**Template Instructions**

This template provides the detailed instructions and examples for the APD Type “CWS/CMS”.

This template is to be used when “CWS/CMS” is entered on the APD Standard Template. Do not use this template for “Dual”, “Generic” or “SAWS” type APDs.

The APD Standard Template cover page should already have the following information:

* Title,
* County Name and
* Submission Date
* “CWS/CMS”

Do not fill in the Tracking Number.

The detailed instruction and examples provided below are to be used to enter required information into the APD Standard Template for all sections.

Examples are shown in *italicized* text while instructions are provided in **bold** text.

The completed Standard Template with CWS/CMS specific information should be submitted to:

CWS/CMS

[CWS\_APD@osi.ca.gov](mailto:CWS_APD@osi.ca.gov)

|  |
| --- |
| **California Health and Human Services Agency**  Office of Systems Integration (OSI)  Title: Enter Title  County Name: Enter the County Name  **APD Submission Date: Enter Date as Month Name, Day, 4-Digit Year** |

**APD Type:**

**CWS/CMS**

**Tracking Number\*\*:**

|  |
| --- |
|  |

**(\*\*CWS/CMS Project Office will assign tracking Number after first submission of APD)**

# Description of Request

**Describe the nature and scope of the acquisition. Specify if this is a purchase of computer equipment, software, or services. Specify planned purchase/implementation date and/or period of performance for services.**

*The following are examples of information to be provided in this section of the APD. The first example describes a project that will acquire hardware/software while the second example describes a project that will acquire services.*

* *“The county needs to purchase 6 personal computers (PCs), 2 laptops, 2 printers for social workers in the Children Services Division of the County Department of Social Services. Items will be purchased in March 2XXX, and warranty services will be purchased for 4 additional years.”*

Table 1‑1 APD Summary

|  |  |
| --- | --- |
| **Items Description** | **Cost** |
| * Hardware: 6 PCs, 2 Laptops, 2 Printers | $10,951 |
| * Software: COTS Licenses for CWS/CMS PCs | $ 2,267 |
| **Total:** | $13,218 |

* *“XXXXXXX County is requesting approval of funding required by XXXXXX to provide continued annual support for our weekly download of data for use in the County’s established data mart. Services will be for the period of July 1, 2XXX to June 30, 2XXX.”*

Table 1‑2 APD Summary

|  |  |
| --- | --- |
| **Items Description** | **Cost** |
| * Services: 1 year services for weekly download | $24,000 |
| **Total:** | $24,000 |

**Also Specify the CAPE project name(s) that relates to this APD.**

* **“***This project is in the 07/08 CAPE under the project name ‘Tech Refresh for CPS - 100 Replacement Workstations.’”*

# Business Justification

**Describe why this acquisition is necessary. Identify distinct and specific business problems being solved or benefits to be gained which are not currently being supported and how the acquisition requested through this APD will provide the identified benefits or resolve the identified business problems.**

*The following are examples of information to be provided in this section of the APD:*

* *“We need to purchase 6 personal computers (PCs), 2 laptops, 2 printers for social workers in Child Protective Services because…”*
* *“We need workstations to support additional staff hired for (Name of Program or organization) because of increased caseload…;”*
* *“We need to automate our manual function of…"*

**Provide a justification if the request is for equipment that exceeds the minimum specifications required for the CWS/CMS application. Confirm that the request does not duplicate functionality currently available in CWS/CMS.**

*The following are examples of information to be provided in this section of the APD:*

* *“In a coexistent environment, the workstation being purchased will provide social workers access to County specific applications in addition to the CWS/CMS application. To meet County business process and optimize usage, the workstations require specifications that are above the minimum specifications identified by the State, i.e. processor speed, memory, and RAM.”*
* *“The download requested is continuation of a pre-existing capability and does not duplicate any SACWIS requirement within CWS/CMS application.”*

## Prior APD Approvals

**Specify related, previously approved APDs by OSI assigned Tracking Number and a brief description of the relationship. If none apply indicate with “None”.**

*The following are examples of information to be provided in this section of the APD:*

* *“This APD requests an increase in the cost previously estimated and approved in APD #XXXXXXXX.*
* *“This APD requests replacement of equipment previously approved in APD #XXXXXXXX.“*

# Impact on Operations and Programs

**How will failure to approve this APD request impact current operations and the county’s effective and efficient administration of State public assistance programs? State N/A if this section is not required for this APD.**

*The following are examples of information to be provided in this section of the APD:*

* *“Failure of the County to procure additional workstations for newly hired staff will prevent them from accessing CWS/CMS.”*
* *“The extended warranties for the workstations have expired and the failure to replace the equipment may result in higher costs associated with repair and maintenance…”*
* *“This request is necessary to improve the efficient administration of child welfare programs because…”*

# Benefiting Programs

**List the programs that will benefit from the use of the goods or services and briefly explain how the programs are benefited.**

*The following are examples of information to be provided in this section of the APD:*

* *“Equipment will be used to access the CWS/CMS application by social workers and will benefit the XXXXXX program(s) because…”*
* *“Equipment will be used to upgrade the county Local Area Network (LAN)and will benefit the XXXXXXX program(s) because …”*

# Cost and Cost Allocation

**Provide a detailed description of the goods and/or services to be purchased, estimate of the costs to be incurred with the APD, and how those costs are subsequently allocated to the benefiting programs.**

## Acquisition Costs Description

**Provide a detailed description of the goods and/or services to be purchased and estimate of the costs to be incurred with the APD Provide a list of one-time and recurring costs that detail unit costs, peripheral equipment, extensions, and totals. See the Detailed Template for additional instructions.**

### Description of the Acquisition

*The following are examples of information to be provided in this section of the APD.*

* *“Specifications for the PC and printer will meet CWS/CMS minimum standards found on the CWS/CMS WEB site*[[1]](#footnote-1)*. The required COTS software licenses are necessary for the operation of the CWS/CMS application.”*
* *“The Service Contract will provide the weekly downloads specified in Section 1.”*
* *“The Scanner will be capable of black and white operation, operate at a minimum of 10 pages per minute, duplex printing is not required, and will be capable of copying multiple sheets.”*

### Cost Detail

*The following are examples of information to be provided in this section of the APD. The first example describes a hardware acquisition while the second example describes a service acquisition:*

* *The specific details of this acquisition can be found in the table below.*

Table 5‑1 Costs Summary

| **Tax** | **Depr or Per** | **QTY** | **Description** | **Unit Price** | **Extended Price** |
| --- | --- | --- | --- | --- | --- |
|  |  |  | ***Hardware*** |  |  |
| X |  | 6 | Desktop PC with 4 yr Warranty | $987.03 | $ 5,922.18 |
| X |  | 2 | Laptop PC with 4 Yr Warranty | $1247.32 | $ 2,494.64 |
| X |  | 2 | B/W Network Printer | $885.33 | $ 1,770.66 |
|  |  |  | Taxable Subtotal |  | **$ 10,187.48** |
|  |  |  | Non-Taxable Subtotal |  | **$ -** |
|  |  |  | Tax (7.50%) |  | **$ 764.06** |
|  |  |  | Subtotal |  | **$ 10,951.54** |
|  |  |  |  |  |  |
|  |  |  | ***PC Software*** |  |  |
| X |  | 8 | Symantec Anti-Virus | $14.47 | $ 115.76 |
| X |  | 8 | PKZip | $8.23 | $ 65.84 |
| X |  | 8 | Microsoft Office Standard Edition 2003 | $247.12 | $ 1,976.96 |
|  |  |  | Taxable Subtotal |  | **$ 2,108.64** |
|  |  |  | Non-Taxable Subtotal |  | **$ -** |
|  |  |  | Tax (7.50%) |  | **$ 158.15** |
|  |  |  | Subtotal |  | **$ 2,266.79** |
|  |  |  |  |  |  |
|  |  |  | Non-Taxable Total |  | **$ -** |
|  |  |  | Taxable Total |  | **$ 12,296** |
|  |  |  | Tax (7.50%) |  | **$ 922** |
|  |  |  | **GRAND TOTAL** |  | **$ 13,218** |
|  |  |  | Depreciable Total |  | $ - |
|  |  |  | Depreciable Tax Total |  | $ - |
|  |  |  | **Depreciable Grand Total** |  | **$ -** |

* *“The cost details of the service contract can be found in the table below.”*

Table 5‑2 Costs Summary

| **Tax** | **Depr or Per** | **QTY** | **Description** | **Unit Price** | **Extended Price** |
| --- | --- | --- | --- | --- | --- |
|  |  |  | ***Services Contract*** |  |  |
| X |  | 1 | 3 Year Contract for services (first year costs) | $24,000 | $ 24,000 |
|  |  |  | Taxable Subtotal |  | **$ -** |
|  |  |  | Non-Taxable Subtotal |  | $ 24,000 |
|  |  |  | Tax (7.50%) |  | **$ -** |
|  |  |  | Subtotal |  | **$ -** |
|  |  |  |  |  |  |
|  |  |  | Non-Taxable Total |  | $ 24,000 |
|  |  |  | Taxable Total |  | **$ -** |
|  |  |  | Tax (7.50%) |  | **$ -** |
|  |  |  | **GRAND TOTAL** |  | $ 24,000 |
|  |  |  | Depreciable Total |  | $ - |
|  |  |  | Depreciable Tax Total |  | $ - |
|  |  |  | **Depreciable Grand Total** |  | **$ -** |

### Depreciation Costs

**A depreciation schedule is used as a means of allocating the cost of equipment with an acquisition cost greater than $5,000 and a useful life of more than one year. Equipment with an acquisition unit cost less than or equal to $5,000 does not need to be depreciated. Only items with a unit cost above $5,000 shall be depreciated.**

*The following are examples of information to be provided in this section of the APD:*

* *“Depreciation tables are not required because none of the hardware and software being purchased has a unit value greater than $5,000.”*
* *“Depreciation tables are not required because the services requested are not depreciable assets.”*
* *“The four CWS/CMS Application Servers totaling $92,640 will be depreciated for their expected useful life of 5 years. Costs are evenly spread equally over 60 months.”*

Table 5‑3 Depreciation Table

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Depreciation Table** | | | | | | | |
| **Month** | **FY 2007** | **FY 2008** | **FY 2009** | **FY 2010** | **FY 2011** | **FY 2012** | **Total** |
| October |  | $1,544 | $1,544 | $1,544 | $1,544 | $1,544 |  |
| November |  | $1,544 | $1,544 | $1,544 | $1,544 | $1,544 |  |
| December |  | $1,544 | $1,544 | $1,544 | $1,544 | $1,544 |  |
| January |  | $1,544 | $1,544 | $1,544 | $1,544 | $1,544 |  |
| February |  | $1,544 | $1,544 | $1,544 | $1,544 | $1,544 |  |
| March |  | $1,544 | $1,544 | $1,544 | $1,544 | $1,544 |  |
| April |  | $1,544 | $1,544 | $1,544 | $1,544 | $1,544 |  |
| May |  | $1,544 | $1,544 | $1,544 | $1,544 | $1,544 |  |
| June |  | $1,544 | $1,544 | $1,544 | $1,544 | $1,544 |  |
| July |  | $1,544 | $1,544 | $1,544 | $1,544 | $1,544 |  |
| August |  | $1,544 | $1,544 | $1,544 | $1,544 | $1,544 |  |
| September | $1,544 | $1,544 | $1,544 | $1,544 | $1,544 |  |  |
| **Total** | **$1,544** | **$18,528** | **$18,528** | **$18,528** | **$18,528** | **$16,984** | **$92,640** |

### Quarterly Budget Detail

**The county must include a quarterly budget detail. The total estimated project costs of the APD are to be broken down in a table format that displays when costs are expected to be incurred by quarter (i.e., Oct-Dec, Jan-Mar, Apr-Jun, and Jul-Sep). The chart will indicate the activity being performed / requested and show the amount expected to be incurred each quarter.**

*The following are examples of information to be provided in this section of the APD. The first example describes a purchase that is concluded with a one-time payment while the second example describes a purchase based on a periodic payment schedule.*

* *“The following Quarterly Budget Table shows the one-time costs for the PCs and Software being purchased. These costs must be shown in the quarter in which they occur.”*

Table 5‑4 Quarterly Budget Table

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Activity** | **Oct-Dec/06** | **Jan-Mar/07** | **Apr-Jun/07** | **Jul-Sep/07** | **Total** |
| PCs and Software | $0 | $0 | $0 | $13,218 | $13,218 |

* *“The following Quarterly Budget Table shows the distribution of service costs throughout the contract.”*

Table 5‑2 Quarterly Budget Table

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Activity** | **Oct-Dec/06** | **Jan-Mar/07** | **Apr-Jun/07** | **Jul-Sep/07** | **Total** |
| Consultant Services | $0 | $0 | $0 | $2,000 | $2,000 |
|  |  |  |  |  |  |
| **Activity** | **Oct-Dec/07** | **Jan-Mar/08** | **Apr-Jun/08** | **Jul-Sep/09** | **Total** |
| Consultant Services | $6,000 | $6,000 | $6,000 | $4,000 | $22,000 |

## Cost Allocation Methodology

**Cost Allocation Methodology may be provided via the self-certification method or may fully describe the cost allocation method associated with this APD:**

### Self-Certified

**For those APDs that meet the requirements for using the County Cost Allocation Self-Certification method, the County may use this method in lieu of the fully described cost allocation method. Please refer to the CWS/CMS County Cost Allocation Self-Certification form for detailed instructions on limitations and guidance. After completing this form, include the signed Statement of Certification with the APD package that is submitted to the State and provide a cost allocation description at the federal and State/county program level for those costs associated with this APD.**

*The following are examples of information to be provided in this section of the APD. This example reflects the percentage of total project costs allocated to the federal and State/county programs that directly benefit from these costs.*

* *“The PCs, Laptops and Printers are used exclusively by our Child Social Workers (CSWs). A Study was accomplished between month day, year and month day, year that shows the equipment is used 87.2% of the time for CWS/CMS application use. The remaining time can not be allocated to specific programs so the CSWs time-study hours were used to allocate the Non-CWS/CMS activities.”*
* *“The following table shows the allocated distributions for the project:”*

Table 5‑2 Abbreviated Cost Allocation by Program Table

|  |  |
| --- | --- |
| **Benefiting Program** | **Funding Source % of Cost** |
| Title IV-E SACWIS | 68.44% |
| Title IV-E Non-SACWIS (Discount rate= 14.76%) | 10.48% |
| Title IV-A (TANF) | 13.54% |
| Title IV-B | 0.04% |
| Title XIX | 6.45% |
| Chafee ILP | 0.82% |
| Other State/County Programs | 0.23% |
| **TOTAL** | **100.00%** |

### Fully Described:

**For those APDs that do *not* meet the requirements for using the County Cost Allocation Self-Certification method, the County must fully describe the cost allocation method associated with this APD. Please refer to the County APD Guidelines[[2]](#footnote-2) posted on the CWS/CMS website and refer to Section II.B.5.d, which provides a detailed description for preparing a full description of the county’s cost allocation plan. Also:**

* **Describe the cost allocation methodology to be compliant with OMB Circular A-87**
* **Ensure the cost allocation methodology is in compliance with the federally approved County Welfare Department Cost Allocation Plan**
* **Ensure the Cost Allocation Methodology provided in this Section is consistent with the description provided in Section 4 of this APD**

# Method of Procurement

**Cost Allocation Methodology may be fully described or Self-Certified:**

### Self-Certified:

* **Include the signed Statement of Certification with the APD package**
* **Provide a detailed narrative of the Procurement Methodology**

*The following are examples of information to be provided in this section of the APD:*

* *“The equipment will be purchased using our competitively bid County Master Agreement. A signed Procurement Statement of Certification has been included with the APD.”*
* *“The service contract will be procured sole source from IBM Global services using the rates established in the California CWS/CMS contract 31091. IBM Global Services is the only company that can support the required extracts.”*

### Fully described:

**When providing a full description of the procurement method, explain how the equipment, software, or services will be purchased and include all related procurement documents including RFPs, SOWs, Bids, Unexecuted Contracts, Leveraged Procurement Vehicles, etc. Also, briefly describe:**

**In General:**

* **How procurement will be advertised, who will be allowed to bid & selection method**
* **Local Preference – why your local preference does not apply, if one exists**
* **Audit Clause – where you will include the required federal clause**

**For Small/Informal purchase:**

* **Applicable county policy and number of quotes that will be obtained**

**For Sole Source:**

* **Applicable county policy**
* **Justification for using sole source**
* **Cost or Price Analysis required by federal regulation**

**For Contract Amendment:**

* **Whether the base contract previously received State or federal approval**
* **If not, how base contract met all federal procurement requirements**

*The following are examples of information to be provided in this section of the APD:*

* *“The equipment will be acquired through a county master purchase agreement procured through a competitive bid process that was (1) open to the public, (3) not inclusive of any local preference, and (3) awarded on the basis on the vendor’s compliance with county contractual terms and conditions. Our county policy allows us to notify 3 vendors on the approved list and select the lowest cost quote. (See Exhibit A, p. 3). We will place the required audit clause on our purchase order, a draft copy of which is attached, as is the RFP and Contract for the master agreement.”*
* *“The software maintenance services will be acquired though a sole source purchase permitted by our county policy when only one vendor can fulfill the county’s need. (See Exhibit A, p. 5). In this case the software licensing restrictions require us to use the services of this company for maintenance. (See Exhibit B, Software License, p. 2). Our market survey of hourly rates demonstrated that the rates being charged are reasonable for software maintenance. (See Exhibit. C, Market Survey). We will place the required audit clause in our Statement of Work, a draft of which is attached as is the draft contract.”*

**See the Detailed Template for additional instructions.**

# Cost Benefit Analysis

**Provide a narrative analysis that shows the benefits compared to the costs. Identify the cost savings and/or benefits in quantitative or qualitative terms as appropriate to the acquisition.**

*The following are examples of information to be provided in this section of the APD:*

* *“Staff Savings: This acquisition saves 50 workers 30 minutes per day, leading to productivity and time gains that would allow these staff more time for delivery of XX services. This would eliminate the need to hire additional staff. (Explain how the minutes were determined, i.e. time study, observation or survey of a sample of workers, etc).”*
* *“This acquisition will improve the quality of services by reducing client wait time”.*
* *“This acquisition will eliminate the substantial cost of repairs…”*
* *“Reduction in travel expenses…”*
* *“By automating this manual process, social workers will no longer be required to the travel to the XXXX office to complete the work. The benefit analysis calculation is based on 10 workers traveling and average of 50 miles to-and-from the XXXXX office (based on Map Quest).*
  + *50 miles/travel X $0.50 per mile = $25.00 per trip*
  + *50 weeks/year X $25.00/trip = $1,250.00 /year in travel costs*
  + *10 workers X $1,250.00/year = $12,500.00 annually*
  + *$25,000 total project costs / $12,500.00 travel costs annually = 2 years payback period”*
* *“Using historical data, the acquisition and implementation of this automated system will save the County an estimated $XXXXXXXX from the reduction in overpayments.* 
  + *Cost of System $10,000.00 = 2 year payback period*
  + *Potential Savings per Year $5,000”*

# County Contact Information

## County APD Preparer (Required)

|  |  |
| --- | --- |
| **Name of County Contact:** | Enter Name |
| **Position:** | Enter Title |
| **Department Name:** | Enter department name |
| **Business Telephone Number:** | Enter Work telephone number including area code |
| **Cell Phone Number:** | Enter Cell telephone number including area code |
| **Business FAX Number:** | Enter FAX telephone number including area code |
| **Email Address:** | Enter Email address |

## Additional County Contact (Optional)

|  |  |
| --- | --- |
| **Name of County Contact:** | Enter Name |
| **Position:** | Enter Title |
| **Department Name:** | Enter department name |
| **Business Telephone Number:** | Enter Work telephone number including area code |
| **Cell Phone Number:** | Enter Cell telephone number including area code |
| **Business FAX Number:** | Enter FAX telephone number including area code |
| **Email Address:** | Enter Email address |

1. <http://www.hwcws.cahwnet.gov/Projects/CFP/Misc/041905_PC_Laptop_Printer_Min_Require.doc> [↑](#footnote-ref-1)
2. <http://www.hwcws.cahwnet.gov/Projects/CFP/> [↑](#footnote-ref-2)