

Customer Referral System RFP (Proposals Due March 10 5pm PT to EOWB)

Questions and Answers

1. What are the biggest challenges with the current referral system, and what key performance indicators (KPIs) will determine its success?
 - Oregon does not currently have a referral system to help its citizens access services across the state, or to help its service providers refer customers to additional services that may help meet their needs or help them reach their career and other self-sufficiency goals. The primary KPI would be the number of trackable successful referrals.
2. Will the system need to support multiple languages or accessibility features (e.g., WCAG compliance, support for limited English proficiency)?
 - Not required, but would be great
3. What level of user training and ongoing support is expected post-deployment?
 - The system should be user-friendly enough to not need much, if any, end-user training, only at the administrator level
 - Ongoing support would include ensuring that the system is working correctly. Additional features determined to be needed beyond the initial agreement may be negotiated separately.
4. Do you have a defined budget range for this project, and is funding secured for all phases or allocated in stages?
 - The amount spent will depend on the project selected but is not expected to exceed \$150,000. Funding is secured.
5. What is the expected go-live date, and are there any critical milestones, dependencies, or flexibility in the timeline for additional clarifications or enhancements?
 - Expecting the project to go-live six months after commencing. However, if the project is broken into phases, some could go longer.

6. What are the expected number of service provider profiles, frequency of updates, and any existing data schema or integrations with current systems that we need to consider?

- We are unsure of the number of service providers who will be using the system. We are starting with Eastern Oregon, but making it available statewide. We expect to start with around 100 service providers inputting data to create their profiles. However, Eastern Oregon only accounts for less than 5% of Oregon's population, so making it scalable should allow for a potential future of serving the entire population of Oregon, currently 4.272 million.
- The system should be able to adapt to/integrate with others. An open API would be great some potentials but not required would be Waitwhile, Outlook calendar, Calendly, Salesforce, iTrac (WorkSystems, Inc. – Portland, Oregon), and future Oregon Employment Department modernized software (Currently I-match skills but this will be changing. See open RFP: Subheading).

7. What are the performance expectations for search and match functionality, and how granular should case tracking and reporting be?

- The search and match functionality should be fairly straightforward. The service provider will select a certain set of services they provide and geographic area they serve, and the end user/service provider selects the service(s) they are looking for and the area they need to access them.
- Case tracking would need to be high level based on status.
- It would be great if the administrator could create their own reports, but if not, there would need to be support available to create reports, as needed, at an agreed upon rate.

8. What data privacy and compliance standards (e.g., HIPAA, GDPR) must be met when handling sensitive information such as Individual Employment Plans (IEPs) and case worker notes, and how should user roles and permissions be defined for data sharing across providers?

- The majority of service providers are not governed by HIPAA or GDPR at the high level. However, some may be, and confidentiality of our and our partners' customers is of the utmost importance. Plans for keeping data confidential at the highest level possible (need to know) will need to be developed to ensure confidentiality of our participants. Partners may include hospitals, schools, and other public and private organizations that require a high level of confidentiality.

9. What file formats and size limits should be supported when sharing case files, and what level of audit logging and tracking is required for these activities?
- To be decided by the project group. We would envision though that the follow formats should be up loadable, jpg, pdf, word, and excel files.
10. What communication channels (e.g., email, SMS, in-app notifications) should be used for status updates and reminders, and are there any service level agreements (SLAs) related to response times?
- Email and in-app notifications at the most basic level.
 - Additional details would be decided by the project group.
11. What is the approval workflow for cross-agency sharing requests, and are there additional security protocols or external systems involved in data exchanges?
- There should be a request feature, and a send case feature where the originating case manager would have the option to approve it and upload an ROI when necessary.
 - Additional details would be decided by the project group.
12. For the self-service provider database, what authentication or verification processes are required to ensure security and integrity? Should multi-factor authentication be implemented?
- To be decided by the project group.
13. Do you have existing design guidelines, wireframes, or specific KPIs for dashboard interfaces tracking case statuses and task management?
- No.
14. What external systems (e.g., third-party calendars, CRM platforms) need integration with appointment scheduling, and how should scheduling conflicts be handled?
- Basic coverage. Examples: Outlook Calendar, Calendly, Google calendar, etc.
 - Additional requests would be addressed by the project group.
15. Should the system be exclusively web-based, or should it include native mobile applications or responsive design for mobile devices?
- Cloud based for desktop would be our main focus but responsive would be a bonus.

16. Are there any non-functional requirements such as system load expectations, uptime SLAs, or performance benchmarks that should guide our architecture design?
- Uptime would hopefully be 100% between the hours of 8am to 5pm Pacific time for the case manager side, and 5am to 12am Pacific for the self referral portal. Updates and down time should correspond with the lowest traffic times early in the morning.
 - Additional details could be decided by the project group, if needed.
17. Are there planned future integrations or features that should be considered for long-term scalability and adaptability?
- There may be partner platforms that could be integrated in the future.
18. Will data migration from legacy systems be required? If so, could you provide details regarding the data volume, formats, and any required transformation rules?
- Not expected as there is no current referral system. However, a basic spreadsheet could be used to upload partner information from another source, if applicable.
19. Can you expand on bullet point 5 "Include the ability to share limited information with different user levels." under "Sharing Customer Referrals Between Service Providers" section 1 "Service Provider Database Creation and Maintenance"? What user levels do you envision wanting to limit access to organization and contact profiles and what subsets of the profile content would you like to "limit" access to? Some basic examples to help ensure confidentiality is held tightly to a "need to know" standard:
- State administrator could see all data for the state
 - Area administrator could see all data for its area
 - Each service provider would have an executive level of access that could see all referrals sent and received by its own organization, but not for others.
 - Each service provider would have a staff level of access that could see all of their own referrals sent and received, but not for other staff.
 - A customer could enter their first and last name and contact information, but only their initials would be visible to the service provider organization(s) until the referral was "accepted", then the receiving organization(s) could get access to the customer's name and contact information.

20. Can you provide a blank IEP or the list of required content fields for an IEP referenced in sub bullet point 2 "Individual Employment Plan (IEP): Allow case workers to input information directly into fields/forms that can be shared with other service providers, upon customer approval." under "Sharing Customer Referrals Between Service Providers" section 2 "Enhanced Customer Profile Information" bullet point 1 Add fields/forms within the customer profile for:"?

- (see attached pdf)

21. Can you define what "authorized" means in sub bullet point 4 "Open field for case worker notes that help provide context or referrals, viewable only to customer and authorized case workers." under "Sharing Customer Referrals Between Service Providers" section 2 "Enhanced Customer Profile Information" bullet point 1 Add fields/forms within the customer profile for:"? Does it mean that the field is only visible to case workers that "share" access to the case or is there other criteria you envision? If it is other criteria, which user level determines this/these criteria?

- This is another safeguard to help ensure customer confidentiality is held tightly to a "need to know" standard (examples):
 - A case worker should not be able to see a customer's identifying information, including case notes, until they have "accepted" a referral.
 - A case worker in an organization should not be able to see another case worker's customer's information unless it is deliberately shared as a result of being need to know in an effort to better serve the customer.
 - Enhanced customer profile information may be additional customer information shared between specific service providers for a specific purpose. There could be an additional field of information that is only shared with service providers participating in a specific program. For example: The Pathway Home Program helps facilitate WorkSource Oregon services between participating service providers to assist incarcerated adults with training and employment upon release. Specific information (like the IEP) may only be shared between service providers participating in the Pathway Home Program. Other organizations should not even be able to see that a customer has a record or participates in the program if they are not only participating themselves. Additionally, Pathway Home service providers should only see the program participants that they are serving.

22. Can you clarify the intended functionality of “sharing” and “transferring” in bullet point 1 “Designate options to “Share” (add joint access) a file or “Transfer” a file (transfer access to a new case worker and relinquish access of previous case worker).” under “Sharing Customer Referrals Between Service Providers” section 3 “Case File Sharing and Transfer System”? Can a case worker with “shared” access “transfer” and/or “share” access with additional case workers?

- Yes, a case worker should be able to share and transfer access to a file once they have received access to the file. However, customer consent must be documented when sharing between organizations.
- The intended functionality of “sharing” and “transferring” a case file:
 - Sharing: Two or more case workers need to access a customer record as two or more organizations and/or individuals are serving this customer. For example, in the Pathway Home program, a case worker is assigned to an adult while they are still in the custody of state corrections. When nearing release, their case file should be shared with a case worker in the area that they are returning to. Once access to the case is no longer needed by the first case worker (i.e., the customer is released from the prison back to their home town), either the customer, or the new case worker can request removal of their access (which could easily be “request accepted” by the old case worker, or “request rejected” which would put the removal on hold and send a notification to an executive or administrator level operator, until review by the service provider executive, or administrator in the system could override. Additional details of this type of conflict would need to be worked out during planning.

23. Can you expand on bullet point 5 “Create different levels of information sharing to protect customer information.” under “Sharing Customer Referrals Between Service Providers” section 3 “Case File Sharing and Transfer System”? Which portions of user information are optionally sharable by case workers? Does this vary by case or by share?

- This is another safeguard to help ensure customer confidentiality is held tightly to a “need to know” standard (examples):
 - Some service providers in the system will only need a first name and customer phone number or email address to reach out to a customer requesting a referral.
 - Other service providers, like those in the Pathway Home Program, will need access to view the customer’s IEP to be able to prepare for connection upon their release

24. What are the programmatic implications of bullet point 3 “Enable Transfer Completed status to be updated directly from an email notification received from the system.” Under “Sharing Customer Referrals Between Service Providers” section 4 “Status Updates and Notifications”? Does this imply that case “transfer” actions are optional and may be accepted or rejected? And that the accepting or rejecting needs to be available via the system and via email?

- Yes, a provider should be able to accept or reject a referral/transfer request. There needs to be a way to “close the loop” so that the request isn’t left sitting out there forever. If it is accepted, the receiving organization agrees to contact the customer. If it is rejected, they are not agreeing to contact the customer and the notification will be shared with the sending organization so that they can inform the customer and close the request, or find another service provider to refer the customer to. This is one of the primary reasons for this system, that referral loops are closed to help ensure the customer receives the services they need and not dropped between organizations.
- Some of our service providers may not agree to log in and accept a referral. We would like to be able to offer them the ability to have a button (link) in an email that will inform the system that they have accepted the referral.

25. How are sharing request permissions established for bullet point 1 “Enable new case workers to request access to an existing customer file from the primary case worker, with approval managed either by the customer, the original case worker, or both.” under “Sharing Customer Referrals Between Service Providers” Section 5 “Cross-Agency Sharing Requests”? Are the “primary” and “original” case workers the same? Which user or user level establishes the sharing permissions? Are sharing permissions set per share or system-wide?

- Yes, “primary” and “original” both refer to the case worker holding the file that someone else is requesting access to.
- Anyone should be able to request access to a file. It would be up to the primary/original case worker to grant access to the new case worker, with final approval from the customer.
- A statewide administrator could establish sharing permissions for each workforce area, workforce area administrators could establish sharing permissions for service providers within their area, and possibly executive level permissions of an organization would establish sharing permissions for their staff/case workers.

26. What is meant by "Integration" in section 1 "Appointment Scheduling Integration" under "Appointment Scheduling"? Is there an existing calendaring system that needs to be integrated with?

- There is not an existing calendaring system, but it is something that would be extremely helpful to the process, particularly for the Pathway Home Program participants to be able to schedule appointments with their case workers upon release. The goal is for adults leaving state custody to have an appointment scheduled before their release date to meet with their case worker immediately after their release date.

27. What functionality do you expect with "manage" appointments in bullet point 1 "Add appointment scheduling capabilities within the system, enabling case workers and customers to set, view, and manage appointments easily." under "Appointment Scheduling" section 1 "Appointment Scheduling Integration"?

- If a customer can schedule an appointment within the system, they should also be able to reschedule and cancel that appointment, immediately notifying the case worker that the appointment is scheduled with of the change.

28. What criteria will be used for connecting clients with relevant providers?

- County of client residence
- Services offered by area organizations

29. What are the reasons that case transfers occur?

- They are more referrals, some may be transfers and others just connecting customers to additional resources
- A person who is working with a case worker in one city moves to another city and would like to get a similar service in the new city
- A person who is working with a case worker for their SNAP would like help getting training or a job and the SNAP worker wants to have an employment specialist reach out to the customer to help
- A person who is working with a case worker while they are incarcerated is preparing to be released and needs to be connected with a worker in their home city prior to release to keep the continuation of services

30. How many staff users will need access to the system?

- At least 100 to start (likely twice that), but if the system goes statewide this number would be significantly higher. Eastern Oregon only has 5% of the population in the State of Oregon.

31. Can additional detail be provided about the following requirement: Enable Transfer Completed status to be updated directly from an email notification received from the system? Why does the status need to be updated directly from an e-mail? Or is the e-mail notification simply to inform specified users that the status has been updated?

- This means that someone could receive a notification in an email that contains a link they can click on that completes an action.
- Example: I receive an email asking me to accept a referral for a customer, I click on the "accept" link and it updates the status of the request to "referral accepted" closing the referral loop. It is then up to me to log into the system and get the details of the referral so that I can reach out to the customer directly.

32. Will there be some organizations who create contact profiles with location data and service categories that do not need the same level of access to the system as caseworkers? Is it accurate that these organizations would need to be able to receive referrals, communicate with case workers about referrals, record services provided, and view information about the customers' Individual Employment Plan, with customer approval? Are there any other activities they would need to perform in the system?

- Possibly. It is difficult to tell at this time. It is more likely that the user who creates the contact profile will also need to access the system as a case worker. Eastern Oregon has small businesses and/departments that assist customers, some departments have only a few staff who would create the account and help customers.

33. Can you outline the ideal workflow for a customer referral from start to finish?

There could be three potential starting points:

- The customer goes online looking for services:
 - The customer, enters: (1) their name, (2) contact information, (3) county of residence, and (4) the service(s) they are interested in (from a list, could be one or more)
 - A list is compiled from the service providers in the customer's county that provide the service(s) the customer is looking for and the list of service providers and contact information is shared with the customer
 - The customer has the option to simply use the list to contact the service provider(s), OR they can select one or more of the service providers and hit "submit" to send those checked a request to contact the customer. This way, the customer can select who their information is shared with from the list. Or not share any information if they choose.
- The case worker working with a customer:
 - The case worker identifies the need to connect their customer with another service provider
 - The case worker gets the customer's permission to share the referral with the other service provider
 - The case worker locates the service provider they are looking to connect the customer with from a list in their area, filtered possibly by service, or looked up specifically by name.
 - The case worker sends a request to the service provider on behalf of their customer to reach out to the customer about their services.
 - The potential service provider receiving the request either accepts the referral and receives the customer's contact information to reach out, or declines the referral – sending a message to the original case worker.
- A case worker who would like to work with a customer:
 - This would be rare and more likely for a Pathway Home program.
 - A case worker finds out that they are going to be getting someone released from a prison in another area soon.
 - The case worker is able to look up the service provider for that area/prison and request that they be added to any cases that are expected to be released to their area soon.
 - The case worker(s) in the facility they select can choose to share the inmate's file with the new case worker, or decline transferring/sharing the case, sending the request back to the requestor with a reason like "we don't have anyone releasing to your area in the next 30 days".

34. Should customers be able to self-refer, or should referrals always be initiated by caseworkers?

- Yes, see above.

35. How will customer approval for data sharing and referrals be handled within the system?

- This may need to be decided later, but the vision is that there would be an email sent to the customer asking them to approve a referral and they could hopefully do it right from their phone.
- The other example is above, where the customer has the option to share their contact information with specific service providers, or reach out themselves.

36. What permissions should caseworkers have in relation to customer records and case transfers?

- The very least amount needed to complete the referral and connect with the customer.
- For the Pathway Home Program, the case workers would need to be able to share the IEP (Individual Employment Plan), and a checklist of services already completed, with the service provider taking on the case post-release.

37. How will case-sharing and transfer requests be handled between agencies?

Should the original caseworker retain access after a transfer?

- The case worker should have the ability to select to share or transfer a case. If shared, they add access for a new case worker and retain access, for a transfer, they lost access as soon as the new case worker accepts the transfer.

38. How long should data related to referrals and case files be stored in the system?

- This will need to be decided in accordance with state, federal, and local laws about retaining customer files. There will not be medical or other highly confidential information kept in this system that would require exceptionally long retention times.

Customer Profiles & Data Management

39. What key data fields must be captured in customer profiles (e.g., contact details, employment plans, case history)?

- Name
- Contact information (phone, email)
- County of residence

40. Are there any specific compliance or data security requirements we should be aware of (e.g., HIPAA, GDPR)?

- Not at this time.

41. Should customers have access to their own profiles and be able to update certain fields?

- Yes, this would be preferable.

42. Do you require multilingual support? If so, which languages should be prioritized?

- For Eastern Oregon, the majority of the population speaks English and Spanish. However, other areas of the state may decide to add languages later if they begin using the system also.

Service Provider Database

43. Will there be an existing database of service providers that needs to be imported into the system?

- As we do not currently have a referral system, we would likely put something into a spreadsheet to upload.

44. Should the system support reviews or ratings for service providers?

- This is not required, but would be great.

Notifications & Appointments

45. What types of notifications and alerts should the system generate (e.g., email, SMS, system dashboard alerts)?

- Email at a minimum, however SMS and System dashboard alerts would be wonderful.

46. Do you have a preferred appointment scheduling tool, or should we develop a built-in scheduling feature?

- Currently, service providers use various tools like Calendly and Microsoft Bookings, but a built-in feature could be helpful, or a sort of integration.

Technical Considerations

47. What are your hosting preferences? Should the system be cloud-based, on-premises, or hybrid?

- This may be decided later

48. What authentication and access control methods are required (e.g., Single Sign-On, multi-factor authentication)?

- This may be decided later

49. Should the system support offline functionality in case of network issues?

- This may be decided later

50. Are there any external APIs or third-party services that the system should integrate with?

- Yes, the system should be able to integrate with other systems.

51. What frequency of data backups and disaster recovery planning do you require?

- This may be decided later

Budget & Timeline

52. What is your allocated budget range for the development and implementation of this system?

- \$150,000

53. Are there any specific cost constraints we should consider?

- We are unable to spend funds outside of the United States
- The basic referral system created as a result of this RFP should be completed by December 31, 2025, but is negotiable as features are selected and finalized with the developer.

54. Do you have a preferred timeline for project milestones beyond what's stated in the RFP?

- We would like to start testing some basic functionality within six months of the project kickoff.

55. Would you like to implement a phased rollout or pilot testing before full deployment?

- This could save time and money and limit errors, and would be preferable.

56. Do you require vendor-provided training and documentation for system users?

- Training should only be needed for the highest level of administrators as the system should be user-friendly for other users.
- The level of documentation needed may be identified later.

57. Will there be an ongoing maintenance and support contract? If so, what level of support is expected?

- Yes. However, every attempt will be made to keep the ongoing maintenance cost sustainable. Support should be available to keep the system working smoothly and as designed to operate.
- Requests for additional functionality would be separate from ongoing maintenance.