2017 APPLICATION

Title of Project (Limited to 50 characters, including spaces, using Arial 12 point font):

NAME OF PROJECT: CENTRALIZED KEYCARD ACCESS SYSTEM

ſ						
	DATE OF IMPLEMENTATION/ADOPTION:	_ JUNE 15, 2015				
		(Must have been implemented at least one year - on or before July 1, 2016)				
	PROJECT STATUS:	OngoingX	One-time only			
	HAS YOUR DEPARTMENT PREVIOUSLY SUBMITTED THIS PROJECT?	Yes <u>X</u>	<u> </u>			
4	Executive Summary: Describe the project in 15 lines or less using Arial 12 point font. State clearly and concisely what difference the project has made.					
1 2 3 4 5 6 7 8 9 10 11 12 13 14 15	The Centralized Keycard Access System was developed and implemented to address the security risks associated with the management of several keycard access systems. The legacy keycard systems were decentralized and managed at the local office level, thereby making it extremely difficult to centrally control and terminate an employees' facility access. The new Centralized Keycard access system has provided the capability to activate and deactivate an employee's access to buildings or areas within a building, both locally and centrally. The Centralized Keycard Access System allowed the Department to integrate new employee badges and keycards into a single ID card access solution. Additionally, the Centralized Keycard System reduces power consumption by as much as 75% compared to the legacy keycard systems, which contributes to the County's environmental sustainability efforts.					
13	BENEFITS TO THE COUNTY					
	(1) (2) ACTUAL/ESTIMATED ACTUAL/ESTIMA ANNUAL COST ANNUAL COST SA		(1) + (2) + (3) = TOTAL ANNUAL ACTUAL/ESTIMATED	SERVICE ENHANCEMENT PROJECT		
	AVOIDANCE \$	\$	BENEFIT \$			
		ANNUAL = 12 MONTHS ONLY		<u> </u>		
	SUBMITTING DEPARTMENT NAME AND COMPLETE AND Department of Public Social Services 12860 Crossroads Parkway South City of Industry, CA 91764	DDRESS	TELEPHONE NUMBER (562) 908-8600			
•	PROGRAM MANAGER'S NAME		TELEPHONE NUMBER			
	Michael Sylvester		(562) 908-8327			
	iviichael Sylvestel		EMAIL MichaelSylvester@	dpss.lacounty.gov		
	PRODUCTIVITY MANAGER'S NAME AND SIGNATURE (PLEASE CALL (213) 893-0322 IF YOU DO NOT KNOW YOUR PRODUCTIVITY MANAGER	DATE R'S NAME)	TELEPHONE NUMBER (562) 908-6330			
	Kimberly White Original on File		EMAIL KimberlyWhite@d	pss.lacounty.gov		
	DEPARTMENT HEAD'S NAME AND SIGNATURE	DATE	TELEPHONE NUMBER			
	Sheryl L. Spiller Original on File		(562) 908-8600			

2017 APPLICATION

Title of Project (Limited to 50 characters, including spaces, using Arial 12 point font):

NAME OF PROJECT: CENTRALIZED KEYCARD ACCESS SYSTEM

1st FACT SHEET - LIMITED UP TO 3 PAGES ONLY: Describe the challenge(s), solution(s), and benefit(s) of the project. What quality and/or productivity-related outcome(s) has the project achieved? Provide measures of success. Use Arial 12 point font.

Challenge:

The Department of Public Social Services (DPSS) had legacy keycard systems that were decentralized and managed at the local office level, thereby making it extremely difficult to control centrally and or to terminate building access. The legacy keycard systems had two separate systems for issuing employee IDs, and for issuing and terminating employees' access to over 65 Departmental facilities across the County.

Solution:

In collaboration with the Internal Services Department, DPSS implemented the Centralized Keycard Access System at 16 offices that uses the latest technology in ID badging and allows for the use of a single, secure facility access credential. The system uses the HID brand security ID badges that contain an extra layer of encryption for identity protection and access control. The employee ID badges contain a machine-readable code consisting of an array of black and white squares, otherwise known as a Quick Response code, to be used by various mobile applications to capture employee information for quick identification. The Centralized Keycard Access System allows employees to use a single card for identification and building access, thereby eliminating the need for them to carry multiple building/facility access cards. A total of 4,227 employees now have centralized key card access.

Benefits:

The Centralized Keycard Access System enables DPSS to integrate new employee badges and building access keycards into a single ID card access solution. The system allows DPSS to mitigate the security risks associated with the management of separate ID badges and building keycard access systems by combining them into one strong authentication/credential management system. The Centralized Keycard Access System provides the capability to activate and deactivate an employee's access to buildings or areas within a building both locally and centrally, and to generate detailed facility access control logs and reports for security personnel. These features allow for increased infrastructure efficiency, accountability, and leverage technology. As an added bonus, the new keycard system reduces power consumption by as much as 75% compared to the legacy system, which contributes

2017 APPLICATION

Title of Project (Limited to 50 characters, including spaces, using Arial 12 point font):

NAME OF PROJECT: CENTRALIZED KEYCARD ACCESS SYSTEM

<u>Linkage to the County Strategic Plan – 1 page only</u>. Which County Strategic Plan goal(s) does this project address? Explain how. Use Arial 12 point font.

The Centralized Keycard Access System project addresses the following County Strategic Plan Strategies:

- II.3 Make Environmental Sustainability Our Daily Reality The Centralized Keycard Access System is a responsible project that promotes sustainable behavior in the daily operations of DPSS by reducing power consumption by as much as 75% compared to the legacy system.
- III.3 Pursue Operational Effectiveness, Fiscal Responsibility, and Accountability - By consolidating the employee ID and facility access into one card and one access system, DPSS is pursuing operational effectiveness and maximizing the use of County assets and the latest technology in ID badging and facility access to provide a more physically secured environment for both employees and participant/customer information.

2017 APPLICATION

Title of Project (Limited to 50 characters, including spaces, using Arial 12 point font):

NAME OF PROJECT: CENTRALIZED KEYCARD ACCESS SYSTEM

COST AVOIDANCE, COST SAVINGS, AND REVENUE GENERATED (ESTIMATED BENEFITS TO THE COUNTY): If you are claiming cost benefits, include a calculation on this page. Please indicate whether these benefits apply in total or on a per unit basis, e.g., per capita, per transaction, per case, etc. You must include an explanation of the County cost savings, cost avoidance or new revenue that matches the numbers in the box. Remember to keep your supporting documentation. Use Arial 12 point font

Cost Avoidance: Costs that are eliminated or not incurred as a result of program outcomes. Please indicate whether these are costs to the County or to other entities.

Cost Savings: A reduction or lessening of expenditures as a result of program outcomes. Please indicate whether these were expenditures by the County or by other entities.

Revenue: Increases in existing revenue streams or new revenue sources to the County as a result of program outcomes.

(1)	(2)	(3)	(1) + (2) + (3)	SERVICE
ACTUAL/ESTIMATED	ACTUAL/ESTIMATED	ACTUAL/ESTIMATED	TOTAL ANNUAL	ENHANCEMENT
ANNUAL COST	ANNUAL COST SAVINGS	ANNUAL REVENUE	ACTUAL/ESTIMATED	PROJECT
AVOIDANCE			BENEFIT	
\$	\$	\$	\$	\boxtimes

ANNUAL = 12 MONTHS ONLY

2017 APPLICATION

Title of Project (Limited to 50 characters, including spaces, using Arial 12 point font):

NAME OF PROJECT: CENTRALIZED KEYCARD ACCESS SYSTEM

FOR COLLABORATING DEPARTMENTS ONLY

(For single department submissions, do not include this page)

DEPARTMENT No. 2 NAME AND COMPLETE ADDRESS						
INTERNAL SERVICES DEPARTMENT, 1100 NORTH EASTERN AVE, LOS ANGELES, CA 90063						
PRODUCTIVITY MANAGER'S NAME AND SIGNATURE	DEPARTMENT HEAD'S NAME AND SIGNATURE					
Original on File	SCOTT MINNIX Scott Minnix					
LETICIA PEREZ						
EMAIL: LPerez@isd.lacounty.gov	EMAIL: SMINNIX@ISD.LACOUNTY.GOV					
DEPARTMENT No. 3 NAME AND COMPLETE ADDRESS						
PRODUCTIVITY MANAGER'S NAME AND SIGNATURE	DEPARTMENT HEAD'S NAME AND SIGNATURE					
EMAIL:	EMAIL:					
DEPARTMENT NO. 4 NAME AND COMPLETE ADDRESS						
DEPARTMENT NO. 4 NAME AND COMPLETE ADDRESS						
PRODUCTIVITY MANAGER'S NAME AND SIGNATURE	DEPARTMENT HEAD'S NAME AND SIGNATURE					
PRODUCTIVITY MANAGER S NAME AND SIGNATURE	DEPARTMENT HEAD S NAME AND SIGNATURE					
EMAIL:	EMAIL:					
DEPARTMENT No. 5 NAME AND COMPLETE ADDRESS						
	T =					
PRODUCTIVITY MANAGER'S NAME AND SIGNATURE	DEPARTMENT HEAD'S NAME AND SIGNATURE					
EMAIL:	EMAIL:					
EMAIL.	EMAIL.					
DEPARTMENT NO. 6 NAME AND COMPLETE ADDRESS						
PRODUCTIVITY MANAGER'S NAME AND SIGNATURE	DEPARTMENT HEAD'S NAME AND SIGNATURE					
EMAIL:	EMAIL:					
DEPARTMENT NO. 7 NAME AND COMPLETE ADDRESS						
DEPARTMENT NO. / NAME AND COMPLETE ADDRESS						
PRODUCTIVITY MANAGER'S NAME AND SIGNATURE	DEPARTMENT HEAD'S NAME AND SIGNATURE					
EMAIL:	EMAIL:					