symposium, Harrisburg, IL May 2015.

Studzinski, A. & **Arnold, M.** A Trauma Informed Response. Family Violence Coordinating Council Symposium, Wheaton, IL, October 2014.

Studzinski, A. & **Arnold, M.** Gray Matters! Trauma Training Series for the Illinois Criminal Justice Authority. Chicago, Northern, and Central Illinois, May & June 2014.

Griffin, G.; Studzinski, A.; and **Arnold, M.** Normal Adolescent Brain Development, Impact of Trauma, and a Universal Approach. Peoria, IL, November 2013.

Griffin, G.; Studzinski, A.; and **Arnold, M.** Building a Statewide Trauma Coalition: The Illinois Experience, National Child Traumatic Stress Network Conference, Baltimore, MD, March 2012.

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Michelle Prior, MBA

Senior Fiscal Analyst

Michelle brings over 25 years of project management, consulting, systems design, strategic planning, and operations experience to her health and human services consulting practice. She has demonstrated ability to manage large operations, lead diverse teams of professionals to develop new systems, and assist health and human services agencies to enhance their business processes, improve organizational functioning, and increase revenue recoveries. Michelle has proven experience in successfully analyzing organizations' critical business requirements, identifying deficiencies and potential opportunities, implementing system change, and developing innovative and cost-effective solutions to enhance efficiencies, increase revenues, and improve customer service.

Prior to establishing her independent consulting business in 2009, Michelle was an associate manager with Public Consulting Group in Boston; in this role, she managed projects aimed at improving administrative, eligibility, financial, and revenue operations for government agencies and health and human service providers throughout the nation. She started her career working as a Title IV-E eligibility analyst after completing service as a Peace Corps volunteer in the Philippines.

Key Qualifications

- Significant experience in working with eligibility and case management systems, policy, and data for the full range of health and human services, including child welfare, Medicaid, public assistance, and education
- Excellent writer and communicator with an ability to translate technical requirements to business users and vice versa
- Domain expertise in human services systems of care, quality assurance, compliance, and federal revenue maximization
- Developed and implemented claiming strategies that resulted in over $300 million in increased federal revenues for public child welfare agencies

Relevant Experience

South Carolina Department of Social Services (DSS) (03/2019 to present). Under contract with the Capacity Building Center for States (funded by the Children's Bureau), Michelle is assisting South Carolina's DSS to develop their CFSP. Tailored services involve strategic planning, aligning CFSP development with ongoing data analysis processes, and leveraging current Program Improvement Plan (PIP) efforts. Planning, implementation, and change management practices are being utilized to enhance organizational capacity via staff coaching, meeting co-facilitation, and weekly project team consultation.

United States Virgin Islands Department of Human Services (09/2016 to 04/2018). Child Welfare Policy, Procedure and Practice Model Development and Implementation
Under contract with the Capacity Building Center for States (funded by the Children's Bureau), Michelle consulted for USVI/DHS to develop a work plan and improve internal capacity to complete a wide-ranging policy and procedure update for its foster care system. Upon completion of the policy and procedures updates, the plan was to develop a roadmap for updating the territory's child welfare practice model and implementing the practice model across the territory.

Children's Board of Hillsborough County (FL) (10/2010 to 09/2014). Michelle previously worked with the Children's Board to review Title IV-E claiming practices and to identify TANF MOE for eligible expenditures—efforts have generated over $4.5 million in new revenues to the Board since 2001. Michelle also performed twice annual Medicaid Quality Assurance reviews of supporting documentation for 12 different providers in Hillsborough County.

New Mexico Children Youth and Families, Protective Services Division (04/2010 to 09/2012). Under contract with the Mountains and Plains Child Welfare Implementation Center (funded by the Children's Bureau/ACF), Michelle served as project manager for a multiyear project to develop a Practice Model for the NM CYFD, Protective Services Division. Work included developing a project plan and implementation plan, facilitating monthly meetings and bi-monthly calls with project workgroups, conducting readiness assessments, coordinating with external consultants and other members of the Training and Technical Assistance Network, and developing monthly project reports for the Implementation Center and ACF.

Massachusetts Executive Office of Health and Human Services (EOHHS) in coordination with the Massachusetts Department of Mental Health, Department of Developmental Services and Department of Public Health (10/2010 to 03/2012). As a subcontractor to BerryDunn, Michelle served as deputy project manager for a three-agency SS-A based on the CMS MITA Framework and APD guidelines. The assessment is a dynamic review of MITA and state-specific processes and identification of maturity levels for both business and technical capabilities within each agency. Prior to June 2011, Michelle served as team lead responsible for overseeing the development of the SMHP. Specifically, she developed content and requirements to define the Activities Necessary to Administer the EHR Incentive Program (Section C) and the State's Audit Strategy (Section D).

Georgia Division of Mental Health, Developmental Disabilities and Addictive Diseases (08/2007 to 05/2008). Michelle served as the project launch manager and was responsible for overseeing the creation of a novel consumer directed program to provide individual supports for children with Severe Emotional Disturbance. She managed project start up (six months), led requirements gathering and business rule development efforts, and launched a project website to capture service referrals. She coordinated program policy and system end-user training for 250+ providers statewide via in-person and web-based training sessions. The project successfully launched, serving 900 consumers and processing over $2 million in payments to vendors for services delivered during the first five months of operations.

Florida Department of Children and Families (10/2005 to 01/2008). Michelle worked with the state agency to develop and implement a fiscal monitoring system for 16 lead agencies around the state. She conducted monthly, quarterly, or semi-annual reviews at each agency for purposes of ensuring that ongoing providers of privatized of child welfare services throughout the State were financially and fiscally sound. Michelle also prepared reports of findings and developed business process improvement recommendations to enhance community-based providers' performance of the functions of the child welfare system while ensuring the appropriate use of all federal funds.

District of Columbia Child and Family Services Agency (CFSA) (11/2006 to 11/2007). Michelle served as project manager to develop a comprehensive redesign of financial and eligibility business practices for CFSA. She developed suggested process improvements, drafted a new organization chart developed job descriptions and performance measures, identified revenue maximization opportunities, and suggested data enhancements to 11 different practice areas. Michelle oversaw vendor staff end user training on the District's SACWIS system, and conducted eligibility, revenue enhancement, and compliance training for CFSA SACWIS staff, social workers, and eligibility technicians.

Maine Department of Human Services, Bureau of Family Independence (BFI) (07/2000 to 01/2001). Michelle served as a design team member during the design of Maine's web-based Automated Client Eligibility System (ACES) for the determination of eligibility, tracking, and issuing of benefit programs, including TANF, Medical Assistance, Food Stamps, and all other programs administer by BFI. She established procedures for receipt of child support orders and wage garnishment protocols. She also served as a SME and assisted in the development of logic for a rules engine to help the system accurately assess eligibility for all entitlement programs administered by BFI. In addition, Michelle drafted requirements models and facilitated Joint Application Design sessions to gather system requirements for all federal/State eligibility components of the application, and supported the analysis, business modeling, technical design phases, and training phases of the project.

Massachusetts Department of Social Services (1996 to 1998). Michelle served as the revenue vendor's SME for all financial operations during the design of Massachusetts FamilyNet (SACWIS) system. She worked directly with state staff and the implementation vendor throughout the process—from requirements definition through acceptance testing. She also participated in the development of child support identification, good cause exception, and support collection processes, including the SACWIS system's interface requirements for Department of Revenue and Department of Transitional Assistance. In conjunction with the implementation vendor, Michelle developed acceptance test scenarios for financial operations and system interface functionality. In addition, Michelle participated in the development of training documentation for end users and coordinated training participation for the revenue vendor's eligibility staff.

Education and Memberships

MBA, Clark University

BA, St. Anselm College

Publications and Presentations

Capacity Building Center for States webinar, Total Cost of Ownership for Child Welfare Information Systems (09/2016)

"Managing Fiscal Issues in Child Welfare" – Prepared and presented a three-day training session on child welfare financing to financial officers from both states. Topics presented during the training included Title IV-E, TANF, Medicaid, Targeted and Administrative Case Management, SSBG, Title IV-B and other federal grants. Presented specifically on Title IV-E, federal grants usage, and Cash Management practices.

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Lauren McTear, Prosci® CCP

Senior Business Analyst and Process SME

Lauren is a senior consultant in BerryDunn's Government Consulting Group with extensive experience working with and for state government. She is highly skilled in modeling the relationships between health and human services (HHS) programs, organization, operations, and IT systems to identify opportunities for reform and to inform strategic planning. Prior to joining BerryDunn, Lauren was the Agency Business Process Director for the Vermont's Agency of Human Services with experience leading initiatives focused on business process improvement for several departments.

Key Qualifications

- Former Vermont Agency of Human Services business process director
- Deep understanding of HHS operations and systems
- Experience with project management, strategic planning, business process analysis, and procurement
- Technical expertise in system architecture, integration, and development

Relevant Experience

BerryDunn (12/2017 to present)

West Virginia Department of Health and Human Resources (DHHR)

- *Child Welfare Family First Assessment (10/2018 to present).*
  Lauren is serving as the project manager overseeing the development of a current state assessment of child welfare systems impacted by the Family First Prevention Services Act (FFPSA) and the management of sub-projects to help West Virginia's implementation of the FFPSA.

- *Eligibility and Enrollment Implementation Assistance (12/2017 to 10/2018).*
  As requirements management lead, Lauren provides project management services through the requirements analysis, system design, development, and implementation phases of this project to ensure the requirements are representative of the agreed-upon solution. Her responsibilities include directing team members in assignments, tracking progress of activities to completion, attending meetings related to the requirements and design phases of the project, status reporting to the State, and maintaining consistent communications with key vendor staff throughout the project.

Vermont Agency of Human Services (AHS) (10/2007 to 11/2017)

Agency Business Process Director (10/2014 to 11/2017)

Lauren translated business strategies and objectives into capabilities, including the traceability of strategy to capabilities and processes. She modeled how federal and state programs/services, operations, and systems interoperate within the AHS. Lauren developed and maintained artifacts such as system assessments, multi-year cost models, and security assessments; and performed analysis, evaluation, planning, design, and implementation of the AHS enterprise systems. She also created procurement documents for IT products or services – Statement of Work (SOW), Request for Proposals (RFP), and Technical Services Contracts. In this role, Lauren was engaged in analysis activities for identifying opportunities and/or constraints for replacing legacy systems supporting programs in the Departments of Vermont Health Access (Medicaid agency), Children and Families, Aging and Independent Living, and Vermont Department of Health.

Department for Children and Families Technical Lead (10/2007 to 10/2014)
Lauren served as technical lead for AHS' projects with concentration on systems integration design. She developed technical strategies to support project objectives, led systems developers and business analysts on large and complex IT projects, and oversaw IT vendors to ensure adherence to established IT processes, standards, and best practices. In addition, she collaborated with business and architecture stakeholders to ensure technology strategies are aligned within context of portfolio and project planning, and coordinated the approval process for technical, system, and security documentation. Lauren also served as systems developer helping to prioritize department and AHS IT projects based on strategic goals.

Education and Memberships

BS, Business Technology and Management, Vermont Technical College

Prosci® Certified Change Practitioner (CCP)

References

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Mary Iannone-Walker, MSW

Senior Technical Analyst

Mary has over 20 years of direct experience with child welfare technical solutions, state CCWIS/SACWIS projects, and tribal data systems. She is an experienced senior project manager adept at successfully planning for and executing strategy for government initiatives. Mary was appointed as the federal national priority agenda lead on Child Welfare Information Systems and State Tribe Relationships responsible for systems change. Her work included creating strategies to effect change at a national level for the Children's Bureau Capacity Building Center for States.

Key Qualifications

- Deep experience with procurement, contract management, and team assignments for the delivery of HHS State and Tribal projects
- Child welfare technical assistance expert for the federal Children's Bureau Implementation Centers and National Resource Centers
- Project manager for 10 Tribal Agency automation projects that included Child Welfare, Adult Services, TANF, Title IV-E, Eligibility, Tribal Enrollment, Child Care, Child Support, Mental Health, and General Assistance

Relevant Experience

Face to Face Technologies – President, Business Owner (2006 to present)

- **Colorado CCWIS/SACWIS Modernization Project (2017 to present)**
  Mary was responsible for the development of CCWIS Data Quality Plan and the facilitation of the federal State system on-site visits in Colorado CCWIS functional reviews. She participated in monthly federal required CCWIS status calls and planning updates for federal allocation reimbursement.
- **Federal Children's Bureau Capacity Building Collaborative – Center for States and Center for Tribes (2016 to present)**
  As a part of this project, Mary was responsible for project management, strategic planning, capacity building, and knowledge transfer approaches for state and tribal teams.
- **JBA Tribal Technical Support (2014 to present)**
  Mary provided technical support for 22 tribal grantees, including on-site support and development of a tribal data toolkit. She supported tribe requests for technical vendor selection, data definition, report design, and data validation for federal report submission.
- **Texas Health and Human Services Commission – Performance Management and Data Analytics Project (2018 to 2019)**
  In her role as lead analyst, Mary was responsible for the development of the full set of project delivery framework documents. Mary worked on vendor statements of work, RFP/RFO evaluation criteria, business cases, project plans, acquisition plans, RFOs, and federal advance planning documents. Mary provided vendor oversight of data strategy assessment and technical solution implementation for an enterprise-wide solution to support all HHS departments.

- **Northern Arapaho Tribe and Mashpee Wampanoag Tribe (2015 to 2018)**
  Mary worked on Tribal IV-E development and implementation. She was responsible for face-to-face child welfare case management system implementation, configuration, tribe-specific reporting development, AFCARS data report training, CAM development, and training development and implementation.
- **Tarrant County Information Technology (01/2014 to 01/2015)**
  Mary managed and provided mentoring, coaching, and direction setting to a team of business analysts and project managers. She also hired, assigned, and monitored workload, and set team priorities. She was responsible for project estimates, resource allocations, and equipment costs; timelines and milestones; and project post-development support model. She was responsible for project estimates including full life cycle costs/total cost of ownership (TCO) and return on investment (ROI). She was responsible for project management activities to ensure the adopted project management methodology is supported.
- **CMA Consulting Services (06/2006 to 12/2007)**
  Mary was the platform project manager for State of Texas DFPS SACWIS upgrade focused on implementing mobile technology for 3000+ caseworkers, Medicaid/SACWIS interface, licensing portal, GPS Mileage tracking, and fostering connections. She was responsible for all aspects of large-scale project management; budget; scope; schedule; relationship management; team building; mentoring; succession planning; and leadership.

Casey Family Programs, Seattle WA – Senior Technical Project Manager (2001 to 2006)

Mary was responsible for all aspects of project management; create and maintain project plans, schedules, orchestration of staff/task assignment, change management support, and communications. She was also responsible for presentations on project objectives/status for all levels of management and organizational staff. She launched a formal business process re-engineering (BPR)/business process integration (BPI) external services component for the Casey Business Solutions Team by securing new opportunities funding in 2005 and received full funding for 2006.

CGI –AMS, Fairfax, Virginia – Senior Business Analyst – SACWIS (2000 to 2001)

Mary worked on requirement definition and system design for Louisiana and Illinois SACWIS system projects, utilizing object-oriented design methodologies. She was responsible for the functional areas of screening/intake, investigation, family services, foster care, ICPC, and adoption reunion registry. Mary was also the secondary designer for adoption, adoption subsidy, provider management, eligibility, and quality assurance. Her responsibilities included all areas of application design, requirement analysis, systems analysis, and needs assessment. Mary also served as the lead BPI and JAD facilitator for requirement documentation sessions, working directly with social workers, supervisors, case assistants, foster family recruiters, and guest foster parents.

Dynamics Research Corporation (1997 to 2000)

Mary was implementation manager for a 64-county, 3000 end-user rollout for the Colorado SACWIS project with dual responsibilities of technical solutions and child welfare program knowledge. She served as project technical liaison to State and county SME teams and the Colorado Child Welfare business interpreter for technical vendor staff. Mary developed project staff training sessions on the Fundamentals of Child Welfare and Basics of Case Management for Technical staff and The Basics of Technology, Information vs. Data for the child welfare staff. She was tasked with the creation of a repeatable implementation strategy for a phased rollout approach, accountable for all aspects of two independent pilot counties successes and statewide implementation. She was the developer of a requirements traceability matrix, functional acceptance criteria, and pilot test plan. She co-facilitated a monthly implementation task force with representatives from each county and each Juvenile Justice facility for two years.

Metropolitan State College, Social Work Department (1998 to 2003)

Mary was an instructor for social work classes including, Introduction to Agency Experience with field placement, Social Work: The Helping Professional, Human Behavior in the Social Environment. She was a curriculum developer and instructor the Impacts of Technology on Human Services.

Boulder County Social Services (1993 to 1997)

Mary served as a child protection social worker, providing all aspects of child welfare case management for children and families. She conducted child abuse investigations, supervised visits, provided on-going case management for infants and youth in all types of out-of-home placements, and worked diligently with families toward the goals of remaining intact and reunification. She also worked on two assignments on state practice and policy workgroups: Family Mediation/Family Group Conferencing and Case Work Automation – Standards and Strategy.

IBM Corporation (1983 to 1993)

Mary performed business systems analysis and project management on a team that provided total business solutions for a worldwide system supporting international trade and international customers. She worked as human factors lead for a team of systems analysts, providing human factors/systems usability coordination for a business unit of 200+ staff, including delivery of human interface testing and pre/post implementation interviews. She also was an application developer responsible for requirements definition, code building and testing, and implementation support with internal clients.

Education and Memberships

MSW, Colorado State University

BS, Computer Information Systems, Double minor Psychology & Sociology, Regis University

References

Dr. Maria Scannapieco, Distinguished Professor, Director of the Center for Child Welfare University of Texas at Arlington School of Social Work 21 S Cooper Street Arlington, TX 76019 817-272-3535 mscannapieco@uta.edu	Lucile Williams, CCWIS Project Manager Colorado Department of Human Services 1575 Sherman Street Denver, CO 80203 303-866-7284 Lucile.williams@state.co.us	Jenny Hinson, CPS Director of Placement Texas Department of Family and Protective Services 701 W 51st Street Austin, TX 78751 512-438-3376 Jenny.hinson@dfps.state.tx.us

Elizabeth (Libby) Wells

Technical Analyst

Libby has over 20 years of experience in child welfare practices and technology, including eight years of experience with the Colorado Division of Child Welfare program and technology projects. As a result of her work, she has developed high-quality, long-term client relationships with the Colorado Division of Child Welfare (both at the state and county level) and at all professional engagements. Her work includes training and implementation of State Continuous Quality Improvement methodologies and tools. Libby worked on definition and implementation of successful solutions in the areas of business process analysis, design and implementation, system test, training strategies, and end-user support methodologies. She has strong written and verbal communication skills, and produces high-quality written reports. Libby worked on facilitation and documentation of business process reengineering and mapping for state agencies and Native American tribes. She has performed assessment of project progress with respect to identification of risks, issues, and opportunities for project improvement, and has three years of Project Reporting to State Leadership, including presenting to all levels of executive management.

Key Qualifications

- 20 years of experience in child welfare practice and technology
- 8 years of experience with the State of Colorado Division of Child Welfare Program and technology projects, including the Colorado Practice Model Project and the Colorado TRAILS SACWIS Development Project

Relevant Experience

Face-to-Face Integrated Technologies – SACWIS/CCIWS Senior Business Analyst (01/2011 to present)

- State of Texas Department of Family and Protective Services – Business Analyst for House Bill 4 Project (2017)
- State of Texas Department of Family and Protective Services – Lead Business Analyst for Texas Health and Human Services (HHSC) Enterprise Applications Change Program (EACP) Project (2017)
    - Identified high-level "as-is" and "to-be" business processes to define and incorporate required new business practices
    - Coordinated data mapping sessions to identify gaps between HHSC and DFPS data files, and to provide additional data requirements to the HHSC Project Team
    - Facilitated requirements definition sessions with state program and IT staff
    - Conducted detailed design and design review sessions, and performed system analysis to ensure compliance with current system standards
- State of Texas Department of Family and Protective Services Project Management Office (PMO) Lead Analyst for SACWIS Modernization Project (2014 – 2017)
- State of Colorado Practice Model (CPM) Project (2011 – 2013)
    - Mountains and Plains Child Welfare Implementation Center Co-Facilitator – supporting the State of Colorado in the development of a clear, consistent, and cohesive approach

    - to practice and service delivery, as well as the implementation of specific practice strategies
    - Co-facilitated the development of practice framework phase definitions, practice standards, and practice standard indicators for the Colorado Practice Model with 64 county stakeholders and the Colorado State team; implemented required specific practice strategies at a county and local level
    - Implementation specialist for the CPM Project – Cohort 3, with shared responsibility for the planning and strategic implementation of the Cohort 3 final group of implementation counties
    - Implementation analyst for the Colorado Quality Practice Team (QPT) – worked in conjunction with the State of Colorado team to implement Continuous Quality Improvement (CQI) and to launch the QPT initiative (2012 – 2014). Integrated known quality improvement techniques, including Ishikawa problem-solving diagrams and SWOT (Strengths, Weaknesses, Opportunities and Threats) analyses, into the county CQI processes
    - Reviewed and refined all resource and training materials for Cohort 3
    - Conducted training and ongoing support for all state implementation specialists and Cohort 3 counties
- Texas Department of Family and Protective Services – Foster Care Redesign Project Co-Facilitator (2012 – 2013)
    - Co-facilitator for the Texas Foster Care Redesign project process negotiations that occurred after the initial contract award
    - Co-facilitated four 2.5 day working sessions between Texas DFPS and the selected Single Source Continuum Contractor (SSCC) to define the process steps to be followed by both the State and the SSCC at critical points where the contract terms created a business and process intersection
- Southern Ute Indian Tribe – Child Welfare Practice and Process Project Co-Facilitator/Business Analyst/Scribe (2011 – 2012)
    - Co-facilitator and scribe –recorded all process steps and business decisions
    - Co-facilitated and directed the mapping and refining of existing processes, as well as the mapping and development of new business processes
    - Created and refined maps to reflect all agreed-upon current and new processes
    - Guided the creation of forms, work templates, process plans, and data capture tools

CMA Consulting Services – SACWIS Senior Business Analyst/Lead Business Analyst (2006 to 2011)

- "Child Fatality Reporting" Project – business process mapping and SACWIS system enhancement (2010 – 2011)
- "Fostering Connections" Project – a $1.0 million program and SACWIS system enhancement project initiated to ensure conformity with the "Fostering Connections to Success and Increasing Adoptions Act of 2008" (Public Law No. 110-351) and with all new and existing Title IV-E and Medicaid Eligibility Requirements, including interface with the Texas TIERS Eligibility system (2009 – 2010)

- Purchased Client Services Division "Integrated Management and Reporting for Contracts" (iMARC) Project – Development, Test, and Implementation stages – a $1.2 million system created to support the monitoring of residential care contracts (2008 – 2009)
- "CPS Reform" project – three major functional areas – a $7.2 million Texas SACWIS system enhancement project (2006 – 2007)

Jefferson County Department of Human Services – System and Design Specialist (2011 to 2006)

- Senior analyst with the Core Change Management and Implementation Team for the Colorado SACWIS system (TRAILS) phase three major rollout – the integration of Core Service fiscal transactions into the TRAILS system
- Provided training, on-site user support, and problem solving for 200 County TRAILS users
- Lead analyst for County Business Process Review teams

Dynamics Research Corporation – SACWIS Implementation Business Analyst/Project Business Manager (1998 to 2001)

Business Analyst/System Test

- Delivered on-site application support and training to county end users throughout the State of Colorado for the duration of the TRAILS implementation phase
- Facilitated the change management process for county supervisors and policy makers
- Assisted county directors with business and information process flow revisions

Business Manager

- Effectively managed all on-site Business, Administrative, Financial, and Office Management aspects of the State of Colorado SACWIS project

Education and Memberships

Bachelor of Business Administration, Finance, University of Oklahoma, Norman, OK

Paralegal Certification, Denver Paralegal Institute, Denver, CO

References

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Maggi Collins, Director, Program Support
Texas Department of Family and Protective Services
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Setha Nhoung, SMC, Prosci® CCP

Senior Business Analyst

Setha is a highly creative, motivated, innovative, customer-oriented, dedicated, and ethical management professional with experience in operation and policy analysis, strategic planning, project and portfolio management, program management, data analytics, LEAN and Six Sigma strategy, business development, and technical management. He has a successful track record managing complex projects in large organizations, with experience that spans health and human services, technology consultation, workforce development, and educational services.

Key Qualifications

- Operational process analysis
- Strategic planning and leadership
- Productivity and efficiency improvement
- Project management
- Multi-site operations
- Process redesign
- Change management
- Performance management
- Financial plan development
- Six Sigma methodology

Relevant Experience

State of Oregon Department of Human Services (DHS) (2008 to present)

During his tenure with DHS, Setha has served in multiple roles within the department, including project manager, interim managing director, operations and policy analyst, and training and development specialist. He has worked on numerous projects during his time with state government, ranging from single-day rapid process improvements (RPIs) to multi-year implementations. Project highlights include:

Lean Daily Management System Maturity (LDMS) (Project Manager, 2 years)
LDMS was implemented in 2008 as a method to teach staff the ability to identify and document process that require improvement, with the goal being to empower staff with the tools to problem solve on that local level. Setha was tasked to lead the maturity effort to re-access the current utilization of LDMS across agencies, provide support in any identified gaps along with a detailed status report for executives to access. This included the processes for governance groups, escalation of local problems and bottlenecks in support. Through the effort, the team was able to access a baseline of utilization that was not done at the initial rollout, as well and measurable achievements for each branch office to be able to work towards individual goals.

Building Lean Capacity Effort (Project Lead, Trainer, 3 years)
Setha led a team that created the Lean Academy, creating a curriculum and mentorship structure for cohorts to graduate with completed projects and skills around the State. This was born out of executive leadership's requirement for the ability to support staff in problem-solving skills to further mitigate central office reliance on progressive change.

Child Welfare Protocol Creation (Project member, 1 year)
Setha led the assessment of baseline processes across the agency for field offices, creation of

standardized protocols, and creation of onboarding process for new staff. He helped them tackle their greatest challenge of culture shift, and used change management methods to lead the success and retention of protocols by staff.

Integrated Eligibility Project (Project Lead, 1 year)

Setha served as the project lead for Oregon software implementation project to sunset legacy systems and integrate multiple agencies into single system. He managed the scope of work that included Joint Application Design (JAD) sessions with policy SMEs, readiness assessments of field staff, future state mapping for integration of agencies, and communication with project vendors to maintain timelines. The project is currently still underway, with Setha's continuing to assist the State during periods of assistance to meet vital project deliverables.

Cover Oregon (Project Member, 6 months)

Setha was tasked with assisting in onboarding over 600 new staff during the health insurance exchange implementation for Oregon. He created training with limited resources and successfully retained over 90% of staff trained past six months.

TANF Re-Engagement (Project Lead, 10 months)

Federal rules require states to have 50% of the clients that are JOBS mandatory to be participating to help facilitate families in finding employment. For over a decade, the State of Oregon was out of compliance and was facing penalties to the program. The scope of this project engaged every SSP field office in the state (over 80), with assessing current processes, identifying gaps and waste, and creating standardized protocols for staff to utilize. The beginning baseline was a 5% participation within the State, which after the initial rollout increased to over 30%, allowing Oregon to avoid fines with this progress.

Document Storage and Retention (Project Manager, 6 months)

Setha was tasked with identification of storage processes of Child Welfare offices, and exploration of the ability to utilize scanning. Child Welfare contracted out storage facilities to store folders of client information due to the longer retention periods for the cases. Setha discovered multiple budget-saving opportunities, as well as security risks and documents that were stored past retention schedules.

Education and Memberships

Bachelor's, Business, University of Oregon

Oregon Project Management Certification

Prosci® Certified Change Practitioner (CCP)

Training and Development Certified

Scrum Master Certified (SMC)

Lean Six Sigma Black Belt

References

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Jessica Dill, Prosci® CCP

Business Analyst

Jessica is a consultant with BerryDunn's State Government Consulting Group, focusing on projects for health and human services agencies. She brings experience in business analysis, research, deliverable development, policy analysis, and project coordination to her client work. She holds a certification in Organizational Change Management from the Prosci® Learning Center.

Relevant Experience

BerryDunn (10/2018 to present)

Arizona Department of Economic Security/Division of Developmental Disabilities (ADES/DDD)

- *Focus HIPAA TCS Compliance Project (04/2019 to present).*
  Jessica is a business analyst for this engagement providing assistance with project management, support, and analysis services for the assessment and gap analysis focused on the State of Arizona's compliance and alignment with HIPAA- and CMS- transactions and claim processing code sets.
- *Feasibility Study for IT System Upgrade/Replacement (10/2018 to present).*
  Jessica is a business analyst supporting this study by providing services to assess the current technical solution and develop recommendations about short- and long-term options for modernizing the IT solutions for tracking long-term care for the DDD.

West Virginia Department of Health and Human Resources (DHHR) – *Child Welfare Family First Assessment (11/2018 to present).*
Jessica is a business analyst for this engagement providing assistance with project management, support, and analysis services for the assessment and gap analysis focused on the State of West Virginia's compliance and alignment with the Family First Prevention Services Act.

Washington Health Benefit Exchange – *O&M System Integrator Re-Procurement Planning (11/2018 to 05/2019).*
Jessica served as a business analyst for this engagement to assess, define requirements, and develop an RFP for the procurement of an agile O&M system integrator for the WAHBE.

Branstad and Olson Law Office (05/2018 to 08/2018)

Jessica served as a legal assistant intern supporting attorneys on criminal defense cases primarily at the Polk County Courthouse, the Polk County Jail, and the Broadlawns Medical Center. She provided assistance in client management, trial preparation, legal document preparation, and re-designing the law office's website.

Renegade Consortium (12/2017 to 08/2018)

Jessica operated an internet-based business. She worked closely with suppliers and manufacturers in China, managed customers in North America, and developed and operated the company website.

Educator (08/2014 to 04/2018)

Jessica worked as a behavioral technician and advocate, helping clients under the age of ten years old with Autism Spectrum Disorder. She worked alongside therapists to implement individual treatment plans, record patient behavioral development, and create a supportive environment promoting the client to reach set developmental goals.

McGill English Department (09/2013 to 04/2014)

- **Assistant to the English Professor**
  Jessica assisted in preparing and presenting course lectures, assessing assignments, and helping students succeed in the course.

- **Research Assistant for International Textile Study**
  Jessica assisted in managing local and international research participants in French and English, collected and analyzed data, produced written documents, and compiled research for presentation.

Health and Wellness Club (09/2010 to 04/2014)

Jessica served as a group leader organizing and operating Health and Wellness engagements. She campaigned, fund-raised, and operated canvasing projects, educational conferences, and outreach initiatives.

Education and Memberships

BA, Psychology, McGill University

MCMP-II/Certified Medicaid Professional

Prosci® Certified Change Practitioner (CCP)

References

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Sarah Stacki, Prosci® CCP
Business Analyst

Sarah is a consultant in BerryDunn's state government consulting practice, with a focus on state agency HHS projects. She holds a certification in Organizational Change Management from the Prosci® Learning Center. Sarah brings this project experience with business analysis, deliverable development, research, healthcare and policy analysis, organizational leadership, and complex project coordination.

Relevant Experience

BerryDunn (07/2018 to present)

West Virginia Department of Health and Human Resources (DHHR)

- *Child Welfare Family First Assessment (10/2018 to present).*
  Sarah is a business analyst for the impact assessment and gap analysis of the Family First Prevention Services Act and an assessment of the current pilot and grants management system.
- *Eligibility and Enrollment Implementation Assistance (03/2019 to present).*
  Sarah is supporting the project activities related to the new West Virginia Integrated Eligibility Solution (IES) to consolidate and integrate DHHR program service systems into a single enterprise.

Massachusetts HIX/IES Entities – *IV&V Services (03/2019 to present).*
Sarah works on the Massachusetts HIX/IES implementation as part of BerryDunn's IV&V services team. In this role, she provides assistance in developing monthly reports, identifying business requirements, and maintaining Knowledge Link and Mass Forge document repositories.

West Virginia Bureau for Public Health (BPH) – *Public Health Accreditation Preparation Project (11/2018 to present).*
Sarah is a business analyst supporting BPH by conducting gap analysis to assist in BPH's efforts to become accredited by the Public Health Accreditation Board (PHAB).

Vermont Agency of Digital Services (ADS) – *Independent Review (01/2019 to 04/2019)*
Sarah worked as a business analyst for the project, participating in conducting interviews, performing a cost and risk analysis, and co-writing the final independent review report. The Vermont ADS, Agency of Human Services, and Department of Vermont Health Access are implementing an integrated benefits service. BerryDunn conducted and independent review of the Customer Portal Phase 1 project, studying deliverables and analyzing costs and risks of the project.

Washington Health Benefit Exchange (WAHBE) – *O&M System Integrator Re-Procurement Planning (07/2018 to 02/2019).*
Sarah worked as a business analyst for this engagement to assess, define requirements, and develop an RFP for the re-procurement of an O&M system integrator for the WAHBE.

Colorado Office of the State Auditor – *IT Evaluation (08/2018 to 12/2018).*
Sarah worked as a project analyst supporting the agile project team in the review and assessment of a current large-scale IT project and of the State's procurement process in general. Tasks included the analysis of four years' worth of artifacts and documentation, and interviewing key project decision makers and stakeholders.

Oregon Enterprise Technology Services (OR ETS) – *Integrated IT Service Management (ITSM) (08/2018 to 09/2018).*
Sarah worked as a business analyst, supporting the OR ETS department with their ITSM system project. Supporting services include providing documentation, analysis, process involvement workshop facilitation, and requirements gathering. The purpose of the ITSM system project was to provide efficiency and effectiveness enhancements that could lead to ETS providing greater value to its customers.

Arizona Department of Economic Security/Division of Developmental Disabilities (ADES/DDD) – *Feasibility Study for IT System Upgrade/Replacement (07/2018 to 11/2018).*
Sarah worked as a business analyst supporting this study by providing services to assess the current technical solution and develop recommendations about short- and long-term options for modernizing the IT solutions for tracking long-term care for the DDD.

Cone Health (01/2018)

As an intern at Cone Health, Sarah executed event and program planning, coordinating, and marketing. She developed organizational social capital and community partnerships. In addition, she assisted in the preparation and presentation of business meetings.

SPARKS (Students Promoting Awareness, Responsibility, Knowledge, and Success) (2015 to 2018)

Sarah facilitated presentations, developed content, and connected students with resources. She built collaborations, created sustainable partnerships, and coordinated events and programs. Sarah promoted team building and group cohesion, managed staff, and planned business meetings.

Elon University (2015 to 2018)

As an office assistant, Sarah greeted and managed patients as first point of contact in the office. She executed confidential duties in conjunction with professional health promotion staff.

The Common Good (06/2017 to 08/2017)

As a marketing and event-planning intern, Sarah assisted with event planning, nonprofit management, and outreach. She produced graphic design, media writing, marketable material, and political research. Sarah also coordinated high-profile leaders of business, politics, and media.

Education and Memberships

BA, Public Health Studies and Policy Studies, Minor in International Studies, Elon University

Prosci® Certified Change Practitioner (CCP)

References

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Brady Birdsong, MS

Child Welfare Technical SME

Brady is a talented senior leader with more than 15 years of experience in human services business practice and information management solutions. He is skilled in strategic planning, critical thinking, decision making, and organizational change management. Brady brings extensive experience in data management and analysis, and is committed to improving outcomes. With BerryDunn, Brady focuses on health and human services consulting engagements, most recently working with the West Virginia Department of Health and Human Resources as the project manager for the current state assessment of Child Welfare systems impacted by the Family First Prevention Services Act (FFPSA) and managing sub-projects to help West Virginia's implementation of the FFPSA.

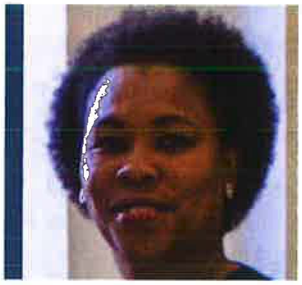
Prior to BerryDunn, Brady spent nearly 20 years working with District of Columbia health and human services agencies, including 14 years with the Child and Family Services Agency.

Dana Weiner, PhD

Child Welfare SME

Dana provides analytic consultation and policy guidance to child welfare jurisdictions across the country. At Chapin Hall, her research focuses on building evidence for effective interventions, quantifying resource accessibility—analyzing the role of geospatial relationships in outcomes in child welfare systems—and on evaluating the implementation of evidence-based models in child welfare and juvenile justice contexts. In her analytic consultation to child welfare jurisdictions, she uses predictive analytics, latent class analysis, and geospatial approaches to refine understanding of target population needs and distribution. In Illinois, she served for six years as senior policy advisor to the director of the Department of Children and Family Services, and as the evaluation liaison for the Permanency Innovations Initiative.

More information on Dana may be found here: https://www.chapinhall.org/person/dana-weiner/



Debra Lewis-Miller

Child Welfare SME

Debra has over 20 years of business/systems analysis and project implementation experience. She is skilled at documenting and organizing technical information and system requirements, and defining process to be improved. Debra provides project teams with expertise in facilitating meetings, mapping business processes, and conducting on-site observations to determine the methods, analyze data, and define reports. She is excellent at developing solutions or alternative practices; recommending new systems, procedures, and organizational changes; and conferring with managers to ensure changes are working.

Jennifer O'Brien, LCPC

Child Welfare SME

Jennifer provides implementation and capacity building assistance to multiple Title IV-E waiver recipients, as well as to public and private child welfare agencies across the country. At Chapin Hall, her work focuses on developing and using functional assessments, governance structures, data dashboards, implementation plans, data management systems, strategic plans, and business process mapping; collaborating across systems; selecting evidence-based interventions; and training agency staff and stakeholders. Jennifer has also helped design and implement multiple practice models for public and private child welfare institutions.

As the director of Clinical Assessment Services at Northwestern University under contract with the Illinois Department of Children and Family Services' Division of Clinical Services and Professional Development, she co-led the development and implementation of the Integrated Assessment Program that provided a comprehensive assessment for all youth entering foster care. She also developed the statewide Learning Collaborative focused on implementation of a family-centered, trauma-informed, and strength-based model of practice. As implementation coordinator of the Illinois Permanency Innovations Initiative (PII), a $10 million federal grant, Jennifer oversaw the implementation of the evidence-based practice Trauma Affect Regulation Guide for Education and Training (TARGET). She also acted as the Child and Adolescent Needs and Strengths (CANS) implementation coordinator, certifying over 4,000 users throughout Illinois and driving the development of an online assessment center for new hires and re-certification.

More information on Jennifer may be found here: https://www.chapinhall.org/person/jennifer-obrien/

Mary Alice Mehaffey, CPA
Child Welfare Operations SME

Mary Alice brings extensive project management, financial, and operational experience as a business leader and certified public accountant with Face-to-Face Technologies. Her strong managerial skills, combined with sound business insight and a strong work ethic, have enabled her to continually streamline operational and accounting processes, oversee building and implementation of large projects, solve complex business problems, and deliver financial and operational commitments and results. Vast industry experience in state government, public companies, and private companies gives her a unique perspective on business operations.

For the last six years, Mary Alice served as the associate director of Operations for the Colorado Division of Child Welfare, responsible for managing the units that oversee budgets and finance, legislation, grants, federal funding and reports, funding allocations to counties, ad hoc child welfare management reports, data pulls and research, child welfare state hotline and certification, and training of all child welfare county and state staff.

Miranda Lynch, MS
Child Welfare SME

Miranda provides strategic guidance and capacity building to child welfare agencies in large-scale system reform initiatives geared toward improving child outcomes in safety, permanency, and well-being. At Chapin Hall, she works directly with public and private decision-makers in developing and implementing feasible action plans with an emphasis on using evidence in decision-making, applying implementation science principles within systems change efforts, and aligning policy with the jurisdiction's strategic direction. Miranda is currently partnered with administrators in several jurisdictions to enhance their continuous quality improvement processes to support improved performance on priority outcomes—and to assess, ready, and plan for implementation of the Family First Prevention Services Act.

More information on Miranda may be found here: https://www.chapinhall.org/person/miranda-lynch/

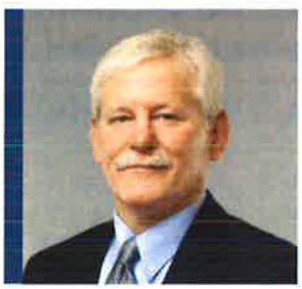
Sonali Patel, MSW

Child Welfare SME

Sonali has worked on policy issues concerning vulnerable children and family at the local, state, and federal levels throughout her career. At Chapin Hall, in partnership with key public- and private-sector stakeholders, organizations, and researchers, she contributes to developing evidence-based and trauma-informed policies and practices to improve family-level outcomes. Sonali leads Chapin Hall's efforts to support strategic planning efforts with the Los Angeles County Department of Children and Family Services and the Los Angeles County Department of Public Health.

Prior to joining Chapin Hall, she served as a senior policy advisor at The White House Domestic Policy Council, where she covered child welfare, home visiting, fatherhood, child support, adolescent pregnancy prevention, and TANF issues. Prior to that role, she was with the Administration on Children, Youth and Families (ACYF) within the U.S. Department of Health and Human Services as a senior policy advisor on issues related to runaway and homeless youth, adolescent pregnancy prevention, family violence issues, and child welfare.

More information on Sonali may be found here: https://www.chapinhall.org/person/sonali-patel/



Steven Whitney, JD, Prosci® CCP

Child Welfare SME

Steven is a BerryDunn manager and an attorney with over 30 years of experience helping government agencies comply with state and federal program requirements, account for costs and allocate costs to benefiting programs, and increase the recovery of federal revenues. Steven understands the complexities of operating juvenile justice and other youth services programs. He brings deep experience analyzing efficiencies, costs, revenues, and process improvements in a wide variety of public health and child welfare programs.

His past work includes developing rate setting, cost allocation, revenue enhancement, and administrative cost recovery structures for juvenile justice, child welfare, elderly, developmentally disabled, special education, and social services programs in several states, as well as developing and implementing process and performance improvements to youth services and other health and human service programs.

More information on Steven may be found here: https://www.berrydunn.com/professionals/steven-whitney

2.10 SUBCONTRACTORS

j. If the bidder intends to subcontract any part of its performance hereunder, the bidder should provide: i. name, address, and telephone number of the subcontractor(s); ii. specific tasks for each subcontractor(s); iii. percentage of performance hours intended for each subcontract; and iv. total percentage of subcontractor(s) performance hours.

We have carefully selected partners for this engagement to bring strength and balance to our team. BerryDunn will lead the engagement, take full responsibility for the successful completion of tasks and deliverables, and serve as the primary point of contact with the CFS. Our proposed project manager has experience overseeing the work of subcontractor partners on numerous previous engagements and is fully prepared to manage our subcontractor partners for each project. We vet our subcontractor partners carefully, onboard them thoroughly, and integrate them into our team seamlessly so that we present a united BerryDunn project team.

As described below and on the following pages, we have strategically positioned three subcontractors to work in collaboration with BerryDunn for this engagement. The approximate anticipated percentage of subcontractors' performance hours on the project is 48%.

Table 3: BerryDunn Subcontractor Partners

Subcontractor	Overview, Tasks, and Percentage of Hours
Chapin Hall 1313 East 60th St. Chicago, IL 60637 773-256-5100 *Team members:* Amy Dworsky Elissa Gitlow Clare Anderson Denali Dasgupta Michael Cull Tami Walker Jesse Renny-Byfield Jason Brennan Michelle Arnold Dana Weiner Jennifer O'Brien Miranda Lynch Sonali Patel	Chapin Hall is an independent policy research center at the University of Chicago that provides public and private decision-makers with rigorous research and achievable solutions to support them in improving the lives of children, families, and communities. An acknowledged national leader in child welfare for more than 30 years, Chapin Hall partners with policymakers, practitioners, and philanthropists at the forefront of research and policy development by applying a unique blend of scientific research, real-world experience, and policy expertise to construct actionable information, practical tools, and, ultimately, positive change for children, youth, and families. Chapin Hall's diverse portfolio of work is funded by non-profit organizations, private foundations, and government agencies. Among Chapin Hall's assets are a highly motivated and experienced multidisciplinary workforce; substantial administrative data holdings; a state-of-the-art technology infrastructure; longstanding partnerships with public and private agencies; and the capacity to simultaneously manage more than 100 active research and policy projects. **Specific tasks Chapin Hall will perform are included in Section 2.9.2. They include, but are not limited to:** • Provide child welfare expertise across domains such as policy, practice, workforce, training, and CQI

Subcontractor	Overview, Tasks, and Percentage of Hours
	• Provide leadership in the development, analysis, and synthesis of the stakeholder survey and other information gathering tools and instruments • Perform data analysis and provide knowledge of child welfare best practices and evidence-based research • Partner with our project manager and other team members to execute the project work plan • Contribute to development of project deliverables **The approximate anticipated percentage of hours for Chapin Hall in Phase 1 is 38%.**
Face-to-Face Integrated Technologies 21213 La Paloma Drive Lago Vista, Texas 78645 *Team Members:* Mary Iannone-Walker Libby Wells Debra Lewis-Miller Mary Alice Mehaffey	Face-to-Face, established in 2006, is a woman- and minority-owned business that has been improving practice and process for child welfare for over a decade by providing expert practice design, understandable business process mapping, critical data systems support, and strategic approaches to policy compliance. The company's work is supported by multiple published reports and articles in publications such as the *Children's Bureau Express*, the *Child Welfare League of America Journal of Child Welfare*, and the *Journal of Technology in Human Services*. Similarly, the value of Face-to-Face's services is evidenced in its recognized body of work, which includes providing business design and systems integration services to large national organizations, including Casey Family Programs and the Children's Bureau; large state child welfare jurisdictions, including Texas and Colorado; and smaller population states such as North Dakota and Wyoming. **Specific tasks Face-to-Face IT will perform are included in Section 2.9.2. They include, but are not limited to:** • Provide child welfare program technical/IT system expertise • Facilitate targeted interviews and meetings with CFS leaders, CFS staff, and other State IT stakeholders • Participate in other information gathering activities, as needed • Contribute to development of project deliverables • Conduct background research and analysis • Provide child welfare program technical/IT system expertise • Provides subject matter expertise in business process mapping, technical analysis, child welfare operations, and reporting **The approximate anticipated percentage of hours for Face-to-Face IT in Phase 1 is 6%.**
Strategy Solutions, LLC	Michelle Prior of Strategy Solutions, LLC provides this project with over 20 years of HHS-focused assessment, strategic planning, and implementation

Subcontractor	Overview, Tasks, and Percentage of Hours
16 North Gateway Winchester, MA 01890 617-910-0291 *Team Member:* Michelle Prior	experience, including significant experience with child welfare, Medicaid, and other public assistance programs. She has demonstrated ability to manage large operations, lead diverse teams of professionals to develop new systems and assist HHS agencies to enhance their business processes, improve organizational functioning, and increase revenue recoveries. She has worked with several state child welfare programs, including in roles with the Capacity Building Center for States. She has experience successfully analyzing organizations' critical business requirements, identifying deficiencies and potential opportunities, implementing system change, and developing innovative and cost-effective solutions to enhance efficiencies, increase revenues, and improve customer service. **Specific tasks Michelle will perform are included in Section 2.9.2. They include, but are not limited to:** • Partner with our project manager and other team members to execute the project work plan • Provide child welfare program funding expertise, including maximizing federal funding • Facilitate targeted interviews and meetings with CFS leaders and staff related to fiscal matters • Participate in other information gathering activities as needed • Contribute to development of project deliverables • Conduct background research and analysis **The approximate anticipated percentage of hours for Michelle in Phase 1 is 4%.**

3. TECHNICAL APPROACH

The technical approach section of the Technical Proposal should consist of the following subsections

3.1 PROJECT UNDERSTANDING

a. Understanding of the project requirements;

Nebraska DHHS seeks a contractor to conduct an operational review of child welfare services within its CFS Division. Specifically, DHHS is seeking an operational review that assesses the strengths and weaknesses of CFS internal operations, and offers recommendations for more effective and efficient management and operations consistent with the mission of CFS—to protect children from abuse and neglect.

The expansive nature of the scope of work demonstrates the State's intent to better serve its most vulnerable children and families. Too often this type of significant statewide reform is sparked by a tragedy in the child welfare system. BerryDunn commends the State for taking a holistic, methodical, and proactive approach to system change that reflects its values and the national child welfare sea change.

For many years, the understandable and well-intentioned goal of ensuring child safety meant removing a child from his/her home, resulting in their placement in foster care or a group facility away from familiar surroundings, such as school and community. Children lingered in out-of-home placements; most children experienced multiple placements in a single removal episode; and finding permanent living situations took much longer than federal guidelines and best-practice required. Research in the last several years, however, has illuminated the negative outcomes and resulting trauma for children experiencing the foster care system.

The growing recognition that children are better served in their home and community of origin has led to efforts at the grassroots, local, state, and national levels to change the nature of child welfare practices. The emphasis has shifted from removal as the first course of action to removal being the least desirable result, and to providing in-home and community-based services to mitigate safety concerns and unnecessary removals.

Federal funding for child welfare-related activities comes primarily through Title IV-E of the Social Security Act, which supports services for children who have been removed from their home. These services include foster care, adoption and guardianship subsidies, and independent living skill-building for youth aging out of the foster care system.

Since 1994, the U.S. DHHS has had the authority to approve requests from states to waive the traditional IV-E requirements in order to experiment with innovative practices, and allow for flexibility in spending with the goal of improving outcomes in child safety, permanency, and well-being. In February 2019, the FFPSA was signed into law. FFPSA puts into law the intent of the waiver projects. Rather than limiting funding to foster care services or requiring a waiver, FFPSA allows for use of time-limited, evidence-based services to prevent foster care placement for those at imminent risk who can remain safely at home.

> **The State's emphasis on linking families at risk of having children removed with community-based services in order to develop parents' ability to protect children from harm is aligned with FFPSA.**

Additionally, FFPSA encourages relative placements by supporting kinship navigator programs and restricts reimbursement for residential out-of-home placements to two weeks unless the placement is one of four specified setting types: programs for pregnant and parenting teens; independent living programs for youth age 18 and over; programs that serve children who have been or are at risk of being sexually trafficked; and the creation of a new category of residential intervention called a Qualified Residential Treatment Program (QRTP).

BerryDunn understands that Nebraska was a leading state in taking advantage of the demonstration waivers, and implemented differential response and provider programs under its waiver. These programs sought to reduce the number of entries into foster care, increase placement stability and permanency, and improve child well-being.

The effective date for the FFPSA changes to IV-E reimbursement is October 1, 2019, but states have the ability to request a delay for up to two years. To date, 13 states and the District of Columbia have signaled their intent to enact FFPSA on October 1, 2019. Nebraska is one of those states and, while the purpose of this RFP is broader than the implementation of FFPSA, it is clear that the State intends to continue the tradition of innovative child welfare practices in order to improve the lives of Nebraska's children and families.

BerryDunn's proposed approach demonstrates our commitment to supporting the State in carrying out the comprehensive nature of the project scope. We understand that each requirement is vital and important, and we will honor this by working with CFS to prioritize our assessment, planning, and implementation activities in a meaningful way that connects to your business process areas, and more importantly, to your mission and vision.

3.2 WHY BERRYDUNN?

BerryDunn's Government Consulting Group has supported states across the nation for more than 30 years as they solve some of their biggest challenges, including modernizing, enhancing, and transforming HHS programs, processes, and systems. We can say with all sincerity, however, that we believe there are few efforts as critically important as the child welfare reform initiative that the State is embarking upon. It is for this reason that for this effort, we have combined forces with strategic partners such as Chapin Hall—a nationally recognized, highly esteemed, independent policy and research center that is helping jurisdictions across the nation build more effective services and systems, accelerate the use of evidence in practice, and better serve children, youth, and families. In addition, we have strategically positioned Face-to-Face and Strategy Solutions as partners to meet specific project needs.

97%

of BerryDunn clients have reported satisfaction with their most recent experience, citing that our collaborative approach, expertise, knowledge, and innovative ideas have improved their organization's performance.

To be successful with this improvement initiative, CFS needs a firm and a team that brings deep knowledge of child welfare policies, programs, and best practices *and* that knows how to engage stakeholders, solicit ideas, listen carefully, build trust, and successfully guide a project to its destination. CFS also needs a partner that understands that the hard work continues long after a project is over, and that will focus on building capacity within CFS and its partners from day one.

Together, BerryDunn and Chapin Hall bring this combination of well-honed expertise and experience to the State, and stand ready to serve as your trusted advisor. With our team at your side, CFS will realize the gains in process quality, efficiency, and effectiveness and the improvements in program outcomes it seeks to achieve—in compliance with FFPSA, the Child and Family Services Review (CFSR), and the Children and Families Services Plan (CFSP).

We offer an experienced, highly qualified, senior team with the expertise and commitment required to support the State's success. Our team is comprised of individuals who have dedicated their careers to researching solutions to improve the lives of children and families, and the communities they live in; who have "real world" experience as former federal and state leaders with the child welfare system; and who have deep expertise supporting state agencies with business process improvement, change management, project management, and implementation support for large-scale system change efforts. Members of our team have known and worked with each other for years, and will work together in a seamless and integrated manner to deliver on CFS' objectives. Key differentiators we bring to this initiative include:

⇒ **We use an Assessment, Planning, and Implementation Framework that results in actionable solutions.** Chapin Hall has developed an Assessment, Planning, and

Implementation Framework—along with a suite of related tools—to guide states in large-scale child welfare system transformation and improvement. The framework, which is used by states and jurisdictions across the country, is designed to ensure a comprehensive assessment of operational domains and areas of consideration core to child welfare agency and broader system functioning. The framework leverages data, evidence, and rigorous research to drive real-world achievable solutions to accelerate positive change for children and families.

⇒ **We have a systematic approach and a holistic perspective that balances rigor with feasibility.** Our approach values broad internal and external stakeholder input, and uses a variety of purposeful methods—such as web surveys, listening sessions, focus groups, business process mapping sessions, and targeted interviews—to gain it. Not only do we assess the issues and opportunities for improvement, but we also take into consideration the *strengths* of CFS' current child welfare program and processes, recognizing all that is working well and the hard work that CFS staff and leadership are engaged in. We combine stakeholder feedback with our knowledge of "what works" to develop an improvement strategy that stakeholders believe in and are prepared to support. Our multi-dimensional and multi-disciplinary perspective also considers several factors—including organizational structure, workforce capacity and development, policy, finance, information and decision-making, and technology—in the context of the drivers for change, challenges in the current environment, and the vision for the future environment.

⇒ **We have a proven business process mapping methodology and a track record of success.** Given the scope, complexity, and importance of this project, we believe it is important for CFS to hire a partner that has significant demonstrated experience in helping states to improve their business processes and programs. We have a proven business process mapping methodology—refined based on years of practical application—with customizable tools and templates to meet CFS' needs. We understand that staff typically do not think of their work in terms of process components such as actors, steps, decision points, and information flow, and that they may be reluctant to share issues. Our skilled facilitators know how to engage staff and elicit the information needed gain a solid understanding of processes, including both the challenges *and* the strengths of current processes.

⇒ **We help drive change, and we provide the guidance, tools, and training to sustain it.** Our improvement strategy is focused on building capacity within leaders, managers, staff and other stakeholders to achieve sustainable outcomes. We guide our clients to become learning organizations, promoting acquisition of new skills and competencies across the system. Our approach includes partnering with states to co-design, develop, facilitate, guide, and reinforce improvement efforts to help ensure that the capacity built is sustainable, positioning states to leverage new opportunities and address current and future challenges. We also incorporate change management strategies and tools into all of our efforts and coach leadership on how to use them. These skills are critical, because it is not enough to simply identify the changes that are needed; to realize CFS' goals, leaders and staff must have the awareness, desire, knowledge, and ability to sustainably execute and reinforce those changes.

⇒ **We value relationships and quality.** Our team is not just interested in getting the job done; we care about *how* we get the job done, something we believe is reflected in the fact that our clients regularly invite us back to conduct more work with them. We invest time and energy in building trust and credibility with staff and stakeholders. The people we work with—both within our internal team and our clients' team—matter to us, as expressed in several of BerryDunn's core values, such as "team first," "respect for others," and "ethical behavior and fair dealing in all we do." Particularly given the potential project duration, complexity, and significance, it is important for CFS to know it is working with people it will enjoy working with and can rely upon. Our consultants also hold each other accountable to high standards for performance, and have a reputation for delivering high-quality work—something our clients, external stakeholders who are involved in our work, and our contractor partners repeatedly tell us.

> *"The BerryDunn project team was always incredibly responsive and eager to help/assist as needed. I appreciated that they paired a consistently positive attitude with realistic expectations and forecasts for the project. I never felt that I was being misled or only being told what I wanted to hear, which has sadly been the case with other vendors."*
>
> **Ms. Ashley Berliner,**
> **Director of Healthcare Policy and Planning, Agency of Human Services, Vermont**

Most importantly, our strategy to successfully support the State is focused on the people served by CFS. Every federal or State regulation, every business process, every policy, every technology system, every error, every delay, and every inefficiency has the potential to impact a child receiving services or benefits that are critical to his or her safety, health, and well-being. We approach decisions—and advise our clients to approach decisions—by remembering that the decision may have a profound impact on a person's ability to receive the services they need to fulfill their potential. The human aspect of projects can often be forgotten in the maze of regulatory changes and IT system implementations states must deal with, but BerryDunn and our team of partners proudly support a vision to improve child welfare outcomes across the country. **We care about what we do, and we care about the people impacted by our work.**

3.3 PROPOSED DEVELOPMENT APPROACH

b. Proposed development approach

We developed the proposed approach for this initiative based on our team's collective experience performing similar projects for other public agencies, customized for CFS based on the RFP, the RFP addendum, and our understanding of your needs. Our approach has been refined over the years through experience; however, it is this same experience that affords us the confidence to be **flexible and adaptable** to each unique client and situation rather than employing a generic approach to assessing programs and improving processes. Each project is scoped to draw on our methodologies, while being tailored to meet the specific needs and desired outcomes of the agencies we partner with.

To fully support CFS and successfully deliver on the requested scope of work, we will employ a phased approach, shown in Figure 5, which supports iterative achievement of project goals and objectives, with tasks and deliverables building upon and reinforcing each other.

Figure 5: Phased-Approach to Delivering Project Outcomes

Phase 1: Business Process Mapping and Recommendations

We will begin with thoughtful and deliberate planning in **Phase 1: Task 1,** including holding an initial planning meeting with core CFS team members, establishing a centralized project document repository, developing a Project Management Plan, and requesting and beginning our review of relevant background documents. In addition, we will facilitate **a synchronization meeting with CFS leadership** to clarify CFS' meaning, intent, and desired assessment outcomes for each business requirement in the RFP; gain agreement on the approach to assessing each requirement; and prioritize requirements and associated tasks as needed. We will also facilitate a discussion with CFS leadership on **the State's transformation vision**—including how to leverage opportunities, reduce barriers, cultivate innovation, and achieve collective impact with stakeholders at the table—and its strategic direction, priority outcomes, and target populations.

During Task 1, we will begin discussion with CFS about the initiative's **governance structure,** making recommendations to help ensure that there are clear project roles, responsibilities, and decision-making processes, and that the right voices are represented to support buy-in for recommendations and CFS' path forward. We will also encourage CFS to consider developing a **stakeholder advisory group** so that stakeholders remain aware of upcoming changes and have a forum to provide feedback that supports successful implementation.

By taking a methodological and step-wise approach to system assessment and planning, CFS leaders will be better positioned to understand the strengths and gaps of the system and to develop a roadmap going forward for achieving better outcomes for children and families in Nebraska.

Finally, we will discuss the concept of developing **work groups and/or a "Process Improvement" or "Change Champions" team** comprised of staff representing different Division levels and areas. Although it is critical to engage a broad group of stakeholders during the project, we have found that having a dedicated core team of staff members focused on participating in process mapping sessions early on—and who continue to be change agents throughout the implementation process—is critical to the effectiveness, efficiency, and long-term sustainability of change initiatives such as the one CFS is embarking on.

In **Phase 1: Task 2**, we will transition to performing the operational assessment using the Assessment, Planning, and Implementation Framework developed by Chapin Hall to guide states in broad-scale child welfare system transformation and improvement. The framework is designed to support the **comprehensive assessment of operational domains** and areas of consideration core to child welfare agency and broader system functioning. A more detailed description of the framework is provided in Section 3.5.1.1. In addition, a mapping of the business requirements in RFP Attachment B: Business Requirements Matrix to the primary framework domain that the requirement will be addressed by is provided in Appendix A. Applying the Assessment, Planning, and Implementation Framework to CFS' business requirements will help ensure that each requirement is reviewed—and that an improvement strategy is developed—in a systematic and thorough manner across CFS' child welfare program.

Using the operational domains as the lens through which we perform assessment activities, we will **gather information about the strengths and opportunities for improvement** in CFS' child welfare program as it exists today. We will faciliate work sessions with key CFS staff to identify the in-scope processes, using the ACF's NHSIA business model and processes as the baseline, or a different model preferred by CFS. We will then faciliate **business process mapping sessions,** not only capturing the "as-is" state, but also asking participants to describe their vision of the improved future state to inform our implementation strategy and recommendations. To help ensure that the information we gather reflects perspectives of various stakeholders—such as clients, CFS staff and leaders, and service providers—and to gather information that may not be captured in process mapping sessions, we will also use a variety of other information gathering methods such as **web surveys, listening sessions, focus groups, data analysis, document review, policy review, and targeted interviews and meetings.** Additional details on our information gathering and business process mapping methodologies is provided in Sections 3.5.1.2, 3.5.1.3, and 3.5.1.4.

Task 2 will end with development of a Business Process Map Summary Document, reflecting the aggregate as-is and to-be information gathered in the process mapping sessions. Our approach supports **development of interim deliverables**—such as the summary document—and **frequent communications and debriefs on information gathering tasks** with CFS so that there are no surprises and so CFS will not have to wait a full four months to learn about the direction we are heading with the improvement strategy and recommendations. This iterative approach will support more expeditious decision-making and implementation of changes that may take longer to garner consensus on and/or secure funds for.

In **Phase 1: Task 3,** we will build upon the assessment activities in Task 2 by **analyzing the challenges in the current state** from multiple perspectives (e.g., practices, service array, policy, administrative, fiscal, technology, training, workforce, organizational structure) and **developing preliminary recommendations** to close the gaps. Our recommendations may come in two forms—near-term, discrete "quick wins" (i.e., low cost, low risk, short implementation timeline, high feasibility) and longer-term strategies that may be more complex, require greater cost, have higher risk, and be more politically difficult to gain support for. Recommendations will be informed by several sources, such as ideas for improvement shared by stakeholders in Task 2, knowledge of effective policies and practices based on literature review—including the body of scholarship at Chapin Hall—and lessons learned from our team's engagement with child welfare agencies across the country related to system improvement and transformation. We will also include the impact (or cost) of maintaining the current state and the anticipated benefits of implementing recommendations.

We will review preliminary recommendations (in alignment with our "no surprises" philosophy) with CFS leadership, gather initial feedback, make refinements, and prioritize recommendations.

We will then facilitate work sessions with CFS leaders and staff, as needed, to gather information to develop an **implementation roadmap, including key actions, realistic timelines, action owners, potential implementation risks, and risk mitigation strategies.** Our information gathering and analysis activities will culminate in the development of a State of Nebraska Child Welfare Recommendations and Roadmap. Finally, at CFS' request, we will develop statements of works (SOWs) for implementation of approved recommendations based on the approved, prioritized recommendations in the roadmap.

Our implementation approach may include developing performance measurements, evaluation criteria, and an evaluation plan to ensure the redesigned processes are delivering CFS' expected improvements.

Phase 2: Implementation

In **Phase 2,** we may provide various services to support implementation of the improvement strategy, depending upon which recommendations CFS decides to move forward with, and whether or not CFS competitively procures for the implementation phase. Based on experience with similar implementations, our approach involves thoughtful and organized implementation planning, which may include supporting the **design and execution of coaching strategies to support practice change** and developing **customized training curricula, materials, and leadership workshops** to help ensure all CFS leadership and staff have the knowledge and ability needed to successfully implement the improvement strategy. We may also partner with CFS leadership to identify staffing plans, develop approaches to test the improved processes before they are implemented statewide, provide on-site support for pilots, and establish criteria to determine when changes are ready to "go live" at all locations. Finally, we may also assist with changes to the organizational structure, roles, and responsibilities, including assisting with updates to job descriptions.

Phase 3: Project Closeout

When CFS is ready, in **Phase 3: Project Closeout,** we will transition our activities and **transfer knowledge** as needed to the CFS team for ongoing operations. We will facilitate **a lessons learned session and project closeout meeting,** signifying project closure.

Throughout all project phases, our project manager will provide **ongoing project management services**—such as management of and biweekly reporting on project scope, schedule, risks, issues, decisions, and action items—with the support of other team members. We will also provide support for **change management activities,** including developing and delivering communications, providing assistance with project governance, and providing leadership coaching on change management strategies. In our experience, a focus on business process improvement alone does not lead to meaningful and sustainable improvements, particularly for an initiative of this magnitude. To successfully realize the gains that CFS seeks, not only must processes be improved, but stakeholders must fully support the changes, and project constraints, risks, and issues must be well managed.

3.4 ATTACHMENT B – BUSINESS REQUIREMENTS MATRIX

c. Attachment B - Business Requirements Matrix

Our responses to CFS' business requirements are provided in the format provided by CFS below. For conciseness and to ease the CFS evaluation teams' review of our proposal, for several requirements, we made reference to where they are addressed in other sections of the Technical Response rather than repeating our approach to fulfilling them. In addition, in Appendix B, we have provided a mapping of each of the business requirements to the methods that we will use to gather information and assess them.

Req #	Requirement	Comply
	PROJECT SCOPE	
		Comply
PS-1	The bidder should describe what methodology will be used to review and evaluate the way the Child Welfare system processes currently function from start to finish.	X
	Bidder's Response: Details of our approach and methodology for providing a start-to-finish review and evaluation of CFS' child welfare system processes are provided in our response to Section 3.3: Proposed Development Approach and Section 3.5: Draft Project Work Plan. In summary, our approach and methodology includes: 1) confirming we have a clear understanding of CFS' desired outcomes and priorities through an initial synchronization meeting, 2) determining if we have all of the "right" processes in scope by developing a business process inventory, potentially based on the NHSIA business model, 3) performing various information gathering activities—such as business process mapping, web surveys, listening sessions, focus groups, and targeted interviews—across a broad stakeholder group, 4) performing best practice research, data analysis, and policy review, 5) analyzing the information and identifying gaps between the current state and the desired improved state to drive recommendations, and 6) helping to ensure traceability of business requirements across all activities to achieve desired project outcomes.	
		Comply
PS-2	The bidder should describe how it will develop a comprehensive review that will consider the roles that each position plays in the business process and consider any changes in staffing as a result.	X

Req #	Requirement	Comply
	Bidder's Response: As a standard part of our business process mapping methodology (described in Section 3.5.1.3), we identify the "actors" or staff and leadership positions involved in each business process, the role they play in the process, the steps they take, the information they have available to them, the decisions they make, who they interact with, etc. In business process mapping sessions and other information gathering activities, we will review issues and challenges related to the roles and responsibilities assigned to specific positions, assessing factors such as whether or not the position has the right authority, visibility, training, and educational requirements to successfully fulfill the role. In some cases, it may be that positions are being underutilized (i.e., individuals have more expertise and experience than needed, and the roles could be fulfilled in a more efficient yet still effective manner). In other cases, it may be that a position is fulfilling a role that exceeds the qualifications of the position.	
		Comply
PS-3	The bidder should describe how it will develop a comprehensive review that will obtain stakeholder consideration on improvement processes.	X
	Bidder's Response: Our methodology for engaging stakeholders is described in Section 3.5.1.2: Methodology: Stakeholder Engagement and Information Gathering, and the primary methods used to engage stakeholders for each business requirement are summarized in Appendix B: Crosswalk of Business Requirements to Information gathering Methods. Our methodology for performing information gathering includes using the right method for the right audience to get the right type of information. In summary, our approach includes: 1) engaging a broad range of internal and external stakeholders—including CFS leaders and staff; representatives from the court system; representatives from Division, Department, and State IT departments; clients; service providers; and community organizations—and using 2) a variety of methods—such as web surveys; listening sessions; focus groups; direct observation in the field offices; targeted meetings and interviews; and business process mapping sessions. The activities are structured to gather standardized data to facilitate analysis and make meaning of the content relative to the areas of inquiry and interest.	
		Comply
PS-4	The bidder should describe how it will develop a comprehensive review that will identify strengths and best practices of Nebraska's child welfare system.	X

Req #	Requirement	Comply
	Bidder's Response: We believe it is critical in any improvement project to identify the strengths and best practices of the existing program or system so that: 1) we do not lose sight of what is already working well so that we can carry those practices forward into the future, and 2) we (and State leadership) build trust and credibility with stakeholders (particularly staff) for acknowledging the good work that is already underway. As consultants who are often called upon to lead process improvement projects, we understand that staff are often fearful or skeptical of us. We are very sensitive to this and work hard from the start to ease staff's concerns and build rapport by being open, honest, genuine, and approachable, and also by recognizing the truly incredible work staff do, often in extremely challenging circumstances. As part of all of our information gathering activities—including business process mapping—we will intentionally ask stakeholders about what is working well today related to training, technology, practices, service delivery, and communication, and what they do not want to change in the future. We will capture this information and include it in the business process tables as part of D3. Business Process Map Summary Document and in D4. State of Nebraska Child Welfare Reform Recommendations and Roadmap. We will also analyze data, review policies, and compare current practices with best practices, which will inform our recommendations in D4.	
		Comply
PS-5	The bidder should describe how it will develop a comprehensive review to identify areas in need of positive improvement, describing the effect of the "as is" challenge on clients, employees and stakeholders.	X
	Bidder's Response: As with the strengths and best practices in PS-4, in all of our information gathering activities—including business process mapping—we will intentionally ask stakeholders about what is *not* working well today related to training, technology, practices, service delivery, and communication, and what recommendations *they* have to change these things in the future. We will capture these issues—which may include gaps in policies; lack of training; lack of quality; unclear roles and responsibilities; lack of appropriate authority; and process redundancies, inefficiencies, or bottlenecks—in the business process tables and the business process maps as part of D3. Business Process Map Summary Document and in D4. State of Nebraska Child Welfare Reform Recommendations and Roadmap. We will also analyze data, review policies, and compare current practices with best practices, which will inform our recommendations in D4. As part of our assessment, we will determine the effect of the challenge/impact of the issue on stakeholders in terms of criteria such as time, money, quality, and satisfaction.	

Req #	Requirement	Comply
		Comply
PS-6	The bidder should describe how it will develop a comprehensive review that will recommend an improvement strategy ("to-be) with specific recommendations to correct the problems/issues and to streamline procedures, case progression, and workflow along with rationale about how and why this improvement is needed.	X
	Bidder's Response: Based on the issues identified in the current state as a result of the information gathering and assessment activities in Tasks 1 and 2, we will analyze and identify the gaps between the current state and the desired future state (as defined by the transformation vision, compliance with federal standards, etc.) from multiple perspectives (e.g., practices, service array, policy, administrative, fiscal, technology, training, workforce, organizational structure), developing preliminary recommendations to close the gaps. Our recommendations may come in two forms—near-term, discrete "quick wins" (i.e., low cost, low risk, short implementation timeline, high feasibility) and longer-term strategies that may be more complex, require greater cost, have higher risk, be more politically difficult to gain support for, etc. Recommendations will be informed by several sources, such as strengths and ideas for improvement shared by stakeholders in Task 2, knowledge of effective policies and practices based on literature review—including the body of scholarship at Chapin Hall—and lessons learned from our team's engagement with child welfare agencies across the country related to system improvement and transformation. We will also include the impact (or cost) of maintaining the current state and the anticipated benefits of implementing recommendations, or the "how" and "why" the improvement is needed. We will review preliminary recommendations with CFS leadership, gather initial feedback, make refinements, and prioritize recommendations. Additional information on our approach to developing "to-be" recommendations is included in Section 3.3: Proposed Development Approach and Section 3.5.2: Detailed Project Work Plan.	
		Comply
PS-7	The bidder should describe how it will develop a comprehensive review that will identify the cost of present practices and the benefits to be derived through implementation of the recommendations.	X
	Bidder's Response: As described in PS-6, as a result of information gathered in Tasks 1 and 2 (including data analysis), we will identify issues and opportunities for improvement in the as-is state, gathering information on the impact and cost of the issues and the benefits of implementing recommendations to address them in terms of qualitative and quantitative (to the degree they are readily	

Req #	Requirement	Comply
	available) measures, such as quality, time, financial cost, and other program and system performance metrics.	
		Comply
PS-8	The bidder should describe how it will develop a comprehensive review that will identify areas to maximize funding resources (IV-E funding, etc.).	X
	Bidder's Response: Using the information gathering methods identified in Table B.1 in Appendix B (described in Section 3.5.1), we will review areas of spending and reimbursement to determine how, and on what, the State spends its federal, State, and other funds. We will review block grant spending, IV-E reimbursement, State spending, eligibility rates, and prior year trends to determine the extent to which revenue could be better maximized. Our assessment will include a lookback at the previous one to two years of federal grant reports, federal claims, State appropriations, and other fiscal reports. In addition to spending and reimbursement, the State's Title IV-E eligibility and Medicaid eligibility rates will be reviewed, with a specific focus on eligibility processes, eligibility approval, and denial trends.	
		Comply
PS-9	The bidder should describe how it will develop an implementation plan that identifies immediate and longer term changes, timelines, required resources to execute the change, and key communication messages to facilitate the shift to an improved way of working.	X
	Bidder's Response: Having provided implementation oversight for many improvement initiatives, our approach to developing implementation plans is practical. Rather than being overly ambitious and establishing numerous activities with aggressive timelines and targets that cannot be met, we work directly with the individuals, groups, and organizations responsible for implementation to develop a reasonable number of activities to be performed within realistic timeframes—something we are well-accustomed to doing as experienced project managers. This approach builds buy-in as it incorporates the voice of the implementation "owners," factoring in their workloads, priorities, and other considerations and realities they face. Leveraging the prioritized recommendations described in PS-6, we will collaborate with CFS stakeholders to gather information to develop an implementation roadmap, including key actions, realistic timelines, action owners and resources needed, potential implementation risks, and risk mitigation strategies. This may include facilitating work sessions with small teams of	

Req #	Requirement	Comply
	individuals, as well as having targeted meetings with specific staff and leaders. The implementation plan will include both near- and long-term strategies to implement the recommendations that CFS decides to move forward with. In alignment with the change management and communication plans included in the Project Management Plan, the implementation plan will also include the high-level strategy for continuing to engage stakeholders in the implementation process, including developing and delivering key communication messages and leveraging a stakeholder advisory group and designated State staff "Change Champions" team to help communicate and drive change. Finally, at CFS' request, we will develop SOWs for implementation of approved recommendations based on the approved, prioritized recommendations in the roadmap.	
		Comply
PS-10	The bidder should describe how it will develop a comprehensive review that will assess the following areas for improvement strategies in the following areas where Nebraska is currently and historically been challenged by our inability to safely achieve permanency in a timely manner. Some of the contributing factors include but are not limited to: a. Reunification in 12 months has been a long-standing area of underperformance as measured by the Child and Family Services Review (CFSR) Round 2 and Round 3 Data Indicators.as required by Administration for Children and Families (ACF).	X
	Bidder's Response: Using the assessment framework, information gathering methods and/or analyses identified in Table B.1 in Appendix B (described in Section 3.5.1), we will assess CFS performance data on a key set of indicators that are drivers of timely reunification; comparisons to other similarly situated states will be made when possible to contextualize performance and identify opportunities to prioritize performance improvement. We will also review policies to determine if impediments are embedded in day-to-day requirements and regulations, as we have found in other states. As part of our analyses, we will also seek to understand variability across regions to identify opportunities for prioritized performance improvement. We will gather qualitative and quantitative data from multiple stakeholders and sources, including caseworkers, supervisors, and administrators to identify organizational structure and/or culture, practice, and resource barriers. Our assessment will include a review of CFSR findings and other key CFS documents, such as the Annual Progress Services Report (APSR), CFSP, PIP, and prior strategies undertaken to complete the assessment.	

Req #	Requirement	Comply
PS-11	b. Insufficient engagement and subsequent needs assessment of non-custodial parents/caregivers, relatives and kin reduce options for safe and timely permanency.	Comply X
	Bidder's Response: Using the assessment framework, information gathering methods and/or analyses identified in Table B.1 in Appendix B (described in Section 3.5.1), we will assess policies and protocols guiding the efforts of staff to identify, engage and assess non-custodial parents/caregivers, relatives, and kin as part of the investigation and removal process. We will also review policies and protocols guiding how staff conduct ongoing identification, outreach, and assessment throughout the life of the case. We will gather qualitative and quantitative data from multiple stakeholders and sources to identify organizational structure and/or culture, practice, and resource barriers to increasing placement and permanency with non-custodial parents and kin, with a specific focus on fathers. Our assessment will include a review of exiting, or absent, practices designed to increase placement and reunification with non-custodial parents and kin, such as Family Finding and Family Team Meetings, and determining the degree to which these practices are present and operational in the State.	
PS-12	c. Failure to establish a permanency goal based on current case conditions and resistance by the courts to establish and pursue concurrent permanency goals, e.g., adoption, for youth 15/22 out of home.	Comply X
	Bidder's Response: Using the assessment framework, information gathering methods, and/or analyses identified in Table B.1 in Appendix B (described in Section 3.5.1), we will assess policies and protocols guiding the efforts of the workforce to establish and/or update appropriate permanency goals, including concurrent goals, based on current case conditions to determine if impediments are embedded in day-to-day practice or implementation of those policies. Our stakeholder interviews and focus groups with workers and supervisors will explore current practices and challenges with determining appropriate permanency and concurrent goals for children and youth in care. Judges or court representatives will also be included in qualitative information gathering to assess structural or judicial culture barriers impeding the establishment of permanency goals reflecting the best interest of the child and the achievement of timely permanency for children, as well as to facilitate identification of considerations for prioritized performance improvement. As part of our analyses, we will also seek to understand variability across regions to identify opportunities for prioritized performance improvement. Our assessment will focus both on the concrete barriers as well as the more implicit or underlying cultural challenges child welfare agencies and court systems face in achieving permanency for children who have been in care for extended periods. Additional analyses related to timely	

Req #	Requirement	Comply
	permanency (e.g., reducing the number of children in care 12 months or more; see PS-10) will inform recommendation development related to reducing the number of children who reach the 12 months in care mark, which will be necessary to solve length of stay challenges going forward, as goal-setting and permanency are inextricably linked.	
PS-13	d. Infrequent utilization of Bridge custody order.	Comply X
	Bidder's Response: Using the assessment framework, information gathering methods and/or analyses identified in Table B.1 in Appendix B (described in Section 3.5.1), we will assess policies and protocols for the use of Bridge custody orders to facilitate reunification with parents with whom children are already placed. We will analyze qualitative and quantitative data to determine if barriers to the use of Bridge Custody Orders lie within the workforce, the courts, or both. As part of our analyses, we will also seek to understand variability across regions to determine opportunities for prioritized performance improvement. Judges or court representatives will be included in qualitative information gathering to assess structural or judicial culture barriers impeding timely permanency and the use of Bridge Custody Orders. Our assessment will focus on concrete barriers, as well as on the more implicit or underlying cultural challenges that child welfare agencies and court systems face together when children have been in care for extended periods.	
PS-14	e. Court's resistance to CFS's recommended action based on Structured Decision Making® (SDM) reunification assessment.	Comply X
	Bidder's Response: Using the assessment framework, information gathering methods, and/or analyses identified in Table B.1 in Appendix B (described in Section 3.5.1), we will assess policies and protocols for the use of SDM and the workforce's application of assessment findings in the development of recommendations to the court for action. Understanding whether the workforce is effectively translating SDM findings is critical, as is gaining a nuanced understanding of court perception and practice regarding standardized assessment to inform planning and decision-making. Analyses will also seek to understand variability across regions to determine opportunities for prioritized performance improvement. Our assessment will focus both on the concrete barriers and the more implicit or underlying cultural challenges that child welfare agencies and court systems face when synthesizing vast amounts of general family functioning and child safety information alongside actuarial-based assessment data.	

Req #	Requirement	Comply
PS-15	f. Caseloads consistently at or above Child Welfare League of America (CWLA) standards.	Comply X
	Bidder's Response: Using the assessment framework, information gathering methods, and/or analyses identified in Table B.1 in Appendix B (described in Section 3.5.1), we will assess policies and protocols for hiring, worker qualifications, staffing allocations, and the business process for assigning, transferring, and closing cases per program and region, to understand the context for worker caseloads. We will conduct data analysis using CFS-provided current and historical data and/or the survey to understand the number and distribution of cases and workers across regions, and in the private agencies, to assess actual caseloads and note relevant trends. As part of our assessment, we will seek to understand the extent to which protocols for case assignment and caseload distribution reflect actual practice, solicit insight into retention and attrition, and understand the nuances across programs and regions. We will use these results, in addition to synthesizing research on caseloads and the related considerations of burden and workload, to frame our recommendations related to caseloads.	
PS-16	g. Inadequate participation of all family members, relatives, foster parents, informal supports, etc., at family team meetings inhibit case progression.	Comply X
	Bidder's Response: Using the assessment framework, information gathering methods, and/or analyses identified in Table B.1 in Appendix B (described in Section 3.5.1), we will assess policies and protocols related to including and engaging family members, foster parents, and informal supports in family team meetings. Our review of the literature on family team meeting best practices will be used to inform data collection. We will assess the extent to which family team meetings exist within a broader practice, and the organizational context and culture that values family inclusion, prioritizes placement with family/kin, values reunification as the best permanency option whenever safely possible, and leverages family engagement and participation as the pathway to child well-being and permanency (rather than viewing family team meetings as "yet another task to be completed"). At the macro level, we will also seek to understand how CFS communicates with families regarding foster care and the role of families, via family team meetings, to the achievement of permanency. We will gather and analyze quantitative and qualitative data on facilitators of and barriers to family team meeting participation. We will use the results to make recommendations for increasing the engagement of family members, foster parents, and informal supports in family team meetings.	

Req #	Requirement	Comply
PS-17	h. Case manager attrition rate creates new case assignments and case familiarity inhibits the rate of case progression.	Comply X
	Bidder's Response: Using the assessment framework, information gathering methods, and/or analyses identified in Table B.1 in Appendix B (described in Section 3.5.1), we will assess case manager attrition and case transfer in close alignment with our analysis regarding per PS-15 on caseloads, which will include an analysis of case manager assignments and case progression. Additional areas of assessment include conducting focus groups or interviews to understand supervisory roles for oversight of case manager documentation, supporting informed case transfer, and otherwise serving as the institutional memory of a case. We will also review CFSR findings and other CFS-provided reports to understand the barriers to case familiarity and case progression. A salary/compensation review relative to other child welfare agencies can illuminate fiscal barriers and opportunities for improving case manager attrition rates. As part of our analyses, we will also seek to understand variability across regions and program areas to determine opportunities for prioritized performance improvement. To the extent possible, the analyses will also seek to quantify the effect of case manager attrition on length of stay in care to inform recommendations.	
PS-18	i. Inadequate documentation and/or service provision in Indian Child Welfare Act (ICWA) cases.	Comply X
	Bidder's Response: Using the assessment framework, information gathering methods, and/or analyses identified in Table B.1 in Appendix B (described in Section 3.5.1), we will assess State policies, protocols, and business processes related to Native American children and contrast them with federal regulations and best practices to produce a gap analysis. Our assessment will take into consideration the process the State employs to identify children who may be Native American, confirm their eligibility as an "Indian child" pursuant to ICWA in collaboration with Tribes, and refer and provide services—including specific active efforts to keep the child with his or her Native American family. We will assess if and how there is variation in process and service provision based on the child's potential Tribal membership in the six federally recognized tribes local to the State. Understanding these processes and protocols are necessary to inform a thorough assessment of whether documentation is occurring, or is occurring per policy. We will conduct select interviews and listening sessions with key staff and Tribal representatives who are involved in cases of Native American children will also drive our exploration of the technical, resource, system, and cultural barriers and opportunities for improvement. Our assessment and exploration will be informed by review of information such as CFSR findings, data analyses, and other audits and reports that highlight areas of concern, as well as a review of research on	

Req #	Requirement	Comply
	the unique needs of Native American families that come to the attention of child welfare. Our assessment will be enhanced by our team's deep familiarity with the ICWA and challenges state agencies have experienced in meeting its requirements.	
PS-19	j. Identifying, locating, and involving fathers for support and possible placement for their children.	Comply X
	Bidder's Response: Using the assessment framework, information gathering methods, and/or analyses identified in Table B.1 in Appendix B (described in Section 3.5.1), we will assess policies and protocols related to identifying, locating, and engaging fathers, and the paternal extended family, for support and possible placement of their children. Our assessment, which will be closely linked with our efforts in PS-16, will include understanding the organizational culture and practices of the workforce related to engagement of fathers from the time of the investigation and placement and throughout the life of the case. Our review of the literature on best practices for father engagement will inform our assessment efforts. As part of our analyses, we will seek to understand the specific facilitators of and barriers to identifying, locating, and engaging fathers in the State. We will use the results to make recommendations for increasing the identification, location, and engagement of fathers.	
PS-20	The bidder should describe how it will develop a comprehensive review that will assess the need for Supervisory Training.	Comply X
	Bidder's Response: Using the assessment framework, information gathering methods, and analyses identified in Table B.1 in Appendix B (described in Section 3.5.1), we will review existing job descriptions, identify competencies, and include supervisors in qualitative information gathering to understand the skill-based supervisory competencies necessary and the extent to which those are currently provided in training opportunities. We will review the current training curriculum to determine the degree to which existing content builds supervisor knowledge and competencies, and we will recommend enhancements to strengthen the existing curriculum or recommend the development of a stand-alone supervisory training that includes core competency development via multiple skill transfer opportunities. This will include on the job coaching of supervisors and developmental/progressive skill-based activities, as a comprehensive model of supervision is supported by both training and coaching. Multiple child welfare jurisdictions have tapped State University Schools of Social Work to provide ongoing coaching to supervisors tapping title IV-E resources, and our assessment will explore the extent to which a joint Supervisory Education and Training Program could result.	

Req #	Requirement	Comply
		Comply
PS-21	The bidder should describe how it will develop a comprehensive review that will assess and identify online training opportunities with competency-based testing modules for child welfare staff, foster parents, and providers such as mandatory abuse and neglect reporting.	X
	Bidder's Response: Using the assessment framework, information gathering methods, and/or analyses identified in Table B.1 in Appendix B (described in Section 3.5.1), we will assess the availability of and extent to which online training opportunities can enhance or replace existing child welfare training in the State. We will begin with gaining an understanding of the competencies and training framework in place in the State. We will determine what augmentation may be needed via review of training curricula and hiring documents and engagement with child welfare staff, foster parents, and providers in information gathering sessions. With competencies identified, we will review existing online training and testing modules to determine where content is aligned, where gaps exist, and make recommendations for online training content development. We will also seek to assess the extent to which the competencies are tied, or could be better tied, to workforce and foster parent recruitment and hiring, performance evaluations, and performance improvement strategies, as well as if there is clarity regarding the connection between competencies and the outcomes to be achieved with children and families. We will augment our recommendations regarding online training will be augmented with recommendations related to the development of a comprehensive approach to workforce recruitment, development, and retention.	
		Comply
PS-22	The bidder should describe how it will develop a comprehensive review to assess a triage funding authority utilizing all federal funding opportunities within CFS.	X
	Bidder's Response: Using the information gathering methods identified in Table B.1 in Appendix B (described in Section 3.5.1), we will identify funding maximization and federal funding triage opportunities. A triaged funding strategy must consider expenditures that can be reimbursed, funding sources that are capped, required Maintenance of Effort spending, and sources of available State match. The State is using many different funding sources during federal fiscal year 2019, with additional changes on the horizon as the State exits its IV-E waiver and begins FFPSA implementation. IV-E waiver activities focused on alternative response and	

Req #	Requirement	Comply
	addressing issues that lead to removal of children from their homes may morph into FFPSA prevention activities and be eligible for IV-E reimbursement starting in fiscal year 2019. The triage of funds will also be critical as all states must meet Maintenance of Effort requirements defined in FFPSA, and starting in October 2020, the State's Medicaid program will begin to enroll newly eligible low-income adults and others as a result of Medicaid expansion. Determining the appropriate funding source for the various services offered through—or funded by—CFS will need to consider the IV-E, Medicaid, and TANF eligibility profiles of children and their parents, kin, and caretakers, along with the setting in which the services are rendered.	
		Comply
PS-23	The bidder should describe how it will develop a comprehensive review that will assess the issues and challenges with current technology and make recommendations on how technology could improve efficiency.	X
	Bidder's Response: Using the information gathering methods identified in Table B.1 in Appendix B (described in Section 3.5.1), we will review the current technology (for example, N-FOCUS) being used by child welfare staff to perform processes—such as client intake and case management, performance/utilization management, reporting, and provider management. We will also assess the ability to share data with service providers, other HHS Divisions, and the education and court systems to enhance coordination and collaboration. This may include performing a review of background documents and items such as defect logs, asking staff about technology challenges in web surveys and listening sessions, and capturing technology issues as part of business process mapping. Our business process mapping methodology identifies the technology and tools used to perform each process step, and also capture manual processes, workarounds, and the use of "shadow" systems or tools (e.g., MS Excel) to accommodate missing, inadequate, or staff mistrust of trust in technology. We will focus on whether or not staff have the accurate, comprehensive information they need in a timely and accessible manner to make informed decisions and take appropriate actions, and whether or not the technology supports monitoring of program outcomes. We will also hold targeted interviews and meetings with technology staff as needed (e.g., the Office of the CIO, DHHR Informational Systems and Technology, and the Judicial Branch of Information Technology Division).	
		Comply
PS-24	The bidder should describe how it will develop a comprehensive review that will assess opportunity for increased efficiency in referral, authorization and billing per family to include explanation of benefit to family.	X

Req #	Requirement	Comply

	Bidder's Response:
	Our approach will include a review of referral, authorization, and billing documents; child welfare system and referring agency systems; current business processes; and any current explanation of benefits currently provided to families. Opportunities for improved efficiencies will be identified as a result of those reviews. Opportunities may include:
	• Improved data gathering and intake data accuracy
	• Improved accuracy of Medicaid eligibility and Medicaid IDs provided on referral forms (sent to or from CFS)
	• Implementing pre-billing quality assurance review steps to assess the presence and accuracy of all required information:
	  o Eligibility information – Medicaid, IV-E, other
	  o Prior authorization approvals
	  o Provider information, including provider ID
	  o Specific procedures/services requested or performed including procedure codes as required
	Explanation of benefit improvements will build upon current benefit information that is shared with families and providers, with a potential goal to include more detail on entitlements for which a family is enrolled, prior authorization rules, and family responsibilities as they relate to accessing services.	

		Comply
PS-25	The bidder should describe how it will develop a comprehensive review that will assess and identify areas of improvement to 24 hours services in child welfare to include hotline, on call system response by child welfare staff and providers.	X
	Bidder's Response: Using the assessment framework, information gathering methods, and/or analyses identified in Table B.1 in Appendix B (described in Section 3.5.1), we will assess the existing 24-hour service system, including the hotline, its workforce capacity and skill set, consistent coverage over the 24/7 timeframe, policies and protocols, and the efficiency of the processes by which reports made to the centralized number are distributed quickly and efficiently to the responsible CPS office. Additionally, our review, similar to PS-33, will assess the 24/7 service response approach designed to stabilize families in crisis and at risk of	

Req #	Requirement	Comply
	foster care involvement, and children in placement at risk of placement disruption. We will identify prioritized opportunities for increased efficiency in these areas, and determinants of decisions made in these contexts will be identified in order to examine whether additional information or decision-making protocols are needed.	
		Comply
PS-26	The bidder should describe how it will develop a comprehensive review that will assess opportunities for increased efficiency for a reporting system for abuse and neglect allegations.	X
	Bidder's Response: Using the assessment framework, information gathering methods, and/or analyses identified in Table B.1 in Appendix B (described in Section 3.5.1), we will assess the centralized reporting system; its workforce capacity and skill set; the consistency of coverage 24 hours/day, 7 days/week; and the efficiency of the processes by which reports made to the centralized 1-800 number are distributed quickly and efficiently to the responsible CPS office. We will compare current practice to findings from the best practice review to identify gaps in the reporting system. Prioritized opportunities for increased efficiency in the reporting system will be identified.	
		Comply
PS-27	The bidder should describe how it will develop a comprehensive review that will assess the current child welfare information system. Include any opportunities to share data and reporting with court systems.	X
	Bidder's Response: Please see our response to PS-23.	
		Comply
PS-28	The bidder should describe how it will develop a comprehensive review that will assess the service array and the connection to Families First Prevention Services Act and the claiming of IV-E funding.	X
	Bidder's Response: Using the information gathering methods identified in Table B.1 in Appendix B (described in Section 3.5.1), we will assess both the service array, as well as its connection to the FFPSA and claiming of associated funding. Using the assessment framework, information gathering methods, and/or analyses identified in Table B.1 in Appendix B (described in Section 3.5.1),	

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	we will assess the extent to which the State's service array aligns with the needs of the target populations impacted by Family First, and to assess readiness for Family First implementation more broadly. Furthermore, we will assess the extent to which currently available services are federally reimbursable under title IV-E or other funding streams (e.g. Medicaid), identifying opportunities to further leverage title IV-E dollars when feasible and appropriate. If target populations analyses yield findings that suggest that additional evidence-based practices are needed to promote intended outcomes, we will recommend a process and approach to guide the intervention selection and installation process to help ensure the service array is adequate to meet the needs of the State's child welfare-involved children and families. Before claiming Title IV-E, as allowed by the FFPSA, the State must develop its formal five-year plan that defines its prevention program and specifies how the FFPSA will be implemented in Nebraska. Planning is already underway as the State has convened several FFPSA work groups that meet regularly to discuss topics such as foster care maintenance payments, prevention services, and a kinship navigator program. Beginning October 1, 2019, Federal Financial Participation will be available to states at 50% for prevention services and programs that leverage well-supported practices. The FFPSA stresses the need for child welfare agencies to fund and engage in well-supported, trauma-informed, evidence-based practices, with a particular emphasis on prevention and parenting support; therefore, the current and future service array must be assessed with those guidelines in mind. Only those services that meet the FFPSA criteria, delivered to those individuals who also meet the criteria, should be claimed against Title IV-E—and those services that do not quite fit the criteria can be assessed for appropriateness to charge against SSBG, Title IV-B, TANF, Maintenance of Effort, or other funding sources.	
		Comply
PS-29	The bidder should describe how it will develop a comprehensive review that will assess the reasons relatives' homes are not being licensed and how that can be improved.	X
	Bidder's Response: Using the assessment framework, information gathering methods, and/or analyses identified in Table B.1 in Appendix B (described in Section 3.5.1), we will assess policies and protocols related to identifying and licensing relative homes. Our review of the literature on best practices for identifying and licensing relative homes will be used to determine the gap between current licensure practices and best practices. The analyses of qualitative and quantitative data will seek to identify the facilitators of, and barriers to, identifying and licensing relative homes (e.g., space requirements, lead paint, criminal history, availability, and effective use of waivers for specific requirements). This may also involve developing recommendations for engagement of relatives and communicating the benefits of licensure. We will use the results to make recommendations for	

Req #	Requirement	Comply
	increasing the identification and licensure of relative homes.	
		Comply
PS-30	The bidder should describe how it will develop a comprehensive review on how to increase effectiveness of the current placement matching system for foster homes within the foster care system.	X
	Bidder's Response: Using the assessment framework, information gathering methods, and/or analyses identified in Table B.1 in Appendix B (described in Section 3.5.1), we will develop a business process map of placement processes to understand the tools and principles that are currently applied when assigning children to foster homes. We will assess these processes to determine the degree to which geographic location, clinical need, and level of intensity of supervision and services are taken into account when placing children. We will consider the use of appropriate assessment tools, algorithmic approaches to identifying appropriate levels of care, and technological solutions that promote geographically proximal placements as potential recommendations to promote placement-matching refinements.	
		Comply
PS-31	The bidder should describe how it will develop a comprehensive review that will assess the access and utilization to community resources for issues relating to poverty such as ACCESSNebraska, community food pantries, shelters etc.	X
	Bidder's Response: Using the assessment framework, information gathering methods, and/or analyses identified in Table B.1 in Appendix B (described in Section 3.5.1), we will assess policies and protocols that address access to, and use of, community resources to address poverty-related issues. We will review the literature on best practices for accessing and using community resources will identify the gap between current practices and opportunities for better addressing poverty issues (e.g., child support, EITC, pathways out of poverty). The qualitative and quantitative data analyses will seek to identify facilitators of, and barriers to, accessing and using community resources. We will use the results to make recommendations for increasing access to, and use of, community resources to address poverty-related issues.	

Req #	Requirement	Comply
		Comply
PS-32	The bidder should describe how it will develop a comprehensive review that will work with schools and medical communities to access resources through community or public assistance programs such as Medicaid/MCO or child care.	X
	Bidder's Response: Using the assessment framework, information gathering methods, and/or analyses identified in Table B.1 in Appendix B (described in Section 3.5.1), we will assess policies and protocols related to working with schools and medical communities to access resources through community or public assistance programs. We will review the literature on best practices to identify the gap between current practice and opportunities for improvement in working with schools and medical communities to access resources through community or public assistance programs. The qualitative and quantitative data analyses will seek to identify the facilitators of, and barriers to, working with schools and medical communities to access resources through community or public assistance programs. We will use the results to make recommendations for working with schools and medical communities to access resources through community or public assistance programs.	
		Comply
PS-33	The bidder should describe how it will develop a comprehensive review that will assist with the improvement of the 24/7 crisis response system that addresses physical and behavioral needs of individuals with immediate access to resources in local communities.	X
	Bidder's Response: Using the assessment framework, information gathering methods, and/or analyses identified in Table B.1 in Appendix B (described in Section 3.5.1), we will assess the availability of, and access to, crisis/mobile response services from CFS, other public agencies (e.g., mental health), health system, and community-based organizations to families at risk of foster care entry and to children in foster care at risk of placement disruption. We will assess services to address physical and behavioral health do exist, referral processes and capacity to determine if there is a gap between need and availability. The survey and qualitative information collected will include queries to individuals/organizations typically referring youth to crisis response to identify strengths, barriers, and opportunities for improvement.	
		Comply

Req #	Requirement	Comply
PS-34	The bidder should describe how it will develop a comprehensive review that will identify well-supported Evidence-Based Practices (EBP) with a plan for funding implementation, validity and adherence.	X
	Bidder's Response: Using the assessment framework, information gathering methods, and analyses identified in Table B.1 in Appendix B (described in Section 3.5.1), we will scan the field for existing ESP capacity within other public agencies (e.g., mental health, substance abuse), CFS-contracted private agencies, and community-based organizations serving children and families to determine what EBPs are available (and their alignment with the EBPs identified by the Family First Clearinghouse), the volume of service slots, level of evidence, and geographic availability. We will also include in the survey and interviews questions related to training capacity, relationships with model developers/purveyors, fidelity monitoring approach and capacity, and CQI efforts to help ensure adherence to the model. The crosswalk with the Family First Clearinghouse interventions will provide information regarding the availability of IV-E funding for specified prevention services for candidate families; data collection with stakeholders will illuminate the use of, and opportunities for, maximizing Medicaid for service delivery.	
		Comply
PS-35	The bidder should describe a comprehensive review to address disproportionate minority representation within the child welfare system.	X
	Bidder's Response: Using the assessment framework, information gathering methods, and analyses identified in Table B.1 in Appendix B (described in Section 3.5.1), we will assess the decision points along the child welfare continuum where disparities in decision-making and action arise for children and families of color (i.e., entry into foster care and exits to permanency) to understand the extent to which these drivers are influencing minority representation in the child welfare system. We will review placement rates and length of stay of minority children and white placement to determine the representation gap for each decision point to inform recommendations for prioritizing action.	
		Comply
PS-36	The bidder should describe how it will develop a comprehensive review that will develop strategies to implement family voice and choice in service provision and identified service providers.	X

Req #	Requirement	Comply
	Bidder's Response: Using the assessment framework, information gathering methods, and analyses identified in Table B.1 in Appendix B (described in Section 3.5.1), we will assess policies and protocols related to giving families voice and choice in service provision and having a seat at the family team meeting table to inform service selection and decision-making. We will review the literature on best practices for giving families voice and choice in service provision to identify the gap between current services and opportunities for improvement. Our qualitative and quantitative data analyses will seek to identify facilitators, barriers, and opportunities to giving families voice and choice in service provision. We will use the results to make recommendations for increasing family voice and choice in service provision that may include enhancements to technology and family-friendly communication materials.	
		Comply
PS-37	The bidder should describe how it will develop a comprehensive review that will develop a strategic plan to ensure full compliance with Family First Preservation Services Act and Comprehensive Addiction and Recovery Act of 2016. Plan must connect to the Children and Family Services Plan (CFSP), the Annual Progress Services Report (APSR) and any Program Improvement Plans (PIP). Documents can be found here: http://dhhs.ne.gov/Pages/Child-Welfare.aspx.	X
	Bidder's Response: BerryDunn and our partners are currently engaged with other states to help them assess, plan for, and implement changes to help ensure compliance with the FFPSA. Our Assessment, Planning, and Implementation Framework is designed to help ensure a comprehensive assessment of operational domains and areas of consideration core to child welfare agency and broader system functioning. The framework consists of six primary operational domains and areas of consideration, as depicted in Section 3.5.1.1. The framework is being used by states and jurisdictions across the county for planning the FFPSA implementation. Using the assessment framework, information gathering methods, and analyses identified in Table B.1 in Appendix B (described in Section 3.5.1), we will review available performance data applicable to FFPSA and CARA. Areas for improvement will be identified through the performance data. We will crosswalk the core elements of FFPSA (e.g., prevention, congregate care reduction, model-licensing standards) and CARA with the CFSP, APSR, PIP, and other identified plans/reports, including the draft Prevention Plan already under development in order to determine where CFS is focusing efforts, what strategies are already underway, and where gaps remain. We will engage the CFS leadership team to capture	

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	priority outcome areas, and integrate information gathered from the performance data and CFS leadership priorities. This will inform the survey to gather a broader set of input into goals and objectives. As part of our recommendations and roadmap, we will develop include a plan to help ensure full compliance with FFPSA and Comprehensive Addiction and Recovery Act of 2016.	
		Comply
PS-38	The bidder should describe how it will develop a comprehensive review of a system of performance-based contracting.	X
	Bidder's Response: Using the assessment framework, information gathering methods, and analyses identified in Table B.1 in Appendix B (described in Section 3.5.1), we will assess the extent to which contracts are performance-based and structured around key/prioritized child welfare outcomes measures germane to private agency performance (e.g., timely permanency, placement stability, exits to positive permanency). We will conduct stakeholder interviews with contracts staff and select provider agency leaders to better understand the processes by which contracts are developed, and to identify factors that promote or hinder the development of sound performance-based contracts. Our recommendations will also take into account best practices and the available evidence base for performance-based contracting in child welfare.	
		Comply
PS-39	The bidder should describe how it will provide recommendations for a framework for quality assurance in child welfare.	X
	Bidder's Response: Using the assessment framework, information gathering methods and analyses identified in Table B.1 in Appendix B (described in Section 3.5.1) we will assess the extent to which CFS' CQI is guided by agency priority outcomes, uses rigorous evidence, emerges from a curiosity about performance that is inclusive of key stakeholders, and embeds improvement activities throughout all levels of the agency. We will identify the extent to which CQI is functioning relative to best practice and propose steps to achieve optimal effectiveness. We will conduct key informant interviews and review policies and protocols to understand whether there is a clear strategic direction that focuses CQI activities, an organizational commitment to learning that extends to including partners, and a standard and cyclical approach to CQI. We will appraise data holdings, metrics, data visualization, and data analysis methods to understand whether CFS' available data and measurement approaches support a	

Req #	Requirement	Comply
	non-biased view of performance. In conducting our assessment and making recommendations, we will pay close attention to how CFS integrates quality assurance, evaluation, and research into CQI activities to have a full complement of evidence to inform decision-making. We will also explore nuances that may impact CQI functioning, including data quality, variation in approaches across program areas within child welfare, and staff skills and facility with CQI.	
		Comply
PS-40	The bidder should describe how it will develop a comprehensive review that will identify strategies for a career ladder and advancement for service providers and case managers in the child welfare system.	X
	Bidder's Response: Using the assessment framework, information gathering methods, and/or analyses identified in Table B.1 in Appendix B (described in Section 3.5.1), we will assess hiring guidelines related to skill set/education requirements, current career advancement protocols, and training and performance evaluation approaches to determine opportunities and barriers to advancement. We will gather information the workforce to explore organizational culture regarding advancement and the extent to which opportunities for developing the skills necessary to advance are integrated into day-to-day CFS operations and processes. This information will be married with the assessment of the turnover rate in PO-2 to understand the interplay of workforce dynamics.	
		Comply
PS-41	The bidder should describe how it will develop a comprehensive review that will create a business process map that outlines the current structure of CFS and the intersection with relevant support divisions' operations; including state office staff extending into regional field staff.	X
	Bidder's Response: We will capture information on the CFS organizational structure—including State office and regional field staff—as well as the intersection with relevant support Divisions through various information gathering methods, such as document review and targeted interviews and meetings. Based on the information gathered, we will develop an as-is organizational structure chart and/or information/process flow chart using MS Visio, depending on CFS' needs. Based on the results of the assessment and our associated recommendations, we may also create a to-be version of the structure if we believe changes are needed to better support CFS' desired improvements.	

Req #	Requirement	Comply
	In general, we will also capture the primary actors (CFS or otherwise) and the touchpoints with other Divisions and stakeholders as part of *all* business processes that are mapped to depict the flow of information, decision-making, handoffs, etc.	
		Comply
PS-42	The bidder should describe how it will develop a comprehensive review that will make recommendations on improvement to the child welfare system processes, to include technology, training improvements, or other tools to assist CFS workers in state office and regional field.	X
	Bidder's Response: As part of business process mapping sessions, we will capture issues of various types (e.g., quality, inefficiencies, workarounds, bottlenecks) as well as *causes* of the issues—for example, lack of training; outdated, defective, or lacking technology; absence of tools to support quality. We will also discuss ideas or potential recommendations to overcome the issues, such as more robust or frequent training on specific topics, updates or "fixes" to technology, and the use of tools such as checklists and forms. We will also assess issues and opportunities to improve training and the use of technology and other tools as part of all other information gathering activities—such as the web survey, direct observation, and listening sessions—and we will ask stakeholders specific questions about these topics. We will use this information to capture both "quick wins" and recommendations that may be implemented in the near term to bring more immediate benefits to stakeholders, as well as longer-term recommendations that may require more expensive technology or complex policy changes.	

Req #	Requirement	Comply
	PROGRAM ORGANIZATION	
PO-1	Describe what methodology will be used to assess the following program management needs:	X
	Assess how to safely achieve permanency in a timely manner;	
	Bidder's Response: Using the assessment framework, information gathering methods, and analyses identified in Table B.1 in Appendix B (described in Section 3.5.1), we will assess how the State compares to other states in achievement of timely permanency to provide context to current practice. We will assess the use of concurrent planning as described in PS-12, practices that promote safe/timely permanency (e.g., Parent Partners, use of Family Team Meetings/practice model, Family Finding, shared parenting with foster parents), the relationship with judicial partners and their role in timely permanency. We will also examine the service array provided to families to stabilize functioning so that reunifications occur quickly, safely, and are sustainable for the long term.	
PO-2	Assess Nebraska's case management case staffing models and Supervisor training for staff development and case oversight;	X
	Bidder's Response: Using the assessment framework, information gathering methods, and analyses identified in Table B.1 in Appendix B (described in Section 3.5.1) we will assess how the staffing models at CFS and its private contracted agencies are organized and structured (e.g., unit staffing constellation, models of practice) and compare that to exemplar states with lower workforce turnover rates and greater achievement of timely permanency to inform recommendations. We will review supervisory training to determine where expectations regarding case oversight, role clarification, reflective supervisory skills and behaviors, and other skill set development opportunities exist.	
PO-3	Assess family engagement, assessments where applicable, and CFS case management quality of contacts with children, parents/caregivers, relatives and kin;	X
	Bidder's Response: Using the assessment framework, information gathering methods, and analyses identified in Table B.1 in Appendix B (described in Section 3.5.1), we will review policies and protocols related to family engagement and assessment of family	

Req #	Requirement	Comply
	functioning, as well as case management contacts with children, parents/caregivers, relatives, and kin. Our review of the literature on best practices for engaging and assessing families—and for case management contacts with children, parents/caregivers, relatives, and kin—will be used to identify the gap between current engagement, assessment, and quality of contacts, as well as the opportunities for improvement. Our qualitative and quantitative data analyses will seek to identify facilitators, barriers, and opportunities for improving family engagement and assessment, as well as the quality of case management contacts with children, parents/caregivers, relatives, and kin assistance programs. We will use the results to make recommendations for engaging and assessing families and for improving the quality of case management contacts with children, parents/caregivers, relatives, and kin.	
PO-4	Assess stability of workforce of child welfare case management;	X
	Bidder's Response: Using the assessment framework, information gathering methods, and analyses identified in Table B.1 in Appendix B (described in Section 3.5.1), we will review available administrative data on turnover rates of the workforce and compare to similarly situated states, documents from CFS' engagement with the Quality Improvement Center for Workforce Development to understand prior recommendations and their implementations, and information from the field to determine drivers of instability in the workforce to inform recommendations.	
PO-5	Assess whether there exists an effective array of individualized services and foster homes;	X
	Bidder's Response: Using the assessment framework, information gathering methods, and analyses identified in Table B.1 in Appendix B (described in Section 3.5.1), we will examine the types of services and placements available within the State's child welfare system to identify gaps based on best practice approaches to service delivery and placement array (e.g., traditional and therapeutic foster home, use of professional foster parents). Using available child assessment data, we will conduct or guide internal analysts to conduct gap analyses, and through interviews and survey data collection, we will gain an understanding of the levels of care needed and determine the gap between what is needed and what is available in order to make recommendations.	
PO-6	Assess if there exists an effective array of services and foster homes, whether those services and foster homes are available statewide and individualized for each family's needs;	X

Req #	Requirement	Comply
	Bidder's Response: Using the assessment framework, information gathering methods, and analyses identified in Table B.1 in Appendix B (described in Section 3.5.1)—and to the extent that data on service provision locations are available within contracts or other centralized databases—we will conduct or guide internal analysts to conduct gap analyses that examine the alignment of service locations and/or foster homes with the locations of families of origin, and recommend adjustments to the service array or supply of foster homes to address gaps.	
PO-7	Assess how to effectively exit the IV-E waiver on October 1, 2019 and move directly into the Family First Prevention Services Act; and	X
	Bidder's Response: Using the assessment framework, information gathering methods, and analyses identified in Table B.1 in Appendix B (described in Section 3.5.1), we will gain an understanding of the current functioning of the waiver to support Alternative Response, provider performance improvement, and other prevention service delivery, and crosswalk the current state with allowable services in Family First to assess how best to transition from the waiver to Family First. This will include interviews with leaders and fiscal staff to assess the fiscal impact of losing the capped allocation, and the extent to which the new but more limited flexibility provided in Family First provides new opportunities for meeting the needs of children and families at risk of entry into foster care or entry into congregate care.	
PO-8	Assess how to deliver economic and community supports for prevention services.	X
	Bidder's Response: Using the assessment framework, information gathering methods, and analyses identified in Table B.1 in Appendix B (described in Section 3.5.1), we can examine the current strengths and needs within the service provision infrastructure of the State's economic development and community service agencies. We will survey data from community service agencies, identified in conjunction with CFS, to determine the existing capacity and ability to deliver prevention services. We will construct the survey in a manner to allow for identification of existing mechanisms for delivery of prevention services, which prevention partnerships could be strengthened, and where new prevention partnerships and service delivery approaches could be established. Additionally, we will gather information identify geography of where service delivery mechanisms exist in order to identify any gaps.	

3.5 DRAFT PROJECT WORK PLAN

d. Draft project work plan to include the respondent's proposed processes and methodologies for providing all components of the Scope of Work; and

In the following sections, we have provided a description of our proposed framework, methodologies, and processes for providing all components of the scope of work requested by CFS for this Child Welfare Reform Analysis project, as well as a detailed project work plan for accomplishing the tasks. Please refer to Section 3.5.3: Project Schedule for the proposed timeline associated with each task and subtask.

> *"We have a highly collaborative relationship with BerryDunn and we remain impressed with their team's willingness to be flexible with their approach…while remaining within scope of the projects."*
>
> **Ms. Meredith Nichols, Assistant Administrator, Deputy Medicaid Director, State of Hawai'i Med-QUEST Division**

We developed the tasks, subtasks, and associated sequencing based on our understanding of CFS' needs from the RFP, as well as our experience doing this work with other public agencies. To help ensure alignment with CFS' and our expectations, we included assumptions for several subtasks in italicized font after the subtask description. However, as our previous clients can attest to, **our team will remain flexible throughout the engagement** and can adjust the approach and timing of tasks based on CFS' needs.

During contract negotiations, and again at project initiation, we will meet with CFS to review the project work plan, refining the tasks, subtasks, and timelines to meet CFS' needs and expectations, accounting for the availability and competing demands of key stakeholders. We understand, however, that the scope, schedule, and/or budget of a project may change after it is underway as a result of the dynamic project environment and/or new information discovered during project activities.

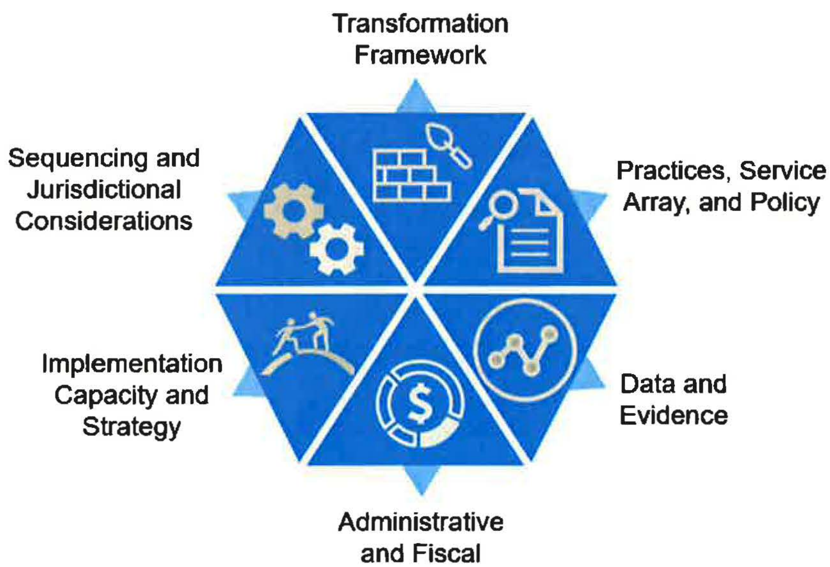
BerryDunn encounters these changes regularly in our work with public agencies; we are adept at addressing them in partnership with our clients and are accustomed to the need to be flexible. In our experience, **transparency, honesty, and communication** are key factors in successfully navigating these changes. At project initiation, our project manager will discuss the process to manage changes to project scope, schedule, and/or budget. If issues arise that may impact the overall project timeline or milestones, or if changes to project scope or budget are identified, we will alert CFS of these issues as part of our regular status reporting and work together to determine an appropriate resolution. Our approach has built-in flexibility due to the nature of the planned tasks, so we may be able to adjust the sequence of some tasks as needed.

3.5.1 PROJECT FRAMEWORK, METHODOLOGIES, AND TOOLS

3.5.1.1 PROJECT FRAMEWORK

Chapin Hall has developed an Assessment, Planning, and Implementation Framework, along with a suite of related tools, to guide states in broad-scale system transformation and improvement. The framework is designed to ensure a **comprehensive assessment of operational domains** and areas of consideration core to child welfare agency and broader system functioning. The framework consists of six primary operational domains and areas of consideration, as depicted in Figure 6 below.

Figure 6: Child Welfare System Assessment, Planning, and Implementation Framework



The framework is in use across the country with states and jurisdictions planning for the implementation of the FFPSA. In several jurisdictions, this also includes an integrated planning process for leveraging other federal or state mandates, or phasing out the Title IV-E waiver. For example, in Washington, DC, Chapin Hall guided the development of the Family First Prevention Plan, as required by the Children's Bureau, incorporating both lessons learned from—and phase-out considerations of—the Title IV-E waiver. In both North Carolina and Kentucky, the assessment and planning process incorporates recent state legislation directing child welfare system redesign. More information on the framework may be found at the following link: https://www.familyfirstact.org/resources/family-first-readiness-assessment-planning-and-initial-implementation-chapin-hall-capacity

The suite of tools includes a readiness assessment tool, a work planning guide, crosswalks of key provisions of the FFPSA with core functional components (e.g., service array, assessment, policy, contracts), a provider readiness assessment survey, governance structure guidance considerations, practice model guidance, and other facilitative tools (e.g., agendas, capture tools) tailored to meet specific jurisdictional needs.

Our team will leverage this framework and suite of tools to guide our activities throughout the project, using the crosswalk of CFS' project business requirements to the framework domains provided in Appendix A as a guide to **help ensure traceability and fulfillment of project objectives and outcomes**. By taking a methodological and step-wise approach to system assessment, planning, and implementation, CFS leaders will be better positioned to understand the strengths and gaps in the current system and to develop a roadmap going forward to achieve better outcomes for the State's children and families.

3.5.1.2 METHODOLOGY: STAKEHOLDER ENGAGEMENT AND INFORMATION GATHERING

We bring an impartial, objective, and cohesive methodology for gathering information from CFS' stakeholders and performing all assessment activities. Our methodology combines engaging a **broad group of stakeholders in information gathering and iterative discussion**, with our team's independent review, research, and knowledge of the federal and state child welfare landscape, research, and best practices.

Determining whom we need to work with and how we need to work with them is critically important for project success. For this reason, our methodology includes holding an initial planning meeting immediately after project start to help ensure we have a clear understanding of the stakeholders who need to be involved in the project, the project tasks they should be involved in, and the methods of outreach and information gathering that will engage them. Discussion about stakeholder involvement is iterative and ongoing, and we revisit the topic as needed, using a flexible approach to accommodate changes as tasks progress.

Before engaging stakeholders, we work to ensure that our clients **agree to the communication plan and messaging**. We hold a **project kickoff meeting** with stakeholders to communicate project information, share expectations for their involvement, and provide an opportunity for them to ask questions. We also assist with developing an initial broad-based communication from leadership to stakeholders so that they are aware of the initiative in general and BerryDunn team's involvement, and we assist with ongoing communications throughout the project.

To help ensure we gather comprehensive input from a broad range of stakeholders, we use a multiple-touch, multiple-method approach, as illustrated in Figure 7.

Figure 7: Information Gathering Methods

(Details on our business process mapping methodology are provided in Section 3.5.1.3.) Throughout all activities, we work collaboratively with key stakeholders to understand their perspectives and needs and gather ideas for future improvements.

Our methodology for performing information gathering includes using the **right method for the right audience to get the right type of information.** The activities are structured to gather standardized data to facilitate analysis and make meaning of the content relative to the areas of inquiry and interest.

> **We know that completing projects requires more than just what is learned in project management training—getting stakeholders involved and committed requires strong consulting and facilitation skills, empathy, and—above all—respect.**

We use a **web survey tool**, such as SurveyMonkey, to collect stakeholder input—an approach we have used successfully to gather feedback from a broad group of stakeholders in a confidential manner related to topics that cross several domains, such as challenges and opportunities related to policy, practice, training, and technology.

We also lead **listening sessions** with staff in various locations across the state to ask about the challenges and opportunities in the current environment, their ideas for an improved future, their concerns and hopes, their preferred communication methods, and the most important thing to them in relation to this project. While on-site, we take the opportunity to perform **direction observation of workflows and the worksite**. We have also found that the listening sessions are a good opportunity for the State leadership team to visit to the field locations and to introduce the sessions by communicating the transformation vision, sharing their support and enthusiasm for the efforts, and alleviating staff fears, such as whether or not they will have the support to do their jobs well in the future and the fear of job loss. Depending on the environment, at times we recommend that leaders do not attend the remainder of the session, however, as it could influence staff comfort level providing feedback.

Members of our team recently performed similar "Talk Story (a Hawaiian colloquialism) with BerryDunn" listening sessions for an organizational and business process redesign initiative for the State of Hawai'i, visiting six offices across four islands to connect with over 120 staff. The sessions were so successful that BerryDunn was asked to facilitate a second round of sessions after the operational assessment phase was completed to help communicate the improvement strategy and implementation plan, emphasizing how staff's voices could be heard throughout it.

In addition, we facilitate a series of **in-person focus groups with external stakeholders and targeted interviews and meetings with internal and external individuals and groups**, and follow up via teleconference, as needed, to ask clarifying questions or gather additional feedback. BerryDunn and our partners have a reputation for being outstanding facilitators. In our various professional roles, our team has gained extensive experience interviewing senior executives in the public and private sectors, programmatic and IT staff in state agencies and departments, service recipients/clients, providers across the HHS continuum, and other community stakeholders. Our proposed project team includes experienced facilitators who have the skills and knowledge necessary to establish credibility, build trust, elicit information, encourage collaboration, reach consensus, and develop buy-in with diverse groups of project participants.

Prior to engaging in activities with stakeholders, our team requests and performs reviews of relevant project background information so that they have a foundation—and are prepared—for all meetings, making the meetings as effective and efficient as possible. Meeting agendas are prepared and distributed in advance of meetings so that stakeholders come prepared, and printed copies are available at all meetings.

3.5.1.3 METHODOLOGY: BUSINESS PROCESS MAPPING

Our business process mapping methodology draws upon philosophies and tools from Six Sigma and Lean, such as **defining the voice of the customer and identifying waste**, and leverages elements of other business process improvement methodologies.

Figure 8: Four-Step Business Process Mapping Methodology

We employ a four-step methodology (Figure 8) for leading business process mapping activities for our clients, beginning with establishing a foundation for subsequent activities by working with leadership and key staff members to identify (Step 1) the specific processes that will be reviewed. In our experience, staff are often unclear what is meant by "process." When asked for a list of the processes that they use to perform their work, it may include programs, policies, procedures, technologies, and other items. For processes that *are* identified, staff across locations—or even within a single location—often refer to the same process by different names. **Gaining agreement on what a "process" means and the processes that will be reviewed, and developing a common language** to refer to them, is a first step towards creating consistency in—and otherwise improving—process performance.

To assist with identifying and organizing CFS' processes, we will use **ACF's NHSIA business model, business areas, and business processes** (see Figure 9 for the business areas that are within ACF's initial focus for standardization and the areas that are part of their extended focus for future efforts). Per ACF, the NHSIA offers a framework to "facilitate information sharing, improve service delivery, prevent fraud, and provide better outcomes for children and families" (https://www.acf.hhs.gov/nhsia-definition). Using the NHSIA model will also better position CFS if it decides to transition to becoming a CCWIS-compliant state, particularly with the CCWIS focus on data quality, data exchange, and interoperability.

Figure 9: NHSIA Business Areas

NHSIA Business Areas

Client Management	**Contractor Management**
Eligibility & Enrollment	**Financial Management**
Provider Management	**Operations Management**
Service Management	**Program Management**
Performance Management	**Business Relationships**

In Appendix C, we have included a crosswalk of the business requirements from RFP Attachment B: Business Requirements Matrix to potential NHSIA business processes with which the business requirement may be associated. The mapping does not represent the complete list of business processes that we will map with CFS; rather, it is intended to demonstrate the business process that some business requirements may be addressed by during business process mapping sessions. In addition to the business processes in the NHSIA business model, CFS may have its own State-specific processes to add to the list. We are also happy to use a different business model and business process names if CFS prefers, and we have other models that we have used before with clients that may fit CFS' needs better.

With a list of business processes identified, we then prepare (Step 2) by developing and delivering communications to business process mapping participants in advance of the sessions, including the purpose and approach to the sessions, the processes that will be reviewed, how the information should be used, and how they should prepare. We also perform our own review of background documents and information gathered through other methods so that we go into the sessions with a strong baseline understanding of the processes, making the sessions more effective and efficient. For this reason, **we typically prefer to hold business process mapping sessions *after* conducting web surveys, listening sessions, best practice review, and other information gathering activities**. Performing the sessions after the other information gathering activities also allows us to use the process mapping sessions as an opportunity to validate, probe more deeply into, and close gaps in the information previously gathered.

When preparations are complete, we facilitate sessions to map (Step 3) the processes and gather associated details. Sessions are conducted by **teams of three consultants who fill the roles of facilitator, SME, and note-taker/process-mapper**. BerryDunn's team approach to these sessions has proven to be very successful and allows for accurate and efficient capture of draft process maps and associated documentation. In sessions, the facilitator engages staff to walk through specific processes to determine how work is currently conducted. The team member serving as note-taker/process-mapper concurrently captures key information in MS Visio maps and Word documents. Often times, we have found that also having our facilitator map processes the old-fashioned way—using sticky notes, rolls of white paper, tape, and markers—is a great way to engage staff in the discussion in an interactive manner.

Figure 10: Other Information Gathering Methods Feed Business Process Mapping

Stakeholders involved in the sessions are asked to actively participate and share process information. Examples of the questions we typically ask during business process mapping sessions include:

- What particular purpose or function does this process serve?
- How would you describe the overall process?
- What events trigger the process to start?
- What is the first step in the process? And the next?
- Who is responsible for performing each step?
- How is data and information used and captured in each step?
- What are the decision points, what information is used to make the decisions, and how are those decisions captured?
- What technology or other tools support the step?
- Are any key performance indicators or measurement criteria associated with the steps in the process or the overall process?

- What policies and/or standards are associated with this process?
- What are the "pain points" in the process, such as policy or training gaps, bottlenecks, unnecessary steps, redundancies, reliance on paper and manual processes?
- What is working well with the process that you do not want to change?

Examples of how the process information may be presented in the resulting business process mapping document are provided in Exhibit A, B, and C below. Although we provided these as examples, we have customized our business process mapping methodology and the resulting documents numerous times for our clients over the years and would be happy to do so to fully align with CFS' expectations.

Exhibit A summarizes information for the overall process in a table format, followed by a table with more detailed information at the process step level (Exhibit B). Finally, the business process map—which captures key information such primary actors in "swim lanes," trigger events, process steps, technology and other tools used, decision points, information flow, and issues and gaps—follows the tables. An image of a representative business process map is provided in Exhibit C, and full-size examples are provided as Exhibits D.1 and D.2 in Appendix D.

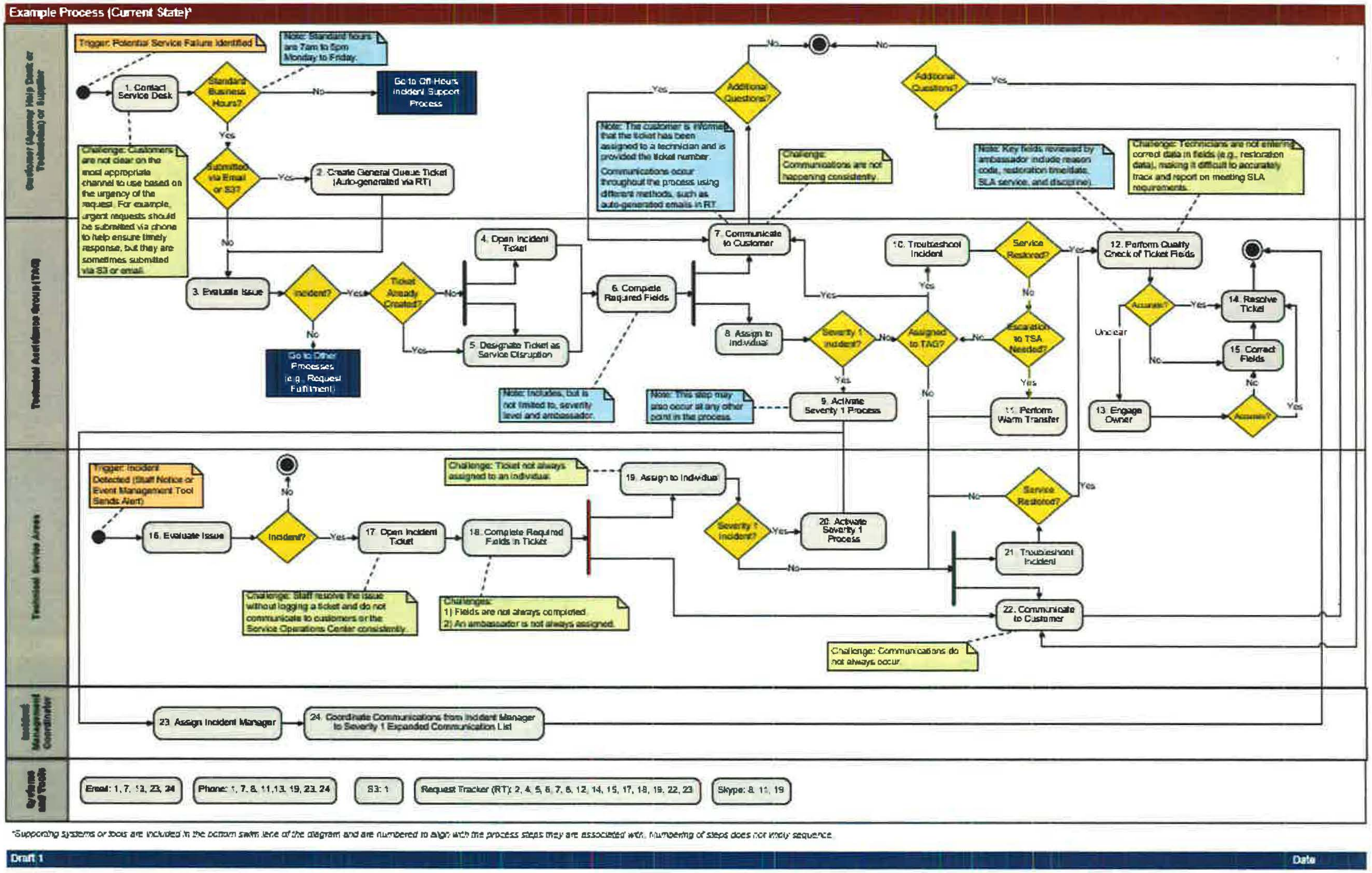
Exhibit A: Example Overall Business Process Summary Table

Business Process ID and Name	MM.03 Develop the ISP	
Business Process Description	This process describes ISP development for a new member.	
	Process Steps	
	1	Assign member in FOCUS
	2	Prepare for ISP Meeting
	3	*Continued...*
Predecessor Process(es)	MM.02 Receive Behavioral Health Encounters	
Successor Process(es)	MM.04 Match Providers with Members' Approved Services	
Primary Actors	• Support Coordinator • Provider • District Office Management	
Primary Systems and Tools	• FOCUS (inclusive of RoboCalling, ISP Scheduler, Client Application) • Paper ISP form	
Trigger Event(s)	Member Determined DDD Eligible	
Expected Outcome(s)	• Initial ISP developed • Services authorized • Services provided to member	
Key Performance Indicators	No formal KPIs identified for this process	
Types of Data Used	• Member data (demographics) • Provider data (availability) • Budget data	
Variations	Offline forms; electronic ISP forms (approximately 200 tablet users are piloting a paperless process)	
Related Policies	No policies identified for this process	

Exhibit B: Example Detailed Process Step Table

Step 1: Assign Member in FOCUS				
Actor	**Systems/Tools**	**Inputs**	**Outputs**	**Variations**
District Office Management	FOCUS	Member information in FOCUS	Member assignment to Support Coordinator	N/A
Issues and Gaps				
• Many of the considerations for assigning staff are managed outside FOCUS—such as staff case load, case specialty, geographic location, and time off (i.e., vacation)—creating inefficiencies as information is not all consolidated in one place. • Staff reported that they would like calendar schedule integration with MS Outlook to eliminate the need to track schedules on paper and sticky notes.				
Strengths				
• Staff are authorized to make timely decisions • Staff receive adequate training on policies				
Step 2: Prepare for ISP Meeting				
Actor	**Systems/Tools**	**Inputs**	**Outputs**	**Variations**
Support Coordinator	FOCUS Shared Drive Intranet MS Excel	Meeting scheduled in ISP Scheduler	RoboCalling, Packet of ISP Paper Forms, Case File	N/A
Issues and Gaps				
• RoboCalling does not have texting capabilities, and it has limited Spanish functionality • Manual, paper-based process with minimal information in FOCUS				
Strengths				
• None identified				
Continued...				

Exhibit C: Representative Business Process Map



These as-is discussions and process maps serve as a starting point for further discussion of "to-be" opportunities. In our experience, staff are often not ready to fully visualize or map improved end-to-end to-be processes at this point, and when attempted, the exercise can often end in frustration and futility. Depending on the circumstances and client needs, our approach often instead shifts to simply talking about ideas and recommendations for eliminating the issues and gaps that exist in the current environment to streamline, improve the quality of, and otherwise optimize business processes. We will capture participants' ideas and use them to inform our process recommendations and improvement strategy, which also helps with buy-in for recommendations as staff "hear their voice" reflected in them.

After facilitating process mapping sessions, we perform follow-up communications via email, calls, or in-person meetings with CFS team members to validate (Step 4) information captured and close gaps, allowing for thorough and accurate development of the business process-mapping document.

3.5.1.4 METHODOLOGY: BEST PRACTICE RESEARCH, POLICY ANALYSIS, AND DATA ANALYSIS

Best Practice Research: We provide a **detailed review of both the academic and "gray literature"**—such as conference abstracts and presentations, regulatory data, unpublished trial data, government publications, and reports (such as white papers and working papers) on best practice and performance improvement in child welfare and measuring child, youth, and family outcomes. The best practice research is augmented as needed by interviewing child welfare leaders and experts in the field to understand the drivers of improved safety, permanency, and well-being outcomes for children and families and the characteristics of high-functioning child welfare systems.

We develop an **annotated bibliography of published reports and gray literature** describing child welfare best practices and categorize best practices based on the Chapin Hall framework described in Section 3.5.1.1. **Current performance is compared to best practice research and informs the recommendations provided**. Additionally, information gathered through the best practice research informs the development of data collection tools, including survey instruments and protocols for focus groups and stakeholder interviews.

> **Best practice research serves as the foundational knowledge to guide our recommendations and support CFS' vision for system change.**

To support the translation and application of findings from the best practice review, our team brings extensive real-world child welfare experience at the state and federal levels and an understanding of "what works" in day-to-day child welfare leadership and operations.

Policy Analysis: Policy analysis includes a **review and synthesis of CFS policies relative to guiding federal and State policy and regulations** to determine the alignment with mandates and evidence of what works.

We identify CFS policy obligations that are consistent with the system and outcome improvements needed, as well as those contrary to the desired child welfare transformation and child and family outcome attainment. We start by reviewing CFS-provided policies and citations to create a list of relevant policies, and conducting keyword searches on sites that compile federal and State law. Our **policy review tool allows us to catalogue driver policies** into the Chapin Hall framework and summarize opportunities for improvements in policy relative to the policy direction currently in place.

The policy analysis, paired with the data analysis described below, can support identification of where policy and practice diverge, or where policy is not yielding the anticipated outcomes. Our policy analysis can also shed light on the manner in which CFS is fulfilling its child welfare mandate, and the likelihood of success of various strategies being employed.

Data Analysis: We bring a **comprehensive and empirical methodology for understanding**

baseline agency functioning on key priority child welfare outcomes. We start by mapping existing administrative data holdings relative to best practice measurement, State, and federal requirements, and the key metrics that capture the high-priority drivers that are empirically linked with outcomes achievement.

This mapping guides the analysis of current performance on priority metrics using publicly available data sources and administrative data, where possible, to create **state-by-state performance comparisons** that support identification of strengths, gaps, and areas needing improvement relative to evidence-informed standards for high-quality performance. These findings will point to **areas of strength and opportunities for improving the drivers of child, youth, and family outcomes.**

Our data analysis will help CFS identify gaps in measurement and accelerate its progress toward a data-driven CQI system.

Once strengths and opportunities are clear, our approach includes analytical methods to identify target populations based on characteristics and needs, and supports efforts to match services and organizational strategies to the identified target populations. Geospatial analysis of target populations relative to service array can also be conducted to visualize the match or mismatch between what is needed and what is available, identify gaps in service capacity, and assess service accessibility.

Performance and progress monitoring strategies will allow CFS to understand historical performance and set quantitative targets for improvement toward priority outcomes. **Our collaborative data appraisal process also assesses current use and existing capacity to use evidence to drive decision-making and system improvements.**

Additionally, we conduct analysis of the data systematically collected through surveys, focus groups, and interviews. Our team analyzes the outputs from these data collection strategies to facilitate synthesis of the content. When needed, responses will be coded into meaningful categories in order to further understanding of the rich information provided by on-the-ground stakeholders who know a great deal about the strengths and needs of child welfare in Nebraska.

Our knowledge of data collection, analysis, and application to child welfare performance improvement provides jurisdictions with a deep understanding of current operational and outcome challenges and opportunities for prioritized improvement. **We marry our expertise with internal CFS capacity to help ensure analyses are informed by an intimate knowledge of the data system, logic, and workforce use of the administrative data fields.**

We identify the gaps in measurement that need to be addressed for CFS to be able to accurately track progress and impact. By identifying gaps in the performance improvement system and providing targeted recommendations to address them, CFS can accelerate its progress towards a data driven CQI system that helps the agency achieve its goals and target outcomes.

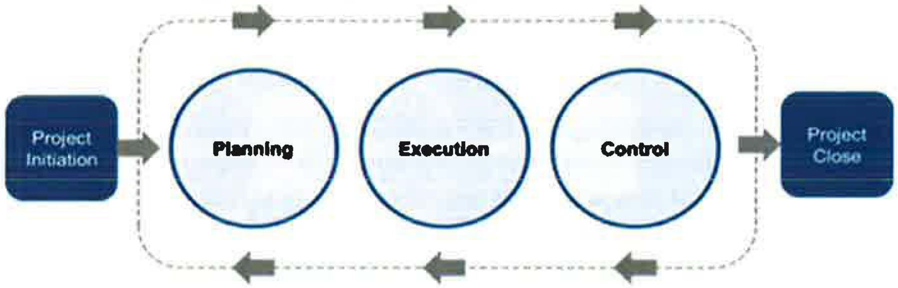
3.5.1.5 METHODOLOGY: PROJECT MANAGEMENT

As part of every project, we provide our clients with an established project management methodology based on best practices to help ensure that project activities are completed on time and within scope and budget. Our team applies **proven project management processes, tools, and techniques** using principles in the Project Management Body of Knowledge® (*PMBOK*®) and those of the Project Management Institute (PMI)®. We apply standard processes across the project management life cycle and scale them to fit the specific needs of the client and project. We will use these standards and processes for the services we provide CFS.

We are prepared to fully manage this project for CFS and produce all project deliverables in accordance with CFS' standards. Thoughtful upfront planning, combined with close monitoring during the execution phase, strong communication between BerryDunn's team and CFS throughout all project phases, and effective use of project management tools will help ensure all of our services are **provided to CFS in a quality and timely manner.**

Figure 11 illustrates the phases of the Project Management Life Cycle, and the paragraphs that follow briefly describe BerryDunn's approach to each phase.

Figure 11: Project Management Life Cycle



Initiation: Establishing Project Structure and Governing Processes

Project initiation is signaled by acceptance of our proposal and successful negotiation of a contract. During this stage, we will confirm the project goals, objectives, and scope. Based upon existing documentation, contract terms, and additional input from CFS, BerryDunn will create the initial planning deliverables required by the project, including a Project Management Plan that describes the processes we will use to successfully manage the project, and a Project Work Plan that specifies the tasks and subtasks that will be performed over the course of the project and when they will be performed. An example Project Management Plan from a previous project is provided as Exhibit D.4, along with an example Communication Plan (Exhibit D.5) and Change Management/Resistance Management Plan (Exhibit D.6).

Planning: An Ongoing Process . . .

Planning is not a one-time task but an ongoing project management process. It entails clarification of deliverable expectations, identification, and integration of tasks, estimation of effort and/or duration, allocation of appropriate resources, and development of strategies to mitigate any significant project risks. BerryDunn's team will conduct initial planning with CFS and maintain and update planning documents throughout the engagement.

Execution and Control: Execute the Plan, Monitor and Measure, Report Outcomes

Throughout the course of the engagement, the BerryDunn project manager and team will apply knowledge, skills, tools, and techniques to direct project tasks, review deliverables, leverage resources, facilitate communication, and monitor team function to achieve the expectations established in the contract and further refined in collaboration with CFS through initial and ongoing project planning.

Our work will be guided by BerryDunn's **strict quality assurance standards and processes**. We build time for quality assurance checks into our Project Work Plan rather than tacking on a cursory check at the end. By incorporating quality management into our daily work, such as managerial reviews of all deliverables, we reduce risk and help to ensure outcomes comply with expectations—a guiding principle of BerryDunn's methodology. To help further ensure our deliverables align with CFS' expectations, we will develop and deliver Deliverable Expectation Documents (DEDs) for major deliverables.

We recognize that the efforts such as those being undertaken by CFS may significantly affect stakeholders both internal and external to the CFS. When undertaking a project of this nature, risks and issues will arise. To help avoid common challenges, we spend time throughout the course of the project identifying and communicating **critical success factors and risks and issues** that may impact project success.

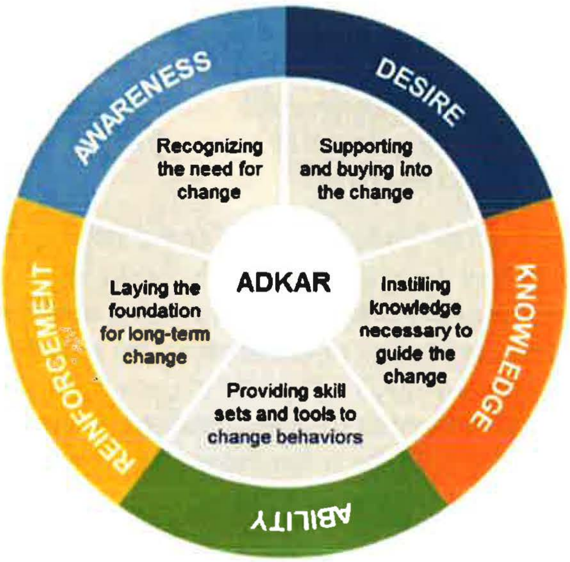
Project Close: Are We There Yet?

Project closeout tasks and deliverables will validate that CFS' expectations have been met and tasks have been completed as agreed upon. Capturing lessons learned will help CFS improve its approach and processes when it undertakes similar projects in the future. Knowledge transfer activities will be designed to ensure a smooth transition of our work to CFS.

3.5.1.6 METHODOLOGY: CHANGE MANAGEMENT

Developing and providing ongoing coaching on change management strategies and plans are core BerryDunn services. Although we customize our approach to reflect our client's unique needs, our change management methodology aligns with Prosci®'s change management principles. Formed in 1994, Prosci® is an independent research company in the field of change management. Prosci®'s methodology and tools are research-based, building upon lessons learned from studies with organizations from around the world.

Figure 12: ADKAR® Methodology



A central focus of the Prosci® change management approach is the belief that, in order for change to work in an organization, individuals must be *willing* to change and understand the *need* for change. Based on this belief, Prosci® developed the **ADKAR®** change management approach, as depicted in Figure 12, which we will use for this engagement.

BerryDunn's change management methodology for change initiatives involves three key stages:

1. ***Preparing for Change*** begins with the development of change management plan, based on input from project stakeholders on the existing environment.
2. ***Managing Change*** involves overseeing assigned roles and tasks, providing training and coaching, using tools effectively, and executing a clear communication plan.
3. ***Reinforcing Change*** involves evaluating action plans, reviewing the sustainability of change management activities, and promoting individual and team successes.

Four of our proposed team members are certified in the Prosci® change management methodology and regularly assist clients with their change management efforts, including on a recent large-scale organizational and business process redesign effort with the State of Hawai'i Department of Human Services.

3.5.2 DETAILED PROJECT WORK PLAN

The following sections provide our detailed draft project work plan for achieving the project objectives.

PHASE 1: Business Process Mapping and Recommendations

Task 1: Perform Initial Project Planning Activities (Inclusive of Detailed Project Work Plan)

1.1 Develop and submit information request. After we receive the notice to proceed from the State, we will request documents that will be beneficial for the BerryDunn project team to review, such as:

- Organizational charts and job specification descriptions
- Key performance indicators used by CFS
- IV-B and IV-E State plans
- IV-E claims for the past two years
- Waiver evaluations, policy manual, CFSR/PIP documents (including data profiles), and PIP progress reports
- Court Improvement Program plans and reports
- Child welfare training plans and curricula
- FFPSA planning documents, administrative data packet, and Casey Family Programs five core outcomes Adoption and Foster Care Analysis and Reporting System (AFCARS) analysis
- Administrative cost review findings/disallowances
- APD, Notice of Intent, or other CCWIS-related information
- Defect and enhancement backlog for N-FOCUS

1.2 Conduct initial project planning meeting. Our team will meet with the CFS project lead, executive sponsor, and team members as appropriate to conduct an initial project planning meeting. Topics may include introducing team members; clarifying the initial project vision, goals, and objectives; discussing communication protocols; reviewing the proposed Project Work Plan and high-level project milestones; and identifying initial project risks.

We will begin discussion of the project governance structure, making recommendations to CFS to help ensure that there are clear project roles, responsibilities, and decision-making processes and that the right voices are "at the table" to help ensure buy-in for recommendations and CFS' chosen path forward. We will encourage CFS to consider development of a stakeholder advisory group—particularly as the project shifts into the recommendations and implementation phase—to help ensure that stakeholders are aware of upcoming changes and can provide feedback that aids successful implementation.

We will also discuss the concept of developing a "Process Improvement" or "Change Champions" team comprised of 10 to 12 staff representing different organizational levels and areas (e.g., case managers; service administrators; representatives from Research, Planning and Evaluation; Policy and Program Development Division; and Information Systems and Technology). Although it is critical to engage a broad group of stakeholders through means such as web surveys and listening sessions, in our experience having a dedicated core team of staff focused on participating in business process mapping sessions early on—and continuing to be change agents throughout the assessment, planning, and implementation process—is critical to the effectiveness, efficiency, and long-term sustainability of change initiatives such as the one CFS is embarking on.

Task 1.2 Assumption: Four-hour session

1.3 Develop and review DED for Project Status Report and Project Management Plan. During project initiation, we will develop a DED for the monthly Project Status Report and Project Management Plan, meeting with the CFS project lead and other stakeholders to review them to help ensure alignment of the deliverable format and content with CFS' expectations. We will incorporate CFS feedback into the DEDs, which will be used to guide subsequent development of the deliverables.

1.4 Establish project centralized document storage and team collaboration site. We will establish a project site on our customized MS SharePoint site, BerryDunn KnowledgeLink; alternatively, if CFS prefers that we use a State site, we will partner with CFS to obtain access and orient ourselves to the site.

1.5 Facilitate synchronization meeting with CFS leadership. Our team will meet with CFS leadership to clarify CFS' meaning, intent, and desired assessment outcomes for each requirement, gain agreement on the approach for each requirement, and prioritize requirements and associated tasks accordingly, if needed.

Task 1.5 Assumptions: Two four-hour sessions

1.6 Lead visioning session with CFS leadership. To guide all subsequent activities and serve as a focal point for all stakeholders, we will lead sessions with CFS leadership to establish a clear vision for the future. This will include discussion on the State's transformation vision—including how to leverage opportunities, reduce barriers, cultivate innovation, and achieve collective impact with stakeholders at the table. We will also discuss topics such as CFS' strategic direction, priority outcomes, and target populations. This information will be used to guide our assessment, planning, and implementation efforts, and it will be used by both CFS and our team in communications to stakeholders to create a shared vision and build buy-in for changes. Leadership may include the CFS Deputy Director and Director, other division directors and the DHHS Chief Executive Officer, as appropriate.

Task 1.6 Assumptions: Two four-hour sessions

1.7 Update initial Project Work Plan and other documentation, as needed. Based on results of the synchronization meeting and the direction provided by CFS, we will update the initial Project Work Plan and other documentation as needed, submitting to CFS for review. The Project Work Plan will include the planned project tasks, subtasks, resources, deliverables, and timelines. We will incorporate CFS feedback and submit the final baseline Project Work Plan for approval.

1.8 Develop Project Management Plan. To define how BerryDunn will provide project management services to help ensure successful completion of the project, we will develop and deliver a Project Management Plan. The plan will summarize the project scope, team, and roles and responsibilities, and it will include key project management processes such as scope, schedule, change, risk and issue, decision, action item, quality, communication, and organizational change management. We will review the draft plan with CFS, incorporating feedback and delivering the final draft. The Project Management Plan—and the communication and change management plan, in particular—will be revisited and updated periodically as the project progresses, new information is learned, and needs evolve.

Deliverable 1: Project Work Plan

Deliverable 2: Project Management Plan

Task 2: Perform Operational Assessment (Inclusive of Business Process Mapping)

2.1 Review background documentation. We will review the documentations provided by CFS—as well as publically available documents—such as the CFS Caseload Report, CFS Running Case Manager Turnover Report, the CFSP, the APSR, and the PIP. Reviewing background documentation will better prepare our team for meetings with stakeholders, and it will provide us with information for our own assessment and analysis.

2.2 Perform research on best practices. We will research child welfare best practices, which may include performing peer state and child welfare expert interviews, literature reviews, and other web-based research. We will review the body of literature related to effective policies and practices in child welfare, including the body of scholarship at Chapin Hall, and bring to bear lessons learned from Chapin Hall's engagement with child welfare agencies across the country related to system improvement and transformation.

2.3 Perform data review and analysis. As described in Section 3.5.1.4, we will perform data review and analysis, such as reviewing the administrative data packet, CFSR data analysis, and other key data sources to determine strengths and key opportunities for improvement in performance related to core system and child and family safety, permanency, and well-being outcomes. We will conduct analyses in areas where specific performance deficits are identified in order to better understand root causes.

Task 2.3 Assumptions: 100 hours

2.4 Perform review of CFS policies. We will review and compare CFS' policies against federal rules and regulations and evidence-based practices and policies to identify unnecessary and missing policies (in part or whole), and/or opportunities to improve existing policies.

Task 2.4 Assumptions: 200 hours

2.5 Develop and submit DED for D3. Business Process Summary Document. Based on the requirements in the RFP and our experience developing business process maps for other state HHS clients, we will develop a DED for D3. Business Process Summary Document. Deliverable content may include:

- Introduction
- Approach and Methodology
- Report Format
- Master List of As-Is Processes Mapped
- As-Is Process Information
    - Process name
    - Narrative process description
    - Process details in table format (e.g., trigger event, predecessor and successor processes, systems used, issues identified)
    - Process map in MS Visio format
- To-Be Ideas and Recommendations (from CFS staff)

An example of sections of a business process map deliverable is provided as Exhibit D.1 in Appendix D.

We will review the DED with CFS, incorporating edits for use when developing the deliverable.

2.6 Develop and issue web surveys. We will develop web surveys for CFS staff and for external stakeholders—such as contracted service providers—to gather information on challenges in the current or as-is environment and the vision for the future or to-be environment. We will develop draft surveys—including questions that cross several domains such as policy, practice, training, and technology—reviewing the draft and incorporating feedback from CFS leadership. We will also draft a communication for CFS leadership to include in an email to survey recipients, emphasizing the importance of sharing their perspective and encouraging them to provide feedback.

We will review and analyze survey results, incorporating them into our subsequent information gathering meetings. We will use the information to be better prepared for stakeholder meetings and to focus and gain clarity on themes in survey responses. We will also use the survey results to inform our recommendations, providing summary survey information to CFS using the survey's standardized reporting tools.

2.7 Facilitate Project Kickoff Meeting with the broad group of CFS stakeholders. Our project team will facilitate a kickoff meeting with CFS stakeholders such as Central Office staff and staff in local offices (joining via video- or teleconference, as needed) to introduce our team, meet the CFS team, and review the project vision, goals, timelines, and expectations for stakeholder involvement. The project kickoff meeting also provides an opportunity for leaders to begin to communicate the vision for change, helping to reduce fears and build trust and buy-in early on. In addition, it provides staff an opportunity to ask questions to the BerryDunn team and CFS leadership, allowing us to address concerns early on.

Task 2.7 Assumptions: Two-hour meeting

2.8 Develop inventory of business processes. Prior to facilitating business process mapping sessions with CFS staff, it is important that CFS leaders, in partnership with the BerryDunn team, define the specific processes that will be reviewed. As described in Section 3.5.1.3, we may use the ACF's NHSIA business areas and business processes as the model for identifying, organizing, and mapping its processes, unless CFS has a different model it prefers to use.

We will facilitate work sessions with CFS leaders and designated staff to develop an inventory of the processes in use by CFS staff today, gathering the process names and high-level process descriptions. Based on the NHSIA processes and our experience, we have planned for 30 processes to be in scope of our assessment. If greater than 30 processes are identified during the work sessions, we will work with CFS to prioritize the processes (e.g., using the business requirements in RFP Attachment B) to determine the subset of processes to include in scope of the initial assessment. Alternatively, should CFS want us to map additional processes, we will work with CFS to determine how to best approach the additional effort.

For all processes determined to be in scope, we will request the names of the CFS SMEs and other team members to include in the business process mapping sessions so that we can begin planning activities immediately.

Task 2.8 Assumptions: Two four-hour work sessions

2.9 Facilitate listening sessions. To engage staff in discussion and gather feedback from CFS Service Administrators and field staff in local offices, we will hold listening sessions at each of the seven local offices in scope of Phase 1. In our experience, holding two sessions in each location allows for a greater number of staff to attend so that some staff may provide coverage in the office while other staff attend the meeting, and then they may switch roles. We will ask staff about strengths, challenges, and opportunities in the current environment and their ideas for a future improved state; what their concerns and hopes are; what is most important to them in relation to this project; and what their preferred communication methods are.

Task 2.9 Assumptions: Two two-hour meetings at each of the seven local offices included in scope of Phase 1

2.10 Perform direct observation of workflows at worksites. While at the local field offices for the listening sessions, we will perform walk-arounds of the local offices and perform direct observation of processes to gather first-hand information and insight into current challenges and strengths. In addition to processes, we may also observe other influencing factors, such as the physical environment and the use of technology.

Task 2.10 Assumptions: Two hours per location

2.11 Facilitate interviews and meetings with CFS leadership. We will facilitate interviews and meetings over the course of Task 2 to gather leadership feedback on strengths and challenges in the current environment and opportunities for improvement in the future and to gather additional perspective on information shared by other internal and external stakeholders. These qualitative interviews will be structured to gather standardized data across informants to facilitate analysis and making the content relative to the areas of inquiry of interest to CFS.

2.12 Facilitate as-is business process mapping sessions with CFS staff and gather to-be recommendations. Building on the information gathered via other methods in Task 2, we will facilitate as-is business process mapping sessions with CFS staff and gather ideas for the future improved state. Business process mapping will be conducted by teams of three BerryDunn consultants who fill the roles of facilitator, SME, and note-taker/process-mapper.

In sessions, the facilitator will engage CFS staff to identify their operations, walk through specific processes, and determine how work is currently conducted. Depending on CFS' preference, we may use a combination of the facilitator mapping the processes on white paper and the note-taker/process-mapper concurrently capturing key information in MS Visio maps and Word documents, as described in Section 3.5.1.3. Stakeholders involved in the sessions will be asked to actively participate and identify process steps, actors, policy gaps, and challenges and inefficiencies such as duplication and redundancy, bottlenecks, errors, reliance on paper or shadow systems, lack of system functionality, and more.

These as-is discussions and process maps serve as a starting point for further discussion of to-be opportunities. In our experience, staff are often not ready to map or fully visualize improved to-be processes at this point, and when attempted, the exercise can often end in frustration and futility. Therefore, our approach instead shifts to simply talking about ways to eliminate the challenges and inefficiencies that exist in the current environment by streamlining, eliminating, and otherwise optimizing business processes. We will capture their ideas and use them to inform our process recommendations and improvement strategy in D4. State of Nebraska Child Welfare Reform Recommendations and Roadmap.

After facilitating process mapping sessions, we will perform follow-up via email and/or calls with CFS team members to validate information captured and close gaps to allow for thorough and accurate development of the process maps.

Task 2.12 Assumptions:

- *30 processes are in scope*
- *Four-hour mapping session per process*

2.13 Facilitate focus groups with external stakeholders. To gather feedback from external stakeholders—such as children, youth, and family advocacy groups, schools and medical community representatives, and service provider representatives—we will facilitate focus groups with external stakeholders. We will ask for their perspective on strengths and challenges in the current environment, opportunities for improvement, and recommendations for the desired future state. In addition to hearing their voices, these sessions will provide an opportunity to share CFS' vision and goals and begin to build buy-in from these important stakeholders, whose support will be critical for successful implementation of the improvement strategy. Focus groups will be structured to gather standardized data across sessions to facilitate analysis and make meaning of the content relative to the areas of inquiry of interest to CFS.

Task 2.13 Assumptions: 10 two-hour meetings

2.14 Facilitate additional targeted interviews and meetings. To support the previously described information gathering activities, we believe that we will need to hold a series of additional targeted interviews and meetings with CFS staff. These additional meetings will allow our team to perform a deeper dive into select policy, practice, technology, and other areas. Although each of these areas will also be addressed in other information gathering activities, such as business process mapping and web surveys, in our experience there is often the need to perform follow-up to close gaps and validate previously gathered information. Targeted interviews may cover topics such as:

- Technology (for example, meetings with the Office of the CIO, DHHR Informational Systems and Technology, and the Judicial Branch of Information Technology Division)
- Fiscal Review (for example, meetings with fiscal staff, IV-E waiver accounting staff, federal claiming staff, provider contract specialists)
- Performance Measures
- Organizational Structure
- Service Array
- Training System (training objectives, approach, materials, tools, outcomes measurement, etc.)
- Community Resources (for example, how CFS is partnering with schools, medical communities, and other community supports)
- Quality Assurance
- Interaction and Collaboration with the Courts System
- Other, as needed

Task 2.14 Assumptions: 200 hours

2.15 Develop and submit D3. Business Process Map Summary Document. Based on the information gathered in Task 2, we will develop a draft of D3. Business Process Map Summary Document and perform a walkthrough with CFS. We will incorporate CFS' feedback and submit the final document. Information from Task 2 will also be included in D4. State of Nebraska Child Welfare Reform Recommendations and Roadmap.

Deliverable 3: Business Process Map Summary Document

Task 3: Develop Improvement Recommendations and Roadmap

3.1 Develop and submit the DED for D4. State of Nebraska Child Welfare Reform Recommendations and Roadmap. Based on the requirements in the RFP, our understanding of CFS' needs based on Task 1 and Task 2 activities, and our experience developing similar deliverables for previous clients, we will develop a DED for D4. Child Welfare Reform Recommendations and Roadmap. Deliverable sections may include:

- Executive Summary
- Introduction (Project Background, Report Purpose, Key Definitions, Approach to Report Development, etc.)
- Findings
- Overview
- Specific Opportunities for Improvement (categorized by Assessment, Planning, and Implementation Framework domains)
- Recommendations to Address Opportunities for Improvement (categorized by Assessment, Planning, and Implementation Framework domains)
- Overview
- Quick Wins/Discrete Recommendations
- Strategic Initiatives/Recommendations
- Impact (or Cost) of Current State and Anticipated Benefits of Implementing Recommendations
- Crosswalk of Opportunities for Improvement to Recommendations
- Proposed Prioritization of Recommendations
- Draft Implementation Timeline and Owners
- Implementation Risks and Mitigation Strategies
- Conclusion and Next Steps

An example of a similar recommendations report developed for a previous client is included as Exhibit D.3 in Appendix D.

3.2 Analyze data and information and develop preliminary recommendations and improvement strategy. In Task 3, we will build on the review and assessment activities in Task 2 by analyzing the gaps between the current state from multiple perspectives (e.g., policy, practice, technology, training, workforce, organizational structure) and developing preliminary recommendations to close the gaps. Our recommendations may come in two forms—near-term, discrete "quick wins" (e.g., low cost, low risk, short implementation timeline, high feasibility) and longer-term strategies that may be more complex, require greater cost, have higher risk, be more politically difficult to gain support for, etc.

3.3 Facilitate review sessions with CFS leaders. We will discuss preliminary recommendations with CFS leadership, gather initial feedback, make refinements, and prioritize recommendations. Conducting this review session before we submit the draft deliverable helps to support our "no surprises" approach described in Section 3.3: Proposed Development Approach. An example of the results of a similar prioritization exercise we performed for another client's improvement initiative is provided as Exhibit D.3 in Appendix D.

Task 3.3 Assumptions: Four-hour session

3.4 Facilitate work sessions with CFS leaders and staff, as needed, to gather information to develop an implementation roadmap. Using the prioritized recommendations as a guide, we will develop the roadmap for implementation of the recommendations, meeting with CFS leaders and staff as needed to determine owners and feasible timelines for implementation of recommendations.

3.5 Develop and submit draft D4. State of Nebraska Child Welfare Reform Recommendations and Roadmap. Leveraging the information gathered in Tasks 3.3 and 3.4, we will develop and submit the draft D4. State of Nebraska Child Welfare Reform Recommendations and Roadmap, performing a walkthrough with CFS leadership. We will incorporate requested edits from CFS and deliver the final report.

3.6 Develop SOWs for implementation of approved recommendations. Based on the approved, prioritized recommendations in the roadmap, we will develop SOWs for our proposed support of implementation activities. SOWs will include resources needed, a description of tasks to be performed, timeframes, costs, and anticipated benefits. We will review with CFS, providing clarity and discussing areas of concern to reach mutual agreement on the best path forward.

Deliverable 4: State of Nebraska Child Welfare Reform Recommendations and Roadmap

PHASE 2: Implementation

Task 4: Provide Support for Implementation of Phase 1 Approved, Prioritized Recommendations

In Phase 2, we will shift into supporting CFS with implementation activities, which may include:

- Providing ongoing project management and change management
- Designing and overseeing pilots and rollouts
- Assisting with updating or creating new policies, and making updates to policy and procedure manuals
- Providing training support for staff, e.g., design of training system, development of training materials, delivery of training using a "train-the-trainer" approach

- Developing process performance measures and a plan for measurement, assisting with monitoring measures to assess process performance, and working with CFS to refine processes accordingly in the spirit of continuous process improvement
- Supporting development of a culture of CQI and assisting with CQI activities
- Supporting the design and execution of a communications strategy
- Supporting the design and execution of coaching strategies to support practice change
- Providing leadership development and coaching
- Facilitating stakeholder advisory group meetings
- Assisting with implementation of changes to organizational structure and/or roles and responsibilities, including updating job descriptions

Deliverables are to be determined, but may include: Detailed Implementation Plan, To-Be Process Maps, Communication Plan/Strategy, Training Materials, Leadership Development Training, Updated Policy and Procedure Manuals, Performance Measurement Plan, Pilot Design and Evaluation Plan, Meeting Agendas and Facilitation for Stakeholder Advisory Group

PHASE 3: Project Closeout

Task 5: Perform Project Closeout Activities

5.1 Perform knowledge transfer activities. As consultants, our goal is always to build our clients' capacity and support the sustainability of improvements we help implement so that we do not need to be relied upon for the long term. As a result, we will perform all of our activities for this engagement with the "end in mind," setting up the CFS team members for continued success long after our departure. As our contract nears its end, we will perform additional specific knowledge transfer activities with appropriate members of CFS. We will ensure that processes are clearly documented and confirm that they are understood and that CFS team members feel confident performing them. We will also provide access to all tools and templates used to support processes so that they may be leveraged by CFS.

5.2 Conduct other project closeout activities. We will also perform other project closeout activities, such as archiving project artifacts and documents, developing a Project Closeout Report, and leading a project closeout meeting with CFS. As part of the closeout meeting, we will facilitate a lessons learned session, capturing what worked well, what did not work well, and recommendations for improvements in the future.

Deliverable # TBD: Project Closeout Report

ONGOING: Project Management and Organizational Change Management

Task O.1: Provide ongoing project management services. The BerryDunn project manager will perform ongoing project management services, such as management of project scope, schedule, risks, issues, decisions, and action items to help ensure successful project execution. In addition, the project manager will oversee the deliverable review process for our team, helping to ensure all deliverables meet BerryDunn's quality assurance. She will also coordinate project resources and perform other tasks—such as working to ensure the traceability of business requirements across the project—as described in Section 2.9.2.

Task O.2: Perform ongoing status reporting. We will perform ongoing status reporting throughout the project, including developing a biweekly status report and facilitating a biweekly check-in meeting with the CFS project lead and executive sponsors. Please refer to Exhibit D.7 in Appendix D for an example project status report from a previous project.

Task O.2 Assumptions: Seven reports (four months, no report during the first two weeks)

Task O.3: Provide support for change management activities, including developing and delivering communications, with approval from CFS, providing assistance with establishment of a project governance structure and processes, providing assistance for establishment of a stakeholder advisory group, and staff "change team," coaching leadership on change management strategies, etc.

Deliverables 5.1 to 5.7: Project Status Reports

3.5.3 PROJECT SCHEDULE

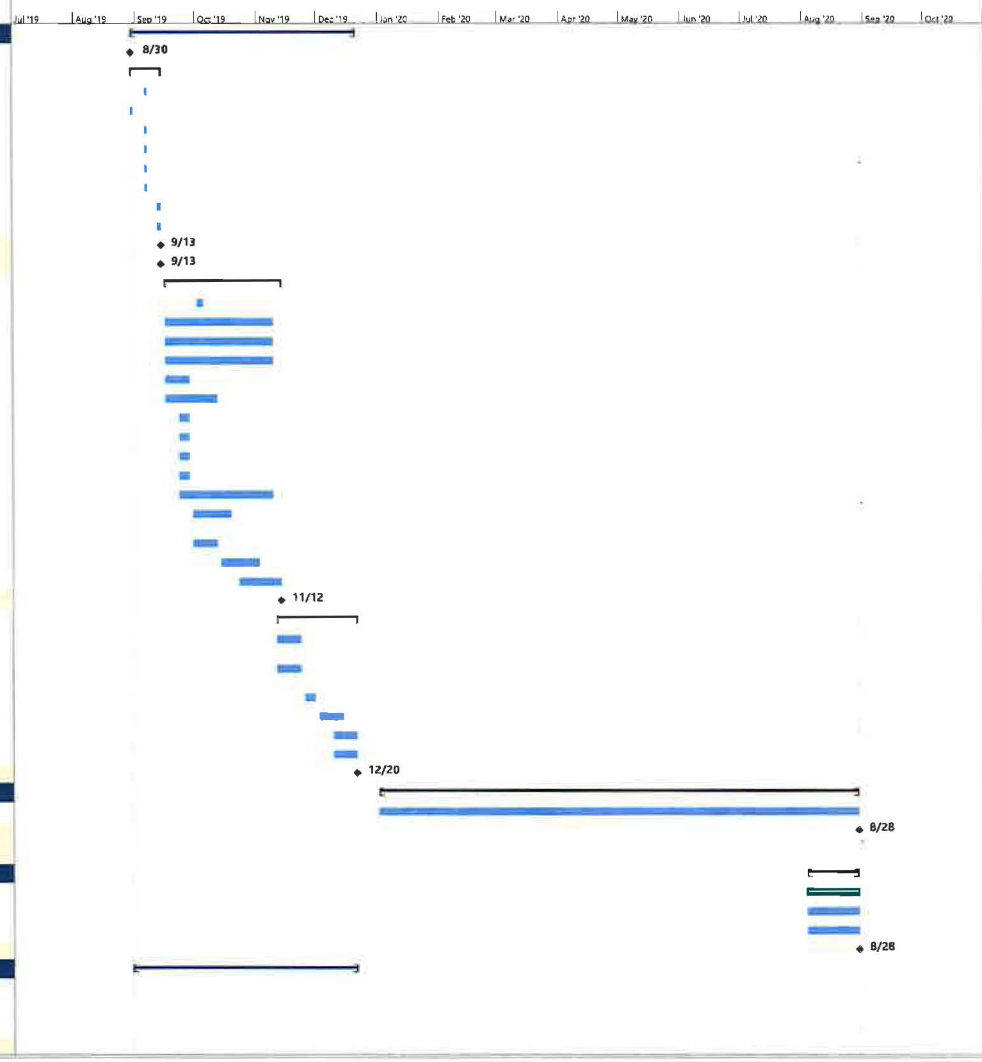
The Gantt chart on the following pages provides a high-level depiction of the proposed project phases, tasks, and subtasks; the estimated timeframe to complete each task and subtask; and the associated deliverables.

In addition, although distinct tasks are not included in the work plan, for each deliverable submitted it is expected that CFS will commit the appropriate resources to review the deliverable and that the CFS project lead, or designee, will consolidate feedback from the reviewers so that BerryDunn may incorporate approved edits into the final deliverable. We have estimated CFS' review time to range from 5 to 10 business days, depending on the length and complexity of the deliverable.

We expect that the project schedule and work plan will be reviewed with CFS during project initiation and updated accordingly to reflect your needs. We will also work closely with CFS throughout the engagement to help ensure that all tasks are fulfilled and deliverables are submitted within the required timelines without compromising quality.

BerryDunn's Proposed Project Schedule for Nebraska DHHS Child Welfare Reform Analysis

Task Name	Start	Finish
Phase 1: Business Process Mapping and Recommendations	**Fri 8/30/19**	**Fri 12/20/19**
Notice to Proceed	Fri 8/30/19	Fri 8/30/19
Task 1: Perform Initial Project Planning Activities (Inclusive of Detailed Project Plan)	**Fri 8/30/19**	**Fri 9/13/19**
1.1 Develop and submit information request	Fri 9/6/19	Fri 9/6/19
1.2 Conduct initial project planning meeting	Fri 8/30/19	Fri 8/30/19
1.3 Develop and review DED for Project Status Report and Project Management Plan	Fri 9/6/19	Fri 9/6/19
1.4 Establish project centralized document storage and team collaboration site	Fri 9/6/19	Fri 9/6/19
1.5 Facilitate synchronization meeting with CFS leadership	Fri 9/6/19	Fri 9/6/19
1.6 Lead visioning session with CFS leadership	Fri 9/6/19	Fri 9/6/19
1.7 Update initial Project Plan and other documentation	Thu 9/12/19	Fri 9/13/19
1.8 Develop Project Management Plan	Thu 9/12/19	Fri 9/13/19
Deliverable 1: Project Plan	*Fri 9/13/19*	*Fri 9/13/19*
Deliverable 2 Project Management Plan	*Fri 9/13/19*	*Fri 9/13/19*
Task 2: Perform Operational Assessment (Inclusive of Business Process Mapping)	**Mon 9/16/19**	**Tue 11/12/19**
2.1 Review background documentation	Wed 10/2/19	Fri 10/4/19
2.2 Perform background research on best practices	Mon 9/16/19	Fri 11/8/19
2.3 Perform data review and analysis	Mon 9/16/19	Fri 11/8/19
2.4 Perform review of CFS policies	Mon 9/16/19	Fri 11/8/19
2.5 Develop and submit DED for D3, Business Process Summary Document	Mon 9/16/19	Fri 9/27/19
2.6 Develop and issue web surveys	Mon 9/16/19	Fri 10/11/19
2.7 Facilitate Project Kickoff Meeting with CFS stakeholders	Mon 9/23/19	Fri 9/27/19
2.8 Develop inventory of business processes	Mon 9/23/19	Fri 9/27/19
2.9 Facilitate listening sessions	Mon 9/23/19	Fri 9/27/19
2.10 Perform direct observation of workflows at worksites	Mon 9/23/19	Fri 9/27/19
2.11 Facilitate interviews and meetings with CFS leadership	Mon 9/23/19	Fri 11/8/19
2.12 Facilitate as-is business process mapping sessions with CFS staff and gather to-be recommendations	Mon 9/30/19	Fri 10/18/19
2.13 Facilitate focus groups with external stakeholders	Mon 9/30/19	Fri 10/11/19
2.14 Facilitate additional targeted interviews and meetings	Mon 10/14/19	Fri 11/1/19
2.15 Develop and submit D3, Business Process Map Summary Document	Wed 10/23/19	Tue 11/12/19
Deliverable 3: Business Process Map Summary Document	*Tue 11/12/19*	*Tue 11/12/19*
Task 3: Develop Improvement Recommendations and Roadmap	**Mon 11/11/19**	**Fri 12/20/19**
3.1 Develop and submit DED for D4, State of Nebraska Child Welfare Reform Recommendations and Roadmap	Mon 11/11/19	Fri 11/22/19
3.2 Analyze data and information and develop preliminary recommendations and improvement strategy	Mon 11/11/19	Fri 11/22/19
3.3 Facilitate review sessions with CFS leaders	Mon 11/25/19	Fri 11/29/19
3.4 Facilitate work sessions with CFS leaders and staff to develop implementation roadmap	Mon 12/2/19	Fri 12/13/19
3.5 Develop and submit D4, State of Nebraska Child Welfare Reform	Mon 12/9/19	Fri 12/20/19
3.6 Develop SOWs for implementation of approved recommendations	Mon 12/9/19	Fri 12/20/19
Deliverable 4: State of Nebraska Child Welfare Reform Recommendations and Roadmap	*Fri 12/20/19*	*Fri 12/20/19*
Phase 2: Implementation	**Wed 1/1/20**	**Fri 8/28/20**
Task 4: Provide support for implementation of Phase 1 approved, prioritized recommendations	**Wed 1/1/20**	**Fri 8/28/20**
Deliverables TBD: Implementation Plan, To-Be Process Maps, Communication Plan/Strategy, Training Materials, Leadership Development Training, Updated Policy/Procedure Manuals, Performance Measurement Plan, Pilot Design/Evaluation Plan, Agendas	*Fri 8/28/20*	*Fri 8/28/20*
Phase 3: Project Closeout	**Mon 8/3/20**	**Fri 8/28/20**
Task 5: Perform knowledge transfer activities	**Mon 8/3/20**	**Fri 8/28/20**
5.1 Perform knowledge transfer activities	Mon 8/3/20	Fri 8/28/20
5.2 Conduct other project closeout activities	Mon 8/3/20	Fri 8/28/20
Deliverable #TBD: Project Closeout Report	*Fri 8/28/20*	*Fri 8/28/20*
Ongoing Project Management and Change Management	**Fri 8/30/19**	**Fri 12/20/19**
Task O.1: Provide ongoing project management services	**Fri 8/30/19**	**Fri 12/20/19**
Task O.2: Perform ongoing status reporting	**Fri 9/27/19**	**Fri 12/20/19**
Task O.3: Provide support for change management activities	**Fri 8/30/19**	**Fri 12/20/19**
Deliverable 5.1 to 5.7: Project Status Reports	*Fri 8/30/19*	*Fri 12/20/19*



3.5.4 DELIVERABLES AND DUE DATES

e. Deliverables and due dates.

BerryDunn has proposed several deliverables in project Phase 1 to fulfill the business requirements and scope of work requested in the RFP, as we understand them to be. As described in Section 3: Technical Approach, our project work plan incorporates iterative development of deliverables that build upon each other and the information gathered in previous tasks, allowing us to be thorough and efficient in our activities and minimize the time required from CFS staff and other stakeholders.

A summary of deliverables—including a description and due date for each deliverable—is provided in Table 4. Screenshots of examples of the deliverables from previous client projects are provided in Appendix D. We would be pleased to provide examples of complete deliverables at CFS' request, and with our clients' approval.

Table 4: Child Welfare Reform Analysis Project Deliverables

ID #	Deliverable Name and Due Date	Description
D1	Project Work Plan *Within 15 days of contract execution*	Breakdown of agreed upon scope of work—provided in MS Visio and Adobe PDF format—including: • Project phases, tasks, and subtasks • Associated start and end dates • Milestones and deliverables • High-level resources involved in task (e.g., CFS leadership, CFS staff, BerryDunn team) for CFS' planning purposes
D2	Project Management Plan *Due date: Within 15 days of contract execution*	Plan describing: • How BerryDunn will provide project management services to help ensure successful completion of the project • Project scope, team, and roles and responsibilities • Key project management processes such as scope, schedule, change, risk and issue, decision, action item, quality, communication, and organizational change management
D3	Business Process Map Summary Document *Within 60 days of completion of Phase 1: Task 1*	Document aggregating information for all processes assessed, including: • Master list of processes mapped • As-is process information, such as process name, narrative process description, process details in table format (e.g., trigger event, predecessor and successor processes, systems used, and challenges identified, such as quality issues, inefficiencies, and bottlenecks), and process map

ID #	Deliverable Name and Due Date	Description
		• To-be ideas and recommendations (from CFS staff) We will also provide the process maps to CFS in MS Visio so that they may be edited and updated by CFS if/as needed when BerryDunn is no longer engaged on the project.
D4	State of Nebraska Child Welfare Reform Recommendations and Roadmap *Within 45 days of completion of Phase 1: Task 2*	Roadmap describing: • Opportunities for improvement identified as a result of analyzing gaps between the current and desired future state • Prioritized near- and long-term recommendations to close those gaps and achieve CFS' vision and goals • Cost (e.g., in terms of quality, compliance, finance, staff morale) of present practices and anticipated benefits implementing recommendations to address them • Implementation considerations, including high-level actions, timelines, owners and additional resources needed, potential implementation risks and mitigation strategies, and key stakeholder communication messages The roadmap will include, but not be limited to, the topics identified in RFP Section E.1.c.i.-xi.
D5.1 -5.7	Project Status Reports *First report due approximately September 27, 2019, and every two weeks after thereafter through December 20, 2019*	Biweekly status report summarizing: • Activities performed in the reporting period • Activities planned for the upcoming reporting period • Status of risks, issues, open decisions, and action items

3.6 ASSUMPTIONS

Assumptions are premises about the business and/or project environment that, for the sake of planning, are taken as fact. BerryDunn made several assumptions to develop our approach, determine team composition, and estimate the number of hours and the budget required to complete the scope of work for this project, as described below. Should any of these assumptions be inaccurate, we would be happy to discuss with CFS and adjust our proposed approach accordingly to achieve the desired project results.

Our assumptions are as follows:

- The project start date is August 30, 2019. The project end date will be determined based on the recommendations made by BerryDunn, and CFS' decisions regarding whether or not to move forward with recommendations and/or to competitively procure for the implementation phase. For illustrative purposes in the Gantt chart in Section 3.5.3, we have assumed the contract duration is 12 months and the project end date is August 28, 2020.
- To align with CFS' expectations—as articulated in the RFP and addendum issued May 21, 2019—we have planned for the assessment in Phase 1 to span approximately 120 days—or 16 weeks—with Tasks 1, 2, and 3 spanning 2, 8, and 6 weeks, respectively. In addition, our proposed approach includes performing an initial review of all of areas requested by CFS, as articulated in RFP Attachment B: Business Requirements Matrix and as mapped to our Assessment, Planning, and Implementation Framework in Appendix A.

  We fully appreciate CFS' desire to have a comprehensive "start-to-finish" assessment of its child welfare system, and we commend the Division for embarking upon this critical improvement initiative. However, based on our team's collective decades of experience performing comprehensive reviews similar to that which is being requested by CFS, we believe it will be extremely challenging to perform a thorough, in-depth, high-quality review of all requested areas in the eight weeks allocated to performing Task 2: Perform Operational Assessment (inclusive of Business Process Mapping). Although it is possible to add team members to the project, doing so will not decrease the project timeline as:

  1. Many of the assessment areas require an integrated assessment approach and should not be distributed into "siloes."
  2. Although we have planned for tasks to occur concurrently when possible, several of the tasks should occur sequentially and therefore cannot be compressed into a shorter period.
  3. Assessment activities will require significant involvement and inputs from CFS' leadership and staff, whose time is also limited.

As a result, to minimize project risk and to help ensure that CFS' project goals and objectives are achieved in a timely manner, we will facilitate a synchronization work session during project initiation (and/or during contract negotiation, at CFS' preference) to clarify CFS' meaning, intent, and desired assessment outcomes for each requirement. As a result of the work session, should it be determined that additional time and effort may be required to perform the level of review expected by CFS across all business requirements, we will work with CFS to determine the best approach to move forward. Options may include prioritizing requirements and delaying the assessment of some to a subsequent assessment in Phase 1 or in Phase 2, or extending the duration of Phase 1 so that all requirements may be addressed during a single time period.

- Based on experience, we anticipate that during the operational assessment in Phase 1, CFS and BerryDunn may identify new areas that require review and/or in-scope areas that would benefit from a deeper review than initially planned. Should these circumstances arise, BerryDunn will partner with CFS to determine if and how to proceed to help ensure that CFS' project goals and objectives are met in a timely and cost-effective manner. We will approach these—and all similar—discussions with CFS in a fair, honest, and transparent manner, with a focus on how to ensure the success of CFS and this project. We believe our references and other clients will attest to our commitment to these principles.

> *"BerryDunn was always pleasant to work with and understanding of the red tape facing the State. Their flexibility and willingness to adapt was invaluable."*
>
> **Ms. Ashley Berliner, Director of Healthcare Policy and Planning, Agency of Human Services, Vermont**

- The proposed costs in our Cost Proposal for ongoing project management and organizational change management span Phase 1 (120 days). The Cost Proposal does not include costs for these services in Phase 2. Similarly, although we included Phase 3: Project Closeout in our approach and project work plan as we believe it is important to acknowledge that we will perform these closeout tasks prior to transitioning off the project, we did not include costs for these tasks during Phase 1 as it is unclear when project closeout may occur.

- We have planned for our project team members to be on-site as needed for key meetings, information gathering activities with CFS staff and other stakeholders, walkthroughs of major deliverables, etc. We will work with the CFS project lead to plan on-site time in advance, communicating when our team will be in Lincoln via biweekly executive update meetings and the biweekly project status report, as well as other informal mechanisms as needed.

- The project work plan, including detailed tasks, subtasks, timelines, and deliverables, will be refined with CFS during the initial project planning.

- Project tasks may not all occur in a sequential manner (i.e., activities in one task may overlap activities in another task) to minimize the impact on stakeholders and maximize efficiencies.
- Given the compressed project timeline, our project schedule assumes that our team members will be on-site in Lincoln the first week of the project to hold initial foundational meetings with CFS leadership. Delays in CFS team availability in the first week may delay the overall project timeline.
- Based on our experience with other states and our understanding of child welfare processes, we have planned for no greater than 30 processes to be in scope of the business process mapping sessions. Should greater than 30 processes be identified during Task 2.8: Develop an Inventory of Business Processes, BerryDunn will work with CFS to determine the best approach to manage the potential change in scope—for example, prioritizing the processes based on their risk, ability to impact change, and known issues.
- Our approach to conducting data review and analyses is dependent upon CFS' determination of the need for a data-sharing agreement, and obtaining agreement if necessary. Given the length of time it can take to finalize such an agreement and the short project duration, rather than having CFS send data to us for independent analysis, we recommend that our team work with CFS' Research, Planning, and Evaluation data analysts, having them run analytical tasks directly and sharing the resulting data and information with us for analysis.
- CFS leadership considers this project a department-wide priority, and although staff are faced with many other important priorities, CFS leadership will clearly communicate and support the prioritization of project participation. We acknowledge that resource constraints may exist and will work to accommodate potential scheduling conflicts and constraints, while still maintaining the timeline for this project.
- Availability of CFS staff may be limited due to many competing priorities, including the CFS' day-to-day business and other projects and initiatives, which may impact the project schedule and ability to conduct some of the planned work concurrently. During initial project planning, we will work with CFS to develop a schedule that takes into consideration the availability and competing demands of key stakeholders. If scheduling issues arise that will impact the overall project timeline or milestones, we will alert the CFS of these issues as part of our regular status reporting and work together to determine an appropriate resolution to prevent project delays.
- CFS leadership will employ its influence to obtain participation of staff from other Divisions and external stakeholders—such as clients, service providers, and representatives from the courts system—for this project as needed.
- CFS will commit the appropriate resources to review deliverables, and the CFS project lead, or designee, will consolidate feedback from reviewers so that BerryDunn may

incorporate approved edits into the final deliverables. CFS' review time will range from 5 to 10 business days, depending on the length and complexity of the deliverable. We understand, however, that factors such as the CFS team members' schedules and the length of time it may take to gain consensus on, and approval for, some decisions may be longer. We will work with CFS to minimize the impact of these factors on the project schedule through advanced planning, frequent communication, and adjustment of project tasks and subtasks so that we may proceed with those for which it is appropriate to do so while others await CFS' approval.

- CFS will assist with the coordination and scheduling of meetings with stakeholders, (e.g., reserving conference rooms and sending meeting invitations to select stakeholders). Meeting space will be made available at CFS offices to perform project work and hold project meetings, including focus group sessions with community stakeholders.
- A minimum of two BerryDunn team members will be included in each meeting with CFS and external stakeholders—one to facilitate, and the other to provide support such as capturing process and other information in real-time and taking notes.
- Additional assumptions at the task and sub-task level may be found in Section 3.5.2: Detailed Project Work Plan.

3.7 RISKS

> **It is our practice to identify and discuss risks with our clients at the beginning of a project, and to proactively manage and mitigate risks throughout the project.**

CFS' improvement initiative will have a direct impact on staff and the way they perform their daily work. To varying degrees, it will also impact other internal partners—such as other DHHS divisions—and external stakeholders such as children, youth, and their families; service providers; the courts system; advocacy groups; and community organizations.

When undertaking a project of this scope, potential risks will arise. Some of them can be anticipated and planned for, and others CFS may have little or no control over. In order to help our clients avoid implementation challenges, we spend a consider able amount of time identifying risks that may negatively impact change initiatives and strategies to address those risks, as well as critical success factors to help ensure success.

Although CFS did not request that bidders identify risks in their proposals, we hope that doing so may help CFS prepare for this important initiative, regardless of the bidder selected to perform the services.

Therefore, below we have presented potential areas of risk for the project and the services being requested in this RFP, as well as potential strategies to address them.

- **Executive Sponsorship.** In order for this initiative to succeed, CFS leadership must **fully support it and take an active role in** guiding its direction. They must be visible, vocal, and active supporters, communicating to staff and other stakeholders the vision for the future and the reasons change is needed. Early on, we will work with the CFS leadership team to develop a Communication Plan that defines the role the CFS leadership and BerryDunn will play in effective communications, and we will provide coaching to them throughout the project, seeking opportunities to engage them in meetings and with CFS staff as appropriate.

- **Project Governance and Decision-Making.** An effective governance structure must be established to **guide project efforts, make key decisions, and help manage risks and issues.** Establishing a governance committee with clear roles, responsibilities, and lines of authority will help prevent project delays due to lack of decision-making—or worse yet, decisions being made without appropriate authority and/or key stakeholder inputs.

  We will discuss the project's governance structure with CFS—and make recommendations accordingly—during project initiation. We will also seek to understand CFS' authority to influence different stakeholders and to address the challenges identified in Task 2 so that we develop meaningful, realistic recommendations and an actionable, practical roadmap for implementation in Task 3.

- **Stakeholder Participation.** It will be important for CFS and other key stakeholder groups to dedicate sufficient resources during the initial information gathering and business process mapping activities, as well as throughout the duration of the project, to help ensure completion of its objectives in a timely manner. We understand that individuals contributing to the initiative have other operational responsibilities or "day jobs" that are a priority for them. As part of our planning activities, we will partner with CFS to determine the right staff to involve based on factors such as subject matter expertise and availability. Our approach attempts to **minimize the impact on staff by having us perform as much work as we can off-site** *before* we are on-site with the team, allowing us to be well prepared, focused, and efficient.

  During implementation planning, we will also develop a high-level estimate of staffing and resource needs for subsequent project activities and define the roles and time commitments required of each resource. This will allow impacted staff and their managers to adequately plan and prepare for their involvement, while ensuring there is no gap in performance of their daily work.

- **Delays in the Project Timeline.** Although we have developed a proposed project timeline based on the information currently available to us, we understand that various factors may come into play that will impact the schedule, such as staff availability and time for leadership decision-making related to policies and other elements of process redesign. This is particularly true for this project considering that Phase 1 is anticipated to span the November/December holiday season, when individuals typically plan for time off.

  We will work with CFS to mitigate these risks to the timeline through **advanced planning and accounting for known absences in the schedule, as well as by providing regular updates on progress** and relevant matters throughout the project. For example, rather than waiting for the final Child Welfare Reform Recommendations and Roadmap to be delivered to discuss recommendations, we will share information as we proceed with information gathering and analysis activities so there are no surprises to CFS leadership at the end.

  To address delays over which our team and CFS may have less control, such as time needed to make IT enhancements or to make policy decisions, we will identify process inter-dependencies and prioritize our recommendations in the roadmap to be implemented in a longer, phased approach, if needed.

- **Singular Focus on Process or Technology.** It can seem logical for an organization undertaking a business process improvement initiative to "tackle the problem" by jumping directly to the processes themselves, or instead to focus on the available IT system(s) and retrofit processes to accommodate the technology. This approach can give rise to numerous challenges, such as unclear goals, revised processes that do not align with business strategy, and lack of stakeholder buy-in. Our approach focuses on

prioritizing the program goals driving the change, and then works in collaboration with stakeholders to identify the best processes, staffing, and technology to support the goals. It also considers other factors that are critical to the success of the initiative, such as change management and project management.

- **Organizational Change Management.** BerryDunn has experienced resistance to change in many of our business process improvement engagements, reinforcing our belief that the **management of change is crucial to the success** of such an initiative. Often, agencies and departments have developed and adhered to existing processes over the course of several years, and staff are reluctant to change their way of doing things. Our team, which includes Prosci® Certified Change Practitioners, is qualified to provide change management structure to this project where appropriate, in collaboration with CFS.

  It is important for CFS leaders and frontline managers and supervisors to understand the drivers of this resistance, including staff fears that they will not be able to perform their new responsibilities, their role will be diminished in importance, and/or they may lose their job—and proactively address them. It is also important to include staff's input into the assessment so they feel more invested in the changes occurring. Communicating the value of the change by explaining what is in it for them is a critical component of moving staff along the change management path.

  We will remain cognizant of, and sensitive to, these factors and perceptions in our communications, from project initiation to implementation. We will engage stakeholders early on through web surveys, listening sessions, and meetings, as appropriate throughout the project. We will also recommend that CFS consider development of a core "Change Champions" or "Process Improvement Team" comprised of approximately 10 to 12 CFS staff members to play a greater role in assessment and implementation activities, and a "Child Welfare Collaborative" or advisory group comprised of key external stakeholders.

  Finally, we will include change management considerations for CFS as part of our recommendations in the roadmap to help leadership build support and buy-in for implementation of the recommendations.

- **Effective Project Management.** Undertaking a change initiative of this size and scope requires effective project management to manage scope, schedule, and budget and to ensure the project achieves its intended objectives before transitioning into an operational phase. In the absence of an experienced individual dedicated to performing these activities, timelines may slip (or never be developed); scope "creep" or expansion may occur, compromising other project objectives; and cost overruns may be experienced.

  Our proposed manager, Danielle Ewing, is a certified PMP® with significant experience providing project management in extremely complex environments. She will help to ensure that BerryDunn's activities **remain within scope, schedule, and budget** and that **risks and issues** are being proactively managed during BerryDunn's involvement in the project. Our team will include project management considerations in all of our activities and deliverables, including implementation planning.

4. RESPONSE TO RFP SECTIONS II THROUGH IV

As instructed in the addendum posted on May 21, 2019, on the following pages we have provided the initials of the BerryDunn project principal, Charlie Leadbetter, on RFP Sections II through IV.

II. TERMS AND CONDITIONS

Bidders should complete Sections II through VI as part of their proposal. Bidder is expected to read the Terms and Conditions and should initial either accept, reject, or reject and provide alternative language for each clause. The bidder should also provide an explanation of why the bidder rejected the clause or rejected the clause and provided alternate language. By signing the RFP, bidder is agreeing to be legally bound by all the accepted terms and conditions, and any proposed alternative terms and conditions submitted with the proposal. The State reserves the right to negotiate rejected or proposed alternative language. If the State and bidder fail to agree on the final Terms and Conditions, the State reserves the right to reject the proposal. The State of Nebraska is soliciting proposals in response to this RFP. The State of Nebraska reserves the right to reject proposals that attempt to substitute the bidder's commercial contracts and/or documents for this RFP.

The bidders should submit with their proposal any license, user agreement, service level agreement, or similar documents that the bidder wants incorporated in the contract. The State will not consider incorporation of any document not submitted with the bidder's proposal as the document will not have been included in the evaluation process. These documents shall be subject to negotiation and will be incorporated as addendums if agreed to by the Parties.

If a conflict or ambiguity arises after the Addendum to Contract Award have been negotiated and agreed to, the Addendum to Contract Award shall be interpreted as follows:

1. If only one Party has a particular clause then that clause shall control;
2. If both Parties have a similar clause, but the clauses do not conflict, the clauses shall be read together;
3. If both Parties have a similar clause, but the clauses conflict, the State's clause shall control.

A. GENERAL

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
CKL			

The contract resulting from this RFP shall incorporate the following documents:

1. Request for Proposal and Addenda;
2. Amendments to the RFP;
3. Questions and Answers;
4. Contractor's proposal (RFP and properly submitted documents);
5. The executed Contract and Addendum One to Contract, if applicable; and,
6. Amendments/Addendums to the Contract.

These documents constitute the entirety of the contract.

Unless otherwise specifically stated in a future contract amendment, in case of any conflict between the incorporated documents, the documents shall govern in the following order of preference with number one (1) receiving preference over all other documents and with each lower numbered document having preference over any higher numbered document: 1) Amendment to the executed Contract with the most recent dated amendment having the highest priority, 2) executed Contract and any attached Addenda, 3) Amendments to RFP and any Questions and Answers, 4) the original RFP document and any Addenda, and 5) the Contractor's submitted Proposal.

Any ambiguity or conflict in the contract discovered after its execution, not otherwise addressed herein, shall be resolved in accordance with the rules of contract interpretation as established in the State of Nebraska.

B. NOTIFICATION

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
		CKL	We respectfully request that the effective date be extended to more than 3 calendar days following deposit in the mail, based on the distance between the State and BerryDunn's headquarters in Portland, Maine.

Contractor and State shall identify the contract manager who shall serve as the point of contact for the executed contract.

Communications regarding the executed contract shall be in writing and shall be deemed to have been given if delivered personally or mailed, by U.S. Mail, postage prepaid, return receipt requested, to the parties at their respective addresses set forth below, or at such other addresses as may be specified in writing by either of the parties. All notices, requests, or communications shall be deemed effective upon personal delivery or three (3) calendar days following deposit in the mail.

C. NOTICE POINT OF CONTACT (POC)

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
CKL			

The State reserves the right to appoint a Buyer's Representative to manage [or assist the Buyer in managing] the contract on behalf of the State. The Buyer's Representative will be appointed in writing, and the appointment document will specify the extent of the Buyer's Representative authority and responsibilities. If a Buyer's Representative is appointed, the Contractor will be provided a copy of the appointment document, and is expected to cooperate accordingly with the Buyer's Representative. The Buyer's Representative has no authority to bind the State to a contract, amendment, addendum, or other change or addition to the contract.

D. GOVERNING LAW (Statutory)

Notwithstanding any other provision of this contract, or any amendment or addendum(s) entered into contemporaneously or at a later time, the parties understand and agree that, (1) the State of Nebraska is a sovereign state and its authority to contract is therefore subject to limitation by the State's Constitution, statutes, common law, and regulation; (2) this contract will be interpreted and enforced under the laws of the State of Nebraska; (3) any action to enforce the provisions of this agreement must be brought in the State of Nebraska per state law; (4) the person signing this contract on behalf of the State of Nebraska does not have the authority to waive the State's sovereign immunity, statutes, common law, or regulations; (5) the indemnity, limitation of liability, remedy, and other similar provisions of the final contract, if any, are entered into subject to the State's Constitution, statutes, common law, regulations, and sovereign immunity; and, (6) all terms and conditions of the final contract, including but not limited to the clauses concerning third party use, licenses, warranties, limitations of liability, governing law and venue, usage verification, indemnity, liability, remedy or other similar provisions of the final contract are entered into specifically subject to the State's Constitution, statutes, common law, regulations, and sovereign immunity.

The Parties must comply with all applicable local, state and federal laws, ordinances, rules, orders, and regulations.

E. BEGINNING OF WORK

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
CKL			

The bidder shall not commence any billable work until a valid contract has been fully executed by the State and the awarded bidder. The Contractor will be notified in writing when work may begin.

F. CHANGE ORDERS

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
CKL			

The State and the Contractor, upon the written agreement, may make changes to the contract within the general scope of the RFP. Changes may involve specifications, the quantity of work, or such other items as the State may find necessary or desirable. Corrections of any deliverable, service, or work required pursuant to the contract shall not be deemed a change. The Contractor may not claim forfeiture of the contract by reasons of such changes.

The Contractor shall prepare a written description of the work required due to the change and an itemized cost sheet for the change. Changes in work and the amount of compensation to be paid to the Contractor shall be determined in accordance with applicable unit prices if any, a pro-rated value, or through negotiations. The State shall not incur a price increase for changes that should have been included in the Contractor's proposal, were foreseeable, or result from difficulties with or failure of the Contractor's proposal or performance.

No change shall be implemented by the Contractor until approved by the State, and the Contract is amended to reflect the change and associated costs, if any. If there is a dispute regarding the cost, but both parties agree that immediate implementation is necessary, the change may be implemented, and cost negotiations may continue with both Parties retaining all remedies under the contract and law.

G. NOTICE OF POTENTIAL CONTRACTOR BREACH

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
CKL			

If Contractor breaches the contract or anticipates breaching the contract, the Contractor shall immediately give written notice to the State. The notice shall explain the breach or potential breach, a proposed cure, and may include a request for a waiver of the breach if so desired. The State may, in its discretion, temporarily or permanently waive the breach. By granting a waiver, the State does not forfeit any rights or remedies to which the State is entitled by law or equity, or pursuant to the provisions of the contract. Failure to give immediate notice, however, may be grounds for denial of any request for a waiver of a breach.

H. BREACH

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
CKL			

Either Party may terminate the contract, in whole or in part, if the other Party breaches its duty to perform its obligations under the contract in a timely and proper manner. Termination requires written notice of default and a thirty (30) calendar day (or longer at the non-breaching Party's discretion considering the gravity and nature of the default) cure period. Said notice shall be delivered by Certified Mail, Return Receipt Requested, or in person with proof of delivery. Allowing time to cure a failure or breach of contract does not waive the right to immediately terminate the contract for the same or different contract breach which may occur at a different time. In case of default of the Contractor, the State may contract the service from other sources and hold the Contractor responsible for any excess cost occasioned thereby.

The State's failure to make payment shall not be a breach, and the Contractor shall retain all available statutory remedies and protections.

I. NON-WAIVER OF BREACH

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
CKL			

The acceptance of late performance with or without objection or reservation by a Party shall not waive any rights of the Party nor constitute a waiver of the requirement of timely performance of any obligations remaining to be performed.

J. SUSPENSION OF SERVICES

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
CKL			

DHHS may, at any time and without advance notice, require Contractor to suspend any or all activities provided under this Contract. A suspension may be the result of a reduction in federal or state funds, budget freeze, emergency, contract compliance issues, investigation, or other reasons not stated here.

1. In the event of such suspension, the DHHS Chief Operating Officer/Contract Administrator or designee will issue a written Stop Work Order to the Contractor. The Stop Word Order will specify which activities are to be immediately suspended, the reason(s) for the suspension, and, if possible, the known duration period of the suspension.
2. Upon receipt of the Stop Work Order, the Contractor shall immediately comply with its terms and take all necessary steps to minimize the incurrence of costs allocable to the work affected by the order during the period of suspension.
3. The DHHS Chief Operating Officer/Contract Administrator or designee may extend the duration of the suspension by issuing a modified Stop Work Order which states the new end date of the suspension and the reason for the extension.

4. The suspended activity may resume when (i) the suspension period identified in the Stop Work Order has ended or (ii) when the DHHS Chief Operating Officer/Contract Administrator or designee has issued a formal written notice cancelling the Stop Work Order or directing Contractor to resume partial services.
5. If a deadline for submitting a deliverable is impacted by the suspension of any activity, then upon resuming the suspended activity, the deadline for submitting the impacted deliverable must be extended by the number of days an activity was suspended.

K. SEVERABILITY

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
CKL			

If any term or condition of the contract is declared by a court of competent jurisdiction to be illegal or in conflict with any law, the validity of the remaining terms and conditions shall not be affected, and the rights and obligations of the parties shall be construed and enforced as if the contract did not contain the provision held to be invalid or illegal.

L. INDEMNIFICATION

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
		CKL	Please see our preferred language and justification on the following page.

1. **GENERAL**
The Contractor agrees to defend, indemnify, and hold harmless the State and its employees, volunteers, agents, and its elected and appointed officials ("the indemnified parties") from and against any and all third party claims, liens, demands, damages, liability, actions, causes of action, losses, judgments, costs, and expenses of every nature, including investigation costs and expenses, settlement costs, and attorney fees and expenses ("the claims"), sustained or asserted against the State for personal injury, death, or property loss or damage, arising out of, resulting from, or attributable to the willful misconduct, negligence, error, or omission of the Contractor, its employees, subcontractors, consultants, representatives, and agents, resulting from this contract, except to the extent such Contractor liability is attenuated by any action of the State which directly and proximately contributed to the claims.

2. **INTELLECTUAL PROPERTY**
The Contractor agrees it will, at its sole cost and expense, defend, indemnify, and hold harmless the indemnified parties from and against any and all claims, to the extent such claims arise out of, result from, or are attributable to, the actual or alleged infringement or misappropriation of any patent, copyright, trade secret, trademark, or confidential information of any third party by the Contractor or its employees, subcontractors, consultants, representatives, and agents; provided, however, the State gives the Contractor prompt notice in writing of the claim. The Contractor may not settle any infringement claim that will affect the State's use of the Licensed Software without the State's prior written consent, which consent may be withheld for any reason.

   If a judgment or settlement is obtained or reasonably anticipated against the State's use of any intellectual property for which the Contractor has indemnified the State, the Contractor shall, at the Contractor's sole cost and expense, promptly modify the item or items which were determined to be infringing, acquire a license or licenses on the State's behalf to provide the necessary rights to the State to eliminate the infringement, or provide the State with a non-infringing substitute that provides the State the same functionality. At the State's election, the actual or anticipated judgment may be treated as a breach of warranty by the Contractor, and the State may receive the remedies provided under this RFP.

The Contractor agrees, to the fullest extent permitted by law, to indemnify and hold harmless the Client against damages, liabilities, and costs arising from the negligent acts of the Contractor in the performance of professional services under this Agreement, to the extent that Contractor is responsible for such damages, liabilities and costs on a comparative basis of fault and responsibility between the Contractor and Client. The Client shall not be obligated to indemnify the Client for the Client's own negligence.

Our firm carries a $10 million professional liability policy which protects us and our clients from "claims of negligence in professional services"; however, the policy itself contains language within that states that it will not apply to a project when we take additional liabilities (such as an agreement to indemnify for something other than negligence, or costs or attorneys' fees) on under contract.

3. **PERSONNEL**
The Contractor shall, at its expense, indemnify and hold harmless the indemnified parties from and against any claim with respect to withholding taxes, worker's compensation, employee benefits, or any other claim, demand, liability, damage, or loss of any nature relating to any of the personnel, including subcontractor's and their employees, provided by the Contractor.

4. **SELF-INSURANCE**
The State of Nebraska is self-insured for any loss and purchases excess insurance coverage pursuant to Neb. Rev. Stat. § 81-8,239.01 (Reissue 2008). If there is a presumed loss under the provisions of this agreement, Contractor may file a claim with the Office of Risk Management pursuant to Neb. Rev. Stat. §§ 81-8,829 – 81-8,306 for review by the State Claims Board. The State retains all rights and immunities under the State Miscellaneous (§81-8,294), Tort (§81-8,209), and Contract Claim Acts (§81-8,302), as outlined in Neb. Rev. Stat. § 81-8,209 et seq. and under any other provisions of law and accepts liability under this agreement to the extent provided by law.

5. **ALL REMEDIES AT LAW**
Nothing in this agreement shall be construed as an indemnification by one Party of the other for liabilities of a Party or third parties for property loss or damage or death or personal injury arising out of and during the performance of this lease. Any liabilities or claims for property loss or damages or for death or personal injury by a Party or its agents, employees, Contractors or assigns or by third persons shall be determined according to applicable law.

6. The Parties acknowledge that Attorney General for the State of Nebraska is required by statute to represent the legal interests of the State, and that any provision of this indemnity clause is subject to the statutory authority of the Attorney General.

M. ATTORNEY'S FEES

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
CKL			

In the event of any litigation, appeal, or other legal action to enforce any provision of the contract, the Parties agree to pay all expenses of such action, as permitted by law and if order by the court, including attorney's fees and costs, if the other Party prevails.

N. RETAINAGE

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
CKL			

CFS will withhold ten percent (10%) of Phase 1 Task 1 and Phase 1 Task 2 payments due as retainage. The entire retainage amount will be payable upon successful completion of Phase 1 Task 3. Upon completion of Phase 1 Task 3, the Contractor will invoice the State for any outstanding work and for the retainage. The State may reject the final invoice by identifying the specific reasons for such rejection in writing to the Contractor within forty-five (45) calendar days of receipt of the final invoice. Otherwise, the project will be deemed accepted and the State will release the final payment and retainage in accordance with the contract payment terms.

O. REMEDIES FOR NONCOMPLIANCE

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
CKL			

DHHS may, if Contractor fails to comply with federal statutes, regulations, Title IV-E state plan, or with the terms of the contract:

1. Impose any of the Specific Conditions listed in 45 CFR § 75.207;
2. Temporarily withhold any payments pending the correction of the deficiency by Contractor;
3. Disallow all or part of the cost of the activity or action not in compliance;
4. Wholly or partly suspend or terminate contract (see also Termination, below, and Breach, above);
5. Recommend suspension or debarment proceedings be initiated by the Federal Funding Agency; and
6. Take any other remedies that may be legally available.

If DHHS imposes items 3, 4, or 6, above, DHHS may withhold future payments, or seek repayment to recoup costs paid by DHHS, or both.

Failures to comply include, but are not limited to, Contractor's inability to meet or exceed the federal standards contained in Family First Prevention Services Act (FFPSA). If this, or any other failure by Contractor to comply with any federal statute, regulation, Title IV-E state plan, or term of this Contract, is a proximate cause of any reduction in federal funds to DHHS, DHHS may disallow costs under this Contract in an amount up to DHHS' reduction in federal funding.

Nothing in this section shall limit any other legal remedies available to DHHS.

P. ASSIGNMENT, SALE, OR MERGER

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
CKL			

Either Party may assign the contract upon mutual written agreement of the other Party. Such agreement shall not be unreasonably withheld.

The Contractor retains the right to enter into a sale, merger, acquisition, internal reorganization, or similar transaction involving Contractor's business. Contractor agrees to cooperate with the State in executing amendments to the contract to allow for the transaction. If a third party or entity is involved in the transaction, the Contractor will remain responsible for performance of the contract until such time as the person or entity involved in the transaction agrees in writing to be contractually bound by this contract and perform all obligations of the contract.

Q. CONTRACTING WITH OTHER NEBRASKA POLITICAL SUB-DIVISIONS

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
CKL			

The Contractor may, but shall not be required to, allow agencies, as defined in Neb. Rev. Stat. §81-145, to use this contract. The terms and conditions, including price, of the contract may not be amended. The State shall not be contractually obligated or liable for any contract entered into pursuant to this clause. A listing of Nebraska political subdivisions may be found at the website of the Nebraska Auditor of Public Accounts.

R. FORCE MAJEURE

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
CKL			

Neither Party shall be liable for any costs or damages, or for default resulting from its inability to perform any of its obligations under the contract due to a natural or manmade event outside the control and not the fault of the affected Party ("Force Majeure Event"). The Party so affected shall immediately make a written request for relief to the other Party, and shall have the burden of proof to justify the request. The other Party may grant the relief requested; relief may not be unreasonably withheld. Labor disputes with the impacted Party's own employees will not be considered a Force Majeure Event.

S. CONFIDENTIALITY

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
CKL			

All materials and information provided by the Parties or acquired by a Party on behalf of the other Party shall be regarded as confidential information. All materials and information provided or acquired shall be handled in accordance with federal and state law, and ethical standards. Should said confidentiality be breached by a Party, the Party shall notify the other Party immediately of said breach and take immediate corrective action.

It is incumbent upon the Parties to inform their officers and employees of the penalties for improper disclosure imposed by the Privacy Act of 1974, 5 U.S.C. 552a. Specifically, 5 U.S.C. 552a (i)(1), which is made applicable by 5 U.S.C. 552a (m)(1), provides that any officer or employee, who by virtue of his/her employment or official position has possession of or access to agency records which contain individually identifiable information, the disclosure of which is prohibited by the Privacy Act or regulations established thereunder, and who knowing that disclosure of the specific material is prohibited, willfully discloses the material in any manner to any person or agency not entitled to receive it, shall be guilty of a misdemeanor and fined not more than $5,000.

T. OFFICE OF PUBLIC COUNSEL (Statutory)

If it provides, under the terms of this contract and on behalf of the State of Nebraska, health and human services to individuals; service delivery; service coordination; or case management, Contractor shall submit to the jurisdiction of the Office of Public Counsel, pursuant to Neb. Rev. Stat. §§ 81-8,240 et seq. This section shall survive the termination of this contract.

U. LONG-TERM CARE OMBUDSMAN (Statutory)

Contractor must comply with the Long-Term Care Ombudsman Act, Neb. Rev. Stat. §§ 81-2237 et seq. This section shall survive the termination of this contract.

V. EARLY TERMINATION

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
CKL			

The contract may be terminated as follows:

1. The State and the Contractor, by mutual written agreement, may terminate the contract at any time.
2. The State, in its sole discretion, may terminate the contract for any reason upon thirty (30) calendar day's written notice to the Contractor. Such termination shall not relieve the Contractor of warranty or other service obligations incurred under the terms of the contract. In the event of termination the Contractor shall be entitled to payment, determined on a pro rata basis, for products or services satisfactorily performed or provided.
3. The State may terminate the contract immediately for the following reasons:
   a. if directed to do so by statute;
   b. Contractor has made an assignment for the benefit of creditors, has admitted in writing its inability to pay debts as they mature, or has ceased operating in the normal course of business;
   c. a trustee or receiver of the Contractor or of any substantial part of the Contractor's assets has been appointed by a court;
   d. fraud, misappropriation, embezzlement, malfeasance, misfeasance, or illegal conduct pertaining to performance under the contract by its Contractor, its employees, officers, directors, or shareholders;
   e. an involuntary proceeding has been commenced by any Party against the Contractor under any one of the chapters of Title 11 of the United States Code and (i) the proceeding has been pending for at least sixty (60) calendar days; or (ii) the Contractor has consented, either expressly or by operation of law, to the entry of an order for relief; or (iii) the Contractor has been decreed or adjudged a debtor;
   f. a voluntary petition has been filed by the Contractor under any of the chapters of Title 11 of the United States Code;
   g. Contractor intentionally discloses confidential information;
   h. Contractor has or announces it will discontinue support of the deliverable; and,
   i. In the event funding is no longer available.

W. CONTRACT CLOSEOUT

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
CKL			

Upon contract closeout for any reason the Contractor shall within 30 days, unless stated otherwise herein:

1. Transfer all completed or partially completed deliverables to the State;
2. Transfer ownership and title to all completed or partially completed deliverables to the State;
3. Return to the State all information and data, unless the Contractor is permitted to keep the information or data by contract or rule of law. Contractor may retain one copy of any information or data as required to comply with applicable work product documentation standards or as are automatically retained in the course of Contractor's routine back up procedures;
4. Cooperate with any successor Contactor, person or entity in the assumption of any or all of the obligations of this contract;

5. Cooperate with any successor Contactor, person or entity with the transfer of information or data related to this contract;

6. Return or vacate any state owned real or personal property; and,

7. Return all data in a mutually acceptable format and manner.

Nothing in this Section should be construed to require the Contractor to surrender intellectual property, real or personal property, or information or data owned by the Contractor for which the State has no legal claim.

III. CONTRACTOR DUTIES

A. INDEPENDENT CONTRACTOR / OBLIGATIONS

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
CKL			

It is agreed that the Contractor is an independent contractor and that nothing contained herein is intended or should be construed as creating or establishing a relationship of employment, agency, or a partnership.

The Contractor is solely responsible for fulfilling the contract. The Contractor or the Contractor's representative shall be the sole point of contact regarding all contractual matters.

The Contractor shall secure, at its own expense, all personnel required to perform the services under the contract. The personnel the Contractor uses to fulfill the contract shall have no contractual or other legal relationship with the State; they shall not be considered employees of the State and shall not be entitled to any compensation, rights or benefits from the State, including but not limited to, tenure rights, medical and hospital care, sick and vacation leave, severance pay, or retirement benefits.

By-name personnel commitments made in the Contractor's proposal shall not be changed without the prior written approval of the State. Replacement of these personnel, if approved by the State, shall be with personnel of equal or greater ability and qualifications.

All personnel assigned by the Contractor to the contract shall be employees of the Contractor or a subcontractor, and shall be fully qualified to perform the work required herein. Personnel employed by the Contractor or a subcontractor to fulfill the terms of the contract shall remain under the sole direction and control of the Contractor or the subcontractor respectively.

With respect to its employees, the Contractor agrees to be solely responsible for the following:

1. Any and all pay, benefits, and employment taxes and/or other payroll withholding;
2. Any and all vehicles used by the Contractor's employees, including all insurance required by state law;
3. Damages incurred by Contractor's employees within the scope of their duties under the contract;
4. Maintaining Workers' Compensation and health insurance that complies with state and federal law and submitting any reports on such insurance to the extent required by governing law.
5. Determining the hours to be worked and the duties to be performed by the Contractor's employees; and,.
6. All claims on behalf of any person arising out of employment or alleged employment (including without limit claims of discrimination alleged against the Contractor, its officers, agents, or subcontractors or subcontractor's employees)

If the Contractor intends to utilize any subcontractor, the subcontractor's level of effort, tasks, and time allocation should be clearly defined in the bidder's proposal. The Contractor shall agree that it will not utilize any subcontractors not specifically included in its proposal in the performance of the contract without the prior written authorization of the State.

The State reserves the right to require the Contractor to reassign or remove from the project any Contractor or subcontractor employee.

Contractor shall insure that the terms and conditions contained in any contract with a subcontractor does not conflict with the terms and conditions of this contract.

The Contractor shall include a similar provision, for the protection of the State, in the contract with any subcontractor engaged to perform work on this contract.

B. EMPLOYEE WORK ELIGIBILITY STATUS

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
CKL			

The Contractor is required and hereby agrees to use a federal immigration verification system to determine the work eligibility status of employees physically performing services within the State of Nebraska. A federal immigration verification system means the electronic verification of the work authorization program authorized by the Illegal Immigration Reform and Immigrant Responsibility Act of 1996, 8 U.S.C. 1324a, known as the E-Verify Program, or an equivalent federal program designated by the United States Department of Homeland Security or other federal agency authorized to verify the work eligibility status of an employee.

If the Contractor is an individual or sole proprietorship, the following applies:

1. The Contractor must complete the United States Citizenship Attestation Form, available on the Department of Administrative Services website at http://das.nebraska.gov/materiel/purchasing.html.

   The completed United States Attestation Form should be submitted with the RFP response.

2. If the Contractor indicates on such attestation form that he or she is a qualified alien, the Contractor agrees to provide the US Citizenship and Immigration Services documentation required to verify the Contractor's lawful presence in the United States using the Systematic Alien Verification for Entitlements (SAVE) Program.

3. The Contractor understands and agrees that lawful presence in the United States is required and the Contractor may be disqualified or the contract terminated if such lawful presence cannot be verified as required by Neb. Rev. Stat. §4-108.

C. COMPLIANCE WITH CIVIL RIGHTS LAWS AND EQUAL OPPORTUNITY EMPLOYMENT / NONDISCRIMINATION (Statutory)

The Contractor shall comply with all applicable local, state, and federal statutes and regulations regarding civil rights laws and equal opportunity employment. The Nebraska Fair Employment Practice Act prohibits Contractors of the State of Nebraska, and their subcontractors, from discriminating against any employee or applicant for employment, with respect to hire, tenure, terms, conditions, compensation, or privileges of employment because of race, color, religion, sex, disability, marital status, or national origin (Neb. Rev. Stat. §48-1101 to 48-1125). The Contractor guarantees compliance with the Nebraska Fair Employment Practice Act, and breach of this provision shall be regarded as a material breach of contract. The Contractor shall insert a similar provision in all subcontracts for services to be covered by any contract resulting from this RFP.

D. COOPERATION WITH OTHER CONTRACTORS

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
CKL			

Contractor may be required to work with or in close proximity to other contractors or individuals that may be working on same or different projects. The Contractor shall agree to cooperate with such other contractors or individuals, and shall not commit or permit any act which may interfere with the performance of work by any other contractor or individual. Contractor is not required to compromise Contractor's intellectual property or proprietary information unless expressly required to do so by this contract.

E. PERMITS, REGULATIONS, LAWS

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
CKL			

The contract price shall include the cost of all royalties, licenses, permits, and approvals, whether arising from patents, trademarks, copyrights or otherwise, that are in any way involved in the contract. The Contractor shall obtain and pay for all royalties, licenses, and permits, and approvals necessary for the execution of the contract. The Contractor must guarantee that it has the full legal right to the materials, supplies, equipment, software, and other items used to execute this contract.

F. OWNERSHIP OF INFORMATION AND DATA / DELIVERABLES

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
CKL			

The State shall have the unlimited right to publish, duplicate, use, and disclose all information and data developed or obtained by the Contractor on behalf of the State pursuant to this contract.

The State shall own and hold exclusive title to any deliverable developed as a result of this contract. Contractor shall have no ownership interest or title, and shall not patent, license, or copyright, duplicate, transfer, sell, or exchange, the design, specifications, concept, or deliverable.

G. INSURANCE REQUIREMENTS

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
CKL			

The Contractor shall throughout the term of the contract maintain insurance as specified herein and provide the State a current Certificate of Insurance/Acord Form (COI) verifying the coverage. The Contractor shall not commence work on the contract until the insurance is in place. If Contractor subcontracts any portion of the contract the Contractor must, throughout the term of the contract, either:

1. Provide equivalent insurance for each subcontractor and provide a COI verifying the coverage for the subcontractor;
2. Require each subcontractor to have equivalent insurance and provide written notice to the State that the Contractor has verified that each subcontractor has the required coverage; or,
3. Provide the State with copies of each subcontractor's Certificate of Insurance evidencing the required coverage.

The Contractor shall not allow any subcontractor to commence work until the subcontractor has equivalent insurance. The failure of the State to require a COI, or the failure of the Contractor to provide a COI or require subcontractor insurance shall not limit, relieve, or decrease the liability of the Contractor hereunder.

In the event that any policy written on a claims-made basis terminates or is canceled during the term of the contract or within two (2) years of termination or expiration of the contract, the Contractor shall obtain an extended discovery or reporting period, or a new insurance policy, providing coverage required by this contract for the term of the contract and two (2) years following termination or expiration of the contract.

If by the terms of any insurance a mandatory deductible is required, or if the Contractor elects to increase the mandatory deductible amount, the Contractor shall be responsible for payment of the amount of the deductible in the event of a paid claim.

Notwithstanding any other clause in this contract, the State may recover up to the liability limits of the insurance policies required herein.

1. **WORKERS' COMPENSATION INSURANCE**
The Contractor shall take out and maintain during the life of this contract the statutory Workers' Compensation and Employer's Liability Insurance for all of the contactors' employees to be engaged in work on the project under this contract and, in case any such work is sublet, the Contractor shall require the subcontractor similarly to provide Worker's Compensation and Employer's Liability Insurance for all of the subcontractor's employees to be engaged in such work. This policy shall be written to meet the statutory requirements for the state in which the work is to be performed, including Occupational Disease. **The policy shall include a waiver of subrogation in favor of the State. The COI shall contain the mandatory COI subrogation waiver language found hereinafter**. The amounts of such insurance shall not be less than the limits stated hereinafter. For employees working in the State of Nebraska, the policy must be written by an entity authorized by the State of Nebraska Department of Insurance to write Workers' Compensation and Employer's Liability Insurance for Nebraska employees.

2. **COMMERCIAL GENERAL LIABILITY INSURANCE AND COMMERCIAL AUTOMOBILE LIABILITY INSURANCE**
The Contractor shall take out and maintain during the life of this contract such Commercial General Liability Insurance and Commercial Automobile Liability Insurance as shall protect Contractor and any subcontractor performing work covered by this contract from claims for damages for bodily injury, including death, as well as from claims for property damage, which may arise from operations under this contract, whether such operation be by the Contractor or by any subcontractor or by anyone directly or indirectly employed by either of them, and the amounts of such insurance shall not be less than limits stated hereinafter.

   The Commercial General Liability Insurance shall be written on an **occurrence basis**, and provide Premises/Operations, Products/Completed Operations, Independent Contractors, Personal Injury, and Contractual Liability coverage. **The policy shall include the State, and others as required by the contract documents, as Additional Insured(s). This policy shall be primary, and any insurance or self-insurance carried by the State shall be considered secondary and non-contributory. The COI shall contain the mandatory COI liability waiver language found hereinafter.** The Commercial Automobile Liability Insurance shall be written to cover all Owned, Non-owned, and Hired vehicles.

REQUIRED INSURANCE COVERAGE	
COMMERCIAL GENERAL LIABILITY	
General Aggregate	$2,000,000
Products/Completed Operations Aggregate	$2,000,000
Personal/Advertising Injury	$1,000,000 per occurrence
Bodily Injury/Property Damage	$1,000,000 per occurrence
Medical Payments	$10,000 any one person
Damage to Rented Premises (Fire)	$300,000 each occurrence
Contractual	Included
Independent Contractors	Included
If higher limits are required, the Umbrella/Excess Liability limits are allowed to satisfy the higher limit.	
WORKER'S COMPENSATION	
Employers Liability Limits	$500K/$500K/$500K
Statutory Limits- All States	Statutory - State of Nebraska
Voluntary Compensation	Statutory
COMMERCIAL AUTOMOBILE LIABILITY	
Bodily Injury/Property Damage	$1,000,000 combined single limit
Include All Owned, Hired & Non-Owned Automobile liability	Included
Motor Carrier Act Endorsement	Where Applicable
UMBRELLA/EXCESS LIABILITY	
Over Primary Insurance	$5,000,000 per occurrence
PROFESSIONAL LIABILITY	
All Other Professional Liability (Errors & Omissions)	$1,000,000 Per Claim / Aggregate
COMMERCIAL CRIME	
Crime/Employee Dishonesty Including 3rd Party Fidelity	$1,000,000
CYBER LIABILITY	
Breach of Privacy, Security Breach, Denial of Service, Remediation, Fines and Penalties	$5,000,000
MANDATORY COI SUBROGATION WAIVER LANGUAGE	
"Workers' Compensation policy shall include a waiver of subrogation in favor of the State of Nebraska."	
MANDATORY COI LIABILITY WAIVER LANGUAGE	
"Commercial General Liability & Commercial Automobile Liability policies shall name the State of Nebraska as an Additional Insured and the policies shall be primary and any insurance or self-insurance carried by the State shall be considered secondary and non-contributory as additionally insured."	

If the mandatory COI subrogation waiver language or mandatory COI liability waiver language on the COI states that the waiver is subject to, condition upon, or otherwise limit by the insurance policy, a copy of the relevant sections of the policy must be submitted with the COI so the State can review the limitations imposed by the insurance policy.

3. EVIDENCE OF COVERAGE

The Contractor shall furnish the Contract Manager, with a certificate of insurance coverage complying with the above requirements prior to beginning work at:

Department of Health and Human Service
Division of Children and Family Services
Attn: CFS Contract Administrator
301 Centennial Mall S., 3rd Floor
Lincoln, NE 68509

These certificates or the cover sheet shall reference the RFP number, and the certificates shall include the name of the company, policy numbers, effective dates, dates of expiration, and amounts and types of coverage afforded. If the State is damaged by the failure of the Contractor to maintain such insurance, then the Contractor shall be responsible for all reasonable costs properly attributable thereto.

Reasonable notice of cancellation of any required insurance policy must be submitted to the contract manager as listed above when issued and a new coverage binder shall be submitted immediately to ensure no break in coverage.

4. DEVIATIONS

The insurance requirements are subject to limited negotiation. Negotiation typically includes, but is not necessarily limited to, the correct type of coverage, necessity for Workers' Compensation, and the type of automobile coverage carried by the Contractor.

H. ANTITRUST

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
CKL			

The Contractor hereby assigns to the State any and all claims for overcharges as to goods and/or services provided in connection with this contract resulting from antitrust violations which arise under antitrust laws of the United States and the antitrust laws of the State.

I. CONFLICT OF INTEREST

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
CKL			

By submitting a proposal, bidder certifies that there does not now exist a relationship between the bidder and any person or entity which is or gives the appearance of a conflict of interest related to this RFP or project.

The bidder certifies that it shall not take any action or acquire any interest, either directly or indirectly, which will conflict in any manner or degree with the performance of its services hereunder or which creates an actual or an appearance of conflict of interest.

The bidder certifies that it will not knowingly employ any individual known by bidder to have a conflict of interest.

The Parties shall not knowingly, for a period of two years after execution of the contract, recruit or employ any employee or agent of the other Party who has worked on the RFP or project, or who had any influence on decisions affecting the RFP or project.

J. SITE RULES AND REGULATIONS

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
CKL			

The Contractor shall use its best efforts to ensure that its employees, agents, and subcontractors comply with site rules and regulations while on State premises. If the Contractor must perform on-site work outside of the daily operational hours set forth by the State, it must make arrangements with the State to ensure access to the facility and the equipment has been arranged. No additional payment will be made by the State on the basis of lack of access, unless the State fails to provide access as agreed to in writing between the State and the Contractor.

K. ADVERTISING

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
CKL			

The Contractor agrees not to refer to the contract award in advertising in such a manner as to state or imply that the company or its services are endorsed or preferred by the State. Any publicity releases pertaining to the project shall not be issued without prior written approval from the State.

L. NEBRASKA TECHNOLOGY ACCESS STANDARDS (Statutory)

Contractor shall review the Nebraska Technology Access Standards, found at http://nitc.nebraska.gov/standards/2-201.html and ensure that products and/or services provided under the contract are in compliance or will comply with the applicable standards to the greatest degree possible. In the event such standards change during the Contractor's performance, the State may create an amendment to the contract to request the contract comply with the changed standard at a cost mutually acceptable to the parties.

M. DISASTER RECOVERY/BACK UP PLAN

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
CKL			

The Contractor shall have a disaster recovery and back-up plan, of which a copy should be provided upon request to the State, which includes, but is not limited to equipment, personnel, facilities, and transportation, in order to continue services as specified under the specifications in the contract in the event of a disaster.

N. DRUG POLICY

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
CKL			

Contractor certifies it maintains a drug free work place environment to ensure worker safety and workplace integrity. Contractor agrees to provide a copy of its drug free workplace policy at any time upon request by the State.

O. WARRANTY

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within Solicitation Response (Initial)	NOTES/COMMENTS:
CKL			

Despite any clause to the contrary, the Contractor represents and warrants that its services hereunder shall be performed by competent personnel and shall be of professional quality consistent with generally accepted industry standards for the performance of such services and shall comply in all respects with the requirements of this Agreement. For any breach of this warranty, the Contractor shall, for a period of ninety (90) days from performance of the service, perform the services again, at no cost to Customer, or if Contractor is unable to perform the services as warranted, Contractor shall reimburse Customer the fees paid to Contractor for the unsatisfactory services. The rights and remedies of the parties under this warranty are in addition to any other rights and remedies of the parties provided by law or equity, including, without limitation actual damages, and, as applicable and awarded under the law, to a prevailing party, reasonable attorneys' fees and costs.

IV. PAYMENT

A. PROHIBITION AGAINST ADVANCE PAYMENT (Statutory)

Neb. Rev. Stat. §§81-2403 states, "no goods or services shall be deemed to be received by an agency until all such goods or services are completely delivered and finally accepted by the agency."

B. TAXES (Statutory)

The State is not required to pay taxes and assumes no such liability as a result of this solicitation. Any property tax payable on the Contractor's equipment which may be installed in a state-owned facility is the responsibility of the Contractor.

C. INVOICES

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
CKL			

Invoices for payments must be submitted by the Contractor to the agency requesting the services with sufficient detail to support payment. Invoices shall include at a minimum Contractor's name, address, contract number, invoice date, description of and date of service. The terms and conditions included in the Contractor's invoice shall be deemed to be solely for the convenience of the parties. No terms or conditions of any such invoice shall be binding upon the State, and no action by the State, including without limitation the payment of any such invoice in whole or in part, shall be construed as binding or estopping the State with respect to any such term or condition, unless the invoice term or condition has been previously agreed to by the State as an amendment to the contract.

D. INSPECTION AND APPROVAL

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
CKL			

Final inspection and approval of all work required under the contract shall be performed by the designated State officials.

E. PAYMENT

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
CKL			

State will render payment to Contractor when the terms and conditions of the contract and specifications have been satisfactorily completed on the part of the Contractor as solely determined by the State. (Neb. Rev. Stat. §73-506(1)) Payment will be made by the responsible agency in compliance with the State of Nebraska Prompt Payment Act (See Neb. Rev. Stat. §81-2401 through 81-2408). The State may require the Contractor to accept payment by electronic means such as ACH deposit. In no event shall the State be responsible or liable to pay for any services provided by the Contractor prior to the Effective Date of the contract, and the Contractor hereby waives any claim or cause of action for any such services.

F. LATE PAYMENT (Statutory)

The Contractor may charge the responsible agency interest for late payment in compliance with the State of Nebraska Prompt Payment Act (See Neb. Rev. Stat. §81-2401 through 81-2408).

G. SUBJECT TO FUNDING / FUNDING OUT CLAUSE FOR LOSS OF APPROPRIATIONS

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
CKL			

The State's obligation to pay amounts due on the contract for a fiscal years following the current fiscal year is contingent upon legislative appropriation of funds. Should said funds not be appropriated, the State may terminate the contract with respect to those payments for the fiscal year(s) for which such funds are not appropriated. The State will give the Contractor written notice thirty (30) calendar days prior to the effective date of termination. All obligations of the State to make payments after the termination date will cease. The Contractor shall be entitled to receive just and equitable compensation for any authorized work which has been satisfactorily completed as of the termination date. In no event shall the Contractor be paid for a loss of anticipated profit.

H. RIGHT TO AUDIT (First Paragraph is Statutory)

The State shall have the right to audit the Contractor's performance of this contract upon a 30 days' written notice. Contractor shall utilize generally accepted accounting principles, and shall maintain the accounting records, and other records and information relevant to the contract (Information) to enable the State to audit the contract. The State may audit and the Contractor shall maintain, the Information during the term of the contract and for a period of five (5) years after the completion of this contract or until all issues or litigation are resolved, whichever is later. The Contractor shall make the Information available to the State at Contractor's place of business or a location acceptable to both Parties during normal business hours. If this is not practical or the Contractor so elects, the Contractor may provide electronic or paper copies of the Information. The State reserves the right to examine, make copies of, and take notes on any Information relevant to this contract, regardless of the form or the Information, how it is stored, or who possesses the Information. Under no circumstance will the Contractor be required to create or maintain documents not kept in the ordinary course of Contractor's business operations, nor will Contractor be required to disclose any information, including but not limited to product cost data, which is confidential or proprietary to Contractor.

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
CKL			

The Parties shall pay their own costs of the audit unless the audit finds a previously undisclosed overpayment by the State. If a previously undisclosed overpayment exceeds one-half of one percent (.5%) of the total contract billings, or if fraud, material misrepresentations, or non-performance is discovered on the part of the Contractor, the Contractor shall reimburse the State for the total costs of the audit. Overpayments and audit costs owed to the State shall be paid within ninety days of written notice of the claim. The Contractor agrees to correct any material weaknesses or condition found as a result of the audit.

5. TECHNICAL RESPONSE APPENDIX A: CROSSWALK OF BUSINESS REQUIREMENTS TO API FRAMEWORK

In Table A.1 below, we have provided a crosswalk of the business requirements enumerated in RFP Attachment B: Business Requirements Matrix to the primary Assessment, Planning, and Implementation Framework domain (as depicted in Figure 6 in Section 3.5.1.1) that they will be addressed by. (The domain name is included in italicized font in gray, shaded sub-header rows.) Applying this framework to CFS' business requirements will help ensure that each requirement is reviewed—and that an improvement strategy is developed—in a systematic and thorough manner across CFS' child welfare program.

Additional considerations include:

- Business requirements that are general in nature, that is, they apply to the overall approach to delivery of the services being requested from the bidder, are categorized as "General Requirements" that are not specifically addressed by a domain. They are, however, addressed by the supporting disciplines of project management and business process redesign and improvement.
- Although business requirements are categorized under a single primary domain for simplicity, aspects of a requirement may cross several domains.
- No business requirements were specifically mapped to the "Transformation" and "Sequencing and Jurisdictional Considerations" domains. Nonetheless, we will consider both of these domains in our assessment, planning, and implementation activities as they are essential to the success and sustainability of CFS' improvement initiative.

Table A.1: Crosswalk of RFP Business Requirements to API Framework

#	Description
General Requirements	
PS-1	The bidder should describe what methodology will be used to review and evaluate the way the Child Welfare system processes currently function from start to finish.
PS-4	The bidder should describe how it will develop a comprehensive review that will identify strengths and best practices of Nebraska's child welfare system.

#	Description
PS-5	The bidder should describe how it will develop a comprehensive review to identify areas in need of positive improvement, describing the effect of the "as is" challenge on clients, employees and stakeholders.
PS-6	The bidder should describe how it will develop a comprehensive review that will recommend an improvement strategy ("to-be) with specific recommendations to correct the problems/issues and to streamline procedures, case progression, and workflow along with rationale about how and why this improvement is needed.
PS-7	The bidder should describe how it will develop a comprehensive review that will identify the cost of present practices and the benefits to be derived through implementation of the recommendations.
PS-42	The bidder should describe how it will develop a comprehensive review that will make recommendations on improvement to the Child Welfare system processes, to include technology, training improvements, or other tools to assist CFS workers in state office and regional field.
Practices, Service Array, and Policy	
PS-10	a. Reunification in 12 months has been a long-standing area of underperformance as measured by the Child and Family Services Review (CFSR) Round 2 and Round 3 Data Indicators.as required by Administration for Children and Families (ACF).
PS-11	b. Insufficient engagement and subsequent needs assessment of non-custodial parents/caregivers, relatives and kin reduce options for safe and timely permanency.
PS-12	c. Failure to establish a permanency goal based on current case conditions and resistance by the courts to establish and pursue concurrent permanency goals, e.g., adoption, for youth 15/22 out of home.
PS-13	d. Infrequent utilization of Bridge custody order.
PS-14	e. Court's resistance to CFS's recommended action based on Structured Decision Making® (SDM) reunification assessment.
PS-15	f. Caseloads consistently at or above Child Welfare League of America (CWLA) standards.
PS-16	g. Inadequate participation of all family members, relatives, foster parents, informal supports, etc., at family team meetings inhibit case progression.
PS-17	h. Case manager attrition rate creates new case assignments and case familiarity inhibits the rate of case progression.
PS-18	i. Inadequate documentation and/or service provision in Indian Child Welfare Act (ICWA) cases

#	Description
PS-19	j. Identifying, locating, and involving fathers for support and possible placement for their children.
PS-24	The bidder should describe how it will develop a comprehensive review that will assess opportunity for increased efficiency in referral, authorization and billing per family to include explanation of benefit to family.
PS-25	The bidder should describe how it will develop a comprehensive review that will assess and identify areas of improvement to 24 hours services in child welfare to include hotline, on call system response by child welfare staff and providers
PS-26	The bidder should describe how it will develop a comprehensive review that will assess opportunities for increased efficiency for a reporting system for abuse and neglect allegations.
PS-29	The bidder should describe how it will develop a comprehensive review that will assess the reasons relatives' homes are not being licensed and how that can be improved.
PS-30	The bidder should describe how it will develop a comprehensive review on how to increase effectiveness of the current placement matching system for foster homes within the foster care system.
PS-31	The bidder should describe how it will develop a comprehensive review that will assess the access and utilization to community resources for issues relating to poverty such as ACCESSNebraska, community food pantries, shelters etc.
PS-32	The bidder should describe how it will develop a comprehensive review that will work with schools and medical communities to access resources through community or public assistance programs such as Medicaid/MCO or child care.
PS-33	The bidder should describe how it will develop a comprehensive review that will assist with the improvement of the 24/7 crisis response system that addresses physical and behavioral needs of individuals with immediate access to resources in local communities.
PS-35	The bidder should describe a comprehensive review to address disproportionate minority representation within the child welfare system.
PS-36	The bidder should describe how it will develop a comprehensive review that will develop strategies to implement family voice and choice in service provision and identified service providers.
PO-1	Assess how to safely achieve permanency in a timely manner;
PO-3	Assess family engagement, assessments where applicable, and CFS case management quality of contacts with children, parents/caregivers, relatives and kin;
PO-5	Assess whether there exists an effective array of individualized services and foster homes;

#	Description
PO-6	Assess if there exists an effective array of services and foster homes, whether those services and foster homes are available statewide and individualized for each family's needs;
PO-8	Assess how to deliver economic and community supports for prevention services.
Data and Evidence	
PS-23	The bidder should describe how it will develop a comprehensive review that will assess the issues and challenges with current technology and make recommendations on how technology could improve efficiency.
PS-27	The bidder should describe how it will develop a comprehensive review that will assess the current child welfare information system. Include any opportunities to share data and reporting with court systems.
PS-34	The bidder should describe how it will develop a comprehensive review that will identify well-supported Evidence-Based Practices (EBP) with a plan for funding implementation, validity and adherence.
PS-39	The bidder should describe how it will provide recommendations for a framework for quality assurance in child welfare.
Administrative and Fiscal	
PS-8	The bidder should describe how it will develop a comprehensive review that will identify areas to maximize funding resources (IV-E funding, etc.).
PS-22	The bidder should describe how it will develop a comprehensive review to assess a triage funding authority utilizing all federal funding opportunities within CFS.
PS-28	The bidder should describe how it will develop a comprehensive review that will assess the service array and the connection to Families First Prevention Services Act and the claiming of IV-E funding.
PS-37	The bidder should describe how it will develop a comprehensive review that will develop a strategic plan to ensure full compliance with Family First Preservation Services Act and Comprehensive Addiction and Recovery Act of 2016. Plan must connect to the Children and Family Services Plan (CFSP), the Annual Progress Services Report (APSR) and any Program Improvement Plans (PIP). Documents can be found here: http://dhhs.ne.gov/Pages/Child-Welfare.aspx.
PS-38	The bidder should describe how it will develop a comprehensive review of a system of performance-based contracting.
PO-7	Assess how to effectively exit the IV-E waiver on October 1, 2019 and move directly into the Family

#	Description
	First Prevention Services Act; and
Implementation Capacity and Strategy	
PS-2	The bidder should describe how it will develop a comprehensive review that will consider the roles that each position plays in the business process and consider any changes in staffing as a result.
PS-3	The bidder should describe how it will develop a comprehensive review that will obtain stakeholder consideration on improvement processes.
PS-9	The bidder should describe how it will develop an implementation plan that identifies immediate and longer term changes, timelines, required resources to execute the change, and key communication messages to facilitate the shift to an improved way of working.
PS-20	The bidder should describe how it will develop a comprehensive review that will assess the need for Supervisory Training.
PS-21	The bidder should describe how it will develop a comprehensive review that will assess and identify online training opportunities with competency-based testing modules for child welfare staff, foster parents, and providers such as mandatory abuse and neglect reporting.
PS-40	The bidder should describe how it will develop a comprehensive review that will identify strategies for a career ladder and advancement for service providers and case managers in the child welfare system
PS-41	The bidder should describe how it will develop a comprehensive review that will create a business process map that outlines the current structure of CFS and the intersection with relevant support divisions' operations; including state office staff extending into regional field staff.
PO-2	Assess Nebraska's case management case staffing models and Supervisor training for staff development and case oversight;
PO-4	Assess stability of workforce of child welfare case management;

6. TECHNICAL RESPONSE APPENDIX B: CROSSWALK OF BUSINESS REQUIREMENTS TO INFORMATION GATHERING METHODS

In Table B.1 below, we have provided a crosswalk of the business requirements enumerated in RFP Attachment B: Business Requirements Matrix to the primary methods (as described in Section 3.5.1) that we may use to gather information and assess the business requirements. We will use this crosswalk as a guide for activities to help ensure that each requirement is reviewed—and that an improvement strategy is developed—in a systematic and thorough manner across CFS' child welfare program.

Table B.1: Crosswalk of RFP Business Requirements to Primary Information Gathering Methods

#	Description	Information Gathering Methods								
		Best Practice Research	Data Analysis	Document & Policy Review	Web Survey	Listening Sessions	Direct Observation	Process Mapping	Focus Groups	Targeted Interviews & Meetings
PS-1	The bidder should describe what methodology will be used to review and evaluate the way the Child Welfare system processes currently function from start to finish.	X	X	X	X	X	X	X	X	X
PS-2	The bidder should describe how it will develop a comprehensive review that will consider the roles that each position plays in the business process and consider any changes in staffing as a result.	X		X	X	X	X	X		X
PS-3	The bidder should describe how it will develop a comprehensive review that will obtain stakeholder consideration on improvement processes.				X	X	X	X	X	X
PS-4	The bidder should describe how it will develop a comprehensive review that will identify strengths and best practices of Nebraska's child welfare system.	X	X	X	X	X	X	X	X	X

#	Description	Information Gathering Methods								
		Best Practice Research	Data Analysis	Document & Policy Review	Web Survey	Listening Sessions	Direct Observation	Process Mapping	Focus Groups	Targeted Interviews & Meetings
PS-5	The bidder should describe how it will develop a comprehensive review to identify areas in need of positive improvement, describing the effect of the "as is" challenge on clients, employees and stakeholders.	X	X	X	X	X	X	X	X	X
PS-6	The bidder should describe how it will develop a comprehensive review that will recommend an improvement strategy ("to-be) with specific recommendations to correct the problems/issues and to streamline procedures, case progression, and workflow along with rationale about how and why this improvement is needed.	X	X	X	X	X	X	X	X	X
PS-7	The bidder should describe how it will develop a comprehensive review that will identify the cost of present practices and the benefits to be derived through implementation of the recommendations.	X	X	X	X	X	X	X	X	X
PS-8	The bidder should describe how it will develop a comprehensive review that will identify areas to maximize funding resources (IV-E funding, etc.).	X	X	X						X
PS-9	The bidder should describe how it will develop an implementation plan that identifies immediate and longer term changes, timelines, required resources to execute the change, and key communication messages to facilitate the shift to an improved way of	*Not applicable; requirement applies to implementation planning in Task 3, but will be informed by information gathered through all of these methods.*								

#	Description	Best Practice Research	Data Analysis	Document & Policy Review	Web Survey	Listening Sessions	Direct Observation	Process Mapping	Focus Groups	Targeted Interviews & Meetings
		Information Gathering Methods								
	working.									
PS-10	The bidder should describe how it will develop a comprehensive review that will assess the following areas for improvement strategies in the following areas where Nebraska is currently and historically been challenged by our inability to safely achieve permanency in a timely manner. Some of the contributing factors include but are not limited to: a. Reunification in 12 months has been a long-standing area of underperformance as measured by the Child and Family Services Review (CFSR) Round 2 and Round 3 Data Indicators.as required by Administration for Children and Families (ACF).	X	X	X	X	X	X	X	X	X
PS-11	b. Insufficient engagement and subsequent needs assessment of non-custodial parents/caregivers, relatives and kin reduce options for safe and timely permanency.	X	X	X				X		X
PS-12	c. Failure to establish a permanency goal based on current case conditions and resistance by the courts to establish and pursue concurrent permanency goals, e.g., adoption, for youth 15/22 out of home.	X	X	X		X		X		X
PS-13	d. Infrequent utilization of Bridge custody order.	X	X	X				X		X

#	Description	Information Gathering Methods								
		Best Practice Research	Data Analysis	Document & Policy Review	Web Survey	Listening Sessions	Direct Observation	Process Mapping	Focus Groups	Targeted Interviews & Meetings
PS-14	e. Court's resistance to CFS's recommended action based on Structured Decision Making® (SDM) reunification assessment.	X	X	X				X		X
PS-15	f. Caseloads consistently at or above Child Welfare League of America (CWLA) standards.	X	X	X	X	X		X		X
PS-16	g. Inadequate participation of all family members, relatives, foster parents, informal supports, etc., at family team meetings inhibit case progression.	X	X	X	X	X		X	X	X
PS-17	h. Case manager attrition rate creates new case assignments and case familiarity inhibits the rate of case progression.	X	X	X	X	X		X		X
PS-18	i. Inadequate documentation and/or service provision in Indian Child Welfare Act (ICWA) cases	X	X	X		X		X		X
PS-19	j. Identifying, locating, and involving fathers for support and possible placement for their children.	X	X	X		X		X	X	X
PS-20	The bidder should describe how it will develop a comprehensive review that will assess the need for Supervisory Training.	X	X	X	X	X	X			X
PS-21	The bidder should describe how it will develop a comprehensive review that will assess and identify online training opportunities with competency-based testing modules for child welfare staff, foster parents,	X		X	X	X				X

#	Description	Information Gathering Methods: Best Practice Research	Data Analysis	Document & Policy Review	Web Survey	Listening Sessions	Direct Observation	Process Mapping	Focus Groups	Targeted Interviews & Meetings
	and providers such as mandatory abuse and neglect reporting.									
PS-22	The bidder should describe how it will develop a comprehensive review to assess a triage funding authority utilizing all federal funding opportunities within CFS.	X		X						X
PS-23	The bidder should describe how it will develop a comprehensive review that will assess the issues and challenges with current technology and make recommendations on how technology could improve efficiency.	X			X	X	X	X		X
PS-24	The bidder should describe how it will develop a comprehensive review that will assess opportunity for increased efficiency in referral, authorization and billing per family to include explanation of benefit to family.	X	X	X				X		X
PS-25	The bidder should describe how it will develop a comprehensive review that will assess and identify areas of improvement to 24 hours services in child welfare to include hotline, on call system response by child welfare staff and providers		X	X	X			X		
PS-26	The bidder should describe how it will develop a comprehensive review that will assess opportunities for increased efficiency for a reporting system for abuse	X	X	X				X	X	X

#	Description	Information Gathering Methods								
		Best Practice Research	Data Analysis	Document & Policy Review	Web Survey	Listening Sessions	Direct Observation	Process Mapping	Focus Groups	Targeted Interviews & Meetings
	and neglect allegations.									
PS-27	The bidder should describe how it will develop a comprehensive review that will assess the current child welfare information system. Include any opportunities to share data and reporting with court systems.	X			X	X	X	X		X
PS-28	The bidder should describe how it will develop a comprehensive review that will assess the service array and the connection to Families First Prevention Services Act and the claiming of IV-E funding.	X	X	X						X
PS-29	The bidder should describe how it will develop a comprehensive review that will assess the reasons relatives' homes are not being licensed and how that can be improved.	X		X				X	X	X
PS-30	The bidder should describe how it will develop a comprehensive review on how to increase effectiveness of the current placement matching system for foster homes within the foster care system.	X	X	X				X	X	X
PS-31	The bidder should describe how it will develop a comprehensive review that will assess the access and utilization to community resources for issues relating to poverty such as ACCESSNebraska, community food pantries, shelters etc.	X		X				X	X	X

#	Description	Information Gathering Methods								
		Best Practice Research	Data Analysis	Document & Policy Review	Web Survey	Listening Sessions	Direct Observation	Process Mapping	Focus Groups	Targeted Interviews & Meetings
PS-32	The bidder should describe how it will develop a comprehensive review that will work with schools and medical communities to access resources through community or public assistance programs such as Medicaid/MCO or child care.	X		X				X	X	X
PS-33	The bidder should describe how it will develop a comprehensive review that will assist with the improvement of the 24/7 crisis response system that addresses physical and behavioral needs of individuals with immediate access to resources in local communities.	X	X	X					X	X
PS-34	The bidder should describe how it will develop a comprehensive review that will identify well-supported Evidence-Based Practices (EBP) with a plan for funding implementation, validity and adherence.	X	X	X	X	X	X		X	X
PS-35	The bidder should describe a comprehensive review to address disproportionate minority representation within the child welfare system.	X	X	X						X
PS-36	The bidder should describe how it will develop a comprehensive review that will develop strategies to implement family voice and choice in service provision and identified service providers.	X	X	X				X	X	X

#	Description	Best Practice Research	Data Analysis	Document & Policy Review	Web Survey	Listening Sessions	Direct Observation	Process Mapping	Focus Groups	Targeted Interviews & Meetings
		Information Gathering Methods								
PS-37	The bidder should describe how it will develop a comprehensive review that will develop a strategic plan to ensure full compliance with Family First Preservation Services Act and Comprehensive Addiction and Recovery Act of 2016. Plan must connect to the Children and Family Services Plan (CFSP), the Annual Progress Services Report (APSR) and any Program Improvement Plans (PIP). Documents can be found here: http://dhhs.ne.gov/Pages/Child-Welfare.aspx.	X	X	X	X	X	X	X	X	X
PS-38	The bidder should describe how it will develop a comprehensive review of a system of performance-based contracting.	X	X	X						X
PS-39	The bidder should describe how it will provide recommendations for a framework for quality assurance in child welfare.	X	X	X				X		X
PS-40	The bidder should describe how it will develop a comprehensive review that will identify strategies for a career ladder and advancement for service providers and case managers in the child welfare system	X		X	X	X			X	X
PS-41	The bidder should describe how it will develop a comprehensive review that will create a business process map that outlines the current structure of CFS	X						X		X

#	Description	Best Practice Research	Data Analysis	Document & Policy Review	Web Survey	Listening Sessions	Direct Observation	Process Mapping	Focus Groups	Targeted Interviews & Meetings
		Information Gathering Methods								
	and the intersection with relevant support divisions' operations; including state office staff extending into regional field staff.									
PS-42	The bidder should describe how it will develop a comprehensive review that will make recommendations on improvement to the Child Welfare system processes, to include technology, training improvements, or other tools to assist CFS workers in state office and regional field.	X	X	X	X	X	X	X	X	X
PO-1	Assess how to safely achieve permanency in a timely manner;	X	X	X				X	X	X
PO-2	Assess Nebraska's case management case staffing models and Supervisor training for staff development and case oversight;	X	X	X	X	X				X
PO-3	Assess family engagement, assessments where applicable, and CFS case management quality of contacts with children, parents/caregivers, relatives and kin;	X	X	X				X	X	X
PO-4	Assess stability of workforce of child welfare case management;	X	X	X		X				X
PO-5	Assess whether there exists an effective array of individualized services and foster homes;	X	X	X	X	X			X	X

#	Description	Best Practice Research	Data Analysis	Document & Policy Review	Web Survey	Listening Sessions	Direct Observation	Process Mapping	Focus Groups	Targeted Interviews & Meetings
		Information Gathering Methods								
PO-6	Assess if there exists an effective array of services and foster homes, whether those services and foster homes are available statewide and individualized for each family's needs;	X	X	X		X			X	X
PO-7	Assess how to effectively exit the IV-E waiver on October 1, 2019 and move directly into the Family First Prevention Services Act; and	X		X						X
PO-8	Assess how to deliver economic and community supports for prevention services.	X		X	X	X			X	X

7. TECHNICAL RESPONSE APPENDIX C: CROSSWALK OF BUSINESS REQUIREMENTS TO NHSIA PROCESSES

In Table C.1 below, we have provided a crosswalk of the business requirements enumerated in RFP Attachment B: Business Requirements Matrix to potential NHSIA processes (as described in Section 3.5.1.3) that the business requirement may be associated with and, therefore, the process by which it may be addressed during business process mapping sessions. If CFS prefers to use an alternative business process naming convention, we will develop a similar crosswalk during our assessment to guide our business process mapping efforts, helping ensure that each requirement is reviewed—and that an improvement strategy is developed—in a systematic and thorough manner across CFS' child welfare program.

Considerations include:

- Individual requirements may be assessed through business process mapping *and* other information gathering methods, as identified in Table B.1 in Appendix B. In Table C.1 below, these requirements have an NHSIA business process identification number and name (for example, SM2: Manage Case Information) listed.
- Individual requirements may be primarily assessed through other information gathering methods, as identified in Table B.1 in Appendix B. That is, business process mapping is not the primary method through which the requirement will be assessed. However, aspects of these requirements may still be touched upon through business process mapping, and information gathered in business process mapping sessions will inform recommendations for the requirements. In Table C.1 below, these requirements are marked as "Not Applicable," followed by the framework domain they are included in. Some requirements will also be addressed as part of all business processes addressed, such as reviewing issues and challenges with current technology.
- Requirements related to the bidder's general approach and methodology are marked as "Not Applicable (General Requirement)".

Table C.1: Crosswalk of RFP Business Requirements to NHSIA Processes

#	Description	NHSIA Process
PS-1	The bidder should describe what methodology will be used to review and evaluate the way the Child Welfare system processes currently function from start to finish.	Not Applicable (General Requirement)
PS-2	The bidder should describe how it will develop a comprehensive review that will consider the roles that each position plays in the business process and consider any changes in staffing as a result.	Not Applicable (Implementation Capacity and Strategy Requirement)
PS-3	The bidder should describe how it will develop a comprehensive review that will obtain stakeholder consideration on improvement processes.	Not Applicable (Implementation Capacity and Strategy Requirement)
PS-4	The bidder should describe how it will develop a comprehensive review that will identify strengths and best practices of Nebraska's child welfare system.	Not Applicable (General Requirement)
PS-5	The bidder should describe how it will develop a comprehensive review to identify areas in need of positive improvement, describing the effect of the "as is" challenge on clients, employees and stakeholders.	Not Applicable (General Requirement)
PS-6	The bidder should describe how it will develop a comprehensive review that will recommend an improvement strategy ("to-be) with specific recommendations to correct the problems/issues and to streamline procedures, case progression, and workflow along with rationale about how and why this improvement is needed.	Not Applicable (General Requirement)
PS-7	The bidder should describe how it will develop a comprehensive review that will identify the cost of present practices and the benefits to be derived through implementation of the recommendations.	Not Applicable (General Requirement)
PS-8	The bidder should describe how it will develop a comprehensive review that will identify areas to maximize funding resources (IV-E funding, etc.).	Not Applicable (Administrative and Fiscal Requirement)
PS-9	The bidder should describe how it will develop an implementation plan that identifies immediate and longer term changes, timelines, required resources to execute the change, and key communication messages to facilitate the shift to an improved way of working.	Not Applicable (Implementation Capacity and Strategy Requirement)

#	Description	NHSIA Process
PS-10	The bidder should describe how it will develop a comprehensive review that will assess the following areas for improvement strategies in the following areas where Nebraska is currently and historically been challenged by our inability to **safely achieve permanency** in a timely manner. Some of the contributing factors include but are not limited to: a. Reunification in 12 months has been a long-standing area of underperformance as measured by the Child and Family Services Review (CFSR) Round 2 and Round 3 Data Indicators, as required by Administration for Children and Families (ACF).	SM6: Develop Case Plan (Goals, Methods, and Outcomes) SM8: Service Arrangement (Referral, Placement) SM9: Manage and Monitor Client and Outcomes
PS-11	b. Insufficient engagement and subsequent needs assessment of non-custodial parents/caregivers, relatives and kin reduce options for safe and timely permanency.	CM6: Manage Client Communications SM5: Screening and Assessment SM6: Develop Case Plan (Goals, Methods, and Outcomes) SM8: Service Arrangement (Referral, Placement) SM9: Manage and Monitor Client and Outcomes
PS-12	c. Failure to establish a permanency goal based on current case conditions and resistance by the courts to establish and pursue concurrent permanency goals, e.g., adoption, for youth 15/22 out of home.	SM5: Screening and Assessment SM6: Develop Case Plan (Goals, Methods, and Outcomes)
PS-13	d. Infrequent utilization of Bridge custody order.	SM10: Cross-Agency Case Coordination
PS-14	e. Court's resistance to CFS's recommended action based on Structured Decision Making® (SDM) reunification assessment.	SM5: Screening and Assessment
PS-15	f. Caseloads consistently at or above Child Welfare League of America (CWLA) standards.	OM6: Manage Case Workload
PS-16	g. Inadequate participation of all family members, relatives, foster parents, informal supports, etc., at family team meetings inhibit case progression.	CM6: Manage Client Communications SM9: Manage and Monitor Client and Outcomes

#	Description	NHSIA Process
PS-17	h. Case manager attrition rate creates new case assignments and case familiarity inhibits the rate of case progression.	OM6: Manage Case Workload SM2: Manage Case Information
PS-18	i. Inadequate documentation and/or service provision in Indian Child Welfare Act (ICWA) cases	SM2: Manage Case Information SM13: Approve Service, Level of Service
PS-19	j. Identifying, locating, and involving fathers for support and possible placement for their children.	CM6: Manage Client Communications SM6: Develop Case Plan (Goals, Methods, and Outcomes) SM8: Service Arrangement (Referral, Placement)
PS-20	The bidder should describe how it will develop a comprehensive review that will assess the need for Supervisory Training.	Not Applicable (Implementation Capacity and Strategy Requirement)
PS-21	The bidder should describe how it will develop a comprehensive review that will assess and identify online training opportunities with competency-based testing modules for child welfare staff, foster parents, and providers such as mandatory abuse and neglect reporting.	Not Applicable (Implementation Capacity and Strategy Requirement)
PS-22	The bidder should describe how it will develop a comprehensive review to assess a triage funding authority utilizing all federal funding opportunities within CFS.	Not Applicable (Administrative and Fiscal Requirement)
PS-23	The bidder should describe how it will develop a comprehensive review that will assess the issues and challenges with current technology and make recommendations on how technology could improve efficiency.	Not Applicable (Data and Evidence Requirement)
PS-24	The bidder should describe how it will develop a comprehensive review that will assess opportunity for increased efficiency in referral, authorization and billing per family to include explanation of benefit to family.	CM6: Manage Client Communications OM1: Process Claims SM8: Service Arrangement (Referral, Placement) SM13: Approve Service, Level of

#	Description	NHSIA Process
		Service
PS-25	The bidder should describe how it will develop a comprehensive review that will assess and identify areas of improvement to 24 hours services in child welfare to include hotline, on call system response by child welfare staff and providers	CM1: Establish Shared Client Information SM4: Intake Client
PS-26	The bidder should describe how it will develop a comprehensive review that will assess opportunities for increased efficiency for a reporting system for abuse and neglect allegations.	SM4: Intake Client SM7: Conduct Investigation
PS-27	The bidder should describe how it will develop a comprehensive review that will assess the current child welfare information system. Include any opportunities to share data and reporting with court systems.	BRM5: Manage Information Sharing with Court System
PS-28	The bidder should describe how it will develop a comprehensive review that will assess the service array and the connection to Families First Prevention Services Act and the claiming of IV-E funding.	Not Applicable (Administrative and Fiscal Requirement)
PS-29	The bidder should describe how it will develop a comprehensive review that will assess the reasons relatives' homes are not being licensed and how that can be improved.	PM7: Determine Provider Eligibility PM10: Monitor License/Credentials Change
PS-30	The bidder should describe how it will develop a comprehensive review on how to increase effectiveness of the current placement matching system for foster homes within the foster care system.	SM8: Service Arrangement (Referral, Placement)
PS-31	The bidder should describe how it will develop a comprehensive review that will assess the access and utilization to community resources for issues relating to poverty such as ACCESSNebraska, community food pantries, shelters etc.	SM8: Service Arrangement (Referral, Placement) SM10: Cross-Agency Case Coordination
PS-32	The bidder should describe how it will develop a comprehensive review that will work with schools and medical communities to access resources through community or public assistance programs such as Medicaid/MCO or child care.	SM8: Service Arrangement (Referral, Placement) SM10: Cross-Agency Case

#	Description	NHSIA Process
		Coordination
PS-33	The bidder should describe how it will develop a comprehensive review that will assist with the improvement of the 24/7 crisis response system that addresses physical and behavioral needs of individuals with immediate access to resources in local communities.	Not Applicable (Practices, Service Array, and Policy Requirement)
PS-34	The bidder should describe how it will develop a comprehensive review that will identify well-supported Evidence-Based Practices (EBP) with a plan for funding implementation, validity and adherence.	Not Applicable (Data and Evidence Requirement)
PS-35	The bidder should describe a comprehensive review to address disproportionate minority representation within the child welfare system.	Not Applicable (Practices, Service Array, and Policy Requirement)
PS-36	The bidder should describe how it will develop a comprehensive review that will develop strategies to implement family voice and choice in service provision and identified service providers.	CM6: Manage Client Communications SM6: Develop Case Plan (Goals, Methods, and Outcomes); SM8: Service Arrangement (Referral, Placement) SM9: Manage and Monitor Client and Outcomes
PS-37	The bidder should describe how it will develop a comprehensive review that will develop a strategic plan to ensure full compliance with Family First Preservation Services Act and Comprehensive Addiction and Recovery Act of 2016. Plan must connect to the Children and Family Services Plan (CFSP), the Annual Progress Services Report (APSR) and any Program Improvement Plans (PIP). Documents can be found here: http://dhhs.ne.gov/Pages/Child-Welfare.aspx.	Not Applicable (Administrative and Fiscal Requirement)
PS-38	The bidder should describe how it will develop a comprehensive review of a system of performance-based contracting.	Not Applicable (Administrative and Fiscal Requirement)
PS-39	The bidder should describe how it will provide recommendations for a framework for quality assurance in child welfare.	QM5: Manage Performance Measures UM12: Generate Federal and State

#	Description	NHSIA Process
		Reports
PS-40	The bidder should describe how it will develop a comprehensive review that will identify strategies for a career ladder and advancement for service providers and case managers in the child welfare system	Not Applicable (Implementation Capacity and Strategy Requirement)
PS-41	The bidder should describe how it will develop a comprehensive review that will create a business process map that outlines the current structure of CFS and the intersection with relevant support divisions' operations; including state office staff extending into regional field staff.	Not Applicable (Implementation Capacity and Strategy Requirement)
PS-42	The bidder should describe how it will develop a comprehensive review that will make recommendations on improvement to the Child Welfare system processes, to include technology, training improvements, or other tools to assist CFS workers in state office and regional field.	Not Applicable (General Requirement)
PO-1	Assess how to safely achieve permanency in a timely manner;	SM6: Develop Case Plan (Goals, Methods, and Outcomes) SM9: Manage and Monitor Client and Outcomes
PO-2	Assess Nebraska's case management case staffing models and Supervisor training for staff development and case oversight;	Not Applicable (Implementation Capacity and Strategy Requirement)
PO-3	Assess family engagement, assessments where applicable, and CFS case management quality of contacts with children, parents/caregivers, relatives and kin;	SM5: Screening and Assessment
PO-4	Assess stability of workforce of child welfare case management;	Not Applicable (Implementation Capacity and Strategy Requirement)
PO-5	Assess whether there exists an effective array of individualized services and foster homes;	Not Applicable (Practices, Service Array, and Policy Requirement)
PO-6	Assess if there exists an effective array of services and foster homes, whether those services and foster homes are available statewide and individualized for each family's	Not Applicable (Practices, Service Array, and Policy Requirement)

#	Description	NHSIA Process
	needs;	
PO-7	Assess how to effectively exit the IV-E waiver on October 1, 2019 and move directly into the Family First Prevention Services Act; and	Not Applicable (Administrative and Fiscal Requirement)
PO-8	Assess how to deliver economic and community supports for prevention services.	Not Applicable (Practices, Service Array, and Policy Requirement)

8. TECHNICAL RESPONSE APPENDIX D: WORK SAMPLES

On the following pages, we have provided the table of contents and examples sections of deliverables we have provided to state agency clients that are relevant to this project. Upon request, we would be pleased to provide more detail for these deliverables.

- Exhibit D.1: Business Process Map Report Cover, Table of Contents, and Example Process Information Tables and Map
- Exhibit D.2: Change Management Process Map
- Exhibit D.3: Organizational Assessment Report Cover, Table of Contents, and Recommendations Prioritization Table
- Exhibit D.4: Project Management Plan Cover, Table of Contents, and Summary Project Work Plan
- Exhibit D.5: Communication Plan Cover, Table of Contents, and Example Sections
- Exhibit D.6: Change Management—Resistance Management Plan Cover and Table of Contents
- Exhibit D.7: Project Status Report Cover and Table of Contents

BerryDunn

XXX Department of Economic Security (XXX) Division of Developmental Disabilities (DDD) Feasibility Study for IT System Upgrade or Replacement

Deliverable 2.4 Current Environment Report

Final v1.0

[redacted]

Submitted by:
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Submitted on:
April 27, 2018

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Table i: Version History

Version	Delivered Date	Version Notes
v0.1	03/21/2018	Initial delivery in working draft of the Current Environment Report to the XXX Department of Economic Security (XXX) Division of Developmental Disabilities (DDD) for review. Some sections are Work in Progress and some questions are included for DDD clarification.
v0.2	04/03/2018	Revised version based on comments received from XXX.
v1.0	04/27/2018	Final version with revisions based on comments received from XXX. Comments are available in separate Comment Tracking Log.

3.0 Business Process Analysis

3.1 Business Model

DDD's current business environment can be expressed by grouping related activities, or business processes, into four business areas, as depicted and defined in the table below.

Table 3-1: DDD Business Processes

Business Area	Definition	ID	Business Process
Member Management	This business area includes the seven business processes related to managing delivery of services to members.	MM.01	Determine Eligibility
		MM.02	Receive Behavioral Health Encounters
		MM.03	Develop the Individual Service Plan (ISP)
		MM.04	Match Providers with Members' Approved Services
		MM.05	Bill Clients
		MM.06	Manage Incidents
		MM.07	Manage Grievances (Complaints)
Vendor Management	This business area is comprised of seven business processes that support DDD's relationship with vendors who provide services to members, both providers and health plans.	VM.01	Establish Vendor Contract
		VM.02	Manage Vendor Contract
		VM.03	Monitor Vendors
		VM.04	Certify Vendors
		VM.05	Submit Claim / Process Vendor Payment
		VM.06	Pay Health Plans
		VM.07	Process COBV Waiver Request
Compliance Management	This business area consists of the three business process that support DDD's monitoring of its contracts with XXX and health plans.	CM.01	Report Encounters
		CM.02	Manage XXX' Contract as well as all deliverables received from the health plans that are due to XXX
		CM.03	Monitor Contracts with Health Plans
System Administration	This business area consists of two business processes related to managing user access to FOCUS.	SA.01	Assign User Roles
		SA.02	Manage DDD Employee Records

The following sections elaborate each business process within each business area, beginning with a table providing an overview of the process details, followed by a high-level business process diagram, then concluding with a table describing each business process step along with issues, gaps, and/or bottlenecks identified by stakeholders and our analysis.

3.2 Member Management

3.2.1 Business Process MM.01

Table 3-2: MM.01 Determine Eligibility Process Details

Business Process ID and Name	MM.01 Determine Eligibility	
Business Process Description	This process describes how DDD staff manage intake and eligibility determination for prospective members.	
	Process Steps	
	1	Send prospective member application
	2	Complete application
	3	Return application
	4	Enter data into FOCUS and create paper case file
	5	Review application (Supervisor)
	6	Contact member to schedule initial appointment
	7	Transfer file to appropriate location
	8	Assign member to Support Coordinator
	9	Create Notice of Adverse Benefit Determination
	10	Send letter to applicant
Primary Actors	• FOCUS • Eligibility Unit • Member • District Office	
Primary Systems and Tools	• FOCUS • Application (Paper or Electronic Form) • Paper Case File • Shared Drive • Tableau Report • Email • Notice of Adverse Benefit Determination External Database	
Trigger Event(s)	Referral or application for eligibility	
Expected Outcome(s)	Completed application and eligibility determination	

Variations	This represents the standard flow for all DDD programs. Specific variations related to XXX are noted below. There is process flow for redetermining active cases as required in administrative rule at age 5.5 and 17.5 years or as needed.
Workload	N/A

Figure 3-1: MM.01 Determine Eligibility Process Diagram

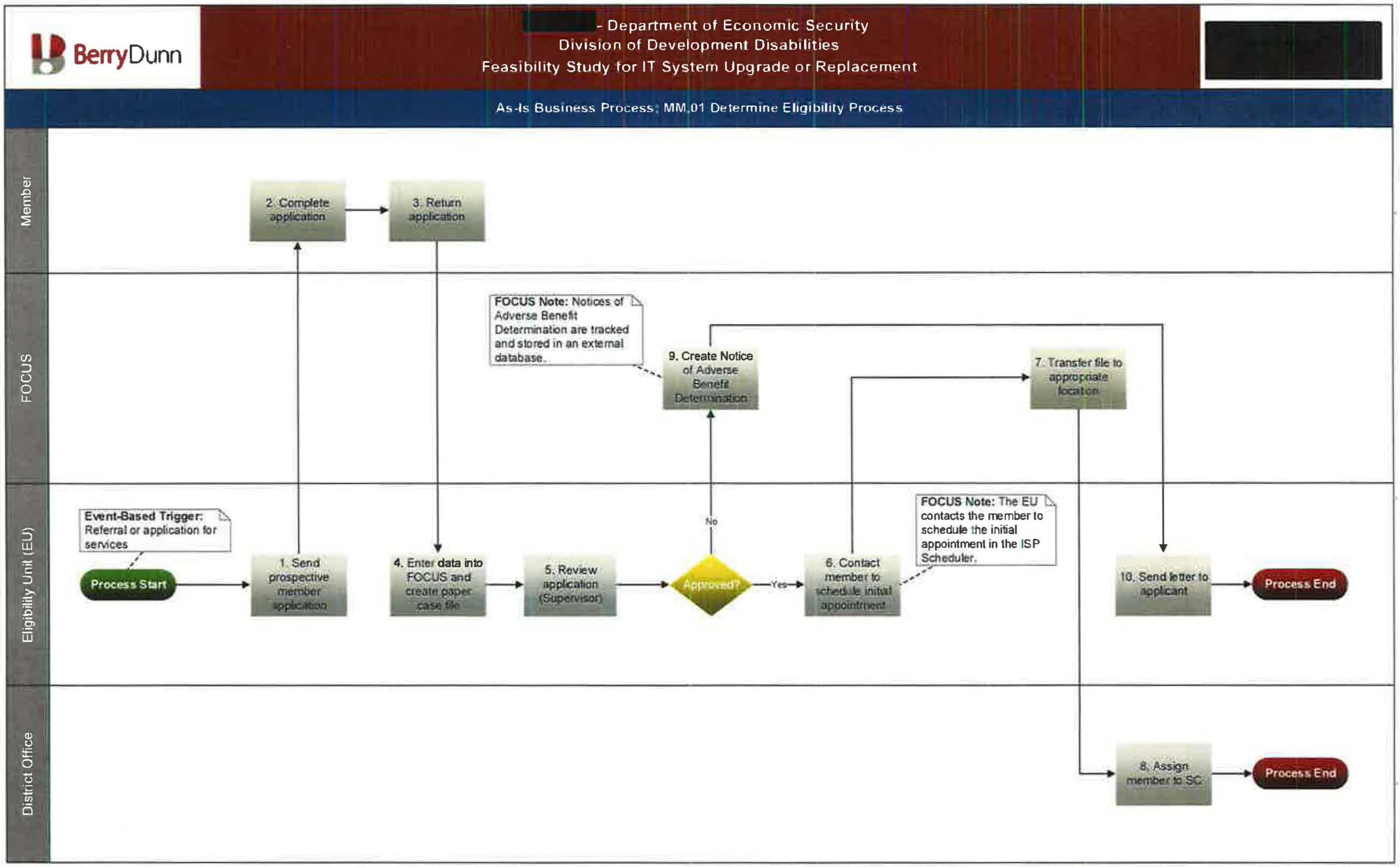


Table 3-3: MM.01 Determine Eligibility Process Steps

Step 1: Send Prospective Member Application					
#	**Actor**	**Systems/Tools**	**Inputs**	**Outputs**	**Variations**
1	Eligibility Unit	• Tableau Report • Application	• Prospective member demographic information • Application	Prospective member receives application	Communications may occur, and/or applications may be sent via: • Mail • Email • Walk-in • Phone • Receive referral via web page from community or potential applicant, enter as FOCUS record, then send application
Issues/Bottlenecks/Gaps					
• The eligibility process is initiated in FOCUS and supplemented with a paper Tableau Report, which is a way to monitor and track all actions taken on a member's application. • A paper case file is created.					
Step 2: Complete Application					
#	**Actor**	**Systems/Tools**	**Inputs**	**Outputs**	**Variations**
2	Member	Application	Eligibility documentation received	Eligibility documentation completed	• Members may complete forms via paper or electronically online. • If the application is for a member between the ages of 0-3, then the application is first routed to XXX for determination, which is managed in ITEAMS.
Issues/Bottlenecks/Gaps					
• None identified					

Step 3: Return Application

#	Actor	Systems/Tools	Inputs	Outputs	Variations
3	Member	Application	Member completes application	Eligibility Unit receives completed application	Members may submit the application via: • Email • Mail • Walk-in • Online

Issues/Bottlenecks/Gaps

- Any actions taken regarding a member's eligibility status are updated in the paper Eligibility Tracking Sheet.

Step 4: Enter Member Data into FOCUS and Create Paper Case File

#	Actor	Systems/Tools	Inputs	Outputs	Variations
4	Eligibility Unit	• FOCUS • Paper Case File • Shared Drive	Information from application	Member case file in FOCUS and on paper	N/A

Issues/Bottlenecks/Gaps

- Staff are unable to attach or scan member eligibility application documentation, so they keep a separate folder on the Shared Drive and maintain a paper case file. Member information is held in three locations.
- Any actions taken regarding a member's eligibility status are updated in the Tableau report.

Step 5: Review application

#	Actor	Systems/Tools	Inputs	Outputs	Variations
5	Eligibility Unit	• FOCUS • Application • Email • Paper Case File • Shared Drive	Review of member application documentation	Eligibility determination	If determination cannot be made by supervisor, elevate to the Eligibility Review Team (ERC). If denied, send notice of intended action. These denials end up in workflow for the Office of Administrative Review (OAR) to review the record.

Issues/Bottlenecks/Gaps

- This is a cumbersome process given that all information required for review and eligibility determination is not located in a single place.

- Once a member has been deemed DDD eligible, if they are also found to be eligible for ALTCS, there are certain timeframes and parameters in which the initial meetings must be held so that the application is processed timely. Staff reported that the system does not have a way of managing or calculating these various timeframes and schedules.
- Any activity must also be noted in the Eligibility Tracking Sheet.
- Staff reported that manual processes create opportunities for error.
- Third-Party Liability (TPL) information

Step 6: Contact Member to Schedule Initial Appointment

#	Actor	Systems/Tools	Inputs	Outputs	Variations
6	Eligibility Unit	FOCUS	Determination of eligibility	Attempt to contact member to schedule initial appointment	N/A

Issues/Bottlenecks/Gaps

- None identified

Step 7: Transfer File to Appropriate Location

#	Actor	Systems/Tools	Inputs	Outputs	Variations
7	FOCUS	FOCUS	Determination of eligibility	File transferred to appropriate location and Supervisor	N/A

Issues/Bottlenecks/Gaps

- The paper files are transferred one to two times per week to the appropriate District Office by the Case Aid or FedEx, and the case in FOCUS is transferred by zip code to the appropriate Supervisor.
- Staff reported that manual transfer process of case files creates an opportunity for the loss of the records.

Step 8: Assign Member to Support Coordinator

#	Actor	Systems/Tools	Inputs	Outputs	Variations
8	District Office	• FOCUS • Email	New member assigned to District Office	Support Coordinator assigned to member	N/A

Issues/Bottlenecks/Gaps

- Staff reported that in order to appropriately assign the case to an SC, the Supervisor must take factors into consideration that are not available in FOCUS, (i.e., the schedule and specialty skillsets).

Step 9: Create Notice of Adverse Benefit Determination

#	Actor	Systems/Tools	Inputs	Outputs	Variations
9	FOCUS	• FOCUS • External database	Prospective member deemed ineligible and/or application denied	Notice of Adverse Benefit Determination stored and tracked	N/A

Issues/Bottlenecks/Gaps

- Notices of Adverse Benefit Determination are stored and tracked in an external database.
- Tracking timeframes related to this notice and applicant response are important for compliance with federal regulations.

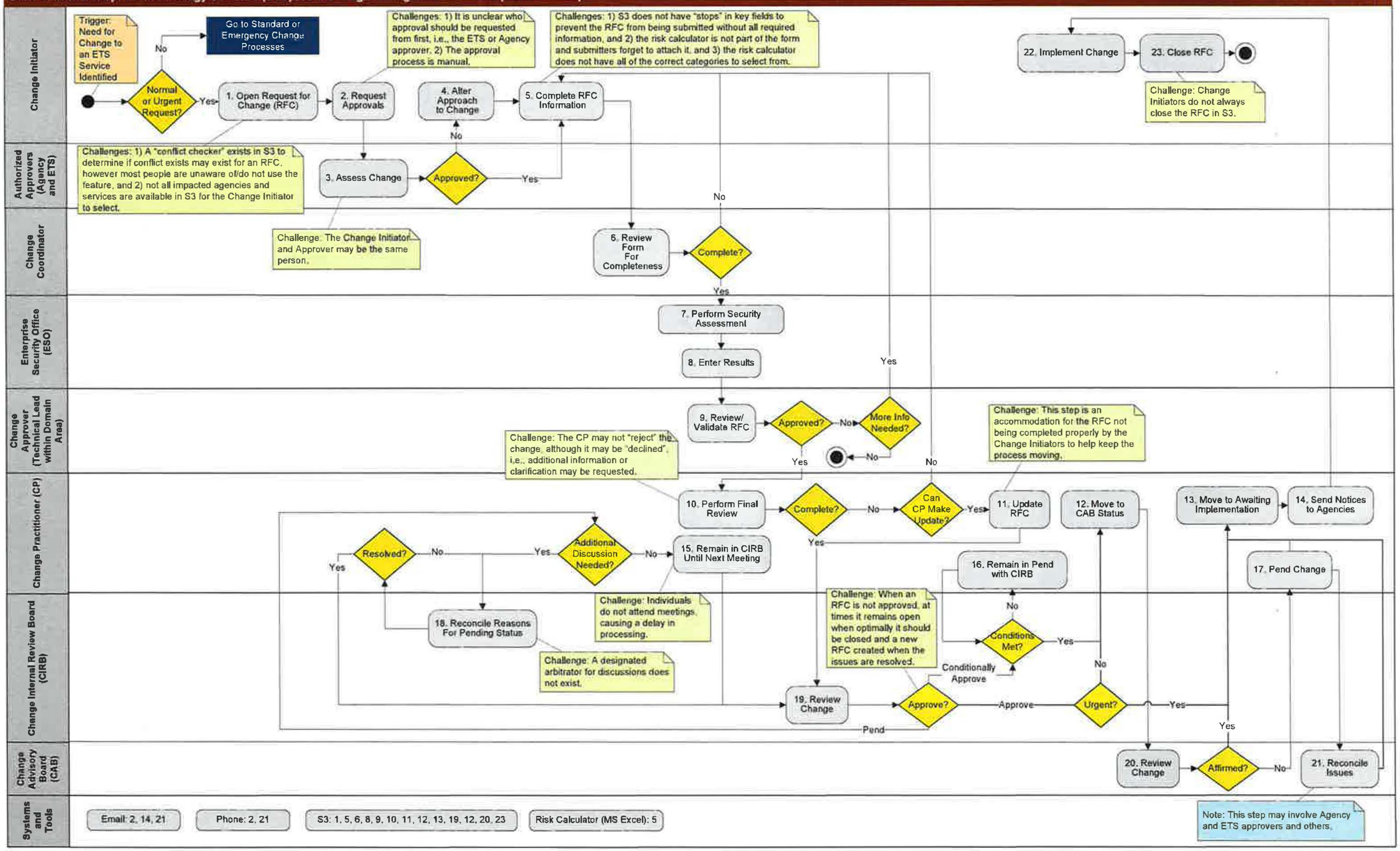
Step 10: Send Letter to Applicant

#	Actor	Systems/Tools	Inputs	Outputs	Variations
10	Eligibility Unit	• Email	Prospective member deemed ineligible and/or application denied	Member notified of adverse determination	N/A

Issues/Bottlenecks/Gaps

- None identified

State of XXX Enterprise Technology Services (ETS) ITSM Change Management Process (Current State)*



*Supporting systems or tools are included in the bottom swim lane of the diagram and are numbered to align with the process steps they are associated with. Numbering of steps does not imply sequence.

BerryDunn

State of XXX
Department of Human Services
XXX

[redacted]

Deliverable 12: XXX Project
Findings and Recommendations Report (FARR)

Submitted by:
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Brandon Milton, Information Technology Leader
Victoria Handy, Senior Business Analyst
Amanda Findlay, Business Analyst

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Submitted on:
January 23, 2018

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Table 21: Prioritization of Recommendations

ID	Recommendation Name	Decision-Making Criteria: Impact on the Client Experience 1=Low, 3=Moderate, 5=High	Decision-Making Criteria: Impact on Developing a Positive, Effective Workplace 1=Low, 2=Moderate, 3=High	Decision-Making Criteria: Complexity of Implementation 1=High, 2=Moderate, 3=Low	Decision-Making Criteria: Cost of Implementation 1=High, 2=Moderate, 3=Low	Total Score	Priority Ranking
Strategic Initiative 1	Transition to a Service-Based Team Structure a Using Task-Based Service Delivery Model	*N/A*					Critical
Strategic Initiative 2	Establish a TDT and Redesign Processes	*N/A*					Critical
Strategic Initiative 3	Implement a Service Center Design	*N/A*					Critical
4.3.2.7	Standardize the Use of [redacted] Functionality	5	3	2	3	13	Critical
4.3.2.15	Investigate and Resolve Causes of Undeliverable Mail	5	2	3	3	13	Critical
4.3.2.6	Perform a Cleanup in [redacted]	5	3	2	2	12	Critical
4.3.2.1	Redesign Processes, Establish Standards and Metrics, and Monitor Performance	5	3	2	2	12	Critical
4.3.2.13	Provide HCOB and ESS Permission to Process Additional COCs	5	2	2	3	12	Critical
4.3.2.18	Establish a Task Force to Address the Backlog of System Defects in [redacted]	5	3	2	2	12	Critical
4.3.2.20	Conduct an Assessment of the Network Infrastructure in the [redacted] Client-Facing Offices	3	3	2	3	11	Critical
4.3.2.4	Identify and Eliminate Root Causes of Duplicate Contacts and Cases and Redesign Processes to Manage Them	3	2	3	3	11	Critical
4.3.2.12	Investigate Service Requests for COCs Submitted Online	3	2	3	3	11	Critical
4.3.2.24	Merge the [redacted] Phone Systems and Revamp the Call Prompts	5	2	2	2	11	Critical
4.3.2.19	Evaluate Structure of [redacted] IT Functions	5	3	1	2	11	Critical
4.3.2.9	Assess Opportunities to Improve the Online Portal and Drive Clients to It	5	3	1	1	10	High
4.3.2.14	Establish a Standard Processing Time for COCs	3	1	3	3	10	High
4.3.2.3	Develop a Process for Consistent and Effective Policy Communication and Implementation	1	3	3	3	10	High
4.3.2.23	Assess and Redesign the Process for Acquisition and Removal of IT Equipment and Office	3	2	3	2	10	High
4.3.2.8	Expand Ability to Pre-Enroll in Health Plans	5	2	1	1	9	High
4.3.2.2	Assess Opportunities to Improve Timeliness of Eligibility Determinations	3	2	2	2	9	High
4.3.2.10	Assess Opportunity for MFIS to Advance Cases between [redacted] and HPMMIS	1	2	3	3	9	High
4.3.2.17	Establish a Steering Committee to Review, Authorize, and Prioritize [redacted] Design Changes	1	2	3	3	9	High
4.3.2.22	Improve Communication of [redacted] Deployments for Client-Facing Staff	1	2	3	3	9	High
4.3.2.11	Assess Expanding [redacted] Ability to Upload Documents to the Portal	1	1	3	3	8	Medium
4.3.2.16	Create a Guide to DHS and Community Services	3	2	2	1	8	Medium
4.3.2.25	Assess [redacted] Websites and Identify Opportunities to Improve the Client Experience	3	1	2	2	8	Medium
4.3.2.5	Assess Restricting the Use of Manual Overrides	1	1	3	2	7	Medium
4.3.2.21	Prioritize the OIT Upgrade to IE10 for Staff Computers	1	2	2	2	7	Medium

BerryDunn

State of XXX

Department of Human Services (DHS)

XXX

Customer Service Delivery Optimization (CSDOP)

[redacted]

Deliverable 2: Project Management Plan

Submitted by:
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Submitted on:
September 11, 2017

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Appendix B: Baseline Project Schedule

The baseline project schedule is provided below and is available in Microsoft Project and in PDF format on the BerryDunn KnowledgeLink.

Task Name	Start	Finish
Customer Service Delivery Optimization Project	**Mon 7/10/17**	**Fri 9/28/18**
Phase 1: Project Initiation	**Mon 7/10/17**	**Fri 9/1/17**
Task 1. Perform Initial Project Planning	**Mon 7/10/17**	**Fri 7/28/17**
1.1 Request and perform initial review of existing documentation	Mon 7/10/17	Fri 7/21/17
1.2 Perform other initial planning tasks	Mon 7/10/17	Fri 7/21/17
1.3 Conduct initial planning meeting	Tue 7/18/17	Tue 7/18/17
1.4 Revise and Submit Project Work Plan and Project Management Plan	Wed 7/19/17	Fri 7/28/17
D.1 Project Work Plan	***Fri 7/28/17***	***Fri 7/28/17***
D.2 Project Management Plan	***Fri 7/28/17***	***Fri 7/28/17***
Task 2. Develop Communication Plan	**Mon 7/10/17**	**Tue 8/15/17**
2.1 Develop and submit DED for Communication Plan	Mon 7/10/17	Wed 7/19/17
2.2 Gather information to develop Communication Plan	Wed 7/19/17	Tue 8/1/17
2.3 Develop and submit initial draft Communication Plan	Wed 7/19/17	Tue 8/15/17
D.3 Communication Plan	*Tue 8/15/17*	*Tue 8/15/17*
Task 3. Plan for and Facilitate Stakeholder Kickoff Meeting	**Fri 8/18/17**	**Tue 8/29/17**
3.1 Develop and submit materials for Stakeholder Kickoff Meeting	Fri 8/18/17	Mon 8/28/17
3.2 Hold Stakeholder Kickoff Meeting	Tue 8/29/17	Tue 8/29/17
D.4 Stakeholder Kickoff Meeting	***Tue 8/29/17***	***Tue 8/29/17***
Task 4: Provide Management Workshop #1	**Mon 7/31/17**	**Fri 9/1/17**
4.1 Identify workshop topics	Mon 7/31/17	Fri 8/4/17
4.2 Develop and customize workshop materials	Mon 8/7/17	Fri 8/25/17
4.3 Prepare for and conduct workshops	Mon 8/28/17	Fri 9/1/17
D.5 Management Workshop #1 Materials and Workshop Delivery	***Fri 9/1/17***	***Fri 9/1/17***
Phase 2: Operational Assessment	**Mon 7/10/17**	**Fri 12/22/17**
Task 5: Perform Review of Background Documentation	Mon 7/10/17	Fri 11/17/17
5.1 Review background documentation	Mon 7/10/17	Fri 11/17/17
Task 6: Develop Inventory of Business Processes	**Mon 7/17/17**	**Fri 8/25/17**
6.1 Develop a preliminary draft of business processes and prepare for workgroup sessions	Mon 7/17/17	Fri 7/28/17
6.2 Facilitate workgroup sessions to identify business processes	Mon 7/31/17	Fri 8/4/17

6.3 Develop and submit initial draft Inventory of Business Processes	Mon 8/7/17	Fri 8/25/17
D.6 Inventory of Business Processes	***Fri 8/25/17***	***Fri 8/25/17***
Task 7: MQD IT Systems Training/Demonstrations	**Mon 7/31/17**	**Fri 8/4/17**
7.1 Participate in KOLEA training and/or demonstrations	Mon 7/31/17	Fri 8/4/17
Task 8: Review and Analyze MQD Policies and Procedures	**Mon 7/31/17**	**Fri 12/15/17**
8.1 Perform a review of MQD policies and procedures	Mon 7/31/17	Fri 11/24/17
8.2 Review potential opportunities with the MQD and develop summary document	Mon 11/27/17	Fri 12/15/17
D.7 Policies and Procedures Analysis Document	***Fri 12/15/17***	***Fri 12/15/17***
Task 9: Issue Web Surveys	**Mon 8/14/17**	**Fri 9/15/17**
9.1 Develop stakeholder surveys	Mon 8/14/17	Fri 8/25/17
9.2 Issue stakeholder surveys and assess results	Mon 8/28/17	Fri 9/15/17
D.8 Web Surveys	***Fri 9/15/17***	***Fri 9/15/17***
Task 10: Perform Direct Workflow Observation	**Mon 9/4/17**	**Fri 10/6/17**
10.1 Observe Customer-Facing Sections staff workflows	Mon 9/4/17	Fri 9/22/17
10.2 Discuss and document observations	Mon 9/25/17	Fri 10/6/17
D.9 Workflow Observation	***Fri 10/6/17***	***Fri 10/6/17***
Task 11: Hold Stakeholder Focus Group Sessions	**Mon 9/4/17**	**Fri 9/29/17**
11.1 Prepare for focus group sessions	Mon 9/4/17	Fri 9/15/17
11.2 Facilitate focus group sessions and document findings	Mon 9/18/17	Fri 9/29/17
D.10 Focus Group Sessions and Debrief	***Fri 9/29/17***	***Fri 9/29/17***
Task 12: Hold Workgroups, Including Mapping Business Processes	**Mon 8/28/17**	**Fri 11/10/17**
12.1 Develop draft business process mapping template and documentation	Mon 8/28/17	Fri 9/8/17
12.2 Prepare for workgroup sessions	Mon 9/11/17	Fri 9/29/17
12.3 Conduct workgroup sessions	Mon 10/2/17	Fri 10/13/17
12.4 Hold follow-up meetings	Mon 10/9/17	Fri 10/20/17
12.5 Develop and submit As-Is and To-Be Process Documentation	Mon 10/16/17	Fri 11/10/17
D.11 As-Is and To-Be Business Process Documentation	***Fri 11/10/17***	***Fri 11/10/17***
Task 13: Perform Additional Information-Gathering Meetings for Staffing and Management Review	**Mon 10/30/17**	**Fri 11/17/17**
13.1 Hold additional meetings as needed	Mon 10/30/17	Fri 11/17/17
Task 14: Develop MQD Customer-Facing Sections Business Process Redesign Plan	**Mon 10/23/17**	**Fri 12/22/17**
14.1 Develop and submit DED for Business Process Redesign Plan	Mon 10/23/17	Fri 11/3/17
14.2 Develop and submit Business Process Redesign Plan	Mon 11/6/17	Fri 12/22/17

D.12 Business Process Redesign Plan	***Fri 12/22/17***	***Fri 12/22/17***
Phase 3: Implementation Planning	**Mon 12/25/17**	**Fri 7/6/18**
Task 15: Develop Quality Measurements, Evaluation Criteria, and Evaluation Plan	**Mon 12/25/17**	**Fri 2/16/18**
15.1 Perform background research	Mon 12/25/17	Fri 12/29/17
15.2 Hold meetings with the MQD and develop draft Quality Measurements and Evaluation Criteria	Mon 1/1/18	Fri 1/19/18
15.3 Gather baseline data	Mon 1/22/18	Fri 1/26/18
15.4 Develop Evaluation Plan	Mon 1/29/18	Fri 2/16/18
D.13 Evaluation Plan (Inclusive of Quality Measurements and Evaluation Criteria)	***Fri 2/16/18***	***Fri 2/16/18***
Task 16: Develop Implementation Plan	**Mon 12/25/17**	**Fri 2/16/18**
16.1 Develop and submit DED for Implementation Plan	Mon 12/25/17	Fri 1/5/18
16.2 Gather information and hold meetings	Mon 1/1/18	Fri 1/12/18
16.3 Develop Implementation Plan	Mon 1/15/18	Fri 2/16/18
D.14 Implementation Plan	***Fri 2/16/18***	***Fri 2/16/18***
Task 17: Develop Training Materials	**Mon 12/25/17**	**Fri 2/16/18**
17.1 Develop DEDs for the Training Manual and Trainer's Guide	Mon 12/25/17	Fri 12/29/17
17.2 Gather information and hold meetings	Mon 1/1/18	Fri 1/12/18
17.3 Develop Training Manual and Trainer's Guide	Mon 1/8/18	Fri 2/16/18
D.15 Training Manual and Trainer's Guide (i.e., Train-the-Trainer Manual)	***Fri 2/16/18***	***Fri 2/16/18***
Task 18: Oversee Pilot of New Service Delivery Model	**Mon 2/26/18**	**Fri 4/13/18**
18.1 Perform pilot preparations	Mon 2/26/18	Fri 3/16/18
18.2 Perform on-site support for pilot	Mon 3/19/18	Fri 3/23/18
18.3 Evaluate pilot and review findings	Mon 3/26/18	Fri 4/13/18
18.4 Update implementation documents	Mon 4/9/18	Fri 4/13/18
D.16 Pilot Findings	***Fri 4/13/18***	***Fri 4/13/18***
Task 19: Provide Training to Customer-Facing Sections Managers and Supervisors	**Mon 4/9/18**	**Fri 5/4/18**
19.1 Prepare and facilitate training sessions	Mon 4/9/18	Fri 4/27/18
19.2 Perform follow-up activities	Mon 4/30/18	Fri 5/4/18
D.17 Manager/Supervisor Training Sessions	***Fri 5/4/18***	***Fri 5/4/18***
Task 20: Provide Training to All Customer-Facing Sections Staff	**Mon 4/30/18**	**Fri 5/25/18**
20.1 Prepare and facilitate training sessions	Mon 4/30/18	Fri 5/25/18
D.18 Staff Training Sessions	***Fri 5/25/18***	***Fri 5/25/18***
Task 21: Provide Management Workshop #2	**Mon 1/15/18**	**Fri 3/30/18**
21.1 Identify workshop topics	Mon 1/15/18	Fri 1/26/18
21.2 Develop and customize workshop materials	Mon 1/29/18	Fri 3/2/18
21.3 Prepare for and conduct workshops	Mon 3/5/18	Fri 3/30/18

D.19 Management Workshop #2 Materials and Workshop Delivery	*Fri 3/30/18*	*Fri 3/30/18*
Task 22: Perform Other Implementation Preparations as Needed	**Mon 2/19/18**	**Fri 7/6/18**
22.1 Perform other implementation activities	Mon 2/19/18	Fri 7/6/18
D.20 Other Implementation Preparations	***Fri 7/6/18***	***Fri 7/6/18***
Phase 4: Post-Implementation Support	**Mon 5/7/18**	**Fri 9/14/18**
Task 23: Oversee Initial Implementation Activities	**Mon 7/2/18**	**Fri 7/20/18**
23.1 Perform implementation preparation	Mon 7/2/18	Fri 7/6/18
23.2 Provide on-site support	Mon 7/9/18	Fri 7/20/18
D.21 Onsite Implementation Support	***Fri 7/20/18***	***Fri 7/20/18***
Task 24: Monitor, Evaluate, and Update New Service Delivery Model	**Mon 7/23/18**	**Fri 9/14/18**
24.1 Monitor performance	Mon 7/23/18	Fri 8/3/18
24.2 Evaluate performance	Mon 8/6/18	Fri 8/10/18
24.3 Refine processes and update documentation	Mon 8/13/18	Fri 9/14/18
D.22 Updated Service Delivery Model	***Fri 9/14/18***	***Fri 9/14/18***
Task 25: Provide Management Workshop #3	**Mon 5/7/18**	**Fri 6/29/18**
25.1 Identify workshop topics	Mon 5/7/18	Fri 5/18/18
25.2 Develop and customize workshop materials	Mon 5/21/18	Fri 6/8/18
25.3 Prepare for and conduct workshops	Mon 6/11/18	Fri 6/29/18
D.23 Management Workshop #3 Materials and Workshop Delivery	*Fri 6/29/18*	*Fri 6/29/18*
Phase 5: Project Closeout	**Mon 8/27/18**	**Fri 9/28/18**
Task 26: Perform Project Closeout Activities	**Mon 8/27/18**	**Fri 9/28/18**
26.1 Develop and submit Transition Plan	Mon 8/27/18	Fri 9/14/18
26.2 Perform knowledge transfer activities	Mon 9/17/18	Fri 9/21/18
26.3 Perform other closeout activities	Mon 9/10/18	Fri 9/28/18
D.24 Transition Plan	***Fri 9/14/18***	***Fri 9/14/18***
D.25 Project Closeout Report	Fri 9/28/18	Fri 9/28/18
Ongoing: Project Management	**Mon 7/10/17**	**Fri 9/28/18**
Task 27: Perform Ongoing Project Management	**Mon 7/10/17**	**Fri 9/28/18**
27.1 Perform ongoing project management activities	Mon 7/10/17	Fri 9/28/18
D. 26 Weekly status reports	**Wed 8/2/17**	**Wed 9/26/18**

BerryDunn

State of XXX

Department of Human Services (DHS)

XXX Division (XXX)

Customer Service Delivery Optimization Project (CSDOP)

[redacted]

Deliverable 3: Communication Plan

Submitted by:

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Submitted on:
XXX, XXX

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1.3 Project Stakeholder Analysis

An analysis of project stakeholders, performed by the Steering Committee, is provided in Table 4. Results of the analysis will inform project communications, such as frequency and messaging.

The need for awareness of the project, degree of support needed, ability to influence others, and need to hear the voice of each stakeholder was rated using a scale of 1 (low) to 5 (high). The Steering Committee also identified each stakeholder's key interests, which will be validated with stakeholders as the project progresses through mechanisms such as in-person meetings and web surveys.

Table 4: Project Stakeholder Analysis

Stakeholder Name	Key Interests	Need for Project Awareness	Degree of Support Needed	Influence on Others	Need to Hear Their Voice
Internal to State					
Branch Leadership Team	• High variation in personal interests; interests that are common across the team include: o Transparency; o Respect for their work and experience; o Being heard; o Clarity about the what, why, who, what, when, and how of any changes; and o Consistent messaging from State Administration.	5	5	5	5

Stakeholder Name	Key Interests	Need for Project Awareness	Degree of Support Needed	Influence on Others	Need to Hear Their Voice
Eligibility, Customer Services, and Health Care Outreach Branch Staff	• Same as Branch Leadership Team • Consistent, documented communications • Clear plan and expectations regarding how changes will impact them personally, including Position Descriptions • Ability to provide input anonymously and confidentially: one-on-one interviews, online surveys, and/or focus groups without leadership presence	5	5	5	5
Project Steering Committee	• Development and implementation of an optimized service delivery model that: o Demonstrates efficiency, consistency, effectiveness, proactivity; o Exceeds customer expectations; o Breaks down barriers and silos across branches; o Is sustainable; and o Builds accountability. • Supporting and setting staff and leaders up for success	5	5	5	5
State Administrator/ Project Executive Sponsor	• Execution of, and project alignment with, State vision, mission, and core values • Same as DHS leadership	3	5	5	4

Stakeholder Name	Key Interests	Need for Project Awareness	Degree of Support Needed	Influence on Others	Need to Hear Their Voice

DHS Leadership	• Successful project execution and outcomes, including:
	  ○ Positive impact on beneficiaries, and
	  ○ Establishment of a consistent, efficient, and effective service delivery model.
	• Managed impact to labor relations
		3	5	5	4

BA/SO (Other State Offices Such as Systems, Finance, Training, and Policy and Program Development)	• Same as Steering Committee • Positive impact on beneficiaries and staff • Collaboration • Alignment with DHS Strategic Plan	3	4	5	5
DHS Personnel Office	• Position Descriptions align with customer service delivery model	4.5	5	5	3
Other DHS Divisions	• Alignment with ‘Ohana Nui • Development of a vision of the future that addresses challenges • Collaboration	5	5	5	5
Governor’s Office, State Legislature, and Other State Agencies	• Appropriate use/stewardship of funds • Measurement and reporting of improvements and benefits gained	2	2.5	2.5	3

Stakeholder Name	Key Interests	Need for Project Awareness	Degree of Support Needed	Influence on Others	Need to Hear Their Voice
	• Requirements for corrective action met				
External to State					
Residents of the State Including Beneficiaries	• Communications during implementation • Ability to provide input on customer service • Easy-to-use system • Friendly, helpful resources	1.5	2	3	5
The Union	• Position Descriptions align with customer service delivery model	4.5	5	5	3
Service Providers and Other Community Partners	• Collaboration • Better, more efficient, timely, and accurate service	1.5	2	3	5
CMS	• Similar to Governor's Office, Legislature, and Other State Agencies	2	2	1	1
Vendors	• Understanding the impact of changes on their roles, contracts, and work • Being asked for input on how to solve problems/overcome challenges	2	3	2	2

2.3 Communication Matrix

The Project Communication Matrix summarizes the types of communication that will be used throughout the project. The following information is captured for each type of communication:

- What: The communication itself;
- Who: Audience for the communication;
- Why: Purpose of the communication;
- How: Delivery method for the communication;
- When: Timing and frequency of the communication; and
- Owner: Person or group responsible for the communication.

Table 5: Project Communication Matrix

What	Who	Why	How	When	Owner
Internal Project Team Communications					
Weekly Project Status Meetings	Project Sponsor	• Provide updates on upcoming and completed activities • Discuss project risks and issues, and approaches to manage them • Review new and open risks, issues, action items, change requests, and decisions	In person (whenever possible) or via phone	Weekly, or as needed	Project Director

What	Who	Why	How	When	Owner
		• Help ensure alignment between State and the CSDOP vendor			
Project Team Meetings	Project Team	• Plan for and perform project work • Discuss and make project decisions	In person (whenever possible) or via phone	As needed based on project activities	Project Director and Project Sponsor
Steering Committee Meetings	Project Sponsor and Other Steering Committee members (Project Director Upon request)	• Review high-level project progress • Discuss open risks and issues, and strategies to mitigate and resolve them, respectively • Discuss and make project decisions • Review and approve/deny change requests • Discuss and share feedback on CSDOP vendor deliverables • Provide direction to, and act on recommendations from, the Project Director	In person	Weekly (Wednesday)	Project Sponsor
Weekly Status Report	Steering Committee	• Provide updates on upcoming and completed	Email	Weekly (Tuesday)	Project Director

What	Who	Why	How	When	Owner
		activities and project risks, issues, action items, change requests, and decisions	SharePoint		
Project Documents, Risks, Issues, Decisions, Action Items, Team Contact Information, and Team Calendar	Project Team and Executive Sponsor	• Provide access to up-to-date information in a single, centralized location • Track and manage items in lists and the team schedule • Promote transparency • Store project information for posterity and future reference	SharePoint	Ongoing	Project Director
Project-Specific Stakeholder Engagement Activities					
Project Kickoff Meeting	Branch Leadership Team	• Introduce the project, its purpose, goal, objectives, etc. • Provide the high-level direction and plan • Answer questions and solicit feedback • Build awareness and buy-in for change	In person	End of August 2017	Project Sponsor and Executive Sponsor

What	Who	Why	How	When	Owner
Staff Engagement Sessions	Eligibility, Customer Services, and Health Care Outreach Branch Staff; Branch Leadership Team	• Introduce the project, its purpose, goal, objectives, etc. • Gather feedback and information regarding processes, services, challenges, success criteria, etc. • Answer questions and address concerns • Build awareness and buy-in for change	In person (meetings and direct observation)	September 2017	BerryDunn
Process Design Sessions	Branch Leadership Team	• Solicit feedback on challenges with current processes and opportunities for improvement in the future	In person	October 2017	BerryDunn
Stakeholder Focus Group 1	Service Providers	• Introduce the project, its purpose, goal, objectives, etc. • Gather feedback and information regarding processes, services, challenges, success criteria, etc.	In person	Estimated September/ October 2017	BerryDunn

What	Who	Why	How	When	Owner
		• Answer questions and address concerns • Build awareness and buy-in for change			
Stakeholder Focus Group 2	Residents of State Including Beneficiaries	• Same as Stakeholder Focus Group 1	In person	Estimated September/ October 2017	BerryDunn
Stakeholder Focus Group 3	Other Community Partners and DHS Divisions	• Same as Stakeholder Focus Group 1	In person	Estimated September/ October 2017	BerryDunn
Web Survey 1	Eligibility, Customer Services, and Health Care Outreach Branch Staff; Branch Leadership Team	• Gather feedback and information regarding processes, services, challenges, success criteria, etc. • Build awareness and buy-in for change	Anonymous online survey	October 2017	BerryDunn
Web Survey 2	Eligibility, Customer Services, and Health Care Outreach Branch Staff; Branch Leadership Team	• Gather feedback and concerns regarding proposed changes to customer service delivery model	Anonymous online survey	Early/mid-2018	BerryDunn
Web Survey 3	To Be Determined	• To be determined as needed	To be determined	To be determined	BerryDunn

What	Who	Why	How	When	Owner
Training Sessions	Eligibility, Customer Services, and Health Care Outreach Branch Staff; Branch Leadership Team	• Prepare staff and leaders to deliver the optimized customer service delivery model	In person	Prior to implementation (estimated mid-2018)	BerryDunn and Training Office and Team
Leadership Development Plan and Retreats	Branch Leadership Team and Steering Committee	• Develop the skills needed to lead the changes and provide opportunities for dialogue	In person	August 2017; early/mid-2018	BerryDunn
Leveraging Existing Communications (within the State)					
Staff Meetings	Eligibility, Customer Services, and Health Care Outreach Branch Staff	• Communicate progress • Address questions • Capture feedback and reactions • Check on effectiveness of communications (e.g., do they want more or fewer updates?)	In person	Eligibility Branch: Minimum of 1x/week Customer Services Branch: Daily Health Care Outreach Branch: 2x/week	Steering Committee and Branch Leadership Team
Branch Leadership Team Meetings	Branch Leadership Team	• Provide tools and messages for the team to communicate with their respective staff members • Same as staff meetings	In person	Quarterly	Steering Committee

What	Who	Why	How	When	Owner
BA/SO Meetings	BA/SO	• Provide updates on project milestones and deliverables • Share significant accomplishments and upcoming activities • Gather different perspectives and solicit feedback on decisions	In person	Last BA/SO meeting of the month (Wednesday)	Project Sponsor
State Administrator Meetings	State Administrator/ Project Executive Sponsor	• Provide updates on project milestones and deliverables • Escalate risks and issues unable to be mitigated and resolved, respectively, by the Steering Committee • Escalate decisions unable to be made by the Steering Committee • Discuss project resource needs	In person	Weekly	Project Sponsor
State SharePoint Site	Branch Leadership Team	• Provide project updates • Share project documents	Online (SharePoint)	As needed	Steering Committee

What	Who	Why	How	When	Owner
E-newsletter	Eligibility, Customer Services, and Health Care Outreach Branch Staff; Branch Leadership Team	• Introduce the project • Provide project updates • Request feedback	Email	To be determined	Project Sponsor
DHS Newsletter	All DHS Employees	• Introduce the project • Provide project updates • Request feedback	Email	To be determined	Steering Committee
DHS Intranet	State Staff and Leaders	• Provide project background information and updates • Offer answers to frequently asked questions • Provide a link to surveys	Intranet	To be determined	Technical Lead
Ad Hoc Updates	Governor's Office, State Legislature, and Other State Agencies	• Provide project updates and help ensure alignment with other State initiatives and priorities	Email, phone, or in person	As needed	Executive Sponsor
Leveraging Existing Communications (External to the State)					
Ad Hoc Notices	Residents of State Including Beneficiaries	• Benefits and impact of changes in customer service	Paper, email, or in person at eligibility offices	As needed	Steering Committee

What	Who	Why	How	When	Owner
DHS Websites	Stakeholders within and external to the State	• To be determined as needed (e.g., project updates, impact to them)	Online	As needed	Steering Committee
Web Page, Meetings, and Newsletter	Service Providers	• Update, alignment, and inclusion for providers	Online, email, or in person	As needed	Steering Committee (via Health Care Service Branch Administrator)
Business All in One (BAIO)	Stakeholders calling Customer Services Branch	• To be determined as needed	Phone	As needed	Steering Committee
Meetings/Visits/ Presentations	Residents of State Including Beneficiaries; Community Partners	• To be determined as needed	In person	As needed	Health Care Outreach Branch (may also partner with individuals from Eligibility and Customer Services Branches)
Ad Hoc Updates	CMS	• Provide project updates and help ensure alignment with other State initiatives and priorities	Email, phone, or in person	As needed	Executive Sponsor

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XXX Health Network

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Change Management – Resistance Management Plan

Version: V1.0

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Submitted on:
XXXX, 2019

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System Integrator Re-Procurement Planning Services

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STATUS REPORT

RESULTS FOR THE PERIOD: XXX

Status Report #21

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XXX

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Table i: Version History

Version	Date	Description
Status Report #21	XXX	Updated draft delivered to XXX