# COMMONWEALTH OF PENNSYLVANIA

# HEALTH & HUMAN SERVICES DELIVERY CENTER

# INFORMATION TECHNOLOGY GUIDELINE

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| Name of Guideline: | Number: |
| **Statement of Work to a Vendor for a Network Survey and Analysis** | **GDL-ENSS007** |
| Domain: | Category: |
| **Network** | **Network Design** |
| Date Issued: | Issued By: |
| **05/09/2001** | **Dean Schutte, TSO Compute Service Delivery Chief, Health & Human Services Delivery Center** |
| Date Reviewed: |
| **07/28/2020** |

**Abstract:**

The Health and Human Services Delivery Center (HHS DC) supports the Departments of Health (DOH), Human Services (DHS), Aging (PDA), Drug and Alcohol Programs (DDAP) and Military and Veterans Affairs (DMVA).

The Health & Human Services Delivery Center (HHS DC) contracts vendors for network surveys and upgrades. HHS DC creates a statement of work (SOW) for a network survey and submits it to vendors. A chosen vendor that agrees to the SOW performs the network survey.

**General:**

The purpose of this document is to provide an example of a Statement of Work for a network survey and analysis given to a vendor.

**Guideline:**

**Statement of Work**

The Commonwealth of Pennsylvania is seeking a qualified vendor to perform a complete site survey and analysis at various locations throughout the Commonwealth. These assessments will be performed only when directed by the Bureau of Information Systems (HHS DC) and/or program offices of the Health & Human Services Delivery Center (HHS DC).

The locations may be HHS DC campuses, as in mental health (MH), mental retardation (MR), and the Office of Children, Youth, And Families (OCYF) facilities. The locations may also be the Office of Income Maintenance (OIM) county assistance offices, multi-program buildings (for example, State office complexes), and any other location occupied by HHS DC staff.

Based on the assessment survey and meeting with facility staff of each facility, the deliverable(s) shall be a Network Design Report (NDR) for each facility surveyed.

Project Goal

The goal of this project is to assess the infrastructure of each site and identify necessary upgrades that will enable each location to support state-of-the-art information technology (IT) (voice, data, and video). This includes the ability to have facility-wide information sharing, files, databases, applications, reporting, printing capability, and electronic mail connectivity. It also includes enterprise-wide resource sharing, security, and intranet and Internet access.

Video teleconferencing must be addressed but may not be needed at all sites.

Identify site-specific needs in the NDR. HHS DC requires a uniform design to facilitate support and future upgrades. Any specific needs for a given site must be reviewed and, if applicable, incorporated, into the design for all locations of that Program Office.

The design must specifically exclude the development of independent facility network domains.

Project Liaisons and Contacts

The HHS DC will be the technical advisors to all program offices for any surveys. An IT coordinator will be identified at each location that will be reviewed. HHS DC and the program offices will identify locations for site reviews as well as the timing for this work. No contact with a location is to be made without the direction of either HHS DC or a program office. The local IT coordinator will provide access to all local resources and identify specific local needs. The IT coordinator will also identify any individuals the contractor should interview.

Project Parameters and Limitations

Each location will be assessed individually as directed by HHS DC or the program office of the location. Upgrade recommendations must be in full compliance with the Governor's Office of Information Technology (OIT) standards. As such, recommended upgrades may only propose reliance on the Governor's OIT, and HHS DC supported standards.

Project Scope and Deliverables

The selected vendor will conduct a location-wide IT capability assessment survey at each location. At campus locations, this includes all facility-identified, viably occupied (or expected to be occupied) buildings and sites. Based on the assessment survey and meetings with local staff and consultation with HHS DC, the deliverable shall be a Network Design Report (NDR). The NDR shall be a written report for each location. The report shall address the following four key components:

1. Assessment of the existing location infrastructure.
2. IT needs as expressed by the local IT coordinator as well as key site staff, as identified by the local coordinator.
3. HHS DC Network Architecture staff assessment of Commonwealth IT direction and current HHS DC wiring standards.
4. The rationale and work, time, and materials required to affect the necessary upgrade(s) of the location infrastructure, including any new electronic equipment to support.
   1. The current EDP/IT needs as described.
   2. Projected future needs, however, cabling and data jack recommendations shall not exceed a projection of 20% over existing infrastructure - maximum.

The completed report shall include a table of contents and must be compiled in the order and with the sections seen in the [*Network Assessment Template*](http://mydhs/cs/groups/webcontent/documents/communication/p_032185.doc). Use the *Network Assessment Template* to create the report.

Project Description / Expected General Timeframes for Project Completion

It is anticipated that the length of time required to complete the onsite assessment will be one to three days. Meetings with key location staff will be coordinated and scheduled by the local IT Coordinator, who shall serve as the single point of contact and liaison for that location. The on-site meetings may include staff from program offices as well as from HHS DC, at their discretion. A completed report will be due and provided to the Program Office, the local IT coordinator, and the HHS DC within thirty (30) days of the date the on-site assessment survey is completed. Upon receipt of the report, payment for work completed will be withheld for up to an additional thirty (30) days until the report is reviewed for compliance with the requirements of this Statement of Work. HHS DC reserves the right to request additional assessment, refinement, or reworking of any or all recommendations based on the review of the report. During this time, payment for services rendered will continue to be withheld until a final product is delivered as stipulated above.

Next Steps

HHS DC expects to be able to use the NDR as the basis for a contract statement of work for upgrading IT infrastructure as recommended. The actual work contracted for completion, however, may include modifications as deemed necessary by the Program Office, HHS DC, and/or each site.

**Appendix I: Completing the Network Assessment Report**

Use the [*Network Assessment Template*](http://mydhs/cs/groups/webcontent/documents/communication/p_032185.doc) to complete & write the report. Use the following outline while writing the report.

I. Executive Summary

* Write a short narrative including conclusions and recommendations.

II. Overview of Work Completed

* Survey assessment process description; include times, dates and contacts.
* Location Description: department, bureau, and so on.
* BuildingDescription: for each building surveyed, assessed, and included in the recommendations.
* Local staff interviewsummaries: findings and needs as identified.

III. Survey Assessments Findings

* General Observations.
* Environmental Observations (include potential problems for design changes).
* Existing Infrastructure (by building and as configured to the network).
* Existing Cabling (by building and as configured to the network).
* Existing Electronics (by building and as configured to the network).
* Training Issues.
* Summary of Findings.

IV. Recommendations for Infrastructure Upgrades

* General Recommendations.
* Infrastructure Upgrade Recommendations Overview and Rational.
* Site Preparations Recommendations (by building and as configured).
* Cabling Recommendations (by building and as configured to the network).
* Electronics Recommendations (by building and as configured to the network).
* Training Recommendations.
* Summary of the upgrade recommendations.

V. Recommended Implementation Strategies

* Site/Cabling Implementation Strategy: includes a schematic diagram and projected completion timetable.
* Electronics Implementation Strategy: includes a projected completion timetable.
* Workstation Implementation Strategy: include a projected completion timetable.
* Overall Location Upgrade Strategy: including a phased approach to allow for budget or staff support limitations, includes a projected completion timetable for each phase and interdependencies between phases.

VI. Estimate of Time and Materials (Listed)

* Site Preparations – including all incidentals (be specific).
* Cabling.
* Electronics.
* Other System Incidentals (be specific).

VII. Projected Costs

* Design
* Materials
* Labor

**Refresh Schedule:**

All guidelines and referenced documentation identified in this standard will be subject to review and possible revision annually or upon request by the HHS Delivery Center Domain Leads.

**Guideline Revision Log:**

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| --- | --- | --- | --- |
| **Change Date** | **Version** | **Change Description** | **Author and Organization** |
| 05/09/2001 | 1.0 | Initial creation | DPW |
| 08/16/2002 | 1.1 | Edited for style | Beverly Shultz |
| 12/13/2004 | 1.1 | Reviewed content | Tom Zarb |
| 11/06/2006 | 1.1 | Reviewed content – No changes | Doug Rutter |
| 02/07/2008 | 1.2 | Reviewed content & edited style | Doug Rutter |
| 06/25/2010 | 1.2 | Reviewed content – No changes | Doug Rutter |
| 02/23/2011 | 1.2 | Reviewed content – No changes | Doug Rutter |
| 10/9/13 | 1.2 | Reviewed content – No changes | Matthew Messinger |
| 3/19/15 | 1.3 | Changed DPW references to DHS | Bob Gordon, BIS-DTE |
| 3/07/2016 | 1.4 | Updated CTO’s name | Aamir Qureshi, BIS-DTE |
| 04/15/2020 | 1.5 | Organization Name Change/Fix Link | HHS TSO |
| 07/20/2020 | 1.5 | Reviewed content – No changes | Bob Gordon, HHS Network |
| 07/28/2020 | 1.5 | Signature removed | M Koerber, HHS TSO |