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Travis County HHS

Business Process Assessment Services – ECMS Requirements Report

November 17, 2020

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Introduction

The EMCS Requirements Report provides Travis County stakeholders with a thorough overview of the functions and features detailed in the ECMS Requirements Spreadsheet. This report explains the core features of ECMS along with the modules that act as the foundation of ECMS functionality. This report also demonstrates how ECMS aligns with HHS needs (as defined by the previous project phases) and offers some insights as Travis County transitions to Phase II.

Purpose of This Report

- Serves as an **overview of the comprehensive ECMS functional requirements** provided in accompanying ECMS Requirements Spreadsheet
- Looks to **bring ECMS to life for HHS stakeholders** by showcasing the ECMS structure, visualizing key components, and highlighting core features
- Provides, along with the ECMS Requirements Spreadsheet, **the details necessary for a software solution** that meets HHS business needs, and includes some technical considerations
- Provides **clear direction** to a future system vendor regarding ECMS features and functionality

Decide Phase analysis and outputs…

- Discovery Sessions
- Data Mapping & Reporting Document and Report
- ECMS Requirements Spreadsheet
- ECMS Requirements Report

…inform planning for the ECMS rollout.

- ECMS Database Structure
- Prioritized ECMS Functional Requirements
- ECMS Integration Services
- ECMS Implementation Strategy

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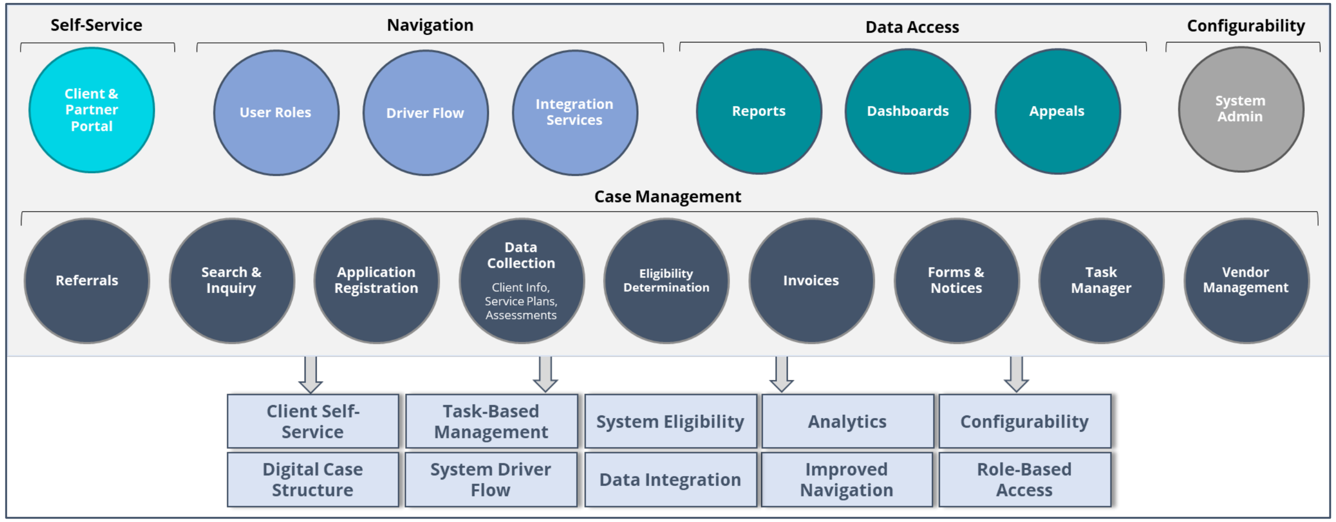
Executive Summary

This report provides a thorough overview of the identified ECMS features and functions captured in the ECMS Requirements Spreadsheet. By using a human-centered design approach to prioritize the needs of HHS staff and clients, these requirements were developed to align with HHS business processes and informed by the recommendations and goals developed as part of the Aspire phase of the project.

Through **27** discovery sessions, our team captured **470+** requirements and identified **14** unique ECMS modules. The graphic below highlights the core ECMS components and features. Additionally, we provide insight into how certain users can engage with ECMS and offer technical considerations.



ECMS Key Features

Client & Partner Self Service
Allows clients and external partners access to services and functions via a portal to manage their relationship with HHS.

Digital Case Structure
Digitizes and facilitates management of case files by structuring cases in the system around the clients themselves.

Task-Based Management
Improves management of HHS staff workloads by assigning system tasks to complete activities.

System Driver Flow
Streamlines case processing by establishing logical system pathways unique to each program.

System Eligibility Determination
Calculates client eligibility using a range of defined rules and criteria unique to each program.

Integration Services
Establishes interfaces to share data between ECMS and external systems and services.

Navigation
Provides helpful features that facilitate intuitive and efficient movement throughout ECMS.

Analytics
Offers data visualization and aggregation via dashboards to help understand workload and operational efficiency.

Configurability
Allows ECMS to be updated and modified to accommodate evolving program or operational needs.

Role-Based Access
Enables users to access the functions, pages, and data required for their specific role and program.

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Project Approach & Activities

	SENSE Months 1-3	ASPIRE Months 3-7	DECIDE Months 7-11
Project Management	✓ Discuss Project Governance Approach ✓ Develop Project Management Plan	✓ Continue Project Management ✓ Design Project Governance ✓ Deliver Ambitions Lab	✓ Continue Project Management and Governance Design • Capture Lessons Learned and Conduct Project Closeout
Business Process Assessment	✓ Perform Stakeholder Interviews ✓ Review Procedural & Operational Documentation ✓ Develop As-Is Business Process Maps	✓ Assess Improvement Opportunities & Identify Future-State Recommendations ✓ Hold Future-State Sessions	✓ Finalize Future-State Recommendations & Next Steps
System Discovery	✓ Explore CABA System Functionality & Understand Technical Components ✓ Hold Discovery Sessions to Map CABA Functionality	✓ Begin Documenting Program Data Mapping & Reporting Requirements ✓ Capture High-Level ECMS Functionality	✓ Confirm ECMS Data Elements and Reporting Requirements ✓ Hold Discovery Sessions to Document ECMS Functional Requirements
Service Design	✓ Perform User Research & Center Observations ✓ Develop Modes/Mindsets & Journeys	✓ Service Design Planning ✓ Draft Service Blueprints	✓ Offer Insights Into ECMS Design

Deliverables	✓ Project Kick-off
	✓ PM Plan
	✓ Task 1: Business Process Review and Documentation:
	    ✓ Current-State Insights Report
	    ✓ Business Process Flows
		✓ Task 3: Efficiency Assessment
		    ✓ Efficiency Assessment & Recommendations Report
			✓ Task 2: Data Mapping & Reporting Requirements
			✓ **Task 4: ECMS Requirements Report & Spreadsheet**
			• Project Closeout

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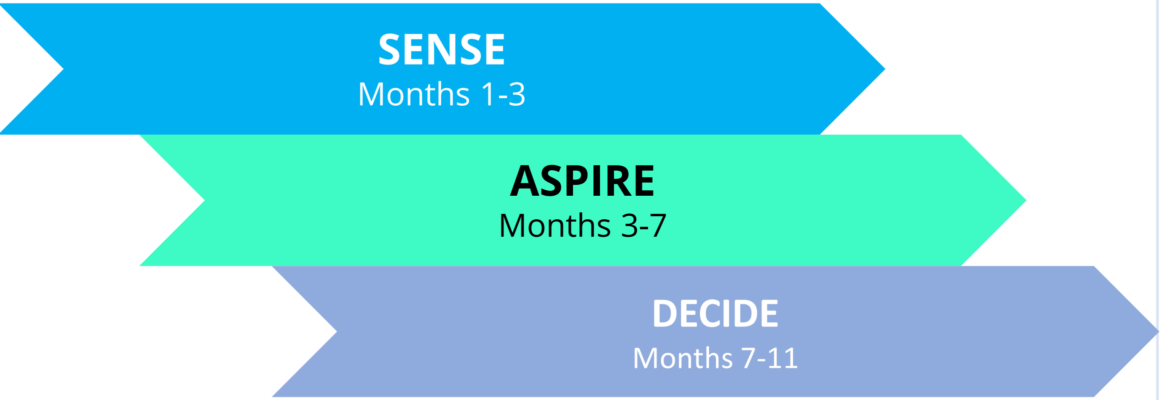
Approach

The Decide phase activities focused on capturing a prioritized set of ECMS functional requirements in concert with the previous phase outputs. This allowed our team to align ECMS's core features with human-centered design and business process reengineering principles that have guided each project phase, and which address identified HHS challenges and goals.

Approach



Bringing it all together…

All the outputs from the prior phases directly contributed to the ECMS Requirements captured during the Decide phase. Most notably, this includes:

Sense Phase

Insights Report

- Understanding Travis County's people, processes, and technology challenges to inform improvement opportunities.

Business Process Flows

- Assessing and documenting Travis County HHS complete business operations.

Human-Centered Design Principles

- Establishing the modes and mindsets for how HHS staff operate so that ECMS is designed around the preferences and experiences of its users.

Aspire Phase

Efficiency Assessment & Recommendations

- Translating identified opportunities into actionable recommendations that align with HHS goals and inform components of ECMS.

Decide Phase

Data Mapping & Reporting Requirements

- Capturing the exhaustive list of data elements and reporting requirements to support ECMS rollout.

…to build a system that meets HHS needs.

Each of these outputs – along with the other materials, documents, and conversations captured over the last 11 months – informed and guided our discovery sessions, allowing Deloitte, ITS, and HHS business stakeholders to discuss, clarify, and gather ECMS requirements that address existing challenges and align with HHS goals.

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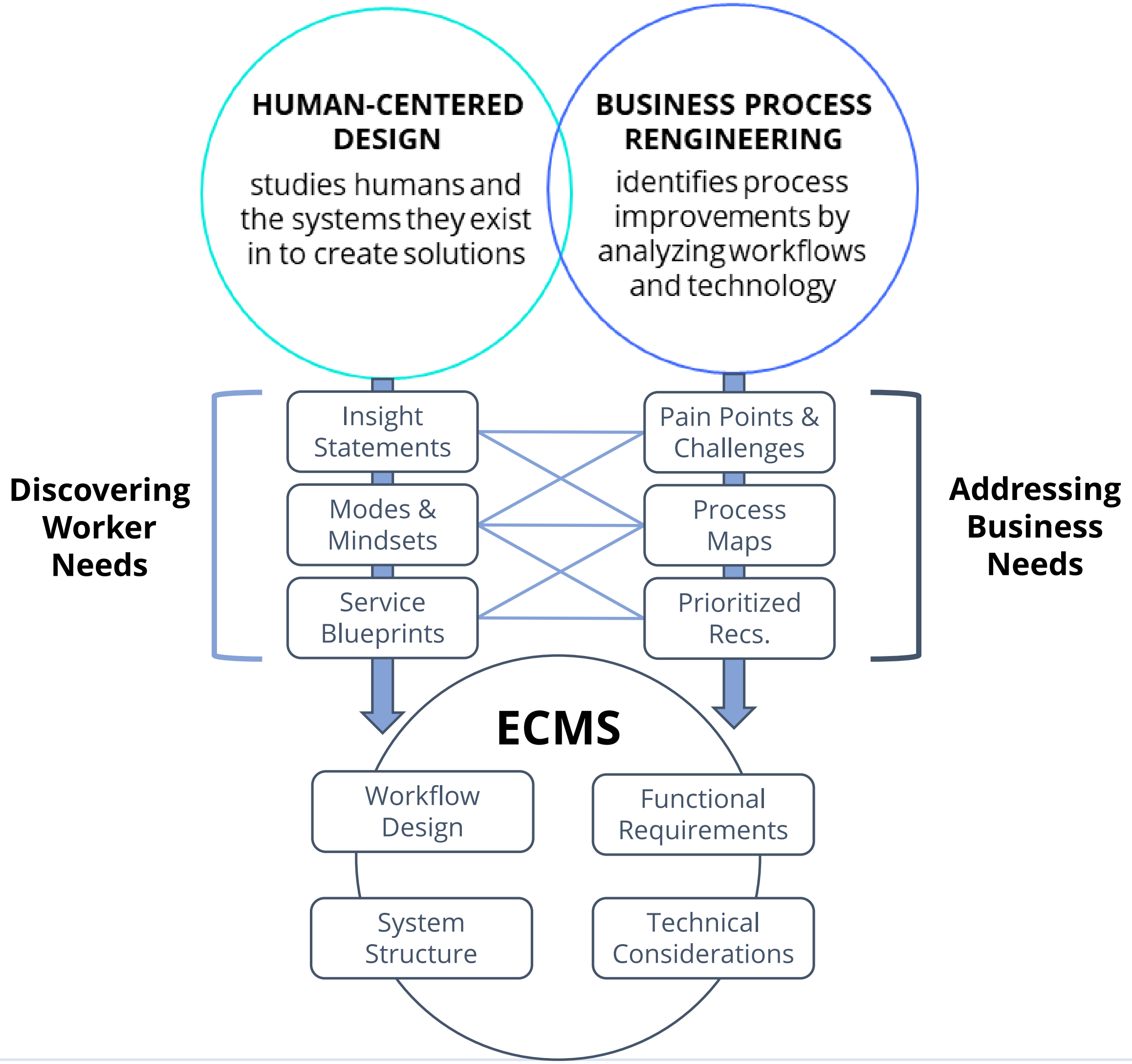
Revisiting Human-Centered Design

A System That Works For Its Users

To identify and develop the functional requirements that shape ECMS, it was first necessary to understand the people—their actions, decisions, and feelings—that ECMS is intended to support. **Human Centered Design (HCD)** revolves around this understanding so that ECMS is built around HHS staff needs.

By combining **HCD** with a traditional **business process reengineering** approach, our team was able to prioritize user needs that are also well-aligned with HHS process and technology improvements.



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OUR ACTIVITIES FOR THIS DELIVERABLE

INPUTS

INSIGHTS & CHALLENGES
- From the Sense Phase, developed research insights into areas of improvement and transformed data points into worker-centered patterns
- Enumerated department workflow and operations challenges

RECOMMENDATIONS & GOALS
- From Aspire phase, crafted recommendations for HHS that aim to improve service delivery, particularly through the ECMS implementation
- Offered a set of metrics to track and measure targeted HHS business outcomes

DISCOVERY SESSIONS
- Conducted requirements gathering sessions with ITS and HHS stakeholders, including aligning the ECMS functional workflow with HHS business processes
- Refined requirements gathered to establish ideal future ECMS features and functional design

PRIORITIZATION SESSIONS
- Reviewed identified requirements with HHS stakeholders to outline requirement priorities
- Divided requirements into categories to guide ECMS procurement

SUBJECT MATTER EXPERT INTERVIEWS
- Met with industry SMEs to understand ECMS technical and design considerations
- Gathered best practices for using project outputs for ECMS procurement

21 KEY INSIGHTS & CHALLENGES

92 PRIORITIZED RECOMMENDATIONS

18 COMMON DATA ELEMENTS ACROSS HHS

49 IDENTIFIED REPORTS

27 REQUIREMENTS GATHERING SESSIONS

→

29 CORE COMPONENTS & FEATURES

470+ PRIORITIZED FUNCTIONAL REQUIREMENTS

OUTPUTS

ECMS REQUIREMENTS SPREADSHEET
Lists all identified and prioritized ECMS functional requirements by module. This document is the culmination of all three project phases and aims to provide enough detail to support both the procurement of an ECMS solution that meets HHS business needs, as well as provide a clear starting point for Phase II.

ECMS REQUIREMENTS REPORT
Provides context for the ECMS Requirements Spreadsheet by exploring key ECMS components and features. This report serves as a more business-friendly guide to understanding the comprehensive ECMS functional requirements provided in the spreadsheet. Within it, we demonstrate how all project inputs and outputs come together to establish the core structure and functionality of ECMS.

NEXT STEPS & CONSIDERATIONS
Offers some insight into the next phase of the ECMS initiative, including how the ECMS Requirements Report & Spreadsheet, as well as the Data Mapping & Reporting Requirements documents, can be used to drive ECMS procurement. We also provide some insights into other activities or considerations as Travis County transitions into Phase II.

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INPUTS/OUTPUTS ACROSS DIVISIONS

Divisions	Inputs and Activities					ECMS Requirements Report & Spreadsheet	
	Sense Phase Insights & Challenges	Aspire Phase Recommendations	Discovery Requirements Sessions	Prioritization Sessions	Subject Matter Expert Interviews	Functional Requirements	Core Components & Features
Family Support Services	✓	✓	✓	✓	✓	✓	✓
Community Services Division	✓	✓	✓	✓	✓	✓	✓
Office of Children Services	✓	✓	✓	✓	✓	✓	✓
Finance[1]	✓	✓	✓		✓	✓	✓

[1]Finance considerations have been incorporated with divisional prioritization for ECMS functionality

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Prioritizing Requirements

The MoSCoW Method

In order to procure an ECMS solution that is well-aligned with HHS needs, we employed the MoSCoW method to determine which functional requirements are most critical. This prioritization technique helped HHS stakeholders reach a common understanding on the importance of each identified requirement by categorizing them as: Must Have, Should Have, or Could Have. Definitions and examples for each category are provided below.

Category	Definition		Example
Must Have	A **Must Have** requirement is an essential, non-negotiable component for ECMS functionality according to business needs.	**Must Have Example**	*ECMS will support a system driver flow that captures information for each HHS program.*
Should Have	A **Should Have** requirement greatly enhances ECMS functionality. While these may not be essential accordingly to HHS business needs, they add significant value.	**Should Have Example**	*ECMS search results will support a detailed view of "Individual History" detailing the program(s) they were enrolled in (history or current) upon clicking the client ID.*
Could Have	A **Could Have** requirement builds out ECMS functionality beyond its essential components. These are “nice to haves” that make a small impact if left out.	**Could Have Example**	*ECMS will support "Change" submissions for existing client/case to allow updates to their case (e.g. income, household composition, address).*

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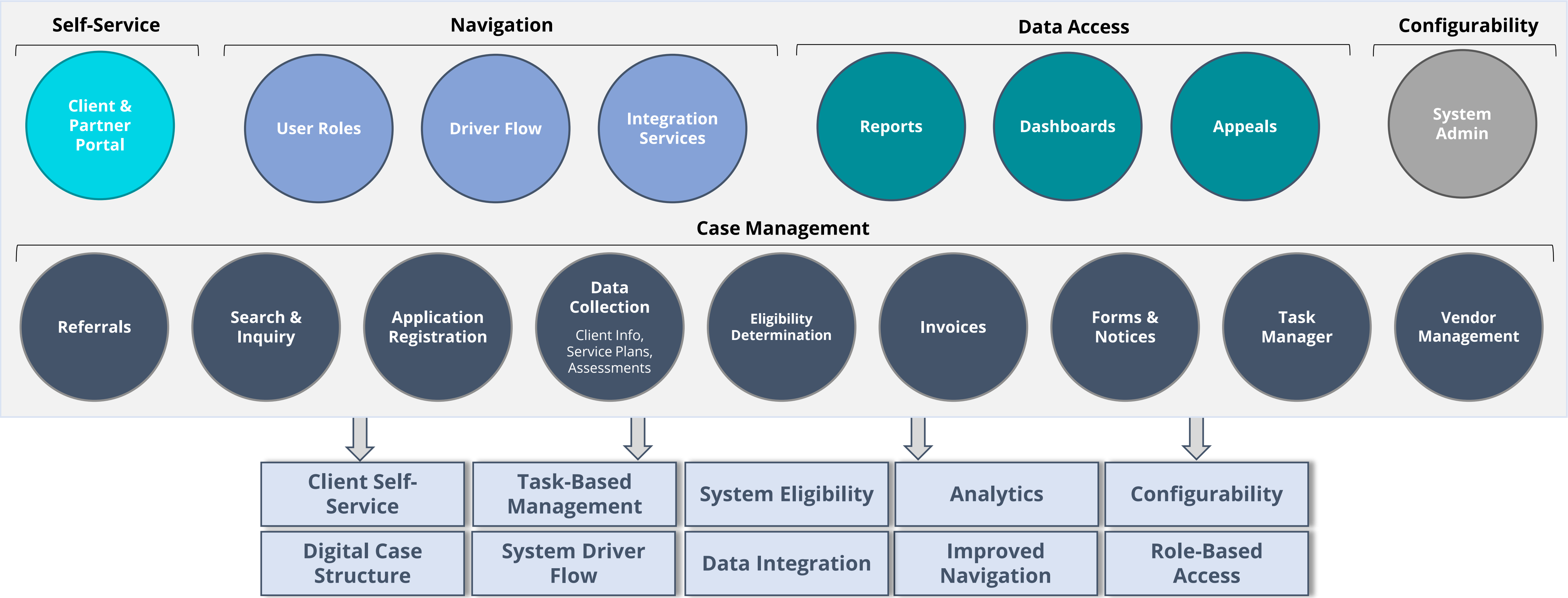
Key ECMS Functional Features

By focusing on HHS client and worker needs, our team — in collaboration with Travis County ITS and HHS stakeholders — identified a set of key ECMS components and features designed to enhance HHS service delivery, as well as streamline operational workflows. ECMS's overall structure and functions purposely accommodate the varying needs of individual HHS programs. This section highlights the set of features in ECMS that will greatly improve how HHS performs digital case management and delivers services to clients.

ECMS Core Components & Features

The following graphic provides an overview of the core components and features captured for ECMS. The identified components demonstrate how ECMS should be structured and how these components enable key business features that align with both HHS worker and operational needs.



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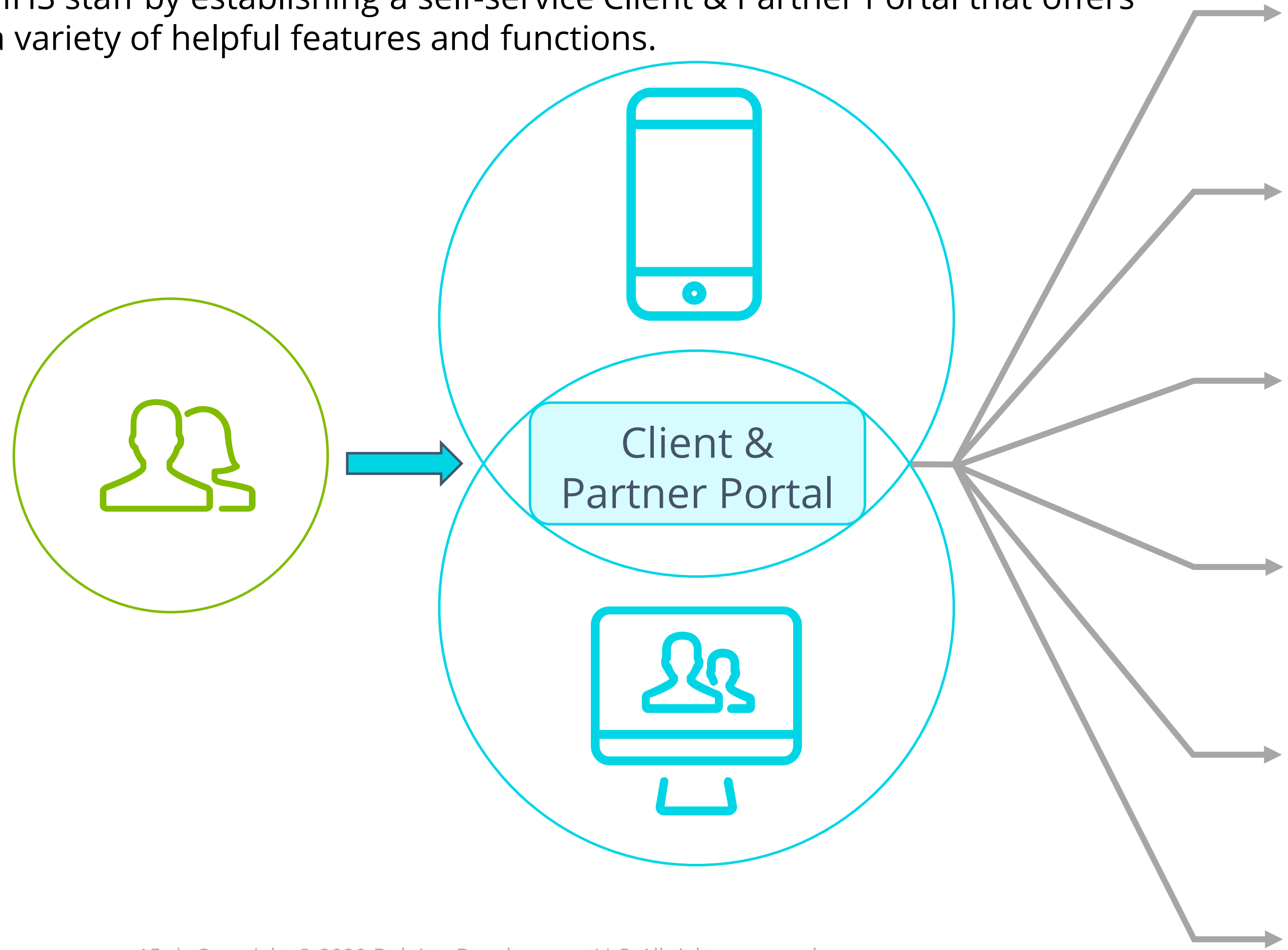
Client & Partner Self-Service

ECMS enhances access to HHS services and boosts engagement with HHS staff by establishing a self-service Client & Partner Portal that offers a variety of helpful features and functions.



Application for Services	Clients submit complete applications for assistance with all required documentation attached through a streamlined, user-friendly flow.
Account Creation	Clients and external partners can create and manage their own accounts to access portal features linked to their HHS case(s).
Secure Document Upload	All client and partner documentation related to service delivery can be securely uploaded through the HIPAA-compliant portal.
Track Application Status	Clients will have visibility into the status of their applications, allowing them to monitor their status without calling HHS centers.
Preliminary Eligibility	After inputting basic information about themselves, clients will be able to use a portal “screener” to determine if they are likely eligible to receive services.
Case Updates	Clients can receive notifications, alerts, and updates regarding their cases.

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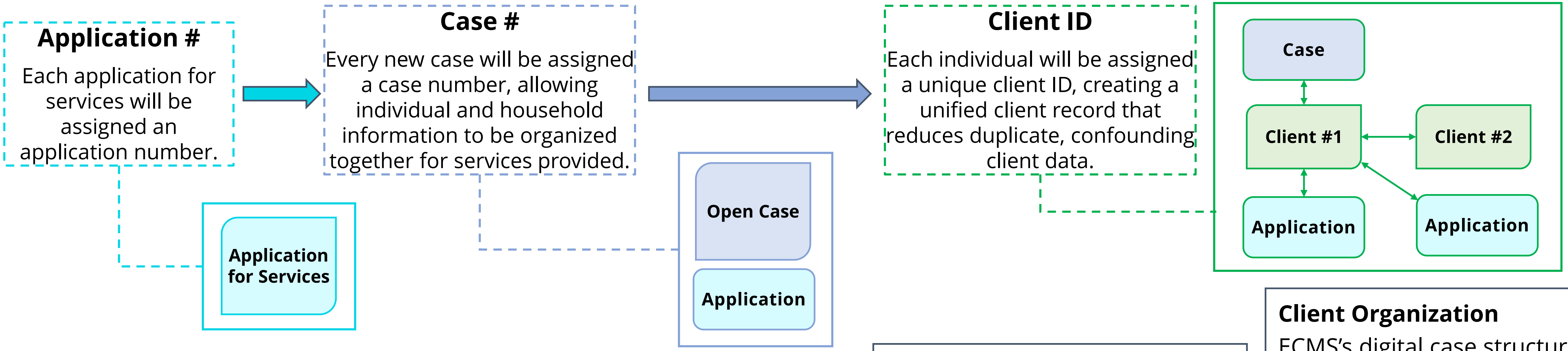
Digital Case Structure

By including features and components that structure information into "digital case files," ECMS can facilitate better client management within the system



Digitizing HHS Operations
As requests for service are received via the Client Portal or data is entered into the Worker Portal, ECMS's functionality and design accommodate digital case management.

Making Links
By cataloging application numbers with corresponding case numbers alongside unique client IDs, ECMS enables an easy-to-use digital case structure to access client information.

File Clearance
In order to keep client records unique and unduplicated, file clearance will scour ECMS to match individuals with known client IDs and associate to an existing case number for the primary applicant if appropriate.

Client Organization
ECMS's digital case structure organizes individuals by cases built around the primary applicant. This structure facilitates greater visibility into households and services received, facilitating an improved client management process for HHS.

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Task-Based Management

ECMS tasks provide an intuitive mechanism to align case processing activity in the system with defined HHS workflows for a particular program.

Workflow Efficiency

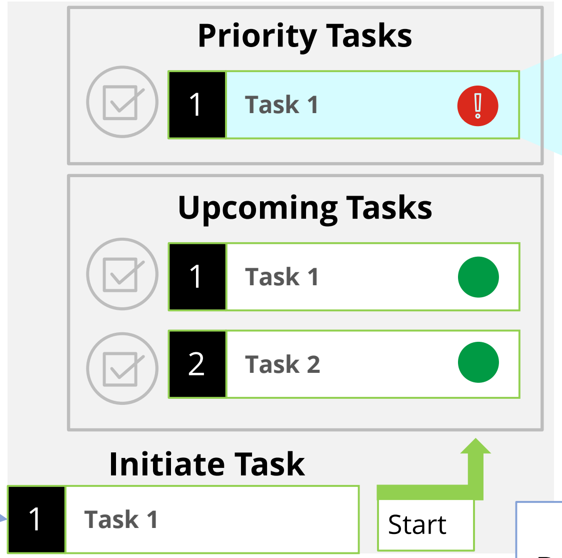
Task-based case processing offers greater visibility into service efficiency. By tracking and assessing the time it takes for HHS staff to complete a given task, operational bottlenecks and workflow inefficiencies can be identified and addressed.

Task Selection

HHS staff will be able to view assigned tasks from a personal queue (or pull unassigned tasks from a shared queue). This helps staff understand, prioritize, and manage their individual workload.

Centralized Intake

Based on selections in the Client Portal, tasks can be either routed to specific center and program users or into a common queue for centralized intake.



Task Details

When selecting a task to complete, users will be provided with task details including task type, due date, case/application number, and general information to help the user complete the task.

Task Type

There will be several task types in ECMS based on HHS processes, programs, and roles. This allows staff with different responsibilities to collaborate within a particular workflow to process a case or complete activities.

Task Workflow

Depending on the type, as a task is completed the next task in the workflow is auto-generated and auto-assigned to the appropriate staff member, offering a seamless digital handoff.

This process helps standardize and streamline case processing, allowing HHS staff to move easily from one task to the next in an efficient, intuitive manner.

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System Driver Flow

Driver Flows Guides Your Work

Program driver flows seamlessly move HHS staff and managers through case processing in ECMS, greatly enhancing system navigation and reducing cognitive overload through features like:

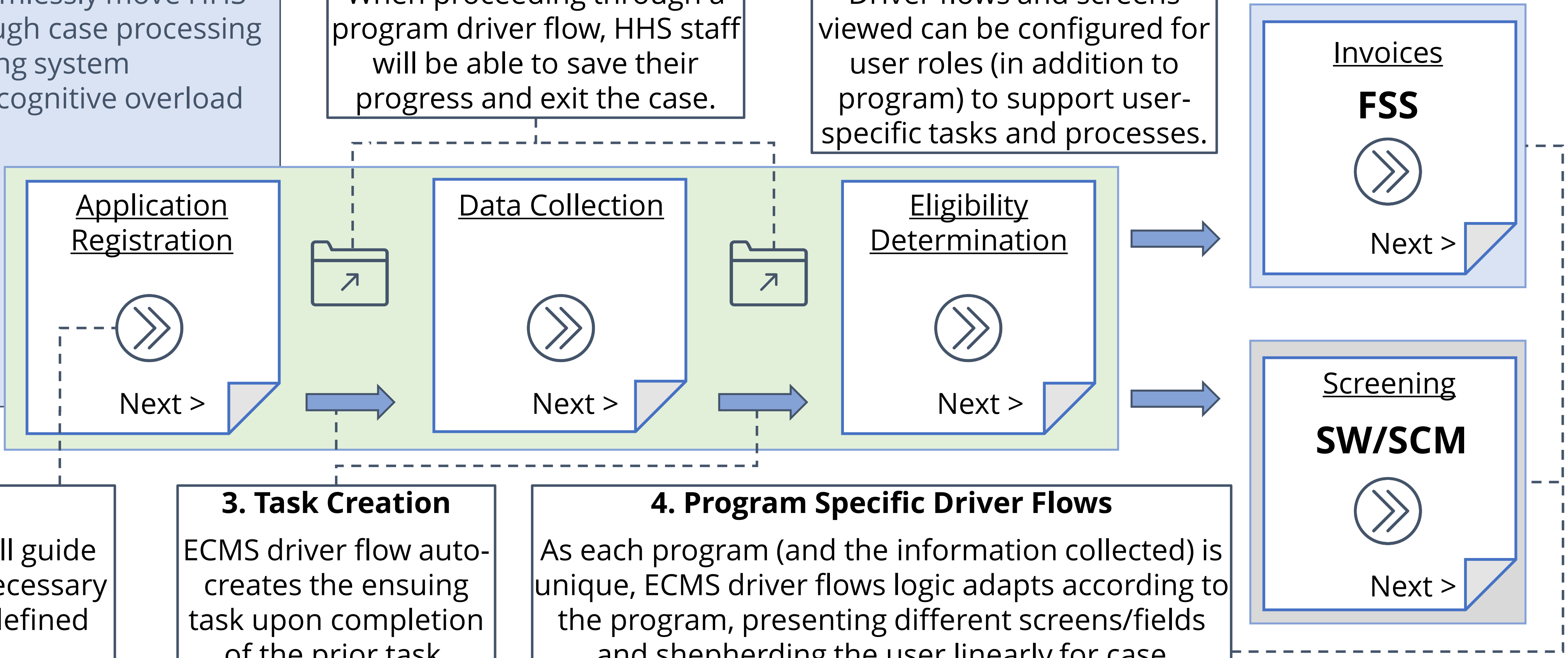
1. **Save/Exit**
2. **Next**
3. **Tasks**
4. **Program Specificity**
5. **User Roles**

1. Save/Exit

When proceeding through a program driver flow, HHS staff will be able to save their progress and exit the case.

5. User Roles

Driver flows and screens viewed can be configured for user roles (in addition to program) to support user-specific tasks and processes.



2. Next

Program driver flows will guide HHS staff through the necessary screens based on pre-defined logic.

3. Task Creation

ECMS driver flow auto-creates the ensuing task upon completion of the prior task.

4. Program Specific Driver Flows

As each program (and the information collected) is unique, ECMS driver flows logic adapts according to the program, presenting different screens/fields and shepherding the user linearly for case processing and management.

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System Eligibility Determination

ECMS will support configurable, rules-based eligibility determination unique to each program that will not only approve or deny a client's eligibility, but for applicable programs will also calculate the benefit amount to include on an auto-generated invoice.

	Rules				
	R1	R2	R3	R4	R5
TC Residency	Y	N	Y	Y	Y
Age (> 18)	Y	Y	N	Y	Y
Gross Monthly Income (150% FPIG)	Y	Y	Y	N	Y
Citizenship	Y	Y	Y	Y	N
CEAP	**A**	**D**	**D**	**D**	**D**
Utility	**A**	**D**	**D**	**D**	**A**

Configurable Rules
Eligibility rules are editable for ECMS to remain up-to-date with changing HHS policy and program eligibility requirements.

Soft Eligibility
A preliminary "soft" eligibility determination based on client-attested information provides immediate information to clients regarding their potential eligibility.

Cascade Logic
Even as a client is ruled ineligible for one program (such as CEAP in the example to the left), ECMS automatically considers eligibility for other applicable services (like other funding to support utility needs).

Running Rules by Program
The sample decision table above visualizes how ECMS's eligibility determination functionality validates client data against each of the designated rules for a given program or assistance request. In this example, eligibility determination will not check if a client's citizenship is verified unless the specific program designates it as required criteria.

Eligibility Override
To handle special cases in which a client may be deemed ineligible by ECMS, but HHS staff or management have determined they should receive services, ECMS allows designated users the ability to override the system's eligibility determination.

Automatic Next Steps
Once a client is determined eligible for services, ECMS auto-generates invoices and notices and initiates tasks for a particular workflow to reduce manual tasks.

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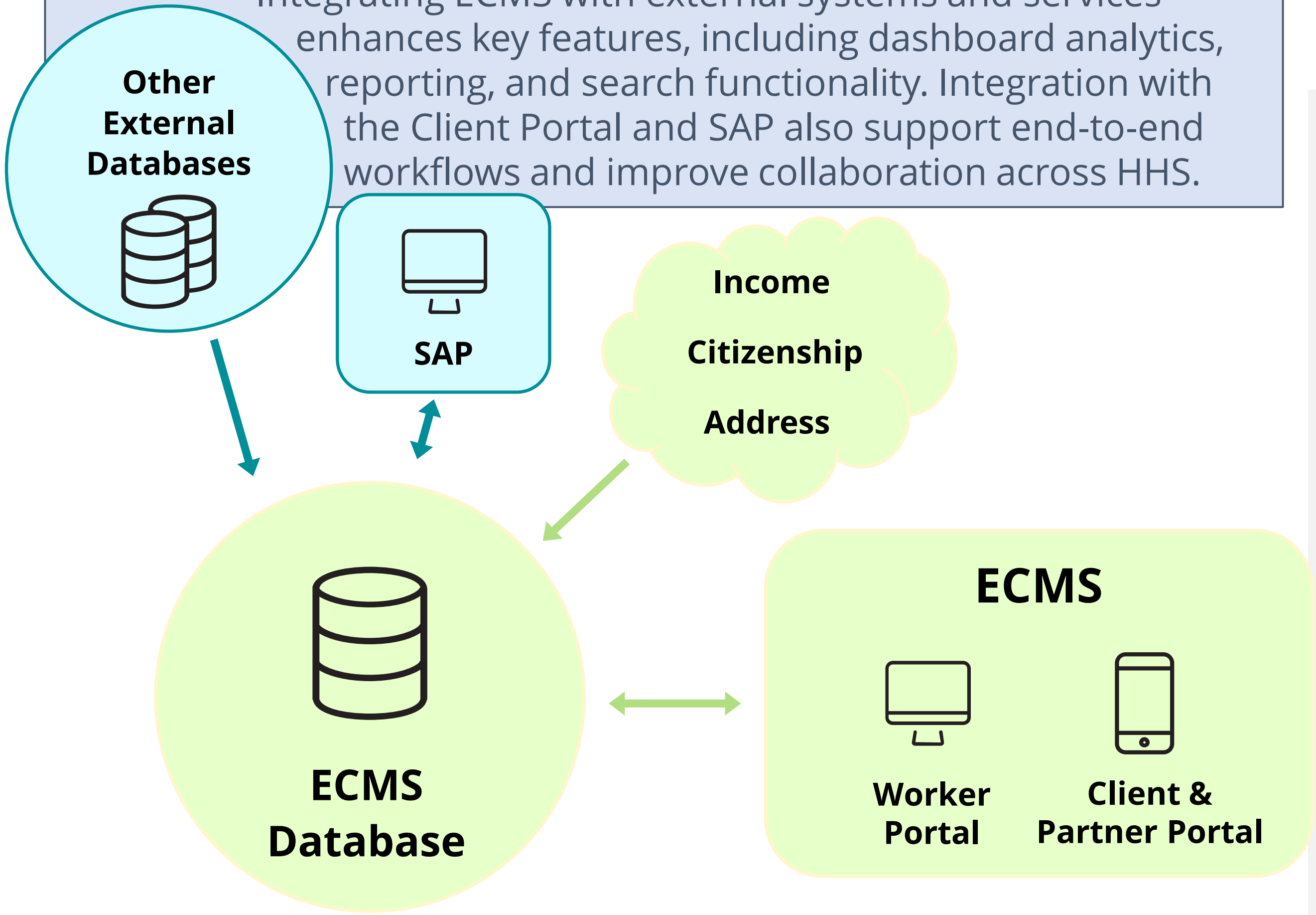
Integration Services

Integration Supports Key ECMS Features

Integrating ECMS with external systems and services enhances key features, including dashboard analytics, reporting, and search functionality. Integration with the Client Portal and SAP also support end-to-end workflows and improve collaboration across HHS.



ECMS as a "Source of Truth"
Integration between ECMS and multiple HHS platforms supports ECMS as a "one-stop-shop" for client data. This in turn enables more robust analytics and reporting to help evaluate client, program, and operational success over time.

Integration with SAP:
Batch interfacing between ECMS and SAP establishes a bidirectional stream of data that both reduces worker tasks and provides up-to-date information to HHS staff and clients.

Third Party Services:
ECMS interfaces with third-party verification services add vital information for determining eligibility.

Client & Partner Portal:
ECMS integration with the Client & Partner Portal greatly improves both the client and worker experience by offering a digital access point for clients and reducing manual data entry for staff.

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System Navigation

Intuitive & Effective Navigating Tools

ECMS functionality is made accessible through simple and easily accessible navigation features, allowing HHS staff to move easily around the application to different pages and modules as needed.

Home Button

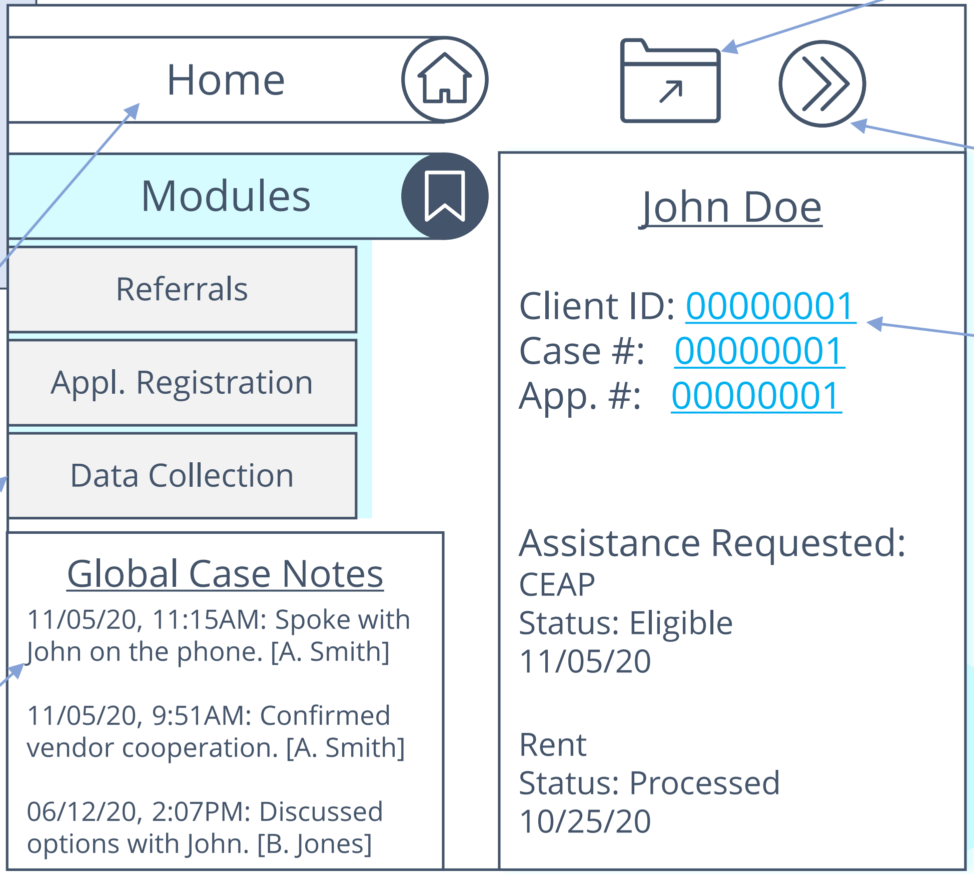
Returns to the ECMS landing page: either analytics or tasks dashboard.

Global Navigation Menu

Provides accessibility to different modules and areas within ECMS.

Global Case Notes

Centralizes all case notes attached to a case number and accessible from all pages of the digital case file.



Save/Exit

Allows a user to save filled data fields and preserve their progress before they exit the page or log out.

Next

Takes a user to the next screen in the defined program driver flow.

Hyperlinks

Enables users to quickly access related pages or popups, such as Individual Summary, Data Collection, and Case Summary.

Case Header

Displays summary case information (e.g. application #, primary applicant name, case status) for an initiated case while a user navigates across multiple pages.

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Analytics

Dashboards Translate and Visualize Data

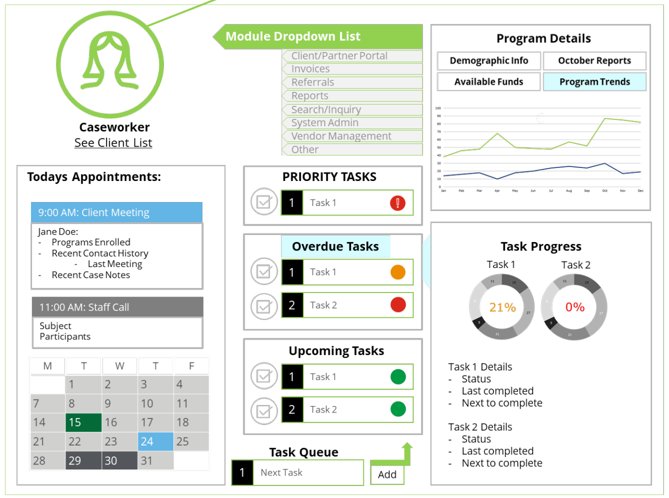
Analytics dashboards aggregate case, program, division, and department-level data to produce a comprehensive picture of HHS operations. Analytics dashboards will provide visibility into program efficiency, service delivery effectiveness, and day-to-day tasks and workflow depending on user role. These functions, along with ECMS's enhanced reporting, offer more intuitive, user-centric means to access and analyze HHS data.

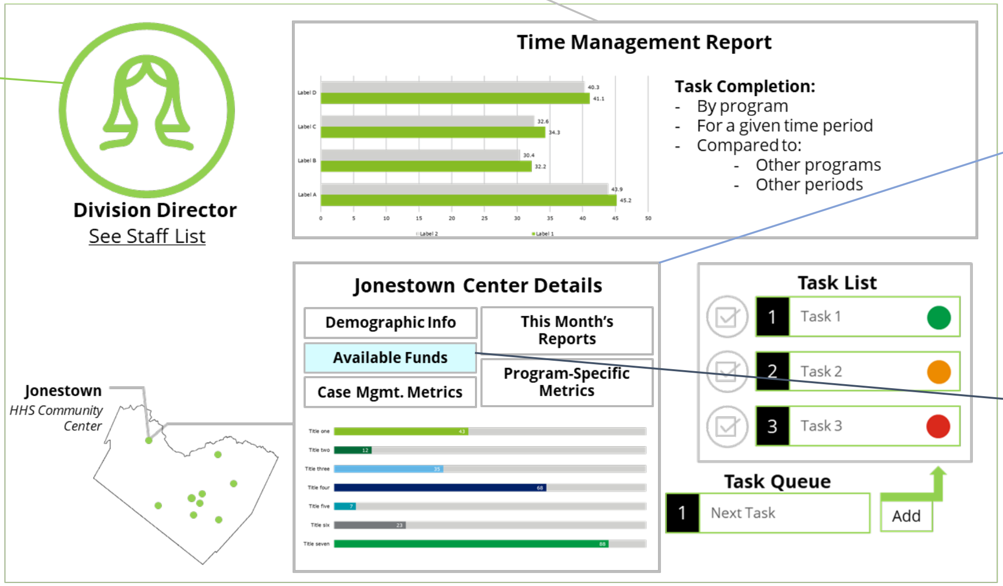
Dashboards by User Role

Worker, Supervisor, and Executive Dashboards allow Division Directors to focus on aggregated program metrics and Case Workers on individual caseload. Different dashboards can accommodate different user needs.

Understanding Operational Efficiency

Features like a Time Management Report can provide managers with real-time insight into HHS and program operations, allowing them to identify opportunities for process improvement and monitor client success over time.





Data Tracking & Synthesis

Targeted monitoring of key metrics allows HHS to track performance and meet service goals, supporting the department's transition to an insight-driven organization.

Data Visualizations

Dashboard analytics offer a range of visualization and imaging options to help transform raw data into insights, including graphs, charts, maps, and lists.

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Configurability

ECMS Configurability

ECMS supports dynamic changes without the need for code changes. A dedicated **Admin module** governs configurability, supporting the customization and evolution of ECMS to meet HHS needs.

Configurable Features

Through a user interface (**Admin module**), many components, pages, and fields of ECMS are all modifiable and suppressible.

Rules & Logic Updates

ECMS allows the modification of program driver flows, eligibility thresholds/rules, and tasks and alerts.

System Admin

The ECMS **Admin module** provides system administrators and designated users with the ability to configure ECMS pages, fields, and rules, as well as user roles and accounts.

User Roles & Accounts

System Administrators will assign levels of access and functionality based on user roles linked to the ECMS Worker Portal account.

Field & Page Configuration

Data fields and pages can be made mandatory, enabled, disabled, and edited, as necessary, supporting workflow updates.

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Role-Based Access

User Roles Govern ECMS Experience

Each user role can be defined and provisioned to access certain programs, pages, and ECMS functions. For example, a Case Worker will access different modules and system functions than a Finance user, and Family First Case Workers will use program-specific pages and features distinct from FSS Case Workers.

Based on our understanding of HHS staff roles, below are representative user roles:

Finance:
Approves invoices and monitors HHS funding.

"I need to review, approve, and adjust invoices."

Office Specialist:
HHS center staff that manages the front desk.

"I need to work directly with clients and keep track of who comes to our center."

Auditor:
Accesses invoice and funding reports.

"I need visibility into HHS finance reports to ensure compliance."

Program Staff*:
Attends to a client for the duration of their case(s).

"I need to assess & manage my clients' case data to support their needs."

Executive:
Oversees departmental or divisional operations.

"I need to know how well our programs are serving the community."

Program Manager:
Manages an HHS program and its staff.

"I need to monitor Case Worker activity and reporting metrics."

System Admin:
Configures ECMS according to HHS and role-specific needs.

"I need to keep ECMS current and accessible in order to serve HHS."

**Includes program-specific staff roles like Case Worker, Parent Educator, Social Worker, Supportive Case Manager, Care Coordinator, etc.*

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ECMS Requirements by Module

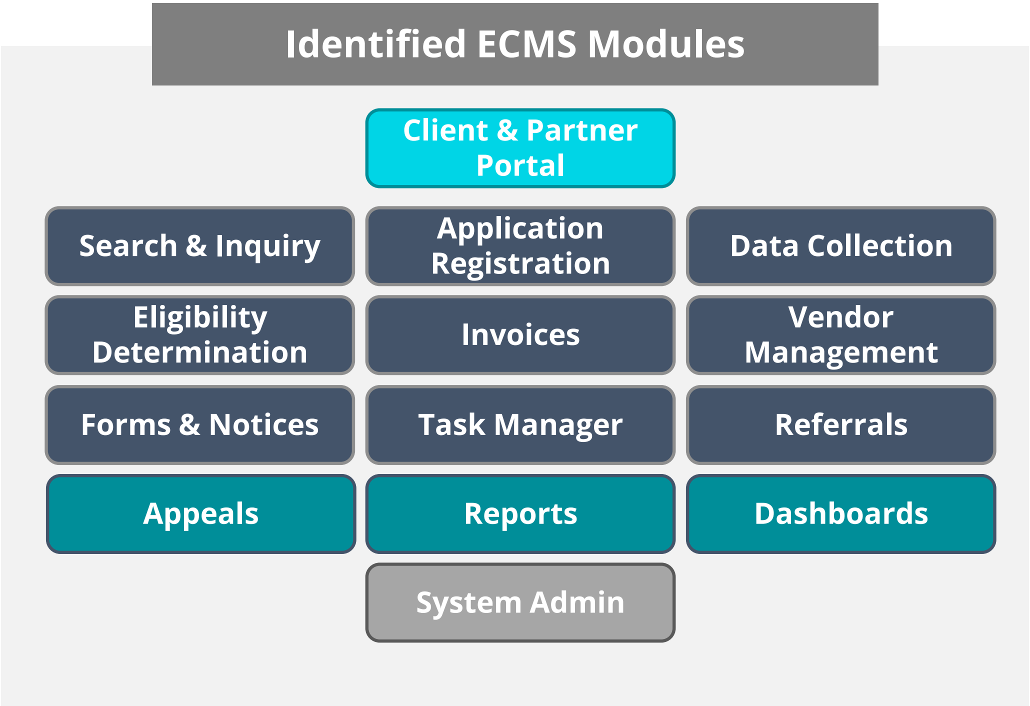
ECMS modules form the structure of the system and represent the various ways HHS staff use ECMS as part of their work. Each module has unique features and functionality that our team has captured as detailed requirements. This section provides a summary view of those ECMS requirements for a given module that have been designated as high priority by HHS stakeholders.

ECMS Modules Overview

What are "Modules?"

Modules in ECMS simply refer to the distinct **areas** or parts of the application where users can access pages, fields, and **complete business tasks** in the system.

Many of these modules will be specific links in the **ECMS navigation menu**.



The following pages of this section offer a **summary view of those ECMS requirements** designated as high priority (Must Have or Should Have) by HHS stakeholders. Please see the ECMS Requirements spreadsheet in the appendix for all detailed, prioritized functional requirements.

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Client & Partner Portal

A new public-facing portal for clients and external partners that supports digital applications, uploads, and other activities.

Client & Partner Portal

- (M) Must Have
- (S) Should Have

Key Functional Requirements

Digital Application Submission
- (M) Intuitive driver flow that guides users to answer required questions and submit
- (M) Navigation features/buttons across pages
- (M) Electronic signature
- (S) Preview application before submission
- (S) Quick re-apply feature

Linked with Worker Portal
- (M) Cases and applications will be routed according to site
- (M) Generates task to Worker Portal
- (M) Data pre-populated into Worker Portal

Client Account Management
- (M) View and track application status
- (M) Request additional services on an open case
- (S) View payment status
- (S) Subscribe to receive only e-notices

Pre-Screening Eligibility
- (S) Allows clients to enter information to see if they are eligible for a chosen program

Document Upload
- (M) Upload and submit required documents
- (S) Manage (remove) uploaded documents

Program Information
- (S) Program information, helpful resources, FAQs, etc. included in the Client Portal

Partner Features
- (M) Account creation and management
- (M) Upload and share documents
- (M) Track submissions
- (M) Route submissions/activity to Worker Portal

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Search & Inquiry

Explore client information through a robust, accurate search feature that uses a variety of parameters and sorting mechanisms.

Search & Inquiry

Ⓜ Must Have
Ⓢ Should Have

Key Functional Requirements

Client Search Parameters

- Ⓜ Multiple, combinable search parameters
  - Application #, Case #, Submission #
  - Client #
  - Name (First, Last, MI)
  - SSN
  - DOB (cannot be standalone)
  - Gender (cannot be standalone)
  - Email address
  - Phone number
  - Address (Zip code is minimum)
- Ⓜ Searches all known individuals (not just primary applicant)
- Ⓜ Supports imprecise search matching

Data Privacy Protection

- Ⓜ Results restricted by user role/program as needed (HIPAA)
- Ⓜ Alerts to caseworkers associated with protected cases

Sorting & Viewing Results

- Ⓜ Search result filters/sorting (based on individual results or case/application results)
- Ⓢ View individual history upon click of Client ID
- Ⓢ View case/application summary upon click of case/application number
- Ⓢ View submission summary upon click of submission number (e.g. CP application)

Navigate into Digital Case File

- Ⓜ Navigate to Data Collection module from search result (upon click of button)
- Ⓜ Navigate to Application Registration module from search result (upon click of button)
- Ⓢ Application #, Case #, and Client ID retention while switching modules

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Application Registration

A streamlined process for receiving, intaking, and processing requests for assistance (applications or referrals).

Application Registration

- (M) Must Have
- (S) Should Have

Key Functional Requirements

Register Client Data

- (M) Register an application through data entry/capture
- (M) Process applications received via the Client Portal and pre-populate fields with information
- (M) Select multiple assistance types

Application Management

- (M) Manual withdrawal of submitted application (not yet processed)
- (M) Inability to modify processed application (withdrawn, denied, complete)
- (M) Navigation across pages ("PREVIOUS", "NEXT", "SAVE" & "SAVE & EXIT")
- (S) Application summary page
- (S) Alerts to caseworkers of impending application deadlines

Case Initiation & Association

- (M) Initiate a case using data and documents collected from a submitted application
- (M) File clearance to determine known individuals (re-use, newly added)
- (M) Re-open closed cases as applicable
- (M) Associate applications with existing cases when applicable
- (M) Restriction of case association based on certain protected programs
- (S) Alert for Burial Case Worker when individual applies for other programs (decedent)

ID Generation

- (M) Generate Application #
- (M) Creation/alignment of unique client IDs

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Data Collection

Provides program-specific case processing to capture necessary client data, notes, and information to form a digital case file.

Data Collection

- (M) Must Have
- (S) Should Have

Key Functional Requirements

Program-Specific Workflow

- (M) Initiate program-specific driver flow
- (M) Mandatory screens based on program, including Service Plans and Assessments
- (M) Mandatory questions and required documentation based on program
- (M) Tracks program status through driver flow (intake, eligible, denied, processed, issued, encashed, terminated)
- (M) Pre-populate screen fields with information collected in Client/Portal
- (M) Receive referrals (tasks) between financial assistance processing and SW/SCM & Housing
- (M) Navigation across pages ("PREVIOUS", "NEXT", "SAVE" & "SAVE & EXIT")

Data Upload

- (M) Mandatory uploads for invoice processing
- (M) Allow page-level uploads (e.g. assessments for FF)

Access Case Information

- (M) Initiate case screen to access file
- (M) View case history
- (M) Individual screens accessible outside of driver flow
- (M) Global case notes and case note history
- (M) Restriction of case information for certain programs based on user role
- (M) Structure case for household assistance around a primary applicant

Update Case

- (M) Tracks case status though driver flow (intake, open, closed)
- (M) Support multiple and additional requests for assistance
- (M) Add a program/assistance request to an open case
- (M) Activity Tracker for Housing process
- (M) Digitized assessment forms

Assessments & Service Plans

- (M) Support assessments & service plans

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Eligibility Determination

Built-in eligibility determination applies program rules to determine a client's eligibility to receive services, as well as additional details.

Eligibility Determination

- (M) Must Have
- (S) Should Have

Key Functional Requirements

Automated Eligibility Determination

- (M) "Run Eligibility" screen to initiate eligibility determination
- (M) Supports eligibility results confirmation by user role
- (M) Support eligibility override by user role
- (M) Program-specific eligibility rules (hierarchical)
- (M) Rules engine performs eligibility determination using program-specific, configurable decision tables
- (M) Restrictions based on program and user role
- (M) Pre-eligibility screening by income and county residency generates denials prior to running full eligibility
- (S) Eligibility considers remaining fund balance in determination

Generate Approval/Denial

- (M) Eligibility Summary screen displays results
- (M) Viewable denial/termination reasons
- (M) Eligibility status tracking (Eligible, Denied, Terminated)
- (M) Generate approval/denial notice
- (S) Denial reason linking to respective Data Collection screen

Initiates Next Steps

- (M) Auto-generates pending invoices
- (M) Attaches bill/invoice documentation to generated invoice
- (M) Generates vendor pledge reminder/alert
- (M) Changes case status as appropriate

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Invoices

Prepare, submit, and approve invoices for financial assistance programs and send electronically to SAP.

Invoices

- (M) Must Have
- (S) Should Have

Key Functional Requirements

Manage Invoice Process

- (M) Invoice Summary/Details page for caseworkers, managers/administrators, and finance staff
- (M) Filter submitted/open invoices according to:
  - Program
  - Funding Source
  - Vendor
  - Date Range
  - Invoice Status
  - Sent (to Finance)
  - Rejected (by Finance)
- (M) Track submitted invoices
- (M) Generate tasks to review pending invoices and review/approve invoices
- (M) Pending/future invoice override
- (M) Invoice Action Summary/Details page (close, open, reject)
- (M) Invoice adjustment by user role
- (M) Track all invoice-related updates (audit)
- (S) Generate caseworker alerts for pending/future (CEAP) and rejected invoices
- (S) Prevention of future date invoice submission

Manage Invoice Inputs

- (S) Validates vendor pledge completion prior to submission

Interface with SAP

- (M) Integration with SAP:
  - Send: invoice, PO #, service #, related vendor and billing information
  - Receive: reference/voucher #, PO #, invoice/service #, vendor #, payment date, payment doc #, payment method, check #
- (M) Batch process to deliver approved invoices to SAP
- (M) Batch process to receive processed invoices from SAP
- (S) Alerts to caseworker/center manager for rejected invoice (by HHS Finance or by SAP)
- (M) Update program status to
  - “Issued” - processed by SAP
  - “Encashed” – check was consumed

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Vendor Management

Repository for HHS vendor information that supports searching and managing of vendor records, including accessing data from SAP.

Vendor Management

- M Must Have
- S Should Have

Key Functional Requirements

Vendor Search

- M Search, view, update, and add ECMS-local vendor information
- M Vendor search with various, combinable parameters:
  - Name (fuzzy search)
  - Vendor ID
  - EIN
  - Vendor address
  - Vendor business name (fuzzy search)
  - Vendor statuses

Vendor Management

- M Vendor Management module/screen
- M Add/edit screen to update ECMS-local information
- S Attach documents to vendor files

Access Vendor Information

- M Receive vendor information from SAP
- M View information from SAP vendor record through service:
  - Vendor #
  - Vendor EIN #
  - Vendor Legal name
  - Vendor Address
  - Vendor Contact Info
  - Vendor Parent/Child Status
  - Blocked Vendor Status

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Forms & Notices

Generate, send, receive, and store new and historical forms and notices needed for HHS service delivery.

Forms & Notices

M Must Have
S Should Have

Key Functional Requirements

Form Library

- (M) Organize forms and notices by HHS program in a Forms & Notices module
- (M) Form & Notice search using multiple search parameters (generated and blank forms)
- (M) Store, view, and reprint historical forms and notices
- (M) Restrict access to case forms and notices based on user roles

Generate Forms & Notices

- (M) Manual generation of forms (direct edit via fields in ECMS)
- (M) Review, suppress, print, and send pending/historical forms and notices
- (S) Send/receive forms, documents, uploads for programs that do not use ECMS
- (S) User history to track who generated a form
- (S) Approval or denial notices configured with pre-filled addresses for mailing

Client Portal Interactions

- (M) Forms sent to and retrievable from Client Portal
- (M) Forms submitted through Client Portal generate a task in Worker Portal for Case Workers
- (M) Pre-fill client-facing forms
- (M) E-notice subscription option for clients
- (M) Electronic edit, signature, and submission via the Client Portal

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Task Manager

Create and manage tasks associated with ECMS workflow, including viewing, initiating, reassigning, and prioritizing tasks.

Task Manager

Ⓜ Must Have
Ⓢ Should Have

Key Functional Requirements

Task Details

- Ⓜ Task structure:
  - Task Type
  - Task ID
  - Task Group
  - Case No
  - Application No.
  - Task Status
  - Assigned Staff
  - Task Due Date
  - Task Initiated Date
- Ⓜ Program-based task types (e.g. Intake, Eligibility, Finance, Add a Program, Change, Assessment)
- Ⓢ Configurable task types by program/center

Task Logic

- Ⓜ Task list prioritization by program/center management
- Ⓜ Task closure following completion of activity (e.g. running eligibility)
- Ⓜ Initiate subsequent task in program-specific driver flow following task closure
- Ⓜ Reminder/alert logic for upcoming task due dates

Manage Tasks

- Ⓜ Tasks Manager module to support search, view, update, and add tasks
- Ⓜ Varied task search parameters
- Ⓜ Task management (claim) and completion by HHS staff
- Ⓜ Display and confirm all program-related tasks upon case closure

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Referrals

Receive and process both internal and external client referrals for services.

Referrals

- (M) Must Have
- (S) Should Have

Key Functional Requirements

Register Referrals

- (M) Capture, update, display, add, delete, withdraw, assign referrals
- (M) Support creation and registering of internal referrals
- (M) Receive referrals via the Client Portal
- (M) Capture referral info, including type, origin, and destination
- (S) Support creation and registering of external referrals
- (S) Generate alert for referrals received

Process Referrals

- (M) Generate intake task for processing
- (S) Allow client referral information to pre-populate Application Registration

Manage Referrals

- (M) Referral search with multiple search parameters
- (M) Referral prioritization
- (M) Include/attach required documents from other programs

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Appeals

A dedicated space in ECMS to create and manage appeals information.

Appeals

- (M) Must Have
- (S) Should Have

Key Functional Requirements

Collect & Record Information

- (M) Collection of appellant, representative, program, decision information
- (M) Add, update, delete appeals
- (M) Upload documents in the module

Generate Alerts & Notices

- (M) Generate alerts for decision due dates and reversed decisions
- (M) E-notice via the Client Portal
- (M) Generate decision notice for all appeal stakeholders

Dedicated Pages

- (S) Appeals module/page (search, summary, details)
- (S) Access to Appeals module via the dashboard
- (S) Navigation support across pages (e.g. "PREVIOUS", "NEXT", "SAVE" & "SAVE & EXIT")

Validations

- (M) Appeal decision addressable at individual program level (not just whole application)
- (S) Creation of appeal record only if known denial

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Reports

A tool for running, viewing, and storing both canned and ad hoc reports that aggregate data across all of HHS.

Reports

- (M) Must Have
- (S) Should Have

Key Functional Requirements

Ad Hoc Reporting

- (M) Employs report building functionality that supports:
  - Selecting database attributes using business terms as opposed to database fields
  - Defining reporting calculations or features with simple descriptions
- (M) Extract data into spreadsheet
- (S) Supports batch report handler that accepts report requests, runs in background, and notify users upon ready

Canned Reporting

- (M) Includes all required reports as designated by HHS stakeholders*
- (M) Automated, scheduled reports (daily, monthly, quarterly, etc.)

Report Library

- (S) Organizes and stores scheduled reports and on-demand ad hoc reports
- (S) Archival/purge mechanism for managing report library
- (S) Canned reports that reflect/capture assessments changing over time

Demographics

- (M) Supports reporting out individuals across centers, programs, divisions, funding, and service outcome

*See the Data Mapping & Reporting Requirement spreadsheet for all required HHS reports and measures

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Dashboards

Analytics dashboards to display department, division, program, and case-specific metrics and data.

Dashboards

- (M) Must Have
- (S) Should Have

Key Functional Requirements

Visualizations

- (S) Visualize various metrics with graphs, pie charts, bar charts, etc.
- (S) Metric details upon drilling down

Multiple Dashboard Views

- (S) Executive Dashboard:
  - Aggregated task information list across divisions
  - View metrics across all centers and programs
- (S) Supervisor Dashboard:
  - Track staff/Case Worker caseload capacity and performance
  - Quick links to available reports
  - Expenditures for each program & availability of funds
- (S) Case Worker Dashboard:
  - Priority/outstanding tasks, reminders/alerts, daily appointments

Different Views by User

- (M) Standalone Tasks/Alerts/Reminders dashboard for users to access tasks and complete workflow activities
- (S) Finance:
  - Bar graph of available funds
  - # of invoices processed per accountant
  - Task list of invoices prepared
- (S) Family First:
  - Program waitlist, referral metrics, # of programs completed, # of certificates awarded
- (S) Center Manager able to view data across all centers specific to FSS programs

Configurable Display

- (S) Configurable metrics that can be newly added by system admin
- (S) Case Worker personal stats to track client activity and assistance provided
- (S) Dynamic tiles to include/exclude different metrics based on preference

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System Admin

Allows a system administrator or other designated users to configure, enable/disable, and maintain specific features and functions in ECMS.

Admin

- (M) Must Have
- (S) Should Have

Key Functional Requirements

Field & Page Configuration
- (M) Data fields (mandatory, disabled, enabled, etc.)
- (M) Reference table data (e.g. dropdown options)
- (M) Service Plans/Critical Activities/Milestone Activities
- (M) Fields in forms and notices

User Account Management
- (M) Provision, update, and manage user accounts
- (M) Configure roles and system access

Rules & Logic Configuration
- (M) System driver flow
- (M) Tasks
- (M) Eligibility rules
- (M) Funding sources
- (S) Form design

Update Reference Information
- (M) FPIG and AMFI
- (M) Zip code data
- (M) Define/update weatherization dates
- (M) Agency referral data
- (M) Funding source data
- (M) Site data
- (M) Program information
- (M) Vendor/PO data (for Burial)

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ECMS Alignment With HHS

One of the primary purposes of ECMS Phase I was dedicating time to understand how HHS currently operates, identify opportunities for improvement, and then design a new solution (ECMS) that will allow HHS to succeed for years to come. This section revisits some of the various outputs from Phase I and aims to demonstrate how the ECMS features and functions in this report address existing challenges, align with future goals, and accommodate the unique modes and mindsets of HHS staff.

Addressing Insights and Challenges

INSIGHT STATEMENTS

Initial Findings from Insights Report:

- Inconsistent Program Delivery Across the Enterprise
- Inability to Understand Complete Client Story
- Varied Technology Adoption & Knowledge Sharing
- Overreliance on Paper & Manual Processes
- Issues Managing Workload & Staffing Needs
- Poor Reporting & Program Evaluation Tools
- Poor System Navigation
- No Integration With Other Systems
- Limited or Absent System Checks
- Poor Search Functionality & Limited Visibility Into Client Data
- Strained IT Channels & Varied System Knowledge

CHALLENGES

- **Navigation – Task Double Take**
- **Integration – Cognitive Overload**
- **Adaptability – Time Vacuum**
- **Collaboration – Service Fragmentation**
- **Communication – Siloed Channels**
- **Reporting – Accountability Concerns**

REQUIREMENTS MEET HHS NEEDS

Representative Requirements and Functions:

Flexibility
- *Driver flow based on program*
- *Improved navigation*

Automation
- *Eligibility determination*
- *Batch interface with SAP*

Simplicity
- *Application registration and file clearance*
- *Defined module structure*

Worker Empowerment
- *Digital case management*
- *Client interaction with self-service portal*

Workload Management
- *Task-based management*
- *Dashboard analytics*

Planning & Evaluation
- *Enhanced ad hoc reporting*
- *Cross-program data visibility*

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Meeting Goals and Acting on Recommendations

EVOLVE TO AN INSIGHT-DRIVEN ORGANIZATION

- Unified client record
- Cross-program and divisional reporting
- Integration of verification services
- Dashboards and analytics
- Track application lifecycle
- Field staff productivity

ENHANCE COLLABORATION ACROSS HHS

- Secondary review function for billing
- Batch processes for invoices
- Integrate SAP with ECMS
- Implement role-based access
- Referral alert/task
- Online information for partner organizations
- Secure document sharing
- System admin

ELEVATE CLIENT EXPERIENCE & ACCESS TO SERVICES

- Online portal or digital submissions
- Initial eligibility inquiry
- Digital submission requirements
- Presumptive eligibility
- Client Portal validation messages

EMPOWER STAFF TO FOCUS ON CLIENTS

- Digital case file
- Program driver flow
- System eligibility determination
- Task-based case management
- System reminders
- Enhanced consumption history documentation
- Log and track appeals
- Digitize forms and notices
- Global case notes
- Digitize service plans
- Digitize assessments
- Case close functionality

This grouping displays prioritized recommendations and HHS goals identified during the Aspire phase that have been directly addressed by ECMS requirements captured in the Decide phase.

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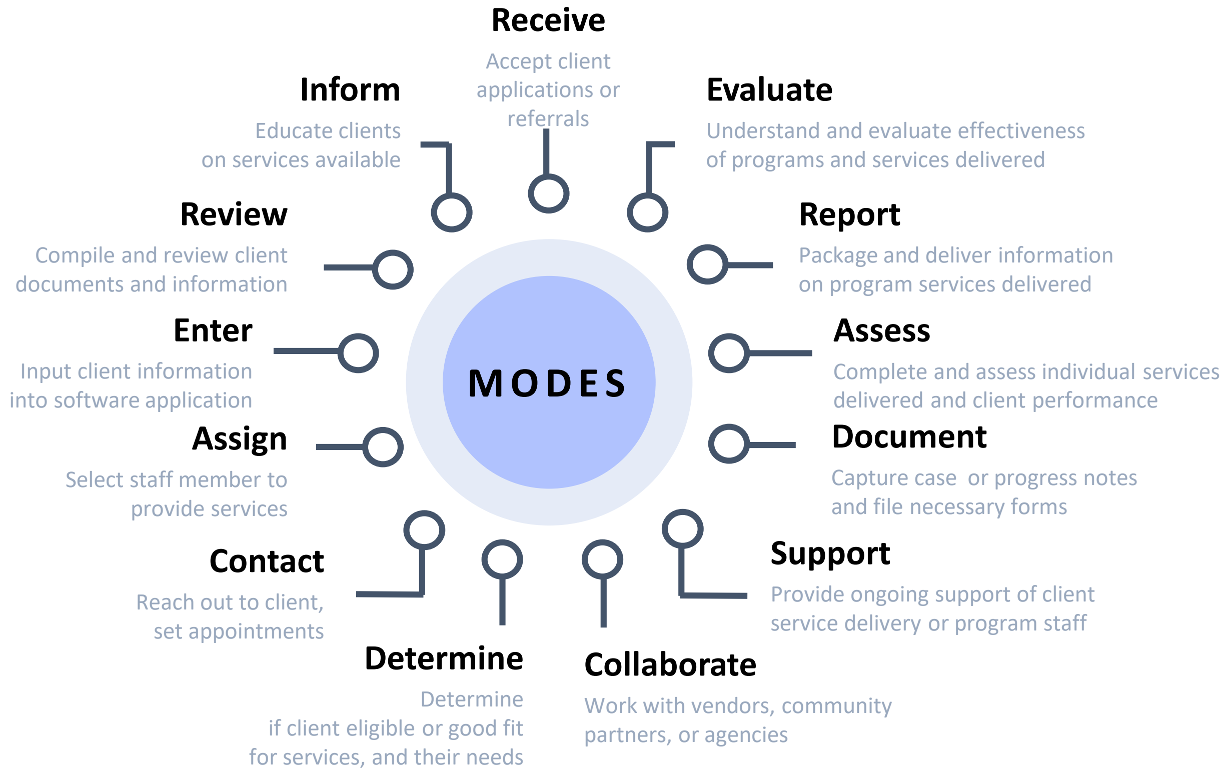
Modes and Modules

HHS Worker Modes

Modes represent the ways in which workers engage in their current business processes.
Understanding the various modes HHS staff engage while providing client services helps define an ECMS solution that is enterprise-wide, supporting worker processes and activities across departments and programs.



Modules Meet HHS Needs Mode by Mode

The ECMS modules defined in this report fully address all HHS worker modes as documented in the Insights Report.

Client & Partner Portal
- Receive
- Inform
- Contact
- Collaborate

Application Registration
- Enter

Search & Inquiry
- Inform
- Review

Vendor Management
- Collaborate

Reports
- Assess
- Report
- Evaluate

Data Collection
- Enter
- Assign
- Support
- Document
- Assess

Forms & Notices
- Inform
- Document
- Report

Invoices
- Support

Dashboards
- Assess
- Evaluate

System Admin
- Assign
- Support

Eligibility Determination
- Determine

Task Manager
- Assign
- Collaborate

Referrals
- Receive
- Review

Appeals
- Review
- Assess
- Evaluate

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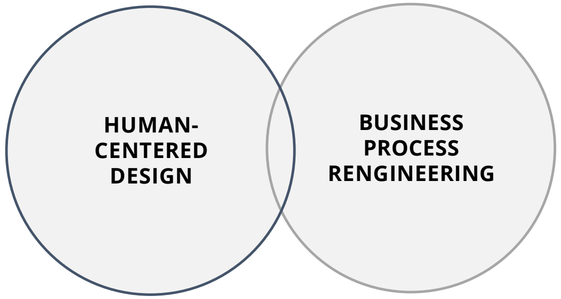
Revisiting Mindsets



As defined during the Sense phase through our interactions and observations with HHS staff, the **four mindsets represent common worker perspectives** that help clarify behaviors and pain points. Identifying these early on allowed us to **design an ECMS solution that both enables business processes and supports the workforce**.

I just want to help

High Collaborative, High Reactive

- Stray from the process, creating a **culture of partnership to go above and beyond** to accommodate individual client needs
- **Motivated by client experience**, they focus on the emotional experience of clients and overlook operational efficiency

I follow the standards

High Collaborative, High Proactive

- Follow the process and best practices creating a **culture of collective shared knowledge** to optimize performance based on **client outcomes**
- **Motivated by client experience,** they focus on programmatic evaluation and overlook operational efficiency

I just stay the course

High Separate, High Reactive

- Follow the general process, creating a **culture of order** by assisting one client at a time to accommodate their own needs
- **Motivated by individual workflow,** they focus on limiting disruption and overlook client experience

I follow my own path

High Separate, High Proactive

- Follow the process by their own book, creating a **culture of efficiency** to optimize performance based on **operational outcomes**
- **Motivated by individual workflow**, they focus on total number of clients served and overlook individual client experience

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Considerations for Worker Mindsets

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Efficient Data Entry	Minimizing the number of fields on a page, organizing pages by clear sections, and leveraging the driver flow functionality streamlines digital case processing and mitigates cognitive overload. Staff with this mindset will **look to spend less time in ECMS and more time supporting clients**.
Search & Inquiry	ECMS's search functionality allows HHS staff to easily access client information or application status so that they can **quickly respond to client inquiries**.
Collaborate	Fully exploring how **ECMS tasks, alerts, and reminders are used to communicate** and collaborate with colleagues will be of high value to this mindset.
Client Portal	Given this mindset's emphasis on client experience, these staff members **desire Client Portal functionality to be both informative and user-friendly for clients**, as well as providing clients another means to interact with HHS staff.
Analytics	Visualizing, quantifying, or otherwise demonstrating **how clients are being assisted** would be a helpful and gratifying motivator for this group.
Case History	This mindset looks to fully **understand a client's history and unique situation**. ECMS's digital case structure organizes client and household information in a clear, accessible manner.
Simplified Systems	Including everything needed to complete their workflow tasks in a single place (i.e. ECMS) and emphasizing enhanced automation features like eligibility determination and scheduling **minimizes workarounds and duplicative tasks so that this mindset can spend more time with clients**.

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Accessing Data	HHS staff with this mindset look to access all **information that improves decision-making and supports client outcomes**. This group will greatly value an ECMS database that can aggregate data across programs and divisions.
Change Management	Because of their collaborative nature and adherence to defined processes, HHS staff with this mindset are **well-suited to supporting change management** (as change agents or readiness champions), as well as acting as subject matter experts (SMEs) or "super users" to support ECMS Phase II implementation.
Configurability	This group supports a client management system that is **more configurable and adaptable to accommodate client needs** and aligns with business processes.
Data Quality	As frequent users of available data, this mindset greatly benefits from system validation messages, formatting checks, mandatory fields, and other **features that support data quality**.
Training Materials	This group believes **system knowledge and manuals should be well-documented** and used for building shared knowledge to support continuous improvement of HHS service delivery.
Client Outcomes	Highly motivated by client experience, HHS staff with this mindset will look to use ECMS output (data, reports, analytics) and proven operational procedures to **demonstrate effectiveness of HHS services**.
Balancing Act	This group aims to **balance process improvement opportunities with client experience**. ECMS supports this through automation (e.g. generating digital notices) and interactions between the Client and Worker Portals.

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Global Case Notes	Because HSS staff with this mindset **often use case notes as a personal accountability tool and progress tracker**, it is important that this feature be accessible across ECMS.
Case Processer	This mindset allows HHS staff **to leverage ECMS features like the driver flow and tasks to process a high number of cases efficiently**. HHS would also benefit from a centralized intake for staff to tap into a larger caseload pool.
Independent	With a "heads down" mentality that focuses on getting things done, HHS staff with this mindset **expect the case management system to work for them** and be aligned with their individual processes so that they can be efficient.
Task Master	ECMS's task-based management provides a defined, replicable case processing structure that accommodates this mindset's transactional nature and **offers a means for HHS staff to measure how efficient they are**.
Case Association	Staff with this mindset can be protective and possessive of their clients. ECMS's **file clearance feature associates known clients with existing Case Worker** assignments.
Timeliness	This group believes clients need to get benefits and services quickly and do not waste time doing so. The ECMS Client Portal provides **features that weed out likely ineligible or incomplete applications**, and system tasks provide a **mechanism to understand service delivery timeliness**.
System Reliability	Given their focus on caseload efficiency and completing tasks, it is important for **ECMS to be reliable**, with minimal maintenance or down time windows and quality transaction speeds.

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I follow my own path

High Separate, High Proactive

- Follow the process by their own book, creating a **culture of efficiency** to optimize performance based on **operational outcomes**
- **Motivated by individual workflow**, they focus on total number of clients served and overlook individual client experience

I follow my own path

High Separate, High Proactive

- Follow the process by their own book, creating a **culture of efficiency** to optimize performance based on **operational outcomes**
- **Motivated by individual workflow**, they focus on total number of clients served and overlook individual client experience

Personal Metrics	ECMS tasks can help individuals **measure task time and success rate** (worker dashboard). This directly supports improving one's personal efficiency, as well as offers a mechanism to **identify benchmarks and evaluate progress over time**.
External Tools	In focusing on operational or efficiency outcomes, this mindset will use external tools or strategies to manage their workload. **Integrating external applications or tools with ECMS** (e.g. Outlook, scheduler) and including features like export functionality is helpful to this group.
SME or Super User	As HHS staff aligned with this mindset are independent and proactive in accomplishing work, this group is **well-situated to provide SME or super user support** during ECMS Phase II implementation.
Personalizing ECMS	Because staff in this mindset "follow their own path," ECMS can include **functionality that allows users to save, pin, or personalize settings** to align with their own independent processes at the user-role level.
Integration Advocate	This mindset desires **interconnectedness in sharing client data across HHS platforms** in order to expedite tasks and improve workflow.
Trainer	Given their attention to detail regarding procedures and desire to use external tools to get the job done, this mindset is both **supportive of the development of training documentation and well-suited to deliver training**.

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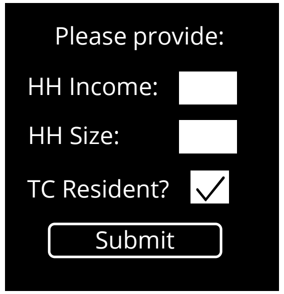
Representative User Journeys

Through our approach that leverages both human-centered design and business process reengineering principles, ECMS features and functions greatly focus on HHS worker and client usability. ECMS provides both greater utility and an enhanced user experience that should improve many aspects of HHS service delivery. This section offers a few key examples of user journeys in ECMS and demonstrates how specific features and functions improve the client and worker experience as they engage with the ECMS platform.

CLIENT PORTAL: ACCOUNT CREATION & APPLICATION FOR SERVICES

1

STEP: Client enters basic information into portal screener to determine potential eligibility for a particular HHS service.

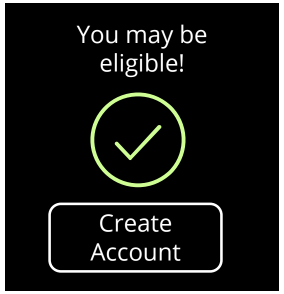


EMOTION: *I like that I can check to see if I'm eligible before fully applying!*

EXPERIENCE: The screener captures self-attested information like income, household composition, and Travis County residency to quickly evaluate whether HHS services are appropriate for them.

2

STEP: Client Portal screener informs user that they may be eligible and provides link to create an account.



EMOTION: *Excellent! It looks like I'm eligible!*

EXPERIENCE: If found potentially eligible, clients create an account (or login to an existing account) and apply for assistance.

If potentially ineligible, they can still apply, or the portal can provide additional resources and information.

3

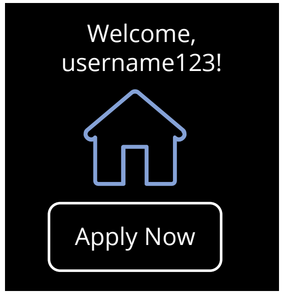
STEP: Client enters required information for account creation and designates a username and password.

EMOTION: *Why do I have to create an account to apply for services now?*

EXPERIENCE: As the ECMS Client Portal will be new to existing clients, users may initially be confused or hesitant in creating an account. Direction and guidance should be clear and instructive.

4

STEP: Upon creation of account, the portal guides the user to the application flow.



EMOTION: *Ah, now I see how to apply!*

EXPERIENCE: The portal logic will guide users to apply immediately following account creation and persists information already entered to reduce duplicative data entry.

5

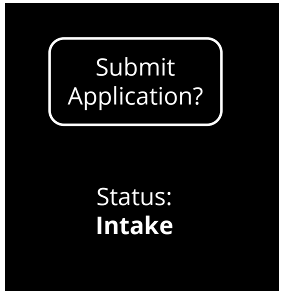
STEP: Client is guided along to answer program-specific questions, provide relevant information, and upload required documents.

EMOTION: *Looks like there are several required questions and items to verify before I can submit my application.*

EXPERIENCE: The portal driver flow only displays pages, questions, and fields that are pertinent to the specific service(s) requested by the client and guides the user along in an intuitive, linearly manner.

6

STEP: Client submits their application for assistance and can track the status of their application as it is processed.



EMOTION: *Great, my application was submitted! And I can return to the portal later to check my status.*

EXPERIENCE: Applications submitted online will generate tasks to initiate processing in the Worker Portal. The status of this request will be updated in the Client Portal as it is processed by HHS staff.

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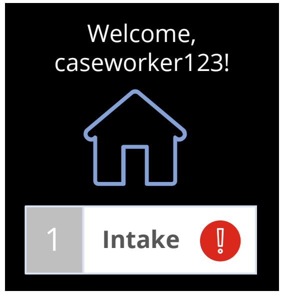
WORKER PORTAL: CASE PROCESSING

1

STEP: HHS staff member logs into ECMS and initiates an "Intake" task from the dashboard landing page.

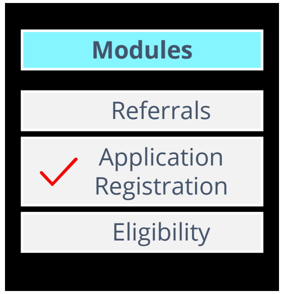


EMOTION: *Looks like I have a new task to complete!*

EXPERIENCE: Upon logging in, the HHS user will be able to view a dashboard with relevant workload analytics, including tasks, as well as a global navigation menu.

2

STEP: ECMS guides the user to the Application Registration module to perform initial data entry of client information.

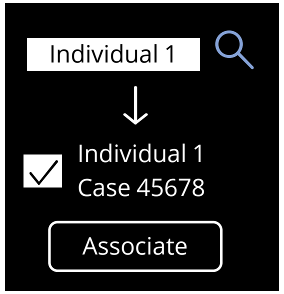


EMOTION: *It's nice that the system knows where to take me.*

EXPERIENCE: By defining role-based access, ECMS can assign tasks to different staff roles to align with business processes (e.g. Office Specialist/Intake Task; Case Worker/Eligibility Task).

3

STEP: ECMS's file clearance functionality checks to see if the individual is known to the system and associates to a case (if applicable).

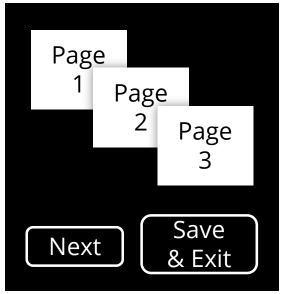


EMOTION: *Ah, I recognize this applicant and can easily associate them to their existing case file.*

EXPERIENCE: By evaluating the degree to which an individual matches with a known individual (does not have to be exact), the user is able to keep client records and information together.

4

STEP: The user is taken to the Data Collection module where the system driver flow guides them through program-specific screens.

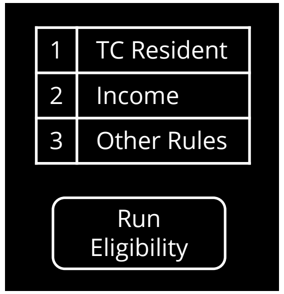


EMOTION: *I like that I only have to answer questions and enter data for the requested program.*

EXPERIENCE: The Data Collection module captures all remaining information to process the case and deliver services, including verifications, assessments, and service plans.

5

STEP: After capturing all required information, authorized users "run eligibility" to determine if the client can receive services.

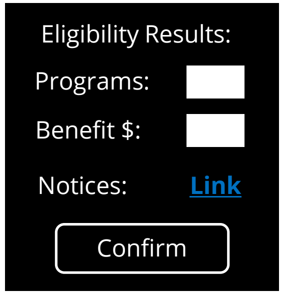


EMOTION: *It's great that the system does all the work in determining eligibility!*

EXPERIENCE: Through a simple click of a button, ECMS will determine whether a client is eligible for a particular program by evaluating all collected data against defined program requirements.

6

STEP: The user confirms eligibility results and continues case processing and service delivery, including generating forms and notices as needed.



EMOTION: *Excellent! Looks like this client is eligible and I know what my next steps are.*

EXPERIENCE: Depending on the program, additional tasks may be generated from the results page.

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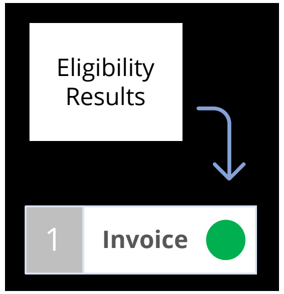
WORKER PORTAL: CREATING & PROCESSING INVOICES

1

STEP: ECMS's eligibility rules auto-generate an invoice record based on the requested service and calculated benefit amount.



EMOTION: *I like that the invoice is generated automatically!*

EXPERIENCE: ECMS will pull client, vendor, and other invoice-related information from the Data Collection module to automatically generate an invoice and reduce duplicative data entry.

2

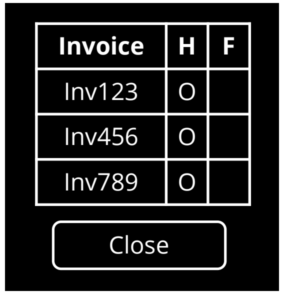
STEP: By processing an "Invoice" task, the HHS Case Worker reviews, confirms, and submits the record in the Invoice Summary page.

EMOTION: *Yep - everything is included to get this invoice approved.*

EXPERIENCE: The HHS Case Worker can access a dedicated Invoices module to manage invoices and confirm everything is in order (and all required verification attached) before submitting.

3

STEP: ECMS aggregates submitted invoices the HHS Center Manager to review and approve.

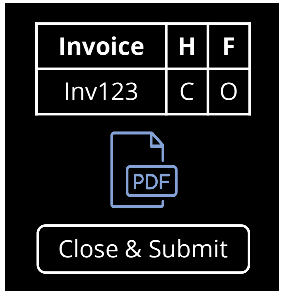


EMOTION: *It's great that I no longer have to generate a report to review and approve invoices!*

EXPERIENCE: ECMS's Invoices module gathers the necessary information and documents for each invoice record, simplifying the FSS billing process and removing the need for paper documents and reports.

4

STEP: ECMS generates a task for the HHS Finance user to review and approve a set of invoices.

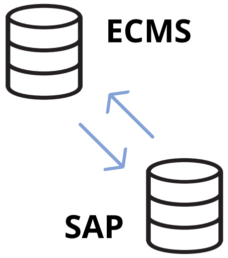


EMOTION: *The table in the Invoices module allows me to easily review each invoice submitted by FSS.*

EXPERIENCE: Through a digitized process that utilizes uploads and tasks, FSS Center Managers no longer have to package invoices and email to HHS Finance.

5

STEP: Through a bidirectional interface, ECMS sends all invoice information and attachments to SAP via batch file.

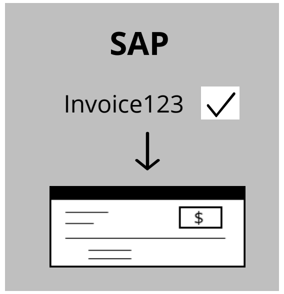


EMOTION: *So nice that this invoice data will be sent and uploaded to SAP automatically!*

EXPERIENCE: This demonstrates another manual task eliminated, allowing HHS Finance to approve and send invoice data to SAP without cleaning and uploading a .txt file.

6

STEP: SAP accepts the ECMS invoice file and Travis County Finance/Audit staff complete processing to cut a check.



EMOTION: *Looks like the ECMS invoice file provided everything needed to verify these invoice requests in SAP.*

EXPERIENCE: After a check has been sent to a vendor, the bidirectional SAP service will also update ECMS to inform both HHS staff and the client of the payment status.

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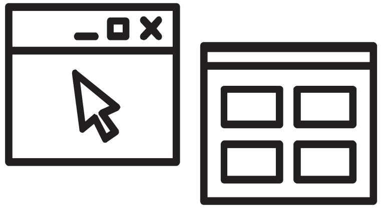
ECMS Technical Considerations

In order to ensure the ECMS features and functions identified in Phase I (in this report and the requirements spreadsheet) are met by the future software solution, we have provided a set of technical considerations that offer insight into non-functional components of ECMS. These considerations, while not exhaustive, will assist Travis County during the procurement and vendor selection process to identify a solution that is able deliver the functionality captured in this report.

ECMS Technical Considerations

System Architecture

Defines the structure, behavior, and fundamental organization of a software solution and how all its components cooperate.



Considerations include:
- *Source code developed in industry-standard coding languages*
- *Mobile-first, web-based solution compatible with widely-used web browsers across platform types*
- *ADA compliance and use of visual design elements*
- *User interface developed with standard markup and scripting languages (e.g. HTML, CSS, JavaScript)*
- *Compatibility with web services or Application Programming Interfaces (APIs)*

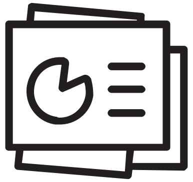
Data Conversion

Moving sets of data from one application (e.g. CABA) to another (e.g. ECMS), including reformatting/modifying legacy data.

Considerations include:
- *How far back to pull data (e.g. active program caseload plus last two years)*
- *Data cleansing approach and tools*
- *Process to extract, load, and transform (ETL) data*
- *Data conversion match rate*
- *Use of industry-standard relational database and archival procedures*

Service Level Agreements

Defines the level of service expected from the solution vendor through specified metrics by which service is measured, as well as agreed-upon remedies or penalties.



Considerations include:
- *Performance (minimizing errors, exceptions, slowness; speed of transactions)*
- *Accessibility (supporting user access to system, maintenance after business hours)*
- *Reliability/availability (minimizing disruption of services)*
- *Defect management (minimizing number of production defects)*

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ECMS Technical Considerations

SECURITY

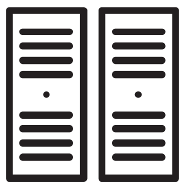
Defines the mechanisms, tools, and features that help keep a software solution secure, including access control, protection of confidential information, and defense against cyber attacks.

Considerations include:

- *Use of Transport Layer Security (TLS) certificates to protect in-transit data*
- *Data and API encryption*
- *Role-based security protocols*
- *Security and audit logs*
- *Single sign-on Active Directory (AD) integration and multi-factor authentication (MFA)*
- *Malware and malicious data scanning*

NETWORK & SERVER

Provides resources, data, services, or programs to the software application, including internet access, client data files, and email.

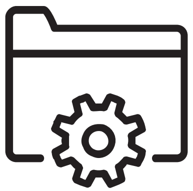


Considerations include:

- *On-premise (infrastructure, hardware) versus cloud (ongoing fees with vendor)*
- *Network segmentation (public-facing Client Portal versus Worker Portal)*
- *Use of certified cloud infrastructure for HIPAA and other confidential data*
- *Align security requirements before providing hosting services*
- *Use traviscountytx.gov domain if possible*

OTHER

Includes other technical considerations for the procurement and management of a software solution.



Considerations include:

- *Business continuity, disaster recovery, and other contingency planning*
- *Travis County ownership of all software code developed by vendor*
- *Dedicated development or testing environments*
- *Calculating licensing and maintenance costs*
- *Frequency of backing up data*

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Next Steps & Considerations

This report and the associated requirements spreadsheet are intended to provide Travis County stakeholders with the necessary details to procure a software solution that meets HHS business needs. By leveraging the outputs and analysis from Phase I, Travis County can define and circulate a Request For Proposal (RFP) and identify an appropriate ECMS solution. Evaluating and selecting a vendor calls for careful consideration not only with the identified functional requirements, but also of the development and implementation approach, change management, project governance, and maintenance and operations.

ECMS Procurement

Decide Phase Outputs

Data Mapping & Reporting

- **Data Mapping & Reporting Requirements Document** lists all data elements (fields and pages) and reports required for HHS operations.
- **Data Mapping & Reporting Requirements Report** interprets, contextualizes, and summarizes the Data Elements & Reporting Requirements Document.

ECMS Functional Requirements

- **ECMS Requirements Spreadsheet** lists all functional requirements for ECMS features and functionality.
- **ECMS Requirements Report** contextualizes and explains the core features and functions captured by the ECMS Requirements Spreadsheet.

Procurement

RFP Development

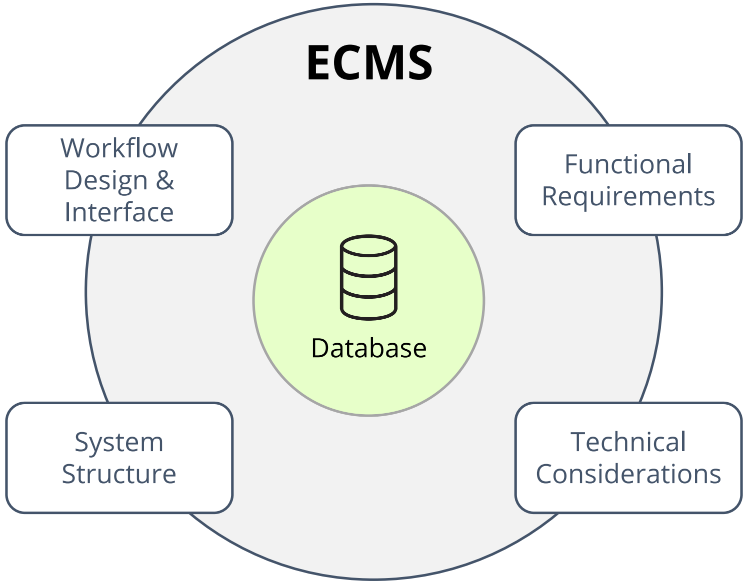
- By leveraging and validating these Phase I outputs, Travis County will be able to release a competitive RFP to identify the right solution.

Evaluate & Select Solution

- Travis County will evaluate and select a system vendor to partner with in the development of ECMS.
- Considerations will include cost, solution feasibility, delivery approach, and implementation timeline, among others.

ECMS Phase II

Begin **implementation of ECMS** based on the selected software solution and aligned with the prioritized functional requirements



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Other Considerations

Project Governance

Stewardship of ECMS will require clearly defined governance bodies and procedures designed to properly vet and oversee the implementation of the solution and steer the project successfully through initiation to completion.

Project Management Tools

Leveraging tools that track requirements, testing scenarios/cases, risks, and other project activities help Travis County stakeholders monitor ECMS development, timeliness, and alignment with project scope.

Organizational Change Management

Phase I introduced new opportunities and goals for HHS built around ECMS. As a new system will ultimately result in significant organizational change, it is important to define procedures that prepare, support, and help HHS staff with the ECMS rollout. These could include communication and readiness plans, designated "change champions," and clearly defined timelines.

Design, Development, & Implementation

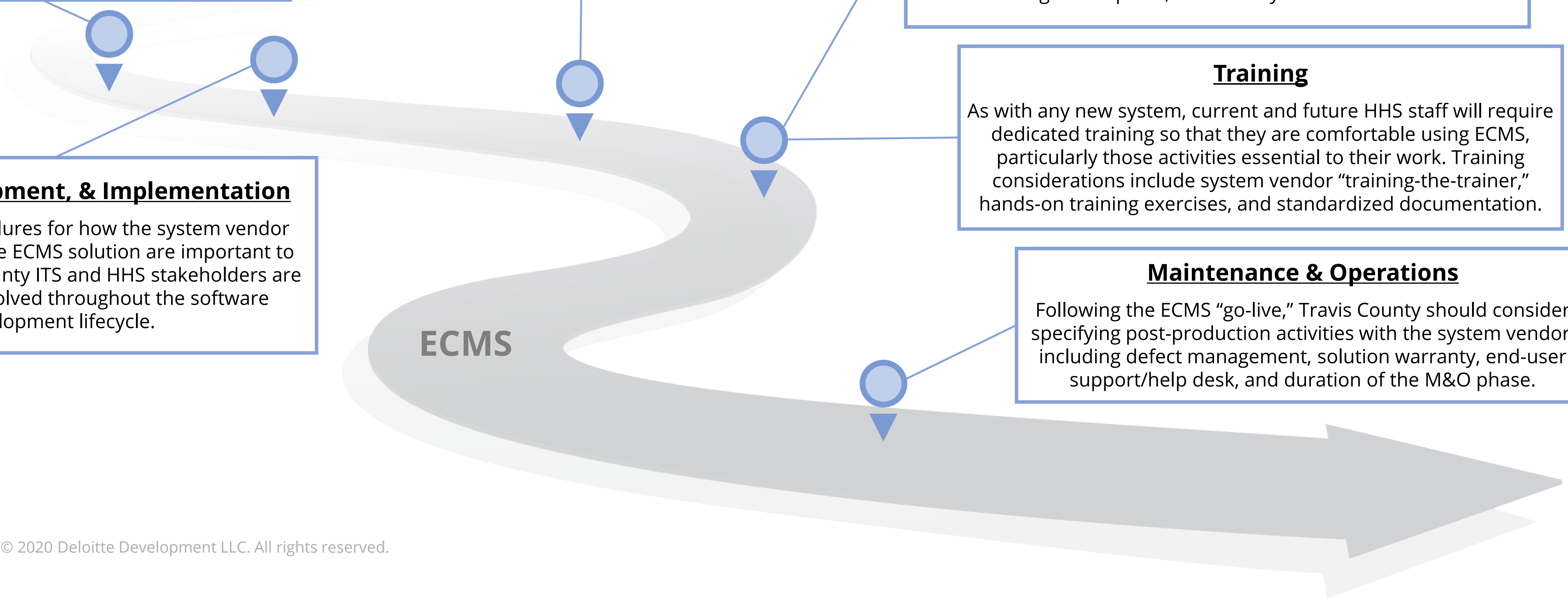
Well-defined procedures for how the system vendor intends to deliver the ECMS solution are important to make sure Travis County ITS and HHS stakeholders are appropriately involved throughout the software development lifecycle.

Training

As with any new system, current and future HHS staff will require dedicated training so that they are comfortable using ECMS, particularly those activities essential to their work. Training considerations include system vendor "training-the-trainer," hands-on training exercises, and standardized documentation.

Maintenance & Operations

Following the ECMS "go-live," Travis County should consider specifying post-production activities with the system vendor, including defect management, solution warranty, end-user support/help desk, and duration of the M&O phase.



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Thank you.

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Appendix & Attachments

This section provides the attachment of the ECMS Requirements Spreadsheet, which includes all prioritized functional requirements for ECMS organized by module. We have also included program-specific functional flows that were used during the Decide phase discovery sessions to identify system driver flows and which will be a helpful reference for Phase II implementation.

ECMS Functional Requirements Spreadsheet

The attached spreadsheet provides detailed business and functional requirements for ECMS as identified in the Decide Phase and organized by the defined columns below. HHS stakeholders prioritized these requirements using the MoSCoW method.

MoSCoW Prioritization

Must Have	Requirements that have been determined as non-negotiable according to business needs
Should Have	Requirements that are not vital, but add significant value
Could Have	Requirements that would be nice to have, but have a small impact if left out

ECMS Requirements

TCHHS ECMS Requirements

ID	Type	Category	Requirement	Consensus Priority	Alternate Priority
A unique identifier to number each business rule or functional/non-functional requirement within an ECMS module	Identifies whether the captured requirement is a business rule or functional/non-functional requirement	Identifies the system component of the underlying requirement, which also addresses dependencies across modules	Describes the functional or the non-functional need that collectively achieves the underlying business goal/rule	The agreed upon MoSCoW priority assigned for a ECMS requirement as confirmed by business stakeholders for HHS programs (primarily FSS)	An alternate priority defined by a division or program, if applicable, that differs from the consensus priority (additional details provided in the "Comments" column)
CP-02	**Business**		**The Client Portal will allow individuals to apply for assistance and request other program services**		
CP-02.01	Functional	Client Portal	Portal will allow account holders (client) to apply for assistance or services and captures program-specific data as required for FSS Direct, FSS Supportive, and CSD Housing/Weatherization programs	Must Have	

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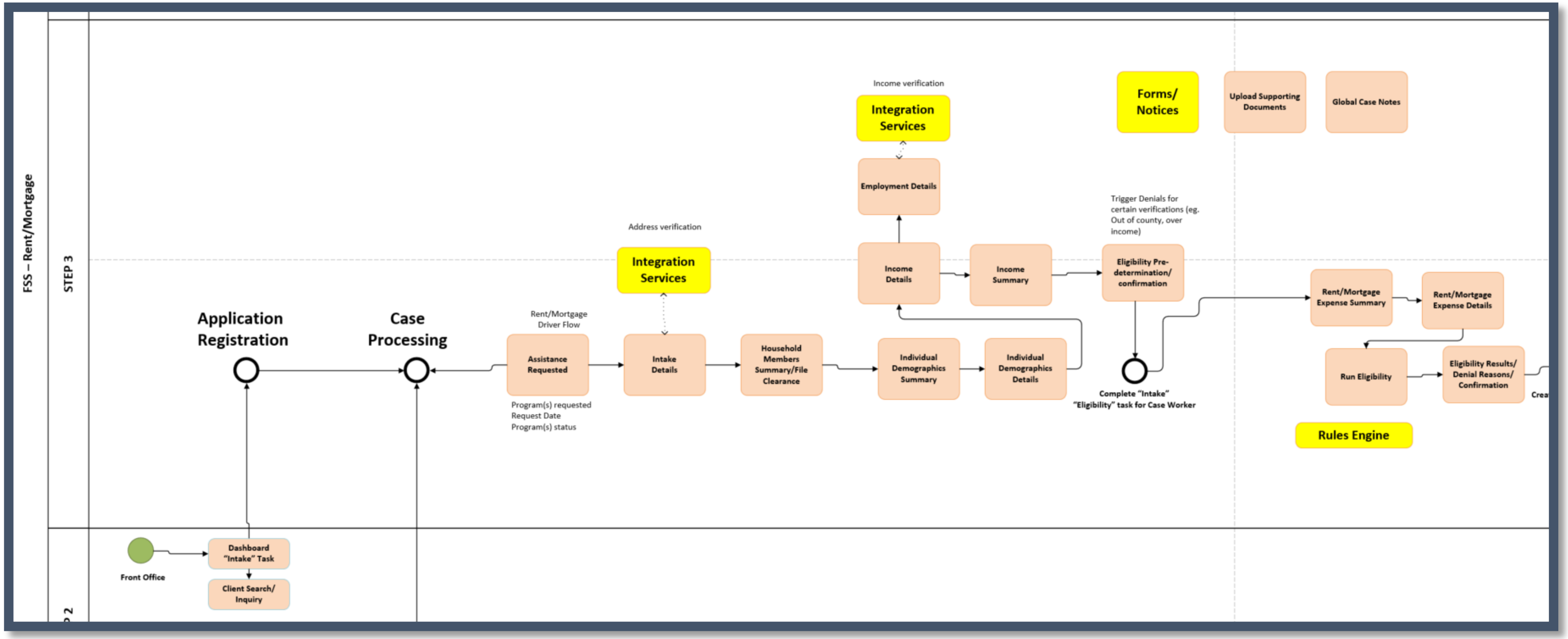
ECMS Program Functional Flows

The attached Visio file provides functional flows of case processing for various HHS programs through ECMS. This, in conjunction with the business process flows developed during the Sense phase for each HHS program, offers helpful references for the implementation of ECMS in Phase II.



Functional Flows

TCHHS ECMS Functional Flows

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