



**Centralized Application Unit (CAU)**  
**Program Assessment and Redesign Project**  
**Final Report**

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## I. Introduction and Executive Overview

### 1.1 The Central Applications Unit

The Central Applications Unit (CAU) resides within the Center for Health Care Quality (CHCQ) of the California Department of Public Health (CDPH). CAU was established to centralize the processing of health care facility applications for state licensure and federal certification. The goal of centralization is to standardize the licensure application process and to ensure that the review of these applications is completed in a consistent and timely manner. Initially, CAU centralized seven facility types – primarily long term care (LTC) facilities such as skilled nursing homes. This has been the focus of CAU to date. Applications for other facility types continue to be processed at the 15 CHCQ District Offices (DOs) located throughout California.

### 1.2 The CAU Program Assessment and Redesign Project

This project was initiated in order to:

- Conduct business process redesign in CAU, first assessing the “As-Is” work processes, then developing a vision of the “To-Be” state in which those processes would be streamlined.
- Describe a revised CAU organization that would expand its focus to include processing applications from all health care facility types under the auspices of CHCQ.
- Develop a conceptual model of the expanded CAU organization, including redesigned work processes, organizational structure, and staffing. Include in the conceptual model an approach to data collection, performance management, technology support, and staff training.

**Phase One.** In the first phase of the project, The Results Group conducted an in-depth analysis of CAU work processes, structure and staffing, use of data and technology, performance management, and staff development processes. The findings from this analysis are presented in a previous report, *Licensing and Certification – Central Applications Unit “As-Is” Business Process Analysis Report*, dated January 20, 2014.

In the final weeks of Phase One, CDPH management recognized that the information brought forward and the findings from the assessment called for a slightly different approach to Phase Two. Rather than the consultants continuing to take an “outside expert” approach, leading to the presentation of findings and recommendations, the organization would be better served by the consultants working with CAU staff and CDPH management to develop a shared vision, revised work processes, and so forth. Thus the organization itself would develop the “To-Be” vision, rather than receiving recommendations from the consultants. This approach was expected to yield not only a better redesign, but stronger buy-in from the organization and greater ability for management and staff to implement the new design. The Results Group heartily supported this new approach, and upon completion of the project, observes that it has indeed yielded those expected benefits.

Furthermore, it became clear that there is internal and external demand for immediate progress. Thus Phase Two focused on moving the organization forward quickly to improve business processes and begin immediately to pursue centralization and standardization, while also building toward a comprehensive vision of the redesigned organization.

**Phase Two.** In work sessions with CAU staff and CHCQ management facilitated by The Results Group, the following were established as the mission and objectives for the future CAU organization, which will be expanded and renamed the “Central Licensing Branch” (CLB).

*The mission of the newly envisioned CLB is to ensure standardization of all facilities licensure application processes – to verify that the review of these applications and ownership compliance history are done efficiently and consistently and issue licenses to approved facilities.*

To accomplish this mission, the following objectives were identified:

- Centralize applications for all facility types (initial application, change of ownership, etc.).
- Centralize the issuance of all facility licenses.
- Increase consistency of facility assessments and recommendations for licensure.
- Expand the availability and accuracy of data for application reviews and approvals.
- Leverage enabling technologies currently available to CAU.
- Expand automation, including electronic workflow management and “paperless” systems.

### 1.3 Conceptualizing the New Organization

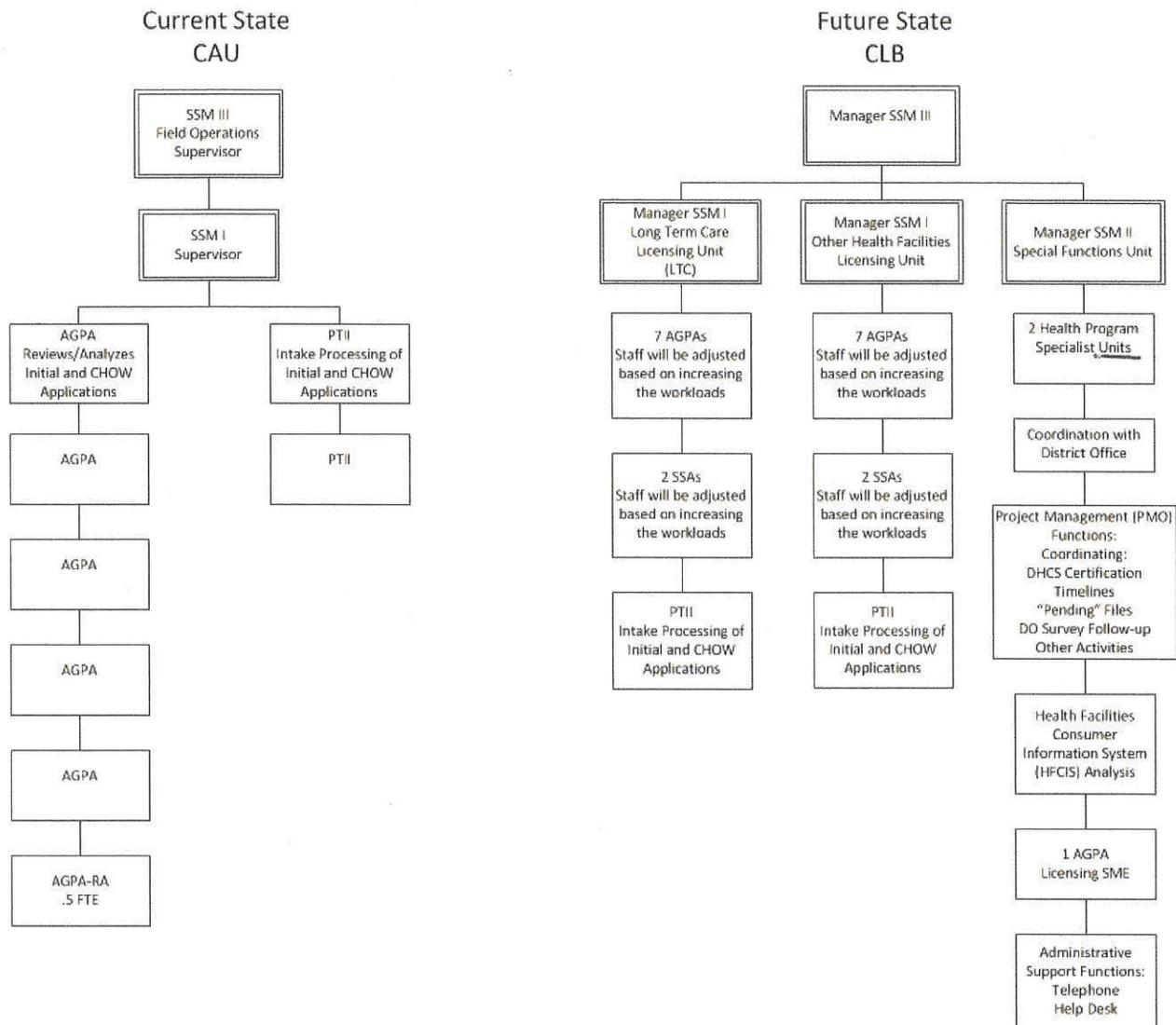
To accomplish this expanded mission and objectives, CHCQ management developed a vision and outline of a CLB organization with increased staff capacity and a broader range of expertise. In the “To-Be” vision, the organization’s responsibilities will include:

- Centralize health care facility licensing for all facility types, including processing initial applications, renewals, Change of Ownership applications, and so forth.
- Coordinate the complete facility licensing processes from receipt of the initial license application package, through the on-site survey conducted by the local DO, to final issuance/denial of a facility license.
- Communicate and coordinate the processing of licensing of facilities throughout the CHCQ and with all stakeholders.
- Establish performance objectives and track organizational performance against those objectives.
- Leverage enabling technologies and automate the workflow where possible.

The current CAU organization is staffed as follows:

- A. Two Program Technicians II (PTII) – Support Staff
- B. Five Associate Governmental Program Analyst (AGPA) – Business Analysts
- C. One Retired Annuitant AGPA (half time)
- D. One Staff Services Manager I (SSMI) – Manager/Supervisor

The following page illustrates the current CAU organization compared with a preliminary organization chart for the new CLB.



The new CLB organization adds the following:

- Additional AGPAs and SSAs to process the increased volume of applications (from facility types currently being processed by DOs).
- Specialized functions/positions providing the expertise needed to:
  - Fully assess and evaluate applications for all facility types (including knowledge of legal forms and requirements).
  - Provide the required information to the public (including online public access to information regarding facility ownership).
  - Support the Help Desk staff to answer detailed questions and resolve stakeholder issues.
  - Coordinate with DO's to obtain final license approval or denial.
  - Design, implement, track and report performance metrics.
  - Implement rigorous project management processes to ensure that the entire licensure process is conducted in an efficient, timely, and cost-effective manner.

For example, in the new CLB organization two experienced Health Program Specialists will provide much need expertise in the following areas:

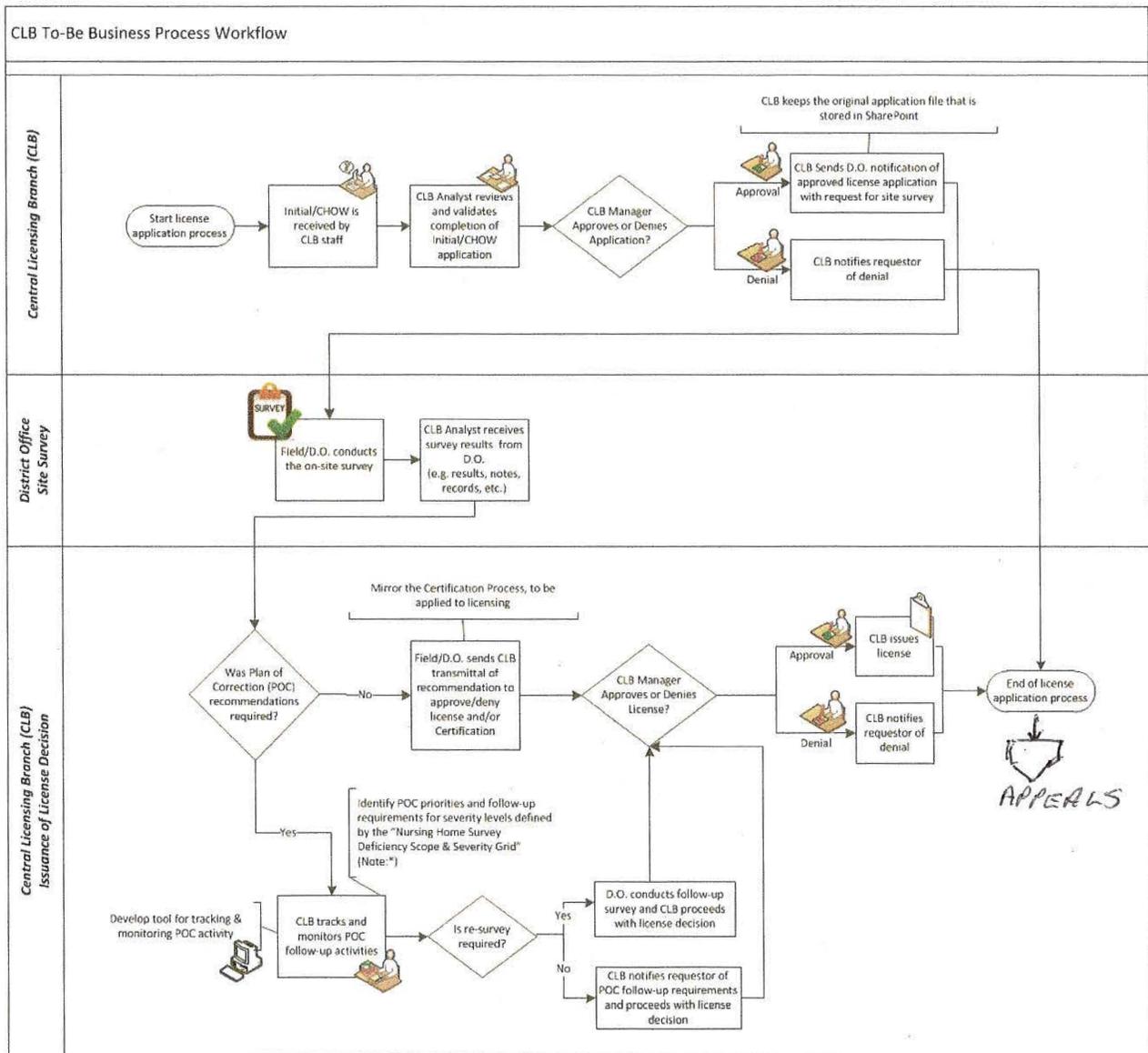
- Determining if the facility application specification of services meets the guidelines of statute and regulations for the specific type of facilities.
- Verifying compliance with staffing requirements for each facility type.
- Reviewing resumes of Facility Administrators, Registered Nurses, Director of Nursing, etc., to ensure that they meet the requirements.
- Reviewing facility space and location requirements.
- *INPUT TO APPEALS PROCESS*

An experienced legal person would review legal documents such as:

- Leases, sub-leases and sub-sub-leases
  - Deeds
  - Assignment and Assumptions
  - Management Operating Agreements
  - Transfer Agreements
  - Hospital Transfer Agreements
  - Bankruptcy documentation
  - Verification of monies being transferred
  - Hostile Take overs
  - Purchase agreements
  - Denials
  - Compliance History
  - Appeals
- A full-service Help Desk to provide initial interface with the public and stakeholders.
  - A management structure to provide the necessary leadership, oversight, and support to staff for the full range of CLB functions.

## II. Work Process Changes

### 2.1 Description of Envisioned CLB Process Flows



Note: \* CMS – Survey and Certification Group Special Focus Facility (SFF) Program Scoring Methodology and State Operations Manual (SOM), 42 CFR §483 and §488, Survey Requirements for States and Long Term Care Facilities, and Survey, Certification, and Enforcement Procedures.

## 2.2 Process Detail Grid

Below is a high level description of the CLB “To Be” Business Process Flow.

<b>Process Name</b>	CLB License Application Intake, Review, and Approval/Denial of the health care facility license Applications; monitoring of survey processes; issuance/denial of facility licenses	
<b>Purpose</b>	Implement the CLB Future-State (To-Be) leveraging opportunities to enhance current practices, resolving duplication and redundant processes; centralize licensing processing from receipt of initial application or CHOW through issuance/denial of the facility license	
<b>Description</b>	Defines the processing of licensing applications by the envisioned CLB	
<b>Assumptions</b>	Current processes being used by CAU and DO’s when making informed decisions regarding approval/denial of the facility license application, will be centralized. Survey results will be shared and tracked by CLB. CLB will maintain the single authoritative version of facility application file. Licenses will be issued by CLB.	
<b>Issues/Problems</b>	CAU and DO staff are currently not working consistently (e.g., variances in workflow and decision to license/deny). Insufficient onboarding, process and procedure training for management and staff. Out-of-date regulation, policy and procedure documentation. Systems not working together to share information and not collecting all data that is required of the CAU staff to effectively perform their duties; e.g., ASPEN, ELMS, HALS. Work process redundancies; duplicity of work with in CAU and DO’s. Too few staff to meet demands of the current and future workload.	
<b>Start Process Trigger</b>	Facility application package (initial or CHOW) is received from prospective licensee. Renewal of facility license is required. Certification for Medicaid/Medicare participation is required.	
<b>Completion Indicator</b>	All activities have been successfully completed by the CAU department staff and DO surveyors. Plan of Corrections items have been resolved (if needed). Application for licensing has been approved or denied by management and licensee requestor has been notified of licensing decision.	
<b>Key Roles and Responsibilities</b>	Key roles and responsibilities for the To-Be future state are currently being defined. AGPA: responsible for license application documentation and compliance reviews. PTII: responsible for all license application intake activities. SSMI: responsible for final review of license application and approval/denial of license decision.	
<b>Major Inputs/Outputs</b>	<p><u>Inputs</u></p> <ul style="list-style-type: none"> <li>• License application packages: Initial license and Change of Ownership CHOW applications</li> <li>• CAU Checklists</li> <li>• Application required documents</li> <li>• Notification Letters</li> <li>• Compliance History reports</li> <li>• Site survey documentation when completed</li> <li>• Plan of Corrections and Recommendations</li> </ul>	<p><u>Outputs</u></p> <ul style="list-style-type: none"> <li>• Completed application package</li> <li>• Approval/Denial of license</li> <li>• Licensee requestor is notified of approval/denial decision</li> <li>• License is issued</li> </ul>

<b>Forms and Reports Used</b>	<u>Forms</u> <ul style="list-style-type: none"> <li>• Initial application &amp; CHOW (HS200, HS215A)</li> <li>• HS309, CDPH 325</li> <li>• CAU Checklists – by facility type (future version will include links to policy information)</li> <li>• Site survey summaries</li> <li>• Plan of Corrections forms</li> </ul>	<u>Reports</u> <ul style="list-style-type: none"> <li>• Compliance History Reports: <ul style="list-style-type: none"> <li>– ELMS Compliance Summary</li> <li>– CAU History Report (“G” drive): data captured from ASPEN</li> <li>– ASPEN</li> </ul> </li> <li>• Site survey reports</li> </ul>
<b>Systems Used</b>	<ul style="list-style-type: none"> <li>• ASPEN: Automated Survey Processing Environment; Federal system</li> <li>• ELMS: Electronic Licensing Management System; State system</li> <li>• HALS: Health Application Licensing System; CDPH system</li> <li>• HFCIS: Health Facilities Consumer Information System; CDPH system</li> </ul>	
<b>Quantitative Measures</b>	<ul style="list-style-type: none"> <li>• Performance measure have not yet been determined</li> <li>• Staff roles and responsibilities need to be revisited</li> <li>• New metrics and tools need to be designed and implemented</li> <li>• Need to develop tool (tickler file) to track and monitor Plan of Corrections activity</li> </ul>	

### 2.3 Summary of CAU to CLB Process Changes

- A. CAU will be renamed CLB and will address the licensing of all health facility types.
- B. CLB will continue to process the currently-designated Long Term Care (LTC) facility types. However, the review and approval of all initial and CHOW applications for the facility types currently processed by the DO (approximant 23 facility types) will be phased into the CLB over the next twelve to eighteen month period.
- C. The first phase will include all LTC “Change” types (CHON, CHOL, CHOB, CHOS, etc.) that are currently processed by the DOs.
- D. The subsequent phases will focus on centralizing the review and approval of initial and CHOW applications and other “Changes” for all remaining facility types.
- E. The CLB intake of initial and CHOW license applications workflow will remain unchanged; however, as the processing of more license and CHOW applications for additional facility types is centralized, the volume of transactions will increase and new functionality will be incorporated into the CLB. Most activities will continue to be paper-based for the short term, as there are plans to digitize or automate many of these processes over the next twelve to twenty-four month period.
- F. The DO surveyors will receive copies of the approved Initial and CHOW applications, as the original application file will stay with the CLB. Future license application documents will be digitized and/or automated for on-line access by the D.O. surveyors and the CLB staff, thus saving costs of copying and mailing approved application packages. CLB will maintain the authoritative facility licensing file.
- G. Copies of on-site survey results will be sent to the CLB for tracking purposes and follow-up, where needed. If a Plan of Corrections is not required the surveyor will send CLB their recommendation to approve/deny the license and/or certification.
- H. If a Plan of Corrections documenting identified deficiencies and remediation of those deficiencies is required, the surveyor will notify the CLB. The CLB will track and monitor all Plan of Corrections follow-up activities, as determined using the Centers for Medicare and Medicaid Services (CMS) “Scope and Severity” levels, and State Operations Manual (SOM) Appendix Q – “Guidelines for Determining Immediate Jeopardy” triggers.
- I. All facility licenses will be issued by the CLB.

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- J. With centralization of all license and CHOW application processing, the CLB will provide the CHCQ with the ability to
- Establish performance objectives and timeliness associated with the processing facility licensing and CHOW applications.
  - Implement a consistent approach to data collection.
  - Improve accuracy of data collected in the licensing database and reporting against the performance objectives.
- K. CLB will apply technical and human resources in an effective manner to meet increased demands and projected performance objectives.
- L. Recruiting/Hiring additional staff by CLB will be determined based on the increased workload demands due to phasing in additional facility types.
- M. Addition space will be needed for additional staffing, and also a file room will be needed until all files are digitized.
- N. Additional online electronic file storage will be required.

## 2.4 Detail of CAU to CLB Process Changes

Activity	Activity Description	Future Roles and Responsibilities	Process Function (Manual, Automated, Digital/Scanned)	Input-Output
<p><b>Future CLB Activities:</b> It is envisioned that most CLB activities will be automated. Most paper will be digitized.</p> <p><b>Organization &amp; Staffing:</b> The need for additional staff and new staffing classifications will be determined based on newly defined roles and responsibilities, volume of transactions and span of control.</p>	<p><b>Future Description:</b> CLB will be responsible for processing all Initial license and all license change applications. CLB will oversee site-survey Corrective Action Plans and recommendation follow-up activities. CLB will review the final approval/ denial recommendations provided by the D.O. CLB will issue licenses or denial letters.</p> <p><b>Organization &amp; Staffing:</b> All activities will be separated into the following major business units within CLB: Long Term Care (LTC) Unit All other Facilities Type Unit Special Functions Unit</p>	<p><b>Phase I:</b> All Initial and CHOW applications for LTC facilities will be centralized and processed by the CLB staff. <b>Receipt of Initial or CHOW:</b> PTII – performs all application intake Activities preparing the file for AGPA review. AGPA – Analysts are responsible for reviewing/analyzing the license and/or CHOW application documents. SSMI – responsible for final application review and approval/denial decision.</p> <p><b>Subsequent Phases:</b> All additional facility types will be phased-into and processed by the Central Licensing Branch (CLB)</p>	<p><b>Future Process:</b> The process will be mostly automated, enabled by electronic document processing functionality and leveraging automated workflow applications.</p>	<p><b>Input:</b> Receipt of license application.</p> <p><b>Output:</b> Complete set of license application documents. Issuance of facility license. Notification of license denial. Plan of Corrections with follow-up recommendations</p>
<p><b>Receive Initial license and/or CHOW application package.</b></p>	<p><b>Future Activities:</b> Receipt of Initial and CHOW workflow will remain unchanged; Search ELMS for existing licensee and facility information: Enter Initial/New license application information, or Validate CHOW - existing license information. Future paper documents will be digitized and many activities will be automated using automated workflow applications. Additional facility types and license change Activity will be gradually phased into CLB.</p>	<p>CLB staff roles and responsibilities will be appropriately assigned to the following business units: Long Term Care (LTC) Unit All other Facilities Unit Special Functions Unit Assignment of roles and responsibilities will be determined. It is anticipated that the Staff Services Analyst classification will be used throughout CLB.</p>	<p><b>Future Process:</b> This is currently done manually, with the exception of using ELMS to enter Initial (new) information or validate and update existing CHOW information. Future processes will leverage digitized documents and automated workflow applications. Initially, ELMS will be used to enter Initial Application information and update the CHOW/existing license information.</p>	<p><b>Input:</b> Application package for initial license or change to current license status.</p>

Activity	Activity Description	Future Roles and Responsibilities	Process Function (Manual, Automated, Digital/Scanned)	Input-Output
Date stamp all forms and documents	<p>Future Activities:</p> <p>All incoming forms and documents must be date-stamped using the date of receipt. In the future, applications submitted electronically will be automatically date stamped.</p>	<p>PTII ensures all documents are dated and tracked to correct application file.</p> <p>Assignment of roles and responsibilities will change as automation and specialization are introduced into the CLB.</p>	<p>Future Process:</p> <p>Date stamp to be electronically generated on incoming forms and documents that are submitted electronically. Paper documents will be scanned and automatically data stamped.</p>	<p><u>Input:</u></p> <p>License application with forms and documents required for the Initial &amp; CHOW facility type</p>
HS200 data entry into ELMS	<p>Future Activities:</p> <p>Using ELMS open the "Facility" tab and enter the required data.</p> <p>It is envisioned that this Activity will be automated and/or digitized.</p>	<p>Assigned PTII enters the required application information:</p> <p>Details entered include:</p> <p>Appl. Received date.</p> <p>Type of application.</p> <p>Click applicable licensing and certification checkbox.</p> <p>Select status drop box – "Application pending approval."</p> <p>Enter status date.</p> <p>Select DO representative.</p> <p>Enter AGPA to whom the application is assigned for review.</p>	<p>Future Process:</p> <p>Currently, this information is manually entered into ELMS from the HS200 paper-based document.</p> <p>Document will be scanned when received, or data may be automated and entered by applicant via electronic form and sent directly to CAU.</p>	<p><u>Input:</u></p> <p>HS200 form</p>
Process application fee (if applicable)	<p>Future Activities:</p> <p>Attach payment to copy of HS200 and forward this to GFAU.</p> <p>It is envisioned that this Activity will be automated and/or digitized.</p>	<p>PTII processes this manually and carries payment and form to GFAU.</p> <p>Assignment of roles and responsibilities will be determined.</p>	<p>Future Process:</p> <p>Automated via scanning, digitizing and automated workflow applications.</p>	<p><u>Input:</u></p> <p>HS200 form with fee payment</p>
Set up new file folder, matching facility type to color-coded folders; or Update existing CHOW file folder. CHOW is not an "initial" license application, but requires completion of application document.	<p>Future Activities:</p> <p>It is envisioned that this Activity will be initially digitized and supported by SHAREPOINT software. It is envisioned that this will be fully automated through the use of an enterprise content management system.</p>	<p>PTII is responsible for setting up new or updating existing license application file-folders; includes all activities required to complete the set-up of the file-folder.</p> <p>Assignment of roles and responsibilities will be determined as automation and specialization are introduced.</p>	<p>Future Process:</p> <p>Automated via scanning, digitizing and automated workflow applications.</p>	<p><u>Input:</u></p> <p>License application package</p>

Activity	Activity Description	Future Roles and Responsibilities	Process Function (Manual, Automated, Digital/Scanned)	Input-Output
Attach Tracking/Control Route Sheet to front of file folder.	<p>Future Activities:</p> <p>The Tracking/Control Route Sheet tracks the status of the application file includes: who has accessed the file, and who is currently working on the application.</p> <p>It is envisioned that this Activity will be automated and/or digitized.</p>	<p>PTII prints the paper form that is currently stored on the CAU "G" drive, and places it on the front of the folder.</p> <p>Assignment of roles and responsibilities will be determined.</p>	<p>Future Process:</p> <p>It is envisioned that this activity will be initially digitized and supported by SHAREPOINT software. It is envisioned that this will be fully automated through the use of an enterprise content management system and enabled via an Automated Workflow system.</p>	<p><u>Input:</u></p> <p>Tracking Control Route Sheet</p>
Print "Secretary of State" and other documentation that provides licensee application entity details	<p>Future Activities:</p> <p>Print documents and place in the application file-folder: CAU Checklist Secretary of State Facility profiles for CHOWs Acknowledgement letters Other required forms and documents specific to facility type and license/application request.</p> <p>It is envisioned that this Activity will be automated and/or digitized.</p>	<p>PTII is responsible for printing required documents and having them ready when the application is being reviewed for review/analysis.</p> <p>Assignment of roles and responsibilities will be determined.</p>	<p>Future Process:</p> <p>It is envisioned that this Activity will be initially digitized and supported by SHAREPOINT software.</p>	<p><u>Input:</u></p> <p>Secretary of State document</p>
Process fingerprint clearances (if applicable)	<p>Future Activities:</p> <p>Currently this is required for HHA and ICF facility types. This activity is to be evaluated further for applicability to other facility types and individuals. This process will be automated in the future.</p>	<p>PTII copies and forwards fingerprint clearance documentation to AGPA (if applicable) for HHA or ICF license request.</p> <p>AGPA uses HALS to gather fingerprint information, then forwards the file to assigned Analyst for completing the file review.</p> <p>Assignment of roles and responsibilities is determined.</p>	<p>Future Process:</p> <p>To be determined: combination of process functions.</p>	<p><u>Input:</u></p> <p>Fingerprint clearance form.</p>

Activity	Activity Description	Future Roles and Responsibilities	Process Function (Manual, Automated, Digital/Scanned)	Input-Output
Hand-off licensee application file to assigned AGPA.	<p>Future Activities:</p> <p>Staff reviews file to ensure all documentation and forms are available for AGPA to review file, and gives file to designated AGPA.</p> <p>It is envisioned that this Activity will be automated and/or digitized.</p>	<p>PTII is responsible for preparing the application package file for review by the AGPA; and then, notifies AGPA that file is ready to be reviewed/analyzed.</p> <p>Assignment of roles and responsibilities will be determined.</p>	<p>Future Process:</p> <p>It is envisioned that this Activity will be initially digitized and supported by SHAREPOINT software. It is envisioned that this will be fully automated through the use of an enterprise content management system and enabled via an Automated Workflow system.</p>	
AGPA receives application package file and begins the review & analysis process.	<p>Future Activities:</p> <p>AGPA uses printed checklists to ensure all required documents and forms are correctly placed and in the file.</p> <p>CLB designated staff will continue to use the checklist to ensure all required documents and forms are complete and placed accurately in the file.</p> <p>It is envisioned that this Activity will be automated and/or digitized.</p>	<p>AGPA is responsible for reviewing and reviewing/analyzing the information provided for Initial/CHOW license.</p> <p>Information must be complete and accurate.</p> <p>Assignment of roles and responsibilities will be determined</p>	<p>Future Process:</p> <p>It is envisioned that this Activity will be initially digitized and supported by SHAREPOINT software. It is envisioned that this will be fully automated through the use of an enterprise content management system and enabled via an Automated Workflow system.</p>	<p><u>Input:</u></p> <p>License application package</p>
Provider Enrollment sends CLB AGPA Medi-Cal exemption package, DHCS 6201 (if applicable).	<p>Future Activities::</p> <p>AGPA processes the exemption package:</p> <p>Reviews documents to confirm provider meets requirements supporting the claim of exemption.</p> <p>It is envisioned that this activity will be automated and/or digitized.</p>	<p>AGPA reviews the claim documentation and notifies DHCS of approval/denial for exemption, and files paper-based file with CLB.</p>	<p>Future Process:</p> <p>It is envisioned that this Activity will be initially digitized and supported by SHAREPOINT software. It is envisioned that this will be fully automated through the use of an enterprise content management system and enabled via an Automated Workflow system.</p>	<p><u>Input:</u></p> <p>Medi-cal exemption package, DHCS 6201</p> <p><u>Output:</u></p> <p>Completed Medical Exemption package is filed with CLB</p>
CLB application review status is entered into the AGPA work log.	<p>Future Activities:</p> <p>Each AGPA keeps one's own work log that tracks the application status they have worked on. It is envisioned that this Activity will be automated and/or digitized.</p>	<p>AGPA maintains a log of their workload activities.</p> <p>Tracking the status of applications will be the responsibility of designated staff.</p>	<p>Future Process:</p> <p>Process is to be automated in the future.</p>	<p><u>Input:</u></p> <p>AGPA work log is currently stored on the CLB "G" drive</p>

Activity	Activity Description	Future Roles and Responsibilities	Process Function (Manual, Automated, Digital/Scanned)	Input-Output
Review Office of Inspector (OIG), Google, CMS, and other Internet websites for licensee/facility information.	<p>Future Activities:</p> <p>Check websites for information about the licensee/CHOW applicant that would show if provider is an eligible/ineligible Medicare provider.</p>	<p>AGPA reviews this information for compliance/non-compliance reports that will be used to make the license approval/denial decision.</p>	<p>Future Process:</p> <p>This will be automated via the Internet in the future.</p>	<p><u>Output:</u></p> <p>Print-outs of document findings</p>
Prepare notification letters to license requestor.	<p>Future Activities:</p> <p>Notification letter informs designated District Office and other individuals that a license application has been received and is being processed by CLB. It is envisioned that this Activity will be automated and/or digitized.</p>	<p>AGPA prints and sends (mail or email) notification letters. Templates are currently stored on the CLB "G" drive. Assignment of roles and responsibilities will be determined.</p>	<p>Future Process:</p> <p>Process is to be automated in the future.</p>	<p><u>Input:</u></p> <p>Letter template</p> <p><u>Output:</u></p> <p>Notification letter</p>
Review analyze all application forms and documentation	<p>Future Activities:</p> <p>Review each form for completeness. If application has deficiencies, send requestor deficiency notification letter requesting required information. Required review/analysis activity will not change. It is envisioned that forms will be automated and/or digitized.</p>	<p>AGPA sends (mail or email) the requestor a deficiency notification letter stating what information that is required for license approval. Assignment of roles and responsibilities will be determined.</p>	<p>Future Process:</p> <p>Process is to be automated in the future.</p>	<p><u>Input:</u></p> <p>Letter template</p> <p><u>Output:</u></p> <p>Notification letter</p>
Research Initial licensee and CHOW facility's Compliance History.	<p>Future Activities:</p> <p>When all forms and documents have been reviewed and are complete and accurate, check the facility's compliance history. In ASPEN &amp; ELMS, check all stakeholder compliance history information. If compliance history passes, indicate completion on the checklist. If not, notify the manager of the findings.</p> <p>Compliance History Review will not change. It is envisioned that this activity will be automated and access to information will be more user-friendly.</p>	<p>AGPA is responsible for reviewing the facilities past compliance history; this is used to make license approval/denial decisions. Assignment of roles and responsibilities will be determined.</p> <p>A new CLB "Health Specialist Unit" will be formed staffed with legal/policy specialists to facilitate these activities.</p>	<p>Future Process:</p> <p>Process is to be automated in the future.</p>	<p><u>Input:</u></p> <p>Facility's compliance information located in ASPEN and ELMS</p> <p><u>Output:</u></p> <p>Print-out report of compliance history findings</p>

Activity	Activity Description	Future Roles and Responsibilities	Process Function (Manual, Automated, Digital/Scanned)	Input-Output
Update tracking/control route sheet & give file to SSM.	Future Activities: Update the Tracking & Control Route sheet; Give the licensee applications file to the SSM I for final review, completion & sign-off It is envisioned that this Activity will be automated and/or digitized.	Future Roles and Responsibilities: AGPA forwards application package to SSM I for final review of all documentation and research results. Assignment of roles and responsibilities will be refined.	Future Process: This is both and manual and automated process. Automation will be applied where possible in the future	<u>Input:</u> Reviewed application package  <u>Output:</u> Application ready for SSM I approval/denial decision
Conduct the final review of the Initial or CHOW application package documentation.	Future Activities: CLB SSMI reviews all documentation in the licensee application file Updates the checklist. Activities will not change. It is envisioned that this Activity will be automated and/or digitized.	Future Roles/Responsibilities: Future SSMI does a final review of the application package before making license application approval/denial decision. Assignment of roles and responsibilities will be revised.	Future Process: This is both manual and automated process Process functionality is to be determined	<u>Input:</u> Completed application package
SSM approves or denies initial license or license change application.	Future Activities: CLB SSMI approves the Initial or CHOW application. Activities will gradually include all Initial license and Change of license requests. It is envisioned that this activity will be automated.	Future Roles/Responsibilities: SSMI makes application approval/denial decision.	Future Process: This is both manual and automated process.	<u>Input:</u> Completed application package  <u>Output:</u> Application approval/denial decision is made
SSM sends original application file to D.O. for site-survey.	Future Activities: SSMI sends application package file to designated DO for site-survey. Changes to this activity: Initial and CHOW application files will stay with CLB, and pertinent documents will be copied and sent to the DO Application documents will be digitized for on-line access by designated staff.	SSMI notifies district office of application decision; and then, sends file to the district office for site-survey. SSMI or other designated staff will notify the D.O. application is ready for the site-survey.	Future Process: Activities will be automated (scanning and automated workflow applications) Immediate future: copy of the original application file will go the district office; original application file kept at CLB office.	<u>Output:</u> Completed application package
AGPA Updates CLB forms and systems noting what work have been completed.	Future Activities: Analyst updates: ELMS Tracking/Control Route sheet and AGPA workload log Existing software applications will be updated (application work status). Tracking/Control Route sheet will be automated.	AGPA updates ELMS, logs and forms and spreadsheets that are stored on the "G" drive. Assignment of roles and responsibilities will be revised.	Future Process: Logs and spreadsheets are stored on the "G" drive, and will become automated/electronic and stored on the Intranet's CLB library.	<u>Input:</u> Logs and spreadsheets stored on the CLB "G" drive are updated

Activity	Activity Description	Future Roles and Responsibilities	Process Function (Manual, Automated, Digital/Scanned)	Input-Output
District Office completes site-survey.	<p><b>Future Activities:</b>            Surveyor performs the site-survey to make the final license approval/denial decision. If applicable, the surveyor will prepare the Plan of Corrections with recommendations for correction.</p>	<p>District office performs survey Activity and (if applicable) a Plan of Corrections is prepared by facility. DO is responsible for recommending if a follow up site-surveys is needed and forwarding recommendation to CLB.</p>	<p><b>Future Process:</b>            Manually performed by district office surveyor who makes the license approval/denial recommendation and it is forwarded to CLB</p>	<p><b>Input:</b>            Application package</p> <p><b>Output:</b>            Survey findings document; Plan of Corrections Recommendations</p>
CLB receives survey results from the D.O. surveyor.	<p><b>Future Activities:</b>            This is a new activity. DO sends survey results to the CLB for Plan of Corrections monitoring and follow-up. If no follow-up is required, SSM makes the final license approve/denial decision. If there is a Plan of Corrections with recommendations for follow-up, CLB will track and monitor DO follow-up activities.</p>	<p>Assignment of roles and responsibilities will be determined.</p>	<p><b>Future Process:</b>            This is a new step. Functionality type(s) will be determined. Tracking and monitoring tool (e.g. tickler report) To Be Developed</p>	<p><b>Input:</b>            Site survey results</p>
Site Re-Survey required?	<p><b>Future Activities:</b>  <b>YES:</b> DO conducts follow-up survey and CLB designated staff tracks status.  <b>NO:</b> CLB proceeds with license application decision.</p>	<p>CLB tracks and monitors on-going Plan of Corrections follow-up activities; or CLB proceeds with licensing decision. Assignment of roles and responsibilities will be determined.</p>	<p><b>Future Process:</b>            Tracking and monitoring tool, e.g., tickler report) to be developed.</p>	<p><b>Input:</b>            On-site survey results</p> <p><b>Output:</b>            Report of CLB follow-up activities</p>
License is approved or denied.	<p><b>Future Activities:</b>            SSM approves or denies facility Initial or CHOW license request.</p>	<p>CLB staff has authority for final approval/denial of license. If APPROVED: CLB staff issues license; If DENIED: SSMI notifies requestor of denial.</p>	<p><b>Future Process:</b>            New process to be developed for CLB. Functionality will be automated in the future.</p>	<p><b>Output:</b>            Facility license; or Notification of license denial</p>
PTII completes the license application process. Future State: Current activities may be placed under the "Special Functions Unit.	<p><b>Future Activities:</b>            PTII currently makes copy of original application file and files the copy with CLB.</p>	<p>Future activity assignments are to be determined.</p>	<p><b>Future Process:</b>            Copy of paper-based application package is filed with CLB. Phased-in functions: Original file will be kept with CLB Copy of file will be sent to the district office for survey On-going process and functionality will be determined.</p>	<p><b>Output:</b>            Completed application package is stored: With CLB, or In automated/ electronic application</p>

### III. Roadmap for the Centralization of Licensing (All Facility Types)

#### 3.1 Purpose of the Roadmap

The Results Group worked with CAU staff and CHCQ management to outline a “roadmap” to achieve the objectives delineated in Section I above. The following summarizes this path forward, and subsequent sections of this document describe in greater detail the key components of this roadmap.

#### 3.2 Steps to Achieve the CLB Objectives

*Centralize all Initial and CHOW applications, and other facility filings for the current seven facility types processed by CAU.*

- A. Transfer from DOs to CLB all activities and responsibilities for processing of initial applications, CHOWs, and other facility filings submitted for the seven facility types currently centralized under CAU.
- B. Develop checklists, procedure manuals, and other process documentation necessary to efficiently and consistently process the new transactions.
- C. Hire at least one additional AGPA and two Staff Service Analysts (SSA) to process the increased workload.

*Develop CLB organizational capacity and governance.*

- A. Identify organizational skills and capacity needed to accomplish the centralization of all facility types.
- B. Clarify roles and responsibilities of the CLB and staff in the DOs once application processing is centralized.
- C. Identify needed skills, knowledge, and abilities (SKA) needed by CLB staff to process additional facility types as they become centralized.
- D. Identify required staffing levels necessary to meet CLB performance goals and licensing activities as additional facility types become centralized.
- E. Identify and meet CLB training needs, and design a career path for CLB employees.
- F. Conduct skills, knowledge, and abilities (SKA) assessment of current staff, identify gaps between current SKA and the necessary SKA for the CLB and its expanded functions.
- G. Develop training curriculum for onboarding new staff, and as needed to improve existing staff competencies – this includes identifying training resources internally and externally, developing training methodologies and venues, etc.
- H. Continually monitor and adjust process and practice tools and technologies.

*Leverage existing technologies.*

The future License Application and Validation system, described below, will include functionality to allow CDPH to meet both California State facility licensing program requirements and provide the federal facility certification components as required by the Patient Protection and Affordable Care Act (ACA). While planning for and acquiring these new technologies, the following steps will allow CLB to utilize existing technologies more effectively and build toward a more robust information technology system.

- A. Reorganize the existing Internet and Intranet web environments so that required information can be stored, protected and retrieved efficiently.
- B. Create electronic procedure manuals and checklists to be stored online (defining the processing steps for each facility and application type – from initial application, to CHOWs, etc.).
- C. Develop standardized letters and notices that will be used by all staff throughout the facility licensing processes, and will be stored online.
- D. Use CDPH SHAREPOINT technology to store scanned facility application packages in a predefined file folder environment. (Note: this will position CLB to take full advantage of future Enterprise Content Management solutions).
- E. Develop and expand access to portals that can be leveraged by CLB staff.
- F. Update current phone routing system and instructions.
- G. Establish an Automated Help Desk environment.
- H. Work with the CDPH IT organization to update ELMS:
  - Update data entry screens.
  - Update ability to search and report on ownership information for compliance reviews.
  - Add additional reporting capabilities to ELMS.

*Capture data and implement Performance Management Processes.*

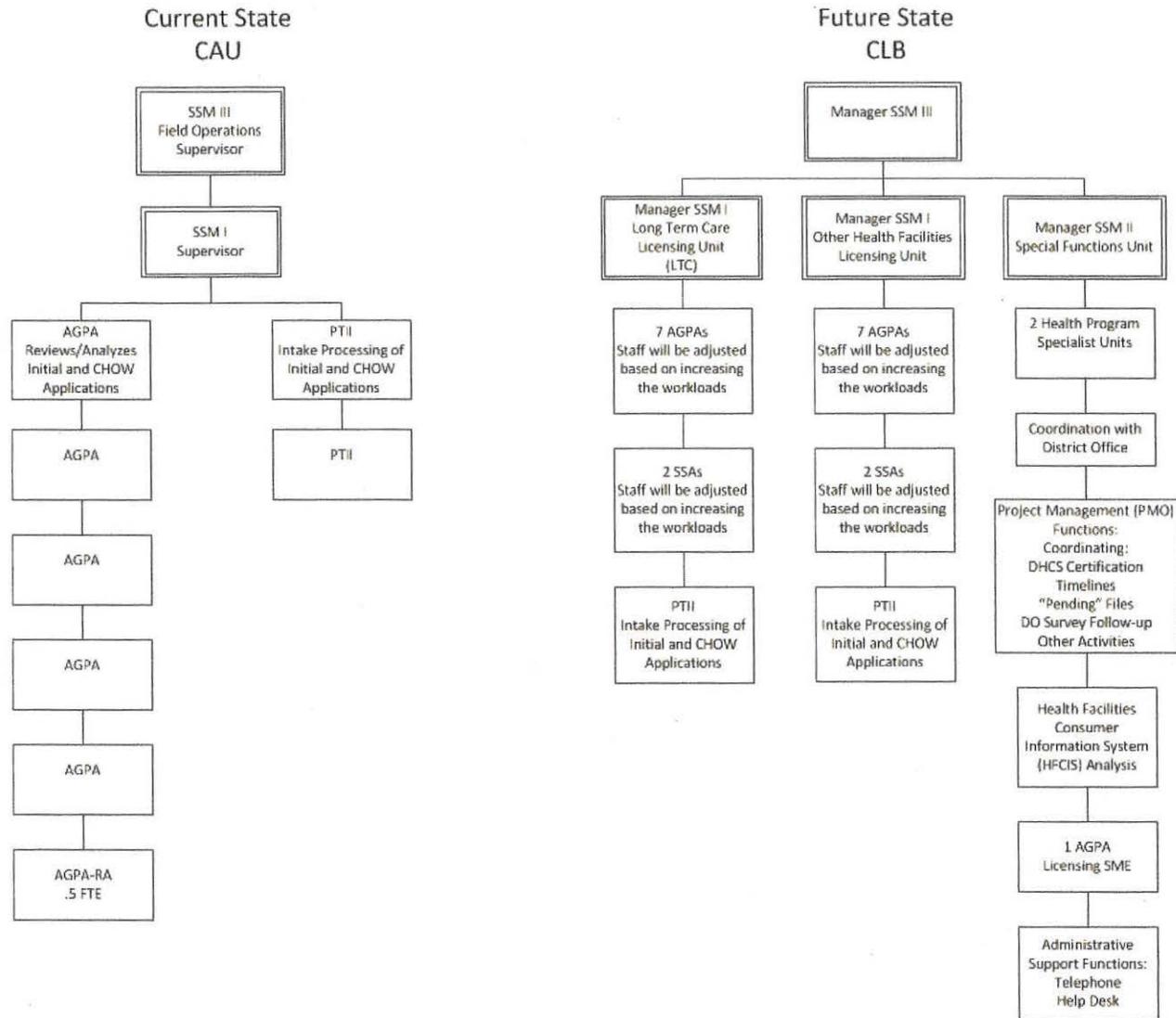
- A. Develop processes and procedures for the newly centralized licensing and certification workload to be processed in a timely and consistent manner.
- B. Establish performance objects and capture and report data pertaining to them.

*Centralize Initial and CHOW Applications for remaining Facility Types.*

- A. Plan the centralization of all License and CHOW reviews and approvals.
- B. Standardize CLB processes for existing facility types.
- C. Add additional staff to CLB as workload increases. Current estimate is that one SSM I, seven AGPAs, two SSAs, and one PTII will be needed.
- D. Based on 2014 license application and CHOW transactions data in Appendix A, CHCQ leadership will determine the order of centralization for the remaining initial and CHOW facility type applications. The following illustrates a possible approach to facilitation of the remaining Initial and CHOW facility type applications:
  - Start with the simplest and easiest facility types processed by a DO that has well-developed procedures and practices in place.
  - Develop: Check Lists” and refine regulations, procedures and policies.
  - Identify required staffing levels necessary to meet CLB performance goals and licensing activities
  - Acquire and train resources.
  - Identify key performance indicators that need to be collected and discuss why these are important to collect.
  - Create non-intrusive process for collecting, analyzing and reporting status and performance indicators.
  - Modify process and practices to improve performance.
- E. Continue until all facility types initial and CHOW applications are centralized.

#### IV. New CLB Organizational Capacity and Governance

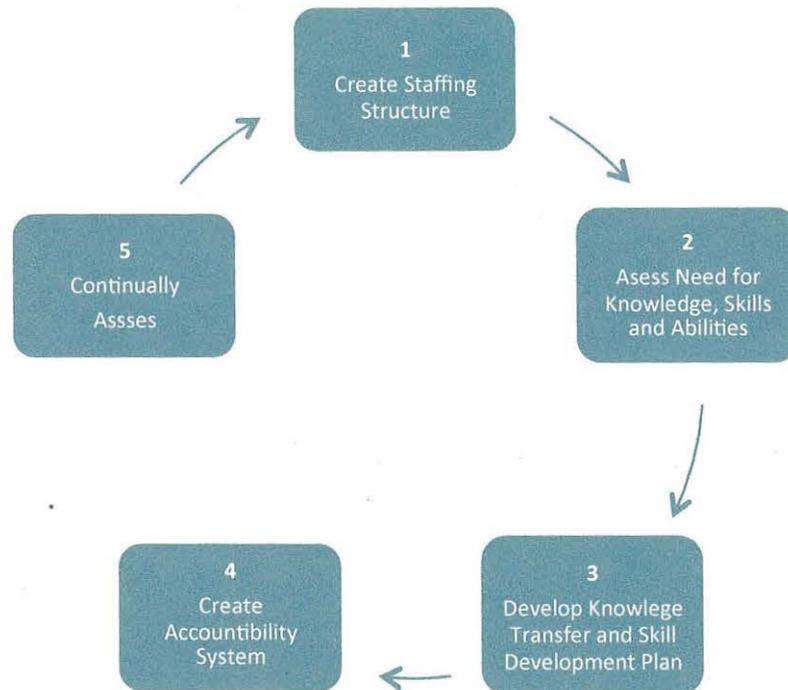
The following chart (also presented in the Introduction above) illustrates the current CAU organization chart, as compared to a preliminary organization chart for the new CLB.



#### 4.1 Developing Organizational Capacity

To build organizational capacity and competency to effectively process the full range of facility applications, CLB will need to expand the skills, knowledge and abilities of its workforce. This will be accomplished by transferring best practice knowledge and skill from the DOs to existing and newly hired CLB staff as well as on-boarding and training of CLB staff utilizing additional resources from within and outside CLB. Staff come to their positions with a set of abilities that, unlike knowledge and skills, are not as easily transferred to build organizational capacity. Therefore, required abilities should inform CLB hiring decisions.

CLB management will lead the following process to ensure comprehensive transfer of knowledge from DOs to CLB staff, ramp-up of staff competency to meet the future needs of CLB, and ongoing assessment and training.



1. Assess knowledge, skills and abilities required by staff to meet CLB goals and objectives stated above.
  - A. Assess what additional knowledge, skills and abilities (KSAs) will be needed to ensure successful execution of all functions. Appendix A provides a template for identifying needed KSAs; it is to be completed based on current understanding of future functions. As the plan for the acquisition of additional facility types is finalized, CLB leadership will update the KSA column of the assessment form.
  - B. Identify current capacity to meet the required KSAs needed to accomplish functions by using the KSA Assessment form for all existing staff.
  - C. Identify gaps between the needed KSAs post-centralization versus current KSA capacity among individual staff.
2. Create a training plan to ensure all current and new staff are competent in the required knowledge and skills for their particular positions.
  - A. Identify existing sources for required knowledge and skill transfer. Identified sources are to be entered into the KSA Assessment form corresponding to the targeted KSA. Sources will include:
    - Individuals in the district offices that are efficient and effective at particular tasks, documents, and current training offered outside CLB.
    - Current experts within CLB.
    - Policy and Procedures Manual regarding facility application types currently processed by CLB.
    - Additional documentation including manuals for ELMs, HALs and ASPEN.

- B. Develop additional strategies to transfer identified remaining KSAs to build staff competency to complete assigned functions.
    - After completing the policy and procedures manual for processing existing CAU facility application types, work with experts identified within DOs to document processing of additional facility application types into the policy and procedures templates and add to the manual.
    - Draw upon internal source documents and staff as well as external entities to develop and deliver additional formal training.
  - C. Use the KSA Assessment to uncover remaining knowledge and skills needed in the unit.
3. Create an accountability system to ensure staff receive all necessary knowledge and skill transfer.
    - Develop formal mentoring program, including:
      - Assignment of new staff to a senior staff to function as their mentor. Note: Senior staff will need training to understand their role as mentor and how to support adult learning.
      - Use of a checklist to structure content delivery and ensure the transfer of all necessary knowledge and skills. A sample checklist is provided in Appendix C.
      - Hold supervisors accountable for tracking completion of the mentoring process.
    - D. Create individual checklists to inform the transfer of knowledge and skill as well as monitor compliance with all transfer of knowledge activities identified.
  4. Continue ongoing assessment and monitoring to make adjustments to staffing and knowledge transfer plan. As staff gain experience the KSA assessment will bring to light new or on-going knowledge and skill transfer needs. Continual assessment will ensure that staff are competent to complete the assigned functions as well as ensure limited resources are targeted appropriately.

#### 4.2 Maintaining Organizational Capacity: Ongoing Training and Professional Development

Significant investment of time and resources will be necessary to build staff capacity to support the new centralized structure. Ongoing training to improve efficiency and practice skills will be needed and can be provided through several modalities:

1. *Didactic training:* The CHCQ Staff Education and Quality Improvement Section (SEQIS) offers training on subjects such as Supervisory Skills Modules, Interaction Success, Hiring 101, and more. SEQIS also provides the New Surveyor Academy Series and the Office Staff Academy. SEQIS does not have current capacity to customize these trainings for CAU, but CAU can identify trainers from within to learn the relevant modules and train future CAU staff.
2. *Online training:* CDPH's Information Technology Services Division has contracted with ISInc. for access to online technical training in using Word, Excel, etc. As internal transfer documents are created, such as the policies and procedures manual, these documents can be uploaded into online training software with voice-over to walk new staff through the steps, allow for live link exploration, etc.
3. *Formal mentoring:* CAU has historically relied on existing staff to mentor new staff, but has not implemented a formalized mentoring program to ensure thoroughness of knowledge and skills transfer as well as track activities for accountability. A sample mentoring checklist is provided in Appendix C. This sample is targeted for the on-boarding of new staff, but can be adjusted to reflect mentoring provided by DO experts to CLB staff or other mentoring activities.

4. *Peer Learning*: CLB managers will include case presentations as a standing item on staff meeting agendas. During this time staff will present challenging applications and troubleshoot next steps, developing critical thinking skills and institutionalizing the peer process as a mechanism for shared learning experiences.

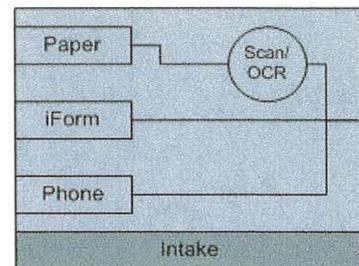
Once staff skills and knowledge are developed, the key to retention for many staff will be opportunities for mobility and progress through an articulated career path. These opportunities need to be explicitly stated and prioritized. Ongoing training and knowledge transfer should focus on not only meeting the need to build competency in the knowledge and skills identified for each individual, but also to build capacity for mobility. In the future CLB is envisioned to have the support of a training unit, much like the Staff Education and Quality Improvement Department. By integrating best practices into efficient and high-quality training, the organization maintains staff competency, upholds high standards of professionalism, and maximizes employee retention.

## V. Leveraging Future Enabling Technologies

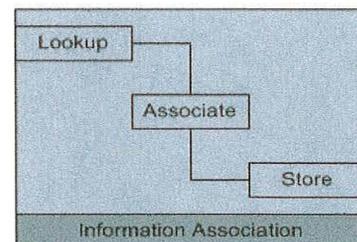
The future License Application and Validation system will contain functionality to allow CDPH to meet both State facility licensing program requirements and provide the federal facility certification components as required by the Affordable Care Act (ACA). These include online submittal of initial license applications; tools to verify and validate licensee application information; automated work flow capabilities; compliance checking; tracking of facility survey results; mandatory certification screening; initial and on-going monthly checks against exclusionary databases for licensee and providers and checks on those with ownership, control interests, agents or managing employees; and functionality to efficiently manage the license renewal and federal revalidation of all licensee/providers as required. This new system will leverage technology to realize process efficiencies. The solution will feature a secure web portal, intelligence-embedded applications, risk assessment, case management and automated workflow components. It will also interface with legacy provider files and integrate numerous eEnterprise content management systems.

The future Licensing Application and Validation system should consist of the following seven essential elements:

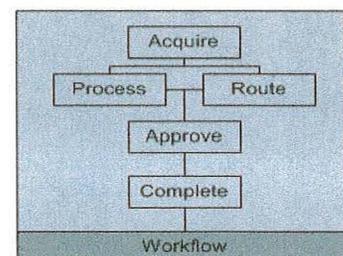
- Intake** – activities and technologies used to accept information into the environment. Proposed input mechanisms are paperless, supported by scanning and optical character recognition (OCR) capability needed to digitize paper documents; intelligent electronic Forms (eForms), or web-based screens that are made available via the CDPH portal that are electronic in nature, secure, and embedded with functionality to digitize information such as applications, request for certification, change of ownership, complaints, invoices, inquires and correspondence.



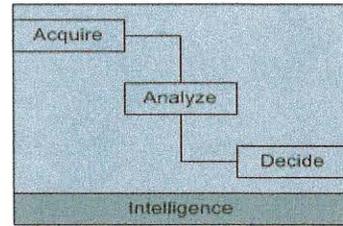
- Information Association** – Represents activities and technologies to bring related information together in a secure processing environment. For instance, the ability to combine incoming information, correspondence, forms and data associated with an individual Licensee or facility application with existing information about that proposed owner, individual applicant or facility and related historical activities. Associating information requires the ability to **retrieve** data/information, **create** an association between the new and existing data, and then **store** the information as the single authoritative source of information pertaining to the entity under consideration.



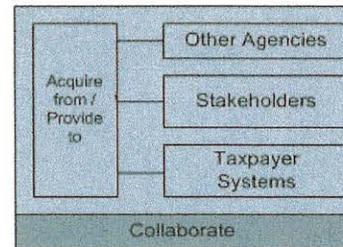
- Workflow** – Represents activities and technologies to electronically process a transaction, document, correspondence or application through an organization using appropriate business rule controls and electronic approvals. To provide electronic workflow, the automated environment must be able to acquire the requested transaction in digital form, enact the prescribed electronic business process route that the transaction should take based upon a predefined and controlled automated approval process and validate that the transaction was completed and approved as expected.



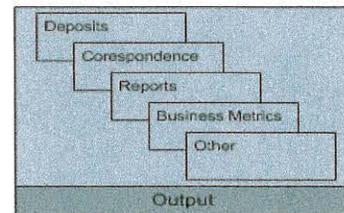
- Intelligence** – Represents activities and technologies that enable the application, certification, or investigative processes to execute queries into content and data repositories for strategic, tactical and operational decision-making. Business intelligence requires the ability to acquire data from various sources (other departments for example), provide the means to effectively analyze the data and use the analysis to make data-based business decisions.



- Collaborate** – Represents the ability for system-to-system communication and sharing of common data stores. Automated collaboration represents the ability to share data electronically, based on predefined permissions with executive and senior level management and process owners and stakeholders in a bi-directional manner and independent of dissimilarities between the underlying systems.



- Output** – Represents activities and technologies associated with creating and electronically exporting business products (reports, forms, activity lists, metrics, dashboards, etc.) from the CDPH technology environment to its intended customers in a defined, secure manner.



- Support** – Represents human and financial resources, skill sets and services levels necessary to ensure that the technology environment supporting CDPH processes is available when needed and consistently meets and maintains its performance, functionality, availability, recoverability, scalability, and security requirements.

The following table describes high-level business requirements of the envisioned automated License Application and Validation system.

Business Solution Area	Business Requirements
Intelligent Electronic eForms Process Management	<p>Given the urgent need to improve the efficiency of the licensing application process, and to substantially reduce the number of revisions required for initial application approvals, the licensing solution should have the following characteristics:</p> <ul style="list-style-type: none"> <li>• Provide for an electronic forms solution that will allow both interactive and off-line completion by the applicant with:               <ul style="list-style-type: none"> <li>– Built-in easy to use help capability.</li> <li>– The look and feel of the actual paper form.</li> <li>– Built-in “edit” capability to validate each field while entry is being made.</li> <li>– Drop down selection field capability where appropriate</li> <li>– Compatibility with the Adobe PDF format so that it can be widely used by any end user.</li> <li>– Standard features for viewing, indexing, storing and retrieving stored forms.</li> <li>– The capability to validate that a form was not altered after being stored.</li> <li>– Compatibility with technology that can “sign” the form with electronic tokens or certificates.</li> <li>– Compatibility to provide statistics to the department.</li> <li>– Compatibility to provide “access controls” so that levels of authority to access can be enforced.</li> <li>– Compatibility to provide for “workflow” that will enable flexible routing of forms to various interdepartmental systems.</li> <li>– Industry-standard capabilities to interface to other departmental systems.</li> <li>– Optional features that will allow the scanning and storage of historical forms and will allow the continued input of “paper forms” into the system via scanned methods.</li> </ul> </li> </ul>
Licensee/Provider Relationship Management	<p>To support CLB’s need to improve interactions with Licensees/Providers, the solution should have the following characteristics:</p> <ul style="list-style-type: none"> <li>• Provide a “Single View” of the Licensee data via a common entry point.</li> <li>• Provide a “single entry point” for all information exchanges with Licensee that supports entry of all requests, information status checking and other functions.</li> <li>• Provide a “single entry point” for all information exchanges, entries and requests for departmental users.</li> <li>• Provide internal departmental staff with the same forms entry capability as the stakeholders.</li> <li>• Provide for multiple access methods to get at licensee data (such as ID number, Name, Address, Date of request etc.).</li> <li>• Provide for a “folder” view of information about the Licensee so that it is all gathered logically in one place.</li> </ul>

Business Solution Area	Business Requirements
	<ul style="list-style-type: none"> <li>• Provide for “search” and “list” capability that will enable finding Licensee/owners with similar characteristics.</li> <li>• Provide for a “partial index” search and list capability so that if only partial information is known about a Licensee/owner, an iterative search and refine process can be used. (Such as a street name look up where address is unknown, or a last name search).</li> <li>• Keep all of the information in data base management system (DBMS).</li> <li>• Optional integrated features that provide the capability to automatically archive or destroy records based on different sets of business rules.</li> <li>• The capability to provide a framework and extensions to act as a single point of entry to the entire department.</li> <li>• Use industry standard interfaces to interface to existing departmental systems.</li> </ul>
<b>Business Process Automation “Workflow” and Integration</b>	<p>To support CLB’s need to improve the flow of information through the department and to Licensees and other stakeholders, the solution should have the following characteristics:</p> <ul style="list-style-type: none"> <li>• Processes must be automated, monitored and integrated through Workflow and Business Integration Tools.</li> <li>• Information can be efficiently routed to the proper channels.</li> <li>• Routine business routing rules for process and sharing information must be able to be enforced by the solution.</li> <li>• User management must be able to reroute information based on reported or observed exceptions.</li> <li>• Management must have visibility to the work in process and workloads for staff</li> <li>• Information must be able to be routed within and externally to other departmental systems.</li> <li>• Interfaces to other systems must be supported</li> <li>• An optional instant messaging capability should be available via the standardized access for all users.</li> </ul>
<b>Business Intelligence Analytics</b>	<p>To support CLB’s need to gain better business insight into program information, the solution should have the following characteristics:</p> <ul style="list-style-type: none"> <li>• The data storage solution shall support the use of the Departments reporting tool.</li> <li>• The solution shall provide for both immediate access to the departments data via industry SQL reporting tools.</li> <li>• All repositories must be have the ability for query programs to be written against them.</li> <li>• Automated forwarding or querying of data to and in other systems or the specialized repositories must be supported.</li> <li>• The repositories for all system information (forms, business data etc.) must all reside on a common COTS database solution</li> <li>• The system must have the capability to import none departmental data</li> <li>• The system must incorporate daily back-up.</li> </ul>

<p>Agency Systems Collaboration</p>	<p>To support the need to manage information exchange and collaboration with other systems, the solution should have the following characteristics:</p> <ul style="list-style-type: none"> <li>• The ability to access information from multiple external data stores and provide one view of the information to the departmental user, although the data sources might be spread over many different technologies and departments.</li> <li>• Facilitate connection between unlike technologies maintained by the Department and other departments.</li> <li>• Tools to provide access to existing systems should be provided so that current systems can become part of the overall “new” system.</li> <li>• Messaging components should be available so that information can be exchanged with other technologies via queuing mechanisms.</li> <li>• The optional ability to provide an interface to other agencies that appears to be a “web service” must be inherent in the solution.</li> </ul>
<p>General</p>	<p>To support CLB’s general business needs, the solution should have the following characteristics:</p> <ul style="list-style-type: none"> <li>• A solution that is built upon a business-based methodology or business architecture and will allow for the transformation of the business to operate more efficiently.</li> <li>• The technical architecture shall be service oriented, and allow for functional components to be added flexibly as the Department’s needs grow with time and experience.</li> <li>• The technical architecture shall be component based so that new elements can be added or changed without rewriting the application.</li> <li>• The solution shall use open Application Program Interfaces (APIs) and industry standard J2EE compatible components.</li> <li>• The solution must be shown to be able to interface to other state systems using messaging technology and direct API interfaces.</li> </ul>

## VI. Data Collection and Performance Management

As the business process are centralized (transitioned to the new organization) and documented, it will be important to establish a Data Collection and Performance Management System. The specifics of that system will need to be designed as the centralization process moves forward (i.e., processing of applications from additional facility types are centralized) and the CLB organization is established. However, the consulting team has worked with CAU and CHCQ management to outline the following key attributes of the future Data Collection and Performance Management System and the process for creating it.

To implement and maintain an effective system, it is essential that staff at all levels be involved in developing the outcomes, objectives, performance indicators and data collection processes. Because staff will be responsible for entering most of the data (and thus need to understand the nuances of how the data will be used), a Performance Management system is only successful when staff understand its purpose and have ownership of the process.

In designing the system CLB will need to give high priority to:

- Identifying CLB outcomes and key performance objectives.
- Developing a set of performance indicators (metrics) that:
  - Provide management information to support data-driven decision making at the Branch, Center, and Departmental levels.
  - Consider the driving factors that determine turnaround time for application processing, and build in sufficient detail to account for different circumstances that can affect turnaround time.
  - Can be collected routinely without overburdening the organization.
- Establishing policies, procedures, and technology systems that are able to:
  - Collect and analyze the data and provide meaningful “dashboard” information to management.
  - Respond to management inquiries and generate a range of special reports.

Once the system is in designed, implementing and maintaining it will require having a staff structure in place. A CLB staff position will need to be designated to coordinate data collection as non-intrusively as possible. The analyst assigned to the gathering, interpreting and reporting this information will work with CHQC executive team to continuous evolve the reporting format and distribution of performance information. This process should define target thresholds with documented actions to be taken once the thresholds are attained. If minimum thresholds are not met then an analysis of the current process and practices should be undertaken to identify where improvements can be made. If performance thresholds are exceeded, staff and management should celebrate their success and reward the team where possible.

## VII. Developing the CLB Communication Plan

As centralization progresses and the new organization takes shape, CAU management and CHCQ leadership have identified the need for a Communications Plan that provides a framework for information exchange regarding CLB. The plan identifies audiences and communication methods to be employed throughout the implementation of the CLB. It will be specifically designed to inform any individual or entity who is involved with, impacted by, or interested in the implementation CLB. A comprehensive communication plan will:

- Present a consistent message to all audiences.
- Ensure appropriateness of communication to various stakeholders and audiences.
- Promote understanding and acceptance of CLB objectives.
- Increase the effectiveness of the implementation process.
- Increase the probability of CLB success.
- Maximize team building and establishing team-based work processes (including performance management and continuous improvement).

Some vital components of the Communication Plan include:

- Articulate CLB's vision to internal stakeholders and external partners.
- Within CHCQ, conduct presentations for each branch, unit, and office explaining the purpose and role of the new organization; present information tailored to the organizational unit receiving the presentation (how CLB will interact with them, work process touch points, etc.).
- Communicate the CLB vision to business partners and control agencies (DHCS, CMS, etc.).
- Develop a CLB Web Page and mechanisms to continuously update information of interest to various audiences.

The following principles will guide communication during CLB implementation:

- Provide succinct and informative communication with all audiences throughout the CLB implementation process.
- For each target audience, utilize their preferred information channels and mechanisms (based on their most prevalent form of access to information).
- Encourage and maximize opportunities for input from all audiences, including both "quick-hit" options (e.g., surveys and topic-specific email inquiries), and more in-depth, substantive conversations (e.g., interviews, focus groups, brown bag lunches, blogs, etc.).
- Reinforce the message through repetition to help ensure a shared understanding.

### Appendix A: KSA Transfer Plan and Competency Assessment

The following chart presents a summary of the Knowledge, Skills, and Abilities (KSA) Transfer Plan and Competency Assessment developed in collaboration with CAU staff and CHCQ management.

Knowledge, Skills, or Ability (K, S, A) Needed	Employee Status/ Development	PT II Name	HFEN Name	AGPA Name	SSM I Name	SSM II Name
	Does the specific employee need competency in this KSA? Currently demonstrate competency in this area? How is this KSA transferred?					
<b>Foundational Skills and Abilities</b>						
Writing skills: write clearly and concisely as well as use proper spelling, grammar, punctuation, and sentence structure	Assess in hiring					
Verbal Communication Skills: clearly communicate ideas and information orally to public and private entities	Assess in hiring					
Time management skills	Assess in hiring					
Multitasking skills	Assess in hiring					
Analytical skills: -Ability to evaluate written materials to make recommendations for action based upon the documented data and information.	Assess in hiring					
Ability to break down procedures and processes	Assess in hiring					
Ability to conduct research and interpret data of various written and electronic materials	Assess in hiring					
Ability to conduct research and interpret data from various verbal/oral sources such as interviews, classes, lectures, etc. information and data.	Assess in hiring					
Basic math skills: such as addition, subtraction, multiplication, division, ratios, decimals, and percentages	Assess in hiring					
Ability to present numerical data in a clear and logical format (such as tables, bar charts, pie charts, and graphs).	Asses s in hiring					
Ability to read and interpret charts and graphs (such as bar charts, pie charts, and line graphs) to determine meaning/impact of data presented	Assess in hiring					
Ability to identify, analyze, and evaluate situations or problems to determine and implement appropriate courses of action	Assess in hiring					
Ability to analyze and evaluate the impact and effectiveness of programs, policies, and/or procedures	Assess in hiring					
Ability to introduce change in a positive manner to generate support for the change and minimize the perceived impact on others	Assess in hiring					
Ability to work independently on projects or assignments without close supervision or detailed instructions	Assess in hiring					

Knowledge, Skills, or Ability (K, S, A) Needed	Employee Status/ Development	PT II Name	HFEN Name	AGPA Name	SSM I Name	SSM II Name
	Does the specific employee need competency in this KSA? Currently demonstrate competency in this area? How is this KSA transferred?					
Ability to establish and maintain cooperative working relationships with management, staff, and internal and external stakeholders	Assess in hiring					
<b>Position Specific Knowledge and Skills (Current CAU)</b>						
Knowledge and skill to navigate in house databases (ELMs, Aspen, HALs)	CAU manual on ELMS, senior staff (mentor checklist)					
Knowledge how to read and comprehend various technical documents such as policies, procedures, standards, regulations, technical reports, and contracts	Mentor Checklist					
<b>Customer Service Skills</b>						
Skills to use spreadsheet software (MS EXCEL) to compile, compute, organize, and present tables, graphs, and charts for use in reports (MS WORD) and other tracking activities	Excel training offered by ISInc (contract through CDPH IT Division)					
Skills to use the internet to conduct on-line research and obtain information related to departmental policies, procedures, and resources to complete program or project activities						
Knowledge of how to use and operate a variety of basic office equipment (including copiers, calculators, telephones, and fax machines)	Mentor Checklist					
Skills and ability to facilitate focused and participatory meetings and discussions						
Skills to function as a liaison on behalf of assigned program or project in interacting with management, staff, internal and external stakeholders to provide program specific information, answer questions, and address issues/problems raised	Leadership Training (variety of topics) Staff Education & Quality Improvement Section					
Knowledge of how to maintain the confidentiality of sensitive and confidential information and what qualifies	Mentor Checklist					
Skills and knowledge to provide one-on-one training to facilitate the transfer of specific knowledge and/or skills	Leadership Training (variety of topics) Staff Education & Quality Improvement Section					

Know State and Federal Regulation and how to look them up for reference	Mentor Checklist					
Know how to apply health regulations, policies and procedures						
Knowledge of the background of L&C						
General Knowledge of the California Code of Regulations Title 22						
Understanding of the licensing and certification process for health facilities in California						
Knowledge of where to get legal consultation.						
Knowledge of what is necessary for a complete application.	Procedures checklists					
<b>Position Specific Knowledge and Skills (Future CLB)</b>						
Knowledge of application requirements and processing for CHON	DO expert					
Knowledge of application requirements and processing for CHOL	Mentor Checklist					
Knowledge of how to track and monitor Plan of Correction	DO expert					
Skills to engage facility leadership in compliance activities to meet Plan of Corrections						
Knowledge of standards for denial or confirmation of licensing application, including policy foundation						

## Appendix B: Mentor Training Checklist

The following checklist is for use with all staff, and is to be completed within 30 days of the employee's Start Date.

**Supervisors:** Complete this form and submit to \_\_\_\_\_.

Employee Name:	Start Date:
Supervisor Name:	Checklist Completion Date:

Day 1			
Site Logistics	Date	Supervisor Sign Off	N/A
<p><b>Meet with _____ and Receive Access Information</b></p> <ol style="list-style-type: none"> <li>1. Security card</li> <li>2. Intranet access</li> </ol> <p><b>Site Tour</b></p> <ol style="list-style-type: none"> <li>1. Introductions to staff</li> <li>2. Bathrooms</li> <li>3. Emergency plans</li> <li>4. Coffee, fridge and common area protocol</li> <li>5. Locked files location and procedures</li> <li>6. Location of forms</li> <li>7. Dangerous materials</li> <li>8.</li> </ol> <p><b>Workspace Set Up</b></p> <ol style="list-style-type: none"> <li>1. Phone number</li> <li>2. Set up voice mail box and review phone functions</li> <li>3. Computer set up</li> </ol>			

Within Week 1			
Personnel (Complete with Supervisor)	Date	Supervisor Sign Off	N/A
<p><b>Personnel Policies</b></p> <ol style="list-style-type: none"> <li>1. Review dress code</li> <li>2. Review Personnel Policies- show staff where to find policies for future reference</li> <li>3. Phone and e-mail etiquette</li> </ol> <p><b>Supervision</b></p> <ol style="list-style-type: none"> <li>1. Schedule, lunch break and breaks</li> <li>2. Overtime- When is it appropriate and approval process</li> <li>3. Procedure for Calling Out Sick/Time-off Request</li> </ol>			

4. Meeting and supervision schedule
5. Employee reads " Office Expectations" Document
6. Review duty statement
7. Performance Evaluation Process

**Confidentiality Policy and Process**

- 1.
- 2.

**Training**

1. Discuss training expectations (federal and state) and how to access
2. Register for :
  - a. CMS training
  - b.
3. Review upward mobility opportunities and process
- 4.

CLB Overview	Date	Supervisor Sign Off	N/A
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**Organizational Structure**

1. Discuss context and roles of CDPH, CHCQ, DOs and CAU
2. Review organizational chart
3. Role of DO vs. CAU (introduce new staff to DO point people)
- 4.
- 5.
- 6.
- 7.

**Facilities**

1. Review types of facilities
2. Review Title 22 regulations
- 3.
- 4.

Within 30 Days			
Creating Case Files	Date	Supervisor Sign Off	N/A
<p><b>Intake Process</b></p> <ol style="list-style-type: none"> <li>1.</li> <li>2.</li> <li>3.</li> </ol>			
<p><b>Databases</b></p> <ol style="list-style-type: none"> <li>1. Review online user guides available online for ELMs (N/A if complete the centralized surveyor course first)</li> <li>2. Review CAU specific Manual for ELMs, HALs, and ASPEN</li> <li>3. Review understanding of databases within CAU</li> </ol>			
<p><b>Meet with OLS Point Person</b></p> <ol style="list-style-type: none"> <li>1. Discuss what to look for on documents</li> <li>2.</li> </ol>			

## Appendix C: CAU and DO Application Processing Workload

By Facility Type and Transaction Type – Calendar Year 2014

District Office	Bakersfield	Chico	East Bay	Fresno	L.A. Co. Acute & Ancillary Unit	LA Co. East	LA Co. HHA	LA Co. ICF/Clinic	LA Co. San Gabriel	LA Co. West	Orange Co.	Riverside	Sacramento	San Bernardino	San Diego, So.	San Diego, No.	San Francisco	San Jose	Santa Rosa	Ventura	DO Totals	CAU: applications received in 2014	DO + CAU Totals
<b>FACILITY TYPES</b>																							
ABC		1														2			3		6		6
ADHC											59							3			62		62
APH			1		1							1	1	1		2					7		7
ASC	1														1	3		1		2	8		8
ASC/SURG												1							1		2		2
CDC					1						3						1				5		5
CDRH		1										1									2		4
CLHF			1	3			45					5	2			1				3	60		60
COMTYC (PCC)	15	3	1					3					1	2	3	2	4		8	4	46	117	163
CTC																					0		0
ESRD	1				1									1			1				4		4
ESRD/CDC	3		2	5	16						1		3	2		7	2	3	2	1	47		47
Free Clinic		2																	1		3		3
FQHC																					2		2
GACH	14	31	9	8	11						5	31	18	10	6	11	13	14	16	12	209		209
HHA	1	2	10	2			88				2	6	16	19		6	8	6	4	17	187	210	397
HOFA	1						2									1				1	5		5
Hospice	4	3	8	6			275				16	23	6	54		17	3	2	2	19	438		438
ICF								1													1	1	2
ICF/DDH								4			1	11	6	3							25	5	30
ICF/DDN								2				6		2						2	12	23	35
PDHRCF		1					1						4								6		6
PHYCH								1													1		1
REFRLAG								1												1	2		2
RHC				1										1	1						3	12	15

