



**United States Department of
Health & Human Services**
HHS Records Management
Program (RMP)

Annual Evaluation
January – December 2009

Prepared for:

Secretary of the Department of Health and Human Services, Assistant Secretary for Administration (ASA), and the HHS Office of the Chief Information Officer (OCIO)

Prepared by:

HHS Records Officer and the HHS Records Management Council (RMC) as of
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Executive Summary

To carry out the responsibilities specified in 44 U.S.C. 3101 and 3102, and further delineated in 36 C.F.R. Subchapter B, Federal agencies must, in addition to establishing and maintaining a records management program, and complying with related Federal regulations,

- Periodically evaluate its records management programs in relation to records creation and record keeping requirements, maintenance and use of records, and records disposition. These evaluations shall include periodic monitoring of staff determinations of the record status of documentary materials in all media, and implementation of the decisions. The evaluations should determine compliance with National Archives and Records Administration (NARA) regulations in this subchapter, including requirements for storage of agency records and records storage facilities in 36 C.F.R. Part 1234, and assess the effectiveness of an agency's records management program.

The Department of Health and Human Services (HHS) Records Management Program (RMP) is located in the HHS Office of the Chief Information Officer (HHS CIO). This is the third annual HHS evaluation of the Department's RMP. This assessment is based on self-reports by the HHS Operating Divisions (OPDIVs). For purposes of the HHS RMP, the HHS Office of the Secretary (OS) and its Staff Divisions are considered to be an operating division.

In 2009, HHS RMP high-level accomplishments included:

- 97% compliance with E-Government Act of 2002 – development and submission of HHS E-Systems inventory and E-Systems records schedules
- 100% compliance with the 1st Annual joint NARA and Government Accountability Office (GAO) evaluation of all Federal records management programs
- Establishment of new and revisions to existing policies and processes
- Completion of high-level RM Program analysis, models, and transition plan
- RM language in HHS Continuity of Operations (COOP) Policy and Procedures
- 100% of the OPDIVs reported to NARA in accordance with 36 CFR 1234, NARA Facilities Reporting Requirements when using non-NARA records storage facilities, and are negotiating with NARA on the certification of facilities

These accomplishments and others are described in greater detail in Section 1 of this report.

To have an effective and efficient HHS Records Management Program, there are HHS stovepipes, gaps, and procedures that will need to be bridged in such areas as:

- RM policy and RM operations
- IT policy and IT operations, including back-up procedures, security, enterprise architecture, workflow and document management, and system lifecycle management
- Web content owners and Website managers
- FOIA – records identification and hold procedures
- Privacy
- Legal hold implementation and maintenance
- Vital records identification and management
- Incident response and COOP, and



- An agency-wide framework of records management staff

There is a need to harmonize and bring rigor to information management across HHS and to incorporate records management policies and procedures, in accordance with Federal laws and requirements, including but not limited to the Federal Records Act, Federal Information Security Management Act (FISMA), E-Government Act of 2002, Privacy Act, and the Freedom of Information Act (FOIA). Additional Federal records management requirements are listed in Appendix A.



1 HHS Department Records Management Program Overview

1.1 Background

The HHS Department Records Officer (RO) position is located in the Office of the Chief Information Officer (OCIO), Office of Resources Management (ORM), within the recently created Office of the Assistant Secretary for Administration (ASA). The RO develops and implements policies, procedures, and training for HHS information management, ensuring compliance with Federal mandates promulgated by the National Archives and Records Administration (NARA), General Services Administration (GSA), Office of Management and Budget (OMB), and related oversight agencies. The Department RO is supported by the HHS Records Management Council (RMC) and by the HHS RM Integrated Project Team (IPT).

In an effort to ensure Department standardization and compliance, the HHS Records Management Council (RMC) was established by Charter on August 21, 2007. Consisting of the records officers of each of the HHS Operating Divisions (OPDIVS), the goal of the RMC is to continually seek to improve the Records Management Program (RMP) through self assessment and program improvement action plans.

In addition, in the fall of 2008, the HHS Office of the Chief Information Officer (HHS OCIO), led by the CIO's Director of the Office of Resources Management (ORM) established the HHS RM Integrated Project Team (IPT). Consisting of representatives from the HHS CIO Council and the HHS RMP Council, the objectives of the RM IPT are:

- meet the September 2009 NARA and OMB electronic records scheduling requirements
- document the current HHS records management business processes
- identify and analyze gaps in records management
- develop target records management business processes, and
- through a transition plan, identify the priorities for the HHS RMP.

The draft HHS RM Transition Plan was completed in November 2009 and was submitted to the RMP Council and RM IPT for review and comment. The plan is a step in the HHS Records Management Segment development, encompassing records management functions and technology adopted by HHS OPDIVs, including the Office of the Secretary (OS), in their current and future (envisioned) state.

The Transition Plan prioritizes the gaps as described in the HHS Gap Analysis, and provides for strategic improvement opportunities and recommendations on how to address them. It also provides a sequencing plan that indicates the timeline to address them. Each gap is described from the standpoint of a business overview, recommendations for business transformation, and a transition sequence plan.

Additional accomplishments:

1. Government-wide Legal Mandates
 - a. Joint Government Accountability Office (GAO) and National Archives and Records Administration (NARA) evaluation of all Federal records management programs – Out of the 15 cabinet-level Departments, HHS was one that provided a 100% response (October 2009)



- b. E-Government Act of 2002 – per the OMB and NARA deadline of September 30, 2009:
 - o Inventoried HHS systems that contain Federal records – 1469 systems
 - o Trained OPDIV records officers, CIO officials, and managers in April 2009 and July 2009 on how to write electronic records disposition schedules for submission to NARA
 - o Scheduled with NARA 97% of the 1469 HHS systems
 - o Submitted project plans to NARA for the remaining 3% of HHS systems
 - c. Completed in accordance with the NARA Records Facilities Reporting Requirements (36 C.F.R. 1234).
2. HHS Records Management Policy and Processes
- a. Incorporated RM requirements in new and revised HHS CIO Policies
 - b. Held quarterly HHS Records Management Council meetings to work on the completion of the E-Government Act of 2002 requirements
 - c. Held HHS Records Management Integrated Project Team meetings:
 - 1) Analyzed current HHS RM business processes and through the *Gap Analysis Report*, identified gaps in such areas as litigation holds, vital records, continuity of operations planning, and electronic records management
 - 2) Developed a *Records Management Transition Plan* to map current RM processes to future ‘to be’ processes, thereby closing the identified gaps
 - d. Incorporated RM requirements in the HHS Continuity of Operations (COOP) policy of the Assistant Secretary for Preparedness and Response (ASPR)
 - e. Established RM as a critical element in FY 2009 SES performance plans
 - f. Drafted and received HHS OGC approval of HHS Litigation Hold Policy; currently under review by HHS Office of Inspector General (December 2009)
 - g. Created on August 20, 2009 in the HHS Office of the Secretary the STAFFDIV Records Management Council, consisting of the records managers and liaisons of the offices of the Secretary
3. Evaluations
- a. For the past three years, completed per the Federal Records Act, an annual Department-wide Records Management Evaluation
 - b. Identified RM deficiencies in the Office of the Secretary (OS) regarding valid records disposal authorities in the HHS OS RM Handbook
4. Training
- a. Conducted RM training in bi-weekly HHS New Employee Orientation sessions
 - b. HHS Information Technology (IT) Workforce Series session on discovery of records: speakers were Jason Baron, NARA’s Director of Litigation, a well-known Federal attorney, an expert in records/information management, including electronic records preservation, litigation holds, and the Federal Rules of Civil Procedure; Laurence Brewer, NARA’s Director of Life Cycle Management, responsible for overseeing the records management activities of the Federal government in accordance with policies and procedures established in Federal regulations, by OMB, and in the studies of GAO; and David Cade, HHS General Counsel. Over 100 HHS staff attended in person and via webcast. The session of taped, posted to the HHS intranet, and distributed to several offices.



- c. Conducted numerous RM training sessions to senior-level officials and their staffs, including the Food and Drug Administration agency head and the staff of the Secretary.
- d. Created a *Records Management for Everyone* certificate program within the former OS office of the Assistant Secretary for Resources and Technology (ASRT) and encouraged the OPDIVs and STAFFDIVs to do the same so as to meet the SES PMAP element for information management
- e. In the former HHS OS Office of the Secretary Executive Officer (OSEO), two employees attended NARA records management training and received NARA certification; two OCIO employees started the NARA certification program
- f. Worked with HHS University on making the *Records Management for Everyone* course 508-compliant and started testing the on-line training.

1.2 Background – HHS Records Ownership and Storage

According to 36 CFR § 1220.34(j), agencies must conduct formal periodic evaluations to measure the effectiveness of records management programs and practices, and to ensure that they comply with NARA regulations. The HHS assessment is prepared by the Department Records Officer, with review, comment and concurrence by the members of the HHS RMC. The report is due on January 31st of each year and reflects the status of the program as of December 31st of the previous calendar year.

NARA assigns a numerical identifier, known as a ‘record group number’ to the records of each major government entity. Within a record group, the records of a government agency are organized into series of records. Some government agencies have more than one record group number assigned by NARA, depending on past administrative or functional organization of the Government. Each series, both in paper and electronic formats, is a set of documents arranged according to the creating office’s filing system or otherwise kept together by the agency’s creating offices because the records:

- relate to a particular subject or function,
- result from the same activity,
- document a specific kind of transaction,
- take a particular physical form, or
- have some other relationship arising out of their creation, receipt, or use.

The record group number is associated with an agency’s series of records throughout the lifecycle of the records, from creation to maintenance to disposition. Below are the names of the HHS OPDIV Records Officers, the name of each OPDIV, and the assigned record group numbers.

<i>Records Officer Name</i>	<i>Operating Division</i>	<i>RG</i>	<i>Work Centers</i>
Yvonne Wilson	Department of Health and Human Services		
Douglas Johnson	Administration for Children and Families (ACF)	292, 102, 363	15



Harry Posman	Administration on Aging (AOA)	439	3
Kathleen Melendez	Agency for Healthcare Research and Quality (AHRQ)	510, 90	9
Mary Wilson	Centers for Disease Control & Prevention (CDC)	442	17
Vickie Robey	Centers for Medicare & Medicaid Services (CMS)	440	28
Seung Ja Sinatra	Food and Drug Administration (FDA)	88	9
Angela Tuscani	Health Resources Services Administration (HRSA)	512, 90,102	21
Kelvin Vandever	Indian Health Service (IHS)	513, 90	23
Katy Perry	National Institute of Health (NIH)	433	27
Elaine Pankey	Office of Secretary (OS) – all OS Staff Divisions	468, 235, 514, 90, 998*	17
Lynne Klein	Substance Abuse & Mental Health Services Administration (SAMSA)	511, 90	7

Table 1 HHS OPDIV Records Officers

**This is a temporary record group number assigned by the National Archives and Records Administration (NARA). The assignment was made at the request of the Department as a result of a re-organization that was not fully implemented. Records Management duties are performed by the PSC Records Manager with the assistance of the OS Records Officer*

Each HHS OPDIV stores Federal records in generally four locations: in HHS offices and central file areas, HHS storage rooms, facilities owned and operated by private vendors, and the Federal Records Centers of the National Archives and Records Administration. Records stored in these locations remain in the legal custody of HHS until such time that disposition of the records is authorized. The length of retention and disposition of Federal records is recommended by Federal agencies and legal approval is granted by the Archivist of the United States. The Archivist is the agency head of the National Archives and Records Administration (NARA), an independent agency that answers directly to Congress. The laws and regulations that Federal agencies must follow to be in compliance with NARA, including but not limited to records storage requirements and records disposition requirements, are listed in appendix A of this document.

1.3 Scope

This assessment covers the period January 2009 to December 2009 and describes the records management activities of each HHS OPDIV. Each OPDIV section includes the OPDIV and records officer names, descriptions of agency business functions and records officer duties, records management accomplishments in calendar year 2009, and a listing of future initiatives.



2 HHS Records Officer Self-Assessments

2.1 Administration for Children and Families (ACF)

Records Officer: Douglas Johnson

2.1.1 ACF Business Description:

The Administration for Children and Families (ACF) is responsible for Federal programs that promote the economic and social well-being of families, children, individuals, and communities. ACF programs aim to achieve the following:

- families and individuals empowered to increase their own economic independence and productivity;
- strong, healthy, supportive communities that have a positive impact on the quality of life and the development of children;
- partnerships with individuals, front-line service providers, communities, American Indian tribes, Native communities, states, and Congress that enable solutions which transcend traditional agency boundaries;
- services planned, reformed, and integrated to improve needed access; and a strong commitment to working with people with developmental disabilities, refugees, and migrants to address their needs, strengths, and abilities.

2.1.2 ACF Records Officer Position:

One full-time equivalent (FTE) has been assigned the records officer duties as an additional duty. There is not a dedicated FTE to the records officer position. One contractor, with additional duties, supports the program. Below is an organization outline showing 15 separate and unique work centers generating records:

- Office of Deputy Assistant Secretary for Administration
- President's Committee for People with Intellectual Disabilities
- Office of Planning, Research and Evaluation
- Office of Public Affairs
- Office of Family Assistance
- Office of Child Support Enforcement
- Office of Refugee Resettlement
- Administration on Developmental Disabilities
- Administration for Native Americans
- Office of Community Services
- Office of Legislative Affairs & Budget
- Administration on Children, Youth, and Families
- Office of Regional Operations
- Office of Head Start
- Child Care Bureau families and individuals empowered

2.1.3 ACF Records Management Accomplishments in 2009:

File Plan Validation:



- Reviewed ACF records schedules and determined that notebook on file warranted disposition validation (project was pushed back due to electronic systems schedules deliverable)
- Requested program offices and regions take an inventory of their records and complete file plan for compilation of updated ACF records schedules (project was pushed back due to electronic systems schedules deliverable)

Records Disposition:

- Attended ARCIS sessions and webinar
- Conducted ARCIS overview for ACF records liaisons. Currently the records manager and one liaison have access to the ARCIS module
- Conducted assessments of records boxes approved for disposition and held in ACF in-house storage room
- Separated new transfers from re-files
- Confirmed boxes associated with four approved SF135's were ready for immediate disposition
 - Received concurrence from referring program office that records could be destroyed
 - Records shredded
- Arranged for pickup of 177 boxes of records

Electronic Records Schedules:

- Attended sessions held for the electronic systems schedules deliverable
- Elicited the assistance of the ACF CIO to contact program offices and provide guidance on ACF electronic systems
- Met with program offices to complete draft schedules under the direction of the HHS Records Officer and NARA Appraisal Archivist
- To date, the following electronic systems have been submitted and approval is pending NARA:
 - ACF Internet
 - ACF Intranet
 - Early Childhood Learning and Knowledge Center (ECKLC - website)
 - Grants Administration Tracking and Evaluation System (GATES)
 - Office of Head Start Monitoring System (OHSMS)
 - Child and Family Services Reviews (CFSR)
 - Trafficking Victims Tracking System (TVTS)

Assessments:

- Completed and submitted the 1st Annual NARA and GAO Mandatory Self-Assessment

2.1.4 ACF Future Records Management Initiatives:

- Complete and submit remaining electronic systems schedules
- Resume dialog with program offices to evaluate and update current record schedules
- Work to make ACF records schedules intranet-accessible
- Continue to work with the Department to improve the ACF records program



2.2 Administration on Aging (AoA)

Records Officer: Harry Posman

2.2.1 AoA Business Description:

AoA is the Federal focal point and advocacy agency for older persons and their concerns. In this role, AoA works to heighten awareness among other Federal agencies, organizations, groups, and the public about the valuable contributions that older persons make to the Nation and alerts them to the needs of vulnerable older persons. AoA does this by serving as the Federal agency responsible for advancing the concerns and interests of older persons and their caregivers, and by working with and through the Aging Services Network of state and local public and private organizations, to promote the development of comprehensive and coordinated systems of home and community-based long-term care that are responsive to the needs and preferences of older persons and their family caregivers.

2.2.2 AoA Records Officer Position:

The records management function is located in the AoA Office of the Executive Secretariat. One FTE has been assigned the records officer duties as an additional duty. This employee has one FTE (again as an additional duty) to assist in the program. Below is an organization chart showing three centers with 16 offices generating records.

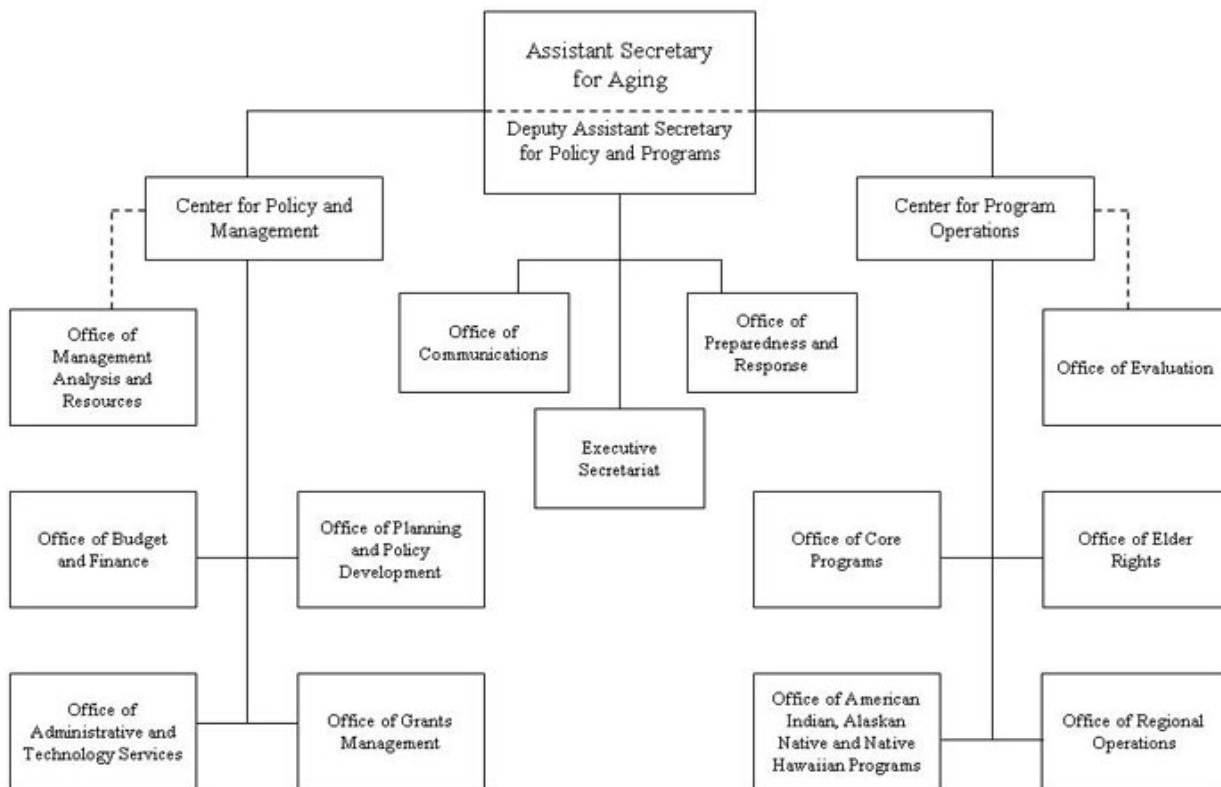


Figure 1 AoA organization chart

2.2.3 AoA Records Management Accomplishments in 2009:

- Inventory of all electronic information systems



- Developed and transmitted to NARA in June of one disposition schedule for seven electronic information systems and another records schedule for the AoA intra- and internet pages.
- To cover organizational changes and provide for media neutrality the following records schedules were submitted to NARA:
 - The Immediate Office of the Assistant Secretary
 - The Office of the Executive Secretariat
 - The Office of Communications
 - The Office of Preparedness and Response
 - The Center for Policy and Management
- Arranged for NARA records analysis (appraisal) visits and updated records schedules per NARA's instructions
- Reported all updates, bulletins and notices regarding records management to the appropriate members of Senior Management within the Agency
- Reminded senior officials of the need to train new staff and provide refreshers, including on unauthorized removal of records. Staffs have been provided a decision tree to determine, for hard copy as well as emails, Federal record status. The *AoA New Employee Orientation Manual* includes brief descriptions of Federal records, employee records responsibilities, and guidance related to removal of records upon departure from the agency. An update to the Manual includes procedures for sign-off by the Records Officer upon employee departure from the agency.
- Completed and submitted the 1st Annual NARA and GAO Mandatory Self-Assessment.

2.2.4 AoA Future Records Management Initiatives:

- Complete revision of schedules under review by NARA
- Continue with the transfer of permanent (historical) records to the National Archives.

2.3 Agency for Healthcare Research and Quality (AHRQ)

Records Officer: Kathleen Melendez

2.3.1 AHRQ Business Description:

AHRQ is the health services research arm of the U.S. Department of Health and Human Services (HHS), complementing the biomedical research mission of its sister agency, the National Institutes of Health. AHRQ is home to research centers that specialize in major areas of health care research, such as:

- Quality improvement and patient safety
- Outcomes and effectiveness of care
- Clinical practice and technology assessment
- Health care organization and delivery systems
- Primary care (including preventive services)
- Health care costs and sources of payment.

AHRQ serves as a major source of funding and technical assistance for health services research and research training at leading U.S. universities and other institutions. The agency also serves as a science partner, working with the public and private sectors to build a knowledge base for health and health care and to translate this knowledge into everyday practice and policymaking.



2.3.2 AHRQ Records Officer Position:

One FTE has been assigned the records officer duties as an additional duty. There is not a dedicated FTE to the records officer position. Below is list of the nine separate and unique work centers generating records.

- Center for Delivery, Organization, and Markets (CDOM)
- Center for Financing, Access and Cost Trends (CFACT)
- Center for Outcomes and Evidence (COE)
- Center for Primary Care, Prevention, and Clinical Partnerships (CP3)
- Center for Quality Improvement and Patient Safety (CQuIPS)
- Office of the Director (OD)
- Office of Communications and Knowledge Transfer (OCKT)
- Office of Extramural Research, Education and Priority Populations (OEREP)
- Office of Performance Accountability, Resources, and Technology (OPART)

2.3.3 AHRQ Records Management Accomplishments in 2009:

- Successfully completed the E-Gov e-records inventory and scheduling project of September 2009, and
- Completed and submitted the 1st Annual NARA and GAO Mandatory Self-Assessment

2.3.4 AHRQ Future Records Management Initiatives:

- Create a position description for an AHRQ records manager
- Involve upper management in the AHRQ records management program to enhance its level of importance
- Work with NARA appraisal archivist to update AHRQ's records disposition schedules based on new files plan
- Schedule in-house records management awareness training for all staff especially upper management
- Ensure AHRQ's compliance with Federal and HHS guidelines for records management
- Ensure that records management issues are addressed
- Involve IT in AHRQ records management program and in creating an electronic records program
- Incorporate records management into COOP Plan
- Establish vital records program
- Incorporate records program into new employee orientation and exit interview processes

2.4 Center for Disease Control and Prevention (CDC)

Records Officer: Mary K. Wilson

2.4.1 CDC Business Description:

The CDC uses collaboration to create the expertise, information, and tools that people and communities need to protect their health – through health promotion, prevention of disease, injury and disability, and preparedness for new health threats. CDC seeks to accomplish its mission by working with partners throughout the nation and the world to:



- monitor health
- detect and investigate health problems
- conduct research to enhance prevention
- develop and advocate sound public health policies
- implement prevention strategies
- promote healthy behaviors
- foster safe and healthful environments, and
- provide leadership and training.

Each of CDC's component organizations undertakes these activities in conducting its specific programs. The steps needed to accomplish this mission are also based on scientific excellence, requiring well-trained public health practitioners and leaders dedicated to high standards of quality and ethical practice.

2.4.2 CDC Records Officer Position:

In January 2009, one FTE was hired and assigned the records officer duties and two FTEs have joined the records management team. In addition, there are forty-two senior records liaisons assigned throughout CDC/ATSDR. The records officer supports the agency for Toxic Substances and Disease Registry (ATSDR). The mission of the ATSDR is to serve the public by using the best science, taking responsive public health actions, and providing trusted health information to prevent harmful exposures and disease related to toxic substances.

2.4.3 CDC Records Management Accomplishments in 2009:

- Successfully completed the E-Government electronic records scheduling initiative, within the specified time frame established by NARA;
- Completed and submitted the 1st Annual NARA and GAO Mandatory Self-Assessment
- Created webpage devoted to the E-Gov Initiative;
- Provided extensive training to business and technical stewards, senior records liaisons and management officials;
- Developed and implemented an automated inventory and scheduling application;
- Developed a scientific big bucket records control schedule whose conceptual arrangement was approved by NARA;
- Developed, designed and disseminated major training initiatives throughout CDC/ATSDR:
 - Federal Records Management training for all CDC/ATSDR employees regardless of their status (full or part time, new, contractors, interns) on records lifecycle and good records management practices in accordance with HHS policy and requirements
 - File plan training was provided to senior records liaisons through classroom setting and online tutorial
 - Budget training for offsite storage was provided in collaboration with NARA Southeast Region, Federal Records Center
- Developed and disseminated to senior records liaisons an assessment tool to determine the effectiveness of records management at CDC/ATSDR in accordance with NARA and HHS requirements; and
- Redesigned records management webpage to provide easier access to records management resources, tutorials, and other related topics.



2.4.4 CDC Future Records Management Initiatives:

- Enhance current records management database to include the full lifecycle management of records
- Develop and implement mandatory annual refresher training on records management for all CDC/ATSDR employees regardless of employment status.
- Develop and implement a vital records program webpage and training tutorials for senior records liaisons, IT, management officials and CDC/ATSDR employees.
- Consolidate records management standard operating procedures (SOPs) and develop training tutorials for each SOP.
- Continue to identify electronic systems for inventory and scheduling.
- Identify “hotspots” based on the assessment tool results and develop remedial action for them

2.5 Centers for Medicare & Medicaid (CMS)

Records Officer: Vickie Robey

2.5.1 CMS Business Description:

The mission of the Centers for Medicare & Medicaid Services (CMS) is to ensure effective, up-to-date health care coverage and to promote quality care for beneficiaries. CMS directs the planning, coordination and implementation of the programs under Titles XI, XVIII and XIX of the Social Security Act (Medicare, Medicaid, Prescription Drug, Children’s Health Insurance Program, etc.). CMS is composed of 32 Centers/Offices/Consortia (18 Headquarters, 4 Consortia, 10 Regional Offices). Organizational list of CMS entities:

- Office of the Administrator, Deputy Administrator & Chief Operating Officer (OA)
- Center for Drug and Health Plan Choice (CPC)
- Center for Medicaid & State Operations (CMSO)
- Center for Medicare Management (CMM)
- Office of Acquisitions and Grants Management (OAGM)
- Office of Beneficiary Information Services (OBIS)
- Office of the Actuary
- Office of Clinical Standards & Quality (OCSQ)
- Office of E-Health Standards and Services (OESS)
- Office of Equal Opportunity and Civil Rights (OEOCR)
- Office of External Affairs (OEA)
- Office of Financial Management (OFM)
- Office of Information Services (OIS)
- Office of Legislation (OL)
- Office of Operations Management (OOM)
- Office of Policy (OP)
- Office of Research, Development and Information (ORDI)
- Office of Strategic Operations and Regulatory Affairs (OSORA)
- Consortium for Financial Management and FFS Operations (CFMFFSO)
- Consortium for Medicaid and Children’s Health Operations (CMCHO)
- Consortium for Medicare Health Plans Operations (CMHPO)



- Consortium for Quality Improvement and S&C Operations (CQISCO)
- 10 Regional Offices (Atlanta, Boston, Chicago, Dallas, Denver, Kansas City, New York, Philadelphia, San Francisco, Seattle). Within each RO there are four functional areas (CFMFFSO, CMCHO, CMHPO, CQISCO) that report to their respective Consortia.

2.5.2 CMS Records Officer Position:

The function of the CMS records officer resides within the Office of Strategic Operations and Regulatory Affairs (OSORA), Issuances and Records Management Group (IRMG). The records officer provides management and oversight of records policy and compliance, as well as guidance and outreach to all CMS Offices and to CMS Medicare partners/contractors. The records program is currently managed by two full-time equivalents (FTEs) and one alternate, where one FTE is the records officer, the second FTE is the vital records liaison, and the alternate serves as a backup to the CMS records officer in addition to performing full-time duties for another function with IRMG.

CMS is assigned NARA Record Group Number (440), to be used for scheduling records and for the transfer/storage/servicing of CMS records at the Federal Records Centers (FRC).

2.5.3 CMS Records Management Accomplishments in 2009:

Records management staffing

- Articulated the need to senior leadership of the importance of identifying and appointing a Records Liaison Officer (RLO) and Vital Records Liaison (VRL) – Each Center/Office/Consortia has appointed a RLO as well as a VRL
- Trained and briefed newly appointed RLOs and VRLs on their records management responsibilities
- Conducted quarterly meetings with RLOs and VRLs to address current records management tasks/activities and offer question and answer sessions
- Mentored newly appointed Records personnel

Records Management Training:

- Initiated a campaign to educate all employees on records management responsibilities and the importance to maintain awareness of what is considered a Federal record (established mandatory annual on-line records management training for all CMS employees)
- Modified the guidelines and briefed outgoing employees on the requirements and approval process to remove records when an individual departs the agency
- Created procedures for electronic recordkeeping and communicated policy via e-mail to remind all employees about records management information. This information can assist them in managing their records management function and is maintained on the agency webpage.
- Conducted formal and informal (one-on-one) records management training sessions for CMS Centers/Offices as well as sessions for individual employees

Records Schedules and Imaging Projects:

- Developed records schedules that are currently with OGC and NARA for review/final approval (i.e., Equal Employment Opportunity Case Files, Medicare Health Plan Organizations, and the Administrative Simplification Enforcement Tool)



- Received NARA disposition authority for two new series of Clinical Laboratory Improvement Amendments records and as a result updated the CMS Records Schedule
- Modified an Interagency Agreement with the NARA Federal Record Center (FRC) in Fort Worth, TX, to add document conversion services to an existing contract. Based on the estimate the component received from GSA pricing, this agreement to convert paper vital records to electronic medium resulted in a cost savings of \$800,000.
- Generated another agreement for a second imaging project with Fort Worth FRC to image Freedom of Information Act (FOIA) active case files, project began in September 2009
- Identified all electronic records systems and provided the name and descriptions to NARA (17 e-Record Schedules which covers the Agency's 292 electronic information systems)

Special Projects:

- CMS is currently conducting a final review of the business process model & documentation for an agency-wide electronic recordkeeping system. These business process models continue to be used as a guide by the Department to develop a Department-wide recordkeeping system.
- Working with various CMS offices and Medicare contractors to obtain NARA-compliant certifications for commercial storage facilities housing Federal records.
- Mapped out the process and educated the Office of the General Counsel on the policy and procedures for the management of litigation request (discovery, data request and FOIA)
- Provided records management briefings to senior leaders at various leadership meetings
- Collaborated with the Office of Beneficiary Information Services to develop a set of standards and policy for information residing on the agency web page
- Coordinated with all components in CMS to ensure an inventory of their official records was conducted, which resulted in identifying record holdings and assisted in the creation of their specific component's file plans
- Completed and submitted the 1st Annual NARA and GAO mandatory self-assessment.

2.5.4 Vital Records Program Accomplishments:

- CMS implemented a Vital Records Program (VRP) in 2008. This program is designed to provide the agency with the information it needs to meet operational responsibilities under other than normal operating conditions, to resume normal business afterwards and to carry out the agency's essential legal and financial functions. The method of protection for vital records within CMS is the dispersal method.
- Vital records are maintained in both electronic and paper medium and were dispersed to four off-site locations. Vital records are cycled quarterly using a secured shared drive for each Center/Office/Regional Office to update emergency operating and right and interest records.
- Ensured all newly appointed VRLs are trained within 90 days of appointment. To date, 100% of the VRLs have completed training.
- The VRP is evaluated during the annual COOP exercises and a risk assessment was conducted by an outside agency that specialized in emergency preparedness
- Developed a records recovery plan to enable the continuation of essential agency functions by restoring or recovering vital records, systems or databases.



- Ensured the VRP and the records recovery plan were implemented and updated in accordance with the requirements addressed in the Homeland Security Presidential Directive-20, 36 Code of Federal Regulations, and Federal Continuity Directives 1 and 2

2.5.5 CMS Future Records Management Initiatives:

- Develop a web-based records management manual that addresses all of records management policy and procedures that are unique to the Department and CMS
- Finalize the records management business process models and documentation for a reliable and usable agency-wide recordkeeping system
- Continue to work with the components to identify and schedule new program areas and new records and electronic systems
- Develop a training program to include all records management venues
- Work with Enterprise Architecture to include Records Management in their systems development life cycle framework
- Coordinate with management to create an Information Management Division that encompasses all aspects of the records program (i.e., electronic records, vital records and day-to-day activities)
- Establish a records recovery team and have them trained on the records recovery program and acquire the materials needed for the recovery of records
- Continue to develop program informational materials for management and staff

2.6 Food and Drug Administration (FDA)

Records Officer: Seung Ja Sinatra

2.6.1 FDA Business Description:

The FDA is responsible for protecting the public health by assuring the safety, efficacy, and security of human and veterinary drugs, biological products, medical devices, our nation's food supply, cosmetics, products that emit radiation, and tobacco products. The FDA is also responsible for advancing the public health by helping to speed innovations that make medicines and foods more effective, safer, and more affordable; and helping the public get the accurate, science-based information they need to use medicines and foods to improve their health.

2.6.2 FDA Records Officer Position:

One FTE has been assigned Record Officer duties. An assistant records liaison officer (ARLO) has been assigned to records management duties at a Center/Office level. Below is list of the nine separate Centers and Offices maintaining records.

FDA Centers/Offices:

- Center for Biologics Evaluation and Research (CBER)
- Center for Devices and Radiological Health (CDRH)
- Center for Drug Evaluation and Research (CDER)
- Center for Food Safety and Applied Nutrition (CFSAN)
- Center for Veterinary Medicine (CVM)
- Center for Tobacco Products (CTP)
- National Center for Toxicological Research (NCTR)
- Office of the Commissioner (OC)



- Office of Regulatory Affairs (ORA).

2.6.3 FDA Records Management Accomplishments in 2009:

- Completion of records scheduling project:
 - Completed the records rescheduling project initiated in 2004 and updated FDA's records control schedules, including electronic information systems
 - Met the E-Government Act of 2002 and related OMB mandate to schedule electronic information systems by September 2009
 - Implemented new schedules as they are approved by the National Archives and Records Administration
- Schedules Approved by NARA and posted on the FDA Intranet:
 - Agency-wide and Office of the Commissioner (OC) records schedules (excluding Planning and Policy, User Fee Files, Emergency Operations Files, Web Records)
 - Center for Biologics Evaluation and Research (CBER) schedules
 - Center for Drug Evaluation and Research (CDER) schedules
 - Center for Devices and Radiological Health (CDRH) schedules
 - National Center for Toxicological Research (NCTR) schedules
 - Office of Regulatory Affairs (ORA) schedules
 - Center for Foods and Applied Nutrition (CFSAN) schedules
- Schedules at NARA for Final Approval:
 - Center for Veterinary Medicine (CVM)
 - Agency-wide Schedules: Planning and Policy, Emergency Operations Files, Web Records Schedules
- Records Management Briefing to High level Officials:
 - In addition to regular training activities for employees, provided briefings to the Commissioner and other Senior Officials.
- Special Projects:
 - Participated in the common Electronic Document Room (cEDR) Project, an enterprise electronic recordkeeping system which is compliant with DOD standard 5015.2. FDA is currently working on system requirements and taxonomy.
 - Reviewed records management plans in the beginning of the system development stage as part of the Enterprise Performance Life Cycle (EPLC) methodology of the Information Technology Governance process.
 - Completed and submitted the 1st Annual NARA and GAO Mandatory Self-Assessment.

2.6.4 FDA Future Records Management Initiatives:

- Records management training: post a 508 compliant records management training module on the Intranet; explore and implement other records management training venues for all employees.
- Improve Office of the Commissioner (OC) records management.
- Support the Vital Records Management Program
- New records control schedules: Develop and obtain approval of new records control schedules for the Center for Tobacco Products (CTP) as new records are identified;



facilitate speedy approval of the remaining SF 115s, “Request for Records Disposition Authority” at NARA. Upon approval, publish them on the Intranet.

2.7 Health Resources & Services Administration (HRSA)

Records Officer: Angela Tuscani

2.7.1 HRSA Business Description:

The Health Resources and Services Administration (HRSA), an agency of the U.S. Department of Health and Human Services, is the primary Federal agency for improving access to health care services for people who are uninsured, isolated or medically vulnerable. Comprising six bureaus, 13 offices and one center, HRSA provides leadership and financial support to health care providers in every state and U.S. territory. With an annual budget of \$7 billion, HRSA carries out its mission and goals through other entities, such as States, community-based organizations and academic institutions with are supported using grants and contracts.

HRSA grantees provide health care to uninsured people, people living with HIV/AIDS, and pregnant women, mothers and children. Also, they train health professionals and improve systems of care in rural communities. In addition, HRSA oversees organ, tissue and blood cell (bone marrow and cord blood) donation and vaccine injury compensation programs, and maintains databases that protect against health care malpractice and health care waste, fraud and abuse.

2.7.2 HRSA Records Officer Position:

The Records Management Program is located in the Office of Management/Division of Policy Review and Coordination. HRSA Records Management Officer (RMO) provides management and oversight of agency records policy and compliance and provides guidance and outreach to all HRSA Bureau and Offices. HRSA has 20 Records Liaisons within each Bureau and Office who work with the RMO to provide records management services for the respective system.

One FTE has been assigned to the Records Officer position. Below is HRSA’s organization chart showing 21 separate and unique Offices and Bureau that generate records.

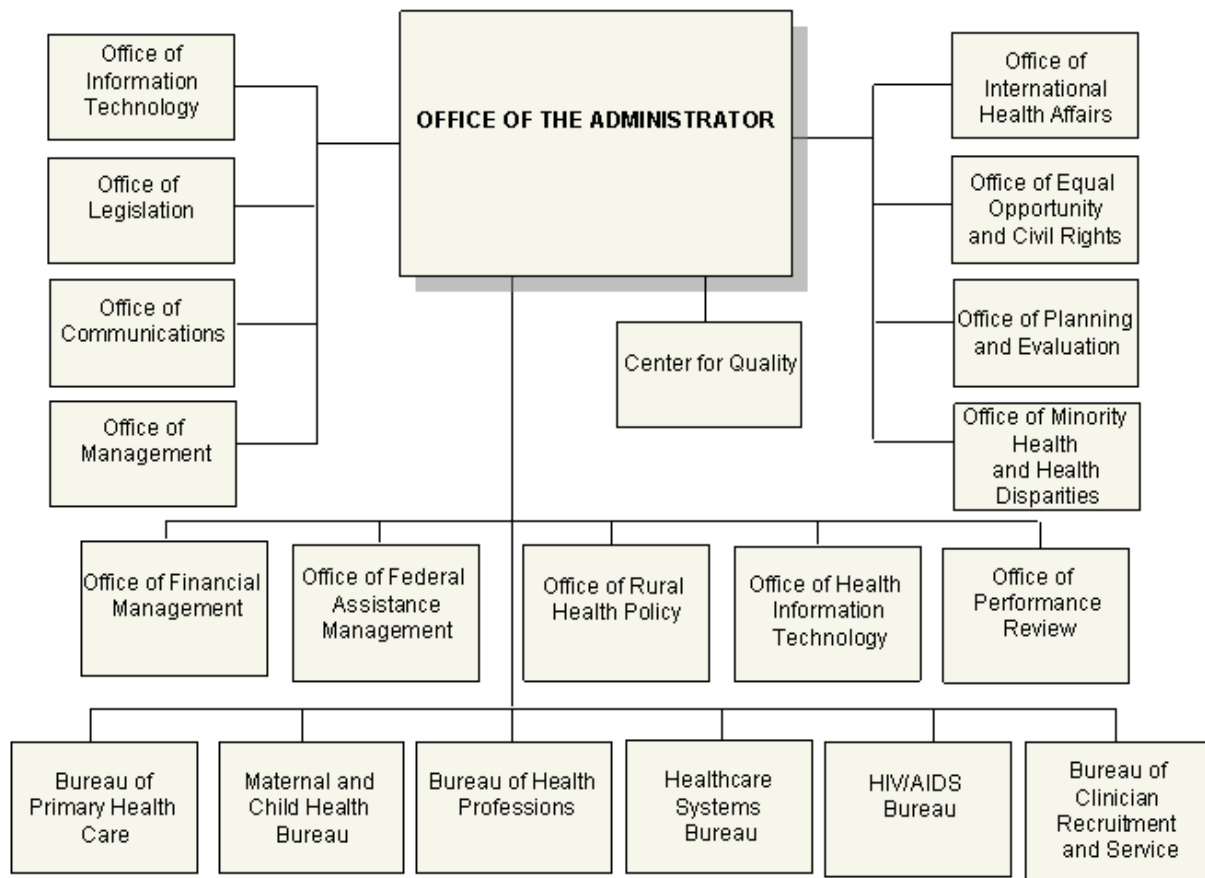


Figure 2 HRSA organization chart

2.7.3 HRSA Records Management Accomplishments in 2009:

- Oversaw the transfer of 507 boxes of records to the Washington National Records Center for storage. In addition, 171 boxes of records were disposed by the Washington National Records Center.
- Oversaw the transfer of permanent electronic records to NARA for the years of 2002-2003 on the SF 258.
- Represented HRSA at the HHS Records Officers OPDIV Meetings.
- Provide agency-wide records inventory training for HRSA Records Liaisons.
- Completed a HRSA wide inventory of all records.
- Completed the identification of Electronic Records and Systems for 2009.
- Completed the Records Management certification training classes through NARA.
- Completed and submitted the 1st Annual NARA and GAO Mandatory Self-Assessment

2.7.4 HRSA Future Records Management Initiatives:

- Complete the Scheduling of Electronic Record Systems.
- Complete the Records Management certification test through NARA.
- Supply all updates, bulletins and notices regarding records management to the appropriate staff within the Agency.
- Review HRSA policy and procedures and delegations to ensure compliance with records management disposition.



- Using an integrated project team, work is underway with the HRSA CIO to integrate records management requirements with security, privacy, enterprise architecture, capital planning, and the project management process

2.8 Indian Health Service (IHS)

Records Officer: Kelvin Vandever, Acting

2.8.1 IHS Business Description:

The Indian Health Service (IHS), an agency within the Department of Health and Human Services, is responsible for providing Federal health services to American Indians and Alaska Natives. The provision of health services to members of Federally-recognized Tribes grew out of the special government-to-government relationship between the Federal government and Indian tribes. This relationship, established in 1787, is based on Article I, Section 8 of the Constitution, and has been given form and substance by numerous treaties, laws, Supreme Court decisions, and Executive Orders. The IHS is the principal Federal health care provider and health advocate for Indian people, and its goal is to raise their health status to the highest possible level. The IHS provides a comprehensive health service delivery system for approximately 1.9 million American Indians and Alaska Natives who belong to 562 Federally recognized Tribes in 35 states.

2.8.2 IHS Records Officer Position:

The agency has a permanent full-time records management officer (RMO) position, but the position is currently vacant. The IHS is recruiting to fill the agency RMO vacancy and has named an Acting RMO while the recruitment process is completed.

Indian Health Manual, Part 5, Chapter 15, "Records Management Program," establishes policy, procedures, responsibilities, and other elements pertinent to the administration of the IHS Records Management Program. The IHS has 12 Area Offices throughout the United States and each Area Office has a designated Area Records Management Officer. Each Area RMO is responsible for overseeing the records management program at local health facilities known as Service Units and Health Centers. Additionally, each facility has designated a records management liaison. Below is the IHS organizational chart.



DEPARTMENT OF HEALTH AND HUMAN SERVICES

INDIAN HEALTH SERVICE

Approved: /Yvette Roubideaux/ Yvette Roubideaux Date: 08/17/2009

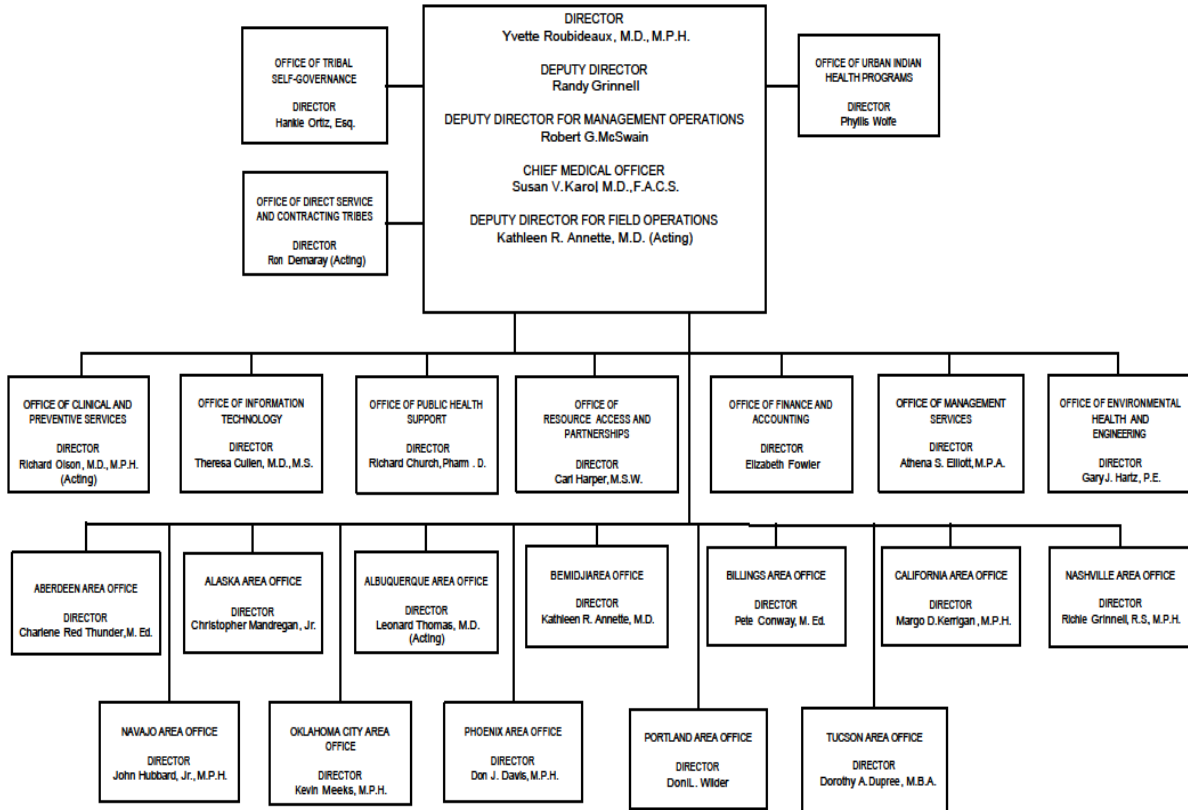


Figure 3 IHS organization chart

2.8.3 IHS Records Management Accomplishments in 2009:

In FY 2009, a review of the records management program was conducted IHS-wide. The review covered four records management areas.

- Policy and Procedure – are employees aware of and have access to records management policy and procedures.
• Records Management Network – are designations in place for the Area RMO and records management liaisons.
• Records Management Training – are records management training covering both paper and electronic records being provided to employees.
• Records Management Maintenance and Disposition Activity – are employees complying with records management policy regarding proper records maintenance and disposition.

IHS 2009 RM Self-Assessment:

- A self-assessment questionnaire was created and sent to all IHS locations. Based on review of the Area Offices and Headquarters completed self-assessment questionnaires, some records management non-material weaknesses and challenges were identified:



- The lack of records management training is the most identified non-material weakness. For the IHS to provide for an efficient, economical, and effective control over the creation, organization, maintenance, use, and the ultimate disposition of all IHS records in all physical formats, the IHS must provide records management training to agency employees.
- Non-submission of file plans is the second non-material weakness identified. File plans provides a descriptive list of each record series or system maintained by IHS staff. File plans are to be reviewed on a fiscal year basis and amended to ensure all files are accounted for.
- Non-submission of records holding reports is the third non-material weakness identified. During the annual review of file plans, an inventory of records on hand is taken and this is reported on the records holding reports. The report includes records that have been transferred to another entity and records that were disposed of during the reporting cycle.
- A greater percentage of staff work time needs to be devoted to records management duties and responsibilities. Strong management support at all echelons is necessary for the IHS Records Management Program to succeed.
- File plans need to be developed for each file manager. All IHS file managers are required to create one file plan covering their program records and one file plan covering their administrative records. Once file plans are in place, they need to be updated annually.
- The proliferation of electronic records is becoming an increasingly burdensome and expensive challenge. Agency and Federal electronic records management regulatory compliance must be promoted and enforced to ensure that electronic mail and electronic documents are being managed, preserved and destroyed in a logical, efficient and cost effective manner. Training and subsequent enforcement of electronic records policy and procedure should be made mandatory to reduce proliferation and promote organization and proper management.
- For Federal Records Management Compliance, it is imperative that all of the IHS records management non-material weaknesses and challenges be addressed and corrected at both the Area and Headquarters levels.

As part of the E-Government Act of 2002 records scheduling requirements, IHS submitted a draft records disposition schedule for its electronic health record (EHR) to the National Archives and Records Administration for review and approval.

IHS completed and submitted the 1st Annual NARA and GAO Mandatory Self-Assessment.

2.8.4 IHS Future Records Management Initiatives:

- Ensure records management training is made available to all employees. In FY 2010, IHS will be exploring the use of Webinar technology to provide records training and briefings to employees.
- Ensure the Area RMOs and facility records management liaisons are properly training in records management so they provide correct information and expert technical assistance.
- Complete the submission of records disposition schedules for unscheduled electronic systems per the E-Government Act requirements and continue to schedule unscheduled electronic systems as new ones are developed.
- Update all records disposition schedules for IHS.



- Update the IHS records management policy to promote and enforce electronic mail and electronic documents are being managed, preserved and destroyed in accordance with Federal electronic records management regulations

2.9 National Institutes of Health (NIH)

Records Officer: Katy Perry

2.9.1 NIH Business Description:

The National Institutes of Health (NIH), a part of the U.S. Department of Health and Human Services, is the primary Federal agency for conducting and supporting medical research. Helping to lead the way toward important medical discoveries that improve people's health and save lives, NIH scientists investigate ways to prevent disease as well as identify the causes, treatments, and even cures for common and rare diseases. Composed of 27 Institutes and Centers (IC), the NIH provides leadership and financial support to researchers in every state and throughout the world. The following is a recent organizational chart.

NATIONAL INSTITUTES OF HEALTH			
Office of the Director Program Office: Division of Program Coordination, Planning, and Strategic Initiatives		Office of the Director Staff Offices: Office of Extramural Research Office of Intramural Research Office of Management/Chief Financial Officer Office of Science Policy Office of Communications and Public Liaison Office of Equal Opportunity and Diversity Management Office of Legislative Policy and Analysis Executive Office Office of the Ombudsman/Ctr. for Cooperative Resolution NIH Ethics Office Office of the Chief Information Officer	
National Cancer Institute	National Eye Institute	National Heart, Lung, and Blood Institute	National Human Genome Research Institute
National Institute on Aging	National Institute on Alcohol Abuse and Alcoholism	National Institute of Allergy and Infectious Diseases	National Institute of Arthritis and Musculoskeletal and Skin Diseases
National Institute of Biomedical Imaging and Bioengineering	National Institute of Child Health and Human Development	National Institute on Deafness and Other Communication Disorders	National Institute of Dental and Craniofacial Research
National Institute of Diabetes and Digestive and Kidney Diseases	National Institute on Drug Abuse	National Institute of Environmental Health Sciences	National Institute of General Medical Sciences
National Institute of Mental Health	National Institute of Neurological Disorders and Stroke	National Institute of Nursing Research	National Library of Medicine
Fogarty International Center	National Center for Complementary and Alternative Medicine	National Center on Minority Health and Health Disparities	National Center for Research Resources
Clinical Center	Center for Information Technology	Center for Scientific Review	

Figure 4 NIH organization chart



2.9.2 NIH Records Officer Position:

The NIH Records Management Officer (RMO) and staff provide management and oversight of records policy, compliance, guidance and outreach to the NIH Office of the Director (OD) and 27 IC RM Liaisons. NIH currently has 52 FTE part-time liaisons residing in the NIH OD and ICs who partner with the NIH RMO. The NIH RMO issues updated guidance, instructions and standard procedures for use in their respective organizations to ensure consistency and compliance throughout NIH.

The NIH Records Management Program is responsible for the following records management functions:

- Identify and establish standards/guidelines for documenting and maintaining records transactions with WNRC and other commercial storage facilities
- Maintain a reliable and usable NIH-wide record keeping system with an up-to-date listing of all records stored/awaiting disposal at the Washington National Records Center (WRNC), those sent permanently to the National Archives and Records Administration (NARA) for historical archiving and records being stored at commercial storage facilities
- Evaluate and measure compliance with HHS and Federal Records guidelines and regulations
- Provide Records Management education, outreach and training
- Ensure that Records Management issues are addressed as part of the following activities:
 - Strategic Planning
 - Business Process Design
 - Capital Planning and Investment Control
 - Solutions Development Lifecycle
 - Enterprise Architecture
 - Information Security
 - Risk Management Assessments
 - Continuity of Operations Plans (COOP)

Each NIH OD and IC Records Liaison at the NIH is responsible for providing information to the NIH Records Management Program in support of the above functions in their specific organizational areas

2.9.3 NIH Records Management Accomplishments in 2009:

- Successfully managed daily NIH Records Program operations and customer service requests
- Developed the NIH Records Management Business Processes List for the new HHS Integrated Project with the HHS Integrated Project Team (IPT)
- Assisted the HHS Records Management Council in developing new Records Management elements for SES Performance Plans:
 - Provided basic Records Management training via a full-day onsite training with NARA and the NIH RMO
 - Provided free on-line Records training by setting up the NARA online training “Records Management for Everyone” with the NIH Learning Center (LMS) for all NIH employees and tracked participation



- Performed a formal Risk Assessment on the NIH Records Program to identify potential risks, formulated approaches to mitigate all identified risks and set parameters to avoid future risks
- Continued to develop clear and comprehensive policy documents for use by NIH staff to assist with records management (NIH Manual Chapter 1743 – NIH Records Schedule: Keeping and Destroying Records)
- Scheduled 398 electronic systems with records in accordance with NARA Bulletin 2008-03: Scheduling existing electronic records within September 30, 2009 deadline
- Identified all commercial facilities being used by NIH for the storage of records; facilitated completion of NARA compliancy check list by the facility managers; removed all records from non-compliant facilities; developed inventories for records being stored at compliant facilities; and sent a full tracking report, and completed check list and waiver request to the NARA point of contact by the September 30, 2009 deadline in accordance with NARA Bulletin 2008-06: Records Storage Facility Standards
- Managed and tracked expenditures by the NIH OD and ICs for the FY09 Washington National Records Center (WNRC) Storage and Service Fees
- Completed the online "NARA Records Management: Mandatory Self-Assessment" prior to the October 16, 2009 deadline - the 1st Annual NARA and GAO Mandatory Self-Assessment.
- Initiated development of a new collaborative Records Management SharePoint site for the NIH Records Community that will house related general information, policies, practices, tools, templates, meeting and event information, and announcements
- Continued participation and oversight of the NIH Vital Records Program in compliance with all related Federal mandates: Proper Management of Vital Records - 44 U.S.C. 3101, Management of Vital Records Program – 36 CFR 1236, Emergency Preparedness - Executive Order 12656 - Part 2, and Federal Preparedness Circular 65. NIH RMO continued participating with the NIH COOP Working Group to perform the following activities:
 - Oversee NIH wide Vital Records Inventory
 - Obtain copies of all Vital Records on the NIH Vital Records Inventory
 - Facilitate the storage of Vital Records copies on a secure information system
 - Continue to send back-up Vital Records to a Federal Records Center off the east coast to meet the COOP “Emergency Level One” requirement
- Participated as NIH representatives at the HHS Records Officers OPDIV and HHS Records Management Council meetings, and participated in the NARA BRIDGE meetings.

2.9.4 NIH Future Records Management Initiatives:

- Continue to successfully administer the NIH Records Management Program, leading daily operations and satisfying customer service requests
- Continue to develop clear and comprehensive records management policies for the NIH Manual Chapter 1743 – Keeping and Destroying Records; including updating the chapter to be media neutral
- Continue to schedule all NIH electronic systems with records, including web applications
 - Incorporate electronic scheduling procedures into the NIH Capital Planning and Investment Control (CPIC) process
- Continue to work with NIH community to emphasize the use of NARA-compliant commercial storage facilities for housing agency records and removing records from non-compliant facilities



- Continue to conduct Vital Records annual reviews and collect copies of all identified Vital Records to maintain compliance with the NIH Manual Chapter 1744- Vital Records and related Federal mandates
- Continue to work with HHS on the new HHS IPT
- Continue to develop the new Records Management SharePoint site for the NIH Records Community
- Continue annual education and outreach across the agency
- Start quarterly OD and IC Record Liaison Meetings
- To supplement the current, NARA-approved NIH file plan (NIH Manual Chapter 1743 – NIH Records Schedule: Keeping and Destroying Records) by developing individual file plans and base line inventories for all NIH offices
- Continue managing and tracking expenditures by the NIH OD and ICs for the FY10 Washington National Records Center (WNRC) Storage and Service Fees
- Register and begin using the new NARA ARCIS Database for all NIH WRNC transactions

2.10 Offices of the Secretary (OS Staff Divisions - STAFFDIVs)

Records Officer: Elaine Pankey

2.10.1 OS Business Description:

The Department of Health and Human Services (HHS) is the United States Government's principal agency for protecting the health of all Americans and providing essential human services. The Department includes more than 300 programs, covering a wide spectrum of tasks and services, including research, public health, food and drug safety, grants and other funding, health insurance, and many others. The Office of the Secretary (OS) has 17 support components, referred to as OS Staff Divisions or STAFFDIVS.

2.10.2 OS Records Officer Position:

The function of the OS Records Officer resides within the Office of the Assistant Secretary for Administration (ASA), Office of the Chief Information Officer (OCIO), Office of Resources Management (ORM). The list below establishes as of November 2009 an informal (e.g., not in position descriptions and/or performance elements) appointment of the records managers within each of the 17 Staff Divisions.



Department of Health and Human Services
Office of the Secretary Records Management Program

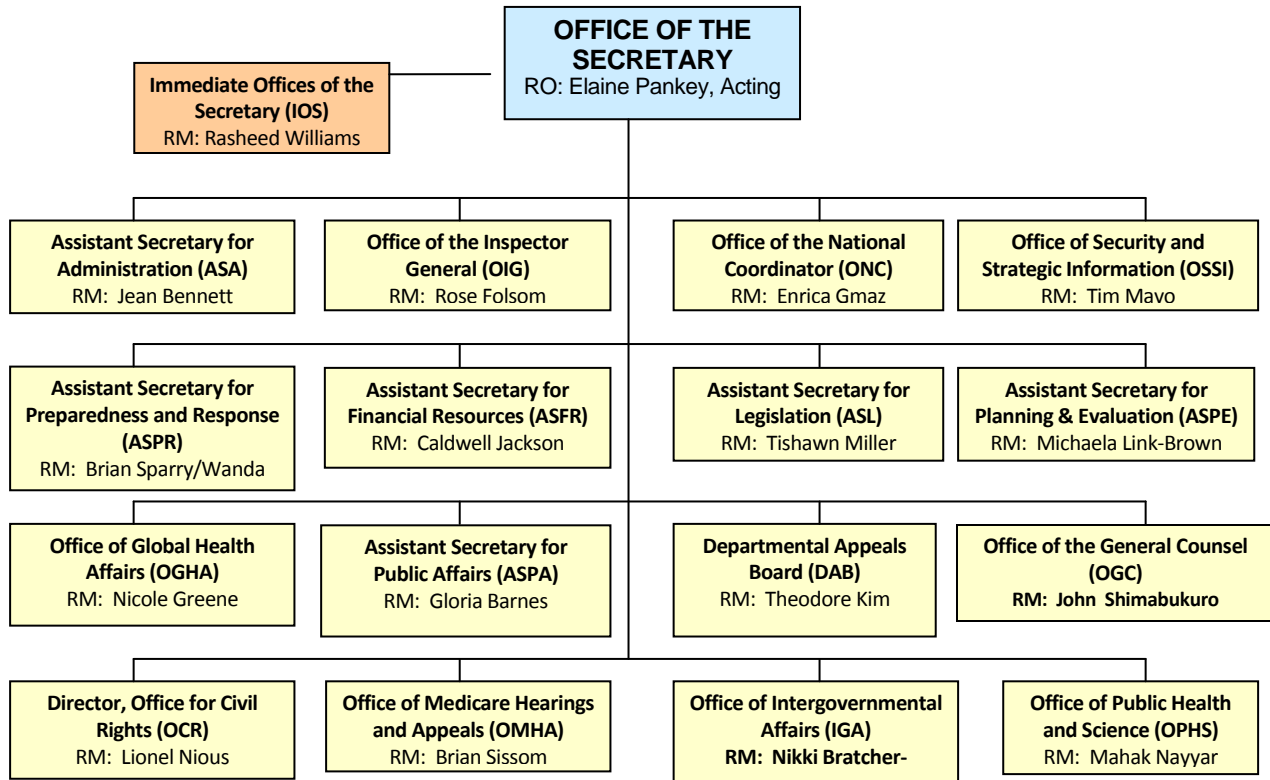


Table 2 OS Records Managers

2.10.3 OS Records Management Accomplishments in 2009:

- File Plan Training (classroom and ad hoc): approximately 200 ad hoc and 26 formal office-specific training sessions, including but not limited to 96 office visits at and telephone calls with PSC
• Validated 140 out of approximately 300 file plans in 2009; validation is ongoing in 2010
• Records Disposition
o completed the close out of records from the previous administration in January 2009
o assisted the Office of Recovery Act Coordination with the establishment of draft files plan
o shipped 525 boxes of approved records to the Washington National Records Center (WNRC) for storage which consisted of inventorying all boxes, assisting with preparation of the appropriate paperwork and having boxes organized and stacked on pallets according to the WNRC specifications
o retrieved approximately 100 boxes back from storage at the WNRC for FOIA requests
o provided NARA Archives and Records Centers Information System (ARCIS) access to all STAFFDIV records managers
o prepared/provided OSEO with Standard Operating Procedures for retrieving records from the Federal Records Centers for FOIA requests
o provided daily interpretation of records schedule disposition instructions



- in conjunction with the ASRT records manager prepared the ASRT files plan prior to reorganization
- Completed initial draft of OS Records Manual prior to OS reorganization: created an electronic word processing document, mapped NARA-approved OS records schedules and started mapping General Records Schedule (GRS) authorities for the disposition of routine housekeeping records
- The RO in conjunction with the Department RO drafted and submitted to NARA two out of five OS e-system records schedules; systems still to be submitted to NARA on records schedules are ASRT Tracking Accountability in Government Grants System (TAGGS), ASPR/BARDA Project Management system, and ASPR Medical Counter Measures web-based system
- Conducted RM training, including e-systems, PMAP for SES, and Basic Records Management
- Completed and submitted the 1st Annual NARA and GAO Mandatory Self-Assessment
- In the 4th quarter of FY 2009 and the 1st quarter of FY 2010, the OSEO was assigned to oversee the creation and validation of OS file plans; by the time of this annual report, due to OS reorganization, the activity was transferred back to OCIO
- In the 4th Quarter of FY2009 and the 1st Quarter of FY 2010, the OSEO held OS Records Management Council Meetings on 9/21/2009 and 11/03/2009, and a Basic Records Management training session for OS Records Managers and Records Liaisons

2.10.4 OS CY 2010 Records Management Initiatives:

- Complete OS e-systems records schedules
- Complete initial draft of OS Records Manual: complete mapping to General Records Schedules (GRS) where appropriate; complete identification of records series that are not scheduled with NARA; prepare a spreadsheet of unscheduled items that includes file code numbers, series name, series description and proposed disposition instructions; identify groupings of record series (file codes) based on similar business processes.
- Begin updating the OS Records Manual: Work with each of the 17 STAFFDIVs to develop records schedules for all program records and submit to NARA through the HHS Department Records Officer for approval
- Work with HR to establish records managers in each STAFFDIV
- Communicate HHS RO policies, procedures, instructions, and information from HHS, NARA and OMB
- Maintain the recently established STAFFDIV Records Management Council
- Provide basic records management training to the STAFFDIVs
- Validate remaining STAFFDIV file plans
- Establish and maintain in-house records destruction tracking procedures
- Complete NARA records management certification program.
- Assist Department RO in establishing and maintaining a records management training program



2.11 Substance Abuse and Mental Health Services Administration (SAMHSA)

Records Officer: Lynne Klein

2.11.1 SAMHSA Business Description:

The Substance Abuse and Mental Health Services Administration (SAMHSA) has established a clear vision for its work -- a life in the community for everyone. To realize this vision, the Agency has sharply focused its mission on building resilience and facilitating recovery for people with or at risk for mental or substance use disorders. SAMHSA is gearing all of its resources -- programs, policies and grants -- toward that outcome.

2.11.2 SAMHSA Records Officer Position:

The Director of the Division of Management Systems (DMS), Jeanellen Kallevang, in the Office of Program Services is the records officer for SAMHSA. There is no dedicated FTE assigned to the records officer role. In addition, another employee in DMS, Lynne Klein, serves part-time as the records liaison, providing day-to-day operational support of records management. The record group number for SAMHSA is 511. There are seven work centers. Below is an organization chart showing the seven separate and unique work centers generating records.

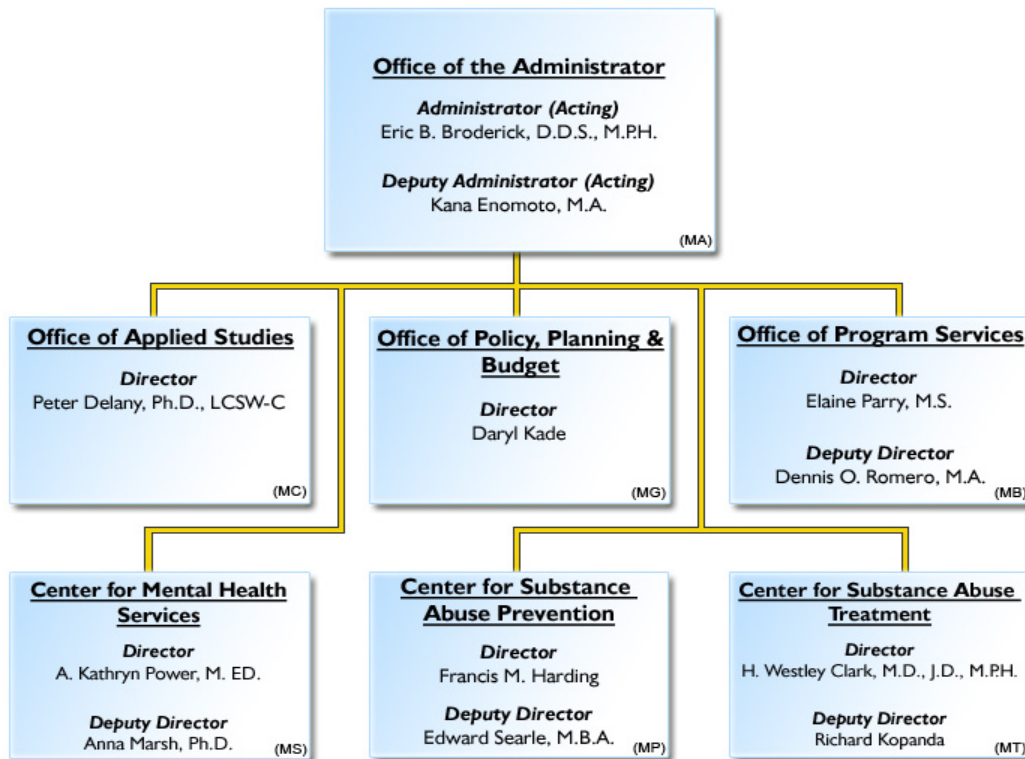


Figure 5 SAMHSA organization chart

2.11.3 SAMHSA Records Management Accomplishments in 2009:

- SAMHSA has promoted “Records Management.” There are record program objectives posted on the SAMHSA Intranet website.
- The SAMHSA Records Control Schedule (B311), originally dated 1976, was updated in 2009 to electronic format, sent to the Department and posted on the SAMHSA Intranet.



- Storage and dissemination of records were controlled under the specified Records Control Schedules, Privacy Act guidance and IT Security guidance.
- SAMHSA provided information to the Department Enterprise Architect Team.
- A review of the SAMHSA Administrator's permanent records for calendar years (CY) 2000 through 2008 was conducted and it was determined that adequate controls are in place to safeguard resources, promote effective and efficient operations, and ensure compliance with applicable laws and regulations.
- Completed electronic systems schedules and submitted to NARA
- Completed and submitted the 1st Annual NARA and GAO Mandatory Self-Assessment.

2.11.4 SAMHSA Future Records Management Initiatives:

- SAMHSA will continue to update the Records Control Schedule. In particular, the Records Liaison will continue to work with the Enterprise Architect, the Department and NARA to complete the electronic records scheduling and on transferring the hardcopy of the B311 to a complete electronic version.
- SAMHSA will brief our new Administrator, who is expected to be appointed in January 2010, on SAMHSA's records, how SAMHSA's records are managed and the importance of appropriately managing records under her immediate control.
- SAMHSA will provide training to SAMHSA staff on their records management responsibilities, including identification of Federal records, in all formats and media.
- SAMHSA will conduct a formal internal evaluation of SAMHSA's records management practices to measure the effectiveness of records management programs and practices, and to ensure that they comply with NARA regulations.

2.12 HHS Department Records Officer Initiatives:

In addition to continuing the leadership of the RMC and the RM IPT, the Department Records Officer will:

- Update and establish department-wide records management program policy
- Establish and maintain a records management program that includes such elements as
 - Defined roles and responsibilities
 - Articulated policies, procedures and guidelines
 - Tracking of storage costs and use of storage facilities
 - Department-wide education and training that complements and supplements existing NARA and other records management training, consistent with Department-wide mission, goals, and management processes
 - Consistency across records management operations
 - In accordance with 36 C.F.R. Subchapter B, act as the HHS liaison with the National Archives and Records Administration (NARA) as the primary point of contact for Department-wide records issues
 - Coordinate OPDIV comments on regulations and guidance pertaining to records management
 - Receive for review and signature all OPDIV records schedule (SF115) for records of all media and submit to and coordinate with NARA for appraisal and approval



3 Summary

In 2009, the Department of Health and Human Services (HHS) Records Management Program (RPM), consisting of the Department Records Officer and the Records Officers of all of the HHS Operating Divisions, met some major Federal initiatives, such as:

- 97% compliance with E-Government Act of 2002 – development and submission of HHS E-Systems inventory and E-Systems records schedules
- 100% compliance with the 1st Annual NARA and GAO Records Management Assessment
- Identification of HHS records management gaps and the prioritization of addressing the gaps in the HHS RM Integrated Project Plan
- RM language in HHS Continuity of Operations (COOP) Policy and Procedures
- Litigation hold policy and procedures (draft)
- 100% of the OPDIVs reported to NARA in accordance with 36 CFR 1234, NARA Facilities Reporting Requirements when using non-NARA records storage facilities, and are negotiating with NARA on the certification of facilities
- RM language in multiple HHS OCIO policies, and
- Significant records inventorying, scheduling, file plan validations, and records management training

As described in the 2007 and the 2008 HHS Annual Records Management Program reports, there remain ongoing issues with RM oversight and support; written and verbal (interpreted) guidance; the management of Federal information in electronic form; and the ongoing lack of awareness of the need for proper information creation and maintenance in light of business process documentation, FOIA, transparency, and legal discovery. The development of a cohesive, coordinated, and collaborative Department-wide records management program, will provide the necessary infrastructure and support to business process documentation FOIA, transparency, and legal discovery, and for the transfer to and the preservation of the historical records by the National Archives.



Appendix A RECORDS MANAGEMENT LAWS, REGULATIONS, GUIDANCE, AND RELATED INFORMATION

1. [E-Government Act of 2002](#)
2. Federal Information Security Management Act (FISMA) of 2002 – 44 U.S.C. § 3541, Title III of the E-Government Act of 2002: requires, among other things, the maintenance of an inventory of electronic systems.
3. [44 U.S.C. Chapter 21 - National Archives and Records Administration](#)
4. [44 U.S.C. Chapter 29 - Records Management by the Archivist of the United States and by the Administrator of General Services](#)
5. [44 U.S.C. Chapter 31 - Records Management by Federal Agencies](#)
(Federal Records Act)
6. [44 U.S.C. Chapter 33 - Disposal of Records](#)
7. [5 U.S.C. Chapter 5, Subchapter II - Administrative Procedure](#)
 - a. [§ 552. Public information; agency rules, opinions, orders, records, and proceedings](#)
(Freedom of Information Act, as amended)
 - b. [§ 552a. Records maintained on individuals](#)
(Privacy Act of 1974, as amended)
 - c. [§ 553. Rule making](#)
(Administrative Procedure Act)
8. [18 U.S.C. Chapter 101 - Records and Reports](#)
 - a. [§ 2071. Concealment, removal, or mutilation generally](#)
9. [18 U.S.C. Chapter 121 - Stored Wire and Electronic Communications and Transactional Records Access](#)
(Electronic Communications Privacy Act of 1986)
10. [31 U.S.C. Chapter 11 - The Budget and Fiscal, Budget, and Program Information](#)
(Budget and Accounting Procedures Act of 1950)
11. [40 U.S.C. Subtitle III - Information Technology Management](#)
(Clinger-Cohen Act of 1996, also known as the Information Technology Management Reform Act of 1996)
12. [44 U.S.C. Chapter 35 - Coordination of Federal Information Policy](#)
(Paperwork Reduction Act of 1980, as amended; Paperwork Reduction Reauthorization Act of 1995; and Government Paperwork Elimination Act)
13. [36 CFR Subchapter B](#)
 - a. [36 C.F.R. Part 1220](#) – Federal Records, General
 - b. [36 C.F.R. Part 1222](#) – Creation and Maintenance of Records
 - c. [36 C.F.R. Part 1223](#) – Maintaining Vital Records
 - d. [36 C.F.R. Part 1224](#) – Records Disposition Programs
 - e. [36 C.F.R. Part 1225](#) – Scheduling Records
 - f. [36 C.F.R. Part 1226](#) – Implementing Disposition
 - g. [36 C.F.R. Part 1227](#) – General Records Schedules
 - h. [36 C.F.R. Part 1228](#) – Loan of Permanent and Unscheduled Records
 - i. [36 C.F.R. Part 1229](#) – Emergency Authorization to Destroy Records
 - j. [36 C.F.R. Part 1230](#) – Unlawful or Accidental Removal, Defacing, Alteration, or Destruction of Records
 - k. [36 C.F.R. Part 1231](#) – Transfer of Records from the Custody of One Executive Agency to Another
 - l. [36 C.F.R. Part 1232](#) – Transfer of Records to Records Storage Facilities



- m. [36 C.F.R. Part 1233](#) – Transfer, use, and Disposition of Records in a NARA Federal Records Center
 - n. [36 C.F.R. Part 1234](#) – Facility Standards for Records
 - o. [36 C.F.R. Part 1235](#) – Transfer of Records to the National Archives of the United States
 - p. [36 C.F.R. Part 1236](#) – Electronic Records Management
 - q. [36 C.F.R. Part 1237](#) – Audiovisual, Cartographic, and Related Records Management
 - r. [36 C.F.R. Part 1238](#) – Microform Records Management
 - s. [36 C.F.R. Part 1239](#) – Program Assistance and Inspections
14. HHS-OCIO-2007-0004.001, Policy for Records Management – The overarching policy for records management implementation within the Department of Health and Human Services (HHS).
15. HHS-OCIO-2007-0002.001C, Department of Health and Human Services Records Management Council (RMC) Charter, paragraph X: “An annual evaluation reporting the strengths and weaknesses of the HHS Records Management Program compared to the standards established by the National Archives and Records Administration (NARA) (see appendix i) is also prepared by the Chair, with review and comment by the Council. This annual report is due on January 31st of each year and will report the status of the program as of December 31st of the previous year.”
16. [OMB Circular No. A-123 - Management's Responsibility for Internal Control](#)
17. [OMB Circular No. A-130 - Management of Federal Information Resources](#)
18. [Numerous OMB Memoranda related to Information Management](#)