



# Stage 3 Solution Analysis

California Department of Technology, SIMM 19C.2 (Rev. 3.0.6, 2/28/2022)

## 3.1 General Information

**1. Agency or State Entity Name: 8660 - Public Utilities Commission**

If Agency/entity is not in the list, then enter here. [Click or tap here to enter text.](#)

**2. Proposal Name: Human Capital Management Systems (HCMS)**

**3. Department of Technology Project Number (0000-000): 8660-093**

**4. S3SD Version Number: Version 1**

**5. CDT Billing Case Number: 2315830**

Don't have a Case Number? [Click here to get one.](#)

## 3.2 Submittal Information

**1. Contact Information**

Contact Name: Fedra Ghavami

Contact Email: [fedra.ghavami@cpuc.ca.gov](mailto:fedra.ghavami@cpuc.ca.gov)

Contact Phone: (213) 444-8884

**2. Submission Type: New Submission**

If Withdraw, select Reason: [Choose an item.](#)

If Other, specify reason here: [Click or tap here to enter text.](#)

**Sections Changed if an update or resubmission:** (List all the sections that changed.)

[Click or tap here to enter text.](#)

**Summary of Changes:** (Summarize updates made.)

[Click or tap here to enter text.](#)

3. **Attach [Project Approval Executive Transmittal](#)** to your email submission.
4. **Attach updated [Procurement Assessment Form](#)** with Stage 3 information to your email submission.
5. **Conditions from Stage 2 Approval** (Enter any conditions from the Stage 2 Alternatives Analysis approval letter issued by CDT):

[Click or tap here to enter text.](#)

## 3.3 Detailed Solution Requirements and Outcomes

1. **Attach detailed** Requirements and Outcomes documents including traceability matrix to the email submission. Include any changed or updated requirements.
2. **Stage 2 Requirements and Outcomes Changes**

Since approval of the Stage 2 Alternatives Analysis, has the agency/state entity developed or modified any requirements and/or outcomes that were not represented in Stage 2? **Yes**

If “Yes,” explain:

Since Stage 2 submission CPUC added requirements as part of requirements elaborations. All the requirements still align with stage 1 Business Objectives. Attached document HCMS Stage 3 Detailed Solution Requirements/RTM has all the Business Requirements.

If “Yes,” please describe the nature and scope of the change(s) and how the requirements and/or outcomes align with the business objectives established in the Stage 1 Business Analysis:

The project scope hasn't changed. Additional requirements were developed as part of the requirements elaboration required by the PAL Process as we moved from Stage 2 Alternatives Analysis to Stage 3 Solution Development.

3. **Attach** the updated To-Be Workflow(s) to your email submission.

If To-Be business process workflow(s) is not attached, explain why:

Business doesn't want to limit the vendor analysis or the future state by providing many details about the To-Be process flow. Business prefers to work with the vendor to further define the detailed workflow. This document will be provided in Stage 4.

Attach the Statement of Work to your email submission.

## 3.4 Project and Procurements Roadmap

**Attach** a Project and Procurements Roadmap or Summary to the submission.

The roadmap or summary should include both the primary and all ancillary procurements.

## 3.5 Project Planning

Are the following Project Management Plans or artifacts completed to the required level, approved by the designated agency/state entity authority, and available for the Department of Technology to review? **Choose:** 'Yes,' 'No,' or 'Not Applicable.' If 'No' or 'Not Applicable,' provide the artifact status in the space provided.

[Project Management Plan \(Draft\):](#)Yes

Status: Click or tap here to enter text.

[Risk Management Plan \(Approved\):](#)Yes

Status: Risk Management Plan.docx

[Issue and Action Item Management Plan \(Approved\):](#)Yes

Status: Click or tap here to enter text.

[Change Control Management Plan \(Approved\):](#)Yes

Status: Click or tap here to enter text.

[Quality Management Plan \(Approved\):](#)Not applicable

Status: This is the Off-the Shelf Product

Testing Management Plan (Approved):Yes

Status: This is the Off-the Shelf Product

Security Management Plan (Approved):Not applicable

Status: This is the Off-the Shelf Product

[Contract Management Plan \(Updated Draft\):](#)Yes

Status: This is the Off-the Shelf Product

Other (enter name) Click here to enter text. Plan:Not applicable

Status: This is the Off-the Shelf Product

## 3.6 Primary Solicitation

**Attach** the Primary Solicitation document to your email submission.

For a standard procurement, please attach a copy of your IFB, RFP, or RFO.

The implementation RFO is attached. The attached document is called "Human Capital Management System RFO"

For a challenge-based procurement, please attach a copy of the solicitation.

## 3.7 Ancillary Procurements

1. **Attach** all in-progress and completed ancillary procurement documents to your email submission.
2. Has the project begun procurement activities for Independent Verification and Validation (IV&V) services per the State Administrative Manual Section 4940.3? [Yes](#)

If “Yes,” indicate the planned start date for IV&V services below:

[10/26/2022](#)

If “No” or “Not applicable,” provide a brief explanation below:

3. Provide the following information for each of your ancillary procurements:

**Service Type:**[Special Advisor](#)

If “Other,” specify: [Click or tap here to enter text.](#)

**Roles/Responsibilities or Tasks:** [IV&V](#)

**Status:**[In-Progress](#)

**CDT STP Conducted:** [No](#)

**Procurement Type:**[CMAS](#)

If “Other,” specify: [Click or tap here to enter text.](#)

**Length of Contract:** [24 months -possibility to extend an additional 12 months](#)

**Service Type:**[Goods](#)

If “Other,” specify:

**Roles/Responsibilities or Tasks:** [Provide Oracle Licenses](#)

**Status:**[Planned](#)

**CDT STP Conducted:** [No](#)

**Procurement Type:**[Other](#)

If “Other,” specify: [SLP](#)

**Length of Contract:** [12 months](#)

*TIP: Copy and paste or click the + button in the lower right corner of the ancillary procurement items to add Services (for different Service Types or Lengths of Contract) with all additional information as needed.*

**End of agency/state entity document.**

**Please ensure ADA compliance before submitting this document to CDT.**

**When ready, submit Stage 3 and all attachments in an email to [ProjectOversight@state.ca.gov](mailto:ProjectOversight@state.ca.gov).**

*TIP: Review the Gate 3 Project Management Planning Evaluation Scorecard to ensure a complete submission. [GATE 3 Evaluation Scorecard](#)*

## Department of Technology Use Only

**Original "New Submission" Date:** 9/16/2022

**Form Received Date:** 9/30/2022

**Form Accepted Date:** 9/30/2022

**Form Status:** Completed

**Form Status Date:** 10/20/2022

**Form Disposition:** Approved

**Form Disposition Date:** 10/20/2022