



CDSS

WILL LIGHTBOURNE
DIRECTOR

STATE OF CALIFORNIA—HEALTH AND HUMAN SERVICES AGENCY
DEPARTMENT OF SOCIAL SERVICES

744 P Street • Sacramento, CA 95814 • www.cdss.ca.gov



EDMUND G. BROWN JR.
GOVERNOR

FEBRUARY 27, 2015

ALL COUNTY INFORMATION NOTICE (ACIN) NO. I-13-15

REASON FOR THIS TRANSMITTAL

- State Law Change
- Federal Law or Regulation Change
- Court Order
- Clarification Requested by One or More Counties
- Initiated by CDSS

TO: ALL COUNTY CHILD WELFARE DIRECTORS
 ALL COUNTY CHILD WELFARE FISCAL OFFICERS
 ALL COUNTY CHILD WELFARE SERVICES/CASE
 MANAGEMENT SYSTEM (CWS/CMS) SINGLE POINTS OF
 CONTACT
 ALL CWS/CMS COUNTY TECHNICAL CONTACTS
 ALL COUNTY PROBATION OFFICERS
 ALL TITLE IV-E AGREEMENT TRIBES
 ALL CALIFORNIA DEPARTMENT OF SOCIAL SERVICES
 ADOPTIONS DISTRICT OFFICES

SUBJECT: CHILD WELFARE SERVICES – NEW SYSTEM (CWS-NS)
 CONFIDENTIALITY REMINDER

On February 18, 2015, the CWS-NS Project released a draft Request for Proposal (RFP) to county and state stakeholders. This notification is to remind all county and state staff working in and with child welfare services of their responsibility to maintain confidentiality when interacting with information technology vendors. Confidentiality must be followed by all staff regardless of their participation in the RFP review.

To ensure fairness to potential bidders and preserve the integrity of the procurement process, staff may not disclose or discuss with potential bidders any RFP related information, business requirements, or technical solutions. Any interactions or discussions may compromise the procurement and lead to bidder protests, award delays, and ultimately impact timelines for delivery of the CWS-NS.

The CWS-NS Project Office recognizes that the counties and the state are engaged in ongoing work with existing service providers. While performing this work, it is important to keep discussions focused only on the current business and technical changes.

For example, discussions with a vendor engaged in development, implementation, or maintenance activities on another statewide or county-based system are appropriate as are discussions specific to the maintenance and operation of the current CWS/CMS. Discussions regarding services in the future child welfare system and, more specifically, discussions about the CWS-NS or its procurement, are inappropriate.

As a reminder, every individual involved, or who may be involved, in the procurement process must additionally certify that they have no conflicts of interest and certify that they will keep all RFP information confidential. Many of your staff have already signed the confidentiality/conflict of interest statement for the CWS-NS Project. A copy of the Conflict of Interest form is attached for reference.

If you are contacted by a vendor or interested party regarding the RFP, the procurement, the procurement process, or if you have any questions about the appropriateness of vendor interactions, please contact Amy Cooper, Procurement Official, at (916) 431-5543 or amy.b.cooper@state.ca.gov.

Sincerely,

Original Document Signed By:

GAIL CHUN-DEDUONNI, Program Manager
Child Welfare Services – New System
Children and Family Services Division

Attachment



California Health and Human Services Agency
Office of Systems Integration
 2525 Natomas Park Dr. Suite 200
 Sacramento, California 95833-2933



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Conflict of Interest Certification

I certify that I have no personal or financial interest and no present or past employment or activity that is incompatible with my participation in any activity related to the Child Welfare Services New System Project (hereinafter "the Project"). I further certify that neither my spouse nor my dependent child(ren) have a personal or financial interest and no present employment that would be incompatible with my participation in the activities of the Project. For the duration of my involvement in this Project, I agree not to accept any gift, benefit, gratuity or consideration, or begin a personal or financial interest in any party who is associated with the Project. I am able to give full, fair and impartial consideration to the Project.

Confidentiality Certification

I further certify that I will hold in the strictest confidence and will not copy, disclose or give access to any person who has not signed a copy of this Conflict of Interest Certification / Confidentiality Certification, any information or data concerning the planning, design, development, processes, procedures, correspondence, working papers or any other information, in any form, that is made available to, or is accessible by me as part of my participation in the Project. I fully understand that any disclosure of Project information may be a basis for civil or criminal penalties and/or disciplinary action, including termination or dismissal.

I understand that I must continue to always keep confidential all Project information which was made available to me as part of my duties and participation with the Project. I agree to follow any instruction provided by the Office of Systems Integration relating to the confidentiality of Project information.

Signature: _____
 Name: _____ (Print)
 Date: _____
 Position: _____
 Employer: _____ (State or Contractor/Consultant)
 Title: _____
 Division/Unit: _____
 Telephone Number: _____
 Fax Number: _____
 E-Mail Address: _____

Return Original Signed Certification To:
Office of Systems Integration/CWS-New System Project
c/o California Department of Social Services
744 P Street, MS 9-12-83
Sacramento, CA 95814