2022 - 2024 IT Strategic Plan

Agency: 720 Dept of Behavioral Health & Developmental Svcs

Date: 6/3/2022

Current IT State

In this section, describe the high-level strategy the agency will use to manage existing operational IT investments over the next year to 5 years. This section should align with identified Business Requirements for Existing Technology (BReTs). At minimum, please address the following questions in your description of your agencys strategy for managing existing operational IT investments:

Are there existing IT investments that will require additional funding over the next year to 5 years, such as license renewals, re-competition of current IT contracts, or system enhancements required by the Agency Strategic Plan?

If there are systems that will no longer support the agencys business needs, either through poor performance or excessive cost, how does IT leadership in the agency plan to address the issues?

If the agency does not have the staff or funding to meet increasing demand for IT services, how will IT leadership fulfill the requests?

The Virginia Department of Behavioral Health and Developmental Services (DBHDS) has oversight of the community-based behavioral health system of care and directly operates psychiatric hospitals and treatment facilities, and a central office. DBHDS employs approximately 6,000 staff throughout Virginia who have a wide variety of IT needs. Staff rely on efficient, effective information technology to meet vital clinical needs in the state facilities, and to provide financial resources, policy direction, automated, risk management and oversight for the entire system. Information Technology is a critical component to support DBHDS' ability to achieve its mission of "supporting individuals by promoting recovery, self-determination, and wellness in all aspects of life," and the vision of "A life of possibilities for all Virginians."

Virginia's behavioral health and developmental disabilities services system is comprised of 40 locally run community services boards, 12 state-operated facilities consisting of almost 3000 beds, and over 800 private providers. The system serves children and adults who have or who are at risk of mental illness, serious emotional disturbance, developmental disability or substance use disorder. These facilities are open 24 hours 7 days a week and often find themselves working with IT supporting entities that don't understand or consider that requirement. It is imperative that they are recognized as critical systems to support their critical function.

DBHDS is consistently at or above census capacity at all 12 facilities. Dealing with COVID 19, on top of high census is a major contributing factor to high turnover, high volumes of contract staff members, and extremely high rate of vacant positions.

The Office of Information and Technology provides and supports technical solutions and tools to DBHDS employees to assist them in achieving program and business goals. The office specifies, implements, and delivers technology tools including communication, hardware, software, and data management systems that facilitate monitoring, measuring, and reporting on delivery and outcomes of all programs managed by DBHDS staff. The office has four primary areas: Enterprise Applications, IT Project Management, Operation and Maintenance, and Data Management.

The Office of Information Security is responsible for managing and ensuring an efficient and effective information security program that provides for the protection of the Agency's information assets. This includes managing and directing the agency's overall information security policies and procedures, applications and network security issues; supervising staff who will assist and/or carry out relevant information security system functions such as protecting, detecting and correcting controls for IT systems, disseminating relevant security information to staff and partners,

administering security related training, and conducting security investigations. The office is headed by the Chief Information Security Officer who maintains a direct line of communication to the DBHDS Commissioner.

Factors Impacting the Current IT

In this section, the agency will describe the changes in their business environment that will require or mandate changes to the agencys current IT investments. These are requirements and mandates from external sources, such as other agencies or business partners, the agencys customer base, product and service providers, or new federal or state legislation or regulations. The agency must identify the business value of the change, any important deadlines that must be met, and the consequences if the deadlines are not met. In your discussion, be sure to note whether the proposed enhancements are funded or not. If the agencys existing current IT investments will not need enhancement due to requirements or mandates from external sources in the foreseeable future, the agency should enter the following text rather than leave the Factors Impacting the Current IT section blank

For each mandated change, summarize your agencys response from your Agency Strategic Plan, and is it the opinion of agency IT leadership that the IT portion of the response is adequately funded?

Do the mandated changes effect IT in other Commonwealth agencies, or in other states? If so, how?

DBHDS Information Technology and the Information Security Office, in continued partnership with senior leadership, focus on work that helps to promote the North Star plan of Commissioner Nelson Smith. The three main areas the plan is focused on are listed below:

• Workforce – Staffing is a major concern throughout healthcare as the pandemic is driving many workers to jobs that are safer and less stressful. We need to build and retain our workforce and create a pipeline for the future, which would have a positive impact on the entire system.

• Comprehensive Continuum of Care – We must rebalance our system from a reliance on intensive interventions like inpatient and focus intently on prevention and wellness.

• Data – Virginia is spending millions of dollars to improve and expand developmental disability and behavioral health programs in the community but we lack the data needed to know if people are getting better. This needs to change.

In August 2012, the United States District Court for the Eastern District of Virginia approved the DOJ Settlement Agreement. In May of 2019, the court entered an order directing the Commonwealth to create a document library for all measurements and artifacts of the Commonwealth's compliance with the Settlement Agreement. This library is in production and will be optimized during the 2022-2024 timeframe. The court required the agency meet the June 30, 2020 start date of collecting data to report on 328 compliance indicators (CI) and the ability to exit the Settlement Agreement depends on the successful reporting of these indicators.

DBHDS Information Technology and Security staff will continue to work with the state auditor of public accounts (APA) to reduce the current number of audit points to zero for our respective areas. A major component of this is the required centralization of our account management processes. The process change will allow the agency to adhere to timely enrollment of new employees as well as the timely removal of access of an employee upon termination. The process change will also bring us closer to a single authentication tool vs. different tools/processes for what are currently extremely decentralized processes.

The 12 DBHDS facilities require support and connectivity 24 hours a day, 7 days a week, 365 days a year. There are frequent outages at one facility, some facilities, or all facilities almost every week. This lack of a consistent, reliable network adds unnecessary risk and additional work to our patients/residents/clients and staff. These outages ultimately affect patient safety and delivery of care.

Proposed IT Solutions

In this section, describe the high-level strategy the agency will use to initiate new IT investments over the next year to 5 years in support of the agency strategic objectives documented in your Agency Strategic Plan. The agency does not need to consider specific technologies at this time, however, the strategy should identify how the IT implementation will provide business value to the organization. This section should align with identified Business Requirements for New Technology (BRnTs). At minimum, please address the following questions in your description of your agencys strategy for initiating new IT investments:

What are the most important solutions, based on the priority assigned to the requirements by the business sponsors in your agency, and what is the approach to achieving these priority solutions?

If any new IT initiatives will be started in the upcoming budget biennium, is it the opinion of agency IT leadership that it is adequately funded?

Does the agencys current IT staff have the appropriate skill set needed to support future agency technologies? If not, what skill sets need to be acquired?

If the agency will be engaged in multiple new IT initiatives, how will agency IT staff and agency subject matter experts be used across the initiatives?

For the ITSP period 2022-2024, DBHDS has established the groundwork for multiple initiatives moving forward. These initiatives are broken into three general sections, including required (either mandated legislatively, by regulation or by contract). These will be further explained in the following text.

I. **Required/legislative/regulatory mandates/contractual issues. **

1. Department of Justice (DOJ) Portfolio

A. Waiver Management System (WaMS) including the Department of Justice Settle Agreement enhancements and the Medicaid Enterprise System (MES) project

- B. TRAC-IT Early Intervention (ITOTS Replacement)
- C. Crisis Call Center
- D. The Individual and Family Support Program (IFSP)
- E. CONNECT Implementation (OLIS Replacement)
- F. Incident Management System Replacement project

G. Data Exchange Program (including Unique Identifier Solution, Taxonomy, Enterprise Data Warehouse, and Data Exchange Platform)

- 2. CMS and Joint Commission Requirements for the EHR
- 3. Tracers with AMP plus CMS
- 4. APA, Internal and Security Audit Remediation
- 5. Food Management System Replacement (currently CBORD)
- 6. Application Reduction
- 7. Cardinal HCM Enterprise
- 8. SQL DB/Server 2012 Upgrade
- 9. Power BI Implementation (Transition from Tableau)
- 10. Box Migration

II. **Transformational **

- 1. Standardize and implement enterprise solutions
- 2. AVATAR Replacement
- 3. Pilot Approach
- 4. Enterprise EHR optimization
- 5. Forensic Information Management System upgrade to Cerner Millennium
- 6. Data Trust
- 7. Optimization of data across the agency and HHR
- 8. Infrastructure Optimization and SDWAN
- 9. Diveplane

III. **Standard Initiatives **

- 1. Maturing ITIB, including the addition of Concept Project Evaluation Process
- 2. Sensei adoption, PMO maturation and process improvement
- 3. Server 2019 upgrade
- 4. Failover/Standby Server/Databases
- 5. Website Redesign (Communication)
- 6. Hospital Operation System HR (HOPS HR)
- 7. SynMed
- 8. EHR Stabilization and Standard Upgrades
- 9. Grants Management Compliance Tool
- 10. Power App Development
- 11. Policy Management
- 12. Messaging Services Migration to Microsoft

Required Legislatively, Mandated by Regulation or Mandated by Contract

There are many initiatives underway at DBHDS that are required by legislative mandate, mandated by regulation or mandated by contract. Some examples would include Department of Justice (DOJ) initiatives, enhancements to the Electronic Health Record to include Center for Medicare and Medicaid Services (CMS) and The Joint Commission regulation requirements, and more to be explained further below.

Department of Justice (DOJ) Portfolio

While the compliance indicators on which the agency must report for the Settlement Agreement with the Department of Justice are not dependent on IT, the ability to collect and analyze data and report on the compliance indicators most certainly will be improved with more IT automation and enhanced systems and reporting capabilities. In preparation for the Commonwealth to exit the Settlement Agreement, remain compliant, and work towards sustainable reporting there are several projects underway in 2022 thru 2024 focused on these goals in the Department of Justice Portfolio. This includes Waiver Management System (with DOJ and MES Enhancements), Early Intervention Part C Data System project (ITOTS replacement), the Crisis Call Center project (STEP VA), Individual and Family Support Program (IFSP), Connect (the Licensure Reengineering), Incident Management System Replacement (currently CHRIS), and the CSB Data Exchange Project.

The **Waiver Management System (WaMS)** including the Department of Justice Settle Agreement enhancements and the Medicaid Enterprise System (MES) project provides updates and enhancements. A mandated major update to DMAS' system is currently underway which requires significant changes to DBHDS WaMS system. This is being accomplished by impleme

IT Strategic Plan Budget Tables

Agency:	720 Dept of Behavioral Health & Developmental Svcs				
Date:	6/3/2022				
		Current I	T Services		
		Costs Ye	ar 1	Costs Year 2	
Category		GF	NGF	GF	NGF
Projected Service F	ees	\$6,521,538.00	\$631,456.00	\$6,717,184.00	\$650,400.00
VITA Infrastructure	Changes				
Estimated VITA Infr	rastructure	\$6,521,538.00	\$631,456.00	\$6,717,184.00	\$650,400.00
Specialized Infrastr	ucture	\$17,616,344.00		\$18,497,161.00	
Agency IT Staff		\$7,150,441.00		\$7,507,963.00	
Non-agency IT Staf	f	\$500,734.00		\$525,771.00	
Cloud Computing S	Service	\$350,000.00		\$350,000.00	
Other Application C	Costs	\$5,316,289.00		\$5,582,103.00	
Total:		\$37,455,346.00	\$631,456.00	\$39,180,182.00	\$650,400.00

Proposed IT Investments				
	Costs Year 1		Costs Y	ear 2
Category	GF	NGF	GF	NGF
Major IT Projects:	\$9,854,403.00	\$500,000.00	\$3,607,653.00	\$500,000.00
Non-Major IT Projects:	\$730,000.00			
Agency-Level IT Projects:	\$6,028,853.00			
Major Stand Alone IT Procurements:				
Non-Major Stand Alone IT Procurements:				
Agency-Level Stand Alone IT Procurements:				
Procurement Adjustment for Staffing:				
Total:	\$16,613,256.00	\$500,000.00	\$3,607,653.00	\$500,000.00

Projected Total IT Budget				
	Costs Year 1		Costs Year 2	
Category	GF	NGF	GF	NGF
Current IT Services:	\$37,455,346.00	\$631,456.00	\$39,180,182.00	\$650,400.00
Proposed IT Investments:	\$16,613,256.00	\$500,000.00	\$3,607,653.00	\$500,000.00
Total:	\$54,068,602.00	\$1,131,456.00	\$42,787,835.00	\$1,150,400.00

Business Requirements For Technology

Agency:	720 Department of Behavioral Health and Developmenh G Wg
Date:	6/3/2022

2020- 22 Enable Efficient Data Retention, Exchange

BRT Type:	Business Requirement for New Technology	
Date Submitted:	3/26/2021	
Mandate:	Yes	
Mission Critical:	Yes	
Description		

Description:

DBHDS completed a Data Strategy Review to elicit recommendations to determine how to evolve to a future state where their data management enables efficient data retention, exchange, analysis, and reporting. These business functions are critical priorities that require material improvement from the current state to support existing programmatic requirements related to provision of quality care to individuals with behavioral health needs. In addition to continued expansion of the in-house Data Warehouse, additional technologies that connect the Department to CSB and private provider data sources will provide new reporting and analytics capabilities. This will enable DBHDS to better track of patients and continue to provide quality care to individuals with behavioral health needs.

2022- 24 Ensure the Physical Security of People i

BRT Type:	Business Requirement for Existing Technology
Date Submitted:	3/26/2021
Mandate:	Yes
Mission Critical:	Yes
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Description:

DBHDS Facilities need comprehensive physical security systems in order to ensure staff, family, and individual safety at our facilities. Security systems can include, but are not limited to, duress systems, door access systems, and overhead enunciators.

2022-24	Ensure	Financial	Technology	Remains	Sunn
2022-24	Liisuie	i manciai	recimology	Remains	Supp

BRT Type:	Business Requirement for New Technology
Date Submitted:	3/26/2021
Mandate:	Yes
Mission Critical:	Yes
Description:	

Replace the Financial Management System (FMS) application with modern technology that is cheaper to support, provides more robust reporting and analysis functions, and more easily integrates with Commonwealth partner financial applications such as Cardinal, Performance Budgeting, and the future CIPPS replacement. Also assess other financial technologies for potential inclusion in a long-term ERP replacement strategy.

2022-24 Align Early Intervention Programs with Fed

BRT Type:	Business Requirement for Existing Technology
Date Submitted:	3/26/2021
Mandate:	Yes
Mission Critical:	Yes

Description:

Currently, the Infants and Toddlers Online Tracking System (ITOTS) does not comply with the U.S. Dept. of Education (DOE) newly-revised accountability system under the Individuals with Disabilities Education Act (IDEA). The new Results Driven Accountability (RDA), developed by the Office of Special Education Programs (OSEP), shifts the department's accountability efforts from a primary emphasis on compliance to a framework that focuses on improved results for children with disabilities, while continuing to ensure the Commonwealth meets IDEA requirements. RDA emphasizes improving child outcomes and DBHDS needs to move in a direction that stresses improvement over mere compliance.

2022-24 Expand Effort to Automate and Streamline

BRT Type:	Business Requirement for Existing Technology	
Date Submitted:	3/26/2021	
Mandate:	Yes	
Mission Critical:		

Description:

Expand use of the OneMind Electronic Health Record System (EHR), a suite of 29 applications that provides an electronic record of patient health information, including patient demographics, progress notes, clinical assessments, medication orders, past medical history, laboratory data and therapy reports. Also consolidate applications across facility lines for other clinical systems such as laboratory information systems (LIS), geriatric minimum data set reporting (MDS), and pharmacy systems.

2022-24 Facilitate CSBs Locating Inpatient Psych		
BRT Type:	Business Requirement for Existing Technology	
Date Submitted:	3/26/2021	
Mandate:	Yes	
Mission Critical:	Yes	

Description:

The Code of Virginia requires DBHDS to develop and administer a psychiatric bed registry. The bed registry is an important tool for Community Services Boards (CSBs) to locate inpatient psychiatric beds for individuals in crisis and to comply with the mandates of the last resort legislation. Since the establishment of the bed registry, first launched in March of 2014, and the implementation of the last resort legislation, every individual under a temporary detention order, who has needed a psychiatric hospital bed has been provided with the needed bed. Additionally, the bed registry is a valuable tool to help CSBs find alternative beds rather than relying upon state hospital beds.

2022-24 Implement a Consolidated All Critical Ev

BRT Type:	Business Requirement for New Technology	
Date Submitted:	3/26/2021	
Mandate:	Yes	
Mission Critical:	Yes	

Description:

DBHDS collects individual and facility level data regarding critical events along with triggers and thresholds data. Currently, the Access-based event reporting software that is used by the State facilities is not centralized and doesn't permit the Central Office (CO) to capture system-wide data related to risk-management. Consolidating these systems into an agency-wide critical event reporting platform will allow DBHDS to retire/eliminate costs for 16 individual Event Tracking applications and Access databases, the Seclusion & Restraint application and database, portions of the Forensics Information Management System (FIMS), the PAIRS application and database, and to enhance or eliminate the current CHRIS application and database. The initiative is tentatively titled All Critical Events System (ACES).

2022-24 Improve Performance of Information Secur

BRT Type:	Business Requirement for New Technology
Date Submitted:	3/26/2021
Mandate:	Yes
Mission Critical:	Yes

Description:

Continue implementation of technology that the DBHDS Information Security Office uses to manage access and application controls, vulnerability scanning, application and administrator audit logging, and the monitoring of data and network activities as required by VITA in the COV ITRM SEC501-09 Information Security Standard. These regulations are also tied to Virginia Code Title 2.2 Chapter 20.1 § 2.2-2009.

2022-24 Improve Reporting and Analytic Performan		
BRT Type:	Business Requirement for Existing Technology	

Date Submitted:	3/26/2021
Mandate:	Yes
Mission Critical:	Yes

Description:

Data Reporting and Analytics will provide via a change approach to the overall Data Warehouse Strategy. The DW will e built using individual, services and providers as key elements. A master data management process will ensure de-duplication of the disparate systems in use by DBHDS.

2022-24 Increase Frequency and Quality of Licens

BRT Type:	Business Requirement for New Technology
Date Submitted:	3/26/2021
Mandate:	Yes
Mission Critical:	Yes

Description:

Upgrade or replace the current Department of Behavioral Health and Developmental Services' (DBHDS) licensing system with a system that will be used by DBHDS for licensing specialists and providers. DBHDS has a Va. Performs key measure to increase the percentage of licensed service providers that receive a visit from a licensing specialist per quarter and per year. The new system will also deliver improved functionality for performance reporting and data mining, event tracking, public-facing search options, and integration between other state agencies who use provider data.

2022-24 Increase Oversight over Third-Party Prov

BRT Type:	Business Requirement for Existing Technology
Date Submitted:	3/26/2021
Mandate:	Yes
Mission Critical:	Yes

Description:

Evaluate methodologies, assign resources, and execute a formal process for gaining assurance that third party providers have secure IT environments to protect sensitive data.

2022-24 Integrate EHR with Billing and Registrat

BRT Type:	Business Requirement for Existing Technology
Date Submitted:	3/26/2021
Mandate:	Yes
Mission Critical:	Yes

Description:

The OneMind EHR system does not have full integration with the patient billing and registration systems at the facilities. While some integration exists, to date integration has been set aside in favor of expanding the use of the EHR to new facilities.

2022-24 Reduce/Eliminate servers or any IT devel

BRT Type:	Business Requirement for Existing Technology
Date Submitted:	3/26/2021
Mandate:	Yes
Mission Critical:	Yes

Description:

Move facility applications from their geographically and organizationally scattered locations to a central office managed development, test, and production environment stack.

2022-24 Support Business Process Re-Engineering

BRT Type:	Business Requirement for Existing Technology
Date Submitted:	3/26/2021
Mandate:	Yes
Mission Critical:	

Description:

Implement a system-wide (CO and facilities) collaboration system that provides a single integrated location where employees can streamline business processes, efficiently collaborate, find organizational resources, and manage content.

2022-24 Support the System Tr	ansformation Excell
BRT Type:	Business Requirement for Existing Technology
Date Submitted:	3/26/2021
Mandate:	Yes
Mission Critical:	Yes
Description:	

DBHDS' System Transformation Excellence and Performance (STEP-VA) is an innovative initiative for individuals with behavioral health disorders featuring a uniform set of required services, consistent quality measures, and improved oversight in all Virginia communities. The first phase is implementing Same Day Access at 8 pilot CSBs. The next phases of STEP-VA include completing the work required for all of Virginia's CSBs to implement Same Day Access, the installment of primary care screening and tight linkages to medical providers in all CSBs, addressing existing gaps in outpatient services, including medication assisted treatment for substance use disorders, and improving targeted case management services for children.

BRnT DBHDS Telehealth Solution

BRT Type:	Business Requirement for New Technology
Date Submitted:	3/26/2021
Mandate:	
Mission Critical:	
Description:	

Description:

DBHDS requires an Enterprise HIPAA compliant telehealth solution that provides the following to meet clinician and administration requirements.

Ability to expand behavioral and mental health programs by providing virtual behavioral and mental health in 1-1 or group sessions that patients may join from their homes.

Ability to examine and treat patients remotely (virtually)

Ability to utilize video communications to facilitate widespread, immediate coordination and real-time assessment for disaster, pandemic, and emergency responses.

Ability to provide progressive health education and preventative care for high-risk patient populations.

Ability hold virtual training sessions to reduce employee travel with cost-effective continuing education and ongoing training for healthcare professionals.

Ability to connect physicians, patients, and specialists for regular or urgent care appointments. Easily screen share medical results with all participants.

HD Video and Audio, Consistent high-quality video, even in low-bandwidth environments.

Meets HIPAA compliance with minimum 256-bit AES encryption

Ability to recorded session for consultation and review (local desktop recording with HIPAA BAA for clinical application)

Electronic Health Record and Medical device integration

Chrome Extension allowing participants to schedule telehealth meetings directly from Google Calendar.

Unified Login using Okta, support for single sign-on through Okta identify platform

Crisis Call Center_BRT				
BRT Type:	Business Requirement for New Technology			
Date Submitted:	3/26/2021			
Mandate:	Yes			
Mission Critical:	Critical: Yes			
Description:				
Crisis Call Center- Data Platform				
DBHDS_Food Service Management				
BRT Type:	Business Requirement for New Technology			
Date Submitted:	3/26/2021			
Mandate:				
Mission Critical:	Yes			
Description:				

Governor Ralph Northam's "Executive Order 19: Cloud Service Utilization and Readiness" requires agencies to take specific actions starting this month and continuing through fall 2019.

The order requires VITA to adopt a model for evaluating and incorporating cloud services into the commonwealth's information technology (IT) strategy and services. VITA has: begun requirements gathering for new RFP

Started the process of creating a cloud services model

Begun obtaining information about agency systems that can be migrated to a cloud environment

Provided an overview of the process at the recent agency information technology resources (AITR) meeting

Planned additional announcements to AITRs regarding remaining steps

Included cloud-related services and migration to the new data center in the recently awarded infrastructure contracts

Additionally, VITA and all systems must move from the Commonwealth Enterprise Solutions Center (CESC) in Chester by December of 2021. One related strategy is to reduce the number of physical servicers at CESC to prepare for the move. This means migration to the cloud must be completed by that time. It is imperative to start planning now.

Agencies' IT staff members have been asked to complete cloud assessments and should be using the results to identify resource requirements. VITA encourages agencies to evaluate their resources and discuss resource planning with the appropriate financial staff to ensure work can begin as required. Resource needs should be included requests in the upcoming budget cycle. enabled, VITA will

To identify which existing solutions can be migrated to the cloud and ensure all new IT solutions proposed be cloud- issue a hosting standard in the coming weeks. This standard will define terminology and identify requirements agencies must consider when implementing cloud-based IT solutions.

	Trac	cers	BRN	IT
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BRT Type:	Business Requirement for New Technology
Date Submitted:	5/3/2021
Mandate:	Yes
Mission Critical:	Yes

Description:

Tracers with AMP will give you the data and insights you need to efficiently manage risk and help your organization stay survey-ready. This web-based software solution anticipates, reduces and reports risk across your organization. You can analyze performance, compare sites and departments, and prioritize improvements with user-friendly dashboards and easy-to-build, automated reporting.

Western State Hospital - Ricoh

BRT Type:	Business Requirement for New Technology		
Date Submitted:	10/8/2021		
Mandate:			
Mission Critical:	Yes		
Description:			
VITA CONTRACT VENDOR - VA-191121-RICO			
PHASE 1 HARDWARE & SERVICES COSTS FOR MONTHS 1-3 WILL BE COVERED BY RICOH			

IT Strategic Plan Projects

Agency:	720 Department of Behavioral Health and Developmen		
Date:	6/3/2022		
Cardinal HCM Interfaces Project			
Category 2	Project Initiation Approval		

Cardinal will replace several legacy HCM systems that DBHDS currently uses on a daily basis.

DBHDS will need to secure contracts with vendors to design, build, test, interfaces and support DBHDS through the Cardinal HCM testing phase and ultimate deployment.

The interfaces will be:

1. DBHDS Kronos Timekeeping/Payroll File upload to Cardinal HCM module.

2. Cardinal HCM module extract to DBHDS FMS system.

3. Cardinal HCM module Employee and Position data extracts to DBHDS HOPS system.

In addition, Kronos will need to be reconfigured in order to capture Cardinal-specific timekeeping and payroll information. This will require that all pay and work rules (650+, in total) be changed and an extensive quality assurance and user acceptance testing (UAT) effort completed. Though much of the configuration can be completed by the current DBHDS Kronos System Administrator, she will require support for the creation of a detailed test plan, test cases for each pay and work rule, and tracking and execution of the UAT effort across 14 DBHDS facilities.

The Cardinal HCM interface testing phase will begin in September of 2020 and run through the end of December 2020. All DBHDS interfaces must be built and unit tested by August 2020. The Kronos reconfiguration effort must be completed by August 2020, as well.

Additional work will need to be completed on an inflexible schedule set by the Cardinal HCM Project team – i.e. HR data cleanup, attending workshops, gathering and providing information, testing, attending train the trainer sessions, etc. These activities need someone to coordinate and guarantee the appropriate subject matter experts are engaged, and that the information is gathered and returned within these tight deadlines.

End-user role-based Cardinal HCM Training will need to be coordinated across Central Office and the 14 Assembled Facilities for nearly all DBHDS employees.

Project Start Date	10/15/2019	Project End Date	5/1/2022
Estimated Costs:	Total	General Fund	Non-General Fund
Project Cost	\$2,158,526.00	\$2,447,726.00	

Estimated first year of biennium:	\$914,497.00	\$914,497.00	\$0.00
Estimated second year of biennium:	\$706,944.00	\$706,944.00	\$0.00

Project Related Procurements

There are no procurements for this project

DBHDS WaMS DOJ and MES Enhancements			
Category 4		Project Initiation	Approval
Funding and project to support the new enhancements in agreement with the Department of Justice (DOJ) Settlement of 2012; and to meet the requirements of the future Department of Medical Assistance Services (DMAS) new Medicaid Enterprise System (MES).			
Project Start Date	6/22/2020	Project End Date	5/1/2022
Estimated Costs:	Total	General Fund	Non-General Fund
Project Cost	\$894,000.00		
Estimated first year of biennium:	\$0.00	\$0.00	\$0.00
Estimated second year of biennium:	\$0.00	\$0.00	\$0.00

Project Related Procurements

Early Intervention Part	C Data System (ITOTS)		
Category 2	Project Initiation Approval		
Purchase a comprehensive early intervention data system (SaaS) to replace the current Infant and Toddler Online Tracking system (ITOTS).			
Project Start Date 9/30/2020 Project End 8/1/2022 Date			

Estimated Costs:	Total	General Fund	Non-General Fund
Project Cost	\$1,650,000.00		\$1,650,000.00
Estimated first year of biennium:	\$0.00	\$0.00	\$0.00
Estimated second year of biennium:	\$1,650,000.00	\$0.00	\$1,650,000.00

Project Related Procurements

There are no procurements for this project

Medicaid Enterprise Sys	tem (MES) Project		
Category 3		Investment Bus	iness Case Approval
The Department of Medical Assistance Services (DMAS) is transforming the current Virginia Medicaid Management Information System (VAMMIS) to the new Medicaid Enterprise System (MES) that will be required to interface with the existing Waiver Management System (WaMS) managed by DBHDS. This transformation is a federal mandate from the new Centers for Medicare and Medicaid services. This project will support the transformation of these systems by establishing connectivity between the WaMS system and the MES system interfaces and ensuring the delivery of services to the community through a well-managed service authorization and waiver system.			
Project Start Date	12/1/2020	Project End Date	7/9/2021
Estimated Costs:	Total	General Fund	Non-General Fund
Project Cost	\$813,731.25		
Estimated first year of biennium:	\$0.00	\$0.00	\$0.00
Estimated second year of biennium:	\$0.00	\$0.00	\$0.00

Project Related Procurements

CBORD Replacement - Statewide Food Service Project	
Category 3	Investment Business Case Approval

The purpose of this system is to assist in the management and control of food service operations throughout DBHDS including but not limited to state-of-the-art provision of food and diet preparation, nutritional analysis, menu planning, preparation of tray tickets and inventory control. The proposed system shall provide information necessary to comply with the standards and regulatory requirements.

Project Start Date	7/15/2022	Project End Date	7/31/2023
Estimated Costs:	Total	General Fund	Non-General Fund
Project Cost	\$2,848,000.00	\$2,848,000.00	
Estimated first year of biennium:	\$0.00	\$0.00	\$0.00
Estimated second year of biennium:	\$2,848,000.00	\$2,848,000.00	\$0.00

Project Related Procurements

Crisis Call Center Project	ct Tech Deliverables		
Category 3		Project Initiation	n Approval
Create a statewide call center data platform that can be used both by CSB staff (potentially a subcontracted private provider), private and state hospital staff, as well as Central Office staff. This is to assure that we can collect caller information from those in crisis (demographics), dispatch function, monitoring function(GPS enabled), linking to other services, bed registry function, and text and chat function.			
Project Start Date	11/30/2020	Project End Date	5/31/2022
Estimated Costs:	Total	General Fund	Non-General Fund
Project Cost	\$3,862,842.62	\$16,185,505.0 0	
Estimated first year of biennium:	\$0.00	\$0.00	\$0.00
Estimated second year of biennium:	\$2,985,836.00	\$2,985,836.00	\$0.00

Project Related Procurements

There are no procurements for this project

Category 3		Investment Bus	iness Case Approval
having specific sections services and state facility In order to support ongo fiscal year. CSBs also obt Continued funding from	ers with 39 community service boards (CSBs in the Virginia Code, to deliver mental healt to community transition services to individ bing provided program services, DHBDS obt ain local and other funding sources to supp the various sources requires tracking and re rovided, associated performance-based out	h, substance use uals in the Comm ains Federal and port these operation eporting back of	disorder, and developmental disability nonwealth. State funds to allocate to CSBs every ions. funding use that entails data around what
consolidation and integr	ns of data, processes, and information exch ation and a modern, adaptable, interoperab be a "Cloud" Soution. We will not know m	ble, streamlined n	nethod of exchange.
consolidation and integr	ation and a modern, adaptable, interoperable be a "Cloud" Soution. We will not know m	ole, streamlined n ore until we get t Project End	nethod of exchange.
consolidation and integr We are expecting this to	ation and a modern, adaptable, interoperable be a "Cloud" Soution. We will not know m	ole, streamlined n ore until we get t Project End Date	nethod of exchange. through the RFP process.
consolidation and integr We are expecting this to Project Start Date	ation and a modern, adaptable, interoperation and a modern, adaptable, interoperation be a "Cloud" Soution. We will not know model 4/13/2021	ole, streamlined n ore until we get t Project End Date General Fund	nethod of exchange. through the RFP process. 3/31/202 Non-General Fund
consolidation and integr We are expecting this to Project Start Date Estimated Costs:	ation and a modern, adaptable, interoperation and a modern, adaptable, interoperation be a "Cloud" Soution. We will not know model 4/13/2021	ole, streamlined n ore until we get t Project End Date General Fund \$1,000,000.00	nethod of exchange. through the RFP process. 3/31/202 Non-General Fund

CSB DX Procurement

DBHDS Incident Management System Project	
Category 2	Investment Business Case Approval

Installation of a comprehensive human rights information system, replacing CHRIS, PAIRS, and Inncident Tracker.

DBHDS expects to see cloud solution recommendations among the vendor responses.

PAIRS Protection and Advocacy Incident Reporting System.

The priority is to combine the reporting of Community Providers & amp; DBHDS Operated Facilities into a single system. This would include reporting of serious incidents, serious injuries, allegations of abuse and neglect, complaints about human rights violations, and instances of seclusion and restraint. The single system shall be scalable to combine reporting of Facilities for allegations of abuse and neglect, complaints about human rights violations, and instances of seclusion and restraint. Sometimes a single incident may need to be reported as both a serious incident/injury and an allegation of abuse or neglect (e.g., an individual falls and breaks his arm after being shoved by a staff member). Currently the provider must make two separate reports, one to licensing and one to human rights. Ideally they would enter the information in a single interface that would collect all information and send the relevant data to licensing and human rights staff.

Project Start Date	4/13/2021	Project End Date	6/30/2022
Estimated Costs:	Total	General Fund	Non-General Fund
Project Cost	\$5,000,000.00		\$5,000,000.00
Estimated first year of biennium:	\$3,000,000.00	\$0.00	\$3,000,000.00
Estimated second year of biennium:	\$500,000.00	\$0.00	\$500,000.00

Project Related Procurements

Tracers	
Category 2	Investment Business Case Approval

Sole source procurement from Joint Commission Resources, cloud SaaS, vendor hosted

The purpose of this project is to provide an enterprise solution to analyze DBHDS and facility-level performance against federal and accrediting agency requirements, assess and prioritize improvement projects, assess organizational risk, increase collaboration and build automated reports for leadership and frontline staff.

A solution is needed in order to align practice with regulatory requirements and will enhance our ability to provide oversight of the facilities in response to DOJ, APA and OSIG findings/comments. The tool will help facilities and Central Office monitor performance against DOJ requirements. Example, "DBHDS is not in compliance with the requirements of III.C.5.d, a mechanism to monitor compliance with performance standards for case management." In addition, the DBHDS indicator for Provision V.C.6 states "DBHDS has Policies or Departmental Instructions that specify requirements for Training Centers to report serious incidents, including, deaths, or allegations of abuse or neglect and to implement and monitor corrective actions." Audits relative to these corrective actions can be customized using this tool.

Project Start Date	7/1/2021	Project End Date	6/30/2022
Estimated Costs:	Total	General Fund	Non-General Fund
Project Cost	\$465,000.00	\$465,000.00	
Estimated first year of biennium:	\$0.00	\$0.00	\$0.00
Estimated second year of biennium:	\$465,000.00	\$465,000.00	\$0.00

Project Related Procurements

Tracers Procurement

Grant Management Program

Investment Business Case Approval

Dulles Technologies Partners will configure their WebGrants solution to meet project requirements. The solution will be configured to allow Finance to create the four major federal grant budgets and issue payments to CSBs and Non-CSB entities using an integration with Cardinal. DBHDS will use the Dulles Technology Partners Grants Management System state contract.

Project Start Date	4/1/2022	Project End Date	9/30/2022
Estimated Costs:	Total	General Fund	Non-General Fund
Project Cost	\$205,000.00	\$297,000.00	
Estimated first year of biennium:	\$0.00	\$0.00	\$0.00
Estimated second year of biennium:	\$0.00	\$0.00	\$0.00

Project Related Procurements

There are no procurements for this project

Taxonomy - Data Exchange			
Investment Business Case Approval			iness Case Approval
DBHDS is looking for external support on their program to improve their data exchange between DBHDS, including the Community Service Boards (CSBs): 1) an improved and consistent data taxonomy and 2) an improved data exchange program. The Supplier will help DBHDS develop and gain leadership alignment on strategies and a prioritized action plan to improve the data exchange			
Project Start Date	2/1/2022	Project End Date	9/30/2022
Estimated Costs:	Total	General Fund	Non-General Fund
Project Cost	\$489,000.00	\$244,500.00	\$244,500.00
Estimated first year of biennium:	\$0.00	\$0.00	\$0.00
Estimated second year of biennium:	\$289,000.00	\$144,500.00	\$144,500.00

Project Related Procurements

IT Strategic Plan Procurements

There are no stand alone procurements for this agency.