

**PROJECT NAME: County APD Process Reengineering Project**

<b>Sponsors:</b>	<i>OSI - Carlos Ramos CDSS – Bob Garcia CWDA - Meg Sheldon</i>
<b>Project Director:</b>	<i>Crystal Cooper</i>
<b>Project Manager:</b>	<i>Jamie Barrett</i>
<b>Customer:</b>	<i>County, OSI, CDSS</i>
<b>Updated By:</b>	<i>Jamie Barrett</i>
<b>Charter Version Number:</b>	<i>1.0</i>
<b>Approved By:</b>	<i>Carlos Ramos Paul Benedetto Bob Garcia Cal Rogers Eric Fujii Meg Sheldon</i>
<b>Approval Date:</b>	

**SCHEDULE:**

<b>Start Date:</b>	<i>May 7, 2007</i>
<b>End Date:</b>	<i>November 16, 2007</i>

**OBJECTIVE STATEMENT:**

*Develop a process that ensures timely decisions with reduced escalations in the County APD approval process by developing a single consistent, understandable, and auditable approach to County APD submissions.*

**IN SCOPE:**

*The County APD Process reengineering scope includes:*

- 1. County APD Process*
- 2. County APD Template*
- 3. County APD Timeline*
- 4. County APD FAQ*
- 5. County APD Roles & Responsibilities*
- 6. County APD SLA*
- 7. County APD Training Materials*
- 8. County APD Communication Process & Plan*
- 9. Quarterly APD Metrics*
- 10. County APD Definitions for existing Regulations*
- 11. CAPE / APD Intersection Points*

**OUT OF SCOPE:**

*The County APD Process Reengineering Deliverables will not include:*

- 1. APD Regulations and Division 28 changes*
- 2. Tool/System Development*
- 3. CAPE Business Process/System Reengineering*
- 4. SAWS Consortia APD Process*

**PROJECT TRADE-OFF MATRIX**

<b>Resources:</b>	M
<b>Schedule:</b>	L
<b>Scope:</b>	S

Select a different flexibility letter for each constraint. **Use each letter only once.**

L = Least Flexible  
S = Somewhat Flexible  
M = Most Flexible

**DELIVERABLES:**

*The County APD Process Reengineering Deliverables are:*

- 1. County APD Process*
- 2. County APD Template*
- 3. County APD Timeline*
- 4. County APD FAQ*
- 5. County APD Roles & Responsibilities*
- 6. County APD SLA*
- 7. County APD Training Materials*
- 8. County APD Communication Process & Plan*
- 9. Quarterly APD Metrics*
- 10. County APD Definitions for existing Regulations*

**MILESTONES:**

- 06/25/2007 Process Workflow Complete*
- 07/10/2007 Roles and Responsibilities Complete*
- 07/24/2007 Templates Definition Complete*
- 08/07/2007 Communication Process Complete*
- 08/14/2007 FAQ Complete*
- 08/31/2007 Draft Process Complete*
- 09/05/2007 Timeline & Metrics Complete*
- 09/12/2007 SLA Complete*
- 09/19/2007 Regulation Definition Complete*
- 10/03/2007 Process Finalized*
- 10/18/2007 Transition Plan Complete*
- 10/29/2007 Communication Plan Complete*
- 11/13/2007 Web Deployment Complete*
- 11/16/2007 Training Complete*

**BACKGROUND:**

*The approval process that the Counties currently go through for acquisition of electronic data processing equipment and related services is not clearly defined. The responsibility for review and approval are divided between OSI and CDSS and are confusing to all stakeholders. The process varies among the different OSI projects. In one project the process is too time consuming, in some cases taking 18 months to receive approval. This has led to dissatisfaction from the counties.*

**APPROACH:**

The County APD Process Reengineering Project approach will include the following steps:

1. Assess the Current 'As-Is' Environment
2. Develop the Future 'To-Be' Deliverables
3. Develop the Transition Plan

**BENEFITS:**

As a result of the County APD Process Reengineering Project the following benefits will be realized:

1. County will see an overall time saving from submission of the County APD to final disposition.
2. OSI and CDSS will have better information from the counties for more timely reviews and approvals.
3. Transparency of process to all stakeholders.
4. Involvement of all stakeholders throughout the project for consensus and understanding on process.
5. Development of an expedited State APD review and approval.
6. Improve OSI/CDSS credibility with Federal Funding Partners.

**SUCCESSFUL COMPLETION CRITERIA:**

County APDs submitted in support of County requests are reviewed and approved by the State within an agreed to timeframe documented as the Service Level Agreement in the County APD Review and Approval Process.

**DEPENDENT PROJECTS:**

None.

**PROJECT RISKS:**

The APD Process Reengineering Project has the following risks:

- Resources will not be available to support the project deliverables
- Stakeholders will not agree to support the recommendations of the workgroup
- Large number of stakeholders to manage that may impact deliverable timeline: OSI, County and CDSS

**ASSUMPTIONS and CONSTRAINTS:**

Assumptions:

1. Adequate resources will be provided
2. Executive support will be provided throughout

Constraint:

1. Process must comply with State, Federal and County guidelines.
2. We cannot change the Federal APD Approval Process
3. We cannot change federal or state regulations on approval requirements for EDP (Electronic Data Processing) projects through this project

**RESOURCES:**

Project Team Members	Team Role	Number of Hours Required
Jamie Barrett	Project Manager	16 / Wk
Tami Tactacan	Business Analyst	40 / Wk
Debra Mack* / Jo Anne Takashima*	CWS/CMS Lead	50 / Wk
Kristine Dudley*	SAWS Lead	10 / Wk
Meg Sheldon*	CWDA Lead	10 / Wk
Margie Chan*	CDSS Fiscal Lead	10 / Wk
Yvonne Lee / Debbie Rose	CDSS Program Lead-SAWS	10 / Wk
Ann Chehak	CDSS Program Lead- CWS/CMS	10 / Wk
Pat Cruz*	CDSS Legal Lead	10 / Wk

\* All Project Team members are responsible for the deliverables in their team group

**BUDGET:**

<b>Initial Budget:</b>	\$ 0
<input checked="" type="checkbox"/> <b>Estimated</b>	<input type="checkbox"/> <b>Actual</b>
<b>Ongoing Costs:</b>	\$ 0
<input type="checkbox"/> <b>Estimated</b>	<input checked="" type="checkbox"/> <b>Actual</b>
<input type="checkbox"/> Cost/Benefit Analysis Required? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

**EQUIPMENT REQUIRED:**

Existing Workstations
Existing Website and Training equipment (if required)

**OSI SPONSOR SIGNATURE:**

**DATE:**

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**CDSS SPONSOR SIGNATURE:**

**DATE:**

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**CWDA SPONSOR SIGNATURE:**

**DATE:**

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