Division of Children and Family Services Policy/Process Development Project Bid

Bidder name *

Wanda Seiler

Email Address *

wseiler@alvarezandmarsal.com

Deliverable 1 Cost *

$269,520.00

Deliverable 2 Cost *

$107,808.00

Deliverable 3 Cost *

$134,760.00

Deliverable 4 Cost *

$134,760.00

Deliverable 5 Cost *

$89,840.00

Deliverable 6 Cost *

$161,712.00

Total Cost

$898,400.00

1. Provide a narrative of how bidder proposes to review existing processes for: * <ol style="list-style:lower-alpha"> <li style="padding-bottom:5px">Contract development and approval; <li style="padding-bottom:5px"> A business process and best practice recommendations for unique provider agreements serving individual youth; <li style="padding-bottom:5px"> Grant writing and

**program development; <li style="padding-bottom:5px">Policy development; <li style="padding-bottom:5px">Central Registry / Expungement of records; and, <li style="padding-bottom:5px">Constituent complaints **

Alvarez and Marsal's (A&M) approach to the scope of work will be highly collaborative in nature and will always maintain a focus on the bigger picture of Nebraska Division Of Children And Family Services' (DCFS) operating environment. A&M takes an inclusive approach to engaging stakeholders since we understand that a successful implementation of new policies and lasting transformation is contingent upon the buy-in and trust of all parties affected. Our approach utilizes planned, collaborative measures such as work groups and establishes a regular cadence of communication to ensure a two-way dialogue is maintained throughout the engagement. We begin any review of existing processes and policies by conducting interviews with key organizational leadership. Through these key stakeholder interviews, A&M will begin to establish the baseline environment by gaining an understanding of the history of contracting, resource allocation, and key policies that support DCFS operations. A&M uses the initial interviews to understand the risks and concerns from the leadership's perspective and to identify additional stakeholders who are change agents and need to be involved in the review phase. Concurrent with the kick-off interviews, the A&M Team will submit data requests, review and analyze data received, and begin to identify strengths, weaknesses, opportunities, and threats in the areas of focus for NE DCFS. This combination of interviews, data collection, and analysis will provide A&M with an in-depth understanding of the areas of opportunity within DCFS and inform the results of the key DCFS process review. A&M will leverage this information in parallel with past experience and subject matter expertise to thoroughly evaluate existing processes. It is important for the success of our eventual recommendations that our analysis is closely tied to the potential impact of new state and federal regulations, such as the Family First Prevention Services Act (FFPSA). The A&M team has supported other states, such as Rhode Island, as they have begun to develop policy and practice strategies to navigate the two main aspects of FFPSA that will most directly impact their service delivery system: limitation on the time youth spend in congregate care and changes to their in-home prevention services delivery model. Our teams provided analysis and research to identify opportunities to modify existing services, contracts, etc., without significantly raising costs for the State. While each process review will be unique, our methodology is consistent. The A&M Team will utilize process mapping and analysis, stakeholder interviews, deep dive reviews, and our own staff's child welfare policy and practice expertise to understand where the discrepancies are between policy and practice to ultimately identify recommendations for improved processes and equitable service delivery to DCFS beneficiaries. Our approach will include a deep dive of the agency's policies, practices, and current service delivery model that serves Nebraska's children and their families. For example, we will work to understand processes used to develop and approve contracts. Is there a consistent approach being used? Do DCFS contracts support the efficient, effective, and equitable delivery of child welfare services across the continuum of care? Further, how does DCFS measure success and track progress on behalf of Nebraska's children? In a recent engagement with the State of Rhode

Island, we supported an effort to adjust contracting to pay providers based on the level of need of children, paying special attention to situations with exception need while maintaining focus on equity in funding across the service delivery system. Throughout our deep dive into each of the stated process reviews, we will remain closely involved with DCFS staff through work groups, regular communications with leadership, and data analysis working sessions as appropriate. The outcome of our process review will be written and visual guidance documents for each of the stated processes (a-f). The A&M Team will also begin developing our recommendations for alignment of the processes across program areas of Protection and Safety and Economic Assistance. For additional details on our approach to reviewing the existing processes for the items outlined in the scope, please see our proposed workplan (Response #7).

2. Provide a narrative of how bidder proposes to provide review of regulation, statute, policy, best practice, federal guidance and policy.*

The A&M Team will conduct a comprehensive review of DCFS child welfare regulations, statutes, and policies against best practices and federal guidance (including the FFPSA) and policy to inform our final recommendations. This comprehensive review will directly inform the crosswalk of the DCFS federal prevention plan, the Child and Family Services Plan, the Child and Family Services Review Program Improvement Plan, and the Family First Prevention Services Act Plan. The A&M Team will assess whether the intended purpose of the policy is being met and determine if the practice or the policy itself needs to be amended. Throughout the review, the A&M Team will compare to other benchmark states and best practice exemplars to assess the extent to which policies may be positively or negatively impacting DCFS. Some of the key question the A&M Team's will seek to answer include: - What is the policy's intended goal? - Who is impacted by the policy? - Who is responsible for the enforcement of the policy and how do they track compliance? - How is the policy executed in practice? - What (if any) are the unintended consequences of the policy? - Are there any gaps not covered by current policies? - Is the policy still necessary given the current environment / organization needs? - Would the policy function better as a procedure or guideline? - Does the policy support DCFS's goals /values? - Does the policy align with child welfare legal, state, and federal requirements? - To what extent does the policy support alignment with national best practices for children, youth, and families? In our experience, the most successful programs regularly assess and update their policies and practice to ensure alignment with national best practices and to encourage improved outcomes. Our thorough policy review will serve as a guide to DCFS as the department continues to evolve to most effectively and efficiently meet the needs of the children and families they serve. The outcome of this comprehensive review will be clear delineation and guidance in use of Standard Work Instruction / Standard Operating Procedures (SOP) / and Administrative Policy and recommendations on the structure and timeline for review and continuous internal controls for areas of policy review, regulation review, and SOP review.

3. Provide a narrative of how bidder proposes to develop best practice and recommendations for each area. *

Best practices and recommendations will be a direct outcome of the in-depth analysis described above. The A&M Team will continue to build on its understanding of the DCFS policy and practice issues identified during the assessment phase, conducting a more detailed analysis of each improvement opportunity to internally refine our initial hypotheses and to develop, test, and prioritize recommendations to enhance Nebraska's delivery of services to children, youth, and families. The A&M Team will ensure DCFS leadership and other key stakeholders are continuously updated on our findings, obstacles encountered, and recommendations clearly documented and communicated. As we refine our best practices and recommendations, we will solicit feedback to ensure all appropriate opportunities are pursued. We will also rely heavily on our Subject Matter Experts and practitioners to evaluate alignment with best practices and draw on their previous child welfare policy, practice, and agency leadership experiences. We are fortunate to propose a team of individuals who possess extensive knowledge and expertise in the areas in which DCFS is seeking support. Each proposed A&M Team member brings with them experience working with state human services organizations from assessment through implementation of recommendations. The A&M Team has a successful track record of supporting state agencies to development and implement successful strategies to promote improved outcomes in varying regulatory environments. This collective experience and expertise will allow us to clearly crosswalk the DCFS federal prevention plan, the Child and Family Services Plan, the Child and Family Services Review Program Improvement Plan, and the Family First Prevention Services Act Plan so that DCFS can identify policy gaps and inform practice. After concluding the in-depth analysis and soliciting the appropriate stakeholder feedback, the A&M Team will formulate a set of strategic recommendations to align DCFS with best practices. The team will analyze any constraints associated with our recommendations —such as labor, regulatory, legal, appropriations, and contractual requirements—to identify barriers to implementation and adjust strategies as appropriate to ensure that all of our recommendations are actionable and impactful. Our team prioritizes opportunities based on their impact, required timeline for implementation, necessary investment, strategic alignment with other initiatives and policies, and integration with the overall goals and objectives of DCFS. A&M focuses our efforts on two distinct types of solutions: 1) High-value, short-term initiatives 2) Foundational, long-term initiatives This dual concentration ensures that we address both immediate and future needs for improvement, facilitating recognizable change in the short term and setting the foundation for long-term reform. DCFS will benefit from A&M's iterative process of developing and raising recommendations to the key stakeholders and leadership, which sets expectations, avoids surprises, and increases buy-in around selected efforts. The A&M Team's goal will be to give DCFS a full picture to make informed decisions in the best interest of the children and families DCFS serves.

4. Provide a narrative of how bidder proposes to outline best practice, business process, and procedures for policy and expungement of records. *

The A&M Team will follow the same approach as outlined in our responses to #1 and #3: stakeholder interviews, data analysis, best practice comparison, policy analysis, and

consultation with experts. In order to outline best practice, business process, and procedures for policy expungement of records, the A&M Team will: -Review current business practices and procedures for expungement of DCFS records (including requirements placed on DCFS vendors), - Complete a review of current Health and Human Service (HHS), Agency for Children and Families (ACF) federal guidance for records expungement, - Complete a review of State document retention requirements, - Establish alignment for DCFS with national best practices, - Compare NE policies and procedures to the identified best practices, - Develop an understanding of whether those difference are tied to state laws or other regulatory authorities within NE, - Identify where changes are necessary and how those changes would be made (ex: State statutory changes), - Evaluate the extent to which the processes could be more automated, and - Assess the child welfare administrative hearings and appeals process to ensure alignment with NE Administrative Code and federal regulations.

5. Provide a narrative of the bidder's past experience with management of a project that involved the review of regulations, statutes, and federal guidance from multiple oversight entities. *

The Oregon Secretary of State released audits finding significant deficiencies in the Child Welfare (CW) system within the Department of Human Services (DHS). Concurrently, an Oregon-based advocacy group filed a class action lawsuit against the state and DHS alleging that they had failed to provide necessary services through the foster care system. In response, the Governor issued an Executive Order to create a Child Welfare Oversight Board and to hire a crisis management team to overhaul the CW system. A&M served as the crisis management team to assess the key deficiencies of the agency and implement operational improvements. Partnering with Child Welfare, Department of Human Services (DHS), the Child Welfare Oversight Board, and the Governor, A&M took a 4 phased approach to addressed the multitude of challenges prioritized by the Governor's Executive Order. In Phase 1, A&M identified the most critical issues, established a workplan, and executed high-impact, short-term initiatives. Then in Phase 2, the A&M Team led the implementation and staffing of a new project management office to execute the key priorities outlined in the Phase 1 workplan. For Phase 3, A&M focused on continuing to execute priority initiatives while building capabilities within Child Welfare to continue the work successfully after the end of the engagement. Finally, in Phase 4, the A&M Team worked to fully transition the work plans to Child Welfare staff and the Project Management Team. During A&M's time in the Oregon Child Welfare Agency, A&M focused on supporting DHS and Child Welfare with: communications planning and support for distribution / dissemination of information, stakeholder engagement (Legislative, Media, and Public), staff recruitment and retention and workforce development, infrastructure, with a focus on information technology and data needs, operations and business processes, budgeting and financial controls, funding sources and opportunities, quality oversight and assurance, system capacity and service access, and cultural transformation. Throughout the project, A&M provided updates to key stakeholders and collaborated across agencies and departments to ensure all project aligned with regulations, statutes, and federal guidance. The A&M Team worked closely with our own subject matter experts and key

staff within DHS and the Oregon Health Authority to realign policies and procedures with existing and new regulations, such as Family First and K-Plan implementation. Additionally, for the State of Rhode Island, the A&M Team assessed and refined key contract processes for multiple aspects of their service delivery continuum. Recommendations that were implemented reflected best practices around equitable service delivery, the goals of FFPSA, and Medicaid requirements to maximize federal funding for the Child Welfare system. In executing this work, we worked closely with programmatic staff, contracts, and representatives from other state agencies.

6. Identify the specific professionals who will work this project. The names and titles of the team proposed for assignment to the project should be identified in full, with a description of the team leadership, interface and support functions, and reporting relationships. The primary work assigned to each person should also be identified. The contractor should provide relevant work experience for all personnel proposed by the bidder to work on the project. *

To provide the NE DCFS with the highest quality and most responsive service, we have assembled a team of experts in human services and child welfare. The team is structured to provide maximum efficiency and operational effectiveness throughout the project lifecycle while minimizing risks to project completion. A&M has selected appropriate personnel, each with the necessary skill set to fulfill each key role. Teresa James, McKenzie Morton, and Paul Kiekhaefer will be responsible for the day to day work necessary to complete the outlined deliverables. They will interface with NE DCFS staff, analyze data, conduct policy analysis, and develop recommendations. Daniel Harlan will ensure that the A&M Team delivers products on-time and at a high quality. He will also utilize his expertise gained from leading similar projects to engage key stakeholders and to refine the A&M Team's recommendations. Through her role overseeing the project, Wanda Seiler will manage project risks, monitor the team's progress, and provide subject matter expertise. Specific details on each role and staff experience are outlined below: -Wanda Seiler: A Managing Director who will oversee the project at an executive level -Daniel Harlan: A Senior Director who will support the execution of deliverables and provide project management and oversight -Teresa James: A subject matter expert subcontracted from Health Tech Solutions who will provide Child Welfare Expertise and project management support -McKenzie Morton: A Senior Consultant to support the day to day project management and execution -Paul Kiekhaefer: An Analyst who will support the project leader and execute key project initiatives Wanda Seiler focuses on Medicaid policy and programs that serve vulnerable populations. She specializes in program design and enhancement of state human and social services programs. With 23 years of government experience and 12+ years of private sector experience, Wanda has both led and guided program stabilization and transformation efforts in over a dozen states. She has worked with multiple state agencies to address critical situations defined by litigation, regulatory compliance issues, financial distress, or sentinel events. Wanda's notable assignments include leading a crisis management team established by Executive Order of Governor Kate Brown to rectify issues within Oregon's Child Welfare system. She has also advised Rhode Island's Department of Children Youth and Families in revising agency foster

care rates and securing Medicaid funding for family and youth services. Wanda consulted with the Nebraska Department of Health and Human Services, assisting in a rate redesign of the state's intellectual and developmental disability (I/DD) services, including formulating a policy for I/DD rate adjustments for children in state custody. She possesses a comprehensive understanding of the intersection of Medicaid and Child Welfare systems, enabling her to support state efforts to ensure regulatory compliance and maximize Federal funding for Child Welfare. She has advised states in five class action lawsuits, providing expert reports and testimony related to Olmstead's integration mandate as applied to youth in Child Welfare custody and people with intellectual and developmental disabilities. Further, she has assisted states in procuring and implementing information technology and refining quality systems responsible for monitoring and improving service delivery. Prior to joining A&M, Wanda spent 25 years with the State of South Dakota—the last eight years she served as the Director of the Division of Developmental Disabilities. In that position, she was able to correct a structural budgetary deficit and eliminate all waiting lists for services. She also served the State of South Dakota as the Assistant Director of Mental Health and as a Policy Analyst for Medicaid Eligibility and Economic Assistance. Prior to that, she was a Senior Consultant with the Rushmore Group, and a Principal/Product Owner with Fei Systems. Wanda served as the President of the Council on Quality and Leadership and is a former board member of the National Association of Directors of Developmental Disability Services (NASDDDS). Daniel Harlan is co-leader of A&M's HHS practice and most recently served as project lead for A&M's engagement with the Rhode Island Division of Children, Youth, and Family. He provided leadership in support of the finance function, including review of current contracts, analysis, and development of recommendations around performance improvement opportunities. To realize the benefits of identified recommendations, Daniel led a team supporting the implementation of IV-E opportunities, Medicaid claiming for Home and Community Based Services contracts, and a redesign of the foster care system pay foster families and therapeutic foster providers based on the needs of a child. Previously, he spent six years serving as A&M's project lead for Maryland's Developmental Disabilities Administration (DDA), a $1+ billion Medicaid program. After working to stabilize programmatic and fiscal operations, he helped DDA establish and execute a plan (based on a complete business process re-engineering effort) for the transformation of its service delivery model working closely with state officials and stakeholders to re-engineer all operational processes, develop and transition to a new IT platform, transform provider payment, and implement programmatic and policy changes. The programmatic and operational changes he led helped reduce state General Fund expenditures by more than $15 million. With a focus on operational efficiency and cost reduction, Daniel has helped government organizations make informed decisions about their future. Daniel has both Project Management Professional (PMP) and Prosci® Change Management Certifications. Teresa James has 30+ years of experience in health and human services in both clinical and administrative settings. She is a nationally recognized expert in health and human services programs, with particular expertise in child welfare, adult protection, public health services, and community-based services, including the development and implementation of child and adult service delivery programs. Prior to her current position as a human services consultant, Teresa

served in executive roles as Commissioner and Deputy Commissioner within the Kentucky Department for Community Based Services. Teresa is a licensed clinical social worker, with particular expertise in crisis intervention, clinical assessment, behavioral health services, and case management. She has practiced within a child welfare agency as well as interfaced with the state agencies as a stakeholder and service provider. She brings extensive experience and subject matter expertise in child welfare leadership, organizational development, community collaboration, program development and implementation, strategic planning, contract negotiation, budget management, federal and state regulatory oversight, and expertise in child welfare practice. McKenzie Morton has experience working side by side with state leaders and other key stakeholders to implement transformational changes. She has supported project management and change management initiatives for state agencies, bridging the gap between business solutions and the specific challenges of public sector organizations. Most notably, McKenzie served on the crisis team hired by the Governor of Oregon as part of her Executive Order for Child Welfare. She led initiatives to improve the processes and systems that support Foster Care and to build systems of training for Child Welfare staff. She engaged stakeholders throughout the Department of Human Services in work groups, reporting progress directly to the interim Director of Child Welfare, Deputy Director of the Department of Human Services, Governor Kate Brown and her staff, and the Governor's Child Welfare Oversight Board. In addition to her work in the State of Oregon, McKenzie led the change management assessment and planning as a Prosci Change Management Professional for the State of Alaska as they implemented a shared services organization across departments. For the Nebraska Department of Health and Human Services, McKenzie mapped processes for issuing waivers for Nursing Facility Level of Care Home and Community Based Services and analyzed Level of Care tools from other states to identify best practices. Paul Kiekhaefer provides policy research, financial analysis, and project management assistance to projects supporting state and local government leaders. Most recently, Paul managed the merger of a large network of charter schools in Los Angeles, California. In this engagement, Paul drove the transition of contract management, ensuring that legacy contracts remained valid and working with vendors to make necessary changes where necessary. He also drove the creation of a new governance structure for the organization, which required compliance with a newly-adopted California law that few contemporary institutions had implemented. Paul also supported the other back office transition efforts of various functions within the finance and accounting functions. In addition to his work in California, Paul has worked on procurement assessments and sourcing engagements for the State of Wyoming, the State of Alaska, and a public medical supplies company. Paul also has provided data analysis and policy research for other state clients, including the New York Office for People with Developmental Disabilities and the State of Oklahoma District Attorney's Council.

7. Provide a Draft Project Work Plan that successfully completes the deliverables outlined above within the project timeframe. The Draft Project Work Plan must include details on what project tasks will be performed face-to-face and what project tasks will be performed virtually. *

1 Project Management Mon 8/3/20 Fri 1/29/21 1.1 Schedule/Hold kick off meeting to establish PM Protocols Mon 8/3/20 Fri 8/14/20 1.2 Conduct leadership interviews Mon 8/10/20 Mon 8/10/20 1.3 Complete detailed work plan Tue 8/11/20 Thu 8/13/20 1.4 Complete weekly project plan reviews / updates Fri 8/14/20 Fri 1/29/21 1.5 Prepare / submit monthly status reports Fri 8/14/20 Fri 1/29/21 1.6 Manage risks / issues Fri 8/14/20 Fri 1/29/21 2 Crosswalk = Federal Prevention Plan, CFS Plan, CFS Review Program Improvement Plan & FFPSA Plan Mon 8/3/20 Tue 9/29/20 2.1 Interview subject matter experts Mon 8/3/20 Tue 8/4/20 2.2 Request / Review documents Wed 8/5/20 Fri 8/21/20 2.3 Request / Analyze performance data Wed 8/5/20 Fri 8/21/20 2.4 Draft / vet crosswalk template Wed 8/12/20 Tue 8/18/20 2.5 Create crosswalk Wed 8/19/20 Tue 9/8/20 2.6 Vet crosswalk Wed 9/9/20 Tue 9/22/20 2.7 Finalize crosswalk Wed 9/23/20 Tue 9/29/20 2.8 Deliverable: Crosswalk Tue 9/29/20 Tue 9/29/20 3 Contract development and approval Mon 8/3/20 Fri 10/30/20 3.1 Interview subject matter experts Tue 8/11/20 Thu 8/13/20 3.2 Map contracting process Fri 8/14/20 Fri 8/14/20 3.3 Map internal review process Fri 8/14/20 Fri 8/14/20 3.4 Request / Review documents Fri 8/14/20 Thu 9/3/20 3.5 Request / Analyze data Fri 8/14/20 Thu 9/10/20 3.6 Analyze contract development process Fri 9/11/20 Thu 10/1/20 3.6.1 Identify practices that do / do not align with regulatory authority Fri 9/11/20 Thu 10/1/20 3.6.2 Identify practices that do / do not maximize efficiency Fri 9/11/20 Thu 10/1/20 3.6.3 Identify practices that do / do not promote agency mission / goals Fri 9/11/20 Thu 10/1/20 3.7 Formulate recommendations Mon 8/3/20 Fri 10/30/20 3.7.1 Draft recommendations Mon 8/3/20 Fri 10/9/20 3.7.1.1 Content for Standard Work Instruction Fri 9/25/20 Fri 10/9/20 3.7.1.2 Content for Standard Operating Procedure Fri 9/25/20 Fri 10/9/20 3.7.1.3 Content for Administrative policy Fri 9/25/20 Fri 10/9/20 3.7.1.4 Communication plan Fri 9/25/20 Fri 10/9/20 3.7.1.5 Training plan Fri 9/25/20 Fri 10/9/20 3.7.2 Vet recommendations Mon 10/12/20 Fri 10/23/20 3.7.3 Finalize recommendations Mon 10/26/20 Fri 10/30/20 3.8 Deliverables: Written Guidance; Visual Guidance Fri 10/30/20 Fri 10/30/20 4 Review of / Recommendations for unique provider service agreements Tue 8/11/20 Mon 11/2/20 4.1 Interview subject matter experts Tue 8/11/20 Thu 8/13/20 4.2 Map existing continuum of service options Fri 8/14/20 Fri 8/14/20 4.3 Map internal review process Fri 8/14/20 Fri 8/14/20 4.4 Request / Review documents Fri 8/14/20 Fri 9/4/20 4.5 Request / Analyze data (people served, costs, outcomes) Fri 8/14/20 Fri 9/11/20 4.6 Review best practices (Clearing House / Peer States) Fri 8/21/20 Fri 8/28/20 4.7 Analyze unique provider services Mon 9/14/20 Fri 9/18/20 4.7.1 Conduct business process mapping for services by type / category Mon 9/14/20 Tue 9/15/20 4.7.2 Identify services that do / do not align with regulatory authority Wed 9/16/20 Fri 9/18/20 4.7.3 Identify services that do / do not maximize efficiency Wed 9/16/20 Fri 9/18/20 4.7.4 Identify services that do / do not promote agency mission / goals Wed 9/16/20 Fri 9/18/20 4.8 Analyze continuum of service options to identify overlap and gaps Fri 9/18/20 Fri 9/18/20 4.9 Formulate recommendations Mon 9/21/20 Mon 11/2/20 4.9.1 Draft recommendations Mon 9/21/20 Mon 10/12/20 4.9.1.1 Content for Standard Work Instruction Mon 9/21/20 Mon 10/12/20 4.9.1.2 Content for Standard Operating Procedures Mon 9/21/20 Mon 10/12/20 4.9.1.3 Content for Administrative policy Mon 9/21/20 Mon 10/12/20 4.9.1.4 Communication plan Mon 9/21/20 Mon 10/12/20 4.9.1.5 Training plan Mon 9/21/20 Mon 10/12/20 4.9.2 Vet recommendations Tue 10/13/20 Mon 10/26/20 4.9.3 Finalize recommendations Tue 10/27/20 Mon 11/2/20

4.9.4 Deliverables: Written Guidance; Visual Guidance Mon 11/2/20 Mon 11/2/20 5 Grant writing and program development Mon 9/14/20 Fri 11/27/20 5.1 Interview subject matter experts Mon 9/14/20 Fri 9/18/20 5.2 Map grant writing process Mon 9/14/20 Fri 9/18/20 5.3 Map program development process Mon 9/14/20 Fri 9/18/20 5.4 Map internal review process Mon 9/14/20 Fri 9/18/20 5.5 Request / Review documents Mon 9/14/20 Fri 10/2/20 5.6 Request / Analyze data (Open/Closed Investigations, re-abuse, time in care, placement options, etc.) Mon 9/14/20 Fri 10/9/20 5.7 Inventory / assess program development initiatives for the past two years Mon 9/14/20 Fri 9/18/20 5.8 Assess past initiatives for alignment with FFPA priorities / requirements Mon 9/21/20 Fri 10/9/20 5.9 Research peer state performance Mon 9/21/20 Fri 10/9/20 5.10 "Identify ""best fit"" practices for Nebraska" Mon 9/28/20 Fri 10/16/20 5.11 Formulate recommendations Mon 10/19/20 Fri 11/27/20 5.11.1 Draft recommendations Mon 10/19/20 Fri 11/6/20 5.11.1.1 Content for Standard Work Instruction Mon 10/19/20 Fri 11/6/20 5.11.1.2 Content for Standard Operating Procedures Mon 10/19/20 Fri 11/6/20 5.11.1.3 Content for Administrative policy Mon 10/19/20 Fri 11/6/20 5.11.1.4 Communication plan Mon 10/19/20 Fri 11/6/20 5.11.1.5 Training plan Mon 10/19/20 Fri 11/6/20 5.11.2 Vet recommendations Mon 11/9/20 Fri 11/20/20 5.11.3 Finalize recommendations Mon 11/23/20 Fri 11/27/20 5.11.4 Deliverables: Written Guidance; Visual Guidance Fri 11/27/20 Fri 11/27/20 6 Policy development Tue 8/11/20 Fri 11/27/20 6.1 Interview subject matter experts Tue 8/11/20 Wed 8/12/20 6.2 Inventory / assess policy developments implemented in the past two years Thu 8/13/20 Fri 8/14/20 6.3 Review policy Mon 8/17/20 Fri 9/4/20 6.4 Request / Review documents Mon 8/17/20 Fri 9/4/20 6.5 Request / Analyze data Mon 8/17/20 Fri 9/11/20 6.6 Analyze existing policy Mon 9/14/20 Fri 10/23/20 6.6.1 Conduct process mapping for key policy provisions Mon 9/14/20 Fri 9/18/20 6.6.2 Research peer state policies Mon 9/21/20 Fri 9/25/20 6.6.3 Identify policies that do / do not align with regulatory authority Mon 9/28/20 Fri 10/23/20 6.6.4 Identify policies that do / do not maximize efficiency Mon 9/28/20 Fri 10/23/20 6.6.5 Identify policies that do / do not promote agency mission / goals Mon 9/28/20 Fri 10/23/20 6.7 Formulate recommendations Mon 10/26/20 Fri 11/27/20 6.7.1 Draft recommendations Mon 10/26/20 Fri 11/6/20 6.7.1.1 Content for Standard Work Instruction Mon 10/26/20 Fri 11/6/20 6.7.1.2 Content for Standard Operating Procedures Mon 10/26/20 Fri 11/6/20 6.7.1.3 Content for Administrative policy Mon 10/26/20 Fri 11/6/20 6.7.1.4 Communication plan Mon 10/26/20 Fri 11/6/20 6.7.1.5 Training plan Mon 10/26/20 Fri 11/6/20 6.7.2 Vet recommendations Mon 11/9/20 Fri 11/20/20 6.7.3 Finalize recommendations Mon 11/23/20 Fri 11/27/20 6.7.4 Deliverables: Written Guidance; Visual Guidance Fri 11/27/20 Fri 11/27/20 7 Central Registry / Expungement of records Mon 11/9/20 Fri 1/29/21 7.1 Interview subject matter experts Mon 11/9/20 Tue 11/10/20 7.2 Map central registry process Wed 11/11/20 Fri 11/13/20 7.3 Map expungement of records process Wed 11/11/20 Fri 11/13/20 7.4 Map internal review process Wed 11/11/20 Fri 11/13/20 7.5 Request / Review documents Mon 11/16/20 Fri 11/27/20 7.6 Request / Analyze data (Annual registrants, annual expungements, appeals) Mon 11/16/20 Fri 12/4/20 7.7 Research peer state data Mon 12/7/20 Fri 12/11/20 7.8 Analyze existing policy Mon 12/14/20 Fri 12/25/20 7.8.1 Identify policies that do / do not align with regulatory authority Mon 12/14/20 Fri 12/25/20 7.8.2 Identify policies that do / do not maximize efficiency Mon 12/14/20 Fri 12/25/20 7.8.3 Identify policies that do / do not promote agency mission / goals Mon 12/14/20 Fri

12/25/20 7.9 Formulate recommendations Mon 12/28/20 Fri 1/29/21 7.9.1 Draft recommendations Mon 12/28/20 Fri 1/1/21 7.9.2 Vet recommendations Mon 1/4/21 Fri 1/15/21 7.9.3 Finalize recommendations Mon 1/18/21 Fri 1/29/21 7.9.4 Deliverables: Written Guidance; Visual Guidance Fri 1/29/21 Fri 1/29/21 8 Constituent complaints Mon 11/9/20 Fri 1/29/21 8.1 Interview subject matter experts Mon 11/9/20 Tue 11/10/20 8.2 Map complaint process Wed 11/11/20 Fri 11/13/20 8.3 Map internal review process Wed 11/11/20 Fri 11/13/20 8.4 Request / Review documents Mon 11/16/20 Fri 11/27/20 8.5 Request / Analyze data (Complaint numbers, resolution) Mon 11/16/20 Fri 12/4/20 8.6 Research peer state data Mon 12/7/20 Fri 12/11/20 8.7 Research software options Mon 12/7/20 Fri 12/11/20 8.8 Analyze existing policy Mon 12/14/20 Fri 12/25/20 8.8.1 Identify complaint protocols that do / do not align with regulatory authority Mon 12/14/20 Fri 12/25/20 8.8.2 Identify complaint protocols that do / do not maximize efficiency Mon 12/14/20 Fri 12/25/20 8.8.3 Identify complaint protocols that do / do not promote agency mission / goals Mon 12/14/20 Fri 12/25/20 8.9 Formulate recommendations Mon 12/28/20 Fri 1/29/21 8.9.1 Draft recommendations Mon 12/28/20 Fri 1/1/21 8.9.1.1 Content for Standard Work Instruction Mon 12/28/20 Fri 1/1/21 8.9.1.2 Content for Standard Operating Procedures Mon 12/28/20 Fri 1/1/21 8.9.1.3 Content for Administrative policy Mon 12/28/20 Fri 1/1/21 8.9.1.4 Communication plan Mon 12/28/20 Fri 1/1/21 8.9.1.5 Training plan Mon 12/28/20 Fri 1/1/21 8.9.2 Vet recommendations Mon 1/4/21 Fri 1/15/21 8.9.3 Finalize recommendations Mon 1/18/21 Fri 1/29/21 8.9.4 Deliverables: Written Guidance; Visual Guidance Fri 1/29/21 Fri 1/29/21 9 Cross program area findings and recommendations Mon 11/9/20 Fri 1/22/21 9.1 Interview subject matter experts Mon 11/9/20 Fri 11/13/20 9.2 Formulate recommendations Mon 11/16/20 Fri 1/22/21 9.2.1 Process alignment across program areas Mon 11/16/20 Fri 1/22/21 9.2.1.1 Internal controls (structure, timeline, continuous controls Mon 11/16/20 Fri 1/1/21 9.2.1.1.1 policy review Mon 11/16/20 Fri 1/1/21 9.2.1.1.2 regulation reviews Mon 11/16/20 Fri 1/1/21 9.2.1.1.3 SOP review Mon 11/16/20 Fri 1/1/21 9.2.1.2 Vet recommendations Mon 1/4/21 Fri 1/15/21 9.2.1.3 Finalize recommendations Mon 1/18/21 Fri 1/22/21 9.2.1.4 Deliverables: Recommendations for the alignment of processes across program areas, structure and timeline for internal controls for policy, regulation and SOP review Fri 1/22/21 Fri 1/22/21

#	Position	Value